



Heavy Drinking Raises Heart Disease Risk in HIV-Positive Men

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Binge drinking and other forms of heavy alcohol consumption increase the risk of cardiovascular disease (CVD) in men living with HIV, according to a [study](#) published by Veterans Administration researchers in the online version of the *Journal of Acquired Immune Deficiency Syndromes*.

Whereas moderate alcohol consumption is believed to be associated with a reduced risk of CVD, alcohol abuse has been linked to higher rates of CVD among HIV-negative people. In people living with HIV, alcohol abuse and dependence has been linked to poor treatment adherence, chronic liver disease and HIV disease progression. Whether it is also associated with an increased risk of CVD has not been fully explored.

Matthew Freiberg, MD, of the University of Pittsburgh, and his colleagues analyzed data involving 4,742 veterans—about half of whom were HIV positive—reporting at least some alcohol use, either currently or in the past. CVD data were also available for each of the study participants.

The researchers categorized participants' alcohol consumption using three groups: infrequent and moderate (consuming 14 or fewer drinks a week), hazardous drinking (consuming more than 14 drinks a week or binge drinking, defined as having six or more drinks on one occasion at least once a month), or alcohol abuse or dependence (a more loosely defined categorization based on a number of criteria).

Both heavy drinking and CVD were common in the cohort study. Hazardous drinking was documented in 33.2 percent of the HIV-positive men and 30.9 percent of the HIV-negative men. Alcohol abuse and dependence was found in 20.9 and 26.2 percent, respectively. CVD was confirmed in 14.6 percent and 19.8 percent, respectively.

Among the HIV-positive men, hazardous drinking raised the risk of CVD by 43 percent, and alcohol abuse and dependence raised the risk by about 55 percent, compared with infrequent or moderate drinking.

Looking only at the HIV-positive veterans and after controlling the data to exclude common traditional causes of CVD—such as age, cholesterol levels, high blood pressure and cigarette smoking—hazardous drinking was associated with a 74 percent increase in the risk of congestive heart failure (CHF), whereas alcohol abuse and dependence was associated with a 67 percent increase in the risk of coronary heart disease (CHD) and a 99 percent increased risk of CHF. Past

drinkers—those who hadn't used alcohol in the preceding 12 months—faced a 78 percent increased risk of a stroke.

Interestingly, when the researchers looked at the HIV-negative veterans and controlled for traditional risk factors, there was no statistically significant association between alcohol consumption and CVD risk. This lack of association, the authors write, “suggest[s] that the effect of alcohol may be more pronounced among those infected with HIV.”

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<http://beta.docker.hepmag.com/article/hiv-alcohol-cardiovascular-17755>