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PREVALENCE OF DERMATOLOGICAL COMPLICATION AMONG HIV INFECTED ON HAART PATIENTS –ACROSS SECTIONAL STUDY

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ABSTRACT

Skin disorders are frequent among persons infected with HIV. Widespread introduction of HAART in mid 1990s has altered the presentations of cutaneous manifestation associated with HIV infection. Our purpose was to evaluate the use of HAART on the prevalence and spectrum of cutaneous manifestations in HIV-infected patients. Source of data will consists of 100 HIV infected individuals/AIDS patients, 50 not on HAART and 50 "on HAART" attending skin and STD clinics with symptoms and signs of dermatological disease. A brief questionnaire was asked according to proforma. Clinical examination will include general examination followed by a detailed dermatological evaluation of the individual. The present study shows significant decrease in overall infections in patients on HAART (54%) compared to "non-HAART" (82%). Significant increase in inflammatory cutaneous disease in patients on HAART (60%) compared to "non-HAART" (32%). Diagnoses of viral infections were 60% less frequent among those patients who had initiated HAART. Fungal infections were 50% less frequent among those patients who had initiated HAART. Bacterial infections showed no change due to the poor socioeconomic status of our population. Photo dermatitis is significantly more in patients "on HAART" (12%). The prevalence of drug reactions was significantly higher in patients "on HAART" (26%) compared to not on HAART (6%). Prevalence of STI is significantly reduced in patients "on HAART" (14%) compared to not on HAART (28%). The incidence of most mucocutaneous manifestation decreased after starting HAART, the pattern of decline was more pronounced for events with a viral etiology and for STIs. Cutaneous adverse reactions from antiretroviral agents have become increasingly important to recognize as population of a patients surviving with HIV infection grows. The decrease in the prevalence of skin disease can be an important motivator among persons receiving HAART with regard to therapy adherence.

KEYWORDS: Human Immunodeficiency Virus (HIV) Highly Active Antiretroviral Therapy (HAART)