Unsuppressed HIV Viral Load Doubles Heart Disease Risk

December 16, 2013

Having an unsuppressed HIV viral load appears to double the risk of structural heart disease, Medical News Today reports. Spanish researchers conducted a prospective cohort study of 65 people with HIV who had shortness of breath, giving them a transthoracic echocardiogram to determine if they had structural heart disease, including ventricular hypertrophy, systolic or diastolic dysfunction, or pulmonary hypertension.

Of the cohort, which was 63 percent male and had an average age of 48 years old, 47 percent had some form of structural heart disease—for the most part left ventricular hypertrophy, left ventricular dysfunction, pulmonary hypertensions and indications of right ventricle failure. Seventy-five percent of the participants with a detectable viral load had structural heart disease, compared with 43 percent of those with an undetectable viral load.

The researchers found that a detectable viral load nearly doubled the prevalence of heart disease when compared with an undetectable viral load. They believe their findings suggest that HIV may be an independent agent causing heart disease. Furthermore, the researchers found that the prevalence of structural heart disease was not linked to whether or not participants had an AIDS diagnosis, their gender, age, or the existence of cardiovascular risk factors. More research is needed to confirm this result, however.

The researchers recommend that all people with HIV who have shortness of breath undergo a transthoracic echocardiogram to look for structural heart disease.

To read the Medical News Today story, click here.

To read a release on the study, click here.

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