EXPEDIENCE WITH A NEW AGENT IN A CASE OF ACQUIRED IMMUNODEFICENCY SYNDROME (AIDS)

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SIR, - We wish to report our experience in the treatment of an AIDS case with an extract prepared from Nerium Oleander (Oleander).

A 9-year-old girl was admitted to our hospital because of weight loss, recurrent infections and severe diarrhea. She had been followed by a pediatric hematology clinic since the age of 2.5 for thallassemia major.

On examination, the patient had a very poor general condition and marked loss of subcutaneous fat. She was conscious and passive. He height was 112 cm and her weight was 12.5 kg (both less than the third percentile level). She had disseminated fungal infection in her mouth, severe diarrhea and pneumonia. The cardiovascular system, the urogenital system and the nervous system were normal.

The hemoglobin was 70%, the hematocrit 30%, the erythrocyte count 3 x 10^6 per cubic milimeter, the leucocyte count 1700 per cubic milimeter, the sodium 140 mEq/L, the potassium 3 mEq/L, the chloride 102 mEq/L. The serum aspartate aminotransferease (SGOT) was 312 U/L, alanine aminotransferease (SGPT) 137 U/L and gammaglutamyltranspeptidase (GGT) 401 U/L.

Sputum could not be obtained; the hemoculture remained sterile. Stool culture revealed Salmonella typhimurium infection; examination of the specimens from the mouth lesions revealed Candida albicans.

The absolute lymphocyte count was 400 per cubic milimeter, spontaneous rosetting 40%, CD 8 lymphocytes/total lymphocytes was 25%. Although both the helper and the supperssor populations had decreased in number, their ratio was not changed. The immunologist who conducted the analyses stated that the results are not very reliable because the patient is heypertransfused.

The IgG was 2890 mg/dL, the IgA 634 mg/dL and the IgM 939 mg/dL (1). The enzyme-linked immunoadsorbant assay ELISA was positive for anti-HIV antibodies and this finding was confirmed by the Western bolt test.

Based on our findings, we decided that the patient was a case of AIDS (2).

After the diagnosis, all antibiotics and antimycotics were terminated. Only, the fluid and the electrolyte balance was maintained and necessary blood transfusions were carried out. We started treatment with the extract prepared by Dr. Özel at a dose of 0.3 ml (i.m.) daily (3).

10 days after the first extract injection, the diarrhea came to an end, on the 12th day the lesions in the mouth disappeared, on the 15th day, the pneumonia resolved and there was no more weight loss.

We have been using this agent for three months. Although leucocyte counts of 3000-4000 per cubic milimeter were encountered, we do not think that the results are reliable because of the transfusions.

In last three months, none of the initial pathological findings appeared again except during a 10-day interval during which we had no extract to administer. Diarrhea appeared again during this interval but was cured after resumption of therapy. The patient gained 1200 gr in these three months.

Investigations conducted by Sandoz Laboratories revealed that the extract prepared by Dr. Özel has potent immunostimulant activity (4). Since there are only 37 sero-postive people in Türkiye and only one person (our patient) with AIDS, we could not use this extract on other patients. Randomized clinical trials for the efficiency of this agent in AIDS patients and AIDS Related Complex (ARC) patients are warranted.

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TREATMENT OF AIDS CAM, PEKÜN

ACKNOWLEDGEMENT

The Nerim Oleander extract was kindly mupplied by Dr. Ziya Özel.

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