

CO INFECTIOUS PARTICIPATION OF LEISHMANIASIS

PARASITE IN PATIENTS WITH HIV / AIDS

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ABSTRACT

Summary

During the 1980s the first cases of leishmaniasis/HIV co-infection have been registered in the world. In co-infection it is registered the negative effect of the participants: patients infected with HIV are particularly sensitive to leishmaniasis, and leishmaniasis itself accelerates replication of HIV and its progression into AIDS. In Montenegro, co-infection visceral leishmaniasis VL/HIV was diagnosed for the first time during 1914/15 in 5 cases (within a total population of 640,000 inhabitants). For the purpose of examinations, there were used epidemiological, clinical, hematological, pathological and serological methods (IIF, ELISA), PCR, Ultrasound and x-ray diagnostics.

In patients with co-infections VL / HIV, clinical characteristics were presented difficult-generalized infective syndrome in all the patients – 100%, with enlarged spleen in 87%, with pancitopenia in 55%, icterus in 37%. Respiratory syndrome – pneumonia in all the cases, and in 2 cases neurological syndromes were registered.

An analysis of HIV infection in patients with co-infection has shown the reduction of the number of CD4 T-lymphocytes to the level below $<200 \text{ mm}^3$ in 3 cases and in 2 cases $<90 \text{ mm}^3$.

Analysis of the effects of classical therapy (Glucantime, Miltefosine) in combination with HART has shown its failure because recidives VL was registered in all 5 treated cases. The further treatment of this cases with HART and Amfotericine B (Amb), present good results. After a year of their monitoring, there were not registered recidives or disease progression, non-resistance to the applied medicine. It is though necessary to emphasize that a long-term monitoring of these patients is required in order to obtain valid conclusions.

KEYWORDS: *Leishmaniasis /HIV Co-Infections, Diagnosis, Therapy, Prognosis*

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