

Oral presentation

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O321 Management of renal disease in HIV infection for the HIV physician I Williams

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Renal dysfunction is common in patients with HIV infection. The incidence of acute renal failure in HIV-infected patients is higher than a HIV-negative population with sepsis and nephrotoxic drugs the most common causes. Estimates of the prevalence of chronic kidney disease (CKD) vary depending on patient population and definition. Most common causes include HIV-associated nephropathy, immune complex nephropathies and drug toxicity, though with longer survival the more traditional causes of CKD found in the general population are becoming more common. Risk factors identified for CKD in the HIV-infected population include co-infection with hepatitis C, older age, ethnicity, CD4 count $<200 \times 10^6$, hypertension, diabetes mellitus and HIV-RNA levels. With a relatively high prevalence of renal dysfunction and with both HIV and non-HIV causes and contributing factors, it is important for the HIV physician to have a good understanding of the aetiology, screening methods and management strategies for kidney disease in the HIV-infected patients.