

Bone Marrow Biopsy in HIV+ patients In Rio de Janeiro(Brasil)- A Histological, Clinical, Hematological and Microbiological study of 68 Cases.

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Objective: Study the histological findings correlating these with the clinical, hematological and microbiological data.

Methods: Bone marrow biopsies(BMB) from 68 HIV+ patients from 1985 to 1991 at the University Hospital(UFRJ)were studied. BMB were stained with H&E, PAS, Ziehl-Neelsen and Grocott. Forty-six bone marrow cultures(BMC)and 64 blood cultures were performed. The patients were classified according to CDC group.

Results: CDC group: II (2%), IVC(73%), IVCD(13%), IVD(12%). The indications for BMB were: fever(60%), lymphoma(16%), cytopenia(5%) and fever and cytopenia(19%). Twenty-nine percent showed neutropenia, 32% thrombocytopenia, 75% lymphopenia, 84% anemia. The BMB showed: 43% hypercellular, 41% normocellular and 16% hypocellular. Seventy-eight percent of the BMC performed were negative. The 9(22%) positive cases showed: M. tuberculosis in 5, MAI in 2 and C. neoformans and H. capsulatum in 1 case each. The histological findings were divided in 3 groups. a) Infections - 17 cases(25%): 9 tuberculosis, 2 MAI, 5 histoplasmosis and 1 criptococosis. Small poorly formed granulomas were identified in 13(19%) specimens. In 8 cases(12%) there was no evidence of granuloma, although stain for organisms were positive. In 7 cases where the BMB was positive for organisms the BMC was performed. In only 1 case special staining failed to show organisms but BMC grew C. neoformans. b) Lymphomas - 4 cases(6%): 2 Hodgkin's disease and 2 non-Hodgkin's lymphoma. c) Others 47 cases(69%). The most commons non specific findings were: myelodisplastic features in 45%, serous degeneration 35%, lymphoid nodules in 19% and granuloma without documented infection in 6%. Conclusions: 1)BMB was of little value in elucidating the cause of cytopenia; 2) BM histopathology was useful for the diagnostic of fever of unknown origin in 34%; 3) BMC and staining for organisms, even in absence of granuloma formation should be performed for all specimens. 4) tuberculosis was the most common infection.

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