Abstract

HIV / AIDS is one of the most feared infectious disease of the late 20th century. HIV / AIDS is a multisystem disease but ophthalmic disease affects 45 – 70 % of patients with HIV infection. HIV can affect eye directly or indirectly by means of various opportunistic infections.

Aims and Objectives:
1. To study the ophthalmic aspects of Human Immunodeficiency Virus infected and acquired Immuno deficiency Syndrome patients.
2. To determine the prevalence and frequency of common ocular diseases in people living with HIV/AIDS.

Results:
A Total of 100 patients who are HIV Seropositive in various stages of the infection were evaluated comprising of 67 male (67%) and 33 female (33%) patients. Total No. of ocular findings in 69 patients are 126 (adnexal lesions - 44(44%), anterior segment - 32(32%), posterior segment - 43(43%), Neuro-ophthalmic manifestations - 7(7%). Isolated lesions were seen in 26 patients.

Discussion

In the present study conducted at Government General Hospital, Guntur a total of 100 patients who are HIV Seropositive in various stages of the infection were evaluated comprising of 67 male (67%) and 33 female (33%) patients. In this study most patients were in stage II (43%) followed by stage IV (37%) and stage I (14%) and stage I (6%). CD4+ T lymphocyte counts can be a reliable predictor of ocular complications of HIV infections. The present study had 4 patients with CD4 count less than 100 cells/µl and all these patients (100%) ocular manifestations with lesions in both the anterior and posterior segments synchronously. Lack of awareness and social stigma associated with the disease could be the reason for the delayed
presentation. 91 patients (91 %) a CD4 count of less than 400 cells/µL accounted for 43 adnexal lesions, 31 anterior segment lesions, 43 posterior segment lesions and 6 neuro-ophthalmic lesions. 33 patients have ocular lesions when the CD4 counts are less than 200 and 58 patients have less than 300 cells/µL. 5 cases have ocular lesions when the CD4 counts are more than 400 cells/µL. However, the study showed a positive association between ocular adnexal findings, ocular anterior segment findings, posterior segment and neuro-ophthalmic findings with the level of CD4 count.

FIGURE-1 - Right Eye Ocular Surface Squamous Neoplasia

FIGURE-2 - Both Eyes Ulcerative Blepharitis

FIGURE-3 - Left Eye Anterior Uveitis (Corneal edema & Hypopyon)

FIGURE-4 - Left Eye CMV Retinitis

FIGURE-5 - Left Eye – Cotton Wool Spots

FIGURE-6 - Left Eye Frosted Branch Angitis

FIGURE-7 - Right Eye Complicated Cataract

FIGURE-8 - Right Eye Optic Atrophy
CONCLUSION
1. Our challenges now in the management of HIV patients are to build on what has been achieved and to focus resources on the suitable communities in our sub-continent.
2. The goal of vision 2020 is to enable all persons to receive eye care and have the right to sight, which is one of their fundamental human rights.
3. Ocular findings were directly related to the severity of the disease and to the severity of immune suppression.
4. Eye care should be a part of medical care in the management of HIV/AIDS patients.
5. Children with HIV infection should have an ocular examination.
6. The cost of therapy and treatment of opportunistic infection is one of the major limiting factors in the management of ocular manifestation in AIDS patients in India.
7. HIV has a very varied ophthalmic spectrum and it is important to maintain a high level of suspicion for timely detection and treatment of ocular morbidity to give the patient a better quality of life.
8. Since no effective management is readily available, prevention through proper counseling appears to be the only defense against AIDS in India.

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