Signs of Toll of Stress on the Body Could Guide Care for Older People With HIV

Researchers analyzed blood markers of stress-related wear and tear on the body among people age 50-plus living with the virus.

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Clinicians could look to a composite of blood-based markers of the wear and tear that stress wreaks on the body as a means of guiding care and treatment decisions for older people with HIV, especially African Americans, Physician's Weekly reports.

This concept of the totality of the negative effects of stress on the body is known as allostatic load.

In a recent study led by Pariya L. Fazeli Wheeler, PhD, of Nell Hodgson Woodruff School of Nursing at Emory University in Atlanta, the investigators enrolled 95 people with HIV who were 50 years old or older. The participants completed a comprehensive neurobehavioral assessment and received a blood draw.

Looking at the blood samples from a subset of 75 of the participants, the investigators analyzed a dozen markers in the blood that together represent an approximation of allostatic load.

These markers included the stress hormone cortisol, glucose, total cholesterol, HDL cholesterol, triglycerides, albumin, systolic and diastolic blood pressure, body mass index, DHEA, interleukin 6, TNF-alpha and C-reactive protein.

Publishing their findings in the Journal of Acquired Immune Deficiency Syndromes, the study authors found that compared with a comparison group of HIV-negative people, older people living with HIV had higher levels of several of the individual markers of allostatic load.

Among the African-American participants, a higher composite level of the allostatic load markers was associated with lower psychological resilience, less physical activity, poorer neurocognitive functioning, greater risk for diabetes and more complaints related to the ability to perform basic daily activities.

"These exploratory findings are consistent with the larger aging literature, suggesting that lower

AL [allostatic load] may serve as a pathway to better health and functional outcomes, particularly in African-American [people with HIV],” the study authors concluded. “Furthermore, resilience and physical activity may reduce AL in this population.”

To read the Physician’s Weekly article, click here.

To read the study abstract, click here.

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