

# STATIN USE AMONG PEOPLE LIVING WITH HIV AT METROPOLITAN SEXUAL HEALTH CENTRE

## Authors:

Ngo R<sup>1</sup>, Aguirre I<sup>1</sup>, Duncan A<sup>1</sup>, Duplessis I<sup>1</sup>, Teague R<sup>1</sup>, Mackie K<sup>1,2</sup>

<sup>1</sup>Alfred Health (Melbourne Sexual Health Centre), Melbourne, Australia, <sup>2</sup>Barwon Health, Geelong, Australia

## Background:

People living with HIV (PLWH) face a higher risk of developing cardiovascular disease (CVD). Whilst lifestyle modification remains important, the REPRIEVE study highlighted use of statins to reduce incidence of CVD events.

This retrospective study aimed to determine the baseline statin use in PLWH ≥ 40 years at the Melbourne Sexual Health Centre (MSHC), prior to the REPRIEVE study publication.

## Methods:

A retrospective audit of electronic medical records of all PLWH ≥ 40 years presenting for routine HIV care at MSHC in June 2023 was conducted. Newly diagnosed/transferred care < 1 year ago were excluded. Baseline demographic data and statin use were collected. An Australian CVD risk was calculated ([www.cvdcheck.org.au](http://www.cvdcheck.org.au)) for those not clinically at high risk, if blood pressure, lipids, diabetes and smoking status were documented within the previous year.

## Results:

Of the 322 PLWH (mean age 44.1 years) seen at MSHC, 172 (53.4%) were ≥ 40 years and included in the study. The majority were male (84.9%), 93.6% had a viral load < 50 copies/mL and 24.4% were current smokers. Fifty-nine (34.3%) took a statin; five for secondary prevention. Statins were prescribed by an external provider in 57.6% of patients. CVD risk considerations were documented in 126 (73.3%) and a calculation documented for 7.6% of patients. Among the 113 patients not taking a statin, 30 had a calculated CVD risk of ≥ 5% (including 5 high risk), 60 had < 5% risk, with incomplete data for 23 patients.

## Conclusion:

This retrospective study over a one-month period at MSHC identified one-third of PLWH ≥ 40 years take statins. In at least another 17% of patients the CVD risk was > 5%, and a statin should be recommended based local guidelines/REPREIVE trial data. Strategies to improve prescribing of statins in those with CVD risk factors are currently in consideration, in addition to appropriate lifestyle modification advice.

## Disclosure of Interest Statement:

No funding was received for this study.