INTERNATIONAL MEDICAL PRESS

1st International Workshop on Adverse Drug Reactions and Lipodystrophy in HIV

26–28 June 1999 - San Diego, CA, USA

THE PREVALENCE OF LIPODYSTROPHY IN AN HIV-INFECTED OUTPATIENT POPULATION

Antiviral Therapy 1999; 4(Suppl. 2):54(abstract no. 37)

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BACKGROUND: The development of abnormalities in body fat distribution, lipid metabolism and glucose tolerance in HIV patients on HAART has been reported. A combination of features may indicate a syndrome of lipodystrophy. Causation and risk factors for the development of lipodystrophy are yet to be determined.

OBJECTIVE: The purpose of this study was to determine the prevalence of lipodystrophy and aid in the determination of accurate clinical assessment of the syndrome. Anthropometric measures and DEXA scans were compared.

DESIGN: A cross-sectional study was performed to assess HIV-infected patients for lipodystrophy by anthropometric measures, clinical examination, patient perception, biochemical measures and DEXA.

RESULTS: One hundred and sixty-eight outpatients were assessed (160 males and 8 females) of 368 who attended clinic between 27 May and 31 August 1998. Of the male population 144 had been exposed to a PI. There was no significant difference in total percentage body fat on DEXA between medication groups. Those patients that had been on a PI had a significantly higher mean triglyceride level and a significantly lower mean HDL level. Both medication groups had a higher than desirable mean total fasting cholesterol level. Sixty-six percent of the male population had one or more risk factors for cardiovascular disease (CVD), 55% had two or three risk factors.

CONCLUSION: The prevalence of lipodystrophy is 70% according to the definition used. Adverse effects of PIs include hypertriglycerideaemia and lowering of HDL levels.

This male HIV-infected population have multiple risk factors for the development of CVD. Anthropometric measures underestimate the percentage total body fat compared to DEXA.

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