Patient Knowledge and Perceptions of Weight Gain Associated with Antiretroviral Therapy

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Background:

Weight gain is common among people with HIV (PWH) receiving antiretroviral therapy (ART), particularly with some contemporary regimens. However, less is known about patients' awareness of ART-associated weight gain, their perceptions of its importance, and how concerns about weight may influence treatment preferences or medication adherence. We examined patient knowledge, experiences, and perceptions of weight gain in the setting of HIV and ART.

Methods:

We administered a 40-question survey to PWH receiving care at the University of Nebraska Medical Center Specialty Care Center. Participants completed the survey electronically or on paper during a clinic visit. The survey assessed experiences with weight gain, knowledge and perceptions of ART-associated weight gain, communication with healthcare providers, and the potential influence of weight gain on ART adherence and treatment preferences.

Results:

Of the 137 respondents (79.1% male; mean age 50.2 years), 48.2% (66/137) reported weight gain after starting ART, with a mean reported weight gain of 29.6 lbs. Despite this, 58.4% did not believe their weight change was related to their HIV medication, 44.5% were unaware that ART can be associated with weight gain, and only 34.3% reported that a healthcare provider had discussed this possibility with them. Weight gain rarely affected reported ART adherence: 96.4% reported never skipping a dose due to weight concerns, and only 5.8% requested a medication change due to weight gain. However, weight gain remained important to participants when considering treatment choices. When asked hypothetically about taking a more effective ART regimen associated with weight gain, only 52.7% reported they would likely do so, and 56.9% reported the associated weight gain would make them concerned or upset**.**

Conclusions:

Weight gain was commonly reported among PWH receiving ART, yet awareness of ART-associated weight gain and provider counseling were limited. Although weight concerns rarely affected ART adherence, many participants expressed concern about weight gain and indicated that it could influence their willingness to take a particular ART regimen. These findings highlight a potential gap between patients' experiences and understanding of ART-associated

weight gain and suggest that weight and its potential relationship to ART should be incorporated into patient-provider discussions and shared decision-making about HIV treatment.