SCIENTIFIC LETTER



Opportunistic Infections in HIV Positive Children from North East India

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To the Editor: HIV infected children are more likely than adults to be hospitalized with bacterial and viral infections [1]. Successful implementation of anti-retroviral therapy (ART) has led to better management of opportunistic infections (OIs) in these children [2]. This cross-sectional study on 137 children enrolled in the ART center of GMCH was conducted to determine the prevalence and risk factors associated with opportunistic infections.

Younger children (<10 y) had a higher prevalence of OIs (90.9%) compared to older children (66.7%). Fever was the commonest clinical presentation. The commonest opportunistic infection was bacterial pneumonia (15.3%), followed by oral candidiasis (10.2%) and tuberculosis (7.1%). There was a very significant statistical correlation between incidence of OIs and advancing WHO stage (p<0.001). The association between duration of ART and incidence of opportunistic infections was also found to be statistically significant (p<0.05).

Diarrheal illnesses, weight loss and protein energy malnutrition (PEM) were common reasons for outpatient visits in these children. The clinical spectrum in our study points towards a more generalized set of symptoms rather than AIDS defining infections. Dhaka et al., in their study, have reported similar findings [3]. AIDS defining OIs in our study include 2 cases of cryptococcal meningitis, 1 case of Kaposi sarcoma, 5 cases of *P. jiroveci* and 4 cases of cytomegalovirus (CMV) retinitis. Contrary to western countries, *P. jiroveci* is not as common in our country due to the likelihood of better coverage of cotrimoxazole prophylaxis [4]. Skin infections included severe cases of scabies, tinea and non-specific eczema.

Our study re-affirms that the management of HIV does not just involve ART, but also in screening for and managing OIs. It would be prudent to keep a high index of suspicion for HIV in children presenting with recurrent respiratory infections, failure to thrive, oral candidiasis, chronic or persistent diarrhea, and skin infections with unusual severity.

Declarations

Conflict of Interest None.

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