

# HIV and the Aging Brain

**Scott Letendre, M.D.**

Professor of Medicine & Psychiatry



# Disclosures

## Research awards paid to UC San Diego:

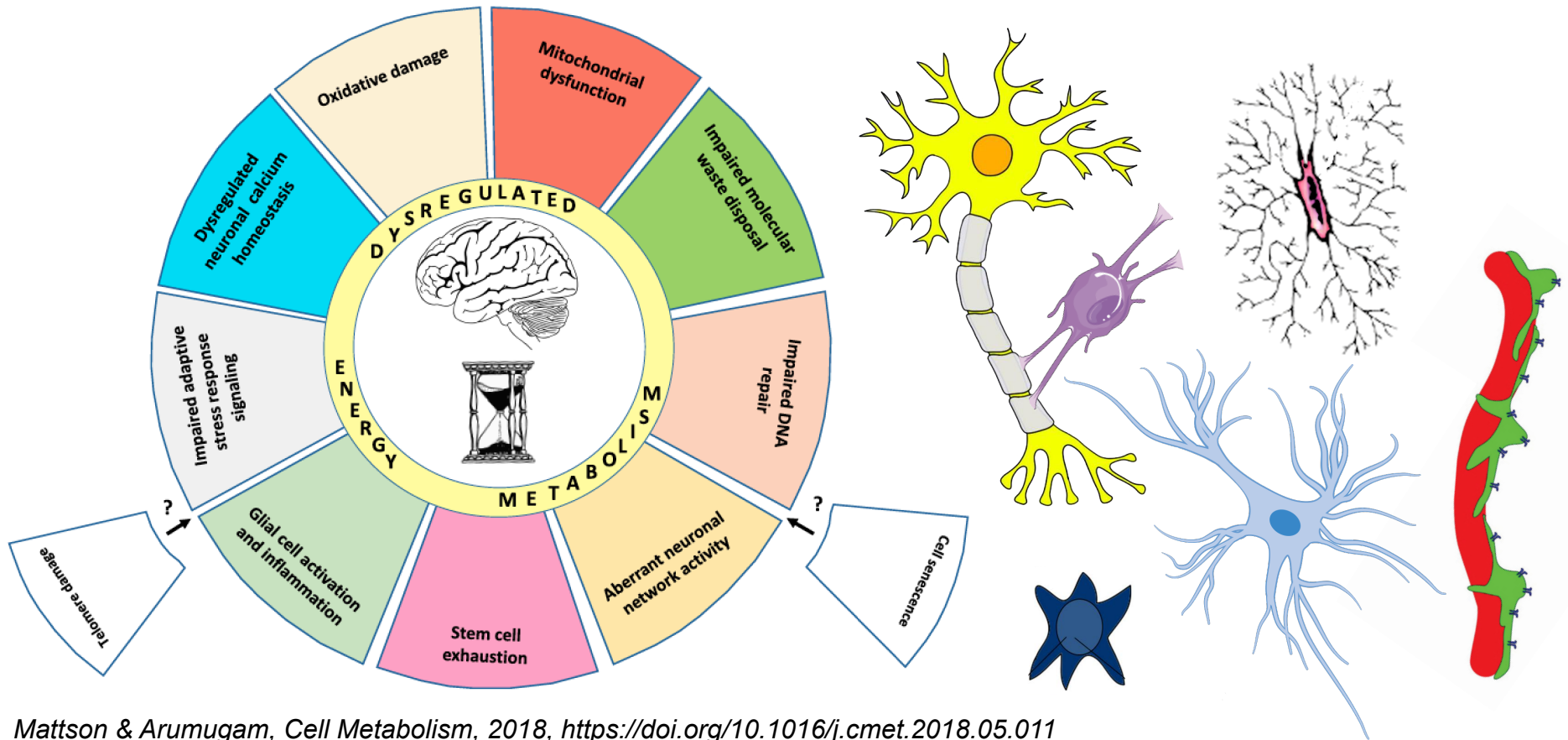
- National Institutes of Health
- Merck & Co., Inc.



# Overview

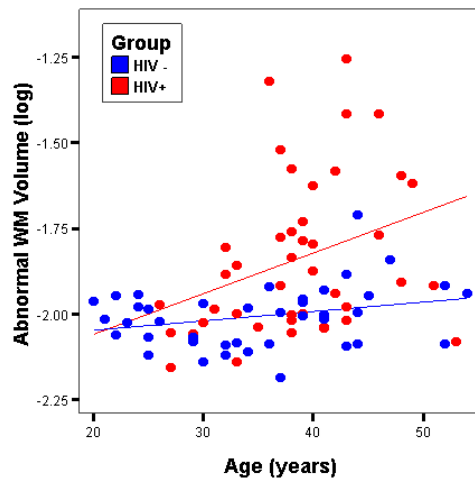
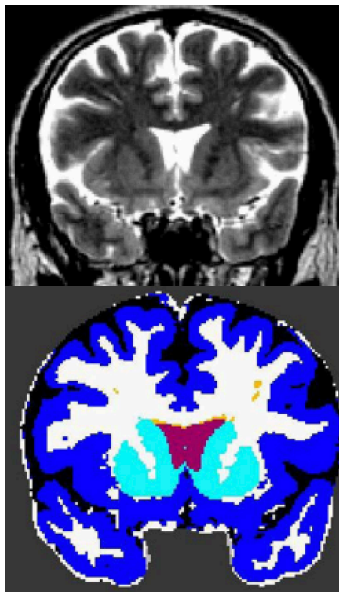
- **Premature Brain Aging in PWH**
  - Brain Imaging
  - Cognitive and Mental Health
  - Successful Brain Aging
- **Mechanisms of Premature Aging in PWH**
  - Cerebrospinal Fluid Biomarkers
  - Biomarkers of Biological Aging
  - Neurotoxicity of Drugs
- **Interventions**

# Hallmarks of Brain Aging

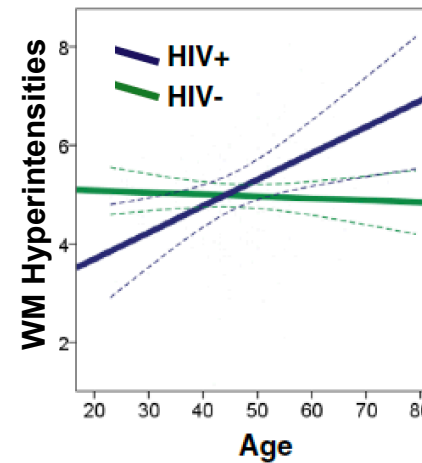


Mattson & Arumugam, *Cell Metabolism*, 2018, <https://doi.org/10.1016/j.cmet.2018.05.011>

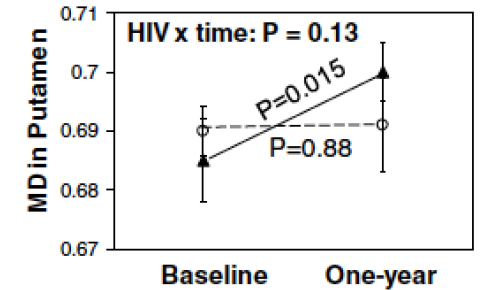
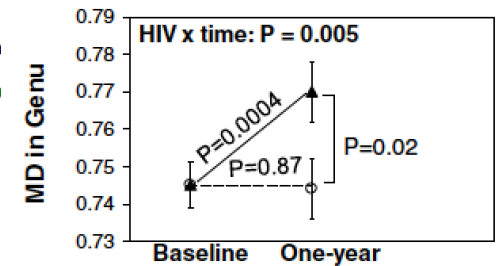
# HIV May Accelerate White Matter Injury



HIV x Age Interaction  $p = 0.003$



HIV x Age Interaction  $p = 0.01$



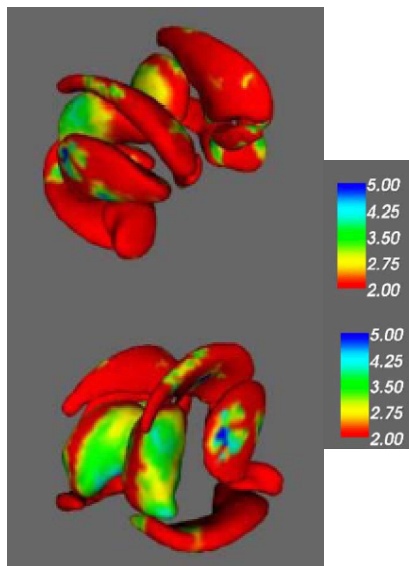
Archibald et al, *J. Neurovirol.*  
2014; 20: 603–611

Fennema-Notestine et al,  
*J Neurovirol*, 2013; 19 (4), 393-401

Seider et al, *J. Neurovirol.*  
(2016) 22:201–212

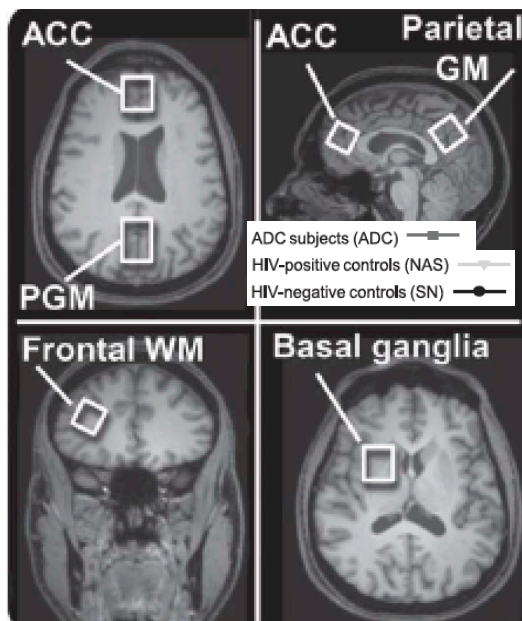
Holt et al, *J. Neurovirol.*  
(2012) 18:291–302

# HIV May Accelerate Subcortical Gray Matter Changes, Gliosis, and Neuronal Injury

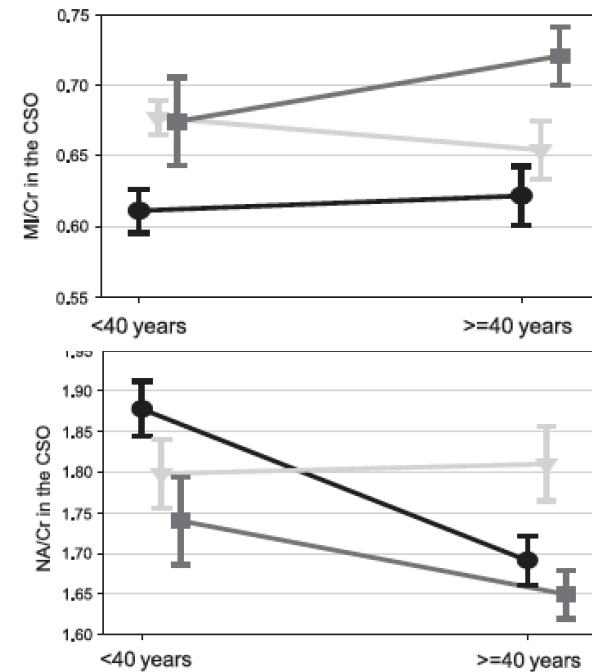


HIV x Age Interaction,  $p < 0.001$   
(bilateral nucleus accumbens,  
amygdala, caudate, and thalamus)

Kuhn et al, *Human Brain Mapping*,  
2016, DOI: 10.1002/hbm.23436

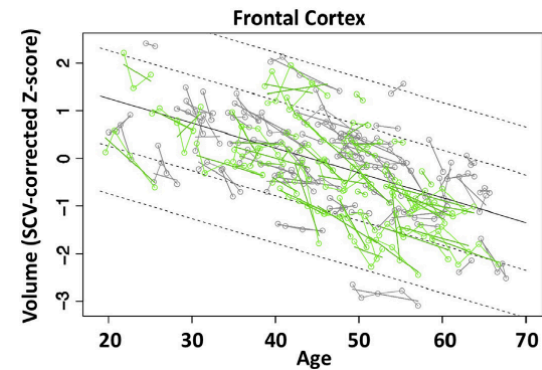
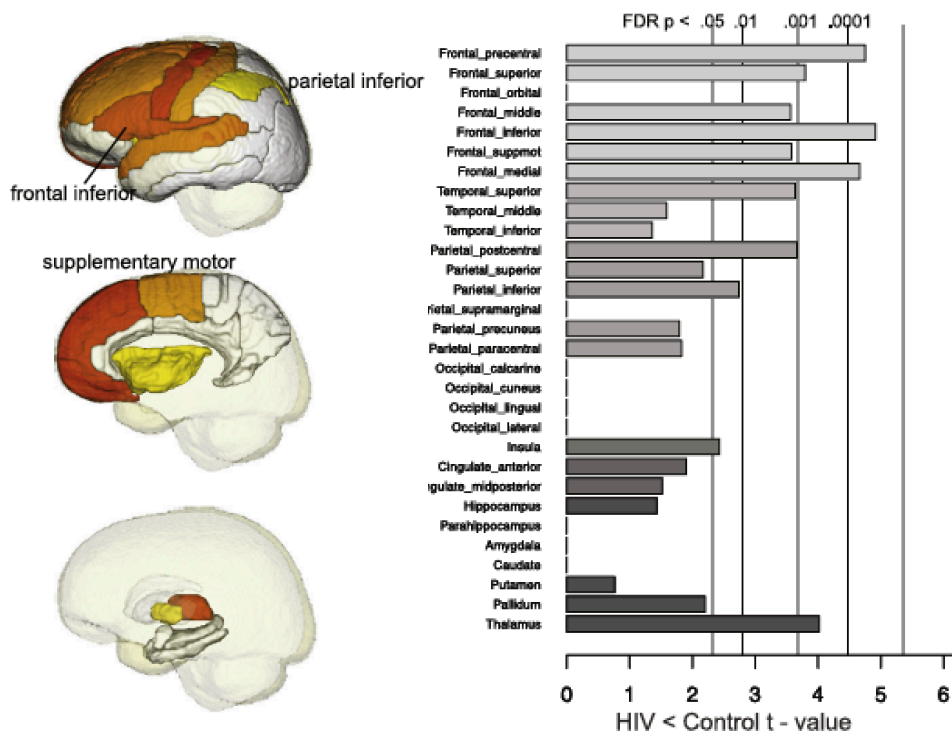


Chang et al, *Neurology*  
2014; 82: 2213–22



Chang et al, *NeuroImage*  
2004; 23: 1336-47

# Longitudinal Evidence Supports Differential Vulnerability of Brain Regions



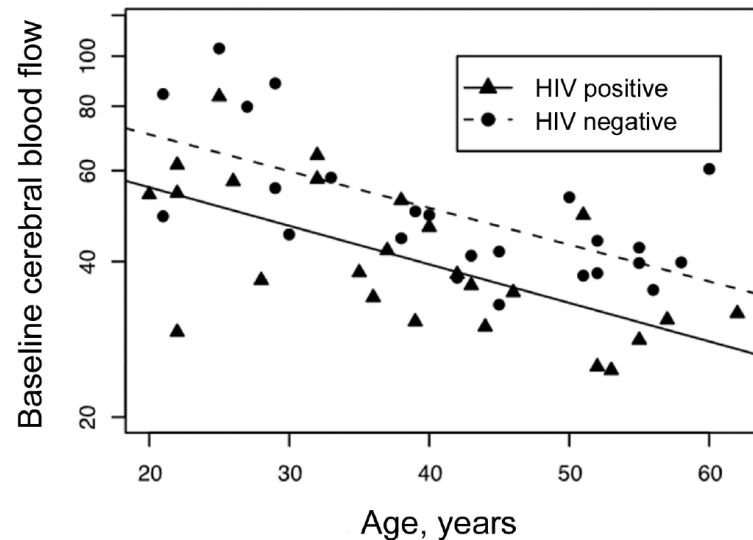
ROI	Volume differences		Trajectory differences		Acceleration (slope) with age	
	t	p	t	p	t	p
Lateral ventricles	1.3111	0.1925	2.5715	0.0108	1.7101	0.0900
Sylvian fissures	2.1708	0.0320	1.7452	0.0823	1.4851	0.1403
Frontal cortex	-1.4266	0.1565	-1.0916	0.2761	-2.5370	0.0126
Sensorimotor cortex	-0.2914	0.7713	0.1812	0.8563	-2.3352	0.0213
Temporoparietal cortex	-1.8728	0.0637	-0.7269	0.4680	-2.2728	0.0250
Cingulum	-2.0626	0.0414	-0.9936	0.3214	-1.3730	0.1725
Insula	-3.3542	0.0011	-1.9828	0.0486	-1.8737	0.0636
Thalamus	-3.6202	0.0004	-1.6656	0.0972	-2.6255	0.0099
Hippocampus	-2.4597	0.0154	-2.8136	0.0053	-0.8254	0.4109
Amygdala	-1.3382	0.1835	-0.5882	0.5570	0.6580	0.5119
Basal ganglia	-0.6206	0.5361	0.4741	0.6359	-0.5426	0.5885

Pfefferbaum et al, *Biological Psychiatry: Cognitive Neuroscience and Neuroimaging* 2018; 3:844–859

Pfefferbaum et al, *Neurobiology of Aging* 35 (2014) 1755e1768

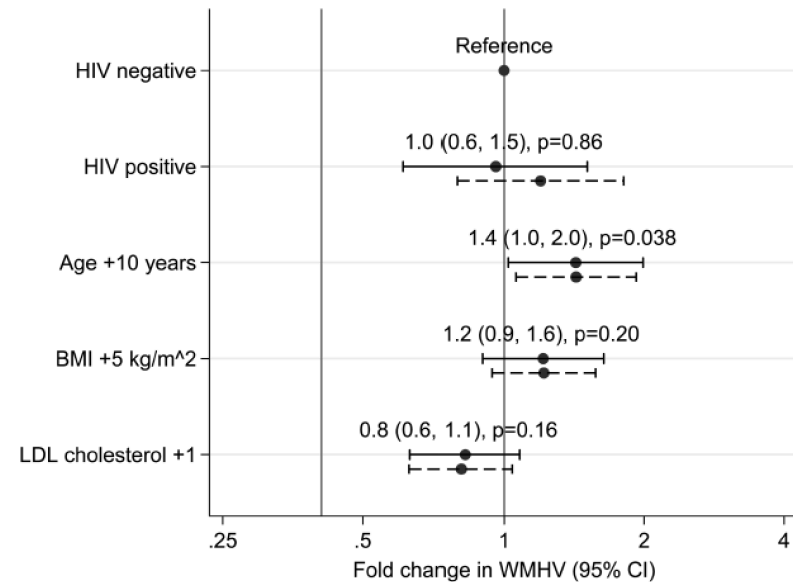


# Some Imaging Studies Have Not Found Evidence of Premature Aging



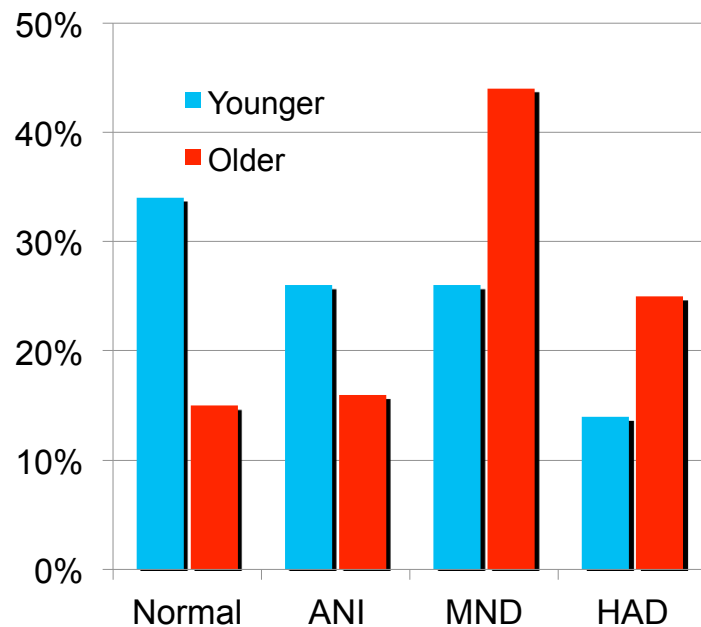
*Ances et al, J Infect Dis*  
2010; 201:336–40

## WM Hyperintensities

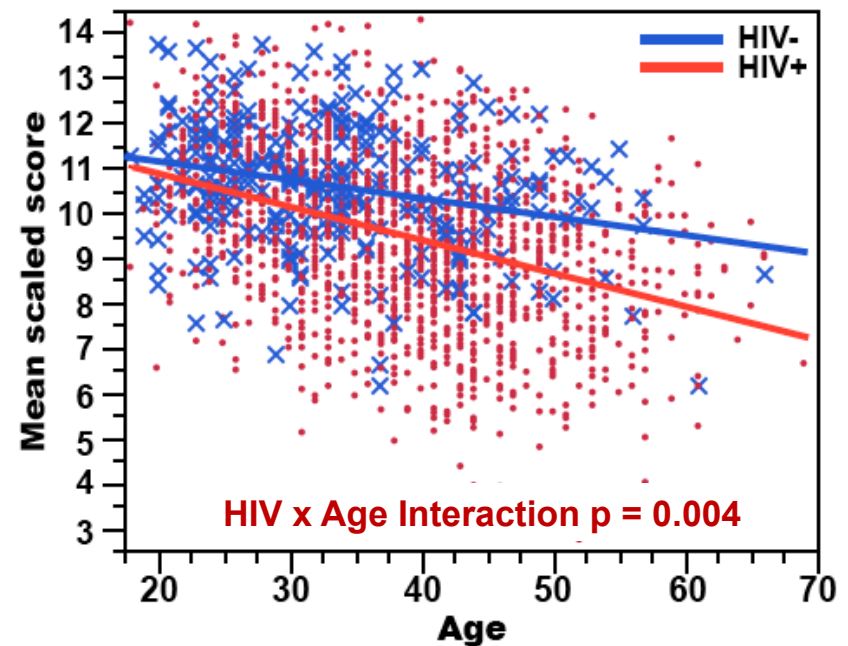


*Haddow et al, AIDS Res Hum Retrovir*  
2019; 35(5): 453-60

# HIV May Cause Premature Cognitive Decline

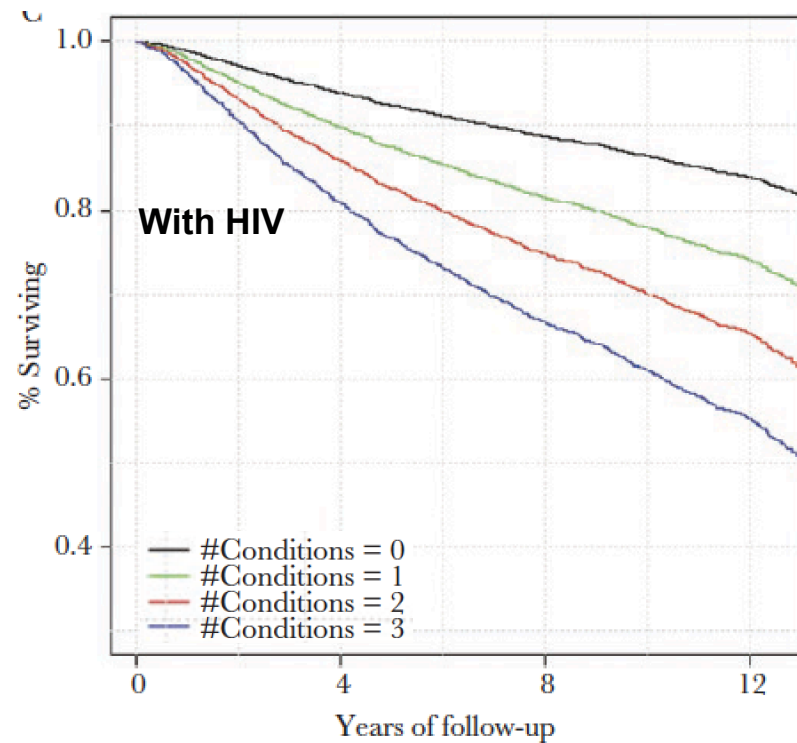
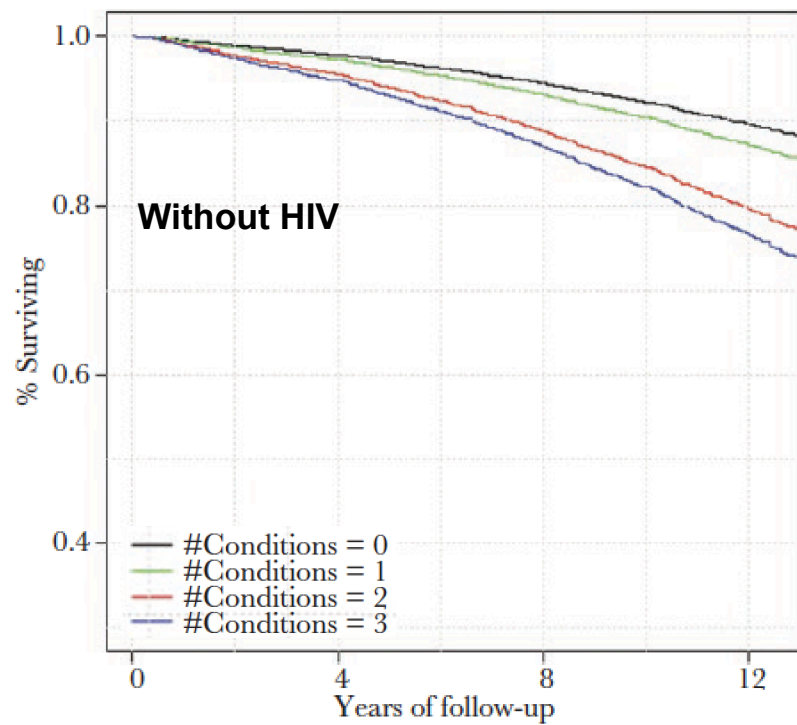


*Adapted from Valcour et al, Neurology 2004;63:822–827*



*Heaton et al, J Neurovirology, 2012, 18(Suppl 1): S46*

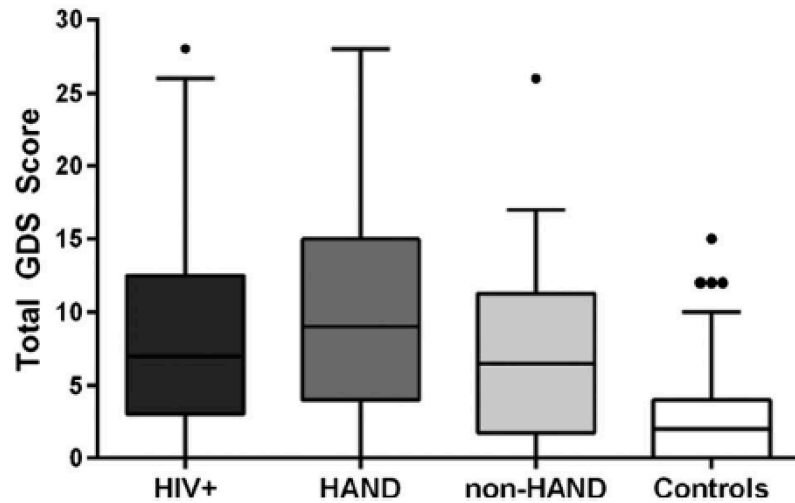
# Greater Influence on Mortality of Depression in PWH



**Conditions:** Depression, Alcohol Use, Cigarette Smoking

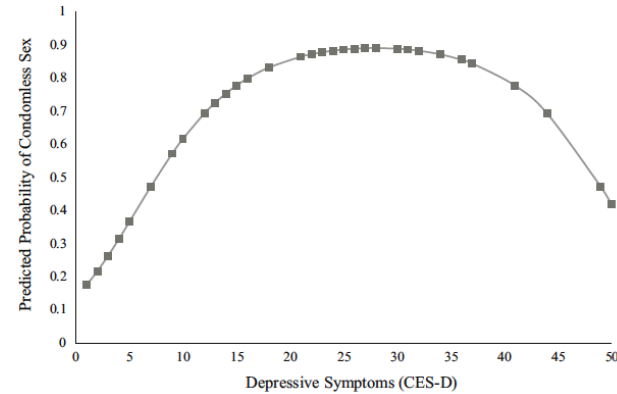
*Chichetto et al, Open Forum Infectious Diseases, 2019; 1-8*

# Overlap Between Cognition and Depression



Milanini et al, *AIDS Care*, 2017;  
29(9): 1178–1185

**GDS: Geriatric Depression Scale**

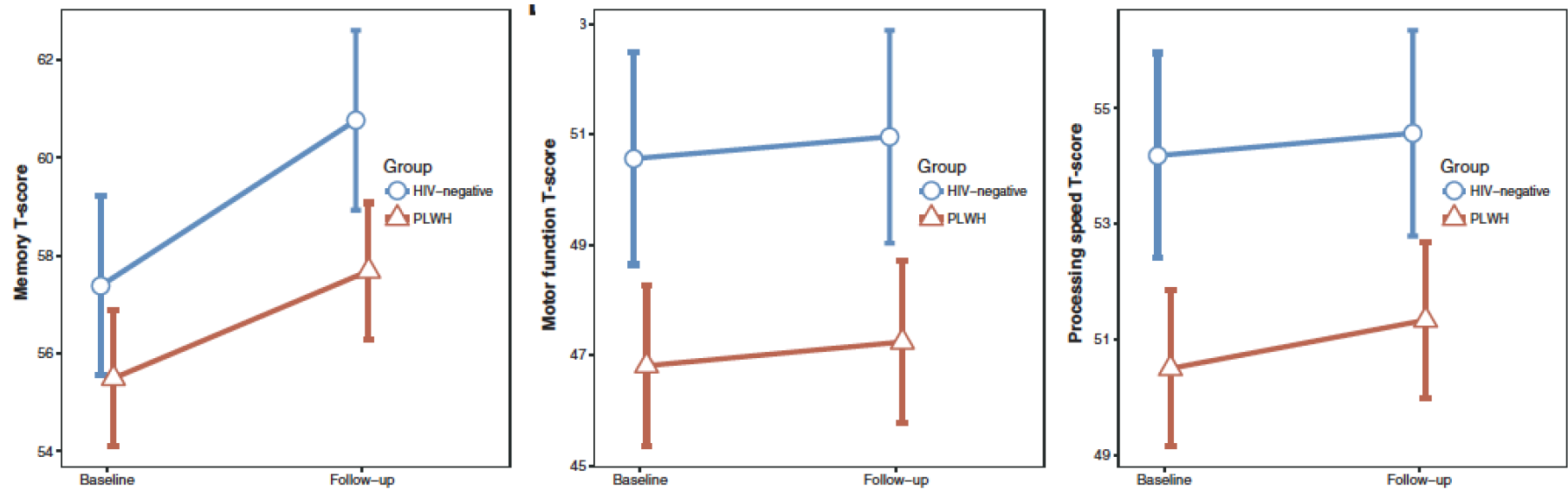


Babowitch et al, *Arch Sex Behav* (2018) 47:2035–2040

Outcome <sup>a</sup>	Effect Estimate (95% CI)	
	Per 25% Increase in % of Days With Depression	Comparing Those Always Depressed With Those Never Depressed
All-cause mortality, hazard ratio <sup>b</sup>	1.19 (1.05-1.36)	2.02 (1.20-3.42)
Risk of missing a scheduled appointment, risk ratio <sup>c</sup>	1.08 (1.05-1.11)	1.37 (1.22-1.53)
Risk of having an unsuppressed viral load, risk ratio <sup>c</sup>	1.05 (1.01-1.09)	1.23 (1.06-1.43)

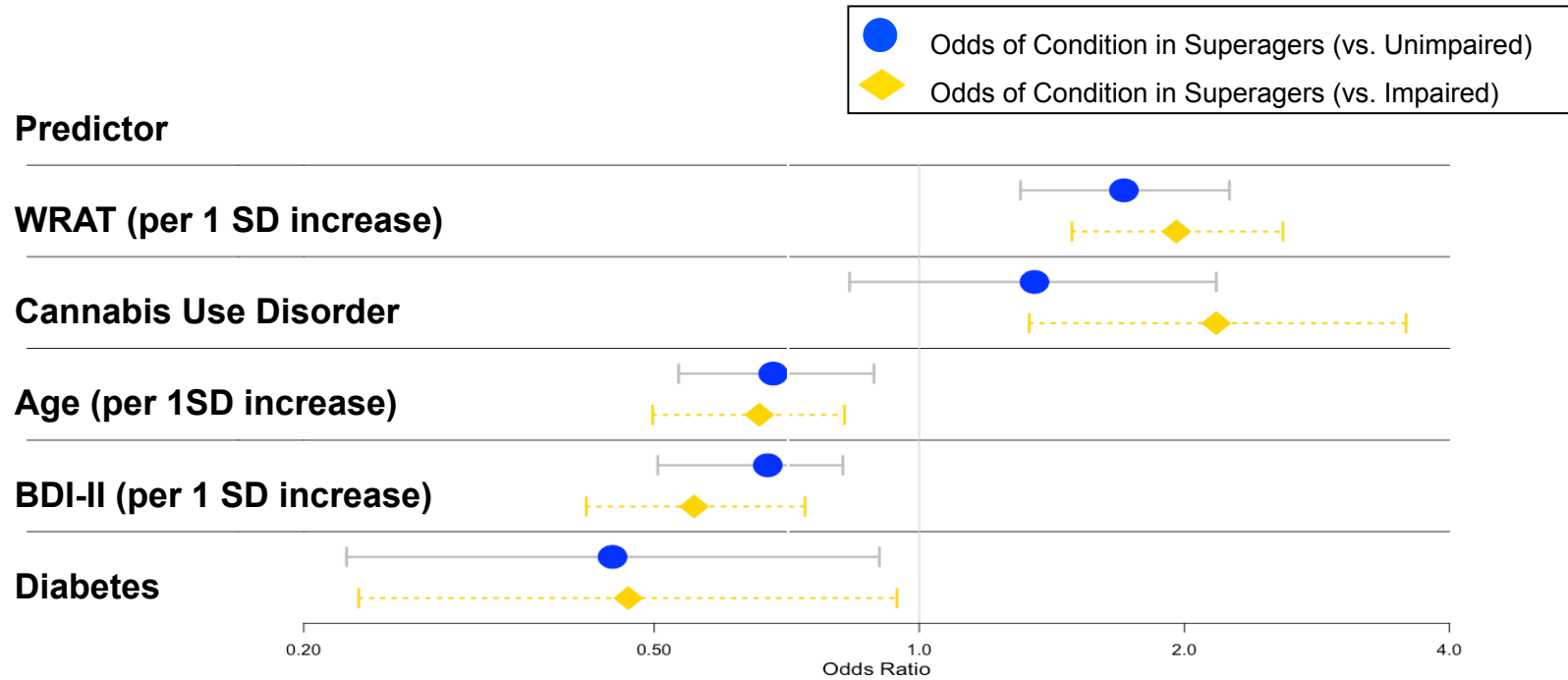
Arseniou et al, *Psych Clinic Neurosci* 2014; 68: 96–109

# Some Cognitive Studies Have Not Found Evidence of Premature Aging



Cole et al, *Clin Infect Dis*, 2018;  
66(12):1899–909

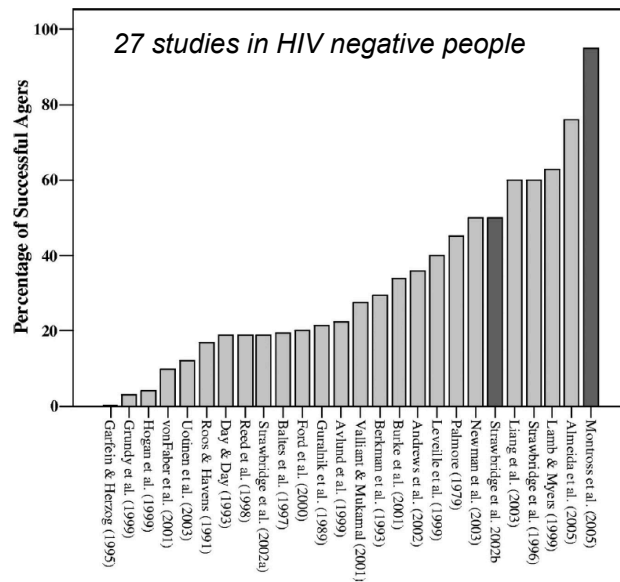
# Correlates of Cognitive SuperAging in PWH



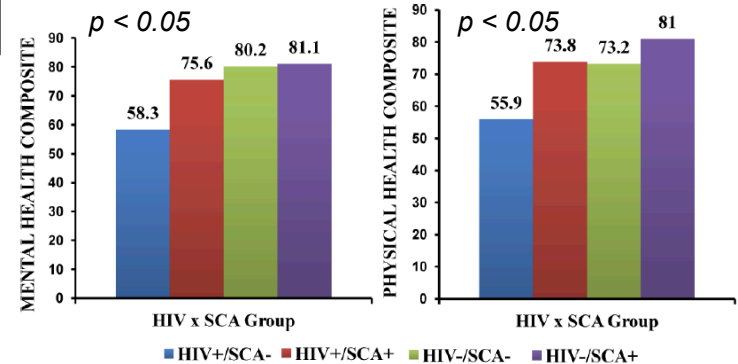
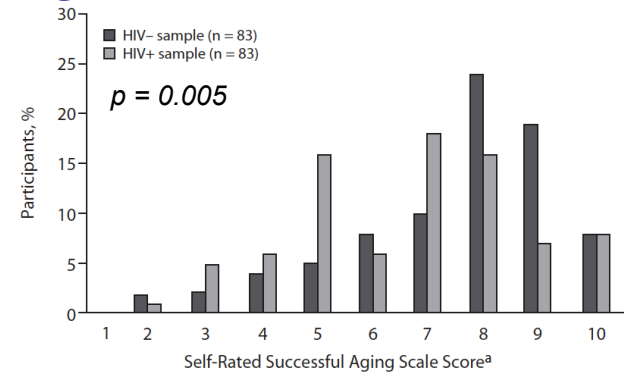
Saloner et al., 2019, PMID: 30890191

# Successful Aging in 36% of the General Population: May be Lower in PWH

- **Common elements of successful aging**
  - Avoidance of disease and disability
  - Maintenance of high physical and cognitive function
  - Sustained engagement in social and productive activities
- **Subjective quality of life** may be more important than the absence of disease

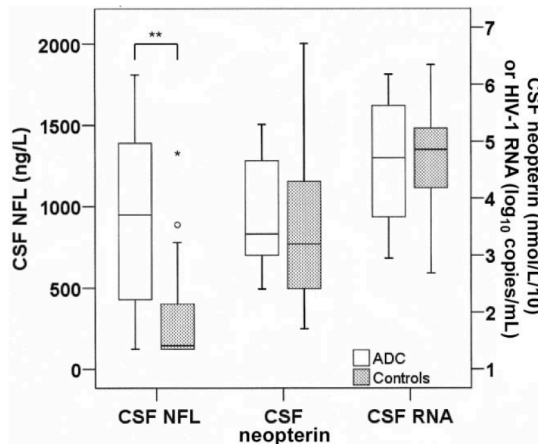


Most frequent correlates of SA: Nonsmoking and absence of disability, arthritis, and diabetes

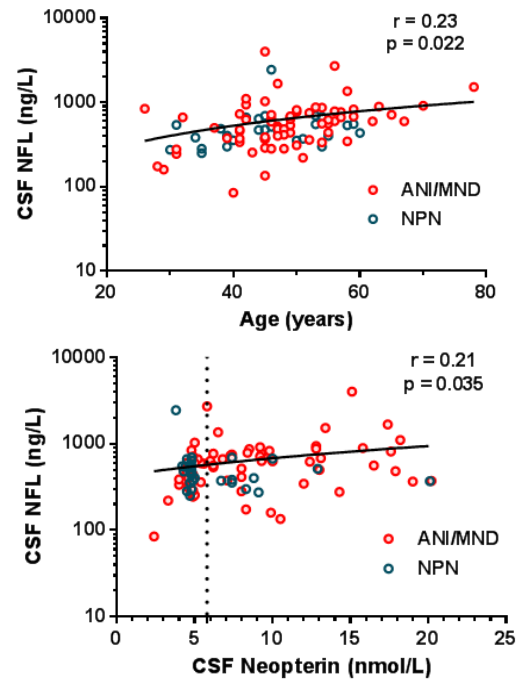


Rowe & Kahn, *Gerontologist*. 1997;37(4):433-40; [http://en.wikipedia.org/wiki/Successful\\_Aging](http://en.wikipedia.org/wiki/Successful_Aging), Accessed 8 November 2013; Depp & Jeste, *American Journal of Geriatric Psychiatry*. 2006; 14: 6-20; Moore et al, *J Clinical Psychiatry* 2013, 74: e417-23; Moore et al, *AIDS Behav*. 2018 ; 22(5): 1551–1561

# Older Age is Associated with Higher Concentrations of Many Biomarkers in PWH



Gisslen et al, *J Infect Dis*, 2007; 195: 1774-8



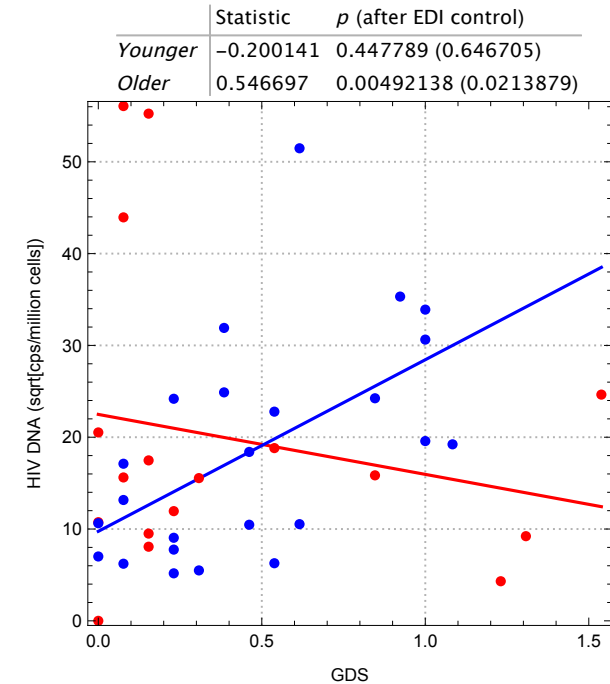
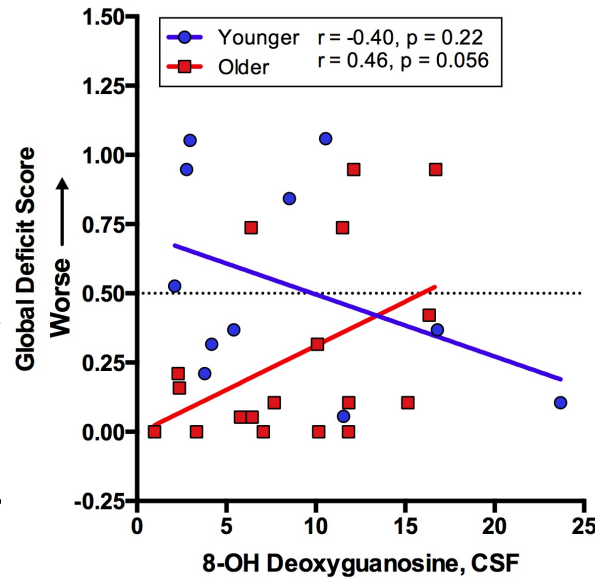
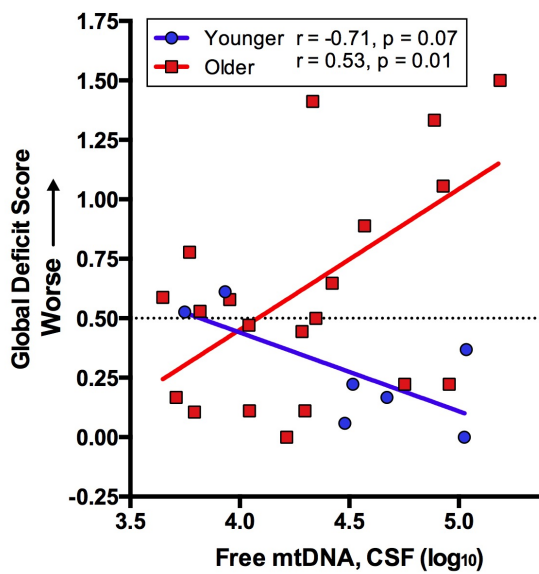
Eden, et al, *PLoS One*, 2016; 11 (6), e0157160

	Correlation		Interaction
	Age	GDS	Age x Biomarker
<b>Viral</b>			
- HIV RNA (SCA)	X	X	-
- HIV DNA	-	-	X
<b>Neuronal</b>			
- Phospho-Tau (181)	X	X	X
- Total tau	X	X	-
- Neurofilament Light	X	-	-
<b>Aging</b>			
- Telomere Length	X	-	X
- Mitochondrial Common Deletion	X	X	-
- Free Mitochondrial DNA	X	-	X
- 8-OHdG	X	X	X
- Protein Carbonyls	X	X	X
- F2-isoprostanes	X	-	X
<b>Macrophage/Glial</b>			
- MCP-1	X	X	X
- sCD163	X	X	-
- Neopterin	X	X	-
- GFAP	X	-	-
<b>Metabolic/Vascular/Inflammation</b>			
- IL-6	X	X	X
- sCD40L	X	-	X
- D-dimer	X	-	-
- hsCRP	-	-	-
- Amyloid $\beta$ 1-42	-	-	X

Unpublished UCSD Data



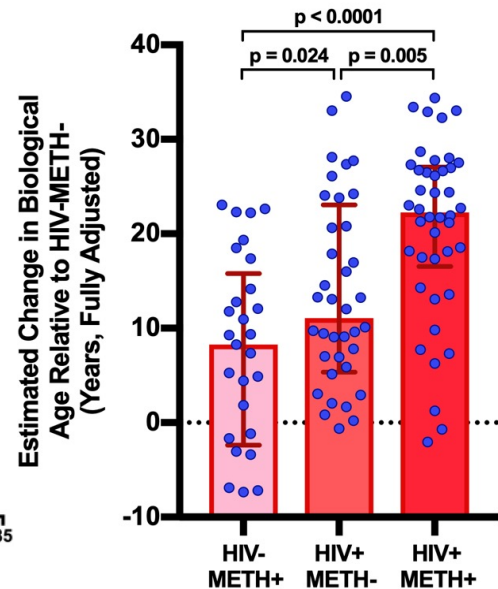
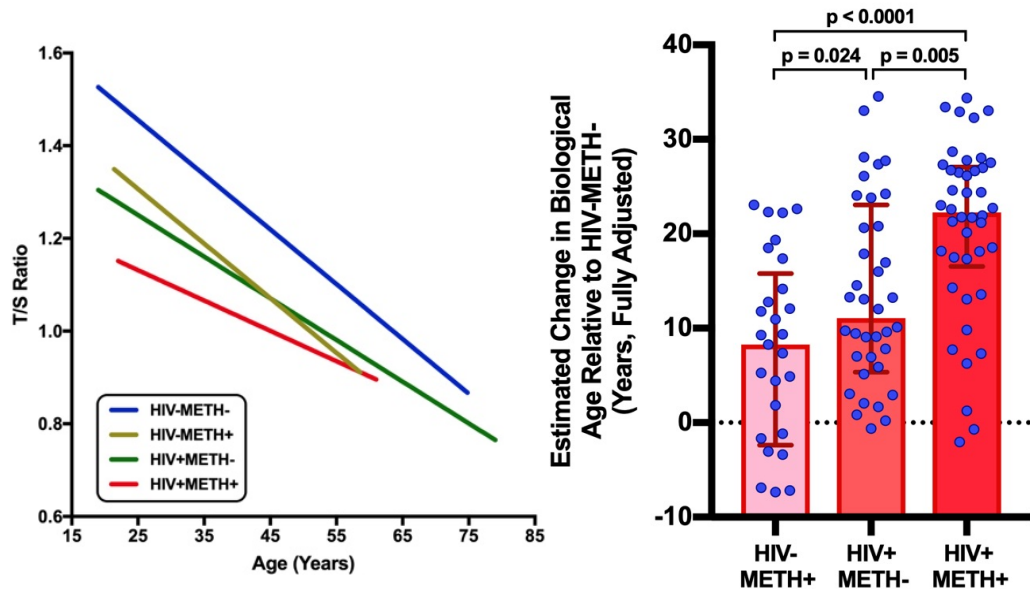
# Aging Alters Associations Between Some Biomarkers and Cognition



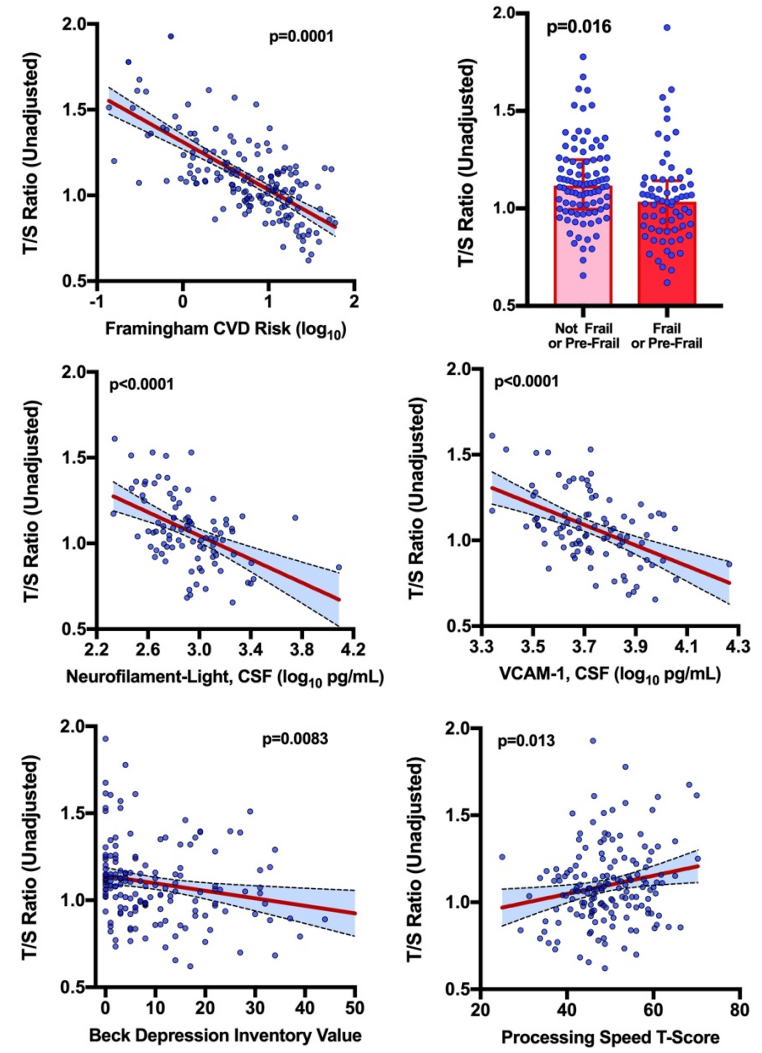
Unpublished UCSD Data  
Free mtDNA Data Courtesy Sanjay Mehta

Oliveira et al, Sci Rep, 2015;  
5, 17094

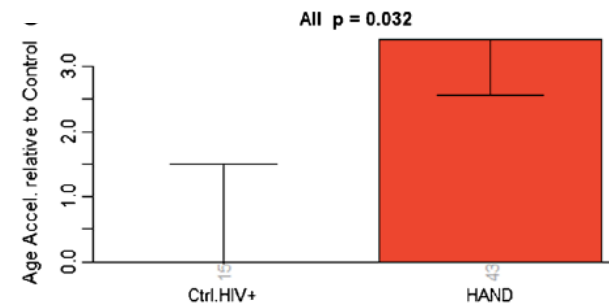
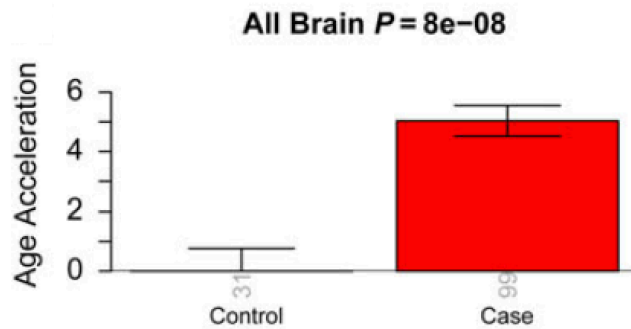
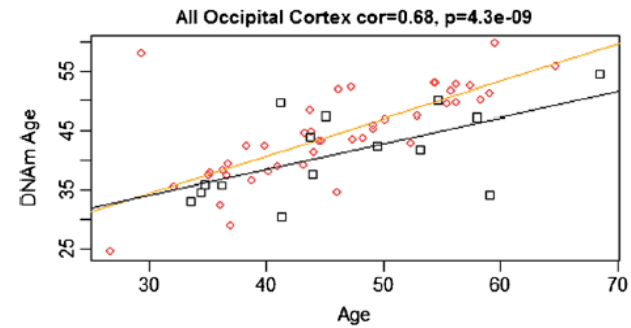
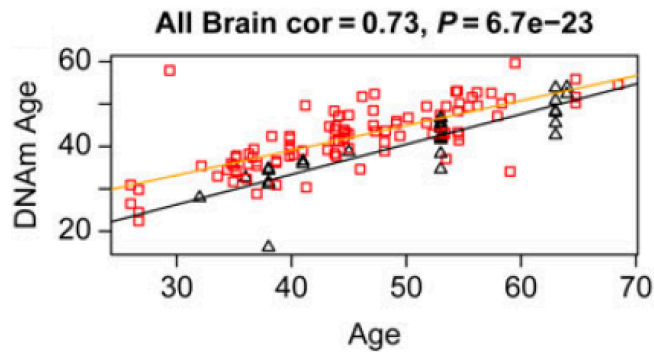
# HIV, Methamphetamine, & Shorter Telomeres



Mehta, Letendre, et al. Manuscript Submitted, 2019



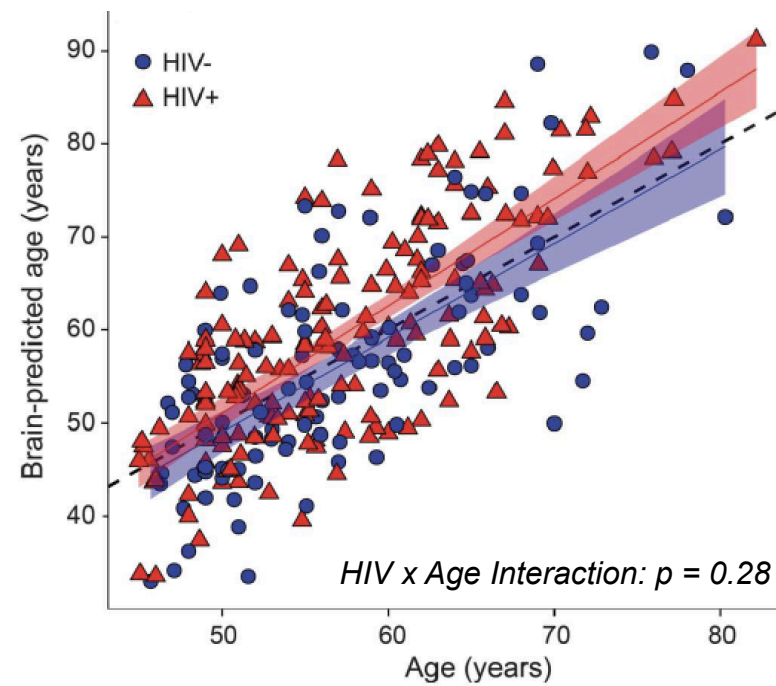
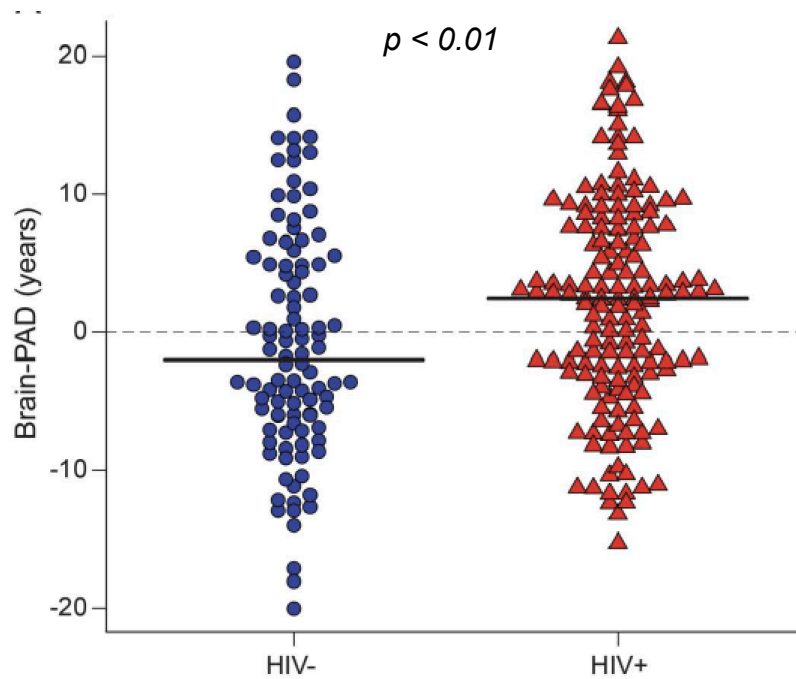
# Evidence of Premature Brain Aging by the Epigenetic Clock Method



Horvath & Levine, *J Infect Dis* 2015; 212:1563–7

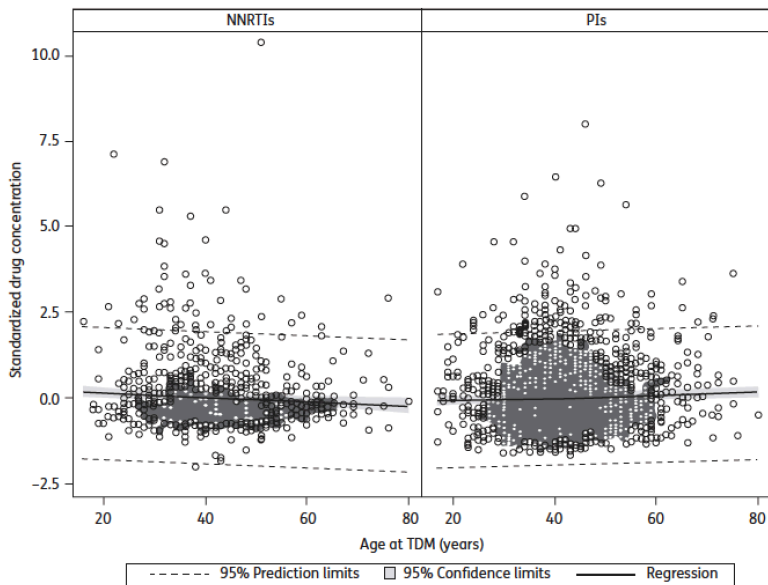
Levine et al, *J Neurovirol* 2016, 22(3):366-75

# Imaging-Based Brain-Predicted Age is Older in PWH

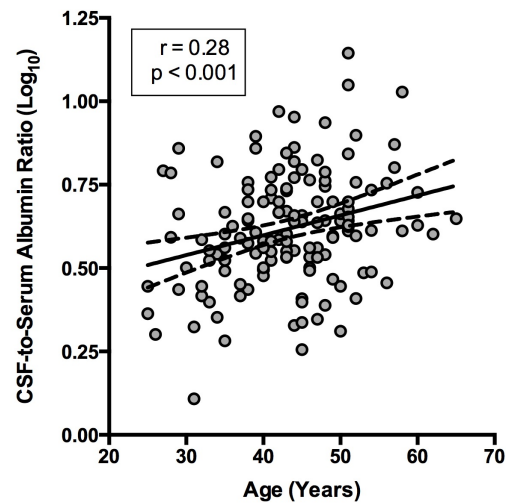


*Cole, et al, Neurology 2017; 88:1349–1357*

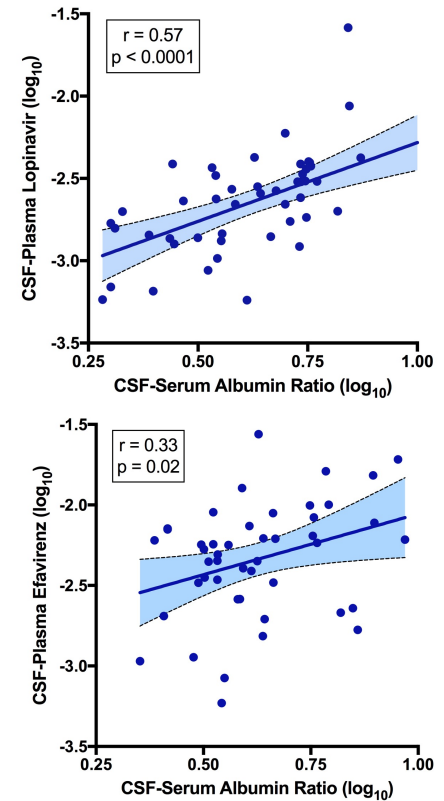
# Older Age May Alter Drug Metabolism and Distribution into the CNS



Winston et al, *J Antimicrob Chemother* 2013; doi:10.1093/jac/dkt029

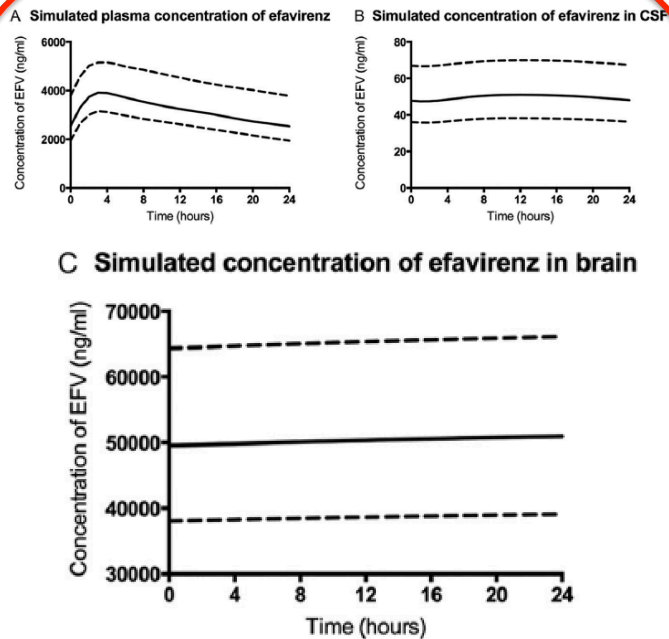


Letendre et al, 18<sup>th</sup> CROI, 2011, Abstract 408

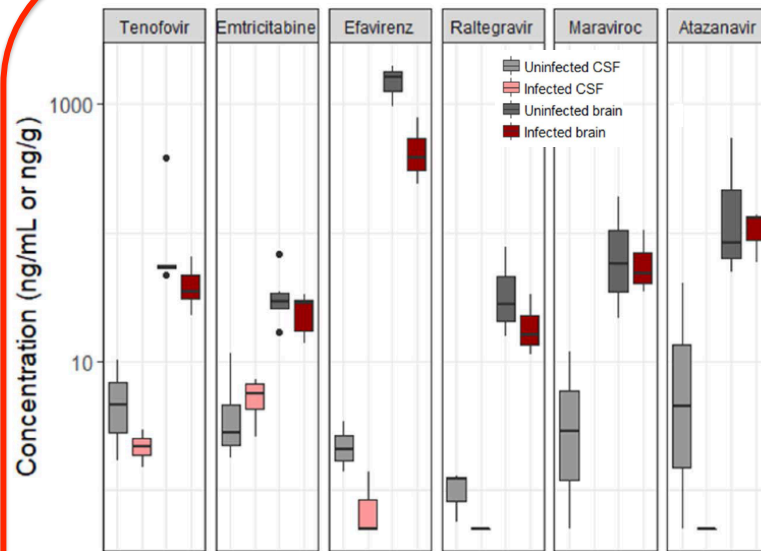


Croteau et al, 19<sup>th</sup> CROI, 2012, Abstract 592

# Animal Models Support That ART Concentrations in Brain Are Much Higher Than in CSF

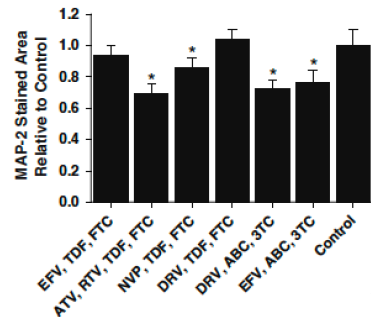
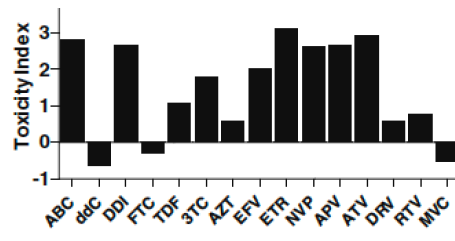
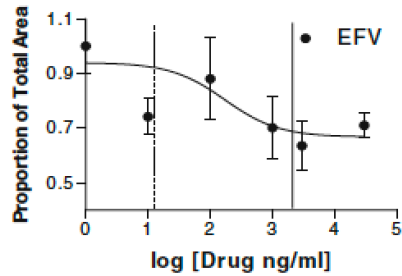
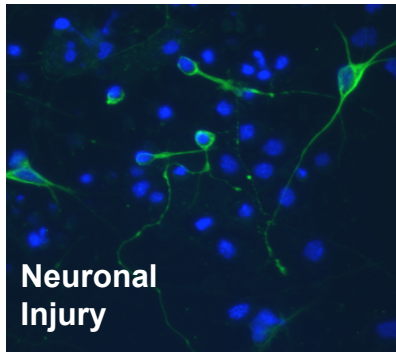
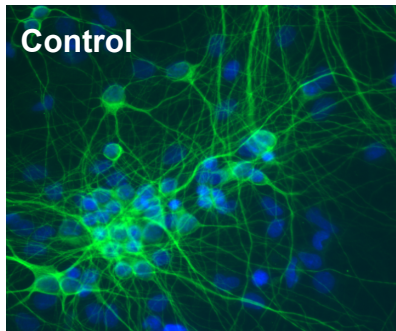


Curley et al, AAC  
2017, 61(1): e01841-16



Srinivas et al, IAS 2017, Abstract WEAB0105  
Srinivas et al, Xenobiotica 2018, 17:1-10

# In Vitro Evidence of ART Toxicity in Neuronal Cell Culture



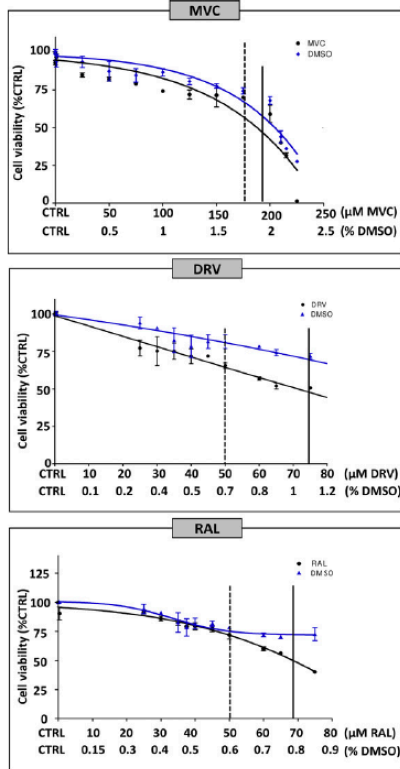
Robertson et al, J Neurovirol 2012, 18: 388-299

	Mitochondrial Assay			Neurite Outgrowth Assay				
	MMP	ROS	Cytotx	Outgrowth		Retraction		Cytotx
				length	branch	length	branch	
Abacavir	1.6	1.1	-0.2	1.1	1.0	0.1	-0.2	-0.6
Tenofovir	1.6	0.0	-0.5	0.5	0.5	-1.6	-1.0	0.4
Efavirenz	-13.6	0.5	-6.8	2.9	1.1	-3.3	-0.6	-2.6
Rilpivirine	-6.2	1.0	-0.7	1.3	1.0	-2.8	-1.9	-2.2
Elvitegravir	-10.4	2.1	-1.5	0.8	0.5	-1.5	-1.2	-1.7
Dolutegravir	1.0	0.5	-0.5	3.2	4.0	-0.5	0.3	-0.5
Atazanavir	-2.4	1.9	-0.5	1.4	1.0	-0.5	-1.3	-0.5
Darunavir	2.1	0.4	-0.4	1.2	0.8	0.0	-0.3	-0.8
Ritonavir	-5.2	2.8	-0.4	0.2	0.3	-1.7	-0.5	-0.8
Cobicistat	-12.0	7.7	1.0	1.1	1.1	-1.6	-2.4	-1.7
Menadione	-12.0	10.6	-20.9					
Staurosporine				7.1	9.6	-0.9	0.2	-1.2
BIO				-2.2	-0.4	-3.6	-2.2	0.6

Hinckley et al, CROI 2016, Abstract 395

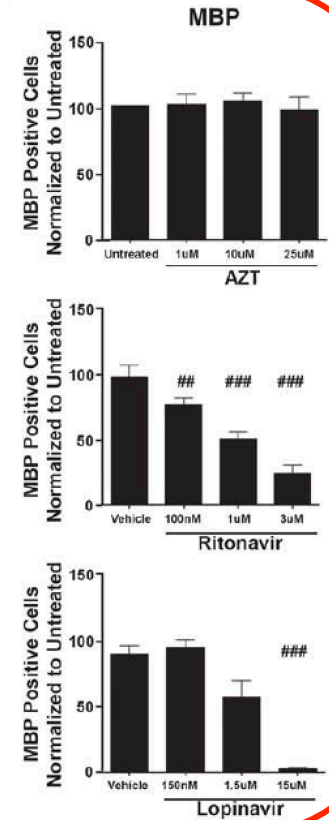
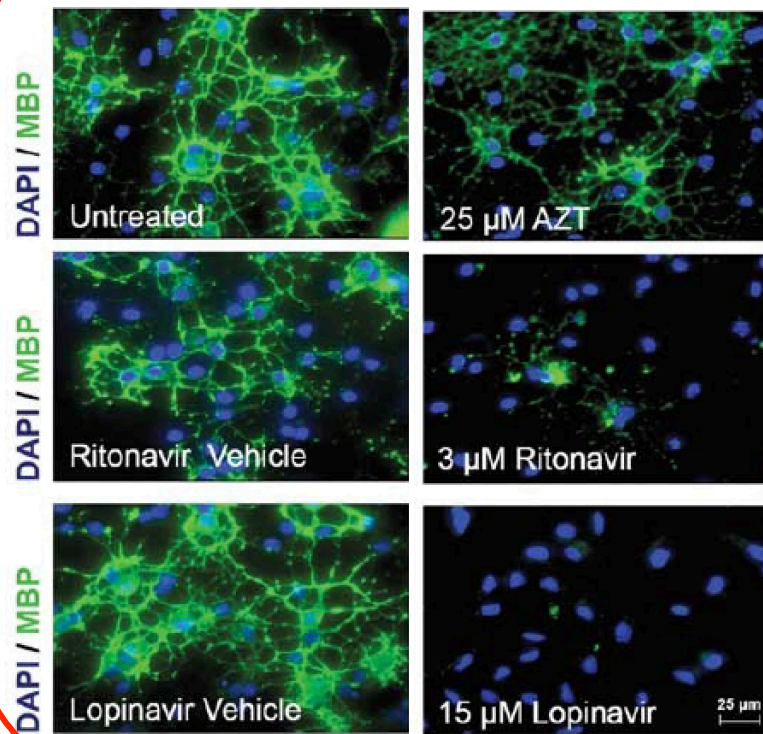
# ART Toxicity in Other Glial Cells

## Astrocytes



Latronico et al, J Neurochem 2018, 144: 271-84

## Oligodendrocytes



Jensen et al, J Neuropathol Exp Neurol 2015, 74(11): 1093-1118



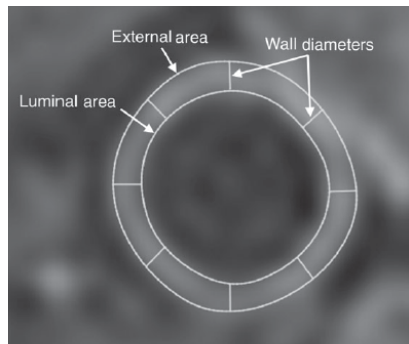
# Evidence of Clinical Neurotoxicity Has Been Accumulating

## Efavirenz is Associated with HAND

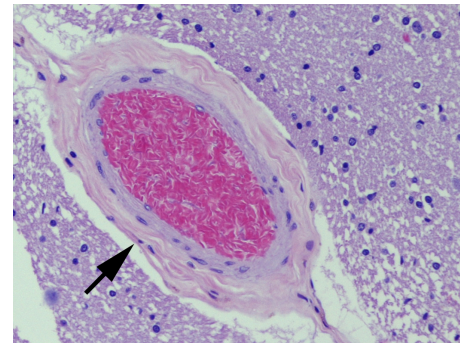
Risk Factor	Odds Ratio	P Value
Age (per 10 years)	0.83	0.29
Education (per 1 year)	0.85	0.002
Non-Italian Born	3.5	0.056
<b>Efavirenz use</b>	<b>4.0</b>	<b>0.008</b>

*Ciccarelli et al, Neurology 2011, 76: 1403*

## PIs are Associated with Carotid Thickening and Cerebral Small Vessel Disease



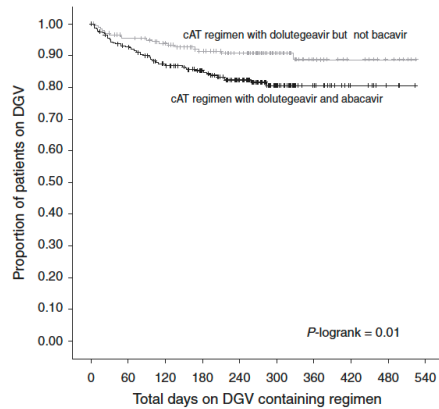
*LaBounty et al, HIV Medicine 2016, 17(7):516-23*



*Soontornniyomkij et al, AIDS 2014, 28:1297-1306*

# Dolutegravir, NP AEs, & Discontinuation

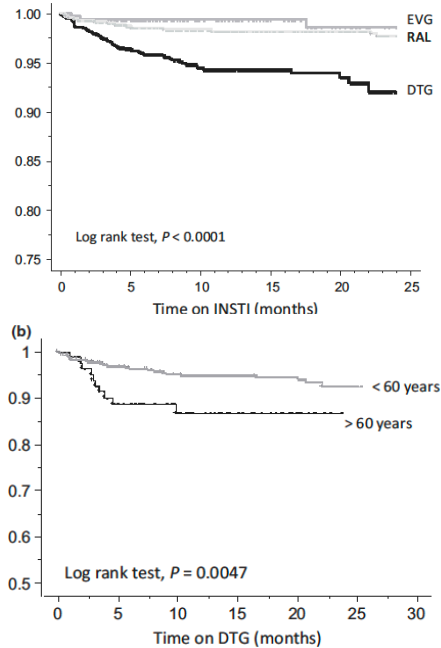
**N=565  
DTG Only**



Adverse drug reaction	n (%)
Sleep disturbance, insomnia	31 (5.6)
Gastrointestinal complaints	21 (3.8)
Joint, tendon and/or muscle pain	11 (2.0)
Psychological/psychiatric symptoms <sup>b</sup>	14 (2.5)
Neurologic symptoms	10 (1.8)
General malaise (headache and severe fatigue)	24 (4.3)
Respiratory tract complaints	5 (0.9)
Other	9 (1.6)

*de Boer et al, AIDS  
2016, 30:2831–2834*

**N=1,950  
InSTIs Only**



*Hoffmann et al, HIV Medicine  
2017, 18, 56–63*

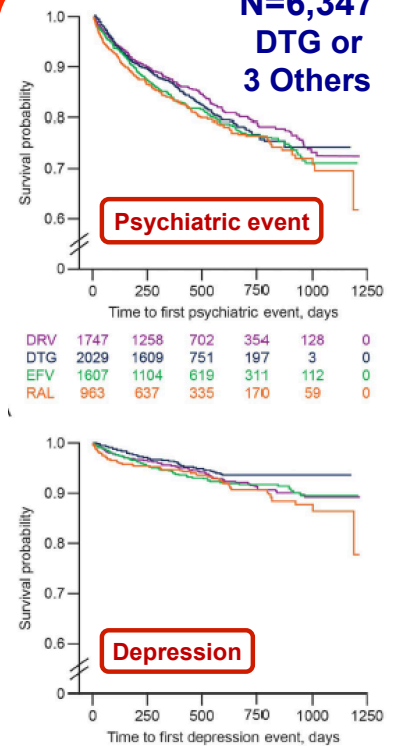
**N=4,041  
DTG vs. RAL**

Variable	HR <sup>a</sup>	P value
Female	1.98	<0.001
Age, per 10 years older	0.93	0.319
Nonwhite ethnicity	0.75	0.172
Prior AIDS-defining condition	0.89	0.513
HCV-coinfection	0.80	0.221
CD4 <sup>+</sup> cells per $\mu$ l		
<350		
350–500	0.98	0.880
>500	1.07	0.735
HIV RNA >100000 copies per ml	1.53	0.149
Treatment naive	1.05	0.858
Backbone		
Abacavir–lamivudine		
Tenofovir–emtricitabine	0.91	0.626
Other	0.97	0.902
Raltegravir versus dolutegravir	1.30	0.140

**Toxicity:  
RAL 4.3%  
DTG 3.6%**

*Elzi et al, AIDS 2017,  
31:1853–1858*

**N=6,347  
DTG or  
3 Others**

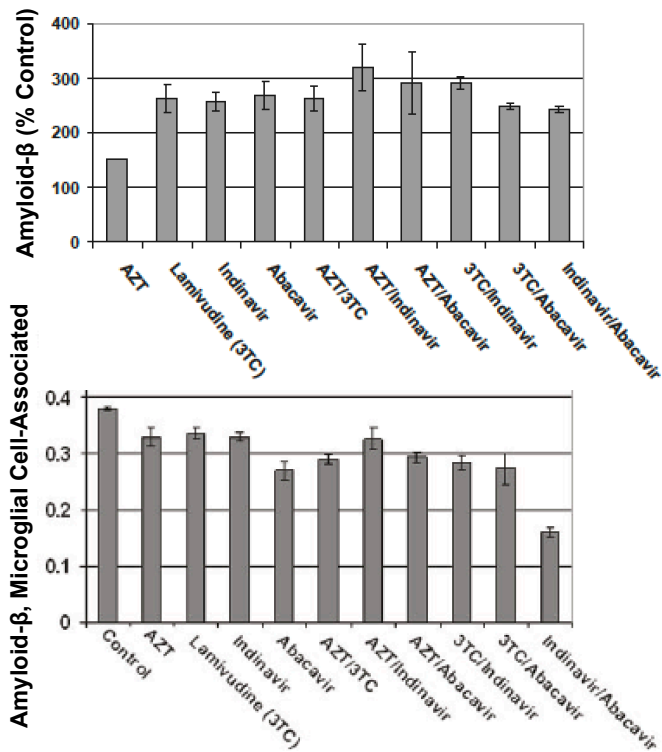


*Fettiplace et al, J AIDS  
2017;74:423–431*

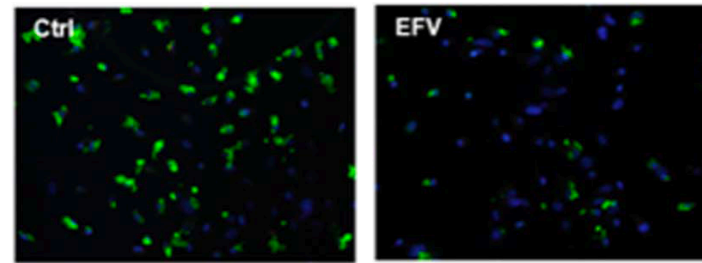
# Summary of *in vitro* Evidence of Mechanisms of Neurotoxicity

Drug	Effect	Drug	Effect
<b>Maraviroc</b>	↑ Microglial activation	<b>Zidovudine</b>	↓ Mitochondrial DNA in cortical neurons
<b>Raltegravir</b>	↑ IL-8 in brain macrophages		↑ Amyloid-β production
<b>Efavirenz</b>	↑ TNF-α and IL-1β	<b>Lamivudine</b>	↓ Mitochondrial DNA in cortical neurons
	Dendritic spine injury		↑ Amyloid-β production
	Mitochondrial alterations	<b>Abacavir</b>	↑ Amyloid-β production
	↑ Autophagy	<b>Indinavir</b>	↑ Amyloid-β production
	↑ β-Secretase expression, ↑ amyloid-β, ↑ ROS	<b>Lopinavir</b>	↓ Myelin basic protein, ↓ galactocerebroside in oligodendrocytes
	↑ Endoplasmic reticulum stress		↑ Oxidative stress, ↑ ER stress, ↑ IL-6 and TNF-α in macrophages
	↓ ATP stores; ↓ neural stem cell proliferation		↓ Tight junction proteins, ↓ synaptic proteins, ↑ TNF-α, IL-6 and IL-1β
<b>Etravirine</b>	↓ MAP-2 density in rat neurons	<b>Atazanavir</b>	↑ Oxidative stress, ↓ MAP-2, ↓ synaptophysin

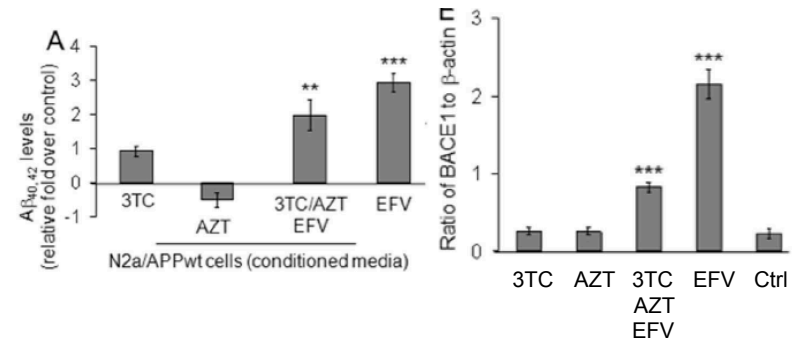
# ART Drugs Can Increase Amyloid- $\beta$ & Reduce Microglial Phagocytosis



Giunta et al, *Molecular Brain* 2011, 4:23

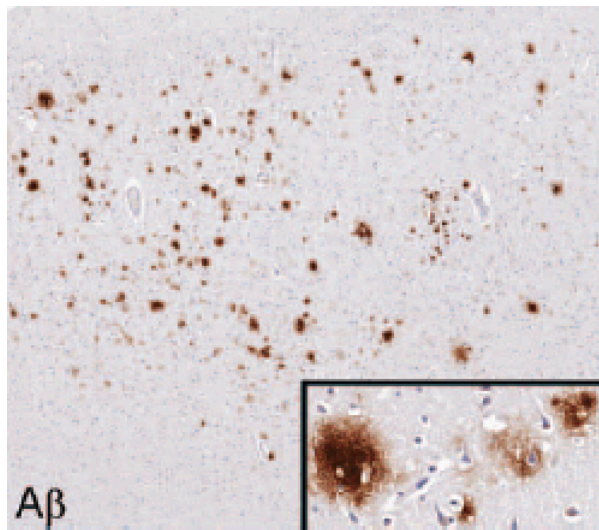


EFV Reduces Microglial Phagocytosis of A $\beta_{1-42}$

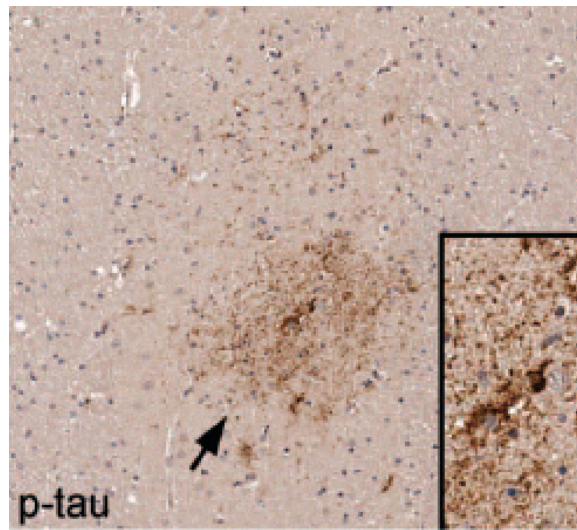


Brown et al, *PLoS ONE* 2014, 9(4): e95500

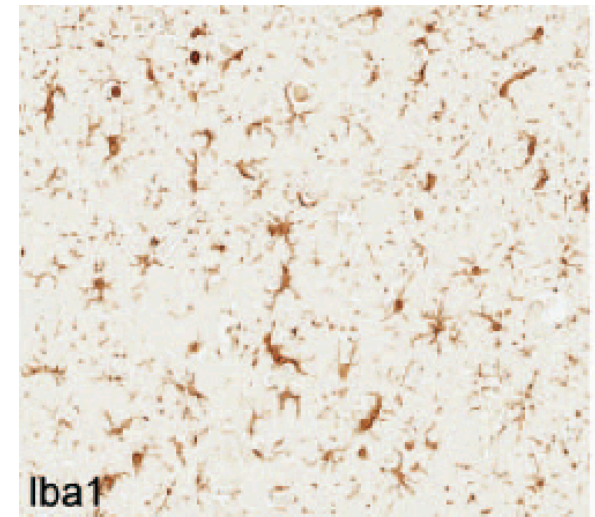
# Amyloid and Phospho-Tau Neuropathology May be Influenced by Antiretrovirals



**Tenofovir** use prior to death associated with lower odds of amyloid  $\beta$  plaque deposition (OR 0.13,  $p=0.012$ )

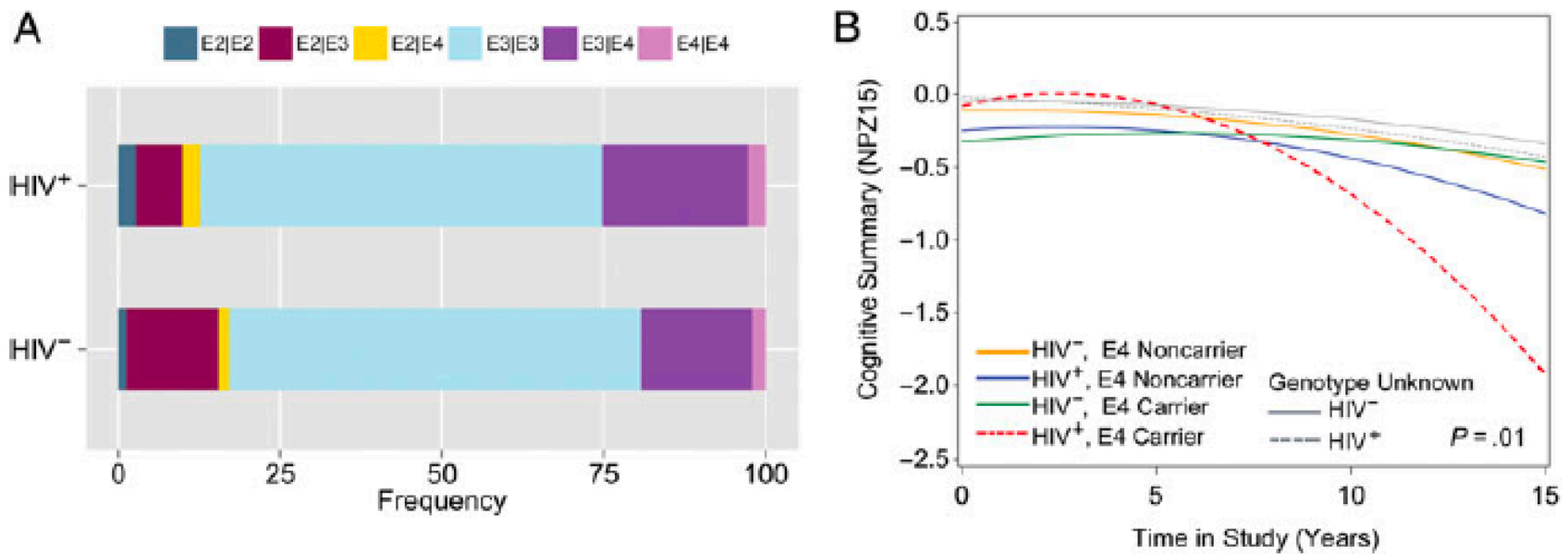


**Darunavir** use prior to death associated with higher odds of phospho-tau deposition in neurons (OR 15.3,  $p=0.0005$ )



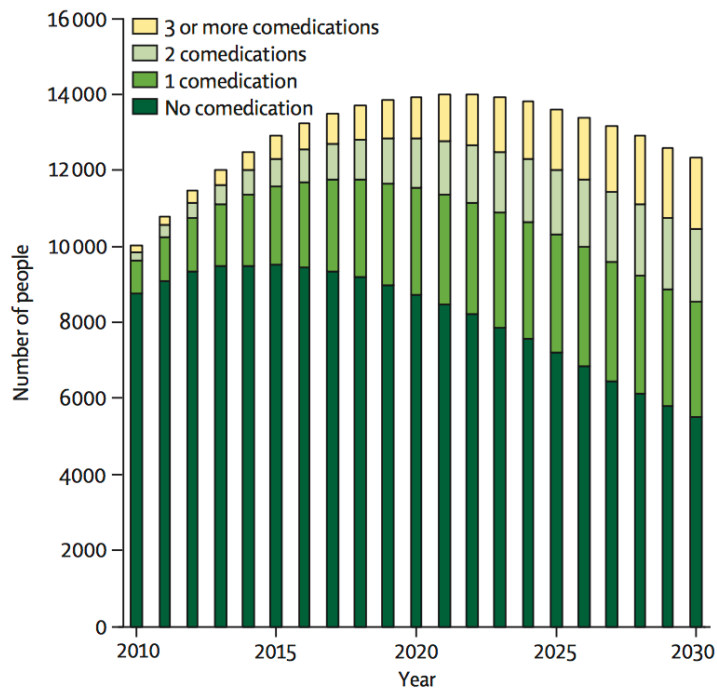
**Ritonavir** use prior to death associated with higher odds of microglial activation (OR 4.96,  $p=0.023$ )

# APOE $\epsilon 4$ is Associated with Cognitive Decline in Men with HIV in MACS

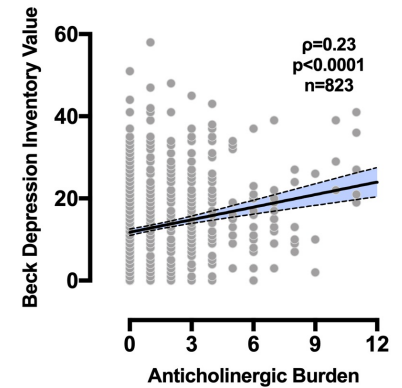
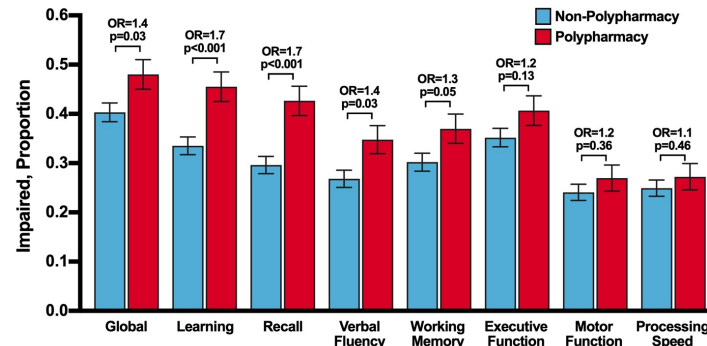


Mukerji et al, *Clinical Infectious Diseases* 2016;63(8):1130–9

# Risks of Polypharmacy in Aging PWH



Smit, et al *Lancet Inf Dis* 2015, 15(7):810-8

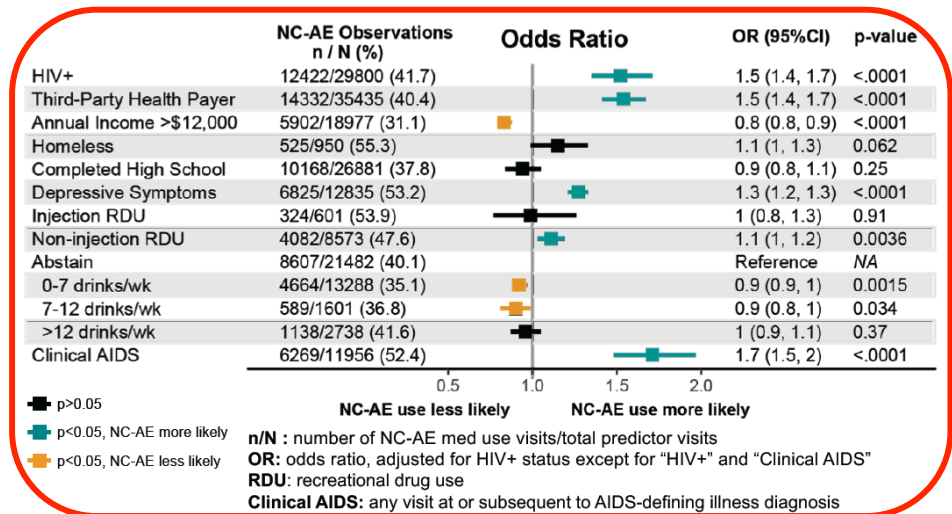
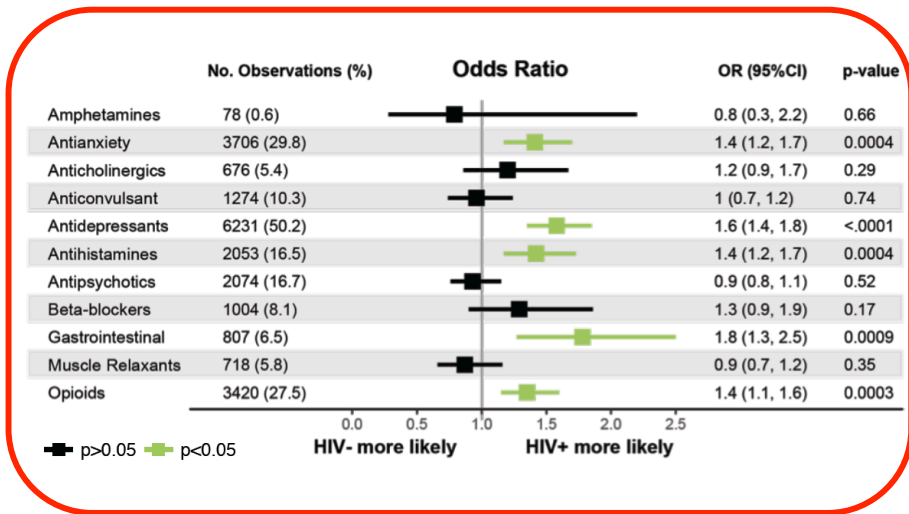


	Learning	Executive Function	Working Memory	Recall	Processing Speed	Motor Function	Verbal Fluency
Anxiolytics	**	**	**	**	**	-	*
Antipsychotics	**	**	**	**	-	*	**
Opioids	**	**	**	*	**	*	-
Antimicrobials	**	**	-	**	*	-	-

\*\* (Red):  $p < 0.01$ , \* (Yellow):  $p < 0.05$ , - (Green):  $p > 0.10$ , statistical significance

Ma, et al *CROI* 2019, Abstract 437

# Women with HIV are More Likely to Use Other Medications Associated with NP-AEs



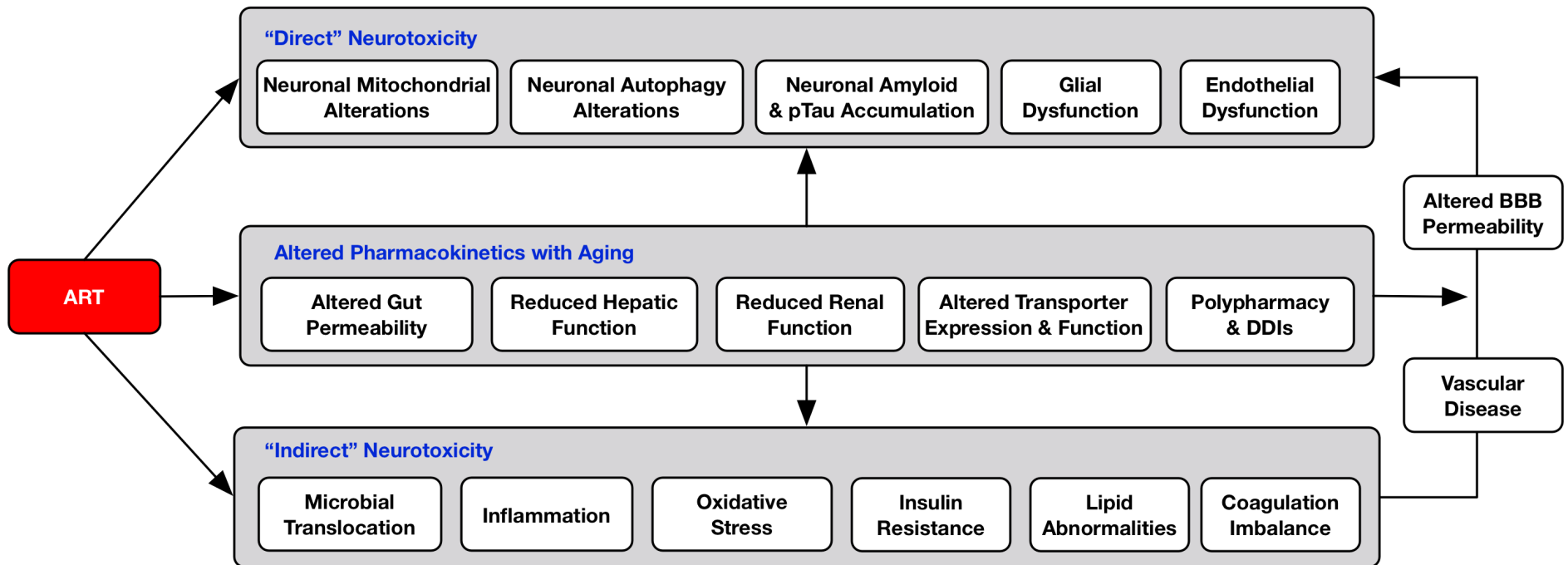
### NP-AE Drug Use and ART

Outcome	OR (95% CI)	p-value
cART use	1.46 (1.35-1.57)	<0.0001
cART adherence	1.03 (0.95-1.12)	0.45
Undetectable viral load	1.12 (1.05-1.19)	0.0008

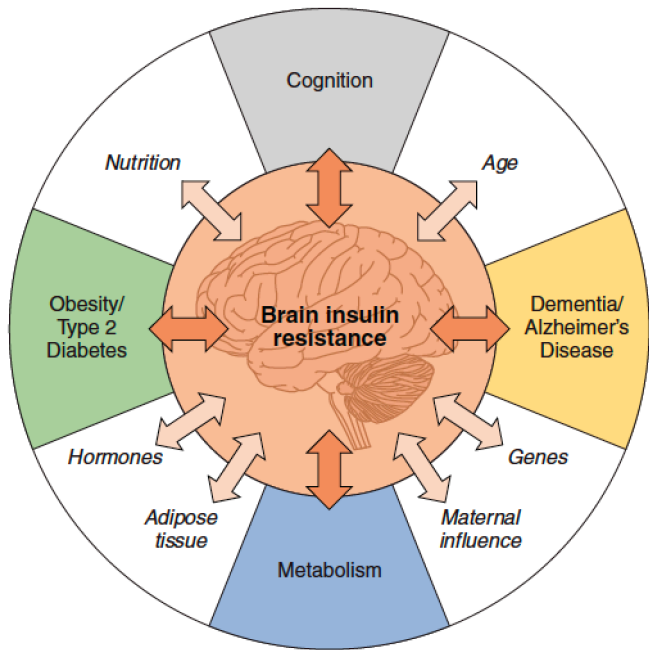




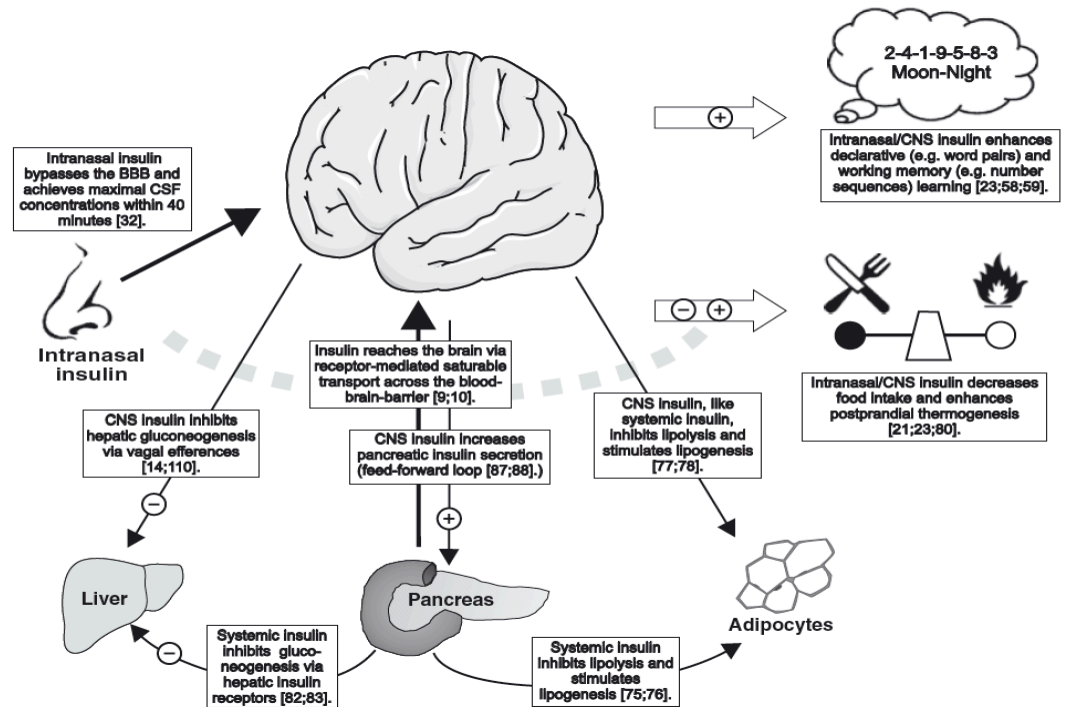
# Multiple Mechanisms May Contribute to Neurotoxicity of Drugs with Aging



# Brain Insulin Resistance Worsens with Age

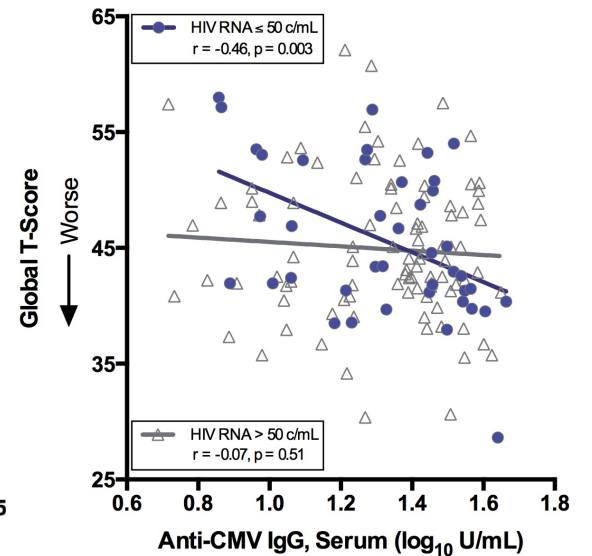
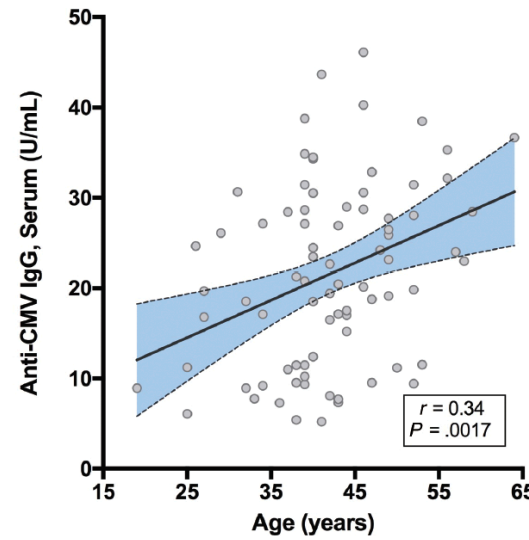
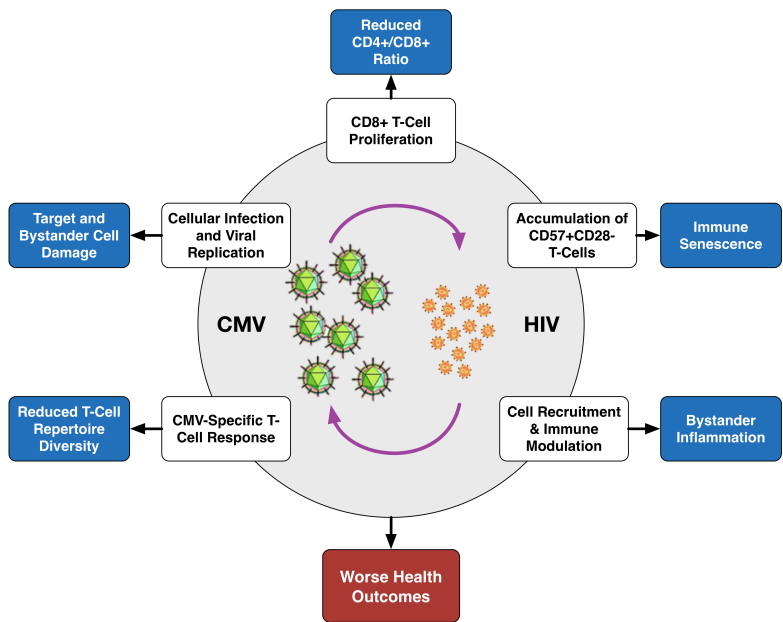


*Kullmann et al, Physiol Rev*  
2016, 96: 1169–1209



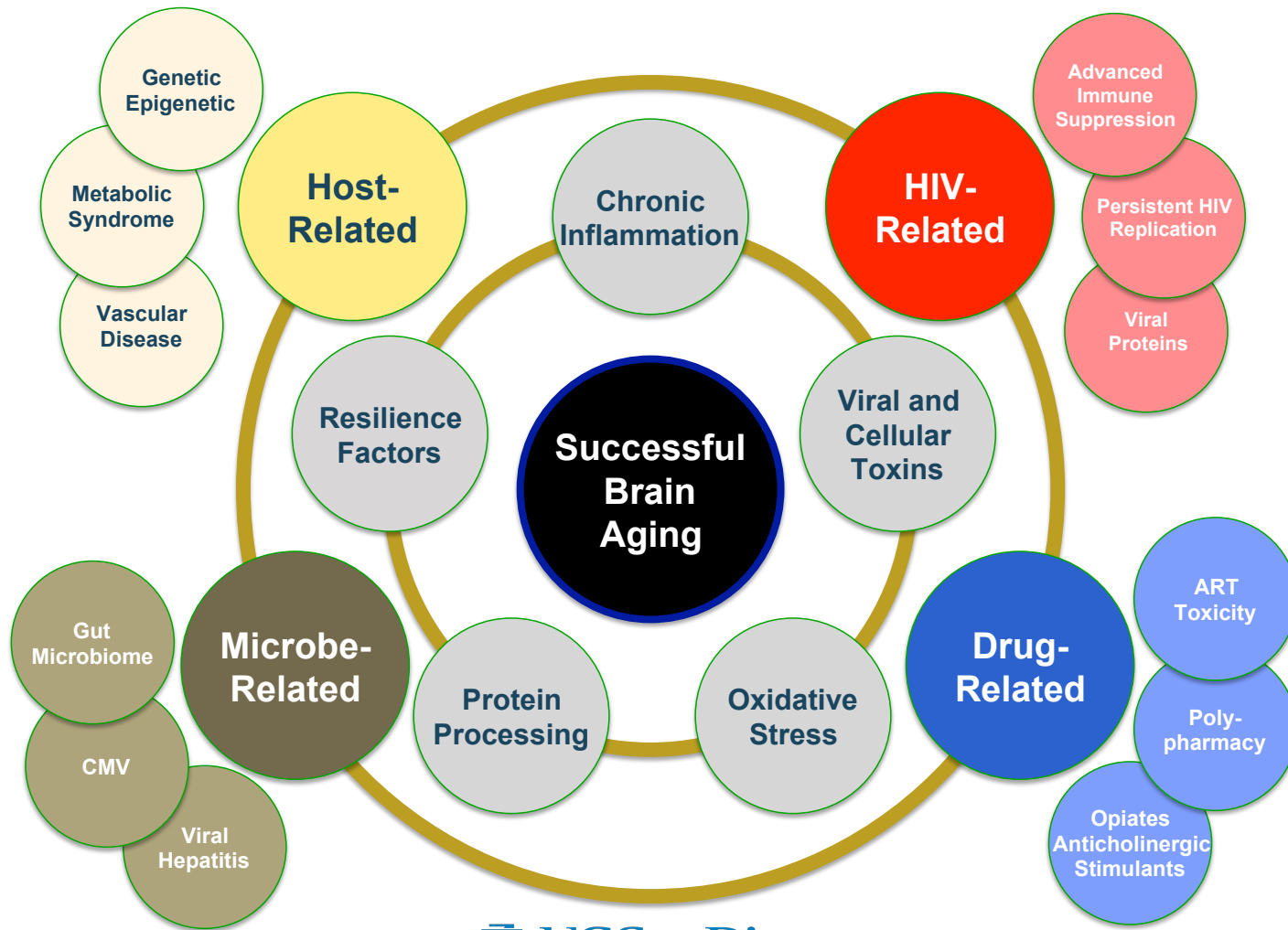
*Ott et al, Diabetes, Obesity and Metabolism*  
2012, 14: 214–221

# CMV is Associated with Worse Neurocognitive Performance



Gianella & Letendre, *J Infect Dis* 2016

Letendre, et al, *Clin Infect Dis*. 2018;67(5):770-777



# Possible Interventions for Premature Brain Aging

- **Modify Medications**
- **“Lifestyle” modification**
  - Exercise
  - Weight loss
  - Smoking Cessation
  - Moderate Alcohol Use
- **Microbial-focused**
  - Microbiome Alteration
  - **Letemovir (CMV)**
- **Anti-inflammatory**
  - Corticosteroids
- **Psychiatric**
  - Antidepressants
- **Metabolic-focused**
  - Pitavastatin
  - Metformin
  - Tesamorelin
  - Intranasal insulin
- **Neuroprotective**
  - Intranasal IGF-1
  - Cannabidiol
- **Senotherapeutics**
  - Dasatinib + quercetin
  - Bcl2 family inhibitors
  - FOXO4 peptide



Graphic courtesy of Peter Hunt,  
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- ...Drug Abuse
- ...Aging
- ...Allergy and Infectious Diseases

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