



What are comorbidities?

- Comorbidity a physical and/or mental health condition in addition to HIV.
- Multimorbidity the coexistence of multiple (physical and/or mental) health conditions in addition to HIV.

Healthy aging, viewed as well-being in a broad social and structural environment, is championed in the WHO Model for Healthy Ageing

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How do comorbidities affect people living with HIV at different ages?

Efforts to improve understanding of multimorbidity in people living with HIV mostly focus on the presence of relatively well-defined conditions like chronic kidney disease and cancers among older individuals.

Despite viral suppression, people living with HIV often have multimorbidity at younger ages than those without HIV^{1,2,3}, due in part to chronic inflammation of the immune system and other social, behavioral and environmental determinants.⁴ Healthy aging, viewed as well-being in a broad social and structural environment, is championed in the WHO Model for Healthy Ageing, which promotes good health-related quality of life (HRQoL) at all ages.⁵

How do comorbidities impact on people living with HIV?

People living with HIV are at greater risk than the general population for having comorbidities.^{6,7} Comorbidities that are common among and contribute to poor HRQoL for people living with HIV include those listed to the right.

Some comorbidities are commonly monitored like tuberculosis and hepatitis C.^{8,9} However, some that are highly prevalent, such as cardiovascular and chronic kidney diseases, are often less monitored.

A higher number of comorbidities is correlated with lower quality of life, poorer health outcomes, and increased costs for health systems.^{10–13} More data and reporting are needed to know precisely which comorbidities are most prevalent among people living with HIV in any given country.



Mental Health Disorders

- Alcohol and drug use disorders
- Anxiety
- Depression
- Neurocognitive disorders
- Sleep disorders

Noncommunicable Diseases

- Cancers
- Cardiovascular diseases
- Hypertension
- Chronic kidney disease
- Osteoporosis

Communicable Diseases

- Hepatitis B
- Hepatitis C
- Tuberculosis
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Diabetes







How can patient-centred care improve multimorbidity outcomes?

People-centred or integrated care approaches can allow individuals to discuss and address issues that concern them beyond viral suppression (e.g. pain, sleep disturbances, depression, anxiety, uncertainty and stigma) which may consider to be more relevant to them, particularly as they age and their own needs change. While multimorbidity is challenging to address, for people living with HIV the health system provides a unique care opportunity as those on antiretroviral therapy tend to already have regular visits to their doctor.

What targets are there for person centred care for people living with HIV?

The new UNAIDS 2025 AIDS Targets call for 90% of people living with HIV and people at risk to be linked to people-centred and context-specific integrated services.¹⁴ Such an approach to care should include the monitoring of a patient's comorbidities, and this information should be aggregated to help countries improve the health and HRQoL of people living with HIV.



People-centered care

"People-centred care is an approach to care that consciously adopts individuals', carers', families' and communities' perspectives as participants and beneficiaries of, trusted health systems that are organised around the comprehensive needs of people rather than individual diseases, and respects social preferences. People-centred care also requires that patients have the education and support they need to make decisions and participate in their own care and that carers are able to attain maximal function within a supportive working environment." "Integrated health services are managed and delivered so that people receive a continuum of health promotion, disease prevention, diagnosis, treatment, disease-management, rehabilitation and palliative care services, coordinated across the different levels and sites of care within and beyond the health sector, and according to their needs throughout their life course."¹⁵

What are the next steps for addressing comorbidities of people living with HIV?

People living with HIV typically have more than one health condition in addition to HIV, and "multimorbidity" requires extra attention from the health system.



National and international health monitoring bodies should support the development of and data collection for indicators on common comorbidities among people living with HIV.



Priority should be given to prevention and diagnosis and early intervention in order to help minimise the impact of comorbidities on people living with HIV so as to maximise their HRQoL.

How are health systems addressing comorbidities challenges?

Many health systems in Europe and throughout the world do not collect and report data on comorbidities¹⁶ and, thus, remain unprepared to address the challenge of managing the long-term health of people living with HIV.¹⁷ In Europe, the monitoring of the implementation of the Dublin Declaration on Partnership to Fight HIV/AIDS in Europe and Central Asia 2020 collects comorbidity data only for HBV, HCV and tuberculosis.¹⁸

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