

A STUDY OF CORRELATION BETWEEN CD4 COUNT AND TOTAL LYMPHOCYTE COUNT IN HIV INFECTED PERSONS IN SOUTHERN INDIA

SAGAR H¹ & G B DODDAMANI²

¹Senior Resident, Department of General Medicine, Gulbarga Institute of Medical Sciences, Kalaburagi, India

²Professor & HOD, Department of General Medicine, Gulbarga Institute of Medical Sciences, Kalaburagi, India

ABSTRACT

HIV infection can be monitored by laboratory and clinical markers of disease progression. In the absence of CD4 count, the use of total lymphocyte count has been advocated to predict CD4 count and to stage HIV disease. This study was undertaken to show whether the TLC accurately predicts a low CD4 count in HIV infected persons and its clinical correlation. The data for the study was collected from HIV positive inpatients and outpatients of a tertiary care hospital, from November 2013 to November 2015. A total of 50 patients were studied. All the patients were clinically examined and subjected to relevant investigations, including CD4 count and TLC. Fever, weight loss, anorexia, cough, lethargy, diarrhea, mouth ulcers and lymphadenopathy were the most common presenting symptoms. The majority of the patients had CD4 counts less than 350 cells/ μ l and were symptomatic. There was a highly significant correlation between CD4 count and total lymphocyte count. The WHO recommendation of TLC <1200 cells/ μ l as a surrogate marker for CD4 count <200 cells/ μ l, lacks sensitivity in our study. As opposed to the WHO cut off for TLC, we recommend TLC <1500 cells/ μ l as a surrogate marker for predicting CD4 count <350 cells/ μ l.

KEYWORDS: CD4 Count, Correlation, TLC, HIV & WHO

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