

Nurse-led strategy found to reduce cardiovascular risk factors for people with HIV

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Nurse-led management can lower cardiovascular risk factors among



individuals with HIV receiving antiretroviral therapy, according to a study published online March 5 in *JAMA Network Open*.

Christopher T. Longenecker, M.D., from the University of Washington in Seattle, and colleagues assessed whether a multicomponent nurse-led strategy could improve <u>systolic blood pressure</u> (SBP) and non-<u>high-density lipoprotein</u> (HDL) <u>cholesterol levels</u> in a diverse population of 297 people with HIV receiving antiretroviral therapy.

The researchers found that at 12 months, participants randomly assigned to the nurse intervention had a clinically significant 4.2-mm Hg lower SBP and 16.9-mg/dL lower non-HDL cholesterol level versus participants in the control arm. For women, there was a clinically meaningful but not statistically significant difference in SBP effect compared with men (four months: 11.8-mm Hg greater difference; eight months: 9.6 mm Hg; 12 months: 5.9 mm Hg).

"Findings of this trial suggest that nurse-led cardiovascular risk factor management in academic HIV clinics may lead to fewer cardiovascular events and should inform the implementation of prevention programs for people with HIV," the authors write. "Future research should explore the most effective components, dose, and mediators of these effects."

Two authors disclosed ties to Gilead Sciences; one author disclosed ties to Theratechnologies.

More information: Christopher T. Longenecker et al, Nurse-Led Strategy to Improve Blood Pressure and Cholesterol Level Among People With HIV, *JAMA Network Open* (2024). DOI:



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