Multivitamins: More Not Better When HIV Meds are Being Used

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More is not better when it comes to multivitamins combined with antiretroviral therapy, according to new data published in the Journal of the American Medical Association (JAMA).

The results come from a Tanzanian study involving nearly 3,500 HIV-positive people starting antiretroviral therapy for the first time who were randomized to take either recommended daily allowance (standard-dose) multivitamins or high-dose multivitamins containing substantially higher concentrations of vitamins B, C and E.

Study volunteers receiving high-dose multivitamins were no less likely to progress to AIDS or die from any cause; CD4 cell gains and rates of undetectable viral loads were also no more pronounced among those receiving high-dose multivitamins. In fact, there was some evidence that severely malnourished individuals were more likely to die if they were receiving high-dose multivitamins. Levels of liver enzymes were also more likely to become seriously elevated among those receiving high-dose multivitamins, compared with standard-dose multivitamins, a finding that prompted the researchers to discontinue the study prematurely.

Though previous studies concluded that high-dose multivitamins may help slow HIV disease progression and appeared safe among individuals unable to secure access to antiretroviral therapy, the researchers conclude that these new results underscore the need for adherence to standard-dose multivitamin recommendations when antiretroviral therapy is being used.

To read the JAMA report (paid subscription required), click here.

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