

Epigenetic Age Advancement is Associated with Lower CD4 T-cell Count, Increased Mortality Risk, and Frailty in Older Adults with HIV

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BACKGROUND

With advancements in antiretroviral therapy, people with HIV (PWH) are living longer lives and often aging into geriatric care. PWH are more likely to experience medical co-morbidities and geriatric syndromes including frailty as they age.

- Epigenetic changes to DNA by different patterns of methylation have been associated with aging
- People with HIV have been demonstrated advancement of epigenetic-based age calculation compared to chronologic age¹
- Specific patterns of DNA methylation have been associated with an epigenetic frailty score²

We aimed to investigate the association between epigenetic aging and phenotypic measures of frailty, as well as epigenetic methylation signatures associated with frailty, in a population of older PWH.

METHODS

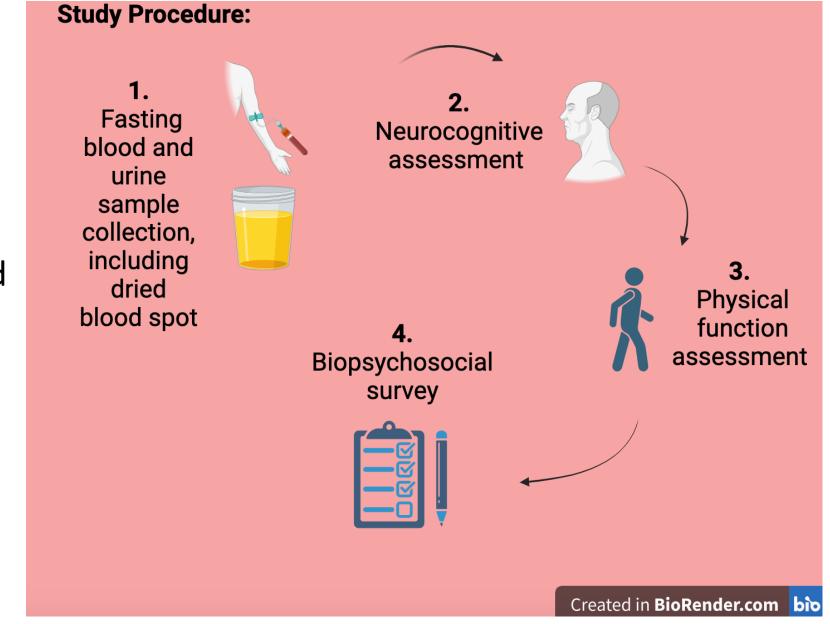
Recruitment:

 Older adults (55 years and older) with HIV were recruited from the outpatient HIV clinical practice at NYPH-WCM using an agestratified random selection strategy.

Procedures:

Study Participants (N=164) Completed a study visit in the CTSC

Of those, 158 provided a blood spot for epigenetic analysis



Analysis:

- Genome-wide DNA methylation was measured from dried blood spots using the Illumina MethylationEPIC platform and analyzed using 6 established epigenetic age algorithms including DNAm PhenoAge.
- The epigenetic frailty risk score (eFRS) was calculated based on characteristic methylation loci².

Study Population:

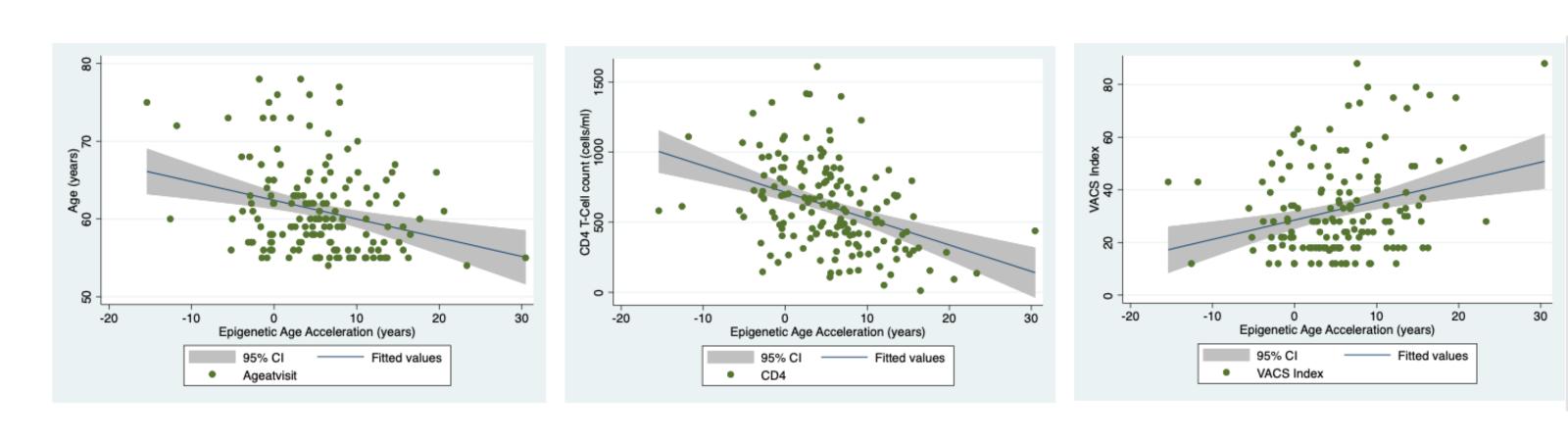
Characteristic	N(%) or Median (IQR)
Age (years)	60 (56-64)
Female sex	52 (33%)
Self-Identified Race	
- Black	76 (50%)
- White	47 (31%)
- Other	30 (19%)
CD4 T-cell Count (cells/ml)	588 (323-811)
Veterans Aging Cohort Study (VACS) Mortality Index	28 (18-43)
PhenoAge	66 (62-71)
Epigenetic Age Advancement ^γ	5.4 (SD 6.6)
eFRS Frailty Score	0.09 (0.06-0.12)
Fried Frailty Category ⁶	
- Nonfrail	49 (33%)
- Prefrail	84 (56%)
- Frail	16 (11%)

*Veterans Aging Cohort Study (VACS) Index of 28 correlates to a 10.8% risk of all-cause 5 year mortality. ⁷ Epigenetic Age Advancement defined as PhenoAge – Chronologic Age

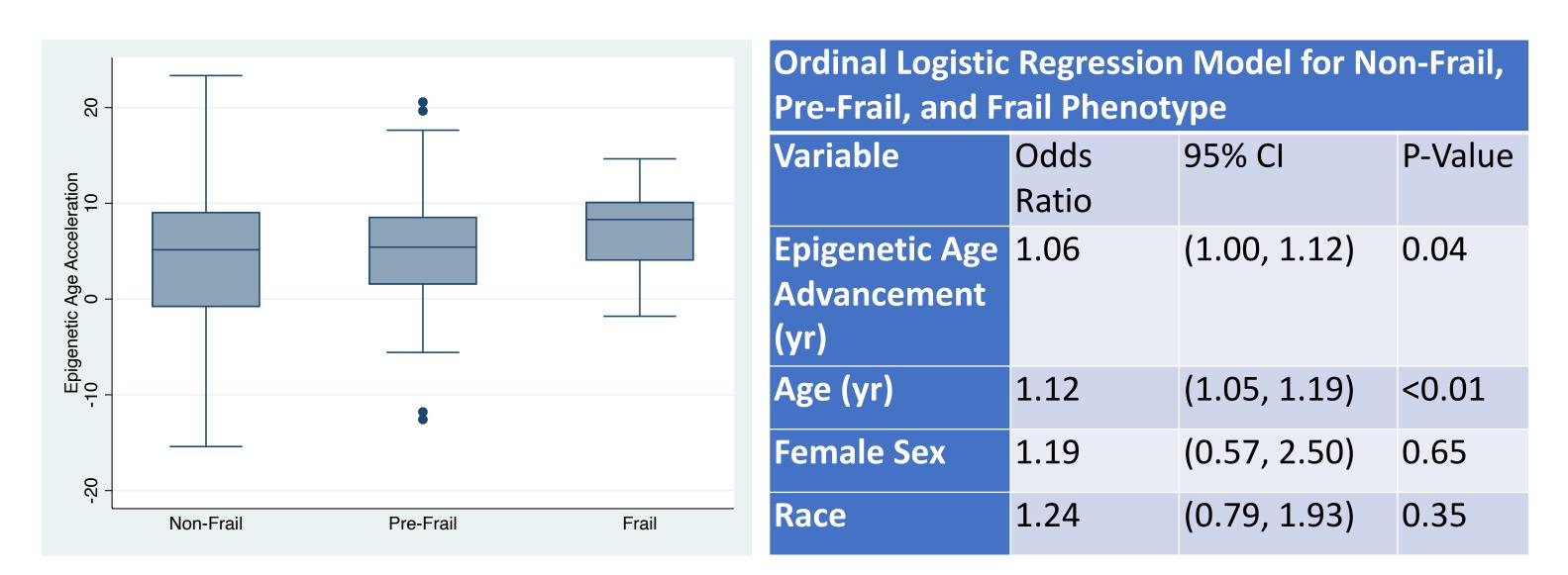
Frailty data missing/incomplete for 8 participants.

RESULTS:

Epigenetic Age Advancement is associated with younger age, lower CD4 T-Cell Count and higher VACS Index in Older Adults with HIV



Epigenetic Age Advancement Related to Frailty Status



Epigenetic age advancement was related to epigenetic frailty risk score in a univariate logistic regression model (B coefficient 57.6 [95%CI: 34.9-80.2])

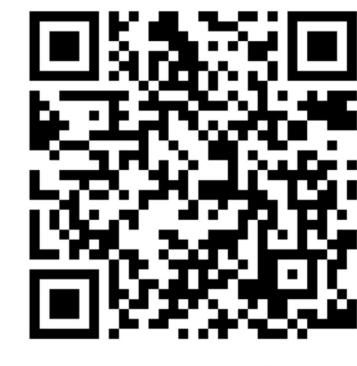
CONCLUSIONS

- In this study of older adults with HIV, the average epigenetic age advancement (EAA) was 5.4 years, as calculated by PhenoAge.
- EAA was associated with lower CD4 T-cell counts and higher VACS indices.
- In a model that included age, sex and race, EAA was also associated with an epigenetic frailty risk score and frailty phenotype

These results suggest epigenetic clocks are a valuable biomarker of aging-related pathologies including frailty and mortality risk, and warrant further study.

ADDITIONAL INFORMATION

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REFERENCES

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- Li, Xiangwei, et al. Nature Communications 13.1 (2022): 5269.