Special Issue

Cellular and Molecular Mechanisms of HIV-1-Associated Cardiovascular Disease

Message from the Guest Editors

In the era of combination antiretroviral therapy (cART), individuals living with HIV (PLWH) face a twofold higher likelihood of developing cardiovascular disease (CVD) compared to those without HIV. The global prevalence of CVD linked to HIV has tripled over the last two decades. While HIV-related CVD used to primarily manifest as conditions such as dilated cardiomyopathy, pericardial disease, and pulmonary hypertension, the widespread use of cART has shifted the pattern towards atherosclerosis-related issues, including heart attack, stroke, and heart failure. This increased CVD risk in PLWH is attributed to chronic HIV-driven inflammation. Although clinical research is growing, experimental studies on this subject are scarce. An improved understanding of the mechanisms driving the development of CVD in PLWH could lead to better strategies for its prevention. For instance, this might involve targeting specific molecules within pathways that worsen the disease and developing new immunomodulatory therapies. The main goal of this Special Issue is to present a comprehensive overview of the current understanding of the origins of CVD linked to HIV-1.

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