



SEXUALLY TRANSMITTED INFECTIONS, HIV/AIDS

## CUTANEOUS MANIFESTATIONS OF THE IMMUNE RECONSTITUTION INFLAMMATORY SYNDROME (IRIS): A CASE-SERIES

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**Background:** Immune reconstitution inflammatory syndrome (IRIS) is an excessive inflammatory response to a preexisting disease or pathogen that results in clinical deterioration in HIV-infected patients after initiation of active antiretroviral treatment (ART). IRIS is classified as paradoxical or unmasking, according to the previous presence or absence of clinical manifestations from a given disease or pathogen. The most common organ involved is the skin, with a reported affection rate of 52%-78%.

**Observation:** The Center for Research in Infectious Diseases (CIENI) is a referral center for HIV patients in Mexico. A total of 109 patients with IRIS diagnosis were seen at the Dermatology Clinic between January 2008 and June 2018. The median age at diagnosis was 33.6 years (range:19-58); 104 (95.4%) were men; 103 (94.5%) were HIV-stage C3; 92(85%) were naive. Unmasking IRIS was present in 54%, while paradoxical IRIS was present in 45%. The average time between ART initiation and IRIS development was 81 days (range:15-330). Mean CD4+ Tcell nadir was 64 cells/µL (range:1-416), with an average count of CD4+ Tcell of 181 cells/µL (range:8-608), average CD8+ Tcell of 989 cells/µL (range:65-4275) and mean viral load of 1366 copies/mL (range:0-95472). Kaposi sarcoma was the most frequent etiology 58(53%), followed by herpes-zoster 20(18%), molluscum 12(11%), mycobacteria 6(6%), bacterial infections 4(3%), sweet syndrome 2(2%), herpes simplex 2(2%), papilloma-virus 2(2%), granuloma annulare in 1%, scabies in 1%, and cytomegalovirus in 1%. Three patients died from IRIS-related Kaposi sarcoma.

**Key message:** The most common features of HIV-infected patients under ART who developed skin-IRIS were low levels of CD4+ T cells, high HIV viral loads, and HIV-stage C3 at diagnosis. Physicians should suspect its presence in any HIV patient under ART who presents a new dermatosis or worsening of a previous one. Referral to a dermatologist should be undertaken for proper diagnosis and treatment.

