

Tobacco the 'silent killer' of HIV patients, say researchers

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Dunhill Early Morning Pipe Tobacco, 1990's Murray. Credit: Sjschen/Wikipedia

Researchers at the University of York have shown that tobacco use is more common among HIV positive individuals than HIV negative individuals.

The study, published in *The Lancet Global Health*, aims to raise further

awareness of the dangers associated with tobacco use among people living with HIV, particularly following recent research which showed that young people on HIV drugs have a near-normal life expectancy due to improved treatments for the disease.

Medical advances in HIV mean that HIV patients may only lose about five years of life due to HIV. However, if they smoke, they may lose as much as 12 years of life. This means that tobacco use is more than twice as likely to cause death in HIV patients as the HIV infection itself.

The York study, supported by the South African Medical Research Council, showed that in low and middle-income countries, particularly in the African region, HIV-positive men are 41%, and HIV-positive [women](#) 36%, more likely to use tobacco, including snuff, chewing and [smoking](#) tobacco, than their HIV-negative counterpart.

For [tobacco smoking](#) only, HIV-positive men were 46% more likely and women 90% more likely to smoke than individuals who did not have HIV. However, the proportion of HIV positive men who smoke was much higher at 24.4%, than that of HIV positive women who smoke at 1.3%.

The researchers observed a marked difference in the way in which men and women use tobacco, with women having a higher tendency to use [smokeless tobacco](#) such as snuff or chewing tobacco over smoking.

Dr Noreen Mdege, from the University's Department of Health Sciences, said: "In high-income settings, the proportion of HIV-positive individuals who smoke has also been shown to be higher than among HIV-negative individuals of the same age and sex.

"Our findings confirm that this trend is the same for low and [middle-income countries](#), where the burden of HIV and tobacco-related illnesses

is greatest.

"We still don't know for certain the reasons why tobacco use should be significantly higher in HIV patients; more research is needed to understand why.

"A few factors could be considered as part of our ongoing work, such as the use of alcohol and other drugs together with tobacco, as well as mental health issues, such as depression, and coping with HIV-related symptoms or drug side-effects. It could also be due to the misconception that HIV is a death penalty, which of course, it is not."

The research suggests that the difference in tobacco use that is seen between men and women could be due to social or cultural 'norms'; in many low and middle income countries smoking is a less socially acceptable activity for women compared to men, and taking snuff or chewing tobacco is more acceptable than tobacco smoking among women.

Dr Mdege added: "Our main concern, however, is that interventions that are used commonly throughout the world for smoking cessation do not appear to make any difference to tobacco smoking among HIV positive individuals. This suggests that we need to tailor smoking cessation interventions to the unique needs of this population in order to tackle this issue.

"The next stage of the study will focus on understanding the differences in the way tobacco is used among HIV patients when compared to the general population, as well as factors that may influence tobacco use within HIV patients. This way, we will be able to develop tailored interventions that are effective on tackling the root causes of [tobacco](#) use as well as how it is used among HIV-positive individuals."

More information: Noreen D Mdege et al, Tobacco use among people living with HIV: analysis of data from Demographic and Health Surveys from 28 low-income and middle-income countries, *The Lancet Global Health* (2017). DOI: [10.1016/S2214-109X\(17\)30170-5](https://doi.org/10.1016/S2214-109X(17)30170-5)

Provided by University of York

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