



CHEMOTHERAPY FOR HIV- ASSOCIATED KAPOSI'S SARCOMA

N.Busakhala



What is it?

A malignant, multifocal systemic disease that originates from the vascular endothelium.

Clinical forms

Classic

Immunosuppression

Endemic African

Epidemic HIV-associated

Etiology

Infection with human herpes virus-8 (HHV-8), which is transmitted sexually or via blood or saliva.

(Andreoni et al. 2002).



HAART decreased KS

90% in the Department of
Dermatovenereology at Frankfurt
Univ Hosp , and the clinical course
of disease has improved
significantly

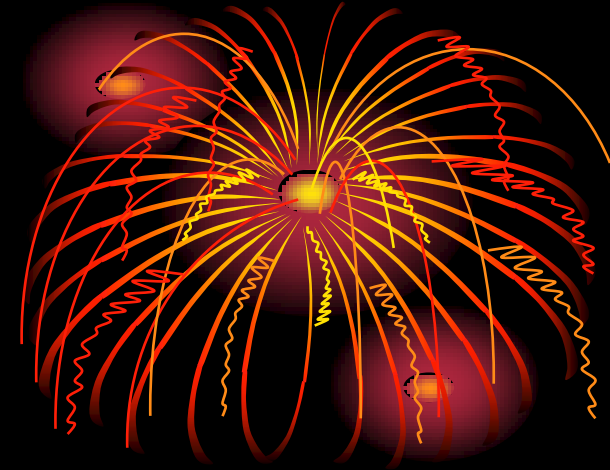
Signs, symptoms and diagnosis

In contrast to the classical KS found in older men, in whom the tumors usually occur on the lower legs and feet, HIV-associated KS does not have a preferential pattern of localization.

Staging



HISTOLOGY?



HHV-8, can be detected in tumor tissue by PCR. Antibodies are often detected months before the clinical manifestation of the tumor

Neutralizing antibodies

Are protective (Kimball 2004)

In patients with KS the titres of neutralizing antibodies are low.

Treatment

If the HIV viral load can be reduced (ideally below the level of detection) and immune reconstitution is achieved with increase in CD4 cell count, KS resolves except certain PIs:
Indinavir, Saquinavir, and Ritonavir



CHEMOTHERAPY

Liposomal anthracyclines are first line.

Paclitaxel or (ABV regimen) are second

RESPONSE	COMPLETE	PARTIAL	NONE	ID	TOTAL
Male	8	17	17	28	70
Female	3	12	4	9	28
Total	11	29	21	37	98

CD4 CELLS

- Males mean 222/ μl
- Females mean 160/ μl
- Does male gender predispose to KS?

RESPONSE	COMPLETE	PARTIAL	NONE	ID
AGE(YRS)	39 (27-60)	35 (24-48)	35 (28-52)	38 (24-57)
CD4	261 (35-581)	307 (35-573)	186 (6-513)	142 (6-531)

AGE

- No association here.
- CD4 CELL COUNT BELOW 200/ μ l, maybe.

Location

RESPO NSE	COMPL ETE	PARTIA L	NONE	ID
LOWER LIMB	4	6	10	8
PALATE	3		1	3
GENER ALISED	4	23	10	26

Side Effects and Courses

RESPONSE	COMPLETE	PARTIAL	NONE	ID
NEUTROPENIA	0	8	16	11
NUMBER OF COURSES	6 (4-8)	6 (4-10)	7 (3-9)	2 (1-5)

Predicting outcome

- NEUTROPENIA
- CD4 CELL COUNT $>200/\mu\text{l}$

ACKNOWLEDGEMENTS

- The oncology team
- Ampath
- Eldochem
- The patients

Thank you all for listening.

