



People With HIV Lower Risk of Heart Attack by Quitting Smoking

Lowering blood pressure also reduces heart attack risk.

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HIV-positive individuals who quit smoking and eliminate high blood pressure likely reduce their risk of heart attack by 20 to 40 percent, the National AIDS Treatment Advocacy Project (NATAP) reports. A low CD4 count and a high viral load can each also affect heart attack risk.

Presenting their findings at the 7th International Workshop on HIV and Aging, researchers studied about 29,100 HIV-positive members of the NA-ACCORD cohorts, a sample similar to the overall U.S. HIV population.

The study looked at two types of heart attack: type 1 attacks, which include health events in the arteries resulting from plaque rupture, and type 2 attacks, which result from unbalanced oxygen supply to the heart.

During a median 3.5 years of follow-up that occurred between 2001 and 2013, the study cohort experienced 347 type 1 heart attacks and 275 type 2 attacks.

After adjusting the data for various factors, the researchers found that risk of a type 1 heart attack was 1.8-fold higher if people smoked, 3.9-fold higher if they had high blood pressure, 1.5-fold higher if they had diabetes, 1.9-fold higher if they had stage 4 chronic kidney disease and 1.9-fold higher if they have a CD4 count below 200. Those factors were all also independently linked with having a type 2 heart attack. Additionally, the risk of having a type 2 attack was 1.9-fold higher with a viral load above 400, 1.6-fold higher with an AIDS diagnosis and 1.9-fold higher if individuals had hepatitis C virus (HCV).

The researchers estimated that if no one in the group smoked, they would see 38 percent fewer type 1 heart attacks and 22 percent fewer type 2 attacks. If no one had high blood pressure, there would be a respective 41 percent and 26 percent fewer of the two types of heart attack, while if all cholesterol levels were below 240 there would be 43 percent fewer type 1 heart attacks.

If everyone had a fully suppressed viral load, there would be 6 percent fewer type 1 heart attacks and 20 percent fewer type 2s. If no one were ever diagnosed with AIDS, there would be 12 percent fewer type 2 heart attacks; keeping all CD4 counts above 200 would mean 10 percent fewer type

1 attacks and 11 percent fewer type 2s. If no one in the cohort had hep C, there would be a respective 8 percent and 19 percent fewer of the two types of heart attack.

To read the NATAP report, [click here](#).

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