NEURAL AND OCULAR SYPHILIS AS PRESENTING DIAGNOSIS OF HIV:

REPORT OF 3 CLINICAL CASES

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Background:

Since 1995 infectious syphilis has re-emerged in Albania. The incidence rate of syphilis has increased annually, especially among HIV cases. We present three cases of neural and ocular syphilis with concomitant HIV infection .

Methods:

This is a descriptive study carried out at Infectious Diseases Service at University Hospital Center of Tirana, where we reviewed data on demographic characteristics, clinical , neuro-radiological ,serum and CSF examination profiles of three patients diagnosed with HIV and neuro-syphilis infection during 2016-2017.

Results:

These are 3 male patients, with age distribution 36-53 years (mean 44 years). All of them were diagnosed concomitantly with HIV and neurosyphilis, referred to the ID Department by ophthalmologist and neurologist. Case 1: 53 years, male, presenting tremor, ataxia, bradikinesia, vertigo, progressive vision loss, lost of memory; MRI: frontal subcortical hyper signal, small ischemic lesions in left pontine area; CSF: lymphocytic pleocytosis (160 cells/mm3), RPR in CSF positive, serum RPR titer 1:128, RPR in CSF +, EEG abnormal pattern, CD4 29 cells/µl. Case 2: 45 years, male, presenting: ataxia, difficulty in walking, vision loss, CSF: lymphocytic pleocytosis (180 cell/ mm3), RPR in CSF positive, serum RPR 1:256. Case 3: 36 years, male presenting: skin macular rash, vision loss, depression, CSF: 61 cells/mm3, 100 % lymphocytes, RPR LCS +, RPR serum 1;64; ophthalmic diagnosis: corioretinitis/vitrositis. Since penicillin G was not available, treatment was done with Ceftriaxone 2 gr/d iv for 14 days, with improvement of clinical picture and decline of RPR titer.

	Patient 1	Patient 2	Patient 3
Age/sex	53/M	45/M	36/M
CD4	29 cells/µl	137 cells/µl	280 cells/µl
HIV RNA	155.000 c/ml	68.800 c/ml	NA
Co-morbidities	Oral thrush, hairy leukoplakia, dermatitis	Seborroic dermatitis, bipolar disorders, oral thrush, uveitis,	Corioretinitis, vitrositis, depression, oral thrush, lymphadenopathy
CSF	160 cells/mm3, lymphocytes 80%, proteine 0, glucose 45	180 cells/mm3, lymphocytes 96%; glucose 43 mg/dl, protein 40 mg/dl	61 cells/mm3, lymphocytes 100%, protein 20 mg/dl, glucose 41 mg/dl
MRI	Cortical supratentorial subatrophy, ischemic pontine lesions		CT : normal

Conclusions:

Although Albania is not considered a high prevalent country, it is highly recommended to screen for neurosyphilis in patients with ocular and neurological findings, with special consideration in HIV patients. Early diagnosis and treatment of neurosyphilis is crucial due to potential persistent disabilities that can be easily treated or even prevented..