Cardiovascular Risks Need Better Management In HIV Population

May 20, 2014

High blood pressure and high cholesterol are each resistant to traditional forms of treatment among the HIV population, suggesting the need for better ways to reduce such cardiovascular disease risk factors. Publishing their findings in the Journal of Acquired Immune Deficiency Syndromes, researchers studied 4,278 New Yorkers with HIV, ranging between ages 20 and 87.

Thirty-five percent of the participants had high LDL ("bad") cholesterol, and 43 percent had high blood pressure. Ninety percent of the participants with high cholesterol were receiving treatment for that condition, yet just three-quarters of those receiving such treatment had attained their target cholesterol levels. Similarly, 75 percent of those with high blood pressure were receiving treatment for that condition, yet just 57 percent of those undergoing such treatment achieved their goal blood pressure levels. African-American men had the worst control of blood pressure levels, with just 39 percent reaching their target levels.

"Our study results suggest controlling the two main heart disease risk factors of high cholesterol and blood pressure is becoming more and more important and a benchmark in how we can better care for our HIV patients," Merle Myerson, MD, lead study author who is director of the cardiology section at The Spencer Cox Center for Health at Mount Sinai St. Luke's and Mount Sinai Roosevelt hospitals, said in a release. "Our findings highlight the need for more specific medical guidelines to aid in the prevention of cardiovascular disease in patients living with HIV and show that a comprehensive HIV clinic, which includes cardiovascular specialists, may be an important new standard of care."

To read the release, click here.

© 2026 Smart + Strong All Rights Reserved.

http://beta.docker.poz.com/article/cholesterol-hypertension-25633-7764