Alcohol Is Very Risky for Those Coinfected With HIV and Hep C

May 19, 2014

Drinking even moderately is linked to a much higher risk of advanced liver fibrosis among those coinfected with hepatitis C virus (HCV) and HIV. Publishing their findings in Clinical Infectious Diseases, researchers recruited study participants between 2002 and 2010 who fell into four categories: A total of 701 were coinfected, 1,410 were monoinfected with HIV, 296 were monoinfected with hep C, and 1,158 had neither HIV nor hep C, serving as controls.

The researchers assessed all the participants for liver fibrosis and had them complete a questionnaire about their drinking in order to categorize their consumption as non-hazardous drinking, hazardous or binge drinking, or as indicative of alcohol-related disorders.

Eight percent of the participants had liver fibrosis, including 10 percent of those with HIV, 4 percent of those without HIV, 19 percent of those with hep C, and 4 percent of those without hep C. Among all categories of alcohol use, advanced liver fibrosis was the most prevalent among the coinfected participants.

After controlling for various factors, the researchers found that the greatest link between alcohol consumption and advanced liver fibrosis was among those coinfected with HIV and hep C. Compared with non-hazardous drinkers who had neither virus, there was a 14.2-fold increased likelihood of advanced fibrosis among those with coinfection who were non-hazardous drinkers, an 18.9-fold increased likelihood among the hazardous or binge drinkers with coinfection, and a 25.2-fold increased likelihood among those with alcohol-related disorders living with a coinfection.

The study authors stressed the importance of assessing patients' alcohol consumption and said that those who are coinfected should receive counseling to help them cut back on their drinking. Those who have advanced fibrosis should be advised to reduce their drinking or avoid it entirely.

To read the aidsmap story, click here.

To read the study abstract, click here.

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