Older Americans with HIV face a second pandemic in COVID-19

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The World Health Organization declared COVID-19 a global pandemic in March, and as most Americans continue to face the realities of life during their first pandemic, older Americans living with HIV are stuck living through two pandemics at the same time.

Since the first HIV cases were reported in 1981, more than 700,000 people with AIDS in the United States have died. HIV-related mortality rates have dropped dramatically thanks in large part to antiretroviral therapy, but unfortunately, many older people with HIV today lived through the fear of the unknown of the virus and the agony of seeing loved ones unable to survive it.

“We have ... low-income senior housing, and folks who live there have been saying, ‘This is not my first epidemic,’” said Jill Dispenza, director of HIV and STD resources at the Center on Halsted, a comprehensive community center dedicated to advancing community and securing the health and well-being of LGBTQ people in the Chicago area.

“They have a calmness and a longer-term ‘we can get through this’ [view] that maybe younger people don’t,” Dispenza said. “It’s been a wonderful thing to hear from that community that we can help you through this because we’ve been through this.”

Dispenza recently talked about the challenges of being older and HIV positive during the COVID-19 pandemic as part of a recent episode of the “AMA COVID-19 Update” daily video show. Dispenza was joined by Magda Houlberg, MD, chief clinical officer at Howard Brown Health in Chicago and chair of the AMA Advisory Committee on LGBTQ Issues, and Bill Gross, assistant director of special programs at SAGE, an agency that serves older LGBTQ adults, including those living with HIV in New York.
HIV doesn’t raise COVID-19 risk

More than half of all Americans with HIV are older than 50, and the Centers for Disease Control and Prevention says that people have a greater risk of illness from COVID-19 as they get older. However, people who are receiving treatment for HIV and have the virus well under control do not have increased risk for complications from COVID-19, said Dr. Houlberg, an AMA member.

People living with HIV, particularly older people, do tend to have more comorbidities—such as type 2 diabetes, hypertension, heart disease and kidney issues—that are associated with adverse outcomes from COVID-19.

“For younger adults who are living with HIV and it’s well controlled, likely their risk is identical to a young adult who is HIV-negative,” Dr. Houlberg said. “But once you start the aging progress, you get more and more medical complexity that plays a role in vulnerability to COVID-19.”

As the pandemic stretches into the fall, these older patients, like many others, continue to face the challenge of getting medical care at a time when they may not be comfortable entering a doctor’s office.

“For some patients living with HIV, telemedicine is wonderful and they really enjoy having increased access to a medical provider via telemedicine,” Dr. Houlberg said. “But for many of our patients, they may postpone visits, postpone refills for medications, and then that can have an adverse action after a while.”

Many with HIV battle other barriers

Aging HIV patients may not be at higher risk for complications related to COVID-19, but they do still face a number of daily obstacles. These social determinants of health range from inequitable access to comfortable housing to food insecurity. Survey research has found that 25% of older adults with HIV don’t have adequate money for food and a similar number do not have enough money to cover their daily expenses.

Organizations such as the Center on Halsted and SAGE help those at a disadvantage by providing support as well as a center for community building. The Center on Halsted welcomes more than 1,000 community members every day, while SAGE, among other initiatives, encourages visitors to participate in one of almost 100 different remote programming opportunities offered each week.