Epidemiologic/Population Research Group: Summary of Key Questions for Focus

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Key Questions: Patient-Reported Outcomes

1. What is the validity of available quality of life (QOL) tools in HIV? How differ from uninfected?

- SF-12
- HIV Medical Outcomes Survey (MOS-HIV)
- NIH Toolbox
- WHO Quality of Life Scale
- Brief Pain Scale
- PROMISE: patient-reported outcomes
- UNC CFAR: searchable lists of PRO scales
Key Questions: Prognostic Indices

1. What is the validity of existing prognostic indices for comorbid-specific conditions in HIV?
   - Framingham Heart Study
   - FRAX

2. How well do indices generalize to subgroups?

3. How differ from uninfected persons?
Key Questions: Neurocognitive Function

1. What are the prevalence/incidence of neurocognitive dysfunction in HIV, by HIV suppression, subgroups?
   - Cross-cohort collaboration, IeDEA Network

2. What are the phenotypes of neurocognitive dysfunction?

3. What factors promote neurocognitive health in HIV vs. uninfected, people from same risk group w/o HIV?
   - Factors: Mental health, suicidality, substance use, social determinants of health, isolation, social support

4. How will long-acting ART impact on neurocognitive fx?
Key Questions: Polypharmacy in HIV

1. What are clinically relevant ARV/non-ARV drug-drug interactions leading to toxicities, mortality? Mechanisms?
   - Develop methods to identify drug-drug interactions, outcomes
   - How do sex, race, liver/kidney disease modify toxicity risk?
   - Among HIV/cured HCV, varying levels of liver fibrosis

2. How does polypharmacy affect comorbidity risk in HIV?
   1. Comorbidities: neurocognitive function, falls, hospitalization, mortality

3. What is effect of de-prescribing drugs among PLWH?
Key Questions: Frailty

1. What are valid methods to classify frailty in HIV?
   - Develop, validate frailty instruments in HIV+

2. What are the underpinnings of frailty in HIV?

3. Is there a single frailty phenotype in HIV?

4. Can valid frailty instruments predict risk of outcomes?
   - Can machine learning enhance clinical prediction?
Key Questions: Falls in HIV

1. How do alcohol, neurocognitive active meds affect fall risk and how does this differ by HIV status?

2. How does ART modify fall risk among PLWH?

3. How does HIV modify interventions to reduce the risk of falls, fractures?