Many People With HIV May Have Undiagnosed Fatty Liver Disease

A considerable proportion of a group of people receiving HIV care had signs of the disease, but only a small group was diagnosed.

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Non-alcoholic fatty liver disease (NAFLD) may be considerably underdiagnosed among people with HIV, MD Magazine reports.

Given previous research indicating that perhaps as much as 40 percent of the HIV population has NAFLD, a group of investigators analyzed a cohort of 31,005 people with the virus who received care through a Washington, DC, health care system between 2006 and 2016.

Presenting their findings at the Annual Meeting of the American Association for the Study of Liver Diseases in San Francisco (The Liver Meeting), researchers reported that 68 percent of the cohort was male and 74 percent was Black. A total of 510 (1.64 percent) of the cohort had received a diagnosis of fatty liver disease and 269 (52.7 percent) were coinfected with hepatitis B or C virus (HBV/HCV) or both.

Among those with diagnosed NAFLD, the most common metabolic abnormalities included high blood lipids (43.5 percent of the group), diabetes (43.1 percent) and obesity (29.8 percent). Additionally, 27 percent of the NAFLD-diagnosed group had cardiovascular disease and 36 percent had chronic kidney disease.

Among those monoinfected with HIV (meaning they had neither HBV nor HCV), 106 (44 percent) had at least two sets of abnormal AST and ALT liver enzyme tests—signs of potential NAFLD. Sixty (24.9 percent) of this group had diabetes or risk factors for obesity, further suggesting undiagnosed fatty liver disease in the HIV-monoinfected group.

Those in the overall cohort who had diagnosed NAFLD had a 23.7 percent prevalence of cirrhosis, compared with 3.28 percent among those who had not received a diagnosis.

The study authors conducted a preliminary analysis to try to identify associations between antiretrovirals and a fatty-liver diagnosis. A total of 68.7 percent of those with diagnosed NAFLD had taken protease inhibitors and 49.1 percent had taken non-nucleoside reverse transcriptase inhibitors (NNRTIs). This led the researchers to conclude that taking protease inhibitors and

NNRTIs was associated with a 1.99-fold and 1.73-fold increased risk of receiving a NAFLD diagnosis, respectively.

Given the fact that cirrhosis was so strongly tied to receiving a diagnosis of NAFLD among those monoinfected with HIV, the study authors concluded that more intense monitoring for the liver condition may be needed among those with cirrhosis in this population.

To read the conference abstract, click here.

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