Ontologies Classes Object Properties Data Properties Annotation Properties Individuals Datatypes Clouds

Class: HIV_Infection_LC

Annotations (3)

- rdfs:comment "“- HIV infected persons are at greater risk of lung cancer than uninfected persons - High smoking rates in HIV infected persons are the largest contributor to lung cancer risk but emerging evidence also suggests immunosuppression and inflammation may also contribute to risk. - In the ART-era HIV infected persons appear to continue to experience lung cancer treatment disparities compared to uninfected persons. - Early clinical trials of computed tomography-based lung cancer screening have demonstrated safety in HIV infected smokers.”"(xsd:string)
- rdfs:comment "“Lung cancer is a major source of morbidity and mortality for HIV infected persons. The increased risk of lung cancer in HIV infected persons is related to high rates of smoking and may also be associated with HIV-specific etiologies including immunodeficiency and inflammatory processes. Lung cancer outcomes for HIV infected persons have lagged uninfected persons during the ART-era and cancer treatment disparities contribute to decreased survival. Smoking cessation and lung cancer screening with chest CT scanning have emerging data supporting clinical implementation for appropriate groups of HIV infected smokers. Future research should further address lung cancer risk in this population as well as identify and optimize effective prevention and treatment methods.”"(xsd:string)
- rdfs:comment "“The effect of HIV infection on lung cancer-specific prognosis has not been fully determined. Single and multi-center retrospective studies of lung cancer survival in the late ART-era have demonstrated a limited effect of HIV on outcomes. In contrast, population-based studies of lung cancer outcomes in HIV infected persons have generally shown poorer cancer-specific survival associated with HIV infection (Table 2). In an analysis of Medicare enrollees diagnosed with lung cancer from 1996–2007, the HIV infected subjects demonstrated worse lung cancer-specific survival even after accounting for potential confounders (including lung cancer treatment) and competing risks[42]. Other population-based studies have shown similar results: HIV infected patients diagnosed with lung cancer between 1996–2010 and 1995–2009 in two population-based analyses had worse survival compared to their uninfected counterparts after adjustment[55, 56]. The Kaiser Permanente HIV cohort also reported worse lung cancer survival in HIV infected persons compared to uninfected persons but this difference appears to be related to treatment disparities[44]. In general, population-based analyses have lacked detailed information about cancer treatment and patient-level HIV clinical information such as viral suppression or CD4 count, and therefore the direct effects of HIV on lung cancer prognosis remain unclear.”"(xsd:string)

Superclasses (1)

- Causes_and_Risks_LC

OWL HTML inside