Bone Quality by Quantitative Ultrasound at the radius does not differ in ART-naïve HIV+ and HIV- Rwandan women

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Background

Bone disorders are common sequelae of HIV infection, and in high income countries, close to 50%–60% of HIV-infected (HIV+) adults are osteoporotic or have low bone mineral density (BMD) and ~15% are osteoarthritic i.e. have low BMD and distorted micro-architecture with high fracture risk.1,2 The incidence of fracture due to bone mineral loss appears to be increased in HIV+ individuals compared to HIV- women.3,4 Even after starting treatment with combination Antiretroviral Therapy (cART),5 bone disorders are common even after starting treatment with combination Antiretroviral Therapy (cART).

Methods

We assessed and calculated mean SOS±SD, T-scores (compared to SOS from women of same age) using the manufacturer’s reference based upon American norms.

Results

Bone Quality by QUS among ART-naïve HIV+ and HIV- Rwandan women

The study was also supported in part by the Center for AIDS Research of the Albert Einstein College of Medicine and Montefiore Medical Center funded by the National Institutes of Health (5P30AI-15117), the Central Africa International Epidemiological Databases (ICDEA) to evaluate AIDS (S101AI-06226) and the AIDS International Training and Research Program (Fogarty International Center, NIH DA23143).

Acknowledgements

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References


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