

Spotlight

By Anne Forde

Cancer in HIV-Infected Patients

Lanoy *et al.*

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Cancer is the main cause of death among HIV-infected patients in France. Combined anti-retroviral therapy has decreased the incidence of AIDS-defining but not of non-AIDS-defining cancers. As a large descriptive national study of the distribution and characteristics of cancer incidence in HIV patients is lacking, the authors used a capture--recapture method with two sources: the nationwide ONCOVIH study that prospectively reports new malignancies diagnosed in HIV-infected patients in cancer and HIV/AIDS centers and the French Hospital Database on HIV Infection.

In 2006, 668 patients with 672 malignancies were diagnosed in the ONCOVIH study. The most frequent malignancies were non-Hodgkin's lymphoma (21%) and Kaposi's sarcoma (16%) but AIDS-defining malignancies accounted for only 39% of all malignancies. Apart from lung cancer, the most frequent malignancies reported in this study were virus associated. Interestingly, patients with both AIDS-defining and non-AIDS-defining malignancies were immunosuppressed at cancer diagnosis; the median CD4 cell count was below 200/mm³ for the former and 329/mm³ for the latter. The median CD4 cell nadir was 134 and 147/mm³, respectively.

Using the capture--recapture method, the estimated total number of new malignancies diagnosed in HIV patients in 2006 was 1320 and 68% were non-AIDS-defining cancers. HIV-infected patients have a higher cancer risk relative to the general population, RR=3.5 for men and 3.6 for women, and it was over 15 in patients under 40 years.

This is the first report of the incidence and type of malignancy in HIV-infected patients in France since the widespread use of combined anti-retroviral therapy. It shows that cancer is a major concern when managing HIV-infected patients.