People With HIV Are Diagnosed With Cancer at More Advanced Stages

They also have a higher rate of death from cancer after receiving a diagnosis.

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Among those who are diagnosed with cancer, people with HIV are more likely than those who do not have the virus to receive their cancer diagnosis at a later stage and to die of the malignancy.

Publishing their findings in the journal Cancer, Anna Coghill, PhD, MPH, of Moffitt Cancer Center in Tampa, and colleagues analyzed data from the National Cancer Data Base from 2004 to 2014 and looked at the stage of disease upon diagnosis as well as the rate of cancer-related death following diagnosis. The analysis included 14,453 people with HIV and 6.4 million HIV-negative individuals who were diagnosed with cancers of the oral cavity, stomach, colon and rectum, anus, liver, pancreas, lung, female breast, cervix, prostate, bladder, kidney and thyroid as well as melanoma.

Among those with HIV, the most common cancer types were lung, colorectal and prostate cancers, which made up 29.1%, 14.1% and 10.5% of cases in this group. As for those without the virus, the most common cancers were breast, prostate and lung, which constituted 22.8%, 17.8% and 17.7% of cases in this group.

Compared with not having the virus, having HIV was associated with a 1.24-fold to 2.06-fold greater likelihood of having been diagnosed with cancer at an advanced stage of the disease—specifically Stage IV compared with Stage I—for melanoma and cancers of the oral cavity, liver, breast, prostate and thyroid.

The risk of dying of cancer after being diagnosed with Stage I to Stage III cases was higher for people with HIV compared with the HIV-negative individuals for 13 of the 14 cancers included in the analysis. On the lower end, people with HIV were 1.2-fold more likely to die after a lung cancer diagnosis, while they were 1.85-fold, 1.85-fold and 2.93-fold more likely to die after a breast, cervical and thyroid cancer diagnosis, respectively.

Of those with HIV, 5% were uninsured, compared with 3.3% of those without the virus. A respective 25.4% and 44.7% of each group had private health insurance and a respective 17.9% and 5.9% had Medicaid.

The study authors found that the delays in diagnoses and higher mortality rates seen among those

with HIV were not solely driven by factors related to health care access. This finding suggests a potential biological connection between having a suppressed immune system and the progression of cancer.

To read the study abstract, click here.

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