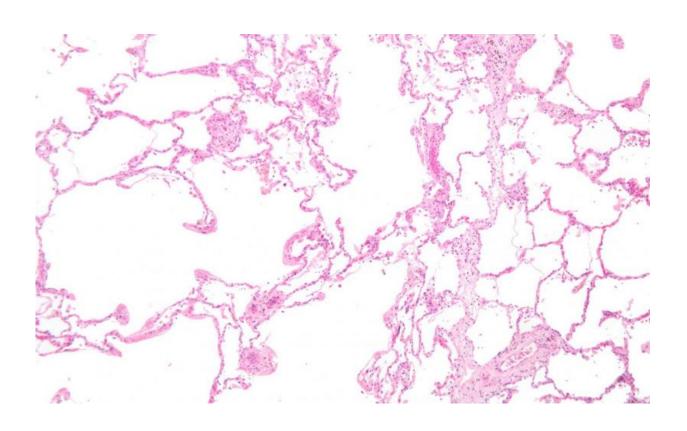


## People living with HIV diagnosed with COPD 12 years younger than HIV-negative people

February 18 2020



Micrograph showing emphysema (left – large empty spaces) and lung tissue with relative preservation of the alveoli (right). Credit: Wikipedia, CC-BY-SA 3.0

People in Ontario living with HIV had a 34 per cent higher incidence rate of chronic obstructive pulmonary disease (COPD) and were diagnosed with the disease about 12 years younger than HIV-negative individuals, according to a study led by researchers at St. Michael's



Hospital of Unity Health Toronto and ICES.

Researchers analyzed incidences of COPD among adults 35 years and older who were living with and without HIV between 1996 and 2015 in Ontario—where over 40 per cent of Canadians living with HIV reside.

People with HIV were diagnosed with COPD at a mean age of 50 years old compared with 62 for HIV-negative individuals.

The study, publishing on Feb. 18, 2020 in *CMAJ Open*, is the first of its kind to examine the rates of COPD among women living with HIV—researchers found the rate of COPD among women living with HIV was 54 per cent higher than that of HIV-negative women.

"As people with HIV live longer, it is important to understand how common other illnesses are to ensure that prevention, screening and treatment strategies can be developed," said Dr. Tony Antoniou, a scientist at the Li Ka Shing Knowledge Institute of St. Michael's.

"We wanted to understand how common COPD is in Ontario residents with HIV because COPD is a disease that generally worsens with time, can worsen a person's quality of life and is strongly linked to smoking," added Dr. Antoniou, who is also an adjunct scientist at ICES, the not-for-profit research institute where the Ontario data were analyzed.

COPD affects over 380 million people worldwide and is projected to become the fourth leading global cause of death by 2030. It is potentially preventable and is strongly associated with smoking. In a sensitivity analysis, the higher prevalence of smoking in people with HIV appeared to explain the higher risk of COPD in these patients.

"While other factors may contribute to the development of COPD in people with HIV, our work highlights the importance of trying to help



our patients with HIV quit smoking to prevent COPD in the first place and prevent further lung damage in people who are already diagnosed with COPD," said Dr. Antoniou.

Dr. Antoniou would next like to explore the quality of COPD care that people living with HIV are receiving. He also hopes the <u>medical</u> <u>community</u> will begin routinely considering COPD when managing people living with HIV.

## Provided by St. Michael's Hospital

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