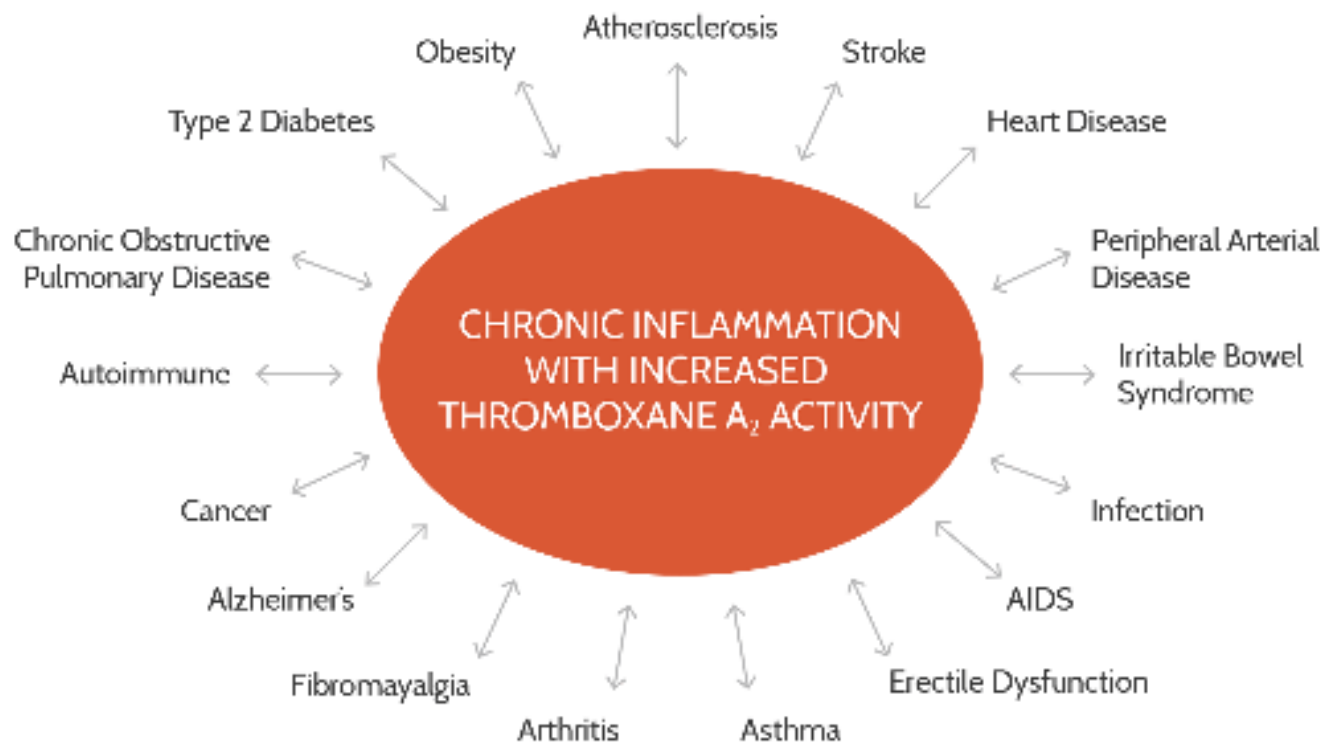
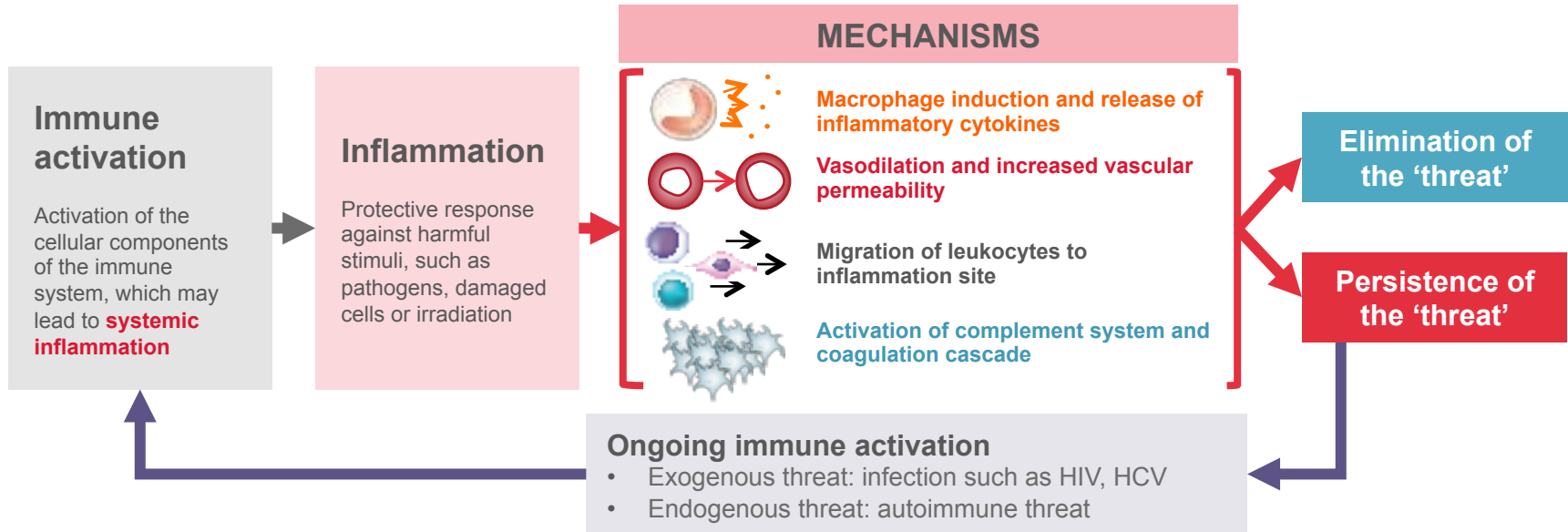


# DISEASES OF CHRONIC INFLAMMATION

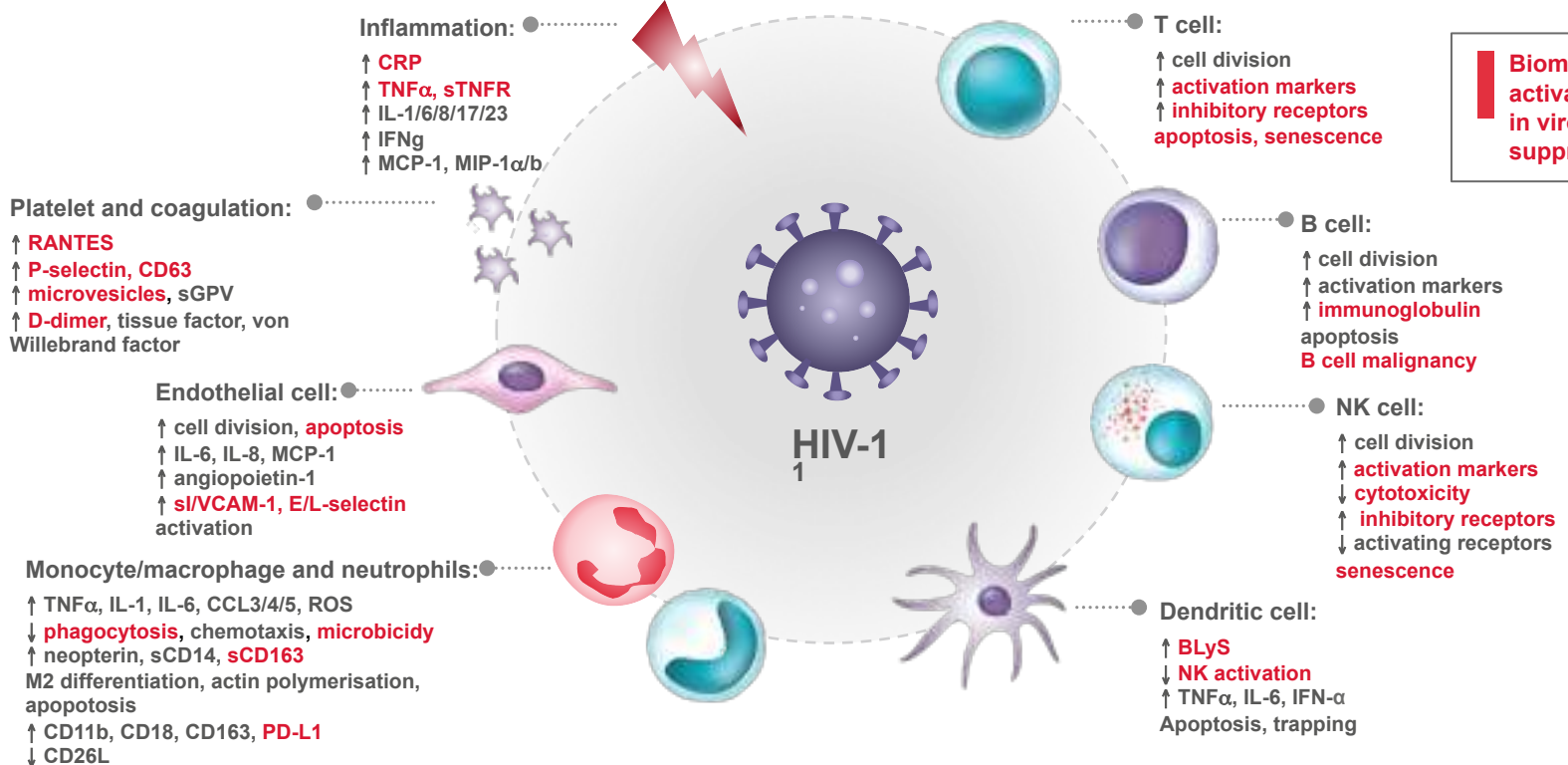


# HIV INFECTION IS ASSOCIATED WITH SYSTEMIC IMMUNE ACTIVATION THAT MAY PERSIST EVEN IN VIROLOGICALLY SUPPRESSED PATIENTS

Immune activation has been described in treatment-naïve and virologically suppressed PLHIV:<sup>1-3</sup>



# IMMUNE ACTIVATION IN PLHIV AFFECTS MOST OF THE IMMUNE SYSTEM COMPONENTS, RESULTING IN A VARIETY OF PATHOPHYSIOLOGICAL REACTIONS

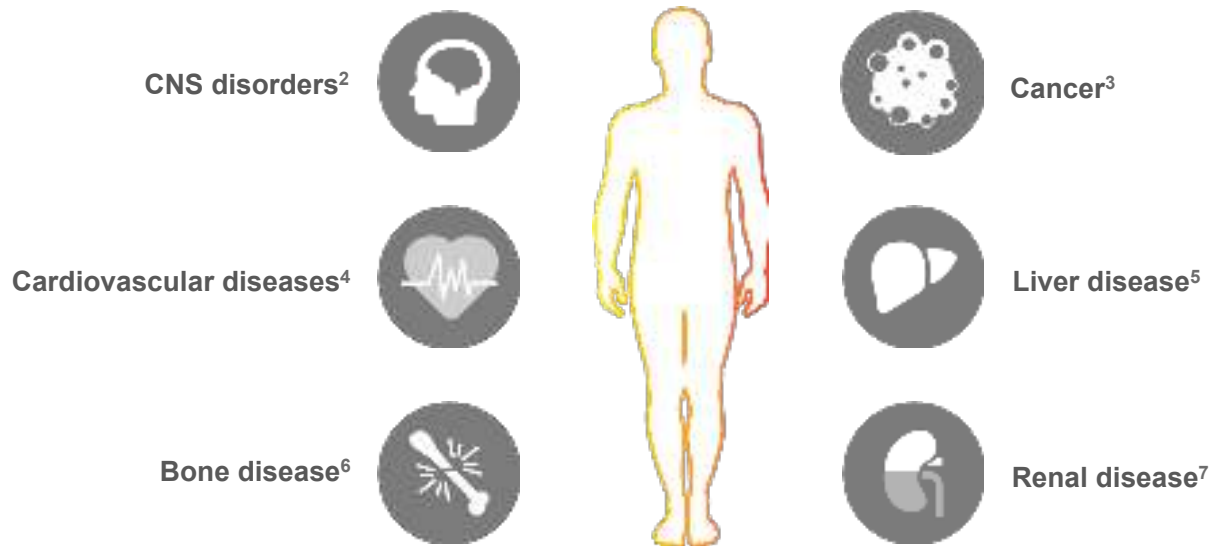


**Biomarkers of immune activation persisting in virologically suppressed PLHIV**

BlyS, B lymphocyte stimulator; CD, cluster of differentiation cells; CCL3/4/5, chemokine ligand 3/4/5; CRP, c-reactive protein; IFN, interferon; IL, interleukin; MCP-1, monocyte chemoattractant protein-1; MIP-1, macrophage inflammatory protein-1; NK, natural killer; PD-L1, programmed death-ligand 1; PLHIV, people living with HIV; RANTES, regulated on activation, normal T expressed and secreted; ROS, reactive oxygen species; sCD14/163, soluble cluster of differentiation 14/163; sGPV, soluble glycoprotein V; sTNFR, soluble tumour necrosis factor receptor; TNF- $\alpha$ , tumour necrosis factor- $\alpha$ ; VCAM-1, vascular cell adhesion molecule-1.  
 Younas M, et al. *HIV Med.* 2016;17:89–105.

# HIV-SPECIFIC RISK FACTORS FOR DEVELOPING COMORBIDITIES

PLHIV are more susceptible to developing comorbidities than individuals without HIV<sup>1</sup>



CNS, central nervous system; PLHIV, people living with HIV.

1. Guaraldi G, et al. *Clin Infect Dis* 2011;53:1120–6; 2. McArthur JC, et al. *Ann Neurol* 2010;67:699–714; 3. Nguyen ML, et al. IAC 2010, #WEAB0105; 4. Freiberg MS, et al. *JAMA Intern Med* 2013;173:614–22; 5. Towner WJ, et al. *J Acquir Immune Defic Syndr* 2012;60:321–7; 6. Brown TT, et al. *AIDS* 2006;20:2165–74; 7. Lucas GM, et al. *Clin Infect Dis* 2014;59:e96–e138.

## Olgu

- 57 yaş, kadın, Yurtdışı
- Eşi 'onulmaz' bir hastalık nedeniyle 10 yıl önce Rusya'da ölmüş
- İlk Teşhis Eylül 2019
- Transaminaz yüksekliği ve kilo kaybı (20kg/6ay) nedeniyle araştırılıyor
- Tedavi için ülkemize geliyor
  
- HIV virüs yükü: 313.600 kopya/mL
- CD4+ %8, Total CD4+ : 16/mm<sup>3</sup>
- CD8+%43, Total CD8+ : 86/mm<sup>3</sup>
- CD4+ /CD8+ = 0.18

	HIVRNA	CD4	CD4:CD8
1. Ay	< 40kopya/ml	266	0,2
3. Ay	negatif		
12. Ay	negatif	413	0.7
24. Ay	negatif	600	0.9