Coronavirus (COVID-19) and HIV

FAST FACTS

- Current evidence suggest that people living with HIV have a higher risk of becoming seriously ill from COVID-19. People living with HIV who are not on treatment or virally suppressed may be at an even greater risk.
- Speak to a health care professional for more information on how to stay healthy.
- As with the general population, older people living with HIV and those with other underlying health conditions should take extra precautions to prevent illness.
- Try to have at least a 30 days’ supply of ART in your home. If possible, ask for three months.
- The current COVID-19 vaccines are considered safe for people living with HIV.
- We are continuing to learn about COVID-19. Remember to keep in touch with your healthcare provider and follow government advice.

Is COVID-19 worse in people living with HIV?

We are still learning about the risk of COVID-19 in people living with HIV. Current evidence suggests that people living with HIV are at higher risk of becoming seriously ill, and dying from, COVID-19, than people without HIV.

However, HIV appears to be less of a risk factor than other health conditions, such as obesity,
diabetes, severe asthma, respiratory disease, heart disease, liver disease, stroke, dementia, or older age.

The best way to stay healthy is by taking your antiretroviral treatment, as well as any medication you have been prescribed for other health conditions.

We still don’t know whether people living with HIV are more likely to get coronavirus, the virus that causes COVID-19, as more research needs to be done to understand this.

We will continue to update this page as we learn more.

**Are some people living with HIV more at-risk of getting ill?**

People living with HIV who have a compromised immune system should be extra cautious to prevent coronavirus infection, as they may be at an even higher risk of getting seriously ill. This includes people with:

- a low CD4 count (<350 copies/cell),
- a high viral load,
- or a recent opportunistic infection, for example, tuberculosis (TB)
- a current AIDS-defining illness.

People living with HIV are also more likely to get respiratory infections when their HIV is not well managed.

For this reason it’s very important to take your antiretroviral treatment as prescribed – always, but especially during this time. Talk to your health care provider if you are currently not taking treatment or if you are struggling with adherence.

Like in people not living with HIV, older people living with HIV and those living with underlying health conditions including cardiovascular disease, diabetes, chronic respiratory disease and obesity, should also be vigilant.

**I am living with HIV, how can I prevent COVID-19?**

The advice for people living with HIV is mostly the same as everyone else.

- Stay at least one metre away from people as much as possible, and even greater distance indoors.
- Wear a face mask around others.
- Avoid places that are crowded, confined or involve close contact with others, especially indoors.
- Wash your hands frequently and properly with soap and water, or use an alcohol-based hand sanitiser.
- Avoid touching your face.
- Clean and disinfect surfaces regularly.
- Cover your nose and mouth with a clean tissue when you sneeze or cough, or use your elbow.
Throw the tissue away and wash your hands afterwards.

- Meet people you don’t live with outdoors, as it’s safer to meet outside than inside.
- Keep indoor spaces well ventilated, by opening windows and doors, if you do meet people inside.

If you are at-risk of developing severe COVID-19 you should limit physical contact to as few people as possible, ideally just those in your household.

Our main COVID-19 page has lots of information about transmission, prevention and symptoms.

**How can people living with HIV prepare for COVID-19?**

As well as following the general prevention advice above, people living with HIV can take extra steps to look after their health during this time.

- Try to stock-up on your antiretroviral treatment, or any other medication you need to take, so you have enough for at least 30 days, ideally for three months.
- Make sure your vaccinations are up-to-date (such as flu and pneumonia vaccines).
- Know how to get in touch with your health care facility and peer supporters.
- Have a plan for if you need to stay at home, including how to get food and medicine.
- Make sure you are eating well and exercising as best you can (even at home).
- Look after your mental health and seek support if you need it.

Your clinic or health care provider should let you know if there are any changes or disruptions to services during COVID-19. If you are having trouble accessing the things you need, including food and medication, call your usual treatment provider.

During this time, some governments are imposing lockdowns to stop the spread of the virus. This may be particularly difficult for some people. Keeping in touch with people remotely, such as online, by phone or by video chat, can help you to stay socially connected and mentally healthy.
I am living with HIV, what should I do if I feel unwell?

If you’re feeling unwell – you have a dry cough, a fever, and/or loss or change in sense of smell or taste – stay at home and call your health worker. They will be able to tell you your next steps. During this time, make sure you avoid close contact with others.

If you become seriously ill with COVID-19 and are admitted to hospital, you may want to tell the doctor treating you that you have HIV, and to let them know what treatment medication you are taking. That way, you can continue to take your treatment while you are in hospital.

Are COVID-19 vaccines safe for people living with HIV?

The COVID-19 vaccines currently in use are considered safe for people living with HIV. To be approved, vaccines must pass multiple safety trials, and be reviewed by national regulators to ensure they are both safe and effective. Many of the COVID-19 vaccine trials included people living with HIV.

Getting vaccinated will help to protect you from getting sick from COVID-19, so it’s really important to get it when you’re offered. This is especially important for people living with HIV, who appear to be at a higher risk.

There is nothing to suggest getting a COVID-19 vaccine will affect your antiretroviral treatment in any way.

Can HIV treatment be used against COVID-19?

There is no strong evidence that antiretroviral drugs used to treat HIV are effective at treating
COVID-19.

If you are already taking ART, you can still get COVID-19 and should take precautions to prevent the virus from spreading and reduce your own risk. Learn more on our COVID-19 FAQs page.

Remember, COVID-19 is a new illness and we are still learning more about how it behaves. We urge you to keep an eye on advice from:

- the World Health Organization,
- your country’s national public health department,
- local HIV organisations,
- your doctor or healthcare worker.

HELP US HELP OTHERS

Avert.org is helping to prevent the spread of HIV and improve sexual health by giving people trusted, up-to-date information.

We provide all this for FREE, but it takes time and money to keep Avert.org going.

Can you support us and protect our future?

Every contribution helps, no matter how small.

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Sources:

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BHIVA (2020) 'SARS-CoV-2 vaccine advice for adults living with HIV'
NAM (2021) 'COVID-19 and coronavirus in people living with HIV'
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