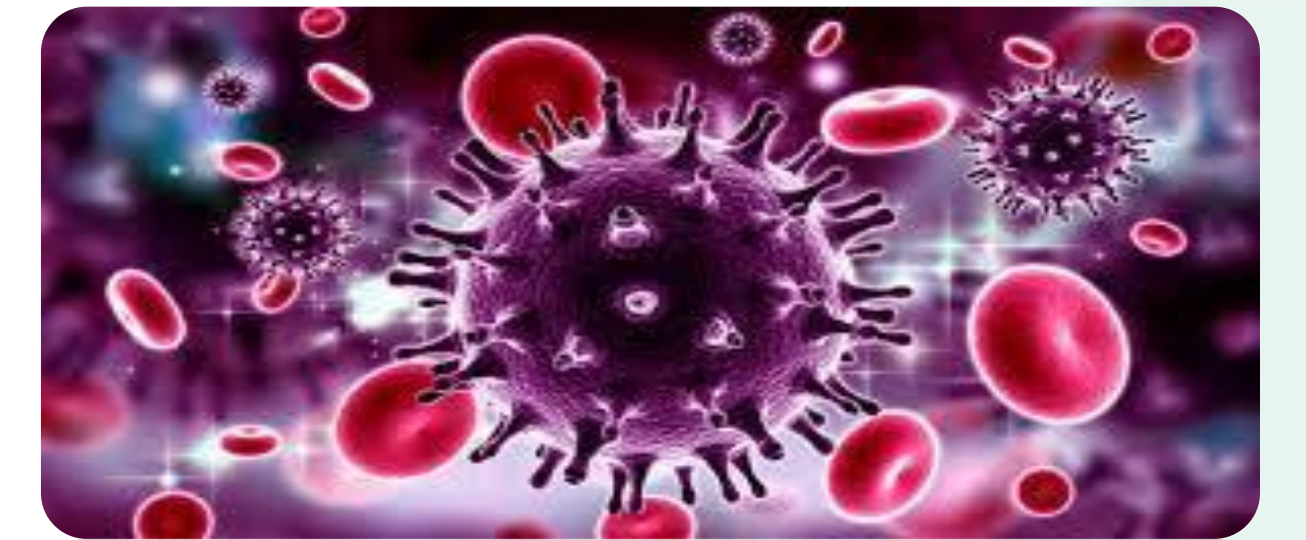


BACKGROUND AND IMPORTANCE

Patients with HIV infection have greater risk for cardiovascular diseases (CVD) compared to general population, being the main cause of morbidity/mortality. Factors that contribute to this increase are both those of the infection and the classical cardiovascular risk factors (CRFs).

AIM AND OBJECTIVES

- ❖ To observe the prevalence of CRFs
- ❖ To estimate cardiovascular risk of HIV patients
- ❖ To analyse pharmaceutical interventions which were carried out to control it.



MATERIAL AND METHODS

Observational and prospective study was carried out from February to June 2021.

The main CRFs were identified:



Modifiable

Unmodifiable

- Smoking
- Arterial hypertension ($\geq 140/90$ mmHg)
- Diabetes Mellitus
- Elevated LDL-c (> 100 mg/dl)
- Low HDL-c (< 40 mg/dl)
- Elevated total cholesterol (≥ 200 mg/dl)
- Physical inactivity

Age
Sex

The data were collected through electronic clinical history and the interview with patient in a pharmaceutical care clinic.

The patient's cardiovascular risk was measured using Framingham scale (2008)

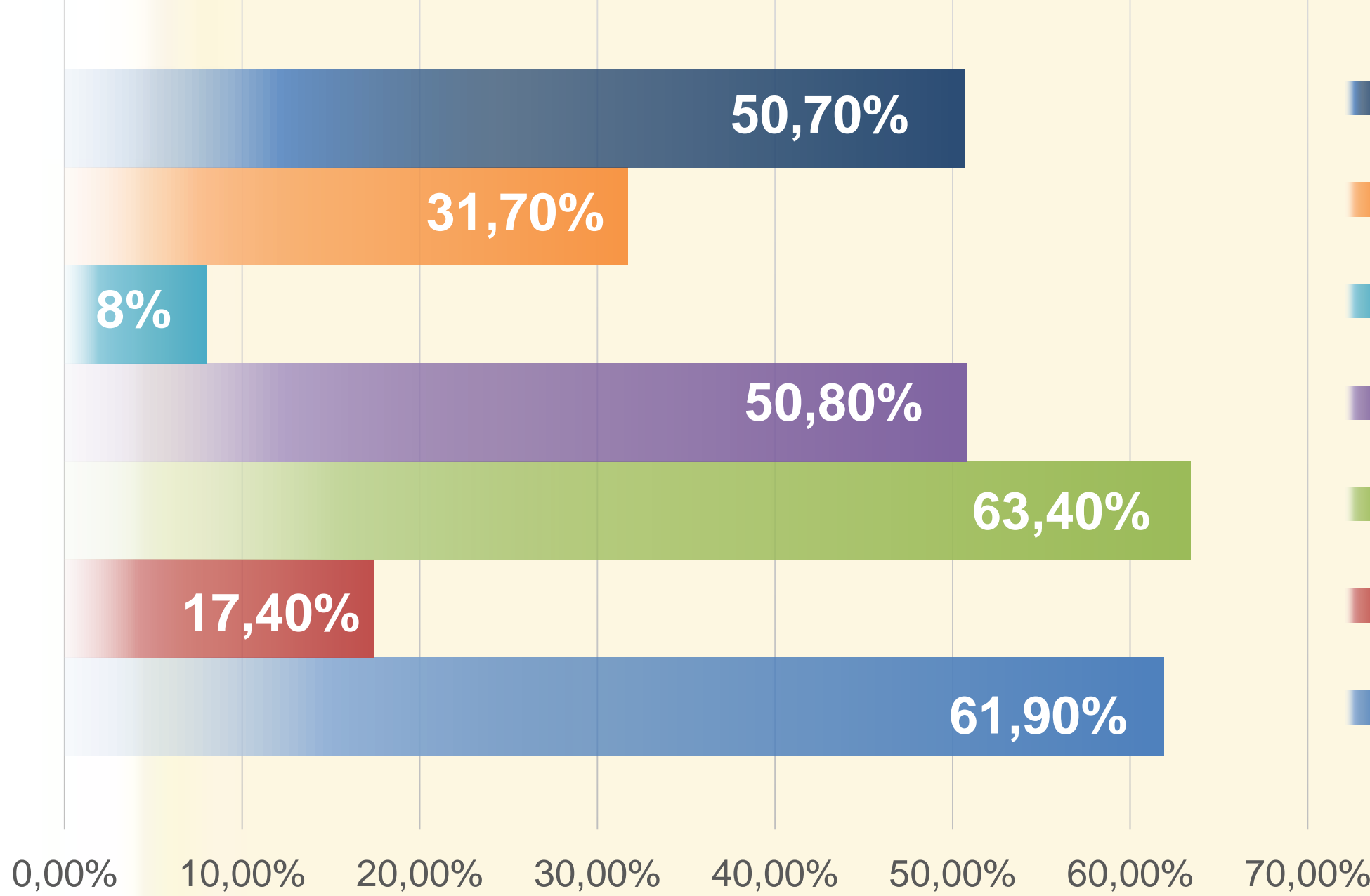
RESULTADOS



- ✓ 63 patients were included.
- ✓ Median age was 53 years (IQR 45-57)
- ✓ 67% were men.

According to the Framingham scale, 23.4% had a high risk of CVD in the next 10 years
28.5% moderate risk

THE CVRFS ANALYZED WERE



- Tobacco use
- Arterial hypertension
- Diabetes mellitus
- Elevated total cholesterol
- High LDL-c
- Low HDL
- Regular physical activity

median: 10 cigarettes/day (IQR: 9-20)

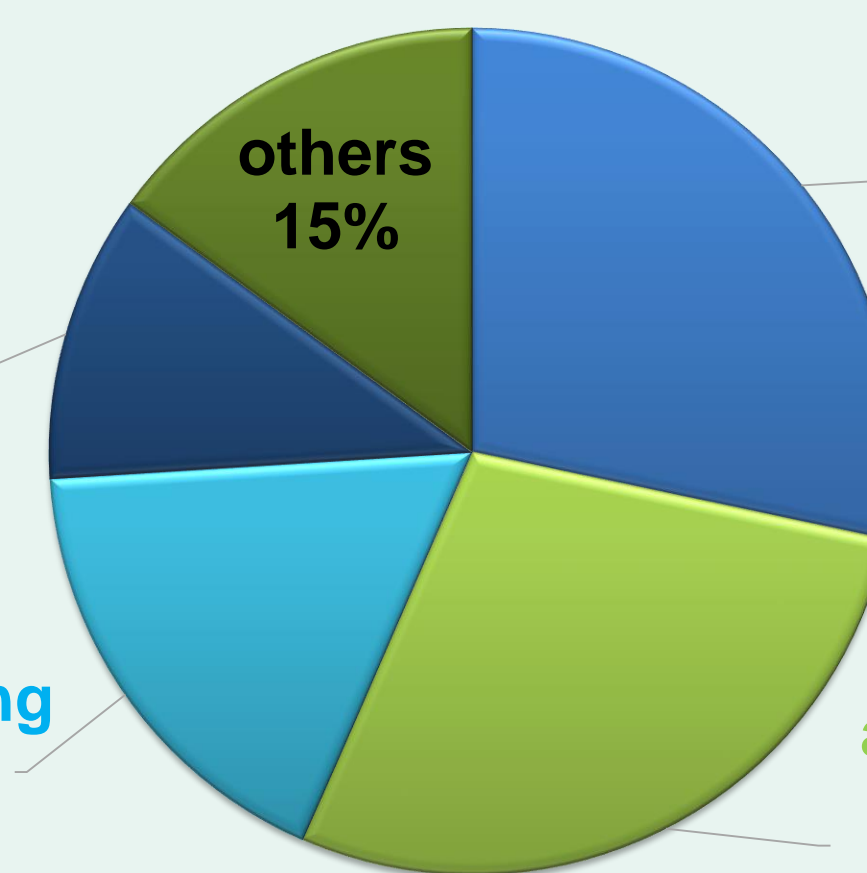
70% were treated pharmacologically but only 25% had blood pressure controlled

27% were under pharmacological treatment

✓ 92 pharmaceutical interventions were carried out

monitor cardiovascular risk
11%

suggest starting or increasing weekly physical activity
18%



recommendation to quit smoking habits and/or monitoring adherence and tolerance of vareniclyline
28%

advice on nutritional habits
28%

CONCLUSION AND RELEVANCE

- 😊 CRFs are common in these HIV patients and a large proportion of them have a moderate-high risk of CVD.
- 😊 The main role of the pharmacist in this study has been aimed at modifying heart-healthy lifestyle habits.
- 😊 The approach of cardiovascular risk should be considered as part of the integral follow-up of HIV patients.

No conflict of interest

Abstract number: 4CPS-046.
ATC code: 2. Case studies - with patient consent