

Oral finding of HIV (AIDS) patients

Assist.lect.Karrar N. Shareef
B.D.S.,MSc. Oral and Maxiofacial Pathology





A 47-year-old man was referred to the Oral Medicine clinic

complaining of discomfort during eating and speaking because of the presence of a painless nodule on the posterior dorsal surface of the tongue.

The patient had noticed the tongue lesion 1 month ago













2020-2021







- Human immunodeficiency virus (HIV) comprises 2 main **RNA** viruses
- (HIV-1 and HIV-2) that tend to give rise to a similar clinical picture.

Website: http://Alkafeel.edu.ic

- This infection came to clinical and public attention in the early1980s
- However, for example in 2015, there are 37 million individuals across the globe living with HIV disease.





The virus is mainly transmitted by sexual, parenteral (recipients of blood) or transplacental routes (Pinheiro et al. 2009). **Centers for Disease Control and Prevention (CDC) in 1993** had defined acquired immunodeficiency syndrome (AIDS) as the occurrence of one or more group of life-threatening opportunistic infections, malignancies, neurologic diseases, and other specific illnesses in patients with HIV infection and/or with CD4 counts less than 200/mm3.





Stages in HIV disease

Stages	CD4 count range	Duration
Acute infection	1,000–750	1–4 weeks
Asymptomatic	750-200	2-15 weeks
Early symptomatic	500-100	1–5+ years
Late symptomatic	50-200	1-4+ years
Advanced disease	50-0	0–2+ years





List and Dates of World Workshops in Oral Health and Disease in AIDS (Greenspan and Challacombe, 2020)



WW1	San Diego	USA	1988
WW2	San Francisco	USA	1993
WW3	London	UK	1996
WW4	Skukusa	South Africa	2000
WW5	Phuket	Thailand	2004
WW6	Beijing	China	2009
WW7 Hyderabad		India	2014
WW8	Bali	Indonesia	2019





Utility of oral lesions in the management of HIV infection(Greenspan and Challacombe, 2020)



Common	Correlate with HIV load	
Easily evaluated	Criteria for initiation of prophylaxis for HIV and	
Indicate HIV infection	Opportunistic infections	
Primary/early/incident	Criteria for entry into vaccine and therapy trials	
Prevalent	and endpoints in such trials	
Merit treatment	Reduced and changed with antiretro viral therapy	
Prominent features of progression		
Used in staging systems	But may indicate "breakthrough" and need for	
May predict progression independent of CD4 count	change of therapy	







2020-2021



- The most common oral manifestations of HIV disease are
- Oral finding that Strongly Associated with HIV Infection
 - 1. Candidiasis: Erythematous, pseudomembranous, and angular cheilitis
 - 2. Hairy leukoplakia
 - 3. Kaposi sarcoma (KS)
 - Non-Hodgkin lymphoma (NHL)
 - 5. Periodontal diseases: Linear gingival erythema, necrotizing gingivitis, and necrotizing periodontitis

Website: http://Alkafeel.edu.iq



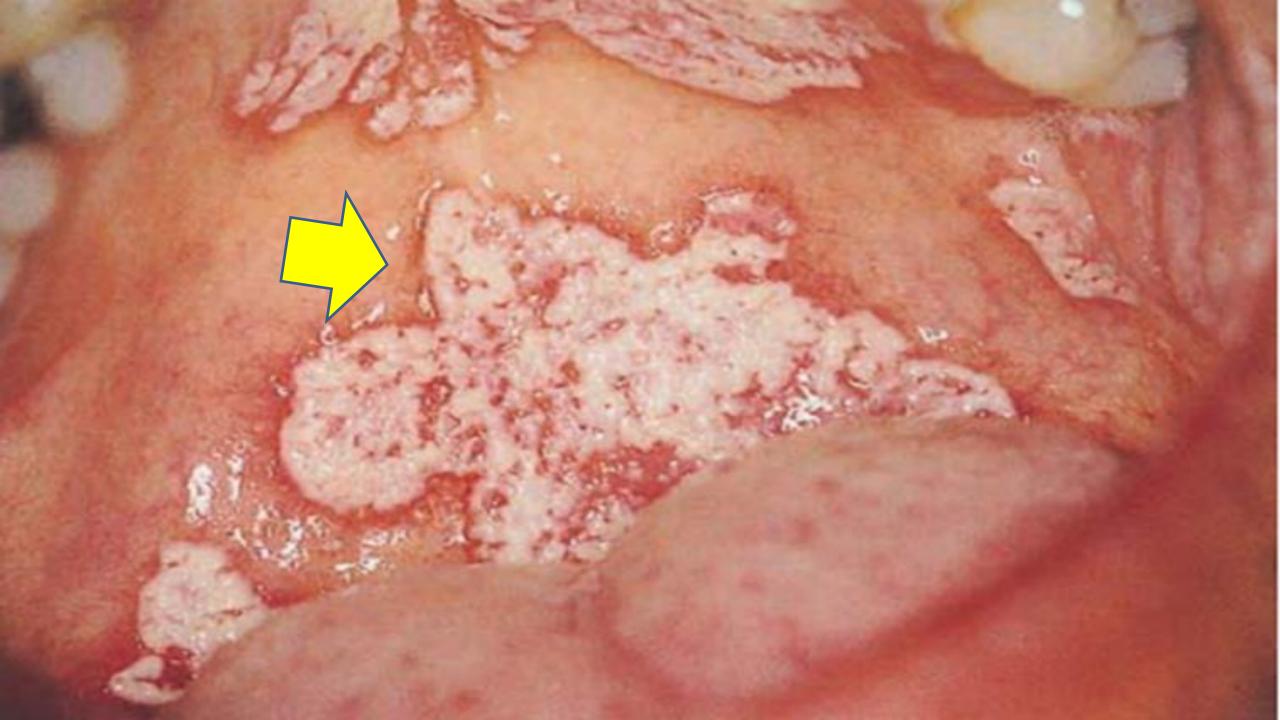












 Fig. 7-34 HIV-associated Oral Hairy Leukoplakia (OHL). Vertical streaks of keratin along the lateral border of the tongue.





Hairy leukoplakia. White lesion on lateral border of the tongue with corrugated surface





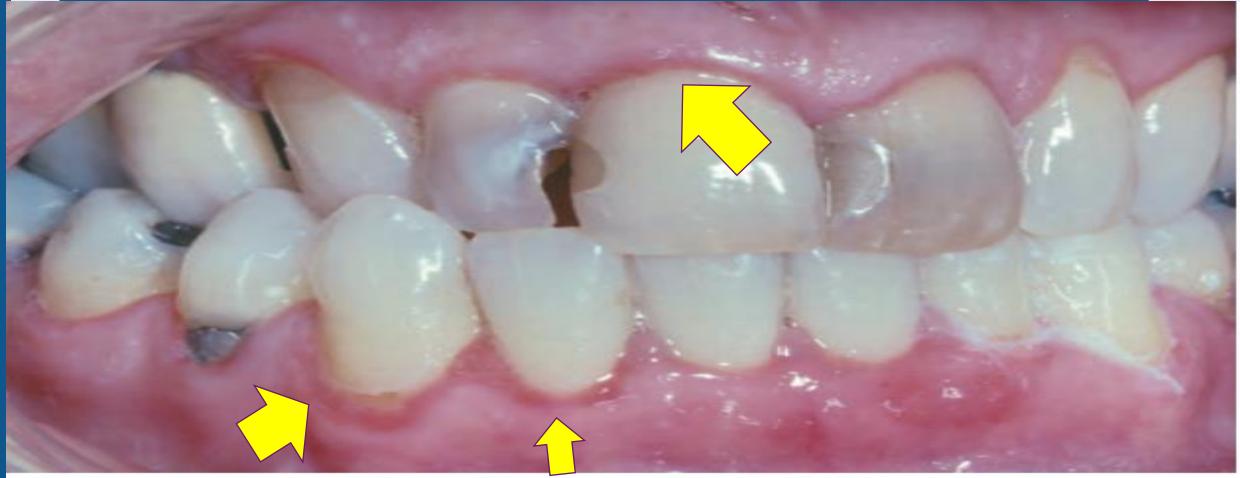


 Fig. 7-45 HIV-associated Gingivitis. Band of erythema involving the free gingival margin.

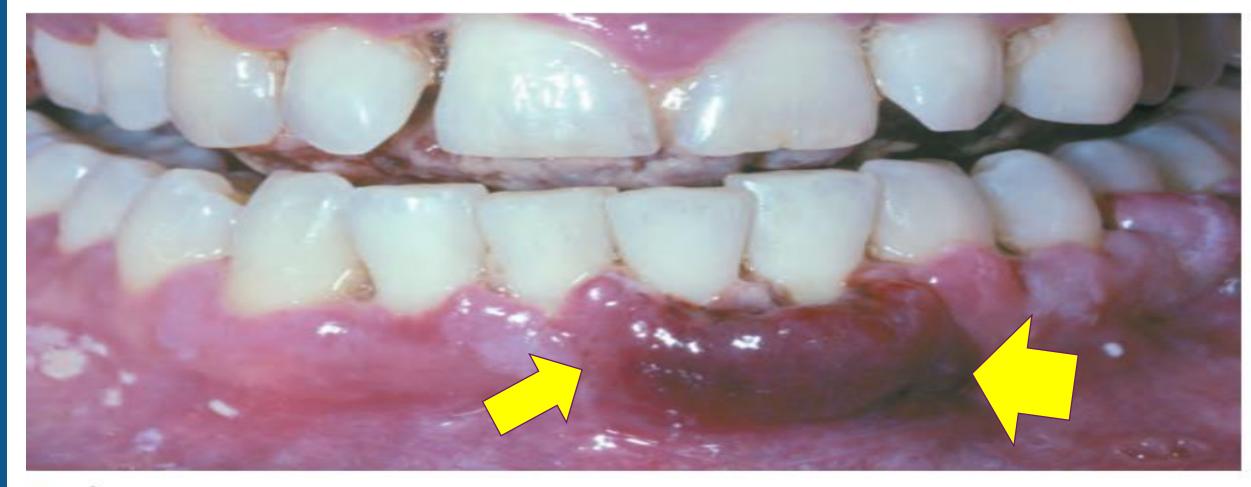












• Fig. 7-40 HIV-associated Kaposi Sarcoma (KS). Raised, darkred enlargement of the left mandibular anterior facial gingiva.





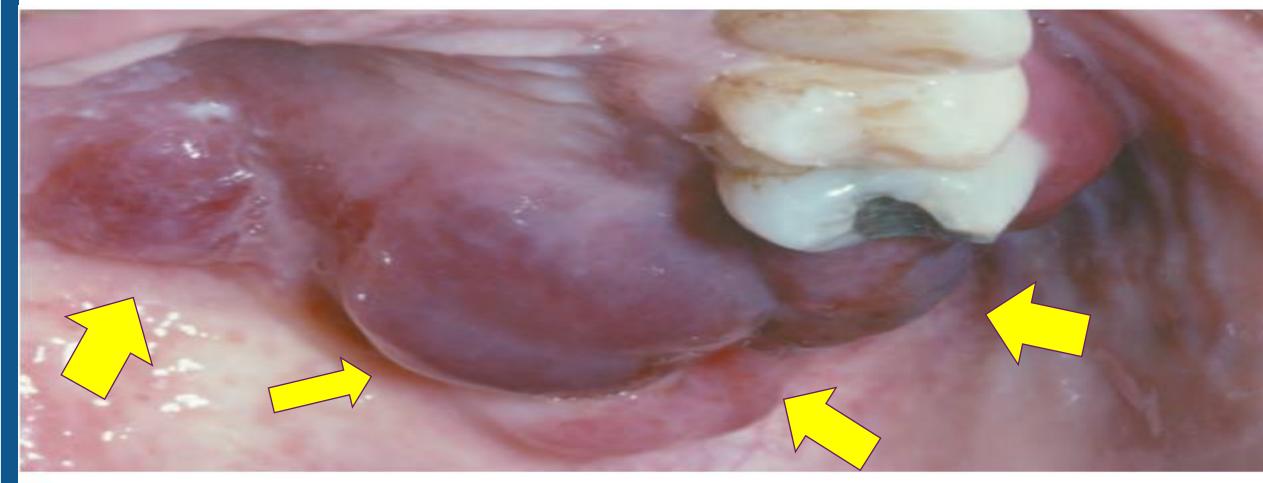


 Fig. 7-41 HIV-associated Kaposi Sarcoma (KS). Diffuse, redblue nodular enlargement of the left hard palate.









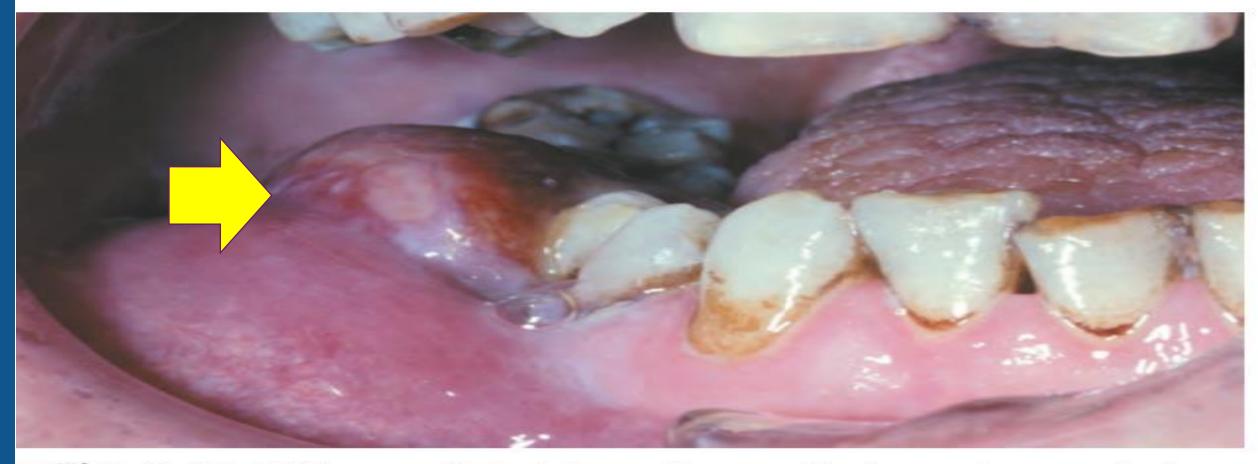


Fig. 7-44 HIV-associated Lymphoma. Erythematous and ulcerated soft tissue enlargement of the posterior mandibular gingiva and mucobuccal fold on the right side.

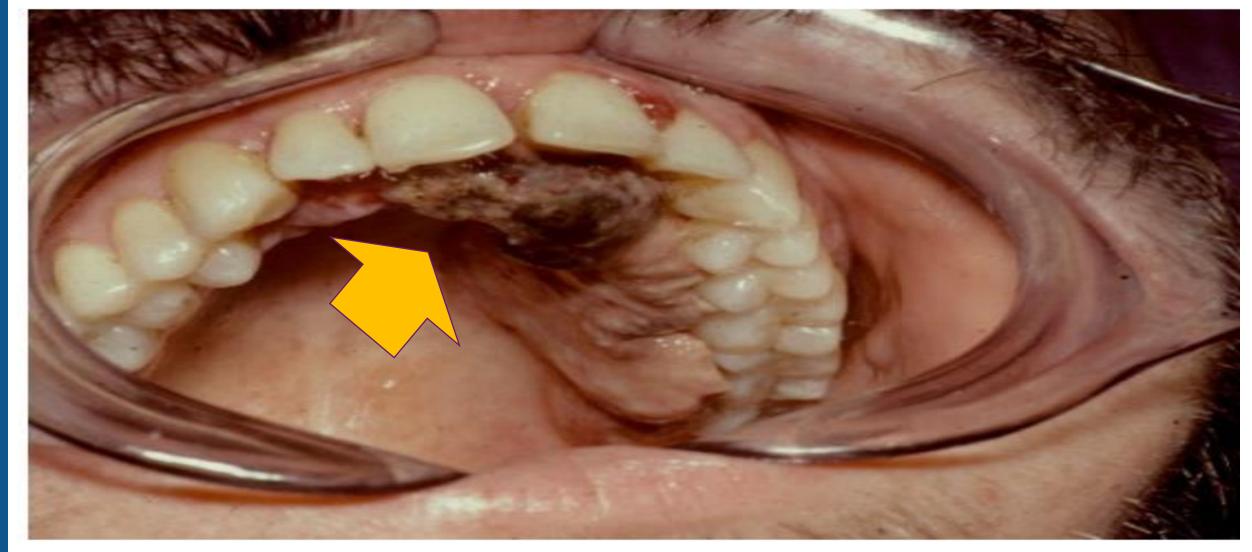






Clinical presentation of one of the first cases non-Hodgkin's lymphoma (NHL) in 1981









2020-2021



The management of HIV disease is two aspects:

- 1- one aimed at managing opportunistic infections
- 2-other targeted at the virus itself.

Four groups of drugs can be used to combat the virus.

A combination of these drugs may be used in the management of HIV infection. These regimens are referred to as highly active antiretroviral therapy (HAART)







Table 3 Antiviral therapy for management of HIV infection

Drug	Examples	Mechanism of action
Fusion inhibitors	Enfuvirtide	It is an anti-HIV peptide that inhibits entry of the virus into host cells
Nucleoside reverse transcriptase inhibitors (NRTIs)	Abacavir Didanosine Lamivudine Stavudine Zalcitabine Zidovudine	They terminate the elongation of the growing DNA chain and reduce or prevent replication of HIV in infected cells
Non-nucleoside reverse transcriptase inhibitors (NNRTIs)	Nevirapine Efavirenz Delavirdine	They inhibit a vital step in the transcription of RNA genome into double stranded viral DNA
Protease inhibitors (PIs)	Indinavir Ritonavir Atazanavir	They inhibit the cleavage of viral proteins









WHO (1997) recommended 'Universal Safety Precautions' for preventing the sprHand washing.

- O Creating appropriate barrier by use of gloves, masks, gowns, eye protectors.
- O Careful handling of sharp objects.
- O Proper sterilization and disinfection.
- O Disposal of instruments after use/decontamination.
- O Proper disposal of infected waste.







D.D

pyogenic granuloma

benign tumor (schwannoma, neurofibroma, rhabdomyoma, granular cell tumor,

developmental abnormality (lingual thyroid), we did not include malignant neoplasms







References



- Greenspan, J.S. and Challacombe, S.J., 2020. The impact of the world Workshops on oral health and disease in HIV and AIDS (1988-2020). Oral Diseases, 26, pp.3-8.
- Heron, S.E. and Elahi, S., 2017. HIV infection and compromised mucosal immunity: oral manifestations and systemic inflammation. Frontiers in immunology, 8, p.241.
- Neville, B.W., Damm, D.D., Allen, C.M. and Chi, A.C., 2016. Oral and maxillofacial pathology4th edition. Elsevier Health Sciences.
- Ongole, R., 2009. Text book of oral medicine, oral diagnosis and oral radiology. Elsevier India.