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HIV and Specific Populations

HIV and Older People

Last Reviewed: April 1, 2020

Key Points

- According to the [Centers for Disease Control and Prevention \(CDC\)](#), in 2016, nearly half of the people in the United States living with diagnosed HIV were aged 50 and older.
- Many HIV risk factors are the same for people of any age, but older people are less likely to get tested for HIV.
- Treatment with HIV medicines (called [antiretroviral therapy or ART](#)) is recommended for everyone with HIV. As for anyone with HIV, the choice of an [HIV regimen](#) for an older person is based on the person's individual needs.
- Many older people have conditions such as heart disease or cancer that can complicate HIV treatment.

Does HIV affect older people?

Yes. Anyone can get HIV, including older people. According to the [Centers for Disease Control and Prevention \(CDC\)](#), in 2016, nearly half of the people in the United States living with diagnosed HIV were aged 50 and older.

The number of older people living with HIV is increasing for the following reasons:

- Life-long treatment with HIV medicines (called [antiretroviral therapy or ART](#)) is helping people with HIV live longer, healthier lives. Thanks to HIV medicines, there are an increasing number of

older people who are living with HIV.

- HIV is newly diagnosed in thousands of people aged 50 and older every year.



Do older people have the same risk factors for HIV as younger people?

Many risk factors for HIV are the same for people of any age. But like many younger people, older people may not be aware of their HIV risk factors.

In the United States, HIV is spread mainly by:

- Having anal or vaginal sex with someone who has HIV without using a [condom](#) or taking medicines to prevent or treat HIV
- Sharing injection drug equipment (works), such as needles, with someone who has HIV

Some age-related factors can put older people at risk for HIV. For example, age-related thinning and dryness of the vagina may increase the risk of HIV in older women. Older people may also be less likely to use condoms during sex because they are less concerned about pregnancy.

Talk to your health care provider about your risk of HIV and ways to reduce your risk.

Should older people get tested for HIV?

CDC recommends that everyone 13 to 64 years old get tested for HIV at least once as part of routine health care and that people at higher risk of HIV get tested more often. Your health care provider may recommend HIV testing if you are over 64 and at risk for HIV.

For several reasons, older people are less likely to get tested for HIV:

- In general, older people are often considered at low risk of getting HIV. For this reason, health care providers may not always think to test older people for HIV.
- Some older people may be embarrassed or afraid to be tested for HIV.
- In older people, signs of HIV may be mistaken for symptoms of aging or of age-related conditions. Consequently, testing to diagnose the condition may not include HIV testing.

For these reasons, HIV is more likely to be diagnosed at an advanced stage in many older people. Diagnosing HIV at a late stage also means a late start to treatment with HIV medicines and possibly more damage to the [immune system](#).

Ask your health care provider whether HIV testing is right for you. Use these questions from Health.gov to start the conversation: [HIV Testing: Questions for the doctor](#).

Are there any issues that affect HIV treatment in older people?

Treatment with HIV medicines is recommended for everyone with HIV. As for anyone with HIV, the choice of an [HIV regimen](#) for an older person is based on the person's individual needs.

However, the following factors can complicate HIV treatment in older people.

- Conditions, such as heart disease or cancer, that are more common in older people and require additional medical care.
- Side effects from HIV medicines and other medicines, which may occur more frequently in older people with HIV than in younger people with HIV.
- The increased risk of [drug interactions](#) in an older person taking HIV medicines and medicines for another condition.
- Age-related changes that can affect an older person's ability to think or remember, which can make it harder to stick to an HIV regimen.

This fact sheet is based on information from the following sources:

From CDC:

- [HIV and Older Americans](#)
- [HIV Surveillance Report, 2018](#)
- [HIV Testing](#)

From the Department of Health and Human Services:

- Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV: [HIV and the Older Person](#)

From the National Institute on Aging (NIA):

- [HIV, AIDS, and Older People](#)