

Domino Effects

Living with HIV includes being at risk for other chronic illnesses.

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In a recent large-scale review that was published in the journal *Clinical Infectious Diseases* found that people with HIV face a higher risk for various chronic illnesses—namely, chronic obstructive pulmonary disease and coughs; heart, liver and kidney disease; sepsis; bone fractures; and frailty. And while these conditions may be age-associated, people with HIV are developing some of them at higher rates and at an earlier age than their HIV-negative counterparts.

Findings show that when people start HIV treatment makes a huge difference. The longer someone goes without taking antiretrovirals, the more damage the immune system sustains.

Another factor to consider is that even when HIV is well treated, the immune system remains in a constant state of activation, prompting chronic inflammation, which accelerates heart disease and stroke.

Additionally, non--AIDS-defining cancers, such as anal cancer, lung cancer, Hodgkin lymphoma, liver cancer and oral cancers are on the rise among people with HIV.

Since some of these are caused by viruses (human papillomavirus, or HPV, can cause anal and oral cancers; Epstein Barr can cause Hodgkin lymphoma; and hepatitis B and C can cause liver cancer), the impaired immune system of people with HIV may increase their susceptibility to developing such cancers. (Not to mention that cancer risk increases for everyone as they age.)

Finally, drinking and smoking, which are more common among people living with HIV, can up the risk for liver and lung cancer.

But some of these risks can be mitigated if folks start HIV treatment immediately after diagnosis, get an HPV vaccine if eligible, quit smoking, curb alcohol consumption and exercise to maintain a healthy weight for an overall better quality of life with HIV.