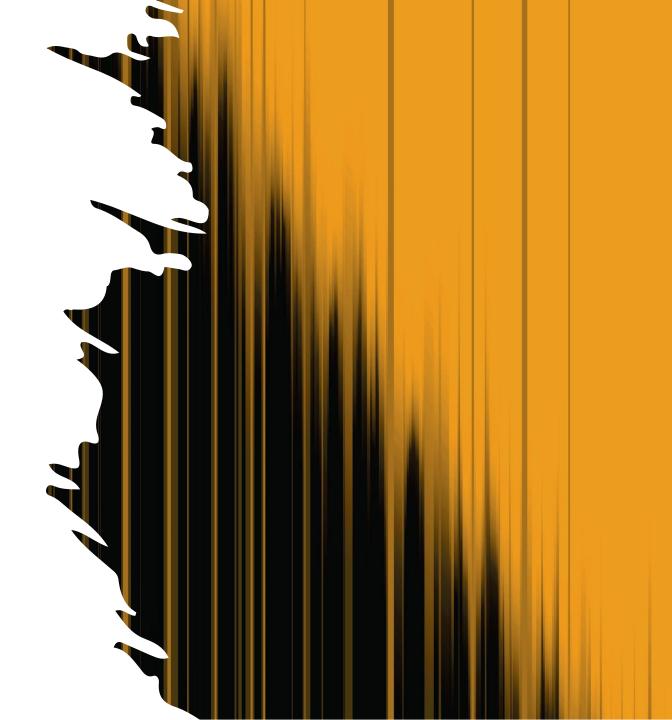


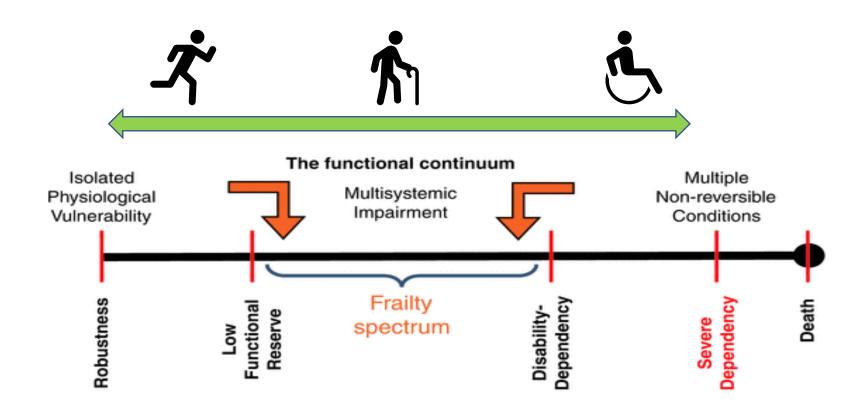


Investigating and Modifying Frailty in PLWHIV

Dr Liam Townsend, MB PhD
St James's Hospital, Dublin, Ireland

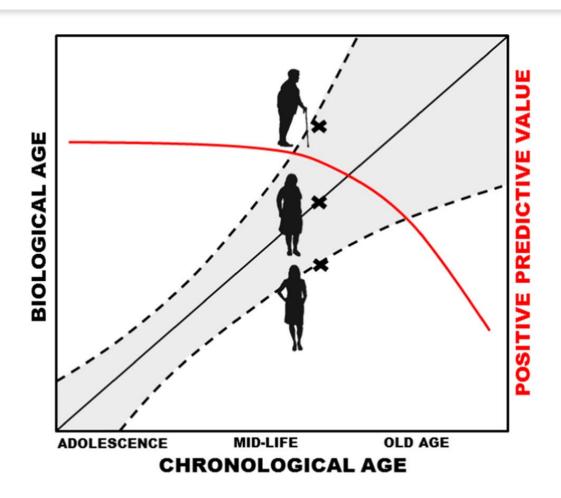


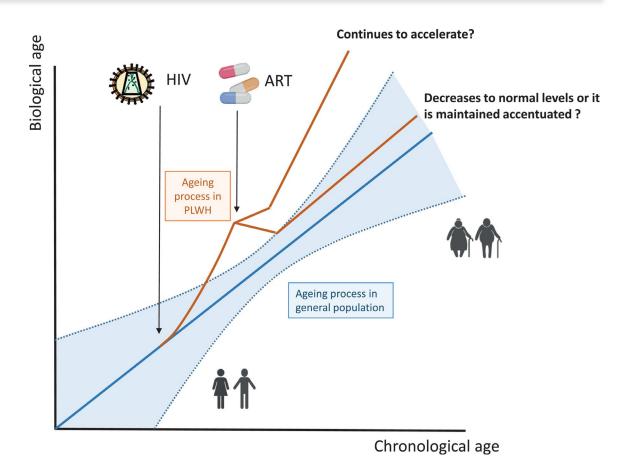
Frailty



Rodriguez-Mañas, L. and Mora, M.A.C., The Concept of Frailty and Functional Decline.

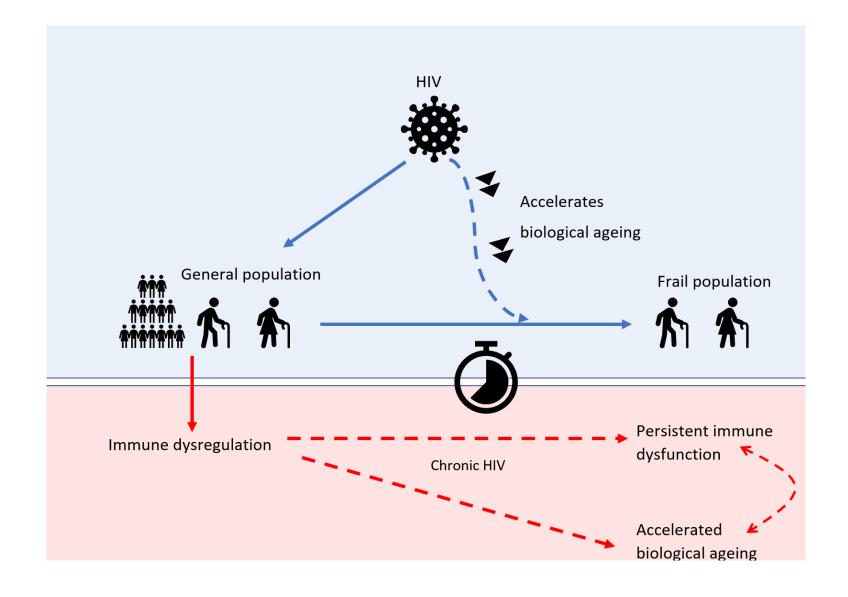
Types of Ageing





eBioMedicine 2022 77DOI: (10.1016/j.ebiom.2022.103896)

Proposed mechanisms of HIV-associated frailty



Inflammageing

Cardiovascular diseases Anaemia Type 2 diabetes Multimorbidity Premature mellitus Sarcopenia mortality Chronic kidney Osteoporosis disease Cancer Dementia Depression Physical disability Frailty Cognitive disabilit

HIV/AIDS

MAJOR ARTICLE

Premature Age-Related Comorbidities Among HIV-Infected Persons Compared With the General Population

Giovanni Guaraldi, 1 Gabriella Orlando, 1 Stefano Zona, 1 Marianna Menozzi, 1 Federica Carli, 1 Elisa Garlassi, 1 Alessandra Berti, 2 Elisa Rossi, 2 Alberto Roverato, 3 and Frank Palella 4

Prevalence of HIV and chronic comorbidities among older adults

Joel Negin^a, Alexandra Martiniuk^{a,b,c}, Robert G. Cumming^a, Nirmala Naidoo^d, Nancy Phaswana-Mafuya^{e,f}, Lorna Madurai^g, Sharon Williams^h and Paul Kowal^d

Contributions of traditional and HIV-related risk factors on non-AIDS-defining cancer, myocardial infarction, and end-stage liver and renal diseases in adults with HIV in the USA and Canada: a collaboration of cohort studies

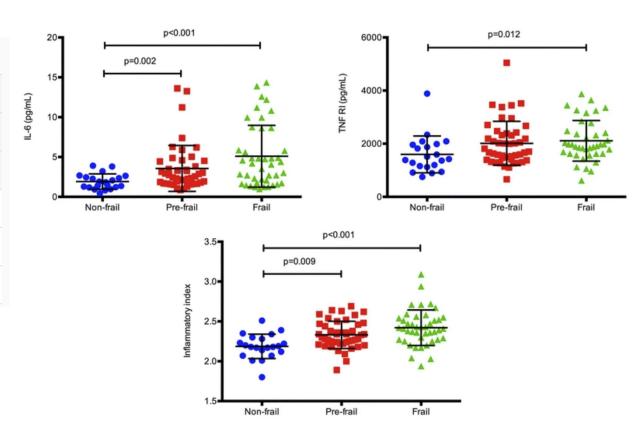


Keri N Althoff, Kelly A Gebo, Richard D Moore, Cynthia M Boyd, Amy C Justice, Cherise Wong, Gregory M Lucas, Marina B Klein, Mari M Kitahata, Heidi Crane, Michael J Silverberg, M John Gill, William Christopher Mathews, Robert Dubrow, Michael A Horberg, Charles S Rabkin, Daniel B Klein, Vincent Lo Re, Timothy R Sterling, Fidel A Desir, Kenneth Lichtenstein, James Willig, Anita R Rachlis, Gregory D Kirk, Kathryn Anastos, Frank J Palella Jr, Jennifer E Thorne, Joseph Eron, Lisa P Jacobson, Sonia Napravnik, Chad Achenbach, Angel M Mayor, Pragna Patel, Kate Buchacz, Yuezhou Jing, Stephen J Gange for the North American AIDS Cohort Collaboration on Research and Design

Evidence of inflammation

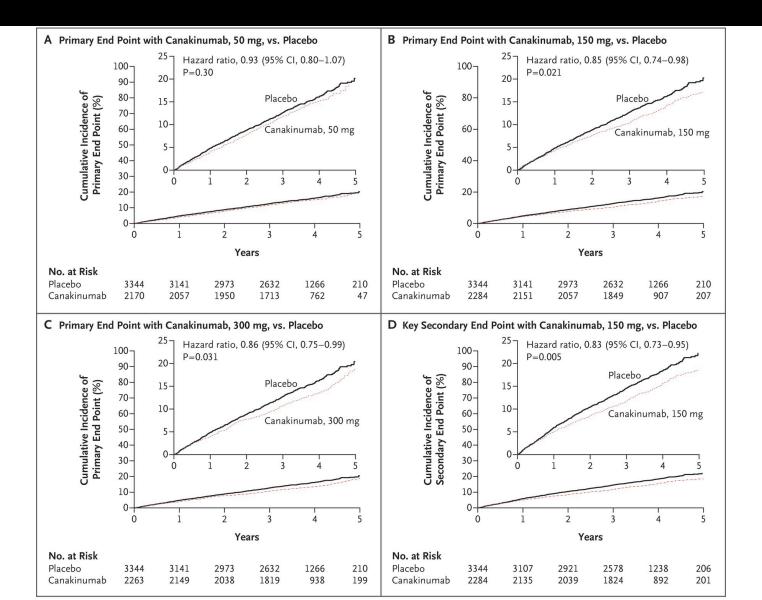
Odds of Frailty and	Prefrailty by	Level of Inflar	mmation in ALIVI	E*
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Model	Prefrail	Prefrail	Frail	Frail
	Unadjusted	Adjusted [†]	Unadjusted	Adjusted [†]
	OR (95% CI)	OR (95% CI)	OR (95% CI)	OR (95% CI)
IL-6	1.13 (0.99–1.29)	1.09 (0.95–1.26)	1.40 (1.17-1.68)	1.33 (1.09–1.61)
sTNFR1	1.08 (0.93-1.24)	1.03 (0.89-1.19)	1.40 (1.17-1.66)	1.25 (1.04–1.51)
Inflammatory index score	1.13 (0.99–1.30)	1.08 (0.94–1.25)	1.53 (1.28–1.83)	1.39 (1.14–1.68)



Туре	Biomarker	Hallmarks of cell ageing covered
Nucleic acid-based	Telomere lenght	Telomere attrition
	Epigenetic clocks	Epigenetic alterations
	Mitocondrial DNA	Mitochondrial dysfunction
Protein-based	Apolipoprotein J/Clusterin (ApoJ/CLU)	Cellular senescence
	Proteasome subunits	Loss of proteostasis
Metabolic-based	NAD/NADH ratio	Mitochondrial dysfunction
	Lipid alterations in plasma	Deregulated nutrient sensing
	Plasma levels of essential amino-acids	Deregulated nutrient sensing
Immunologic	Soluble inflammatory markers (sCD14, sCD163, IL-6, hsCRP, D-dimer)	Inflammageing
	Cell surface molecules (CD28, CD96)	Cellular senescence and exhaustion
Integrative	MARK-AGE	Epigenetic alterations Mitochondrial dysfunction Deregulated nutrient sensing Inflammageing

Modifiable?





Modifications

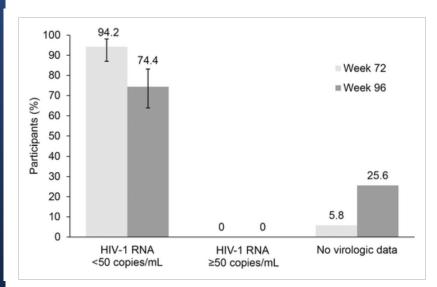
- MDT....! (Geriatrician, physio, OT, dietician...)
- Medication opimisation
 - Deprescribing
- Comorbidity management
- Physical function interventions
- Peer support groups
- Advance care planning...

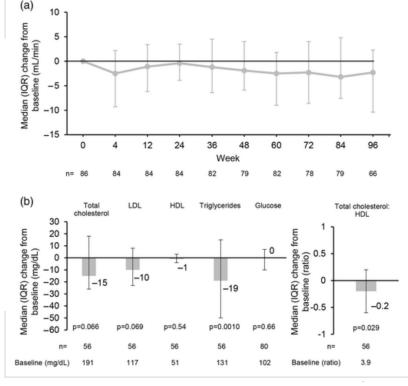
ART Optimisation in Frailty & Increasing Age

Bictegravir/emtricitabine/tenofovir alafenamide in older individuals with HIV: Results of a 96-week, phase 3b, open-label, switch trial in virologically suppressed people ≥65 years of age

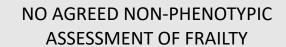
Franco Maggiolo, Giuliano Rizzardini, Jean-Michel Molina, Federico Pulido, Stephane De Wit, Linos Vandekerckhove, Juan Berenguer, Michelle L. D'Antoni, Christiana Blair ... See all authors ∨

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CHRONIC INFLAMMATION





NO PHARMACOLOGICAL INTERVENTIONS FOR FRAILTY



PHENOTYPIC APPROACH AND FUNCTIONAL INTERVENTIONS REMAIN MAINSTAY OF THERAPY