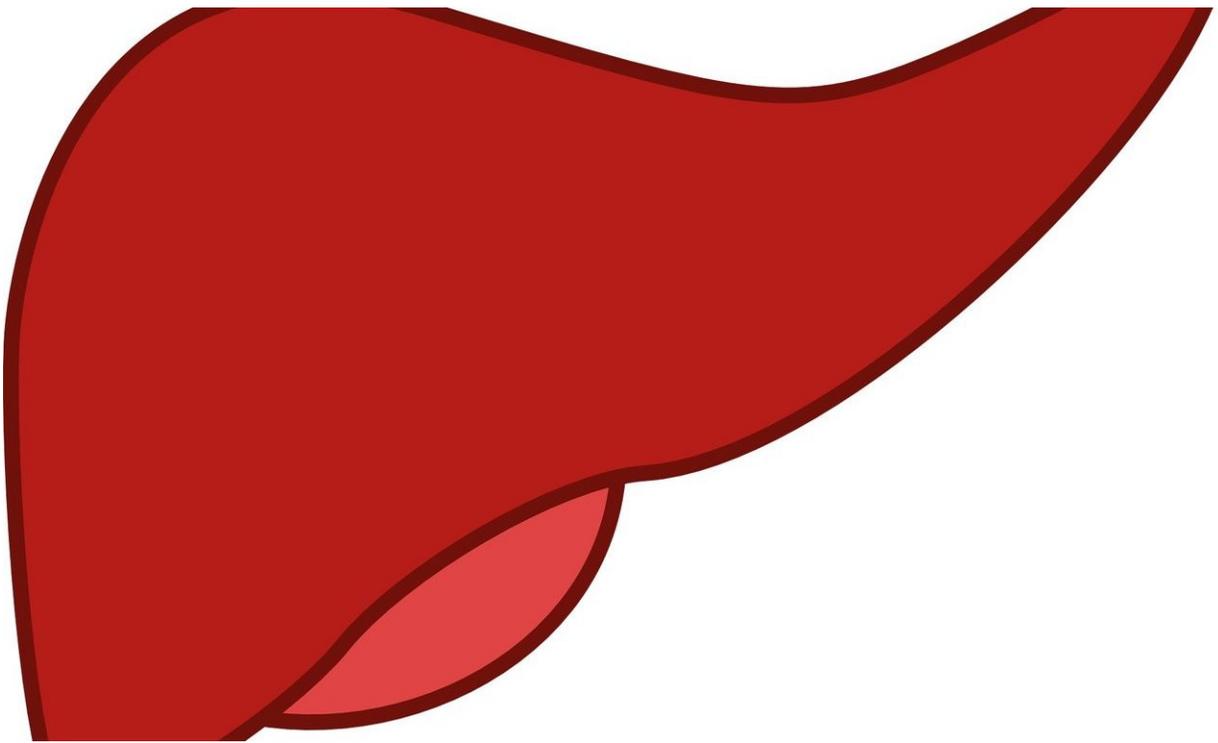


HIV-infected individuals at high risk of NAFLD and progressive liver disease

April 11 2019



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The increasing burden and risk of non-alcoholic fatty liver disease (NAFLD) associated with HIV infection have today been highlighted in two studies presented at The International Liver Congress 2019 in Vienna, Austria. These studies found that, whilst prevalence and mortality rates associated with viral hepatitis in HIV-infected individuals

have been declining, rates associated with NAFLD are increasing, leading to a risk of progressive liver disease.

People living with HIV infection appear to be at greater risk of developing NAFLD than the [general population](#). The [prevalence](#) of NAFLD worldwide has been estimated to be 25%, while the prevalence in populations with HIV has been far higher in most reported studies. NAFLD represents an important risk factor for the development and progression of liver disease,⁵ and with the availability of effective hepatitis B and C antiviral medications, it is conceivable that NAFLD could become the most prominent liver disease affecting individuals with HIV in the future.

The first study presented in Vienna aimed to assess the prevalence and mortality trends of NAFLD, [viral hepatitis](#), and other liver diseases in HIV-infected individuals. The records of >47,000 HIV-infected Medicare recipients in the USA were searched, and >10,000 individuals with liver disease were identified: 5,628 with HCV-related disease, 1,374 with HBV-related disease, 645 with HCV/HBV-related disease, 2,629 with NAFLD, and 198 with other liver diseases. During the 10 years between 2006 and 2016, the prevalence rates for viral hepatitis decreased from 27.75 to 24.17 per 100,000 [population](#) (p=0.009) whilst the rates for NAFLD more than doubled from 5.32 to 11.62 per 100,000 population (p

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