HIV Is Linked to a Doubled Heart Disease Risk

A new analysis of a massive amount of global data reached a conclusion similar to that of previous research.

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Living with HIV is associated with a doubled risk of developing cardiovascular disease (CVD). Additionally, as people around the world live longer with the virus thanks to antiretroviral (ARV) treatment, their health is increasingly compromised by CVD. This is according to an analysis of a massive pool of data spanning a 15-year period.

Previous studies have reached similar findings about HIV's ties to a raised CVD risk.

REPRIEVE, a major trial currently under way, is testing whether taking a statin medication mitigates CVD risk among a large population of people living with HIV who would not otherwise be indicated to take such a drug. Results are expected in 2020.

Publishing their findings in the journal Circulation, researchers conducted a systematic review across five databases that included data from longitudinal studies of CVD conducted around the world through August 2016. Ultimately, they analyzed data from 80 studies.

The study authors sought to calculate the CVD-associated disability-adjusted life years (DALYs) among the HIV population—a composite measure of years of life lost and years of healthy life lost. For this assessment, they examined data from 1990 to 2015 that came from 154 of the 193 United Nations member states.

Ultimately, the investigators analyzed data from 793,635 people with HIV, who contributed a cumulative 3.5 million years of follow-up.

For each 10,000 cumulative years of follow-up, 61.8 people were diagnosed with CVD. This diagnosis rate was 2.16-fold greater than that of HIV-negative individuals.

The proportion of all CVD worldwide, among those with and without HIV, that the study authors estimated was attributable to the virus increased from 0.36 percent in 1990 to 0.92 percent in 2015. During the same period, the annual DALYs lost due to HIV-associated CVD increased from 740,000 to 2.57 million. There was considerable regional variation in the DALY figures, with most

lost in sub-Saharan African and the Asia-Pacific regions. The nations that experienced the greatest HIV-driven impact on all CVD cases as well as the most DALYs lost were Swaziland, Botswana and Lesotho.

To read a press release about the study, click here.

To read the study abstract, click here.

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