MYCOBACTERIAL INFECTIONS IN PATIENTS WITH AIDS IN A LOW HIV PREVALENCE AREA

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SUMMARY

The Czech Republic is characterized here as both a low HIV prevalence area (1,64 registered positivity per 10⁵ population and 45 AIDS patients notified in the 1986-93 period) and a low tuberculosis prevalence area (mortality rate 0,8, incidence of bacillary pulmonary cases 11,3 per 10⁵ population and risk of infection 0,04 in 1990). From 1986 to 1993 a total of 10 cases of mycobacterial infections complicating AIDS or ARC disease were registered in the Czech Republic in 9 male patients aged from 29 to 55, 8 homosexuals, and one woman aged 48.

Classical pulmonary tuberculosis caused by *M. tuberculosis* was diagnosed in one male patient and was controlled by antituberculosis chemotherapy. The remaining mycobacterial infections were caused by the following opportunistic mycobacterial pathogens: (a) *M. avium* - in five individuals, four of them died of a disseminated disease; (b) *M. kansasii* - in two patients, one died of a disseminated infection; (c) *M. xenopi* - involved in a fatal generalized CMV, and cryptococcal and mycobacterial infection; (d) *M. fortuitum* caused a generalized disease in a case of exhaustive multifocal encephalopathy.

Authors conclude that under conditions of low prevalence of both HIV and tuberculosis infection the risk to AIDS patients of contracting classical tuberculosis is low. A relatively frequent occurrence of non-tuberculosis mycobacterial disease in AIDS patients afflicted with the impaired immunity is explained by transmission of opportunistic mycobacteria from the environment

Key words: HIV/AIDS, tuberculosis, mycobacterial infections, Mycobacterium tuberculosis, M. kansasii, M. avium, M. xenopi, M. fortuitum, opportunistic mycobacteria

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