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NEUROLOGIC INVOLVEMENT IN THE ACQUIRED IMMUNODEFICIENCY SYNDROME (Abstract)\*. Thesis. Recife, 1995.

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Fifty patients with the immunodeficiency virus (HIV), confirmed by serological analysis for anti-HIV antibodies, with the diagnosis of acquired immunodeficiency syndrome (AIDS) of group IV (subgroup B, C, D and E) according to the classification of the Center for Diseases Control, admitted to the Infectious and Parasitic Diseases ward of the Hospital das Clinicas of the Federal University of Pernambuco, were studied between April 1991 and August 1994. Forty-five patients (90%) were male and five (10%) female, mean age being 31.0 years. Thirty-four (68%) came from the city of Recife. As to the exposure category, there was a predominance of sexual exposure, male homosexual, 26 (52%).

All patients, with or without neurological symptoms, were systematically submitted to neurological examination, study of cerebrospinal fluid (CSF), and cranial computed tomography (CT) scan.

In 22 cases (44%) with no major neurological complaint at admission, neurologic involvement was detected by CSF in 19 patients (86.4%), by CT scan in 14 (63.6%), and by neurological examination in seven (31.8%).

Neurological complaint at admission was recorded in 28 patients (56%). The symptoms more often referred were headache in 16 patients (57.1%), disorientation in 12 (42.8%), convulsions in 10 (35.7%), and vomiting in 8 (28.6%).

The major alterations of CSF were increased gamma globulin, 25 (55.5%); increased total protein, 23 (51.1%); hypercytosis, 22 (48.9%); and decreased chlorides, 18 (40.0%). HIV antibodies were detected in 42 cases (93.3%). As to the etiology of infections diagnosed by the study of CSF in the 50 patients with AIDS, toxoplasmosis was the infection found more often, either isolated or associated with other microbial agent, in 26 cases (57.8%), followed by cryptococcosis in four cases (8.9%). Associated infections were present in 10 patients (22.2%).

Cerebral atrophy was the most frequent alteration finding in the CT scan, 17 cases (53.1%).

As to the diagnostic methods that were used to detect the neurological involvement (neurological exam, CSF and CT scan), we observed that CSF had more alterations, 45 cases (90%), odds ratio = 0.83 (IC 0.06-8.06). Thus, this item should always be analyzed in all patients with AIDS, whether they have neurological symptoms or not.

**KEY WORDS:** acquired immunodeficiency syndrome (AIDS), nervous system involvement, neurological examination, cerebrospinal fluid, CT scan.

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