Women’s Detectable HIV Risk

Many women on HIV treatment are at risk of developing a detectable viral load.

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Beset with numerous life challenges that may compromise their adherence to antiretrovirals, many women living with HIV are at substantial long-term risk of developing a detectable viral load.

Researchers from the long-running Women’s Interagency HIV Study analyzed data on nearly 2,000 U.S. women with the virus who made at least five study visits, scheduled every six months, between 1994 and 2017.

Based on whether the women had a viral load below 200 or at least 200 at any one of their visits, the researchers’ mathematical analysis led them to predict that 29% of the women had a low probability of developing a viral load of 200 or above, while 39% had an intermediate probability and 32% had a high probability of doing so.

By the study period’s end, the average cumulative time spent with a fully suppressed viral load was 19 years in the low probability group, 12 years in the intermediate group and 6 years in the high probability group.

After adjusting the data to account for various differences between the women, the researchers found that factors associated with a high probability of having a viral load of 200 or above included being African American or Latina compared with being white, having more symptoms of depression, using drugs, having unstable housing and having a lower CD4 count.

“There are clearly social, cultural and biologic elements that influence a woman’s experience with HIV,” says the study’s first author, Seble G. Kassaye, MD, MS, an associate professor of medicine at Georgetown University Medical Center. “For example, women may have responsibilities outside of their own health, [such as being] caretakers within their families and communities, which may present a challenge for women even under the best-case scenario.”

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