

Obesity a problem in HIV population

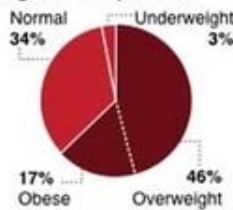


By ALICIA CHANG, AP Science Writer
 Thu Oct 4, 7:41 AM ET

Weight and HIV

A study of 663 HIV-positive patients found that 63 percent of them were overweight or obese.

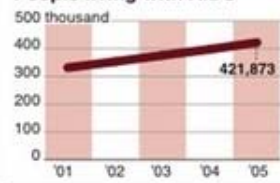
Weight of HIV patients



Change in BMI since diagnosis



People living with AIDS



SOURCES: Centers for Disease Control and Prevention; Naval Medical Center

AP Photo: HOLD FOR RELEASE at 12:01 a.m. graphic shows statistics on the number of people living with...

LOS ANGELES - Early in the AIDS epidemic, people infected with the virus often lost a dangerous amount of weight, at times looking gaunt and ghostly. Today, they are facing the opposite problem. Many who have HIV, but not full-blown AIDS, are struggling with obesity, which has overtaken "wasting syndrome" as the top concern.

AIDS researchers and advocacy groups say the waistlines of HIV patients are growing right along with the girths of uninfected Americans as the disease shifts from a death sentence to a chronic condition.

Exact numbers are hard to pin down. But new research suggests that nearly two-thirds of the HIV population may be overweight or obese, mirroring the U.S. population.

Doctors say there's a growing need to screen people with the AIDS virus for obesity, which raises the risk of diabetes, high blood pressure and cholesterol problems.

"We used to worry that they would lose weight and become wasted," said Dr. Nancy Crum-Cianflone of TriService AIDS Clinical Consortium in San Diego. "Maybe we should redirect our concerns to making sure they are maintaining a healthy, normal weight."

About a million people in the United States are living with HIV or AIDS, federal statistics show. At the height of the epidemic, many had wasting syndrome, the uncontrollable loss of 10 percent of body weight along with other symptoms like fever or diarrhea.

A turning point in the AIDS crisis came with advances in modern medicine. Powerful drugs that keep the virus at bay also boost the body's immune system. The result is that more HIV patients are living longer than their counterparts two decades ago, and may be prone to poor eating habits and lack of exercise.

Some experts offer psychological explanations. Since the hallmark of HIV has been weight loss, some patients may be piling on the pounds to avoid looking abnormally thin.

"It's very clear now that HIV is no longer a wasting disease in America," said Dr. John T. Brooks, an epidemiologist in AIDS prevention at the Centers for Disease Control and Prevention. Brooks did not participate in the study.

Crum-Cianflone became interested in the problem after noticing her patients were steadily getting fat and decided to study how common obesity was in the HIV population.

She and her colleagues pored through medical records of 663 patients with HIV at Navy hospitals in San Diego and Bethesda, Md. Researchers analyzed medication records, duration of HIV infection and whether patients had a history of diabetes or high blood pressure.

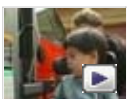
Sixty-three percent in the study were overweight or obese. Only 3 percent were underweight and none were considered to be "wasted." Among those with full-blown AIDS, about 30 percent were overweight or obese.

The numbers are particularly striking because most of those studied were in the military (some were military spouses) and tend to be in better shape than the rest of the population.

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Previous research had suggested about 40 percent of HIV patients are overweight.

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Researchers did not find a connection between the AIDS drugs and excess weight. When patients gained weight, they tended to put on an average of 13 pounds over a decade. Those who became infected younger, those who had the virus for a longer time, or those who had high blood pressure were more likely to get fat.

Results were to be presented Thursday at an infectious disease meeting in San Diego.

"These folks are in more ways than not becoming like everyone else. If they're overeating, they're going to get fat," said Dr. Michael Saag, director of the AIDS Center at the University of Alabama at Birmingham, who had no role in the study.

"It would be very sad to survive HIV and die of something else that was preventable," said Brooks of the CDC.

At AIDS Project Los Angeles, pudgy HIV patients outnumber the very thin.

"Many of our clients don't even know what wasting is. They never knew that look," said Janelle L'Heureux, a nutritionist with the AIDS service group.

The problem is more evident in those who are poor, because they more often eat junk food and don't have money to join a gym. To help obese HIV patients, the group offers classes on how to read nutrition labels and cook healthy meals.

Jack Gebhardt, 56, of Los Angeles, said he started packing on the pounds after he quit smoking shortly before he was diagnosed with HIV 12 years ago. After working out three times a week, Gebhardt, who is 5-feet-8, went from 217 to 172 pounds.

A diabetic who is on disability, Gebhardt currently cannot afford a gym membership and has seen his weight creep back up to 182.

"I'd still like to lose a lot more weight," he said.

On the Net:

CDC page on HIV/AIDS: <http://www.cdc.gov/hiv/>

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