HIV Is Associated With Increased Fracture Risk at Earlier Age Among Men

A recent study stresses the importance of osteoporosis screening for HIV-positive men older than 50.

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As they age, men who have HIV experience an increased fracture risk a decade earlier than HIV-negative men, aidsmap reports.

Publishing their findings in the journal AIDS, researchers studied self-reported fracture data from the ongoing Multicenter AIDS Cohort Study (MACS) cohort study on 1,221 men with HIV and 1,408 without the virus. The two groups were well matched for risk factors traditionally associated with fracture.

The HIV-positive men had a median CD4 count of 490. Two thirds of them were taking Viread (tenofovir disoproxil fumarate, or TDF), which is associated with bone loss, for a median period of just over three years. Forty-four percent reported a history of taking protease inhibitors, for a median 4.5 years.

During a cumulative 34,000 years of follow-up, 379 of the men experienced fractures, of whom 182 were HIV positive and 197 were HIV negative. This translated to an overall fracture rate of 11.2 fractures per 1,000 cumulative years of follow-up as well as a respective 12.8 and 10 fractures per 1,000 years among the HIV-positive and HIV-negative men.

The fracture rate increased with age among both the HIV-positive and HIV-negative men. For those ages 50 to 59, the rate of all types of fractures was 2.06-fold higher and the rate of fractures related to fragility was 1.49-fold higher among the HIV-positive men compared with the HIV-negative men.

After adjusting the data for various factors, the study authors found that high blood pressure increased the rate of all fractures by 32 percent.

The researchers concluded that their research highlighted “the importance of osteoporosis screening for HIV-infected men above the age of 50.”

To read the aidsmap article, click here.

To read the study abstract, click here.

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