As the HIV Population Ages, Other Health Conditions Will Mount

Researchers sought to model the future rates of conditions such as chronic kidney disease and high blood pressure among people with HIV.

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Among people with HIV, rates of other health conditions are expected to rise during the next decade as they age.

Research has long indicated that even people with well-treated HIV have a higher risk of multiple diseases associated with aging.

Seeking to project rates of such health conditions among men who have sex with men (MSM) living with HIV, investigators with the PEARL study used data on this population drawn from the NA-ACCORD cohort. They specifically projected rates of chronic kidney disease, type 2 diabetes, high blood pressure and high blood lipids.

Findings were presented at the International AIDS Conference (AIDS 2020), which was held virtually earlier this month.

The study is limited by the fact that the model did not project rates of cardiovascular disease, cancer, end-stage liver disease or mental health conditions such as depression and anxiety—all of which affect people with HIV disproportionately.

In a previous modeling study, the investigators projected that the population of MSM taking antiretroviral treatment will grow from about 211,000 people in 2010 to 594,000 in 2030. During that period, the proportion of such men on HIV treatment who are 60 years old or older will increase from 6.7% in 2010 to 29.7% in 2030.

In the new analysis, the study authors broke down their projections by race. Between 2010 and 2030, they projected, the prevalence of chronic kidney disease among whites will increase from below 10% to above 30%. The prevalence among Latinos and Blacks would also start at below 10% and increase much less steeply than among whites.

By 2030, the investigators projected, diabetes will increase among all racial groups but most steeply among Blacks. Meanwhile, high blood pressure will decrease or level off among all racial

groups. High blood lipids will decrease among Blacks and Latinos while increasing among whites.

Among people 60 years old and older, chronic kidney disease is projected to increase from a 7% prevalence in 2010 to a 44% prevalence in 2030. In this age cohort, diabetes prevalence is also projected to rise. However, high blood pressure and high blood lipids are projected to stabilize—perhaps, the study authors believe, because newer antiretroviral treatments are less toxic than older ones.

To view the conference slides, click here.

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