

TUMOUR-LIKE CHAGASIC ENCEPHALITIS IN AIDS PATIENTS

TO THE EDITOR

I am a reader of *Arquivos de Neuro-Psiquiatria*. I have a comment on the article 2008;66(4):881-884; Tumor-like Chagas encephalitis in AIDS patients, Sica, Gargiullo and Papayanis. I congratulate the authors on the abundance of their material. I would like that the photomicrograph of the parasitic nest (Figure 2) had been made in oil immersion, to demonstrate the blepharoplasts characteristic of amastigotes of Chagas disease.

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THE AUTHORS REPLY

We thank the comments of Dr. L.C. Mattosinho França. Unfortunately, we have not pictures showing the parasite by employing microscopical immersion techniques.

Within the material that we have collected and studied in the last years, encompassing 18 AIDS patients with tumour-like chagasic encephalitis, 8 of them had positive sera test for toxoplasmosis as well; however, in all of them

appropriate treatment targeting the toxoplasma neither rendered positive results nor modified the cerebral images; furthermore, their clinical manifestations worsen during treatment. Therefore, in those circumstances we carried on serological tests and looked for trypomastigotes in their blood, spinal fluid when possible, and, when necessary, in cerebral tissues either by performing biopsy or by surgically removing the lesion. In every case we could find laboratory signs of the presence of the parasite which prompted us to start specific treatment.

Being these persons weak regarding their immunological system, it is possible to accept that they could house more than one opportunistic infection at the same time, as seems to be the case with toxoplasma and *T. Cruzi* coinfection in these patients, at least in regards to their serological tests.

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DOM PEDRO II DAYTIME SLEEPINESS

TO THE EDITOR

I read with much interest the excellent article in the September 2008, volume 66, 3B issue of the *Arquivos de Neuro-Psiquiatria*, on "Dom Pedro II daytime sleepiness", page 770. The thesis of the authors is plausible, but unfortunately we lack confirmation of Dom Pedro II's sleep apnea by the two possible observers, the ladies with whom he slept; they are the Empress Maria Teresa and the Italian countess with whom Dom Pedro II at times spent his nights when he was travelling in Europe. Nevertheless, the authors, Drs. Rubens Reimão, Marleide da Mota Gomes and Péricles Maranhão-Filho are probably right.

There is another possible explanation for Dom Pedro II's daytime sleepiness¹⁻³.

I have a special interest in it since I myself suffer from it. As all neurologists know, each person awakens for a few seconds from four to five times each night. Until old age,

since the awake periods are very brief and the slumbers are very long, people rarely are aware of these very brief awake periods. In old age this changes. The awake period lengthen to from ten to twenty or more minutes. Some old persons spend 20% or more of their sleeping hours awake, and hence have daytime sleepiness during their days.

I am one of these old persons. I am 84 years old. To combat the problem I keep by my bedside a thermos bottle of camomile hot tea, my pipe and mild tobacco, and warm milk. When I wake up I partake of these three things and, with luck, get back to sleep in ten or fifteen minutes. However, these awake periods sometimes stretch out to thirty minutes or so. During the day I struggle with my problem of daytime sleepiness with more camomile tea, mild pipe tobacco and walks to the garden which is behind my service of neurology mainly an active EEG ser-