Infectious Agents and Cancer

BioMed Central

Poster presentation

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Four year survival in untreated AIDS related-Kaposi sarcoma (AIDS-KS) in Jos, Nigeria

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from 11th International Conference on Malignancies in AIDS and Other Acquired Immunodeficiencies (ICMAOI): Basic, Epidemiologic, and Clinical Research
Bethesda, MD, USA. 6–7 October 2008

Published: 17 June 2009

Infectious Agents and Cancer 2009, **4**(Suppl 2):P3 doi:10.1186/1750-9378-4-S2-P3

This abstract is available from: http://www.infectagentscancer.com/content/4/S2/P3

Background

AIDS-KS remains a significant cause of morbidity and mortality especially in sub-Saharan Africa in the face of ART scale-up. We compare survival over a four-year period between HIV-infected men and women with untreated AIDS-KS receiving care in Jos, Nigeria.

Patients and methods

The Jos University Teaching Hospital HIV cohort has more than 10,500 adult patients enrolled for care. We prospectively collect routine data on individuals, and during the study 175 patients presenting with AIDS-KS were followed up. We compared survival, clinical, immunologic and virologic characteristics between male and female patients receiving HAART (two NRTIs and one NNRTI). Comparison of variables between groups was by χ^2 test for nominal variables. Survival was calculated from the day of enrollment until death or the date of last follow-up using Kaplan-Meier method (Figure 1).

Results

One hundred and three (58.8%) were females while 72 (41.2%) were males, giving a male: female ratio of 1:1.6. The mean age was 35 ± 7 and 40 ± 7 for females and males respectively ($p < 0.001$). Median CD4 count was 105 and 114 cells/mm^3 (p, 0.76) while HIV RNA was 43,113 and 80,310 (p, 0.01) median copies/ml for females and males respectively at baseline. Mean duration of observation was similar for both sexes (2.3 ± 0.9 years) with 18.4% of females and 13.9% of males having history of use of HAART. Seventy-five percent (75%) of the females and 80 percent of the males had disseminated cutaneous disease and more than 40 percent of the male had nodular lesions compared with 25.5 percent of the females. The probability of survival was similar for both sexes.

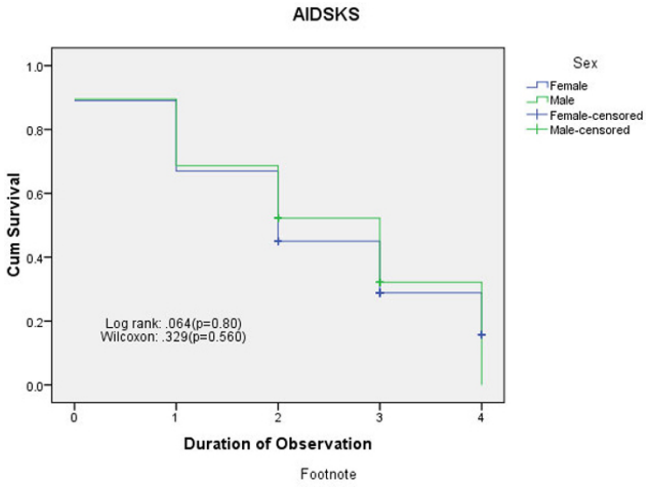

Figure 1
Kaplan-Meier plot for HIV$^+$ patients with untreated AIDS-KS in Jos, Nigeria stratified by sex.

Conclusion

Despite the availability of HAART, AIDS-KS continues to significantly affect morbidity and mortality in HIV-infected patients in our setting. Provision of specific treatment for AKS may improve overall outcome.