
IS THE STANDARD DOSE OF SULFAMETHOXAZOLE/TRIMETHOPRIM ADEQUATE IN PATIENTS WITH AIDS-RELATED PNEUMOCYSTIS CARINII PNEUMONIA?

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Background: *Pneumocystis carinii* is recently recognized as a fungus. Sulfamethoxazole(SMX)/trimethoprim(TMP) is most often used as initial therapy for AIDS-related *P. carinii* pneumonia(PCP). The standard dose used in patients with PCP is 75-100mg/kg/day of SMX plus 15-20mg/kg/day of TMP. However, we administrate SMX/TMP at a lower dose in patients with AIDS-related PCP. We study the clinical course of patients received the low dose treatment with SMX/TMP and measure the serum level of SMX/TMP in 4 patients.

Patients and methods: We analyzed the clinical efficacy of low dose treatment with SMX/TMP in 16 patients with AIDS-related PCP(15 males and 1 female, mean age;39.17year). The average count of CD4 lymphocyte was 34.7/mm³ at the onset of PCP. The severity of PCP was mild 6 cases, moderate 9 cases, severe 1 case, respectively.

Results: The average dose of SMX/TMP was SMX 46.4mg and TMP 9.3mg/kg/day. The average period was 4.3 days for disappearance of fever, 12.4 days for disappearance of symptoms, 15.2 days for normalization of serum LDH level, respectively. Ten patients had any adverse reactions and 7 of 10 patients stopped to receive SMX/TMP. The serum level of SMX was 51.6 µg/ml at trough concentration, 84.9 µg/ml at peak concentration and the serum level of TMP was 3.0 µg/ml at trough concentration, 3.6 µg/ml at peak concentration, respectively.

Conclusion: These results suggest that the low dose treatment with SMX/TMP is effective in patients with AIDS-related PCP.