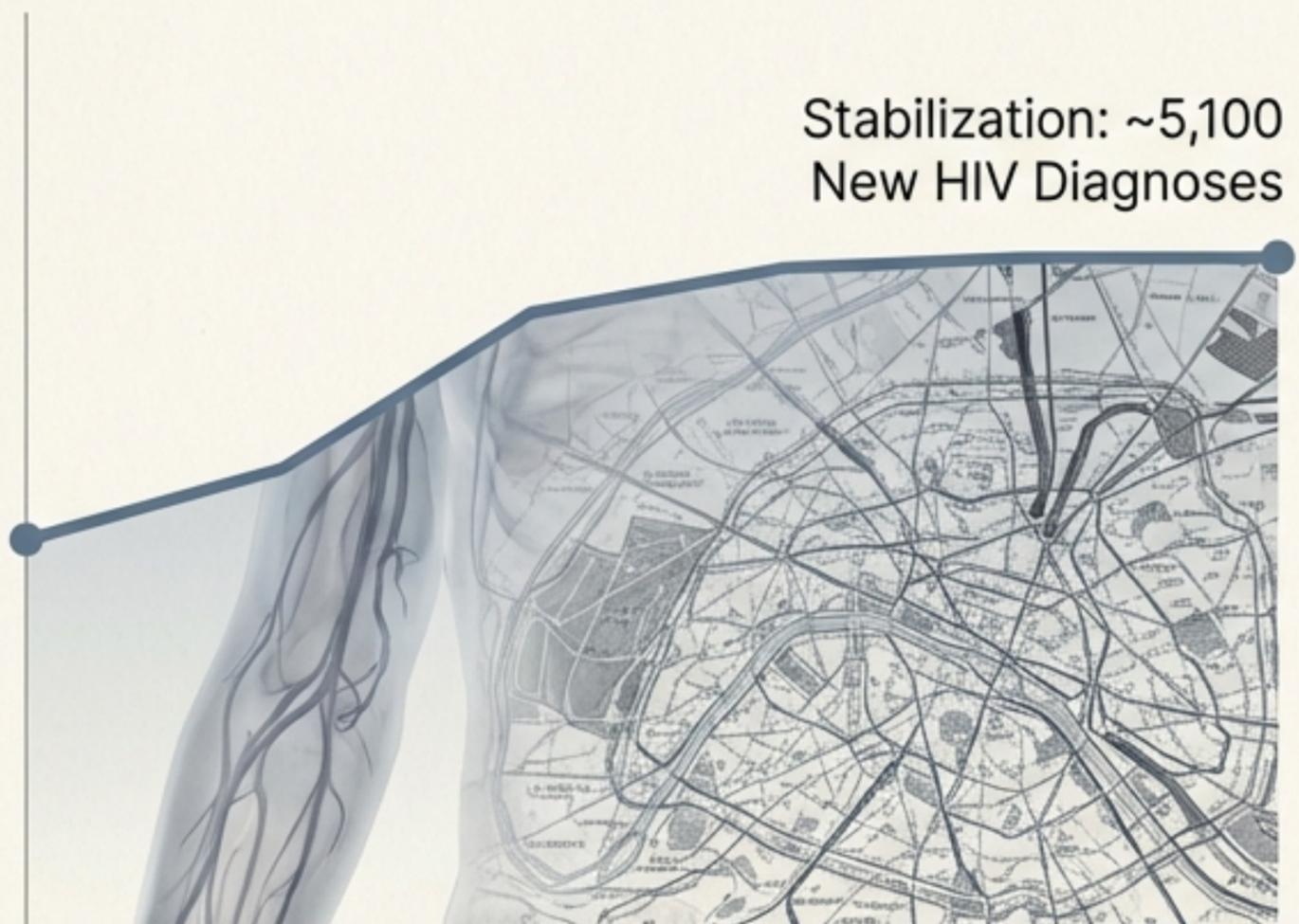




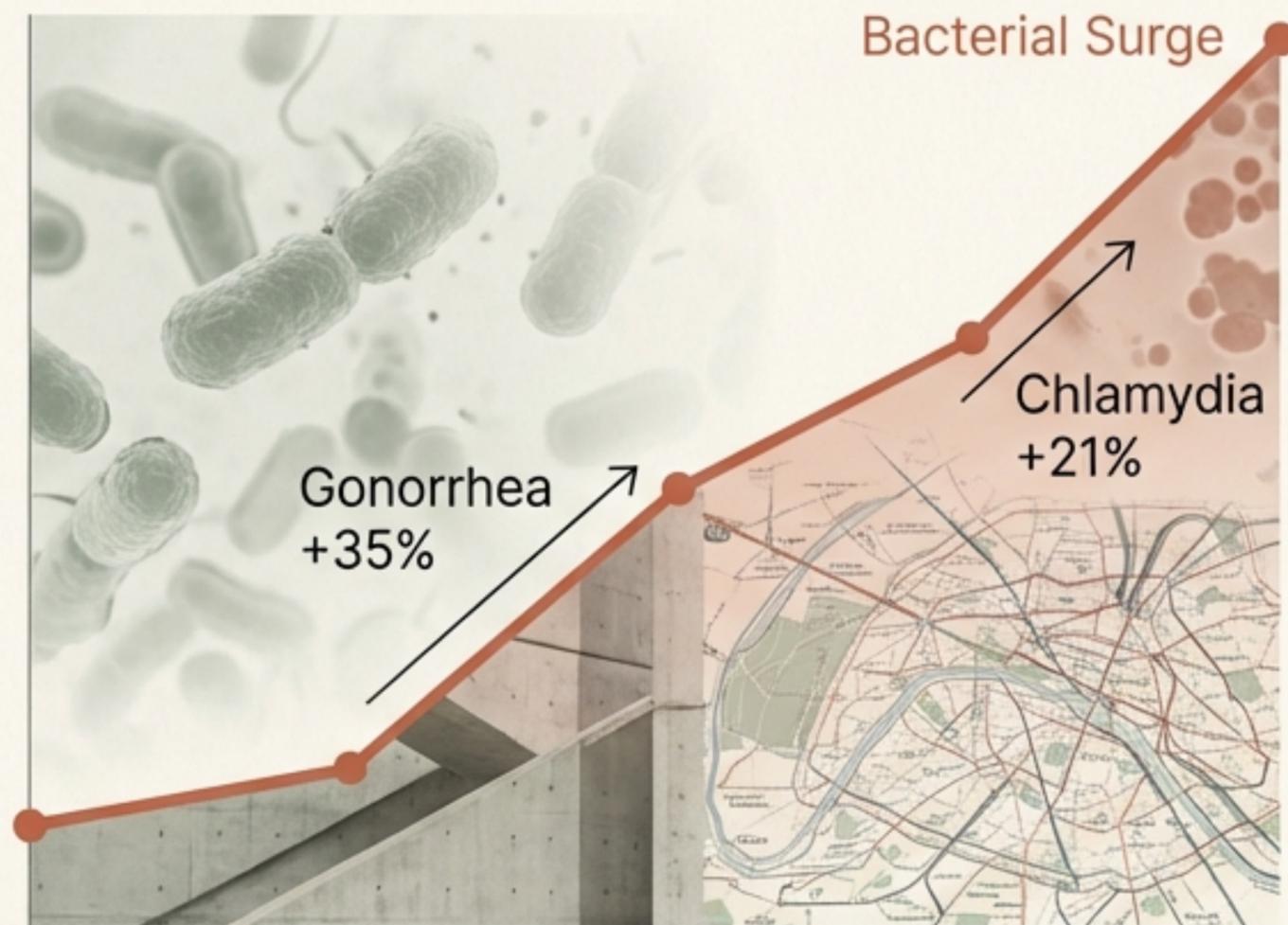
Flagship Question: When infectious disease becomes chronic harm, who absorbs the long-term cost?

The 2024 Paradox

HIV DIAGNOSES in Inter

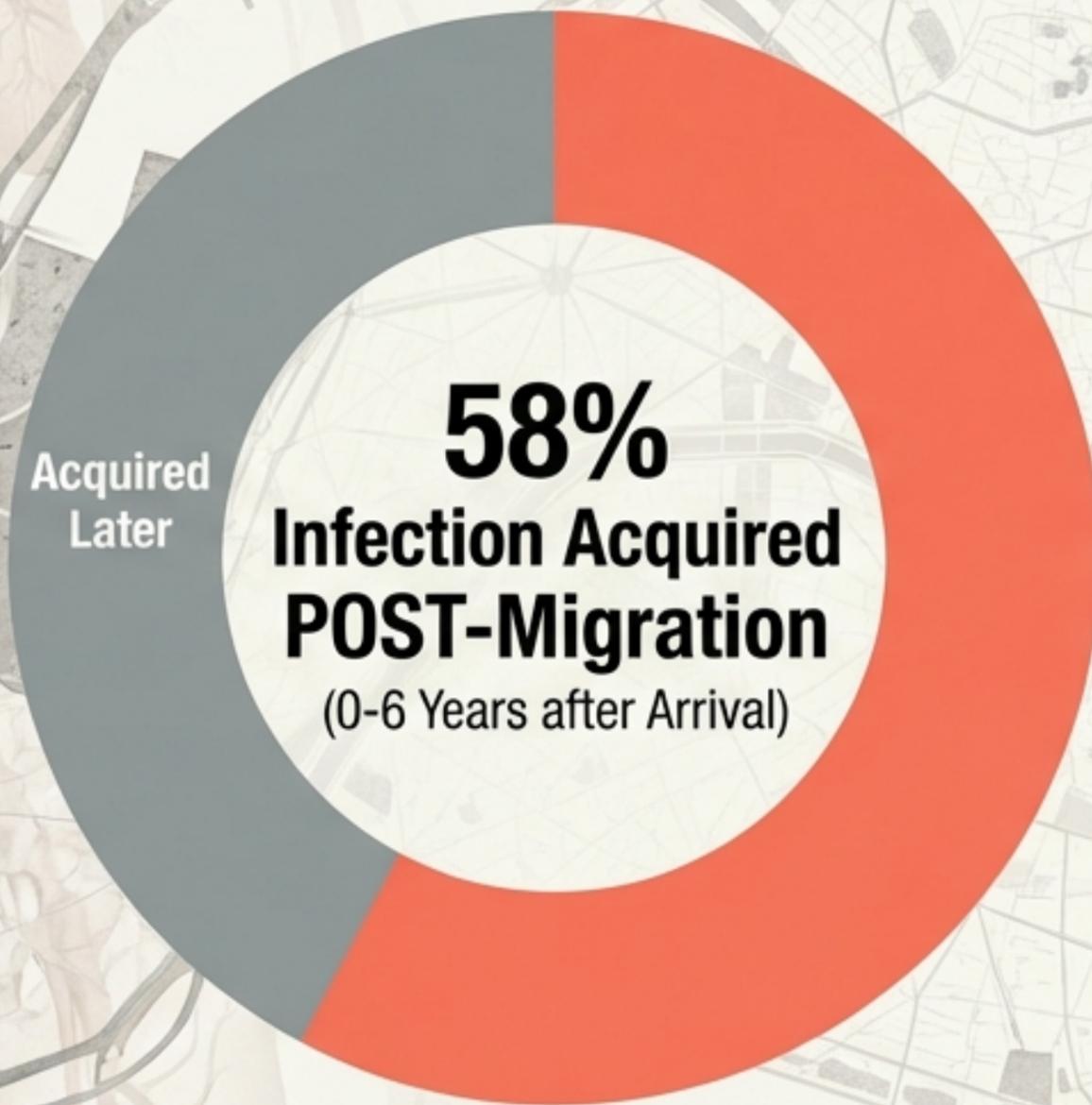


BACTERIAL INFECTIONS in Inter



Insight: Virological suppression is holding the line, but rising bacterial infections in Île-de-France signal prevention fatigue and continued structural exposure.

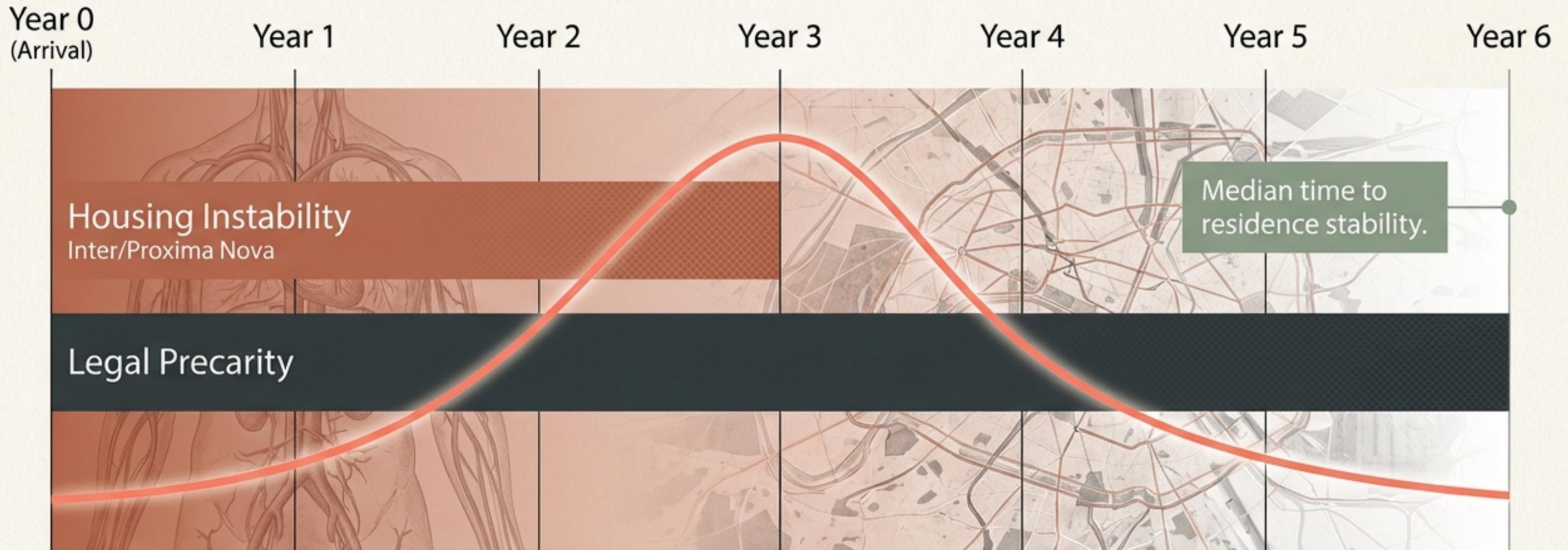
The Myth of Importation



“The danger isn’t the origin. It’s the arrival.”

Source: ANRS Parcours Study / Gosselin et al.

The Six-Year Migration Risk Window

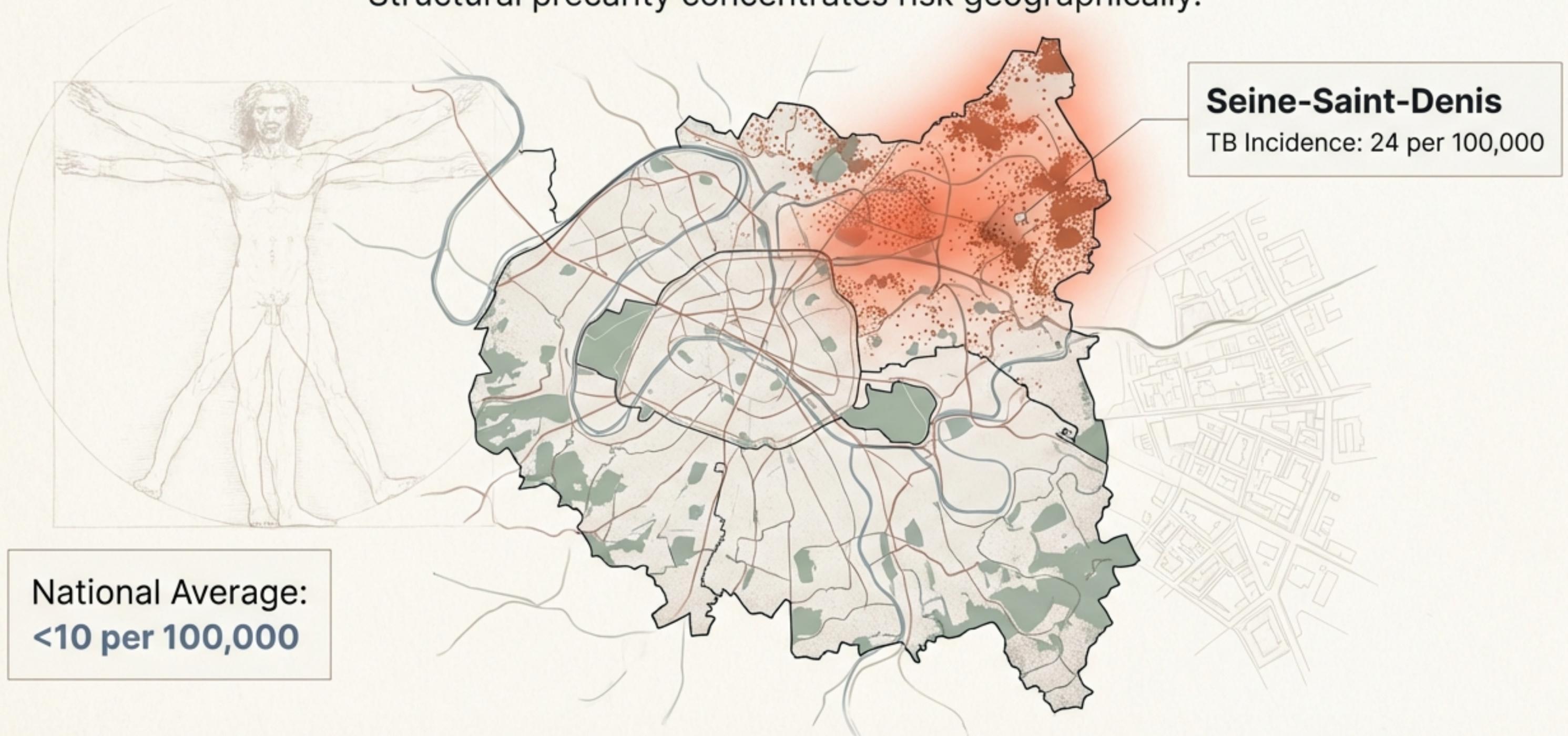


Administrative precarity translates directly into biological exposure.



Mapping Vulnerability: Île-de-France

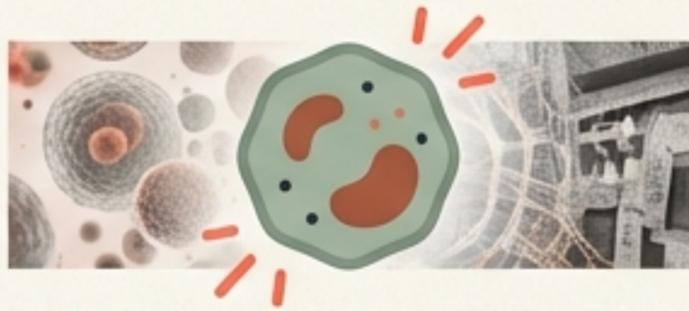
Structural precarity concentrates risk geographically.



From Viral Suppression to Chronic Inflammation



Suppressed HIV
(Undetectable)



Residual Immune
Activation



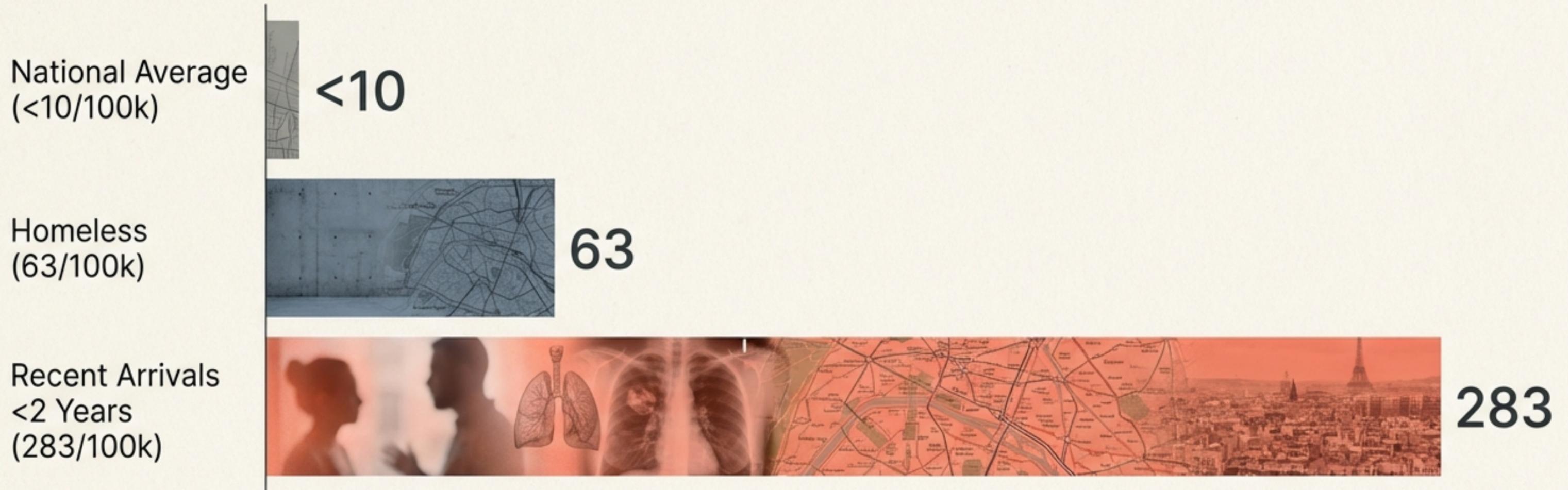
Systemic
Inflammation



Accelerated
Aging

The virus sleeps, but the immune system remains vigilant. This chronic vigilance carries a metabolic cost.

Tuberculosis: The Shadow of Social Exclusion



TB thrives where the immune system is depressed by stress and malnutrition.

The New Frontier: Cardiometabolic Burden

BLOOD TEST RESULT

Name

Result

Date

62%

of People Living with HIV presented with **Dyslipidemia (2021)**

- Total Cholesterol > 5.2 mmol/L: **53%**
- LDL > 3.4 mmol/L: **43%**

Managing HIV is no longer just about T-cells. It is about lipid profiles.

Hypertension & The Accelerated Clock



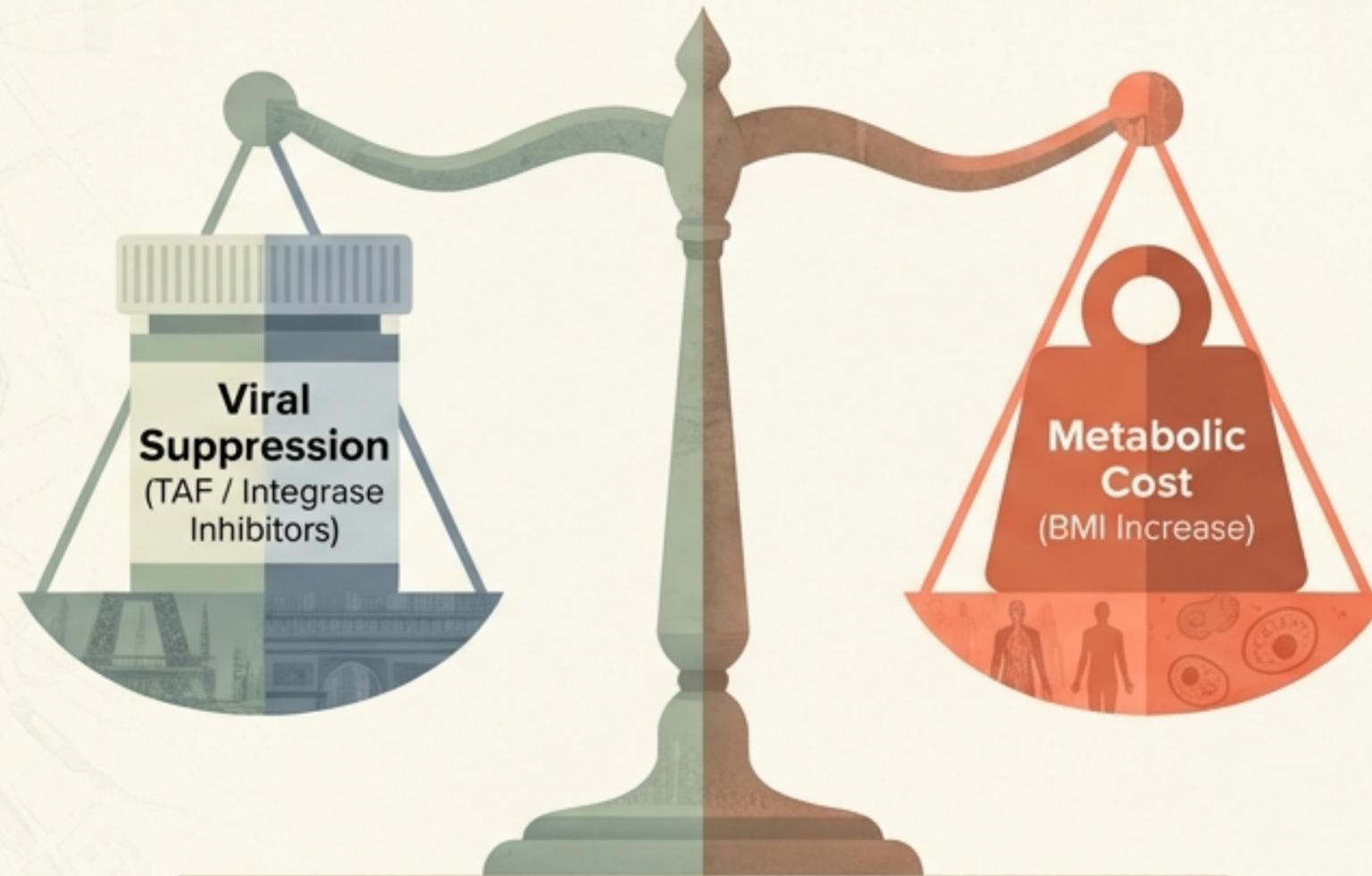
CNS Guidelines now mandate screening years earlier than the general population. The biological clock runs faster in a body under structural siege.



45 Cardiovascular Assessment Start (Women)

Cardiovascular Assessment Start (Men)

Pharmacological Success, Metabolic Challenge



TAF and Integrase Inhibitors linked to less favorable lipid profiles and weight gain.

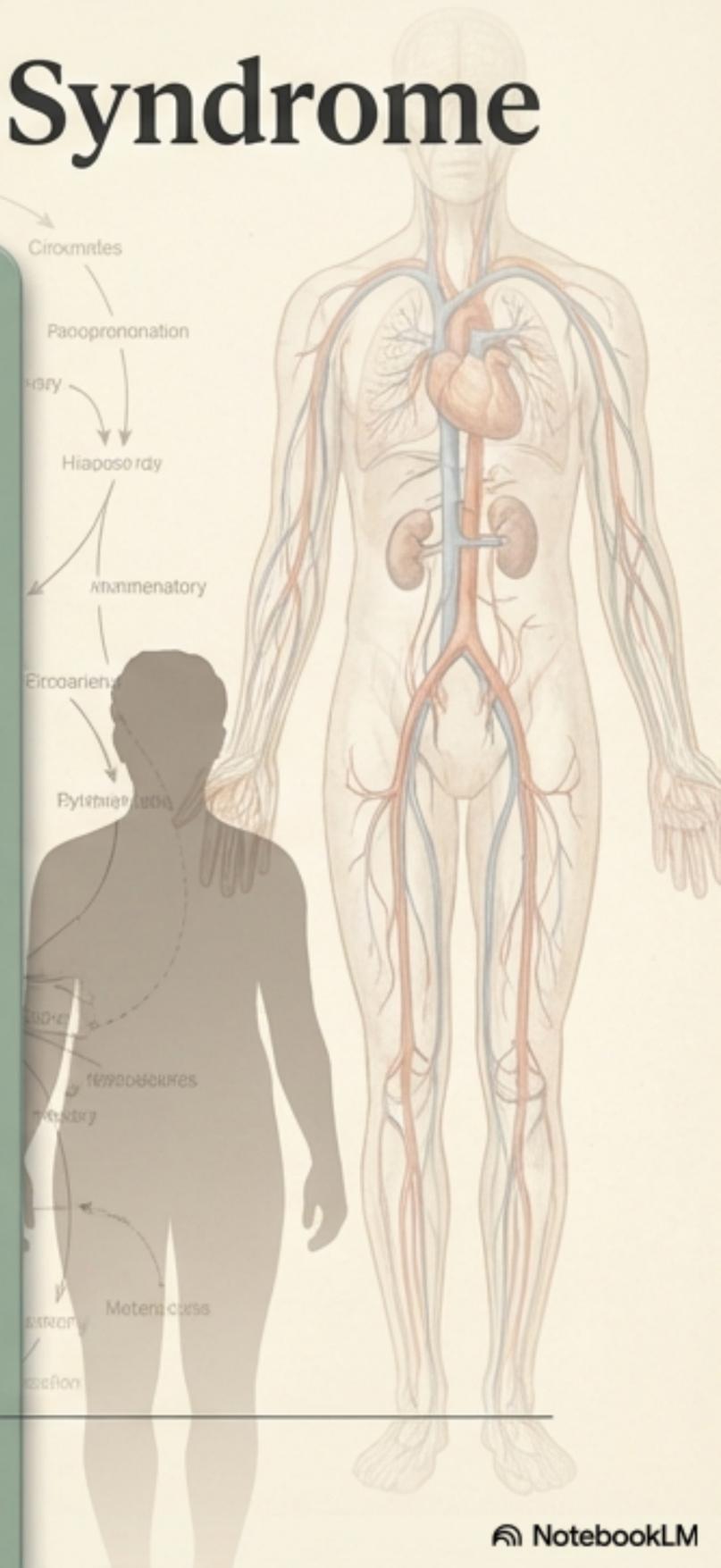
The medication saves the immune system but burdens the metabolic system—a “second hit” to long-term health.

The “Second Hit”: Diabetes & Metabolic Syndrome

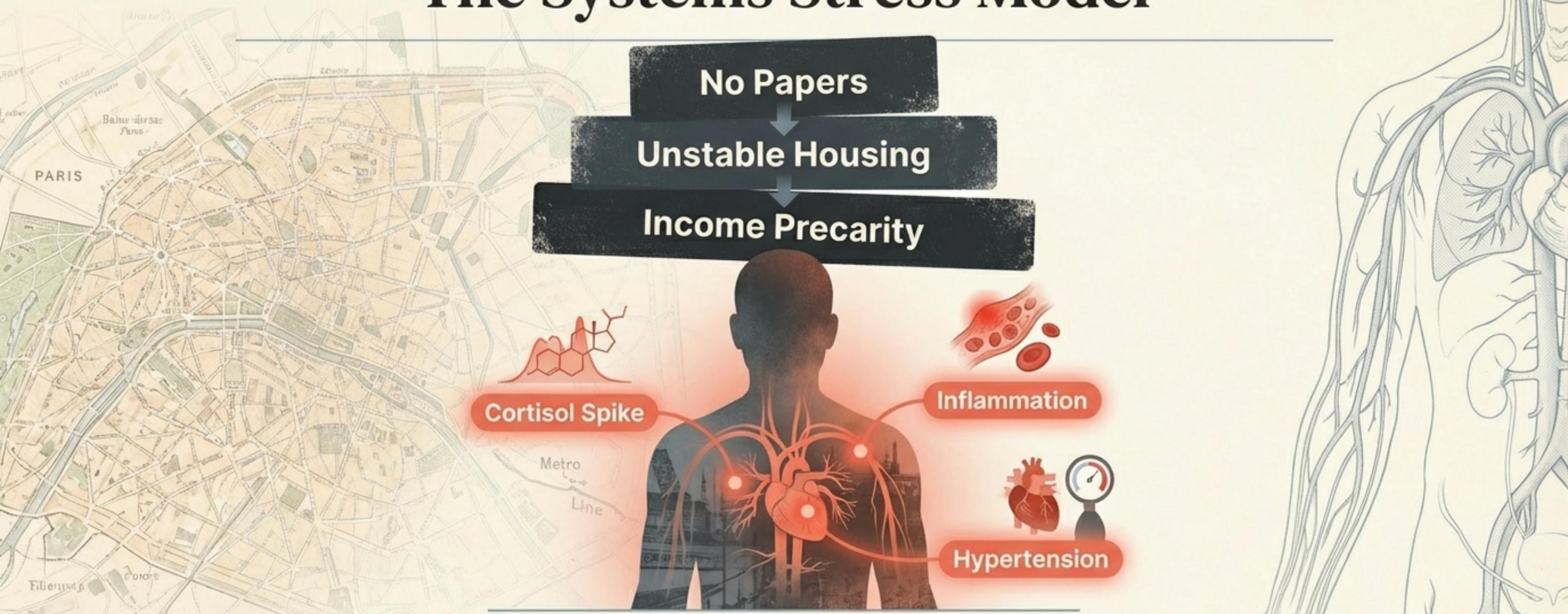
Metabolic Syndrome Criteria

- ✓ Waist Circumference: $\geq 94\text{cm}$ (M) / $\geq 80\text{cm}$ (F)
- ✓ Blood Pressure: $\geq 130/85$ mmHg
- ✓ Triglycerides: ≥ 1.7 mmol/L
- ✓ Fasting Glucose: ≥ 5.6 mmol/L

When ART-induced weight gain meets the “poverty diet” of the precarious migrant experience, the risk of Type 2 Diabetes accelerates.



The Systems Stress Model



We must stop viewing these outcomes as medical anomalies and start viewing them as policy results.

Housing is Biology

The built environment as a determinant of health.

TB Risk

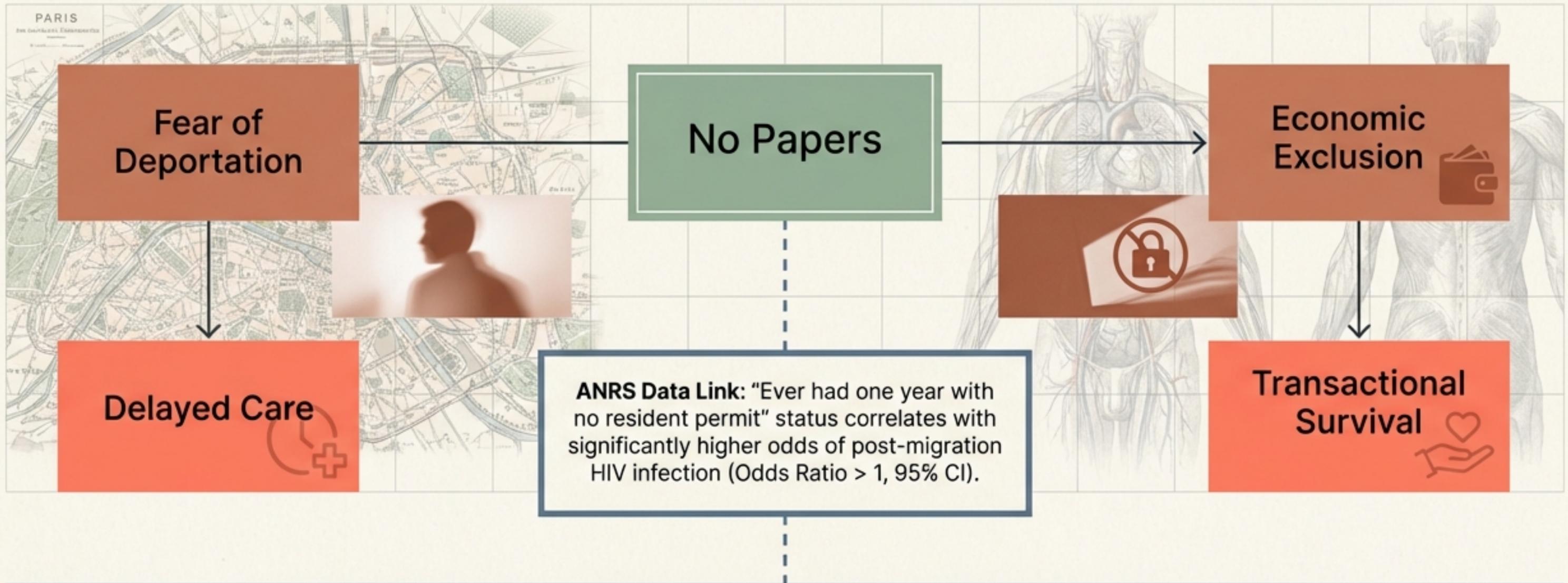
- Overcrowding correlates to 28x higher TB rates.
- Lack of ventilation and close quarters amplify transmission.

HIV Risk

- Lack of private space correlates with transactional survival strategies.
- Precarious living increases exposure.

A lease is a vaccine against Tuberculosis and HIV acquisition.

Legal Status as Preventative Medicine



The “Six-Year Window” of legal limbo is an incubation period for chronic disease.

The Protection Framework

Administrative Acceleration

Reduce settlement window < 2 years.

Housing First

Prioritize allocation to break TB/HIV chain.

Metabolic Shielding

Mandatory cardiovascular screening at entry.

Critical Policy Gaps



The Geriatric Gap

- Lack of specialized care for migrants who are biologically older than their chronological age.



The Screening Gap

- Metabolic profiling is currently reactive (post-diagnosis) rather than proactive.



The Silo Effect

- Disconnect between Immigration Authorities (delaying papers) and Health Authorities (paying for consequences).

Community Response

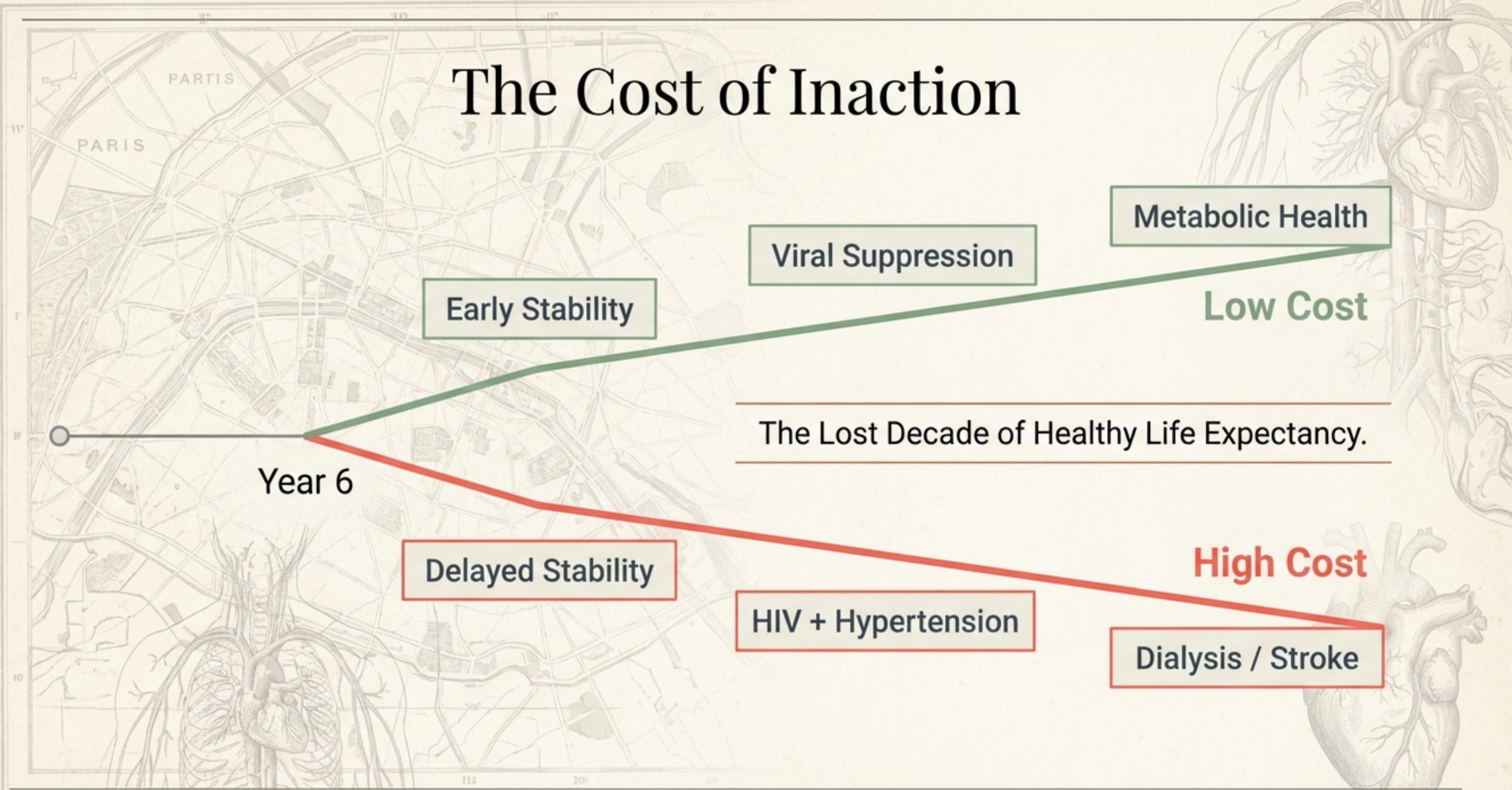
A composite image featuring a man and a woman in profile, a human heart, and a subway map. The man is on the left, and the woman is on the right. The heart is in the center, and the subway map is on the right. The text is overlaid on the image.

Peers Protect Where Policy Fails.

Organizations like AIDES bridge the trust gap, navigating the Six-Year Window where the state is absent.

Survival is a community project.

The Cost of Inaction



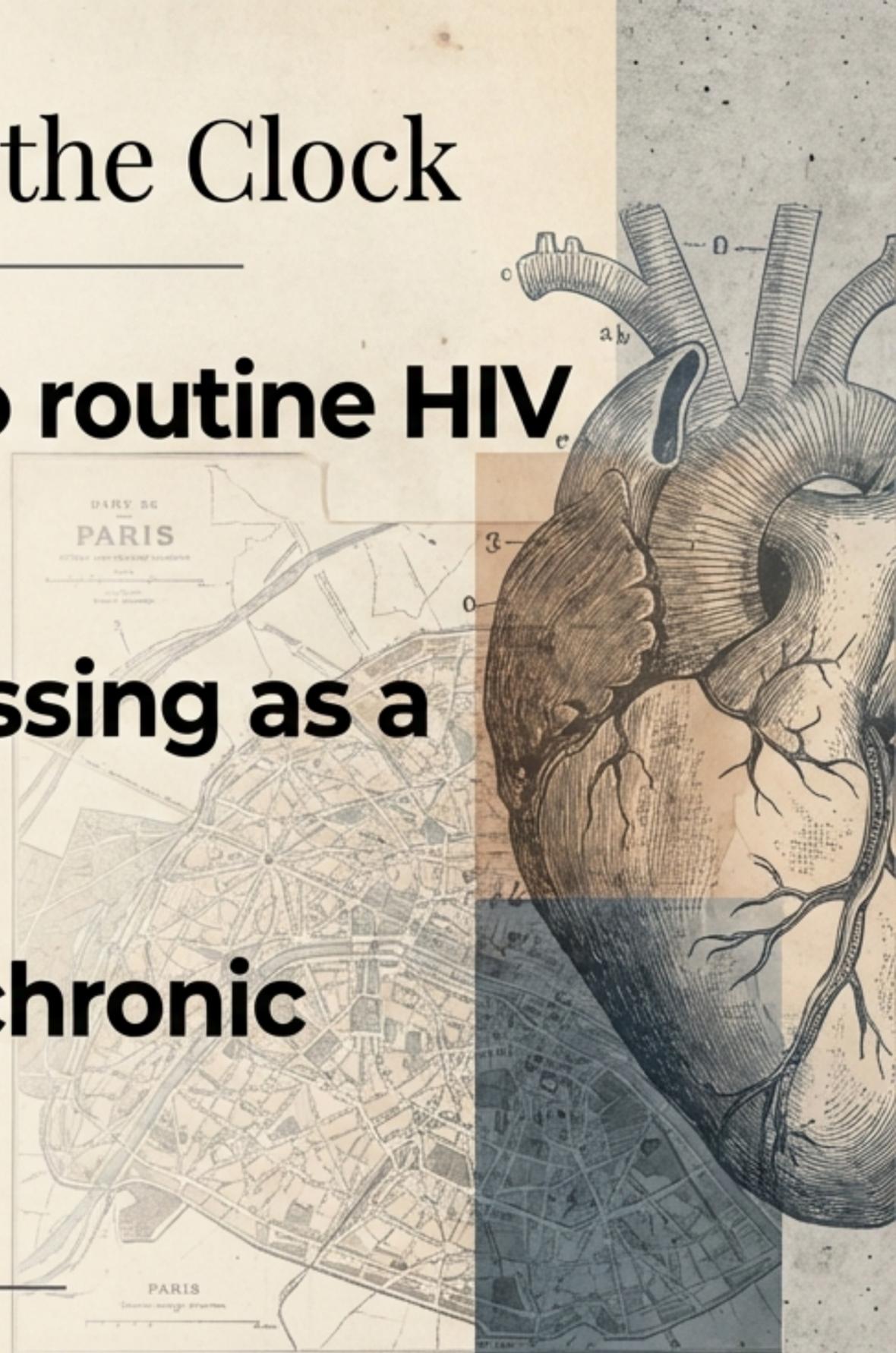
Call to Action: Resetting the Clock

INTEGRATE metabolic care into routine HIV protocols immediately.

ACCELERATE residency processing as a health outcome.

INVEST in housing to prevent chronic management costs.

Prevention is Maintenance.





Survival is Progress. Protection is the Goal.

Longevity is structural.
Prevention is systemic.
The clock can be reset.