

#### **#274. Opportunistic Infections in Filipino HIV Patients**

Part of Session: 49. HIV-Associated Infections and Malignancies

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**Background:** The Philippines is one of only seven countries in the world with a substantial increase in the number of new HIV cases from 2001 to 2009. More patients are presenting with AIDS-defining illnesses. The objectives of this study are: to determine and rank the most common opportunistic infections (OIs) in Filipino HIV and AIDS patients; and to describe the

CD4 counts at which they most commonly occur and the mortality rate of each.

**Methods:** Following IRB approval, a database of HIV clinic patients at the largest tertiary government hospital in the Philippines (Philippine General Hospital) was constructed. 476 patients were documented. OIs were tabulated and CD4 counts were noted. Mortality rates were also calculated. Sites of tuberculosis infections were divided into pulmonary, extrapulmonary, and disseminated (>1 site) categories and analyzed separately.

**Results:** OIs and associated characteristics are shown in Table 1 (Legend: OI - opportunistic infection PTB – pulmonary tuberculosis; PCP - Pneumocystis pneumonia; ePTB - extrapulmonary tuberculosis; dis TB - disseminated tuberculosis; othrush - oral thrush; CMV - cytomegalovirus; crypto - Cryptococcus meningitis; ethrush - esophageal thrush; toxo - toxoplasmosis). 155 OIs were documented. Tuberculosis was the most common opportunistic infection followed by PCP, while toxoplasmosis was the rarest. CD4 counts for PTB and ePTB were not significantly different, but were significantly lower for dis TB (p=0.006 vs. PTB; p=0.03 vs. ePTB by t-test). Cryptococcus meningitis was the deadliest OI.

**Conclusion:** OIs in Filipino HIV patients occur at counts similar to or lower than those published in literature. Current CD4 cut-offs for starting prophylaxis for PCP and toxoplasmosis are valid for these patients. Survivor bias may contribute to the relatively low mortality rates seen in our database.