

WHO/LEISH/96.39

Distr.: Limited

English only

**EPIDEMIOLOGICAL
ANALYSIS
OF 692
RETROSPECTIVE
CASES**

of

**LEISHMANIA/HIV
CO - INFECTION**



World Health Organization
Division of Control of Tropical Diseases



WORLD HEALTH ORGANIZATION
ORGANISATION MONDIALE DE LA SANTE

DISTR.: LIMITED
DISTR.: LIMITEE
WHO/LEISH/96.39
ENGLISH ONLY

EPIDEMIOLOGICAL ANALYSIS OF
692 RETROSPECTIVE CASES OF
***LEISHMANIA*/HIV CO - INFECTIONS**

This document is not issued to the general public, and all right are reserved by the World Health Organization (WHO). The document may not be reviewed, abstracted, quoted, reproduced or translated, in part or in whole, without the prior written permission of WHO. No part of this document may be stored in a retrieval system or transmitted in any form or by any means - electronic, mechanical or other - without prior written permission of WHO.

The views expressed in documents by named authors are solely the responsibility of those authors.

Ce document n'est pas destiné à être distribué au grand public et tous les droits y afférents sont réservés par l'Organisation Mondiale de la Santé (OMS). Il ne peut être commenté, résumé, cité, reproduit ou traduit, partiellement ou en totalité, sans une autorisation préalable écrite de l'OMS. Aucune partie ne doit être chargée dans un système de recherche documentaire ou diffusée sous quelque forme ou par quelque moyen que ce soit - électronique, mécanique, ou autre - sans une autorisation préalable écrite de l'OMS.

Les opinions exprimées dans les documents par des auteurs cités nommément n'engagent que lesdits auteurs.

by: Dr P. Desjeux ⁽¹⁾, Dr J. Alvar ⁽²⁾, Dr L. Gradoni ⁽³⁾, Dr M. Gramiccia ⁽³⁾, Dr F.J. Medrano ⁽⁴⁾, Dr M. Deniau ⁽⁵⁾, Dr M. Portus ⁽⁶⁾, Dr F. Laguna ⁽²⁾, Dr F. Farault- Gambarelli ⁽⁷⁾, Dr C. Montalban ⁽⁸⁾, Dr P. Marty ⁽⁹⁾, Dr E. Rosenthal ⁽⁹⁾, Dr T. Gemetchu ⁽¹⁰⁾, Dr R. Russo ⁽¹¹⁾, Dr J.P. Dedet ⁽¹²⁾, Dr Dr S. Matheron ⁽¹³⁾ and Dr F. Antunes ⁽¹⁴⁾.

- (1) World Health Organization, CTD/TRY, Geneva, Switzerland
- (2) Instituto De Salud Carlos III, Madrid, Spain
- (3) Istituto Superiore di Sanita, Roma, Italy
- (4) Hospital Universitario Virgen del Rocio, Sevilla, Spain
- (5) Centre Hospitalier et Universitaire, Créteil, France
- (6) Facultad de Farmacia, Barcelona, Spain
- (7) Faculté de Médecine, Marseille, France
- (8) Hospital Ramon y Cajal, Madrid, Spain
- (9) Centre Hospitalier Universitaire, Nice, France
- (10) National Institute of Pathobiology, Addis Ababa, Ethiopia
- (11) Istituto di Malattie Infettive, Catania, Italy
- (12) Faculté de Médecine, Montpellier, France
- (13) Groupe Hospitalier Bichat-Claude Bernard, Paris, France
- (14) Hospital de Santa Maria, Lisboa, Portugal

At a Joint Consultative Meeting on *Leishmania*/HIV Co-Infections held in Rome in September 1994 by the Istituto Superiore di Sanità, and the Division of Control of Tropical Diseases (CTD) of the World Health Organization (WHO), a standardized Case Report Form and Guidelines for Diagnosis were finalized and endorsed. At this meeting a recommendation was also made to create a Central Registry to be located in WHO/CTD to collect, process and to periodically rediffuse worldwide basic information.

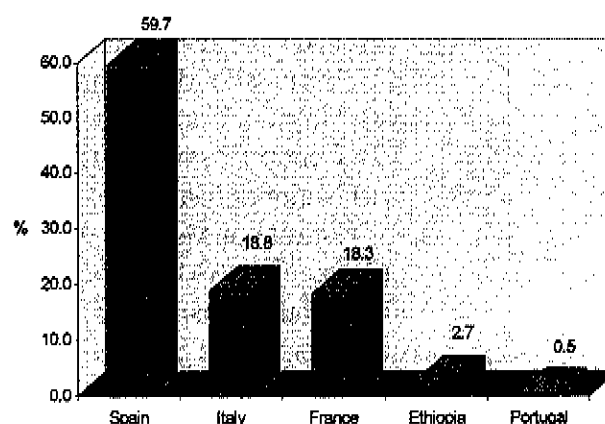
The overlap of visceral leishmaniasis (VL) and AIDS is on the increase due to the spread of the AIDS pandemic in rural areas and that of VL in suburban areas. Consequently, cases of co-infections are more frequent, with important clinical, diagnostic, chemotherapeutic, epidemiological and economic complications. *Leishmania*/HIV co-infection is regarded as **an emerging disease**, especially in southern Europe, where 25 - 70 % of adult VL cases are related to HIV infection, and 1.5 - 9 % of AIDS cases suffer from newly acquired or reactivated VL.

MAIN RESULTS

I) GEOGRAPHIC ORIGIN

97.3 % of the cases originate from **southern Europe** with a clear predominance in **Spain**:

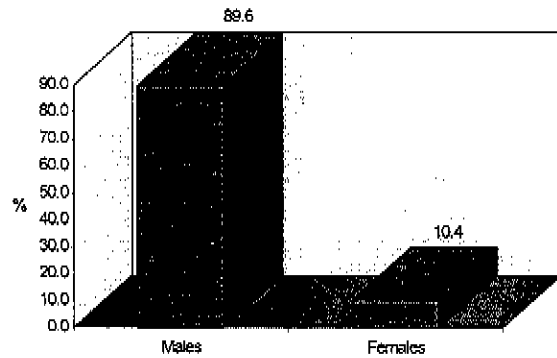
- Spain:	413	59.7 %
- Italy:	130	18.8 %
- France:	127	18.3 %
- Ethiopia:	19	2.7 %
- Portugal:	3	0.5 %
TOTAL:	692	100 %



II) SEX DISTRIBUTION

Most of the cases are **males**:

- Males:	620	89.6 %
- Females:	72	10.4 %
<i>TOTAL:</i>	<i>692</i>	<i>100 %</i>

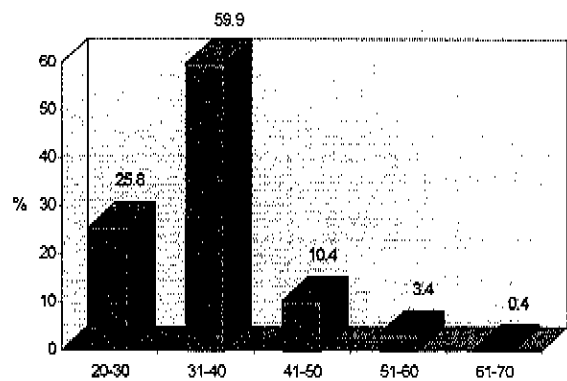


III) AGE DISTRIBUTION

Young adults represent **85.7 %** of the cases:

- 20 to 30 years old	121	25.8 %
- 31 to 40 years old	281	59.9 %
- 41 to 50 years old	49	10.4 %
- 51 to 60 years old	16	3.4 %
- 61 to 70 years old	2	0.4 %

TOTAL: *469* *100 %*

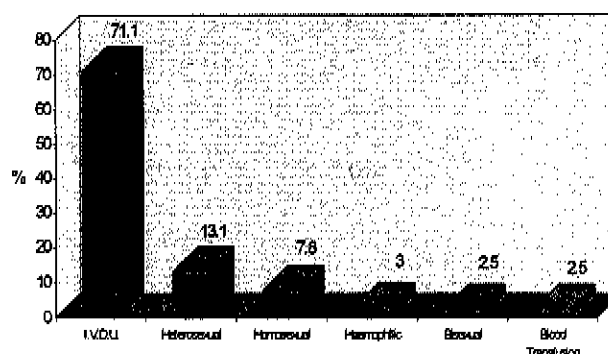


The distribution according to age and sex reflects the main population at risk (see below).

IV) RISK GROUPS

There is a predominance among **intravenous drug users (IVDU)** who are clearly identified as the **main population at risk**:

- IVDU:	311	71.1 %
- Heterosexual:	57	13.1 %
- Homosexual:	34	7.8 %
- Haemophilic:	13	3 %
- Bisexual:	11	2.5 %
- Blood transfusion:	11	2.5 %



TOTAL: 437 100 %

V) MAIN RISK GROUPS BY COUNTRY

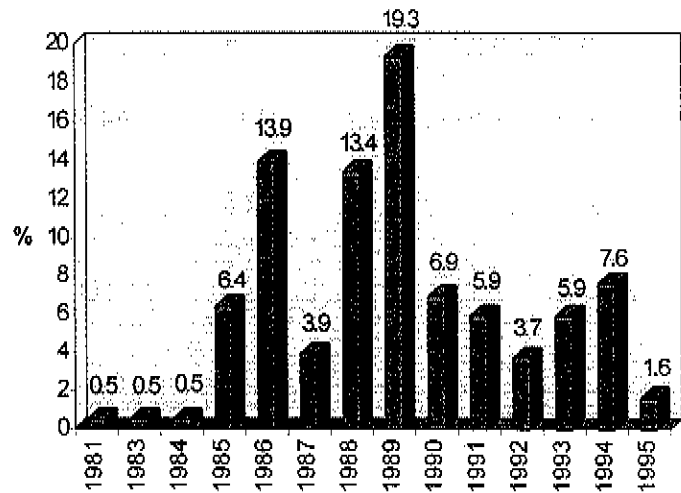
Country	No. of cases	Homosex.	Heterosex.	IVDU	Bisex.	Blood transf.	Haemophil.
France	75	14.7 %	10.7 %	69.3 %	1.3 %	4 %	-
Italy	128	6.2 %	8.6 %	79.7 %	3.1 %	0.8 %	1.6 %
Spain	212	7.1 %	9.4 %	73.6 %	1.4 %	3.3 %	5.2 %
Ethiopia	19		94.7 %		5.3 %		

There is evidence that the main population at risk is the same (IVDU) in southern France, Italy and Spain. However in **Ethiopia, co-infected cases are reported exclusively among heterosexuals.**

VI) DATES OF HIV DIAGNOSIS

Yearly distribution of reported HIV cases:

- 1981:	1	0.5 %
- 1983:	1	0.5 %
- 1984:	1	0.5 %
- 1985:	12	6.4 %
- 1986:	26	13.9 %
- 1987:	26	3.9 %
- 1988:	25	13.4 %
- 1989:	36	19.3 %
- 1990:	13	6.9 %
- 1991:	11	5.9 %
- 1992:	7	3.7 %
- 1993:	11	5.9 %
- 1994:	14	7.6 %
- 1995*:	3	1.6 %



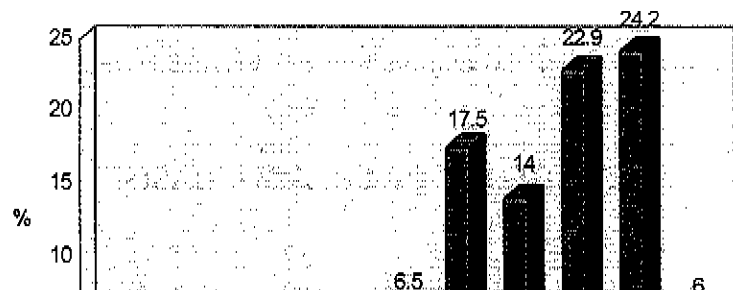
TOTAL: 187 (100 %)

* Only first trimester covered

VII) DATES OF LEISHMANIASIS DIAGNOSIS

Yearly distribution of reported leishmaniasis cases:

- 1985:	3	0.6 %
- 1986:	3	0.6 %
- 1987:	8	1.7 %
- 1988:	13	2.7 %
- 1989:	16	3.3 %
- 1990:	31	6.5 %
- 1991:	83	17.5 %
- 1992:	67	14 %



预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_30693

