

LOS ANGELES COUNTY DEPT. OF HEALTH SERVICES TOBACCO CONTROL AND PREVENTION PROGRAM

People living with AIDS are often perceived to have little interest in and motivation for smoking cessation efforts due to a poor outlook for their future and a belief that death from AIDS is the inevitable outcome of their HIV diagnosis. However, as HIV infection is transforming from a terminal illness into a manageable, chronic condition, the time has come for a stronger emphasis on smoking cessation efforts with the goal of improving quality of life.

Higher Smoking Rates

Among people with HIV infection, the prevalence of smoking is roughly three times higher than in the general population. For example, an East Coast study published in 2000 showed a smoking prevalence of greater than 70% for people with HIV, compared with a national prevalence estimate of 25% for the general population. A San Francisco study published in 2002 revealed a prevalence of 54% for people living with HIV, compared to a prevalence estimate of 18% for the general population in San Francisco and in California.

Consequences of Smoking

For people infected with HIV, smoking has been associated with increased rates of the following negative health outcomes:

- Periodontal disease
- Oral candidiasis
- Oral hairy leukoplakia
- Oral lesions
- Bacterial pneumonia
- AIDS-related spontaneous pneumothorax
- Karposi's sarcoma
- Cervical cancer
- Lung cancer
- Genital warts
- AIDS dementia complex
- Emphysema
- Bronchial hyperresponsiveness
- Bronchitis
- Depression

For pregnant women infected with HIV, research has shown a threefold increase in the risk of transmitting HIV to their child due to smoking.

Although there have been inconsistent findings, some research has pointed to a more rapid progression to AIDS and a higher risk of death in smokers infected with HIV.

HIV positive smokers who undergo antiretroviral therapy could be predisposed to an even higher risk of cardiovascular disease than for smoking alone, due to the increased risk of lipodystrophy associated with antiretroviral use.

One study concerning smoking, HIV, and health-related quality of life revealed that smoking by people living with HIV was associated with decreased physical, mental, and social function.

Good News for Cessation

One study concerning the desire to quit smoking among people living with HIV found encouraging results:

- 72% of HIV positive smokers had previously tried to quit smoking
- 63% were currently thinking about quitting
- 69% of those thinking about quitting were interested in a cessation group program
- 82% were interested in nicotine replacement therapy (NRT)
- 56% were interested in both attending a group and using NRT

The health care setting is an important venue for smoking cessation interventions with the HIV community. People living with HIV have an increased use of medical services, which allows for greater contact with various health care professionals who can assess for smoking and provide interventions as necessary.

Focus groups should be conducted with smokers living with HIV to help determine optimal treatment adaptations for this population. For example, some research already conducted has shown that smokers living with HIV preferred cessation group programs made up only of people with HIV.

Summary

Elevated rates of smoking and negative health consequences of smoking have been documented specifically for the HIV positive community. These findings and the promising levels of interest in smoking cessation are evidence that the time has come for greater smoking cessation efforts focused on people living with HIV.

Resources

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HIV and Tobacco Use

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