
NEUROSYPHILIS IN THE ACQUIRED HUMAN IMMUNODEFICIENCY VIRUS INFECTION: CLINICAL AND LABORATORY ASPECTS (Abstract)*. Dissertation. São Paulo, 1996.

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The purpose of this study is to review the literature regarding neurosyphilis and the possible alterations in its evolution and forms of manifestation when associated with the Human immunodeficiency virus (HIV). This study also comprises the analysis of 30 cases of neurosyphilis, out of which 9 were HIV seropositive, which were assisted in the Neurological Department of Hospital das Clínicas da Faculdade de Medicina da Universidade de São Paulo, in the period between January 1986 and September 1995.

Several case reports that emphasized the possibility of changes in the natural evolution of the infection induced by *Treponema pallidum* as a result of the immunodepression caused by the HIV were reviewed. The few studies with control groups, laboratory and experimental studies, in addition to the reviews of results of autopsies of coinfecting patients, were also reviewed. There is evidence in the literature of an increased incidence of infection by *Treponema pallidum* in our environment. However, it is not possible to affirm that an increase in frequency of neurosyphilis is occurring.

Neurosyphilis is an uncommon infection in HIV seropositive patients when compared to other infectious diseases of nervous system that affect these patients. Despite the epidemiological factors in common and the frequent reports of possible alterations in the evolution of neurosyphilis, when

associated with HIV infection, it is not possible to state that the forms of manifestation of neurosyphilis changed as compared to the classical forms.

The analysis of cases and of the literature indicated the predominance of meningovascular forms among HIV seropositive patients, and that parietic neurosyphilis and tabes dorsalis seldom occur among these patients.

KEY WORDS: syphilis, AIDS, neurosyphilis.

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