

## CORRESPONDENCE

### IgA DEFICIENCY ASSOCIATED WITH HUMAN IMMUNODEFICIENCY VIRUS INFECTION

In a survey of immunological alterations associated with human immunodeficiency virus (HIV) in 16 Brazilian women immediately after delivery, we found one with IgA deficiency.

The patient was a 27 year-old-woman who had just given birth to her second child, a boy with 3040g adequate for his gestational age. She reported having had multiple sexual partners, one of them was an intravenous drug abuser. She denied weight loss, persistent fever, recurrent diarrhoea, pneumonia or other kind of infection. Her physical examination showed nothing abnormal but a tattoo on her left inferior limb.

HIV infection was indicated by screening with the enzyme-linked immunosorbent assay (Abbott HIV-1 EIA recombinant), and confirmed by the Western Blot test (Biotech/Du Pont HIV-1). The quantitation of serum IgG, IgA was done by the single radial immunodiffusion method (Behring), and showed the following results: 26.84 g/l for IgG, 1.70 g/l for IgM and <0.05 g/l for IgA. Other laboratory tests were not available, as she did not return for follow up.

According to the Centers for Disease Control Classification system for the HIV infection<sup>2</sup>, she would be included in group II, that is, asymptomatic infection but already with immunological alterations, as noted by the elevated IgG.

Increased IgA concentration in asymptomatic HIV-infected subjects has been considered a predictor of evaluation towards AIDS<sup>3,5</sup>. On the other hand, the opposite situation, e.g., serum IgA deficiency, has also been detected associated to HIV infection in a few cases, in 2 children<sup>6</sup> and 2 adults<sup>4</sup>. The superposition of two independent pathologic conditions that is, IgA deficiency and HIV infections, is one possibility<sup>4</sup>. In Brazil, in fact, a survey among 11576 healthy people<sup>1</sup> showed an incidence of IgA deficiency of 1 in 965. As another possibility, IgA deficiency could be a consequence of HIV infection<sup>6</sup>. This latter hypothesis is in accord with a recent study in which a healthy child acquired IgA deficiency following an

Epstein-Barr virus infection<sup>7</sup>.

Prospective analysis of serum immunoglobulins in high-risk groups may help to evaluate the potential effects of primary IgA deficiency on the evaluation of HIV infection, as well as the possible incidence and importance of IgA deficiency secondary to HIV infection.

Department of Paediatrics - Maria Isabel de MORAES-PINTO  
Escola Paulista de Medicina Calil Kairalla FARHAT  
R. Napoleão de Barros, 715 - 9ª andar  
FAX: 55 11 571 3851  
São Paulo, BRAZIL

Department of Clinical Immunology  
University of Goteborg  
Goteborg, SWEDEN Lars A. HANSON

Department of Immunology Solange Barros CARBONARE  
Universidade de São Paulo Magda Maria Sales CARNEIRO-  
São Paulo, BRAZIL SAMPAIO

#### REFERENCES

1. CARNEIRO-SAMPAIO, M.M.S.; CARBONARE, S.B.; ROZENTRAUB, R.B.; ARAÚJO M.N.T.; RIBEIRO, M.A. & PORTO, M.H.O. - Frequency of selective IgA deficiency among Brazilian blood donors and healthy pregnant women. *Allergol. Immunopath.*, 17:213-216, 1989.
2. CENTERS for Disease Control - Classification system form human T-lymphotropic virus type III/lymphadenopathy-associated virus infections. *MMWR*, 35:334-339, 1986.
3. FLING, J.A.; FISCHER, J.R. BOSWELL, R.N. & REID, M.J. - The relationship of serum IgA concentration to human immunodeficiency virus (HIV) infection: a cross-sectional study of HIV-seropositive individuals detected by screening in the United States Air Force. *J. Allergy clin. Immunol.*, 82:965-970, 1988.
4. HEPNER, M.; JUNDT, J.; FISHER, E. & OWNBY, D.R. - IgA deficiency and AIDS. *J. Amer. med. Ass.*, 254:912, 1985.
5. LEFRERE, J.J.; FINE, J.M.; LAMBIN, P.; SALMON, D. & SALMON, C. - Increased IgA as a predictor of development of AIDS in HIV-infected subjects. *Clin.Chem.*, 34:1356, 1988.
6. NADAL, D.; HUNZIGER, U.A.; SCHÜPBACH, J.; WETZEL, J.C.; TOMASIK, Z.; JENDIS, J.B.;

FANCONI, A. & SEGER, R.A. - Immunological evaluation in the early diagnosis of prenatal or perinatal HIV infection. *Arch. Dis. Childh.*, 64:662-669, 1989.

associated with Epstein-Barr virus infection. *J. Pediat.*, 115:268-270, 1989.

7. SAULSBURY, F.T. - Selective IgA deficiency temporarily

Recebido para publicação em 25/11/1992  
Aceito para publicação em 12/2/1993