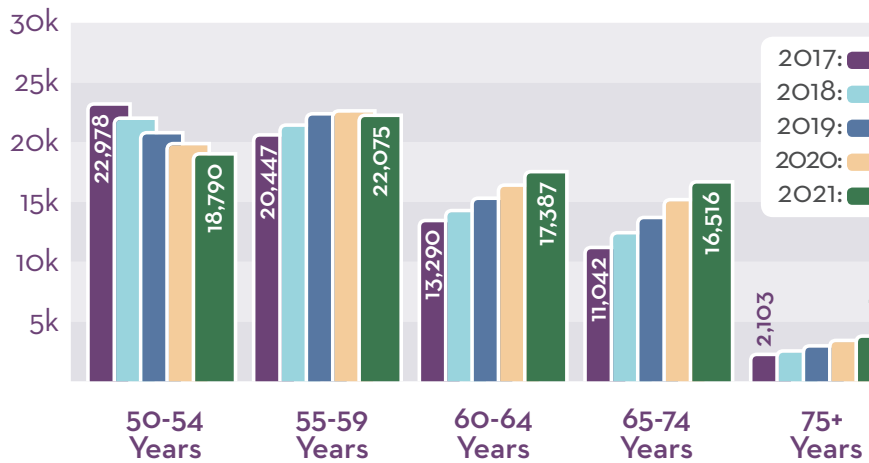


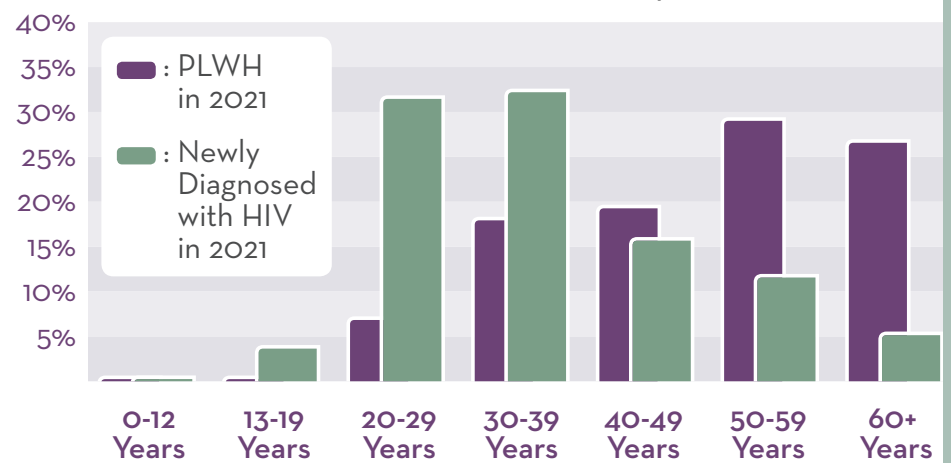
# HIV and AGING

In 2021, **56%** of People Living with HIV (PLWH) in California were **Age 50 Years or More**.<sup>1</sup>

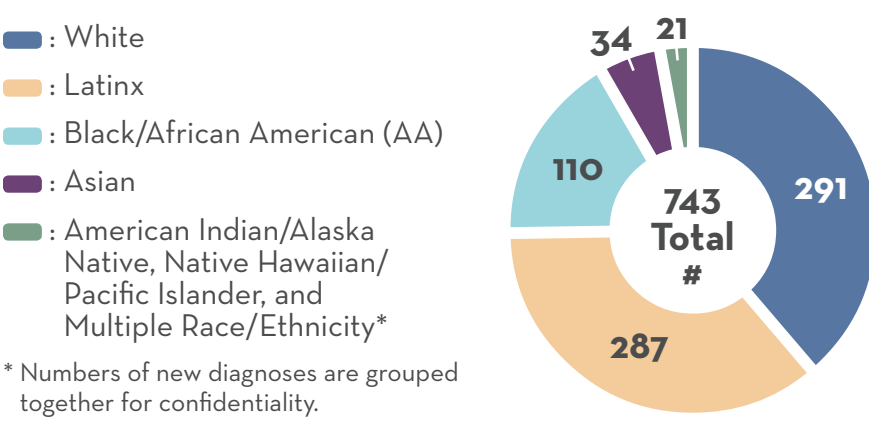
Number of People Age 50 Years or More Living with HIV in California, 2017-2021<sup>2</sup>



Age Distribution of People Newly Diagnosed with HIV and PLWH in California, 2021<sup>2</sup>



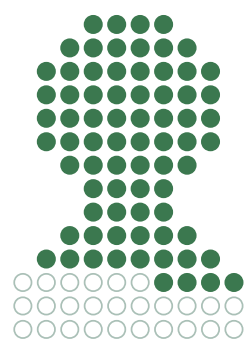
Race/Ethnicity Distribution of People Age 50 Years or More Newly Diagnosed with HIV in California, 2021<sup>2</sup>



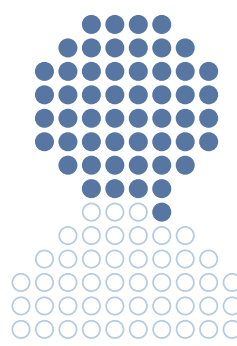
## QUICK HIV FACTS:

- According to the Centers for Disease Control and Prevention, in 2018, 35% of PLWH age 50 years or more (PLWH50+) in the U.S. already had late-stage HIV infection (AIDS) when they received a diagnosis.
- From 2017-2021, the proportion of PLWH50+ in California increased from 52% to 56%.<sup>1</sup>
- In 2021, 17% of newly diagnosed patients in California were age 50 years or more.<sup>1</sup>
- As people with HIV age, they are often prescribed multiple meds for chronic conditions that develop with aging. This increases their risk for drug-drug interactions with their HIV meds and drug toxicity.\*

For Every 100 People in California Living with HIV Age 50 or More:<sup>2</sup>



**74** received some HIV care in past 12 months

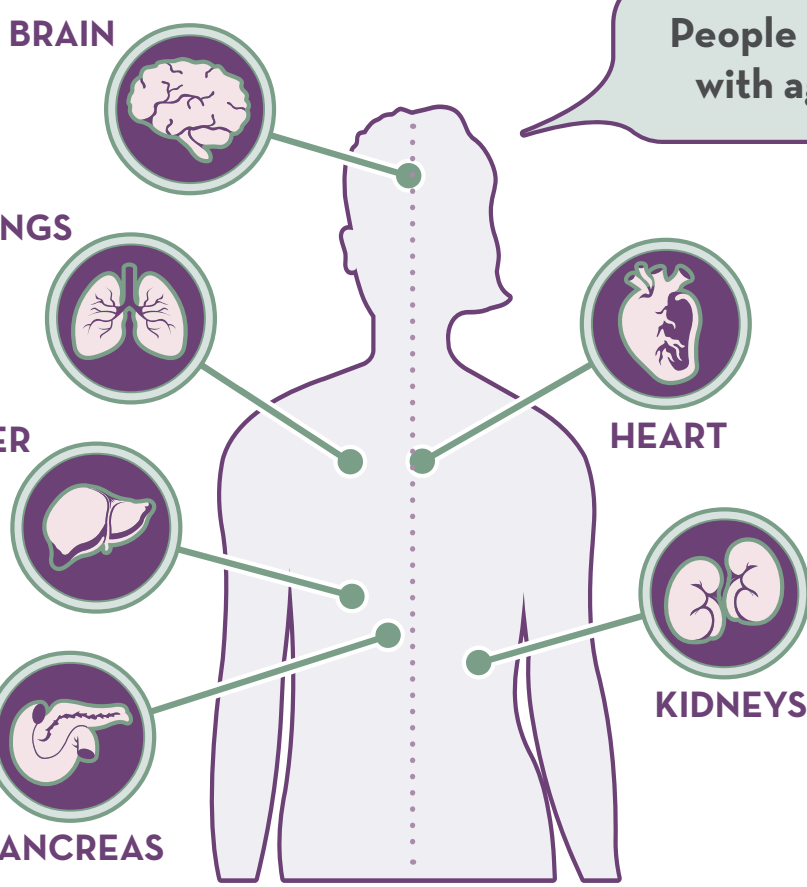


**53** were retained in HIV care in past 12 months



**67** were virally suppressed in past 12 months

World-wide, more than **2/3rds** of deaths among people with HIV are now attributable to **non-HIV associated causes**.<sup>3</sup>



People living with HIV begin experiencing health issues associated with aging **10 to 15 years earlier** than people not living with HIV.<sup>3</sup>

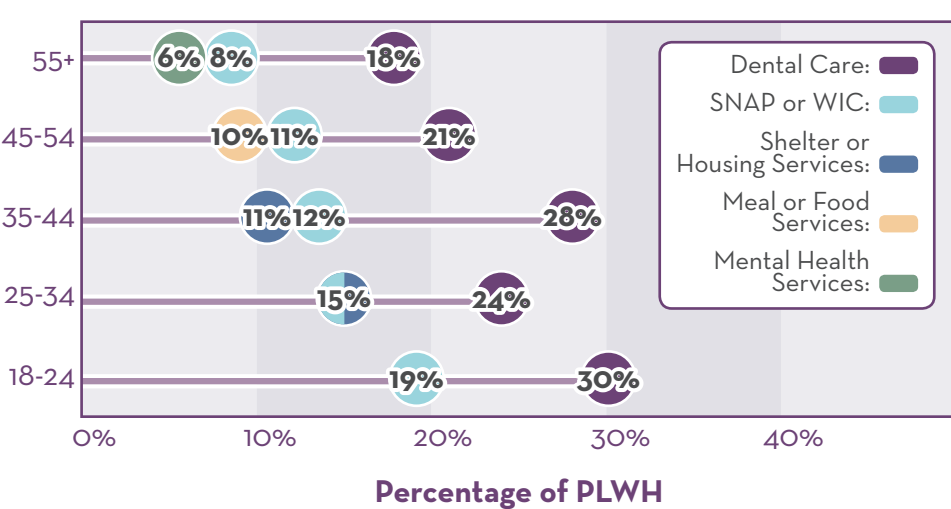
## In Comparison to the General U.S. Population:

- PLWH are **2x** as likely to have depression due to the stress associated with living with HIV.<sup>4</sup>
- PLWH have a higher rate of chronic obstructive pulmonary disease (COPD), with as many as **25%** estimated to have COPD.<sup>5</sup>
- PLWH are at a slightly higher risk for developing diabetes due to mitochondrial damage caused by older HIV treatments.<sup>5</sup>
- PLWH are estimated to have a **1.5 to 2-fold** increased risk of developing atherosclerotic cardiovascular disease (ASCVD). ASCVD is among the leading causes of hospitalizations, disability, and death among PLWH.<sup>5</sup>
- PLWH receiving an AIDS diagnosis are associated with a **4-fold** increased risk for developing liver cancer.<sup>5</sup>
- PLWH have a higher risk of acute and chronic kidney disease, with kidney disease in PLWH being associated with increased mortality.<sup>6</sup>

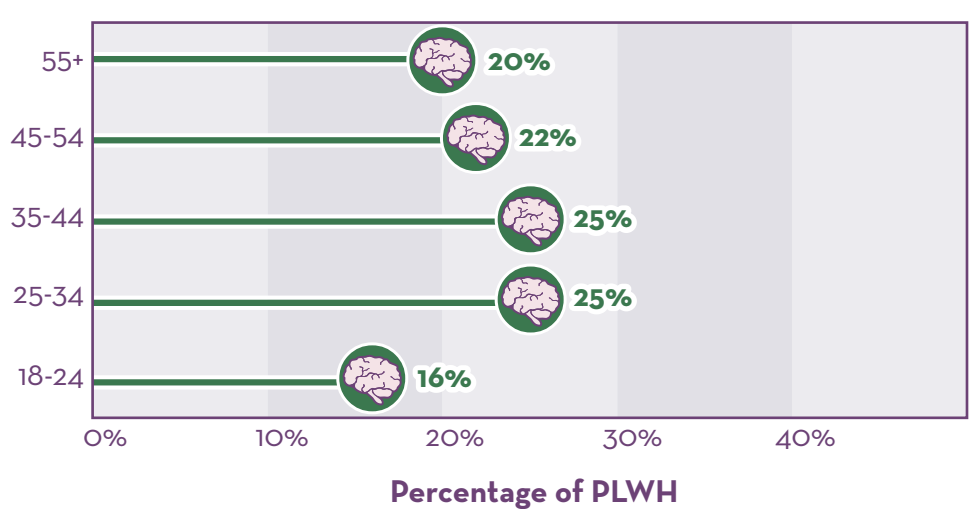
While co-morbidities are common in the general population and are typically associated with the aging process, the burden, diagnosis, clinical course, and therapy of co-morbidities are more complex due to living with HIV.<sup>7</sup>

## Core Support Services Needs of PLWH in the U.S.

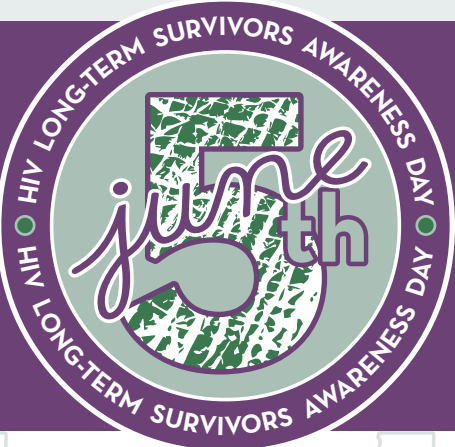
Top Three Services PLWH Reported Needing, But Not Receiving in 2019, By Age Group<sup>8</sup>



Percentage of PLWH Who Experienced Symptoms of Depression and Anxiety in 2019, By Age Group<sup>9</sup>



<sup>1</sup>[https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/California\\_HIV\\_Surveillance\\_Report2021\\_ADA.pdf](https://www.cdph.ca.gov/Programs/CID/DOA/CDPH%20Document%20Library/California_HIV_Surveillance_Report2021_ADA.pdf); <sup>2</sup>HIV/AIDS Surveillance eHARS data as of December 31, 2021; <sup>3</sup>Erlanson, K.M., & Karris, M.Y. (2019). HIV and Aging: Reconsidering the Approach to Management of Comorbidities. *Infectious disease clinics of North America*, 33(3), 769-786. <https://doi.org/10.1016/j.idc.2019.04.005>; <sup>4</sup><https://hivinfo.nih.gov/understanding-hiv/fact-sheets/hiv-and-mental-health>; <sup>5</sup><https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8815414/>; <sup>6</sup><https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5677039/>; <sup>7</sup>Gallant J, Hsue PY, Shreay S, Meyer N. Comorbidities Among US Patients With Prevalent HIV Infection - A Trend Analysis. *J Infect Dis*. 2017 Dec 19; 216(12):1525-1533. <https://doi.org/10.1093/infdis/jix518>; <sup>8</sup><https://www.cdc.gov/hiv/images/group/age/infographics/cdc-hiv-needed-ancillary-care-by-age-infographic-1920x1080.png>; <sup>9</sup><https://www.cdc.gov/hiv/images/group/age/infographics/cdc-hiv-depression-anxiety-by-age-infographic-1920x1080.png> \*Taking more than 5 prescription medications a day to treat multiple medical conditions is known as polypharmacy. Polypharmacy increases the risk of drug-drug interactions, drug toxicity, and non-adherence. For more information on polypharmacy, please see our link below.



**Long-Term Survivors** are PLWH50+ diagnosed in the early 1980s. They are more likely to have experienced loss of partners and friends. They lived through the fear, stigma, and discrimination that was widespread early in the epidemic. They are likely to have been prescribed HIV medications that had significantly more side-effects and toxicity than those used today. They may have had critical illnesses and AIDS-defining opportunistic infections, causing them to leave the workforce and rely on SSDI, leaving them with less retirement, pensions, and financial savings.

**June 5** recognizes their resilience and the need to continue addressing both the physical and mental challenges to their well-being due to decades of successful disease management.

For More Information: [www.cdph.ca.gov/programs/cid/doa/pages/hiv-aging.aspx](http://www.cdph.ca.gov/programs/cid/doa/pages/hiv-aging.aspx)

