



## Biomarkers in HIV Associated Neurocognitive Disorders

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### Message from the Guest Editors

Dear Colleagues,

It is understood that HIV-1 enters the brain shortly after infection via infected monocytes and blood lymphocytes, which may establish a spectrum of HIV-associated neurocognitive disorders (HAND).

Milder to moderate forms of cognitive impairment and behavioral and motor dysfunctions are commonly seen in HAND in approximately 50 % of people living with HIV treated with antiretroviral therapy. The underlying cause for these residual impairments in cognition remains unclear. Currently, the gold standard for diagnosing and monitoring the progression of cognitive function in HIV-infected patients is neurophysiological testing. HAND was reported to be associated with pathological changes in the brain that include generalized atrophy, leukoencephalopathy, viral encephalitis, multinucleated giant cells, etc. Nevertheless, there is lack of profound and precise markers which are needed for an accurate diagnosis of HAND. This Special Issue is dedicated to presenting experimental data from current research and reviews on the discovery of biomarkers associated with HAND which will allow advancing our current understanding of HAND pathogenesis.

