
A COMPARISON OF CLINICAL SYMPTOMS OF *PNEUMOCYSTIS CARINII* PNEUMONIA BETWEEN HIV AND NON-HIV PATIENTS

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[Background] *Pneumocystis carinii* pneumonia (PCP) is known as an opportunistic infection which occurs in patients with human immunodeficiency virus (HIV) infection, with malignancies or receiving steroid therapy. It is reported that PCP in patients with HIV may develop in a course of several weeks without any clinical symptoms, but in contrast to this, PCP in non-HIV patients can rapidly develop with severe clinical symptoms in three to six days. We therefore divided patients with PCP into HIV positive and negative groups and evaluated their clinical symptoms.

[Materials and Method] We retrospectively evaluated 17 patients with PCP which was diagnosed by Grocott's stain or polymerase chain reaction from specimens of bronchoalveolar lavage. 11 patients were HIV positive and 6 patients were HIV negative.

[Results] In non-HIV group, their underlying diseases included three patients with solid malignancies, three hematologic malignancies, one dermatomyositis and one who had received renal transplantation. All patients had started receiving steroid therapy and had been under tapering the doses of steroid. The mean interval of steroid administration was about 7.3 weeks. Between the two groups, serological parameters such as white blood cell count, C-reactive proteins and lactate dehydrogenase were not statistically different, but CD4/CD8 was statistically different (0.13 in HIV group and 1.07 in non-HIV group). The interval from onset of symptoms to diagnosis of PCP was 42.6 days in HIV group and 9.4 days in non-HIV group. The area of pulmonary infiltration in chest X-ray was 61.8% in HIV group and 88.3% in non-HIV group.

[Conclusion] A comparison between HIV group and non-HIV group revealed a slowly progressing clinical course in HIV group and a relatively larger area of pulmonary infiltration in non-HIV group.