

Possibilities of Higher Risks of Heart Diseases in HIV Infected Patients

Malik Marek^{*}

Department of Cardiology, University of Arizona, Arizona, USA

DESCRIPTION

If the person is infected with the Human Immunodeficiency Virus (HIV), which causes AIDS, then the person is more likely to develop heart disease. Risk factors for heart disease are the same in both the people with HIV-infected and uninfected. However, HIV and some of its medications can increase the risk of heart disease in the people who are having HIV. With effective Antiretroviral Therapy (ART), Human Immunodeficiency Virus (HIV) has become a largely manageable disease that increases the burden of chronic, non-communicable diseases. People having HIV are at increased risk of Coronary Artery Disease (CAD) for many possible reasons, including chronic HIV-associated inflammation and immune activation. The term "heart disease" refers to a group of disorders caused primarily by the formation of plaque in the walls of arteries that restrict blood flow. This can lead to a heart attack, which occurs when a blood clot in the coronary artery stops the blood flow to the heart. Then that part of the heart muscle begins to die. A stroke can occur when a blood vessel that supplies the brain, breaks (ruptures) or is blocked by a blood clot, cutting off blood and oxygen which supplies to the brain, this can kill brain cells and cause problems with speech, movement and memory. Heart failure occurs when the heart cannot pump enough blood to supply the blood to the body in the needed volume with sufficient oxygen. Heart rhythm problems occur when the heart beats in an irregular pattern (arrhythmia), too slow (bradycardia), or too fast (tachycardia). Heart valve problems occur when the small gates between sections of the heart do not open wide enough to allow enough blood flow (stenosis). It may also not close properly, allowing blood to flow backward (regurgitation) or collapse (prolapse) through the chambers of the heart.

Medical therapy has transformed HIV from an incurable disease into a manageable chronic disease. However, as the people having HIV lives longer, they also have a higher risk of heart attack, stroke, and other types of cardiovascular diseases. People with HIV are 1.5 to 2 times more likely to have a heart attack or stroke than people without the virus. White blood cells function as the part of the immune system. A type of white blood cell called CD4 (or CD4+ T cells) fights against the infection. Studies show that if the person doesn't have enough CD4 cells, the person is more likely to have a heart attack. CD8 cells are another type of white blood cell that destroys virus-infected cells. An improper balance of CD4 and CD8 cells increases the likelihood of plaque formation in arteries (atherosclerosis) and plays an important role in stroke. In addition, heart failure and abnormal heart rhythms are more likely infected by the people who are having HIV. Antiretroviral therapy has turned HIV infection into a chronic disease. HIV can make it difficult to treat for things that can make the person more likely to have a heart attack or stroke like, the class of drugs called statins which are used by the people having high cholesterol may interact with drugs that the person is already taking to control HIV. Even if the person is having HIV, the blood vessels may appear inflamed, but the bad cholesterol (LDL) levels may appear normal. In other cases, such as stroke and heart failure, doctors are still trying to understand how HIV status affects the treatment and recovery.

People living with HIV can take the following steps to reduce their risk of heart diseases.

- Take the HIV medicines daily to keep HIV under control.
- Eat a healthy diet high in vegetables, fruits and whole grains and low in saturated fat, sugar and salt. Getting enough nutrients helps the body fight disease and maintains a healthy weight.
- Quit smoking and alcohol. It is one of the biggest causes of heart disease.
- Talk to the health care provider about the risk of heart disease while consulting a doctor.
- Regular exercise helps lower the blood pressure, cholesterol levels, and balance the body weight. Maintain a healthy weight. If the person is overweight or underweight, ask the doctor to help with a diet plan and exercise.

Correspondence to: Malik Marek, Department of Cardiology, University of Arizona, Arizona, USA, E-mail: MalikMarek@gmail.com

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