# Alcohol and HIV

Alcohol is the most widely consumed psychoactive substance in Spain and the fourth most widely consumed psychoactive substance as a risk factor for deterioration of health. In addition, among people living with HIV, alcohol is the most widely abused substance. Reducing alcohol consumption helps to reduce HIV transmission, to promote antiretroviral treatment adherence and to prevent health complications.



The effects of alcohol depend on different factors such as gender, body weight, speed of consumption, whether it is drunk on an empty stomach, and the type of drink and tolerance. Alcohol affects the ability to think clearly, and people may make choices that could increase their risk of acquiring or transmitting HIV.

There is no safe level of alcohol consumption. The limits for average low-risk alcohol consumption are currently established at 20 g/day for men and 10 g/day for women, based on the assumption that any consumption, however small, involves risk. Consuming alcohol above these limits leads to a higher mortality rate, if compared to not drinking or to drinking less.

In general, people with HIV should limit their alcohol consumption to no more than one drink per day for women and two drinks per day for men and avoid daily consumption (<10-20 g/day).

People with HIV who drink alcohol, even moderately, are more likely to experience physiological deterioration than people without HIV who drink. The safe drinking limit is therefore lower for people with HIV.

# Low risk drinking limits



## **Alcohol and HIV**

# How can drinking alcohol affect a person with HIV?

- Alcohol contributes to over 200 health problems and injuries, including cardiovascular disease, liver disease, neuropsychiatric disease and at least seven types of cancer.
- Alcohol may increase the damage that HIV does to the immune system, through different mechanisms.
- Alcohol consumption, moreover, makes the liver work harder to remove toxins from the body. The accumulation of toxins can weaken the body and lead to liver damage.
- Alcohol consumption in people with HIV is also associated with lower levels of a protein involved in bone formation and an increased risk of osteoporosis. Low bone density is common among people with HIV, even in those who have an undetectable viral load because of antiretroviral treatment.
- The effects of frequent or excessive alcohol consumption can hinder or interfere with antiretroviral therapy adherence by increasing the chances of missing doses. Poor adherence can cause loss of HIV control.

# Advice on reducing alcohol consumption



The only way to avoid risk is by not drinking alcohol.

You can reduce consumption by having 2 alcohol-free days per week.



# Avoid drinking alcohol in the following situations:

















Driving

**Breastfeeding** 

Pregnancy

Precision work

If you are underage

With some medicaments and illnesses

Risk activities

Looking after children





#### Disclaimer

The information on this sheet is not intended to replace a doctor's advice. Health decisions should always be taken after consulting health professionals. Medical information can quickly become outdated.

If you have any questions after reading this sheet, you should talk to your doctor or nurse, or call gTt-VIH on 93 458 26 41 to find out whether there have been any significant new developments.

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