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## Tuberculosis in HIV/AIDS patients

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**Introduction:** In Albania the incidence of people with both TB and HIV is small, however, it is a category that should not be neglected.

**Aim of the study:** The main aim is to assess the characteristics of TB in the HIV/AIDS patients.

**Materials and methods:** During 2004-2015 years are consulted 24 cases of TB in the HIV/AIDS patients, from them 23(85.2%) cases as pulmonary tuberculosis and 4(14.2%) cases as generalized tuberculosis. The mean age of the subjects with pulmonary TB was 48.1±9.8, males – 22(95.7%), smokers -21(91.3%), from urban areas 16(69.6%), unemployed –9(39.1%). Data are elaborated by SPSS17.

**Results:** Period of knowing HIV infection was 6.2±2.2 years, period of ART treatment - 5.3±2.8. According to the count of CD4+ cellules, 6(26.1%) patients resulted with 200-999 cell/ml, 8(34.8%) - with 100-199 cell/ml, and 9(39.1%) <100cell/ml. Beginning of TB was acute in 39.1%, sub acute in 52.2% and chronic in 8.7%. Clinical manifestation of pulmonary TB were: cough – 73.9%, expectoration- 43.5%, dyspnoea – 34.8%, chest pain – 26.1%, haemoptysis – 26.1%, weight loss – 65.2%, fatigue – 87%, fever – 78.3%, anorexia- 78.3%. Radiographically is displayed adenopathy in 5 (21.7%) cases and with CT in 7 (30.4%) cases. Lesions are on the right lung in 21.7%, on the left- 34.8%, and bilateral - 43.5%. Upper zone localization in 56.5%, middle zone -30.4%, and lower zone- 13%. Exitus laetalis resulted in 4(17.4%) patients, 3 patients with 100-199 CD4 cell/ml and one patient with < 100 CD4 cell/ml.

**Conclusions:** TB is a common respiratory complications and with high mortality rate in HIV/AIDS patients. The level of CD4+ count is predictive factor for clinical manifestation and prognosis.

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