Concerns: ARVs & Inflammation

A recent study links simplified HIV treatment with a greater risk of inflammation.

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Regimens that contain just two antiretrovirals may not be enough to prevent the detrimental consequences of chronic HIV infection, even though they suppress the virus as well as three-drug combos. Spanish researchers evaluated long-term outcomes among 751 people with viral suppression who switched from a triple to a dual combination or to a boosted protease inhibitor alone. The risk of having a detectable viral load did not differ during the first two years after treatment simplification. But after two years, those who switched to monotherapy had a threefold higher risk of treatment failure. People who simplified treatment had a higher risk of serious non-AIDS health events or death, but this could have been due to chance. What's more, those who switched to dual therapy or monotherapy had increased levels of biomarkers of inflammation (interleukin-6 and C-reactive protein) and blood clotting (D-dimer). Persistent inflammation in people with HIV has been linked to serious health problems, including heart, kidney and liver disease.

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