# Watch HIV Updates From CROI 2024 on Liver and Cardiovascular Disease

Dr. Dieffenbach's second update from the science conference #CROI2024 also covers HIV prevention during pregnancy and more. [VIDEO]

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On Tuesday, March 4, at the 2024 Conference on Retroviruses and Opportunistic Infections (CROI), HIV.gov spoke with NIH's Dr. Carl Dieffenbach about research on common health complications of HIV and the safety of an HIV prevention tool during pregnancy. Dr. Dieffenbach is the Director of the Division of AIDS at NIH's National Institute of Allergy and Infectious Diseases. He spoke with Miss Molly Moon, MSW, Deputy Director of the NIH-supported Office of HIV/AIDS Network Coordination. Watch our conversation with Dr. Dieffenbach at the top of this article.

## Liver and Cardiovascular Complications of HIV

Dr. Dieffenbach highlighted research findings presented at CROI about addressing both liver and cardiovascular complications among people with HIV. First, researchers reported that a weekly injection of semaglutide was safe and reduced the amount of fat in the liver by 31% in people with HIV and metabolic dysfunction-associated steatotic liver disease (MASLD) after 24 weeks. An estimated 30-40% of people with HIV experience MASLD, which was previously known as nonalcoholic fatty liver disease. MASLD is characterized by the accumulation of excess fat in the liver that is not caused by alcohol consumption or viral hepatitis. The pilot study involved 49 participants whose HIV viral load was suppressed by treatment who took low weekly doses of semaglutide, which is FDA-approved for treatment of type 2 diabetes and weight loss but had not previously been studied for its effect on MASLD in people with HIV. Learn more.

Second, researchers shared new analysis resulting from the NIH-supported REPRIEVE trial, which enrolled thousands of participants in 12 countries. Their analysis reveals that a standard tool used by health care providers to estimate the risk of cardiovascular events in people and determine whether they should be prescribed preventive statin therapy was moderately effective in predicting cardiovascular death, heart attack, or stroke over five years among people with HIV. However, the tool under-predicted cardiovascular events in women, Black/African Americans, and participants from high-income regions. The researchers suggested that the performance of this tool in these subgroups should be considered when using it to guide prescribing statins for cardiovascular prevention among people with HIV. Last summer, REPRIEVE reported its key finding that statins, a class of cholesterol-lowering medications, may offset the high risk of cardiovascular

disease in people with HIV by more than a third, potentially preventing one in five major cardiovascular events or premature deaths in this population. Informed by those findings, new clinical guidelines, Recommendations for the Use of Statin Therapy as Primary Prevention of Atherosclerotic Cardiovascular Disease in People with HIV, were recently published. (View HIV.gov's 2023 conversations about REPRIEVE trial findings.)

## Safety of Dapivirine Ring for HIV Prevention During Pregnancy

Dr. Dieffenbach also discussed new data presented at CROI on the safety of the dapivirine vaginal ring used for HIV prevention. The dapivirine ring is made of flexible silicone, continuously releases the antiretroviral drug dapivirine into the vagina, and is replaced monthly by the user. Its use is approved for HIV prevention in several African countries where adolescent girls and young women are among the groups most likely to benefit. The new data from an NIH-supported study found the ring to be safe throughout pregnancy, a period during which pregnant people are three times more likely to acquire HIV through sex. Dr. Dieffenbach observed that these findings expand HIV prevention choices for women at various stages of their lives. Learn more.

## Other Studies of Interest Presented on Tuesday

Some of the other studies presented included a trial showing that offering participants a choice and an opportunity to switch between long-acting injectable cabotegravir, daily oral PrEP, or post-exposure prophylaxis (PEP) increased the amount of time people were using a biomedical HIV prevention method and reduced HIV acquisition compared to offering only oral PrEP and PEP. Another study of antiretroviral therapy during menopause found that switching to a drug regimen with an integrase strand transfer inhibitor (INSTI, a category of antiretroviral drugs) was associated with early accelerated increases in waist circumference and body mass index when compared to people who did not switch to an INSTI-based regimen during late peri-menopause and post-menopause.

## About CROI

CROI is an annual scientific meeting that brings together leading researchers and clinical investigators from around the world to present and discuss the latest studies that can help accelerate global progress in the response to HIV and other infectious diseases, including STIs and viral hepatitis. More than 3,630 HIV and infectious disease researchers from 73 countries are gathered in Denver and virtually from March 3-6 this year for the conference. More than 1,000 summaries of original research are being presented at CROI. Visit the conference website for more information. Abstracts, session webcasts, and e-posters will be published there for public access in 30 days.

## Stay Tuned for More HIV Research Updates

HIV.gov will be sharing additional video interviews from CROI 2024 with NIH's Dr. Dieffenbach, CDC's Dr. Jono Mermin and Dr. Robyn Neblett Fanfair, and others. You can find all of them on HIV.gov's social media channels and recapped here on the blog.

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