

Aging with HIV: Surviving Another Pandemic in the Latino Community

Thursday, September 16
3 p.m. ET

Register at bit.ly/HIVAgingDay.



**Elena Rios, MD,
MSPH, FACP**
President and CEO
NHMA



**Douglas Drevets, MD,
DTM&H, FIDSA**
Chief of Infectious
Diseases
The University of
Oklahoma College of
Medicine



**Chris Duncombe, AM,
MD, PhD**
Chief Medical Officer
International
Association of
Providers of AIDS Care



**Ligia Peralta, M.D.,
F.A.A.P., F.S.A.H.M.**
President and CEO of Casa
Ruben Inc.
Fellow, Massachusetts
Institute of Technology



**Erica Aeed TeKampe,
MSW**
Program Director of HIV
Care Directions
Area Agency on Aging,
Region One



Richard L. Zaldivar
CEO & Founder
The Wall-Las Memorias
Project



AREA AGENCY ON AGING
REGION ONE, INCORPORATED



Welcome

Elena Rios, MD, MSPH, FACP

President & CEO

National Hispanic Medical Association

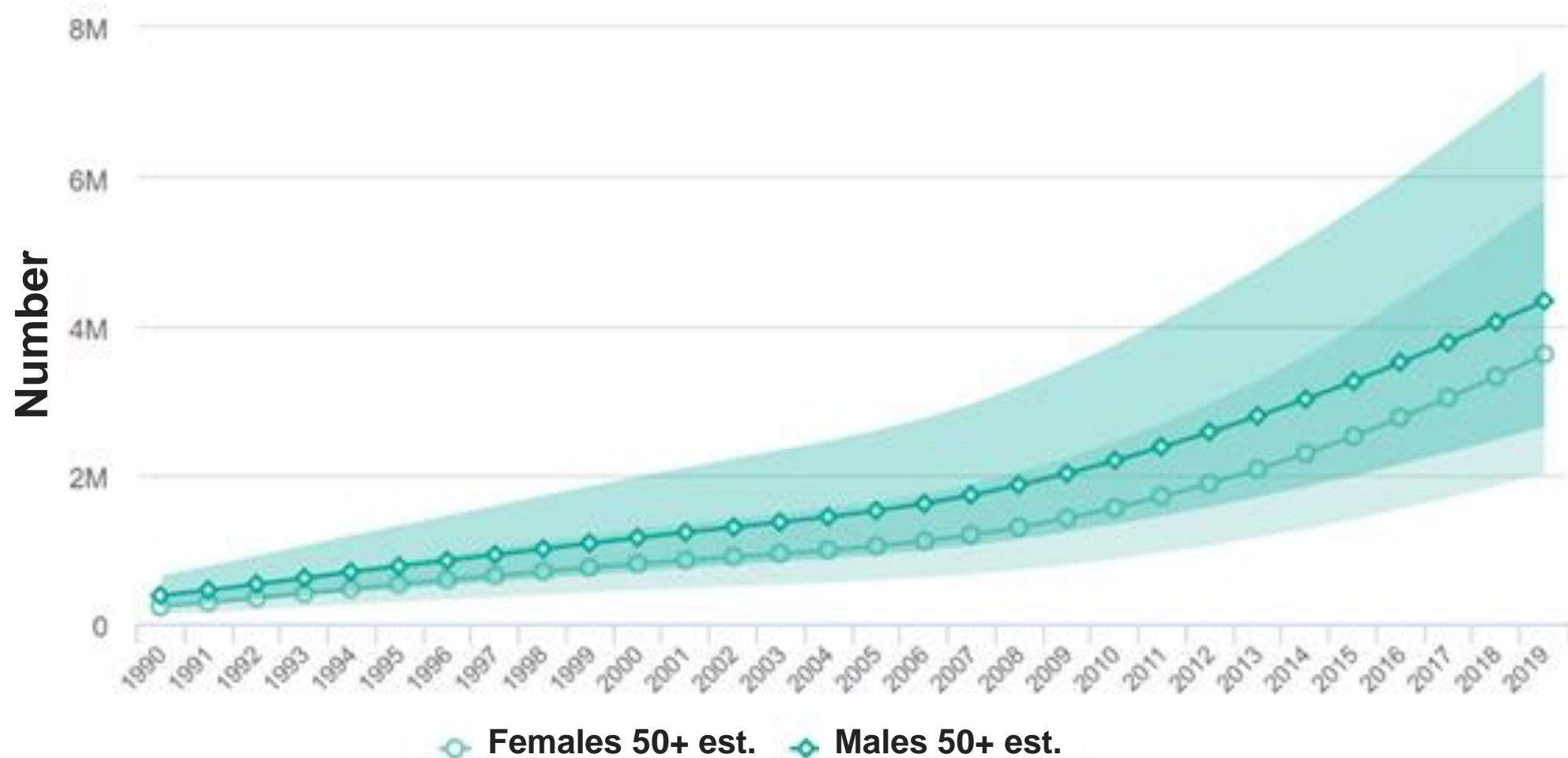
Housekeeping

- Presentations to be followed by Q and A discussion
- Type questions in Q and A box
- Microphones will be muted
- Recording & slides will be available next week at www.NHMAmd.org

Douglas A. Drevets, MD, DTM&H, FIDSA
Regents' Professor and Chief, Infectious Diseases
OUHSC, Oklahoma City, OK

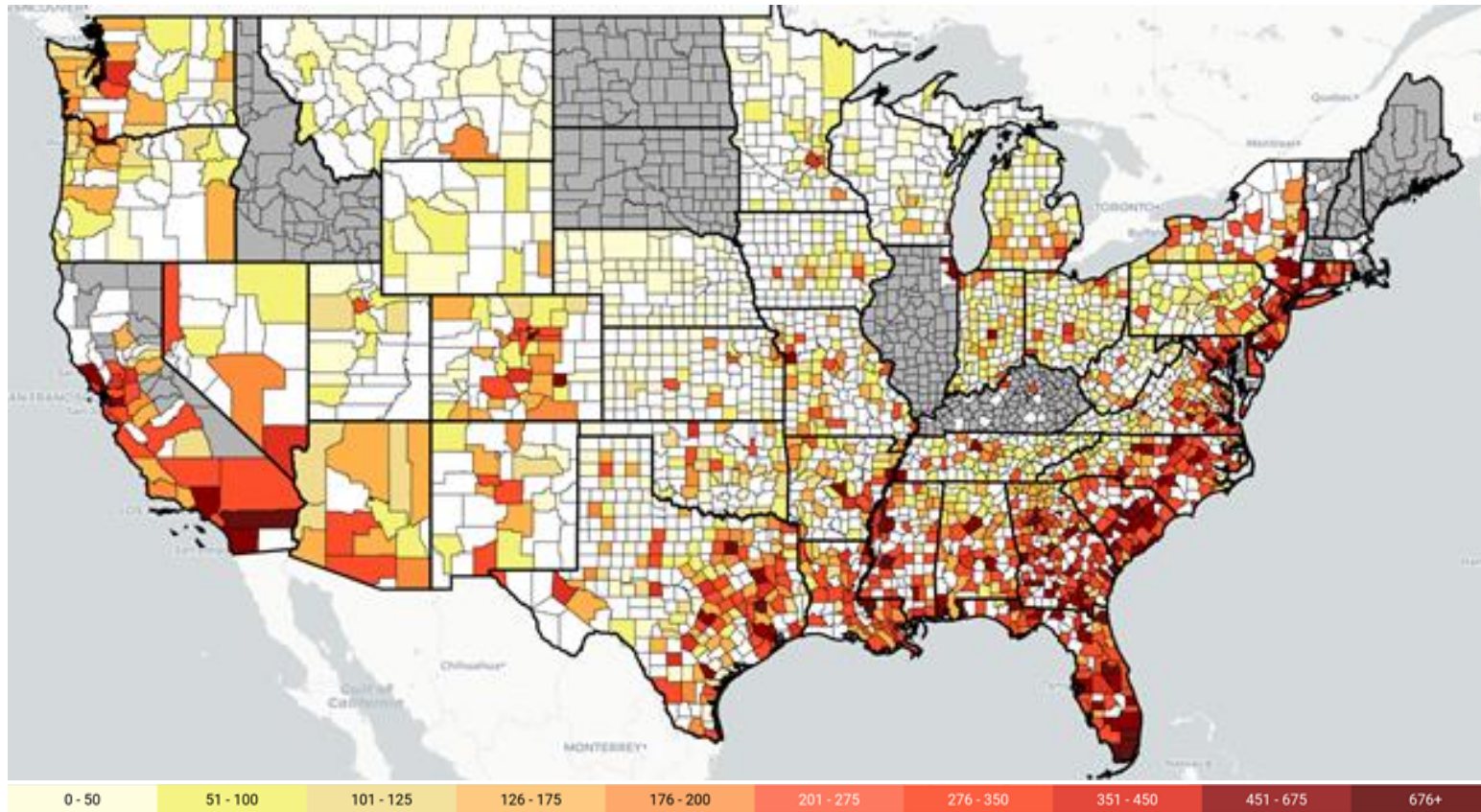
The greying of global HIV:

Increasing numbers of people aged 50+ living with HIV



Demographics of aging and HIV USA, 2018

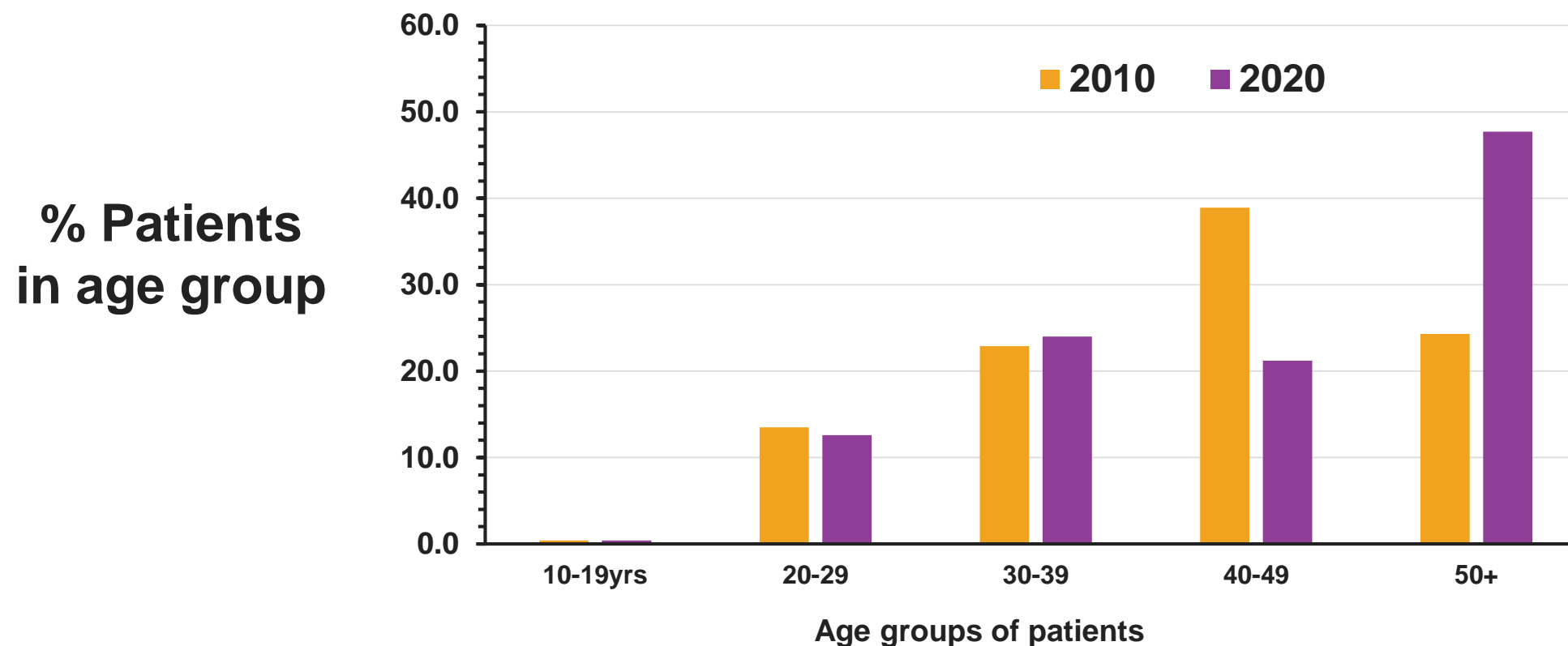
Rates of persons, aged 55+, living with HIV



People living with HIV

- 1,039,680 total
- 35.3% aged 55+

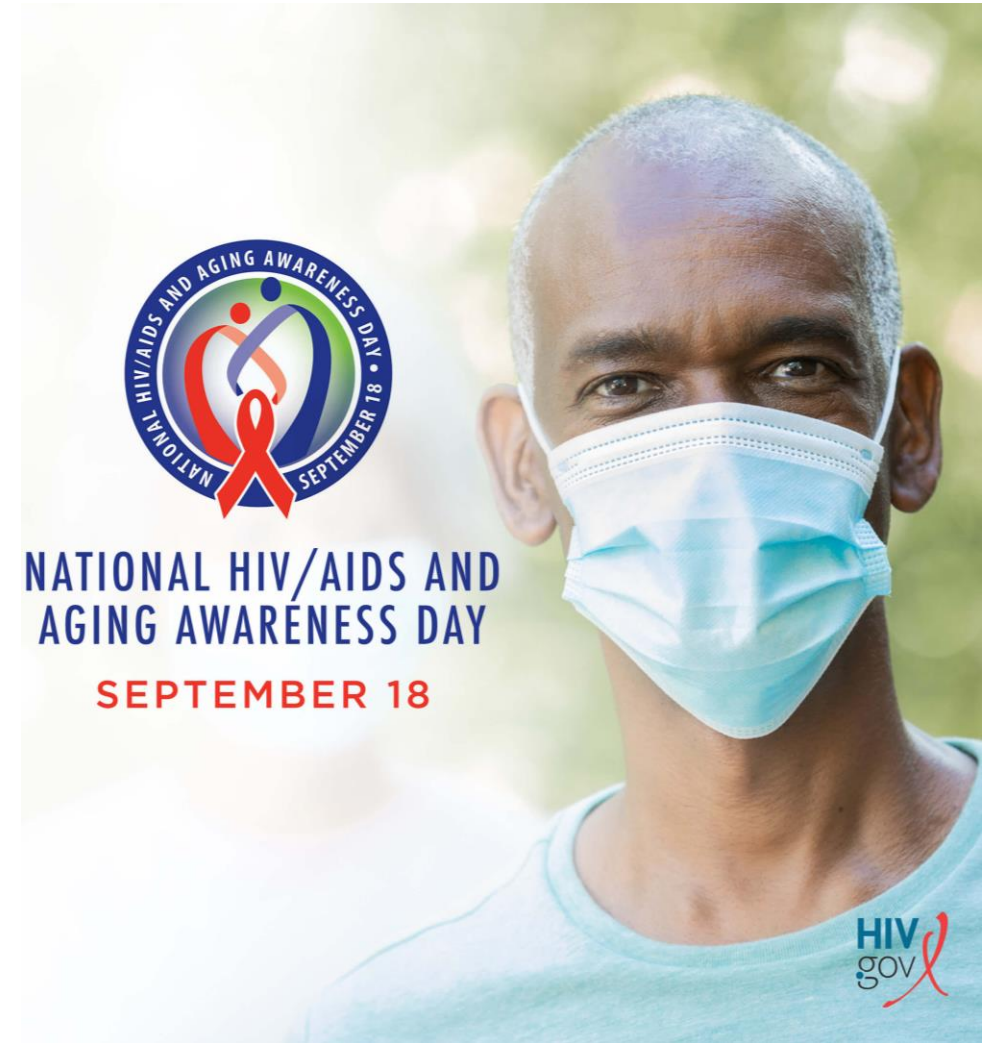
Changing demographics in our outpatient clinic



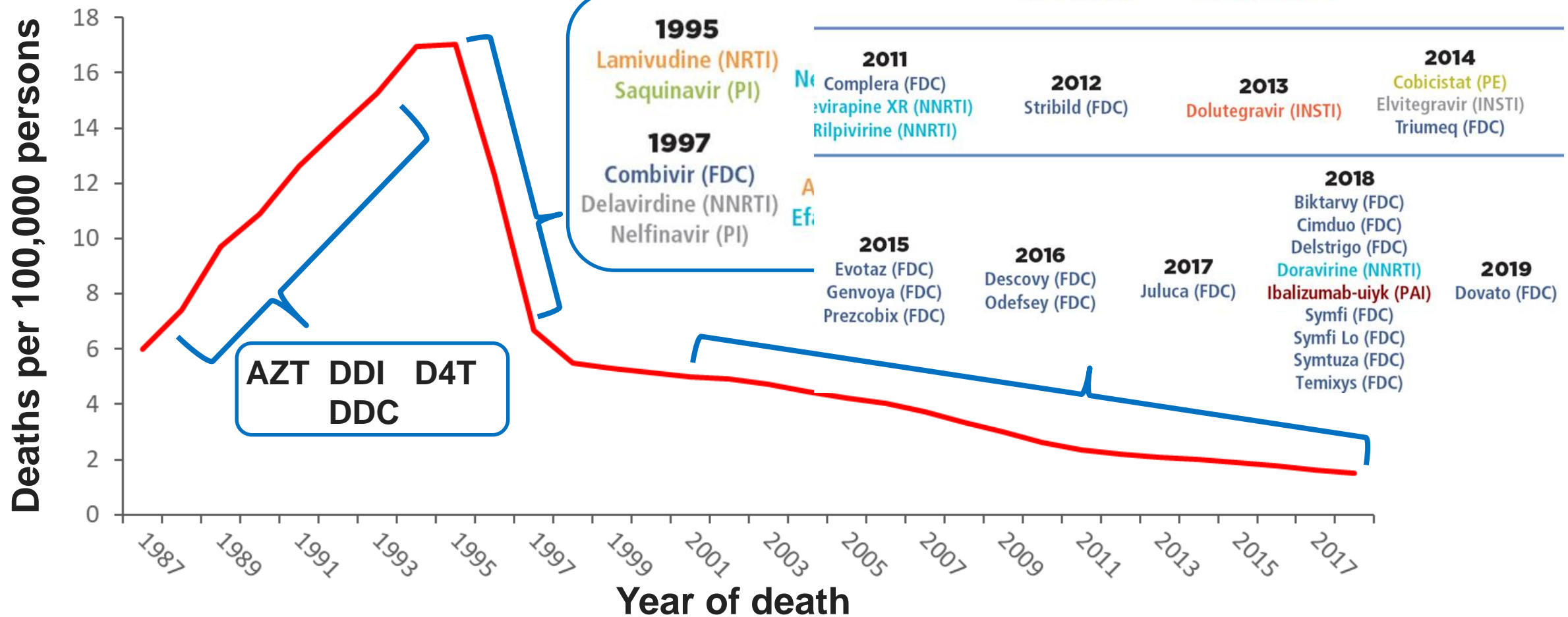
Aging with HIV:

Key topics to cover

- Drivers of the demographic shift
- Obvious consequences of aging with HIV
- Not so obvious consequences of aging with HIV

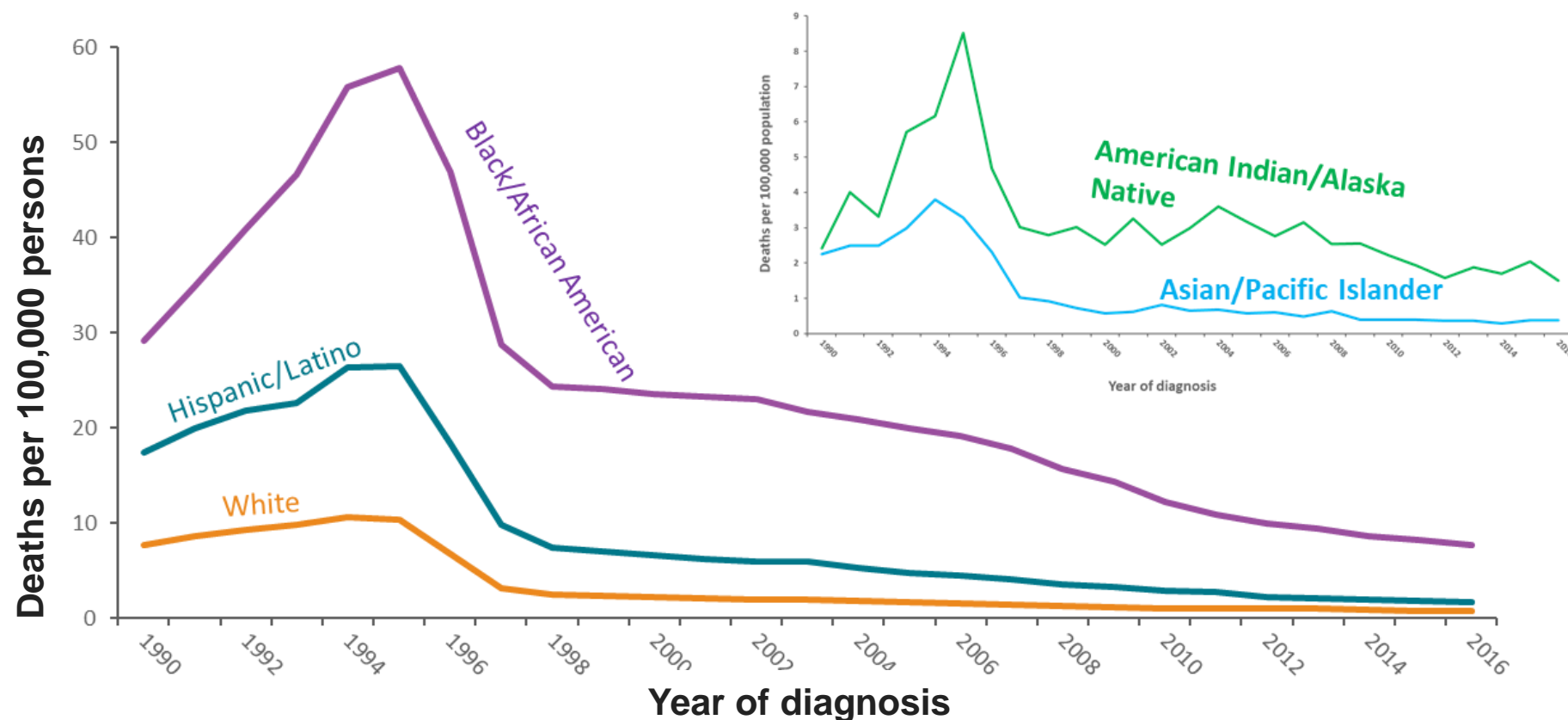


Better ART: Less death, more life

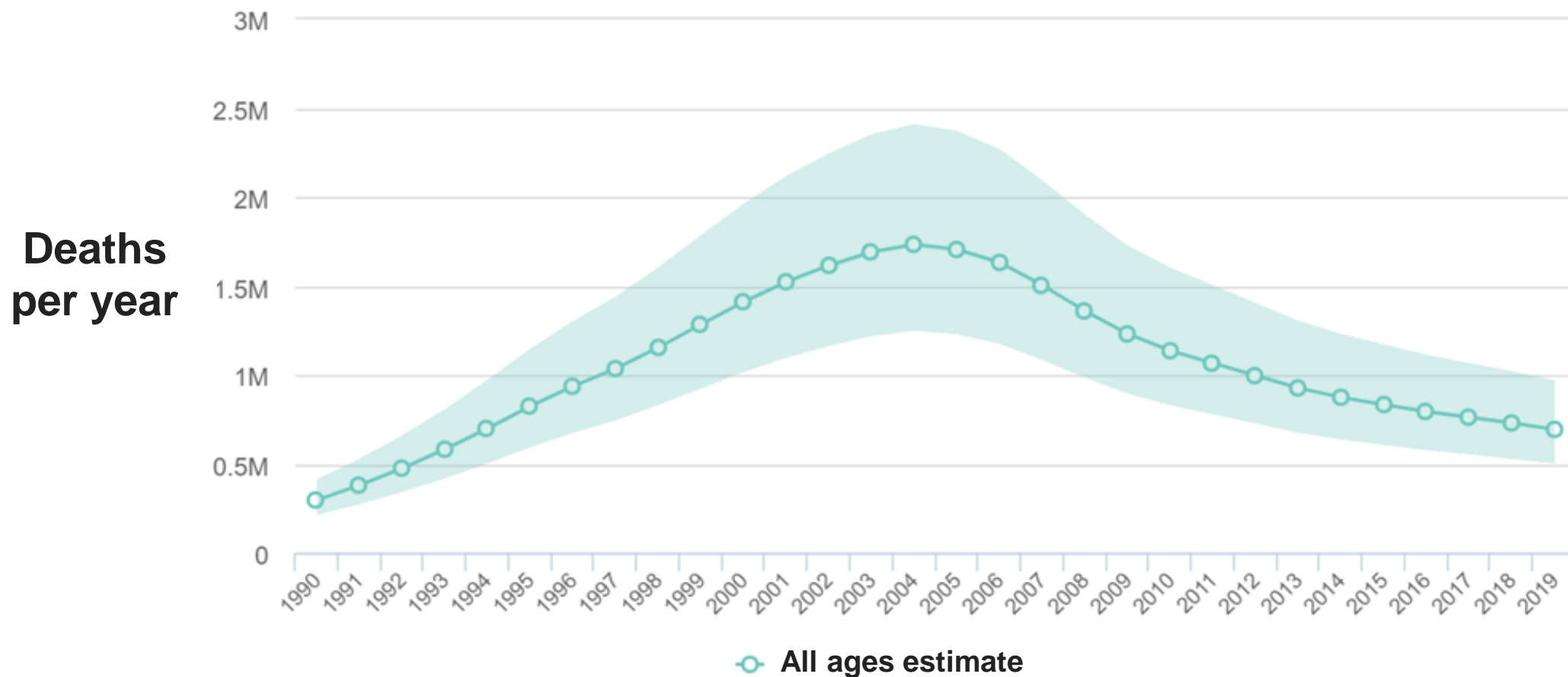


ART gains across race and ethnicity

Trends in Age-Adjusted Annual HIV Death Rates by Race/Ethnicity, 1990–2016 United States



Global decrease in AIDS – related deaths



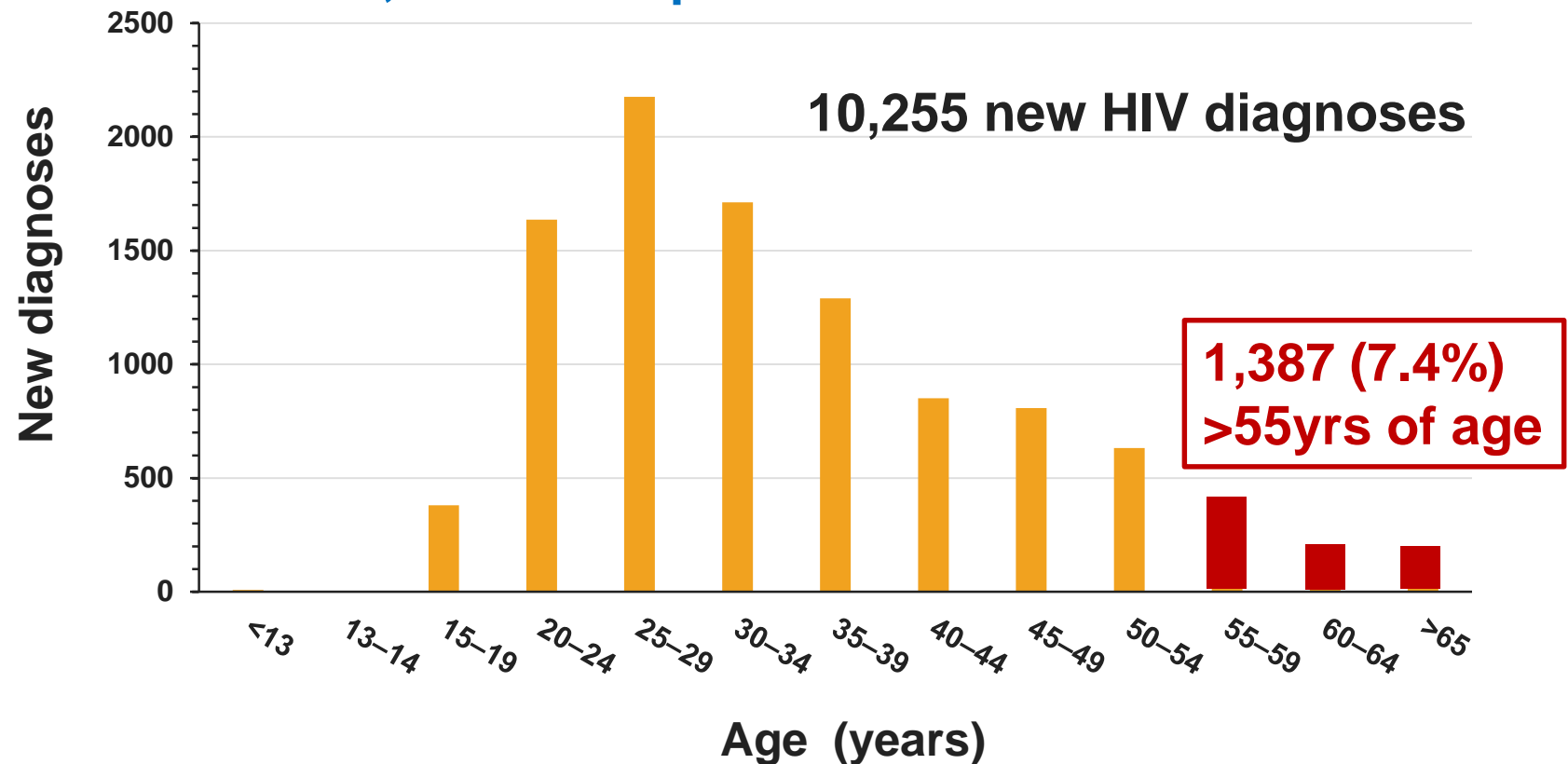
Aging with HIV:

Newly diagnosed HIV infection in older individuals

US data 2018

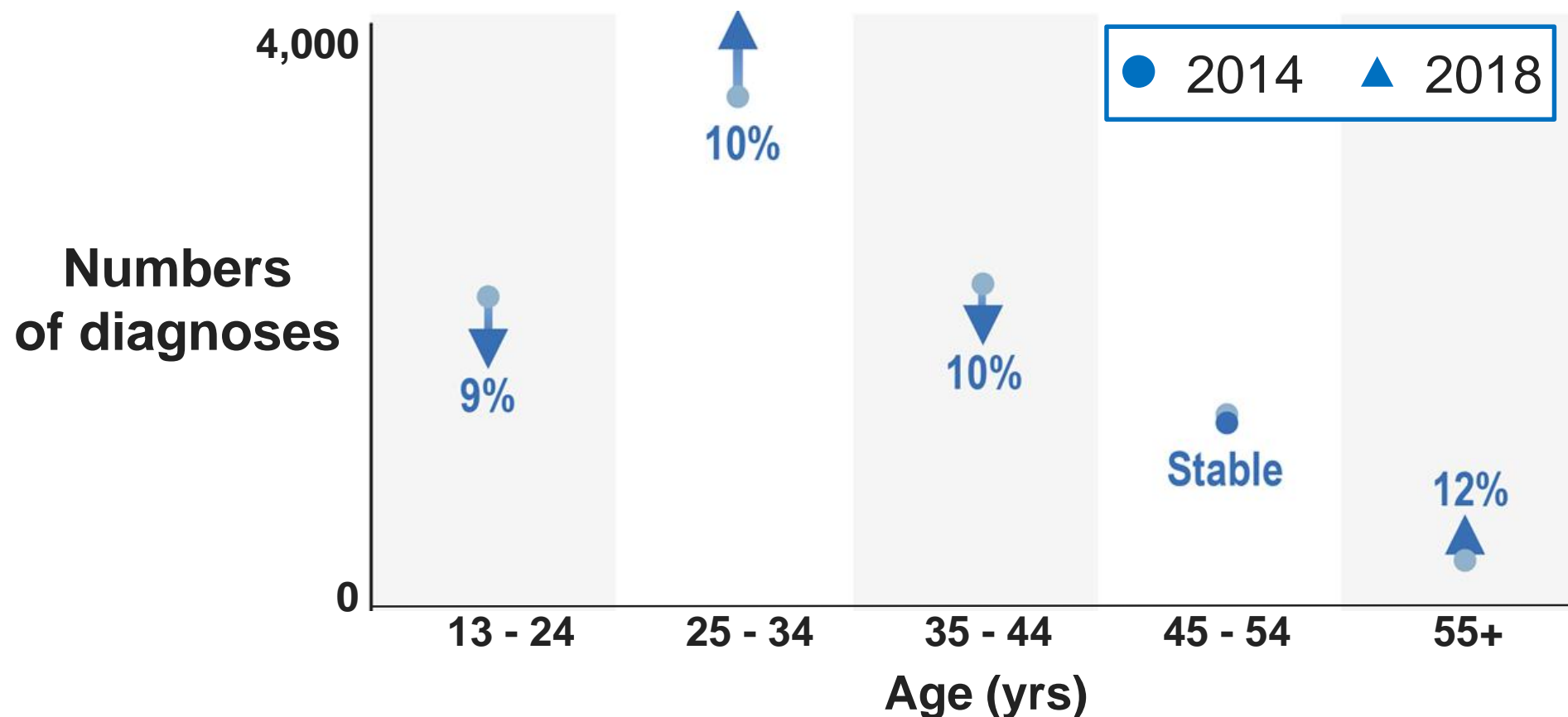
- 37,864 new HIV diagnoses
- 10.1% aged 55+

Diagnoses of HIV infection in Hispanic/Latinos 2018, US and dependent areas



Increasing HIV diagnoses in the 55+ demographic

HIV diagnoses among Hispanics/Latinos, US and dependent areas



HIV+ over the age of 55:

Advanced disease, but good response to ART

Proportion with a late HIV diagnosis

Aged 13-24: 9.1%

Aged 25-34: 16.0%

Aged 35-44: 25.7%

Aged 45-54: 33.2%

Aged 55+: 35.2%

Proportion virally suppressed

Aged 13-24: 60.3%

Aged 25-34: 60.8%

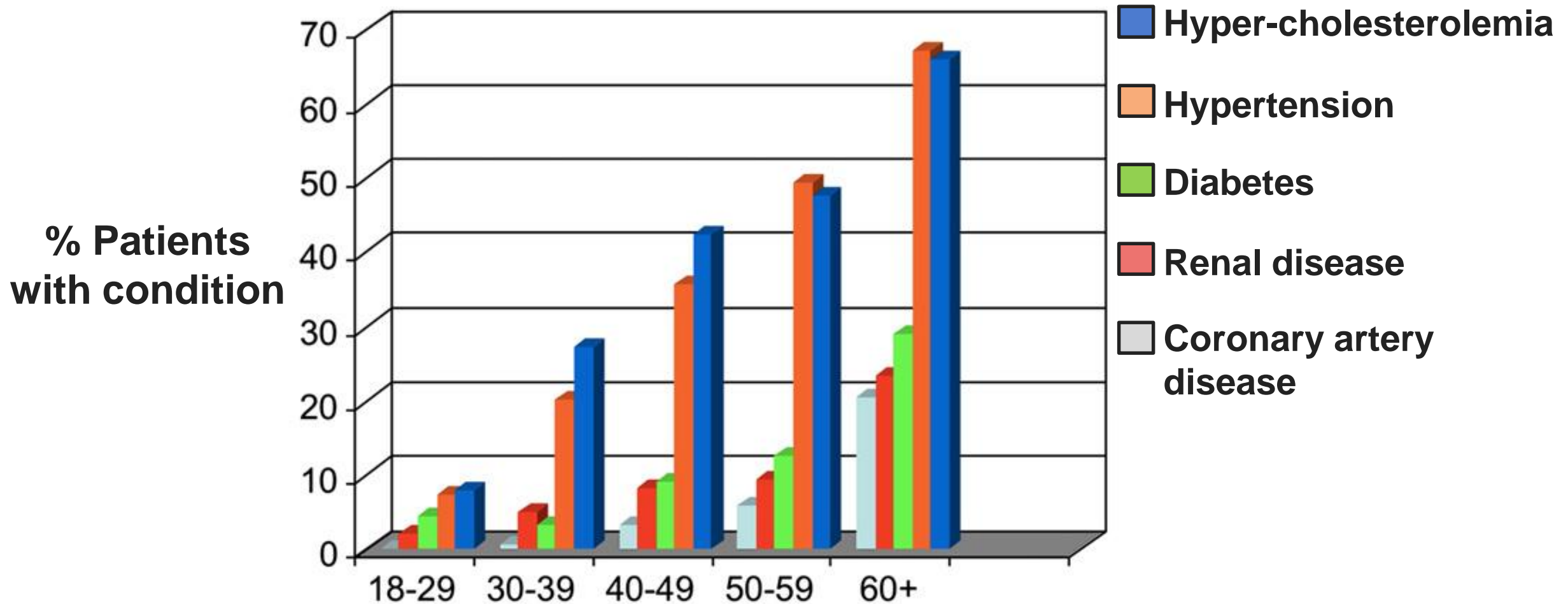
Aged 35-44: 62.4%

Aged 45-54: 66.2%

Aged 55+: 67.0%

- Need to be alert to testing older individuals
- Newly diagnosed older individuals should be reassured about their ability to respond to treatment

Obvious consequences of aging with HIV: Increased medical co-morbidities



Not so obvious consequences of aging with HIV: Increased risk of chronic disease onset

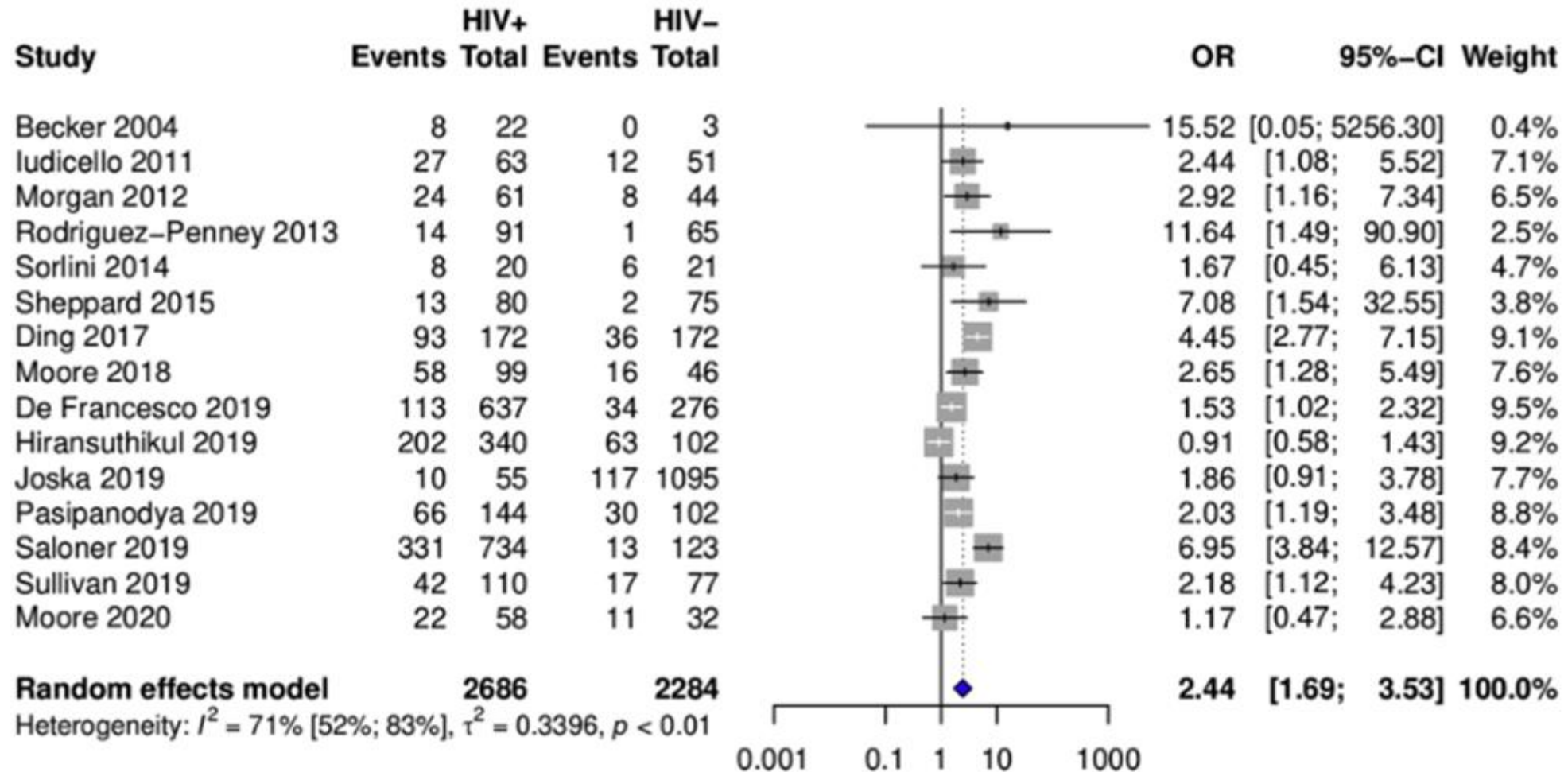
- National database of insurance enrollees aged 50 and above followed for at least one year between Jan. 2007 and Dec. 2016
- Evaluated the magnitude of association of HIV infection on developing 7 chronic conditions
 - Diabetes, HTN, stroke, cancers, lung disease, CVD, cognitive impairment.
- Controlled for:
 - Demographics, behavioral risk factors, chronic comorbidities
- Compared chronic disease risks between HIV+ and HIV- individuals

Association of HIV and elevated risk for chronic illness

2-year Interval	Diabetes	HTN	Stroke	Cancer	Lung Disease	Cardio-vascular Disease	Cognitive Impairment/Dementia

- HIV status is statistically significantly associated with higher rates for all chronic illnesses examined.
- Individuals diagnosed with HIV after age 50 are generally at higher risk of chronic disease onset compared with HIV- individuals, and even PLWHA who were diagnosed earlier.

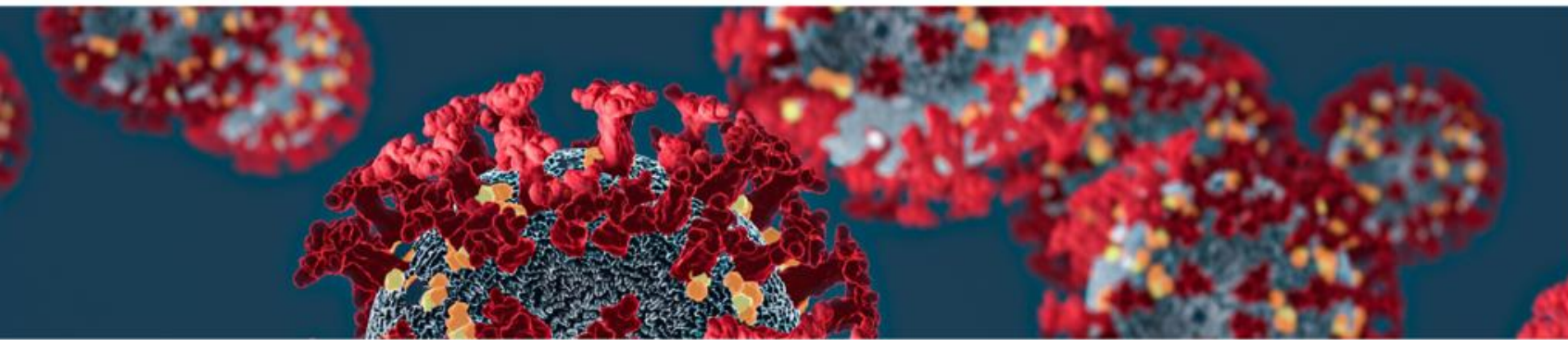
Association of HIV infection and cognitive impairment in older adults: A meta-analysis



Conclusions: HIV/AIDS & aging

- Increasing numbers of older HIV+ patients
 - Better ART and longer lifespan
 - Newly diagnosed infections
- Older individuals have more medical co-morbidities
- Patients diagnosed with HIV over 55yrs of age have more advanced disease, but respond well to ART
- HIV infection may accelerate development of common age-associated medical co-morbidities including cognitive impairment





Intersection of Aging, HIV and the COVID Pandemic

Dr. Chris Duncombe, Chief Medical Officer

International Association of Providers of AIDS Care

 @DrDuncombe



COVID – 19 and HIV

- With the pandemic now in its second year
- Learned a great deal about how COVID-19 impacts
 - People living with HIV
 - Older people
- Multiple case studies of COVID-19 and HIV
 - diverse geographies
- Clear data on COVID-19 and aging
- Variable messages on COVID-19 and HIV



Impact of age

Predictors of COVID-19 severity: A literature review

Benjamin Gallo Marin ¹, Ghazal Aghagoli ¹, Katya Lavine ¹, Lanbo Yang ¹, Emily J Siff ², Silvia S Chiang ^{3 4}, Thais P Salazar-Mather ^{1 5}, Luba Dumenco ^{1 5}, Michael C Savaria ¹, Su N Aung ⁶, Timothy Flanigan ⁶, Ian C Michelow ^{3 4}

Age >55

Natural history of COVID-19 and therapeutic options

Philippe Gautret ^{1 2}, Matthieu Million ^{1 3}, Pierre-André Jarrot ⁴, Laurence Camoin-Jau ^{1 3 5}, Philippe Colson ^{1 3}, Florence Fenollar ^{1 2}, Marc Leone ^{1 3 6}, Bernard La Scola ^{1 3}, Christian Devaux ^{1 3 7}, Jean Yves Gaubert ⁸, Jean-Louis Mege ^{1 3}, Joana Vitte ^{1 3}, Cléa Melenotte ^{1 3}, Jean-Marc Rolain ^{1 3}, Philippe Parola ^{1 2}, Jean-Christophe Lagier ^{1 3}, Philippe Brouqui ^{1 3}, Didier Raoult ^{1 3}

Age >65

Risk factors for mortality in patients with Coronavirus disease 2019 (COVID-19) infection: a systematic review and meta-analysis of observational studies

Age >65

Mohammad Parohan ¹, Sajad Yaghoubi ², Asal Seraji ³, Mohammad Hassan Javanbakht ¹, Payam Sarraf ⁴, Mahmoud Djalali ¹

A systematic review and meta-analysis of published research data on COVID-19 infection fatality rates

Gideon Meyerowitz-Katz ¹, Lea Merone ²

Age >65

Incidence, clinical features, and outcomes of COVID-19 in Canada: impact of sex and age

Jacob O'Brien ¹, Kevin Y Du ¹, Chun Peng ^{2 3}

Age >60

Impact of age on duration of viral RNA shedding in patients with COVID-19

Chenliang Zhou ¹, Tianfang Zhang ², Haotang Ren ², Shanshan Sun ², Xia Yu ², Jifang Sheng ², Yu Shi ², Hong Zhao ²

23 days ≤ , 34 days > 70



Impact of HIV – Clinical case studies

Clinical Case Series

Barcelona (1)

534 hospitalized patients
with COVID-19

5 co-infected with HIV

Barcelona (2)

PLHIV Cohort (n=5683)

53 with COVID-19

Istanbul

Among a hospital cohort of
1,224 PLHIV

4 confirmed with COVID-19

Milan

Retrospective chart
review of 47 HIV/COVID-19
co-infection

Germany

Retrospective chart
review of 33 HIV/COVID-
19 co-infection

Just Published

Atlanta
Detroit
Rhode Island



RISK OF COVID-19 DEATH AMONG PEOPLE WITH HIV: A POPULATION COHORT ANALYSIS FROM THE WESTERN CAPE PROVINCE, SOUTH AFRICA

Western Cape Department of Health, South Africa

Corresponding authors

Mary-Ann Davies (mary-ann.davies@westerncape.gov.za) and Andrew Boule (andrew.boule@westerncape.gov.za)

Virtual Fast-Track Cities 2020 • September 9-10, 2020

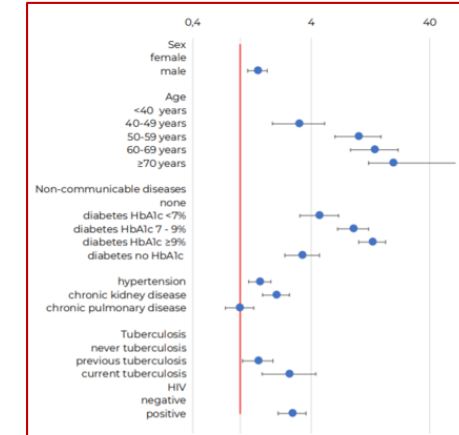


Western Cape Mortality Data

- 13 000 COVID-19 cases
- 435 deaths
- ~ Twice the risk of COVID-19 death
- PLHIV
 - Irrespective of viral suppression or ART use

Adjusted hazard ratio [aHR] for death in COVID-19 cases: 1.78; 95% confidence interval [CI]: 1.38; 2.29

- This increased risk is modest
 - associated with other risk factors



HIV and risk of COVID-19 death: a population cohort study from the Western Cape Province, South Africa. Western Cape Department of Health in collaboration with the National Institute for Communicable Diseases, South Africa. Mary-Ann Davies

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NHS England Mortality Data

- OpenSAFELY is a new data analytics platform in England
 - Address COVID-19 related questions real-time
 - As country re-opens
 - 40% of the English population
- 17.3 million adults
- 27,480 (0.16%) had HIV

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NHS England Mortality Data

- People living with HIV
 - Nearly three-fold higher risk of dying from COVID-19
 - Those without HIV
 - Adjusting for age and sex
- HR=2.90 95% CI 1.96-4.30

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Elevated COVID-19 outcomes among persons living with diagnosed HIV infection in New York State: Results from a population-level match of HIV, COVID-19, and hospitalization databases

[James M. Tesoriero](#), [Carol-Ann E. Swain](#), [Jennifer L. Pierce](#), [Lucila Zamboni](#), [Meng Wu](#), [David R. Holtgrave](#), [Charles J. Gonzalez](#), [Tomoko Udo](#), [Johanne E. Morne](#), [Rachel Hart-Malloy](#), [Deepa T. Rajulu](#), [Shu-Yin John Leung](#), and [Eli S. Rosenberg](#)

Version 1. medRxiv. Preprint. 2020 Nov 6.

doi: 10.1101/2020.11.04.20226118; 10.1101/2020.11.04.20226118

- New York State (NYS) HIV surveillance registry
 - March – June 2020
- Among 108,062 PLWH in NYS
 - 2,988 were diagnosed with COVID-19

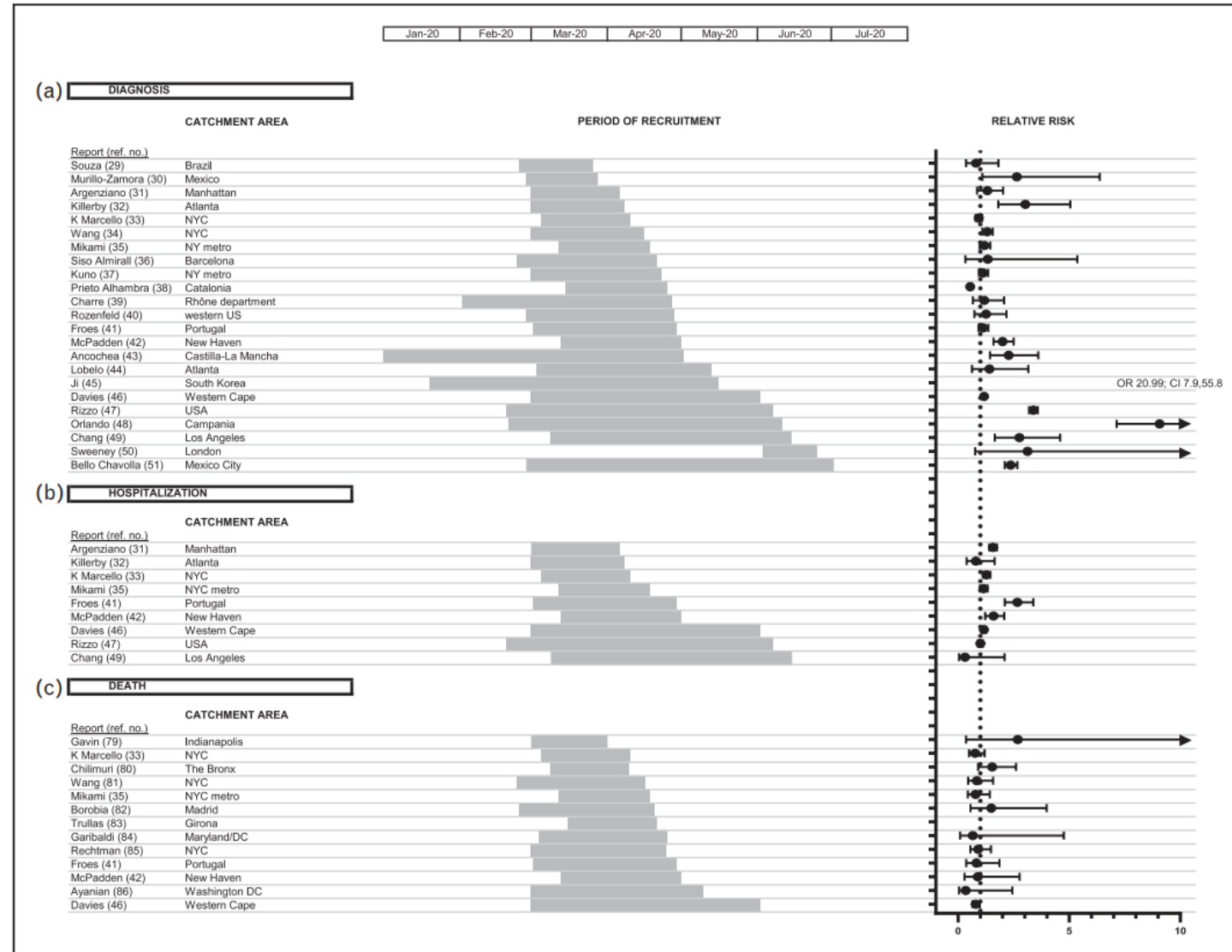
HIV Status	Diagnosed with COVID-19	Hospital admission	Death
Positive	No difference	2.61 fold ↑	2.55 fold ↑
Negative			

The first 6 months of HIV-SARS-CoV-2 coinfection: outcomes for 6947 individuals

Rowena Johnston

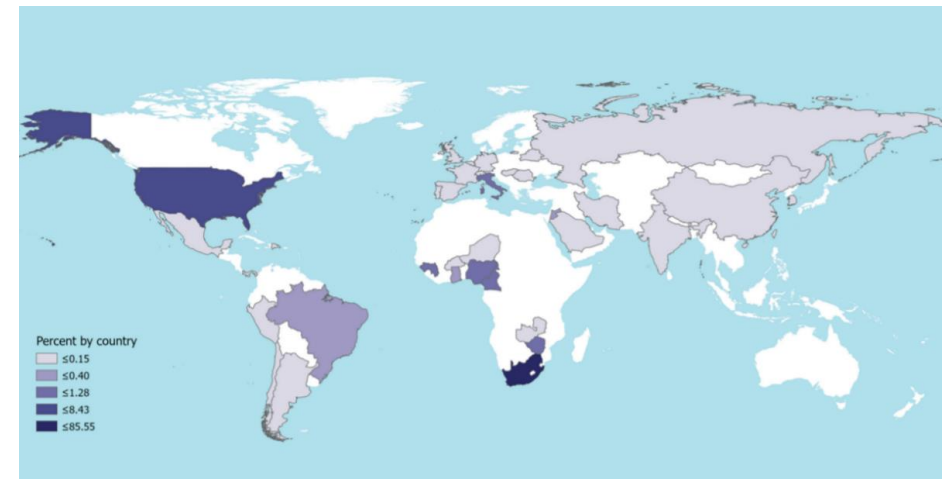
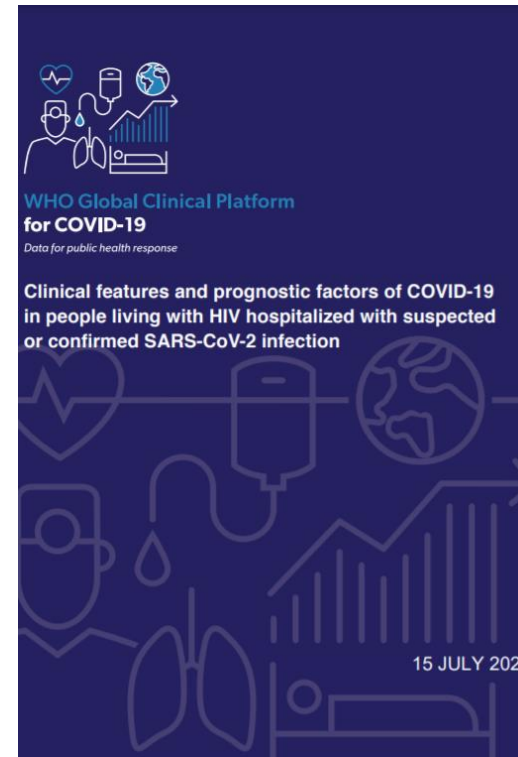
- Analysed relative risks (RR)
 - Diagnosis
 - Hospitalization
 - Death
- 31 published studies
- 6,947 PLWH**

Taken together, comorbidities appear to play a larger role than HIV-specific variables in outcomes



WHO Global Clinical Platform Report

- 37 countries
- HIV infection is a significant risk factor
 - severe COVID-19 presentation at hospital admission
 - in-hospital mortality





Coronavirus Vaccination and HIV



Have PLHIV been Enrolled in Coronavirus Vaccine Studies?

Pfizer BioNTech ¹	<ul style="list-style-type: none">• 196 PLHIV enrolled• Not included in <i>NEJM</i>• Per protocol safety results will be analyzed separately
Modern ²	<ul style="list-style-type: none">• 179 individuals with stable HIV disease were• Included in the phase 3 trial• Safety data on this group have not yet been separately reported
Oxford/AstraZeneca ³	<ul style="list-style-type: none">• Recruited 160 people with HIV in the UK and South Africa• Confirmed HIV infection, CD4 count > 350, undetectable viral load, taking ART• Not included in the main data set published in <i>The Lancet</i>

1. Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine Fernando P. Polack, Stephen J. Thomas, Nicholas Kitchin et.al December 31, 2020 N Engl J Med 2020; 383:2603-2615

2. Moderna COVID-19 Vaccine COVID-19 Real Time Learning Network. CDC and IDSA Last updated Jan 6 2021

3. Have COVID-19 vaccines been tested in people with HIV? NAM AIDSMAP January 2021 <https://www.aidsmap.com/about-hiv/have-covid-19-vaccines-been-tested->



COVID-19 vaccines in people with HIV

- **Earlier this year two research groups**
 - **Reported no differences in immune responses**
 - **Oxford/AstraZeneca vaccine**
 - **Between people living with HIV and people without HIV**
- More recent data from JHU
- Pfizer and Moderna COVID-19 vaccines
 - produce strong antibody responses
 - in people with HIV after two doses



COVID-19 vaccines in people with HIV

Study 1

- 5 people with HIV received Pfizer
- 9 people received Moderna
- Median age of **62 years**
- Antibody responses
 - Similar to HIV-negative people

Study 2

- 12 people with HIV
- 17 HIV-negative
- Pfizer vaccine
- Median age **52**
- Antibody responses
 - Similar in then 2 groups



COVID-19 vaccines in people with HIV

- COVID -19 Vaccines
- Safe and effective
- Small studies
- People with HIV
- Including older age groups



Impact of COVID-19 Pandemic on HIV Screening, Treatment and Care:

A case, a Program and a Call to Action

Ligia Peralta, MD, MBA, FAAP, FSAHM, AAHIVM

**President Casa Ruben Foundation, Massachusetts Institute of Technology Sloan Fellow in
Innovation and Global Leadership**

NHMA September 16, 2021

A case



Disproportionate Impact of COVID-19 and HIV on Racial and Ethnic Minority Communities

Symptoms: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/COVID19-symptoms-24x36-en.pdf>

The COVID-19 Pandemic: A threat to public health gains

System:
Disruption
of HIV
Services
and Focus
on the
Pandemic -
COVID-19

Missed Opportunity for HIV
testing and prevention

Missed opportunity for HIV
Rapid ART (Reducing morbidity,
mortality, transmission)

Missed opportunity for
linkage to comprehensive
primary care

Disparities in Special Populations- Immigrants

This case illustrates:

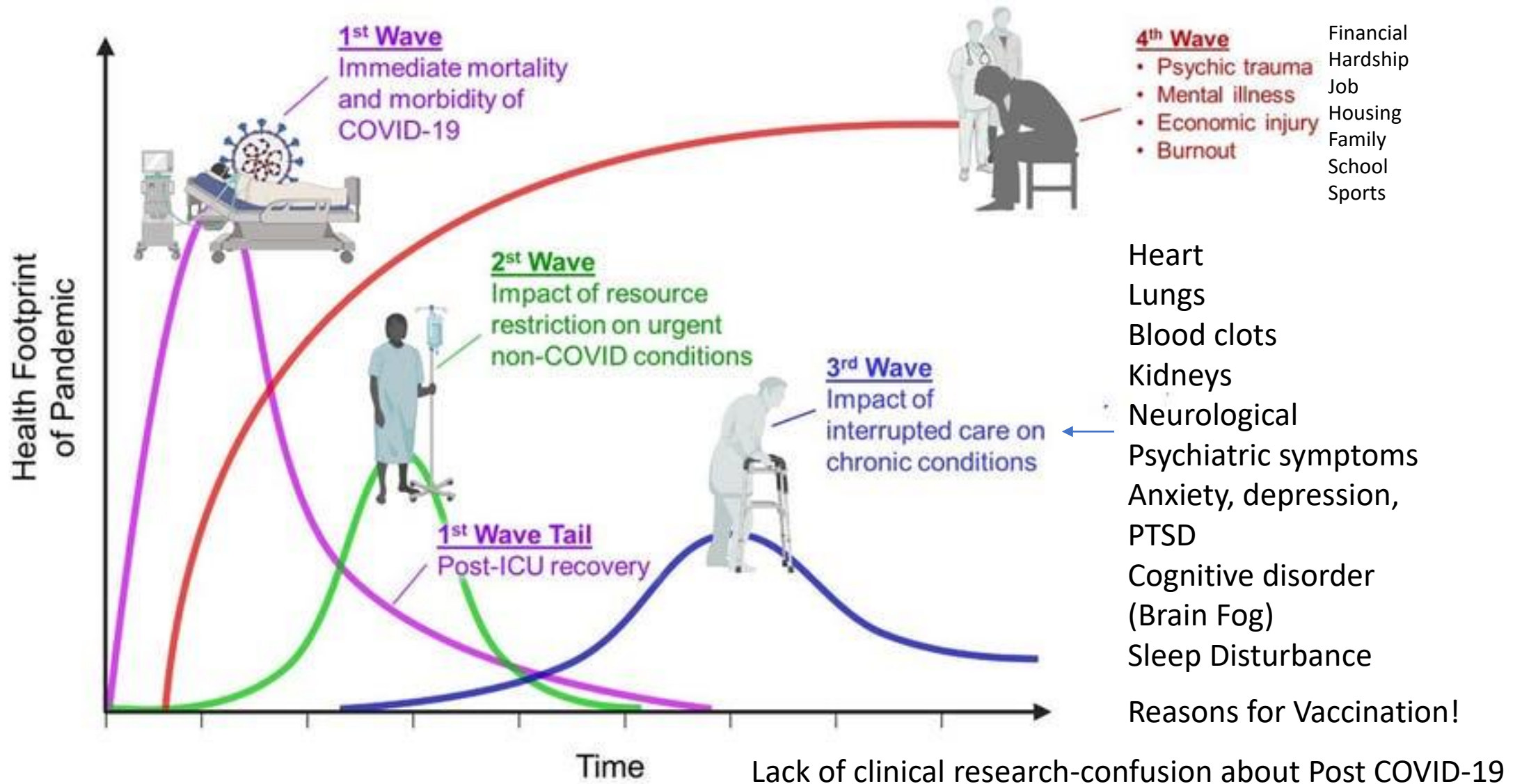
- Disease burden
- Fragmented care
- Trouble paying for medical care
- Job loss

Disparities in Special Populations

Federal Policies and Immigration Status

- Barriers to federally funded benefit program
- Lower utilization of Care
- Lack of affordable care

Post COVID-19 Conditions –3rd-4th waves



Post COVID Conditions (Long Covid)

- Dyspnea or increased respiratory effort
- Fatigue
- Post-exertional malaise and/or poor endurance
- Impaired daily function and mobility
- Cough
- Chest pain
- Headache
- Fever
- Diarrhea
- Pain
- Myalgia
- Rash (e.g. urticaria)
- Menstrual Cycle irregularities
- * [Post-exertional malaise \(PEM\)](#) is the worsening of symptoms following even minor physical or mental exertion, with symptoms typically worsening 12 to 48 hours after activity and lasting for days or even weeks.

Abdominal pain	Insomnia and other sleep difficulties	Palpitations and/or tachycardia
Lightheadedness	Cognitive impairment “Brain Fog”	Arthralgia
Paresthesia	Mood changes	Anosmia or dysgeusia

Worsen of Mental Health Problems for PLHIV

- The disruption in the continuity of care for PLHIV, increased social isolation and the psychological stress of living through a pandemic are all factors that could worsen the mental health problems that PLHIV are at a higher risk of experiencing.

A Promising Solution. Ending the HIV Epidemic in the US (EHE)

EHE Jurisdiction plan to:

Increase testing and self
testing, targeted testing
in non health care
settings

Expand linkage to care
and treatment initiation
<7 days

Expand PrEP linkage
programs,

or expand Syringe
Services Programs
(SSPs) with innovative
delivery options
(mobile)

Address the syndemic
of HIV/STI/Viral
hepatitis

Address the opioid
crisis

Improve HIV prevention
education

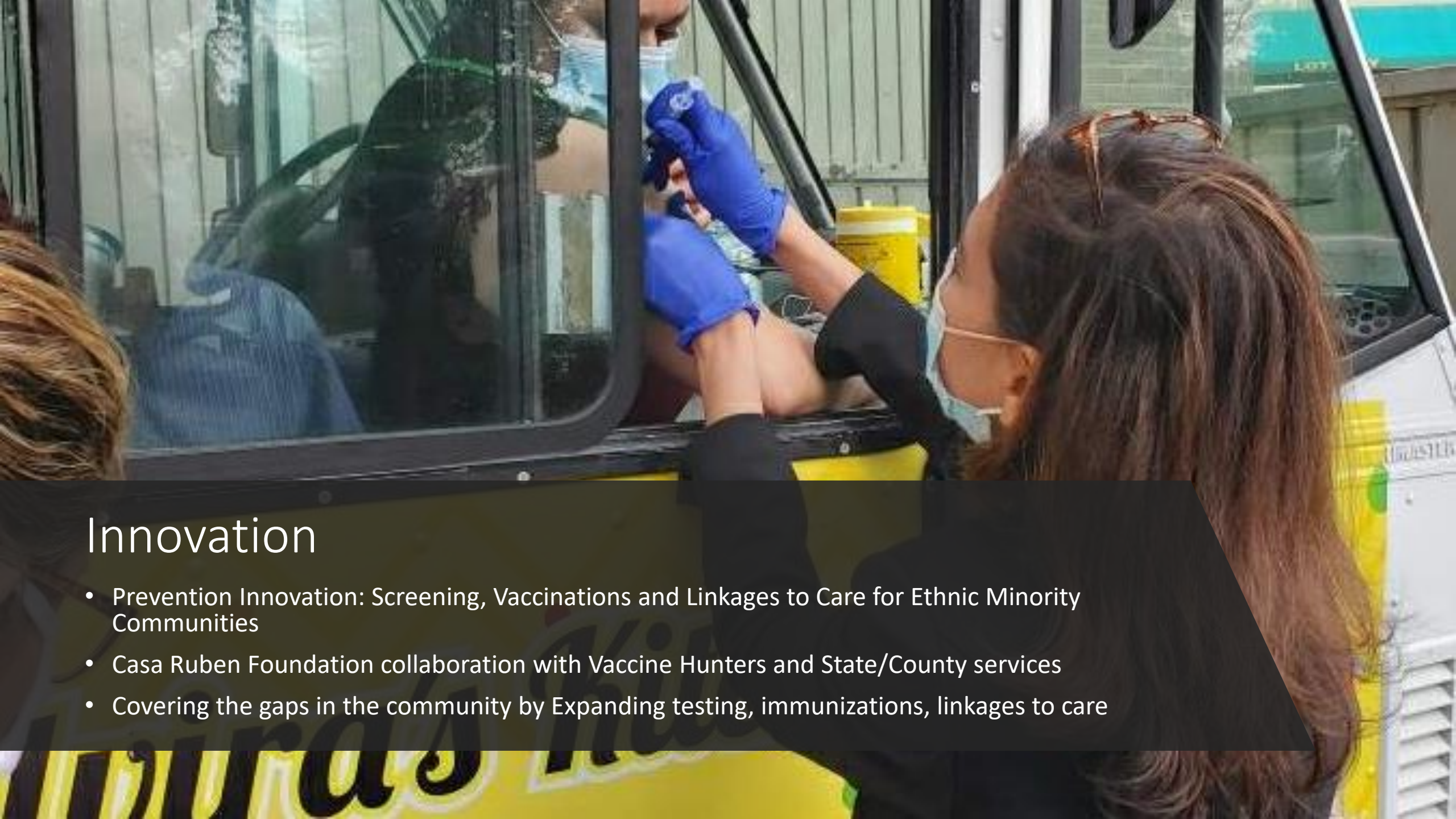
HHS Minority HIV/AIDS Funds. CDC Awards \$12M for Comprehensive EHE Plans 2019.
PACHA Meeting Aug 3-4, 2021

A call to action

Get involved in the
Ending the HIV
Epidemic in the US
(EHE)

Lessons from the
COVID-19 Pandemic
may help improve
equity

Facilitate Access to care
and identify key HIV
prevention innovations
and adaptations that
could be scaled-up



Innovation

- Prevention Innovation: Screening, Vaccinations and Linkages to Care for Ethnic Minority Communities
- Casa Ruben Foundation collaboration with Vaccine Hunters and State/County services
- Covering the gaps in the community by Expanding testing, immunizations, linkages to care



Q and A

How to contact NHMA & NHHF

- NHMA - www.nhmamd.org
- NHHF - www.nhmafoundation.org
- **NHMA 25th Annual Hispanic Health Conference –WDC, March 2022 #NHMA2022**
- Join NHMA as a Member
- NHHF Giving Campaign tax deductible
- **NHMA #Vaccinate4All Campaign – Become a champion at nhmamd.org/vaccinate4all**
 - supported by CDC, J&J, BIO
 - Individual Training through Webinars, Social Media, NHMA Fellows
 - Organizational Training – HHPLN, Medical Societies, Latino Health Advocacy Organizations, Conferences, Newsletters, Websites, Events
 - Development of COVID-19 Resource Hub (HispanicHealth.info)
 - English and Spanish info reports, videos, toolkits, and links to CDC
 - Sign-up at www.NHMAmd.org



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COVID-19 BRIEFING SESSION 12: IMPACT ON PREGNANT WOMEN, MOTHERS, AND CHILDREN

Moderator



Claudia Zamora

Founder and CEO
Zamora Consulting Group

Wednesday, September 29
at 7:00 p.m. ET

Registration:
bit.ly/NHMACOVIDBriefing

Speakers:

Luis Gomez MD, MScE

Maternal-Fetal Medicine Specialist
Perinatal Associates of Northern
Virginia, Inova Health System



Ana Lia Graciano MD, FAAP, FCCM

Professor of Pediatrics
Division of Pediatric Critical Care Medicine
University of Maryland School of Medicine



Sergio Rimola MD, FACOG

Attending Physician Ob/Gyn
Department
Inova Fairfax Hospital

