

2nd International Workshop on Adverse Drug Reactions and Lipodystrophy in HIV



13-15 September 2000, Toronto, Canada

ASSOCIATION OF CLINICAL PROFILES AND METABOLIC ABNORMALITIES IN HIV-INFECTED MALES AND FEMALES WITH THE HIV/HAART-ASSOCIATED LIPODYSTROPHY SYNDROME

Antiviral Therapy 2000; 5(Suppl. 5):27 (abstract no. P5)

J Falutz and G Hatzakis

Montreal General Hospital, Quebec, Canada

BACKGROUND: Patterns of body shape changes of HIV/HAART-associated lipodystrophy syndrome (HAL) may differ by gender. We evaluated HAL-related metabolic abnormalities in males and females, with and without specific features of this syndrome.

METHODS: Patients were diagnosed clinically as either HAL-negative or with both fat depletion and fat accumulation (mixed). Fasting lipids, insulin, glucose, C-peptide, HIV viral load, CD4 cells and BMI were measured. Insulin resistance was determined by the homeostasis model [$HOMA = \text{insulin} / (22.5e^{-\ln \text{glucose}})$].

RESULTS: There were 69 HAL-negative and 36 mixed males; nine HAL-negative and 11 mixed females. Patients were on PI-containing HAART for similar duration (mean 28 months). Ages were similar in the HAL-negative and mixed females (38 versus 41 years), and were statistically but not clinically different in the HAL-negative and mixed males (44 versus 48). The BMI, CD4 counts, and V_L were similar in the HAL negative versus mixed males, and in the females (BMI 23 versus 24 and 30 versus 32, CD4 390 versus 315 and 380 versus 355 cells/mm³, $\log_{10} V_L$ 4.1 versus 4.2 and 3.4 versus 3.5). Significant differences occurred between the negative and mixed males in triglycerides, HDL and LDL (worse profiles in the mixed), and in the fasting insulin, C-peptide and HOMA values (higher levels in the mixed). No differences occurred in any parameter between HAL negative and mixed females. No correlation occurred between BMI and HOMA in

HAL negative males or females, but was found in HAL mixed males ($r=0.75$), but not HAL mixed females.

CONCLUSIONS: Despite similar clinical and treatment features in HAL negative, and mixed females and males, differences occurred in lipid and glucose metabolism profiles in HAL-negative and mixed males, but not in the female groups, suggesting gender differences in biological response to factors causing HAL-related metabolic and possibly clinical features.

000913
P5

Copyright © 2000 - [International Medical Press Ltd.](#) Reproduction of this abstract (other than one copy for personal reference) must be cleared through the International Medical Press Ltd. 2-4 Idol Lane, London EC3R 5DD UK.