

## Despite medical advances, people with HIV still live shorter, sicker lives

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HIV may not be the death sentence it was 20 or 30 years ago, but people



who are HIV-positive still face much shorter lives than other adults—even if they're treated with medications that make the virus undetectable.

A new study reports that people who were HIV-positive at age 21 had an <u>average life expectancy</u> of 56 years—nine years fewer than their virus-free peers.

The likely reason: a weaker immune system and a greater risk for other <u>chronic health issues</u>, even when HIV is kept in check.

"Our findings suggest that people with HIV who initiate treatment early are approaching the same lifespan as people without HIV, but that we need to be paying closer attention to preventing comorbidities [other <u>chronic diseases</u>] among people with HIV," said lead author Dr. Julia Marcus, an assistant professor at Harvard Medical School in Boston.

When antiretroviral therapy—or HAART—was introduced for HIV treatment in 1996, it was a game-changer.

Taken daily, the medications can suppress the virus to undetectable levels, keeping patients healthy and eliminating the risk of sexual transmission. The U.S. Department of Health and Human Services recommends starting HAART immediately after an HIV diagnosis.

Marcus and her team wanted to find out if there was still a gap in life expectancy between people with HIV and those without.

To find out, they reviewed disease and death histories drawn from Kaiser Permanente records for nearly 430,000 people between 2000 and 2016. About 39,000 were HIV-positive, and nearly nine in 10 of these patients were male (average age: 41).



The investigators focused on two points in time: 2000 to 2003, and 2014 to 2016.

During the first period, life expectancy for a 21-year-old with HIV was 38 years, compared to 60 for uninfected peers.

By 2014, that gap narrowed dramatically: A 21-year-old with HIV could expect to live to 56, compared to age 65 for uninfected adults, according to the report.

Still, a nine-year gap remained, and the researchers noted that it narrowed only slightly when they looked at HIV-positive 21-year-olds who were taking HAART between 2011 and 2016. So the team checked their odds for six <u>chronic illnesses</u>—diabetes, cancer, and liver, kidney, lung or heart disease.

The findings were significant: Between 2000 and 2003, a 21-year-old with HIV was unlikely to develop these diseases until age 32, compared with 47 years of age for uninfected adults. Between 2014 and 2016, HIV-positive patients were likely to be free of those diseases until 36—16 years sooner than the uninfected group.

But when the team zeroed in on HIV-positive patients who were on HAART between 2011 and 2016, the gap shrank to nine years.

"Our findings suggest that people with HIV who initiate treatment early are approaching the same lifespan as people without HIV, but that we need to be paying closer attention to preventing comorbidities among people with HIV," Marcus said.

Asked why, she noted that HIV-positive patients are more likely to engage in risky behaviors such smoking and illicit drug use. But, she said, the main driver is likely the "immune activation or inflammation



from having a chronic viral infection."

HAART reduces both, she added, "which may be why early treatment is associated with both a longer lifespan and more healthy years."

While HAART is both a lifesaver *and* life extender, Marcus said the study indicates that patients and doctors need to remain vigilant about preventing, diagnosing and managing other chronic illnesses among HIV-positive patients.

That thought was seconded by Dr. Wendy Armstrong, who co-authored an editorial that accompanied the findings.

Armstrong is a professor in the division of infectious diseases at the Emory University School of Medicine in Atlanta.

"There really is a striking difference in life expectancy," she said. "And I think this means that to really care well for persons living with HIV, we really need to think more carefully about how we monitor and prevent other chronic illnesses in a more intensive way."

The findings were published online June 15 in JAMA Network Open.

**More information:** For more about HIV treatment, visit the <u>U.S.</u> <u>Centers for Disease Control and Prevention</u>.

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