And it's good to know that you know like

the work that our group is doing is recognized. (chuckles)

It definitely gets me through those late nights.

Especially this week. Like last night, I was there until midnight, in the morning.

HIV infected individuals are living longer, but then they are definitely at risk for

a lot of comorbidities such as cardiovascular disease, metabolic disorders. They tend to be, in terms of the frailty scale, they're a lot higher

when you compare them to their HIV negative counterparts.

We excised the lymph nodes and we did our immunological assays as well as immunochemistry to look at the immunological mechanisms that may be driving fibrosis in the tissues And the reason why this is important is because fibrosis is not
normal. It actually interferes with the normal functioning of the tissue. And the lymph nodes are important for immune function. So when you have a lot of collagen deposition -- which is the definition of fibrosis -- occurring within these tissues, it actually interferes with normal immune function. So and that's maybe the reason why we see a lot of these chronic complications within our patients and their inability to clear the virus. Because there's a lot of immune dysregulation going on in these lymphoid tissues. Understanding the mechanisms that may be driving this dysregulation within these tissues may give us an idea of how we can intervene, so that these individuals can get their CD4 (or T-cells) back up to their normal levels. As well as reconstitute their immune system to function more normally again.