VACS IN THE NEWS

- A Geriatrics and Palliative Care Blog (GeriPal), in April, discussed Meredith Greene’s “Management of HIV infection in advanced age” article (See publicity page 3).
- The University of Pittsburgh compiled a summary of press coverage on Matthew Freiberg’s “HIV Infection and the Risk of Acute Myocardial Infarction” article. It has received an estimated total of 135 media hits as of March 11, 2013. This included coverage in outlets in Pakistan, Canada, India, UK, Australia, South Africa, and New Zealand.
- A capsule summary was put together by Clinical Care Options (CCO), on Keri Althoff’s oral presentation at the 20th Conference on Retroviruses and Opportunistic Infections (CROI). The presentation was entitled, “Increased risk for MI, ESRD, and non-AIDS-defining cancers in HIV-infected vs HIV-uninfected adults, but similar age at events.”

About VACS

The Veterans Aging Cohort Study (VACS) is an observational study that compares HIV-positive and HIV-negative veterans in care in the United States. The purpose of this study is to better understand HIV infection and how outside forces, such as alcohol use, smoking, and other diseases and infections, can influence the people living with HIV. The study consists of two cohorts, a “virtual cohort” that uses data from over 120,000 veterans, and a “living cohort” of over 7,000 veterans that actively participate and receive medical care at one of our nine VACS locations: Atlanta, Baltimore, Bronx, Brooklyn/Manhattan, Dallas, Houston, Los Angeles, Pittsburgh, and Washington DC. The information received from these cohorts has played a large role in increasing knowledge about HIV infection and the lives of those infected. We cannot thank our Veterans enough for their continued participation in this study.
Dr. Ponomarenko has been a co-principal investigator in the Bronx for the VACS since 2009. She is currently an Attending Physician at the James J. Peters VA Medical Center (Bronx) where he oversees clinics managing the primary care of HIV, the Viral Hepatitis Clinics, inpatient and outpatient ID Consultation, and the Infection Control Program. He is Associate Professor of Medicine in the Division of Infectious Diseases at the Icahn School of Medicine at Mt. Sinai and Clinical Assistant Professor of Medicine, Division of General Medicine, Columbia University Medical Center. He is the VA liaison and past Chairman of the New York State (NYS) AIDS Institute Adult Medical Criteria of Care Committee. Dr. Brown has been an active investigator in NIH and VA sponsored studies of HIV disease and its complications for over 25 years.

Sheldon T. Brown
PI – Bronx Site

Dr. Brown is the Principal Investigator at VACS Bronx, a position he has held since the study’s inception. He is currently the Chief of Infectious Diseases at the James J. Peters VA Medical Center (Bronx) where he oversees clinics managing the primary care of HIV, the Viral Hepatitis Clinics, inpatient and outpatient ID Consultation, and the Infection Control Program. He is Associate Professor of Medicine in the Division of Infectious Diseases at the Icahn School of Medicine at Mt. Sinai and Clinical Assistant Professor of Medicine, Division of General Medicine, Columbia University Medical Center. He is the VA liaison and past Chairman of the New York State (NYS) AIDS Institute Adult Medical Criteria of Care Committee. Dr. Brown has been an active investigator in NIH and VA sponsored studies of HIV disease and its complications for over 25 years.

FEATURED SITE: BRONX

The Bronx location is one of our nine VACS sites across the country, and is located within the James J. Peters VA Medical Center. Dr. Sheldon Brown is the Principal Investigator, and works with Dr. Yelena Ponomarenko, Co-Principal Investigator, and Site Coordinators, Anatoly Ponomarenko and Fletcher Fernau. The Infectious Disease Program at this site serves a clinic population of over 400 patients with HIV.

Anatoly Ponomarenko
Coordinator

Anatoly Ponomarenko joined VACS in 2008, bringing experience from his time assisting pioneering liver disease researcher Dr. Charles Lieber. Anatoly is the lead coordinator at the Bronx site and also coordinates EXHALE, a VACS sub-study. He enjoys fishing and spending time with his grandson.

Fletcher Fernau
Coordinator

Fletcher Fernau has been a study coordinator at the James J Peters VA Medical Center (Bronx) since 2009. For VACS he acts as the regulatory coordinator as well as managing patient visits. In addition to VACS, he has coordinated studies investigating C. difficile infection, norovirus, and influenza.
VACS Patient Newsletter

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**Publicity:** The VACS Index has gained recognition on a national and international level. Our most recent publications are listed below. (Links to articles located on next page)


This paper investigated whether HIV is associated with an increased risk of acute myocardial infarction (AMI). Participants with baseline cardiovascular disease were eliminated from this analysis. After analyzing data from 82,459 study participants, we found that during a median follow-up of 5.9 years, there were 871 AMI events. Across three decades of age, AMI events per 1,000 person-years, were consistently and significantly higher for HIV-positive compared with uninfected veterans (see Figure at right). In conclusion, HIV is associated with a 50% increased risk of AMI.

![AMI Rates per 1000 persons-years](image)

**Figure adapted from Freiberg M et al. JAMA Intern Med 2013 article Table 2. Rates of AMI by HIV Status and Age Group**


HIV infected patients treated with antiretroviral therapy now have increased life expectancy and develop chronic illnesses that are often seen in older HIV uninfected patients. In this analysis, factors associated with end-of-life care were reviewed. We found that HIV is no longer a fatal disease. Management of multiple comorbid diseases is a common feature associated with longer life expectancy in HIV infected patients.


Patients on combination antiretroviral therapy are longer living, but may have increased risk for age-associated diseases, which may lead to increasing critical care requirements. This paper compared medical intensive care unit (ICU) admission characteristics and outcomes among HIV infected and demographically similar uninfected patients, and looked at whether an index which combines clinical biomarkers predicts a 30-day medical ICU mortality. We found that medical ICU admission was frequent, 30-day mortality higher, and mechanical ICU admission was frequent, 30-day mortality higher, and mechanical ventilation were more common in HIV infected patients compared with uninfected.


This analysis explored the association between physiologic frailty, and fragility fracture as assessed by the VACS Index. Hip, vertebral, and upper arm fractures were identified in HIV infected patients and these were accessed to determine fragility fracture risk factors. These risk factors include age, hepatitis C status, FIB-4 score, glomerular filtration rate, hemoglobin, HIV RNA, and CD4 count. We found that frailty, as measured by the VACS Index, is an important predictor of fragility fractures among HIV infected male veterans. The components that were most strongly associated with fracture risk were age, and hemoglobin level.
Article Links:

Affiliated Programs & Resources:
- Center for Interdisciplinary Research on AIDS: [http://www.cira.med.yale.edu](http://www.cira.med.yale.edu)
- Project Inform: [http://www.projectinform.org](http://www.projectinform.org)
- US Department of Veterans Affairs: [http://www.va.gov](http://www.va.gov)

Funding and Affiliated Funding Sources:
VACS is funded primarily by the National Institute on Alcoholism and Alcohol Abuse, National Institutes of Health. The study has a special focus on the role of alcohol use and abuse in determining clinical outcomes. This project is also funded in kind by the US Department of Veterans Affairs and by supplemental support from the National Heart, Lung and Blood Institute, National Institute of Allergy and Infectious Diseases, the National Institute of Mental Health, the National Cancer Institute and the Medical Research Council.

QR Codes access the VACS Website and Index Risk Calculator:
- QR Code for VACS Homepage
- QR Code for VACS INDEX CALCULATOR
- QR Code for VACS INDEX CALCULATOR MOBILE APP

Funding and Affiliated Funding Sources:
- National Institute on Alcohol Abuse and Alcoholism
- National Heart Lung and Blood Institute
- National Institute of Mental Health
- National Institute of Allergy and Infectious Diseases
- National Institute of Health, Office of AIDS Research
- Project Inform
- US Department of Veterans Affairs
- National Institute on Alcoholism and Alcohol Abuse
- National Institutes of Health