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Is Coronavirus Riskier if You Have HIV?



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If you have [HIV](#), you may be concerned that condition raises your risk for a bad case of COVID-19, the illness caused by the new coronavirus. Although it's worth taking some extra precautions to protect yourself, whether or not you're actually at higher risk than anyone else likely depends on your current health status.

Because COVID-19 is so new, there isn't much data on how COVID-19 affects people with HIV specifically. But [the new coronavirus impacts the respiratory system](#), and experts do have good information about how other respiratory viruses (like [the flu](#)) affect people with HIV.

If your [HIV](#) is well-controlled -- meaning you're on antiretroviral therapy (ART) that's successfully suppressing HIV and you have normal CD4 counts -- then you're not necessarily more apt to get very sick with COVID-19 than someone without HIV. Other [types of coronaviruses](#), such as those that caused [SARS](#) and MERS, did *not* have a major impact on people with HIV.

But if your HIV is advanced or isn't under good control with antiretroviral therapy (ART), then your [immune system](#) will have a harder time defending you against infections, possibly including COVID-19. In that case, if you do get COVID-19, you may be more likely to have [serious complications](#).

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If you're not getting treatment or you have recently had blood tests that showed a low CD4 count and/or high viral load, you should assume that you are at high risk.

Your CD4 count refers to how many CD4 cells you have. Your immune system makes CD4 cells, which fight HIV. If you have HIV, you want a higher CD4 count. Antiretroviral therapy (ART) helps protect CD4 cells. Viral load refers to the amount of HIV in the body. So you want a low viral load.

Other Risk Factors

Besides a weak immune system, which can happen if your HIV isn't under good control or if you take certain [medications](#) that suppress the immune system, other things can also raise your risk. These include:

- Being older than age 65
- [Smoking](#)
- Having other conditions such as [asthma](#), [lung disease](#), [diabetes](#), [heart disease](#), or [high blood pressure](#).

These risk factors make severe COVID-19 symptoms more likely. (Still, most people who get COVID-19 don't have severe complications.)

What You Can Do

Just like everyone else, be sure you follow guidelines on social distancing, washing your hands, not touching your face, staying away from sick people, wearing a cloth face mask when in public places, and disinfecting items you touch a lot.

Also, keep at least a 30-day supply of your antiretroviral medications on hand. A 90-day supply is ideal, according to the National Institutes of Health. You may want to switch to mail-order delivery, so you don't have to go out to get it.

If your HIV is under good control and you're healthy, you may want to postpone any medical appointments that aren't urgent. If you're not sure, call your doctor's office to ask what they recommend. And if you've been thinking about switching your HIV medications, you'll probably want to put that off for now.

What to Do if You Get COVID-19

As with most people who get COVID-19, people with HIV who have symptoms should generally stay at home and call their doctor. (Don't just show up at the doctor's office or the ER -- call first,

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so they're ready for you.)

Keep taking your antiretroviral medication as prescribed, and call your doctor if you become short of breath or have a [fever](#) for more than 2 days.

If you need to stay in the hospital because of COVID-19, the [health care](#) team there should keep giving you your usual antiretroviral drugs, whether you take them orally or by infusion (IV).

WebMD Medical Reference | Reviewed by [Michael W. Smith, MD](#) on May 27, 2020

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