SEROLOGICAL TESTING IS NOT ALWAYS ENOUGH TO DIAGNOSE SECONDARY SYPHILIS IN HIV-PATIENTS: THE IMPORTANCE OF THE ORAL MEDICINE TEAM.

Abstract

In patients co-infected with human immunodeficiency virus (HIV), atypical serological reactions have been reported, due to the prozone effect when blocking antibodies, or when high antibody titers interfere with the assay. We report two cases of HIV-patients with asymptomatic oral manifestations, in which the secondary syphilis diagnosis implied a challenge: a 32-yr-old male presenting two red nodules located on the dorsum of the tongue, with unknown evolution time, and a 43-yr-old male who developed, one week after the consultation, a group of shallow ulcers and white-greyish mucous patches in buccal mucosa and lateral sides of the tongue. In both cases, VDRL and FTA-ABS were repeatedly negative (at different laboratories). Biopsies revealed histological features consistent with secondary syphilis, Warthin-Starry stain and anti-treponema staining exhibited the causal microorganisms and thus the diagnosis of secondary oral syphilis was confirmed. In HIV-patients, the diagnosis of syphilis should be enhanced by special studies, in order to ensure early treatment and prevent progression of syphilis infection.

Anaya-Saavedra Gabriela, Ramírez-Amador Velia, Reyes-Terán Gustavo

1 Oral Pathology and Medicine Posgraduate Program, UAM-X, Mexico City, Mexico
2 Center for AIDS Research and HIV/AIDS Clinic, Instituto Nacional de Enfermedades Respiratorias, Mexico City, Mexico

E-mail: gabyanaya@hotmail.com