

## COMORBIDITY PATTERNS IN THE OLDER HIV PATIENT

### BACKGROUND

PLHIV present chronic systemic inflammation, which results in premature ageing and an increased risk of age-associated comorbidities compared to the general population.

### AIM AND OBJECTIVES

To determine the prevalence of comorbidities among PLHIV  $\geq 65$  years old, and to categorise their distribution in multimorbidity patterns.

### MATERIALS AND METHODS

- Prospective descriptive study through interviews with 47 PLHIV  $\geq 65$  years of age on active antiretroviral treatment.
- The comorbidities were classified into comorbidity patterns (cardio-metabolic, depressive-geriatric and mechanical-thyroid) according to the study by Prado Torres et al, which is included in the "Model of Selection and Pharmaceutical Care for HIV Patients" by the Hospital Pharmacy Society of our country.
- A comorbidity pattern is diagnosed in a patient if they present at least two pathologies of the same pattern.
- Multiple patterns of comorbidity may be present in a patient.



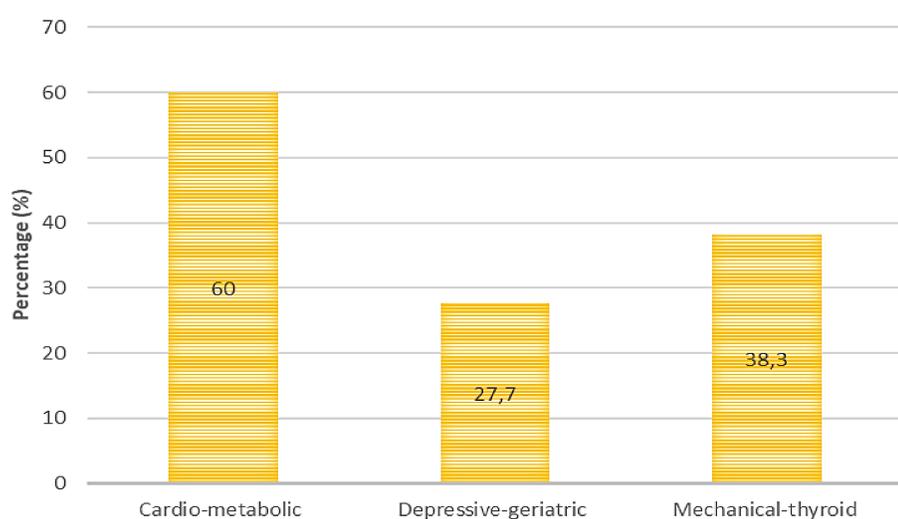
### RESULTS

N = 47  
Median of 5 comorbidities  
(RIQ: 2-6)

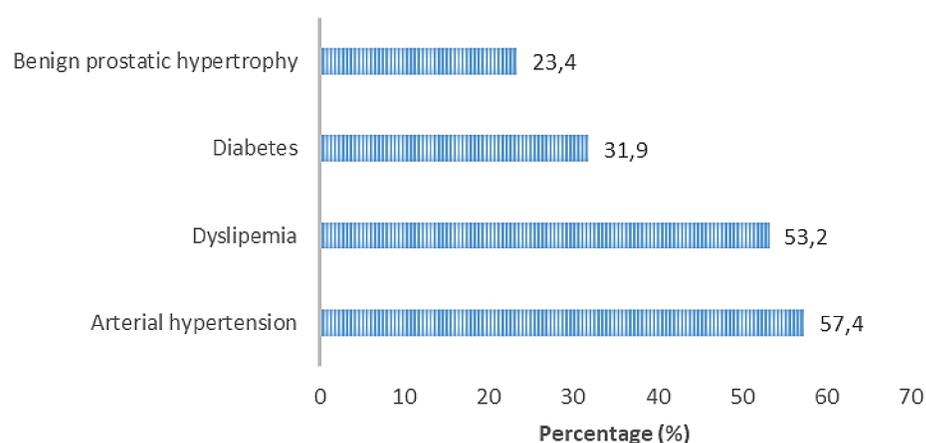


- Two patients had up to 7 pathologies of the same pattern.
- 4 patients (8.5%) had > 10 comorbidities.

#### COMORBIDITY PATTERNS



#### MOST FREQUENT PATHOLOGIES



### CONCLUSIONS

- Non-HIV-related comorbidities are increasingly important in older HIV-infected people.
- It is important to detect and prevent modifiable age-related risks of non-HIV comorbidities.
- Understanding the range of comorbidity patterns facilitates precision in developing forthcoming health interventions in complex elderly PLHIV.

