

Routine monitoring of adults with HIV-1 over 40

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Background

- As antiretroviral treatment is progressing, HIV patients are increasing becoming an ageing population with other co-morbidities which can be HIV related or non-related.
- Older patients can also be more likely to be subjected to polypharmacy and therefore have more risk of drug interactions.
- The 2016 BHIVA HIV-1 monitoring guidelines advise:
 - HIV patients over 40 have an annual cardiovascular risk assessment.
 - HIV patients over 50 have a fragility fracture risk assessment every 3 years¹.
- Our service undertakes QRISK 2/3 and FRAX score for cardiovascular risk and fragility fracture risk respectively.

Aim

- To review our current monitoring of HIV-1 patients over 50.

Figure 1



Methods

- A retrospective review of 20 HIV-1 patients over 50 who had recently attended our service was performed.
- It was recorded whether a cardiovascular risk assessment and fragility fracture risk assessment was undertaken according to the 2016 BHIVA HIV-1 monitoring guidelines.

Results

Table 1: Patient characteristics

Characteristics	
Total number of patients:	20
Age range:	50-74

Figure 2: Percentage of patients who had a cardiovascular risk assessment in the previous year

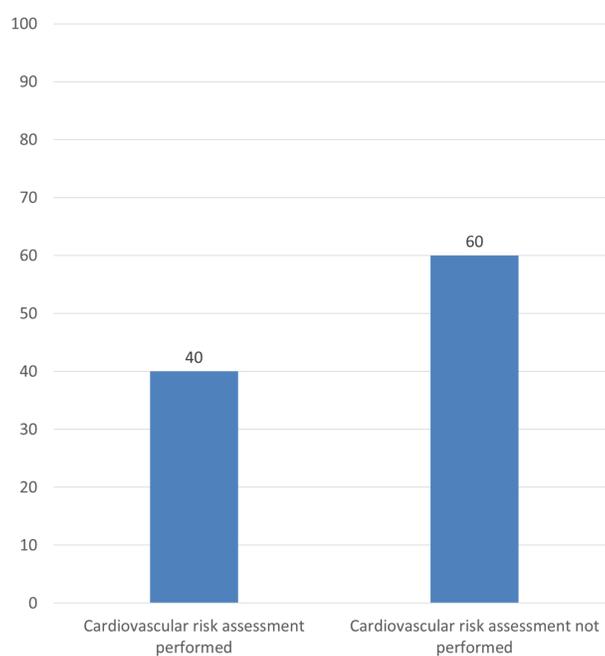
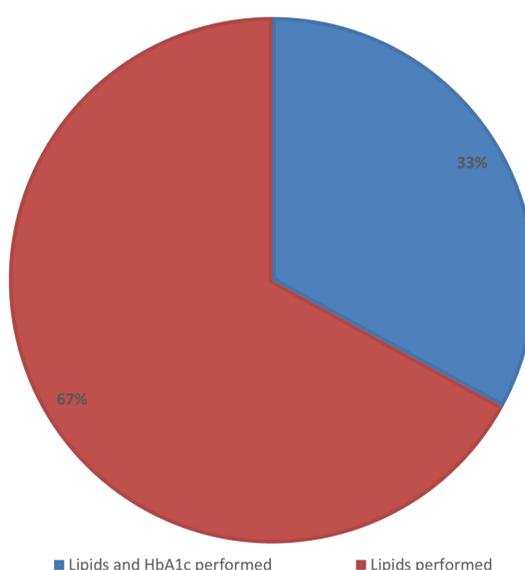


Figure 3: Of those who did not have a cardiovascular risk assessment performed the percentage who had lipids and HbA1c or lipids performed



Results

- No patient had a FRAX score performed in the previous 3 years.
- Figure 4: Percentage of patients assessed for a DEXA scan

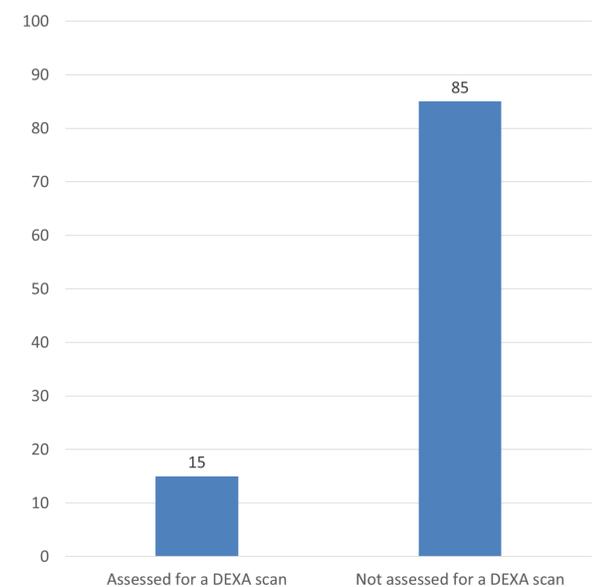


Figure 5



Conclusion

- To provide optimal care it is important to ensure patients are being managed according to current guidelines and this did not always occur in our service.
- To ensure management follows guidelines a HIV proforma has been designed which prompts for cardiovascular and fragility fracture risk assessment.
- Allied health professionals such as our HIV pharmacist could undertake the cardiovascular and fragility fracture risk assessments as it may also affect antiretroviral prescribing.

References

- BHIVA guidelines for the routine investigation and monitoring of adult HIV-1-positive individuals <https://www.bhiva.org/file/DqZbRxfzIYtLg/Monitoring-Guidelines.pdf>