

## Smoking Quitters Older and Have More Comorbidities Than Current Smokers in HIV Clinic

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In a 50-years-and-older group with HIV in care at a New York City HIV clinic, those who quit smoking were older than people who still smoked or never started [1]. Tobacco quitters had more comorbidities than nonquitters or never-starters in this 324-person prospective study.

Researchers at Weill Cornell Medicine noted that smoking prevalence among people with HIV (PWH) doubles the rate in the general population. They aimed to study smokers among PWH attending their clinic to explore associations between smoking and behavioral health (depression and loneliness) and medical comorbidities. The Weill Cornell team hypothesized that “tobacco exposure would be associated with greater depression and loneliness as well as more medical comorbidities.”

The investigators randomly picked clinic attendees with HIV who were at least 50 years old and had them complete a biopsychosocial survey including questions about tobacco and nicotine use. Study participants completed the CES-D 10 depression scale [2] and the UCLA loneliness scale [3]. Researchers logged participants’ medical comorbidities from self-reports and electronic medical records.

These 324 people averaged 59.3 years in age, 66.9% were men and 33.0% women. Lowest-ever CD4 count averaged 176 and recent CD4 count 618. The group was largely black (47.9%) or white (39.8%). Most study participants (58%) had ever used tobacco, 34.6% had used tobacco and quit, and 23.5% currently used tobacco. Median CESD-10 depression score stood at 9, a relatively low score on a scale of 0 to 30 with 30 indicating the worst degree of depression [2]. Median UCLA loneliness score measured 23, indicating a low degree of loneliness [3].

People who quit smoking had the oldest average age at 61.0 years, compared with people who never used tobacco at 59.0 years and those who currently smoked at 57.5 ( $P < 0.01$ ). The researchers saw a strong trend toward fewer medical conditions in current tobacco users than in quitters ( $P = 0.052$ ), while never users average number of medical conditions lay between current smokers and quitters. All three groups averaged about 4 comorbidities.

Current smokers, quitters, and never users did not differ significantly in average CES-D depression score ( $P = 0.95$ ). Nor did loneliness scores differ between groups ( $P = 0.16$ ).

The Weill Cornell team concluded that tobacco use was highly prevalent in this 50-and-older group with HIV infection. Quitters were older and had more comorbid medical conditions than current users or never users. The seemingly counterintuitive comorbidity comparison between tobacco quitters and current users has been seen in other studies. It may mean older age and more

comorbidities drive people to quit smoking, while younger smokers with fewer comorbidities have less motivation to give up tobacco.

#### References

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