

3rd International Conference on **HIV/AIDS, STDs & STIs**

November 30 - December 02, 2015 Atlanta, USA

Neuro-meningeal Cryptococcosis and HIV/AIDS in Lubumbashi: Clinical and diagnostic expressions response

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The neuro-meningeal cryptococcosis is the second most dangerous opportunistic infection in HIV/AIDS infection. Diagnosis requires a very expensive technical platform where countries with very limited resources or poverty, infrastructure, delayed access to care compromise to get such diagnostic services. In this context, alternative techniques which are fast, less expensive and does not require sophisticated equipment for screening of cryptococcal antigenemia deserved to be introduced to the practitioners. In this descriptive study, the goal was to decipher the clinical, temperamental, and evolutionary aspect of the neuro-meningeal Cryptococcosis. The screening of cryptococcal antigenemia was the reference diagnostic method. The neuro-meningeal Cryptococcosis was diagnosed in 52 patients. The main clinical signs were headache, fever (100%) and lateralization signs (26.9%). Toxoplasmosis was the main pathology associated with 26.9%. The characterization of Cryptococcosis was: Immune reconstitution (40.4%), treatment failure to ART (32.7%) and Cryptococcosis as gateway to decision in charge of HIV (26.9%). The outcome was favorable to 52%, unfavorable to 44% and it has not been filled to 4% of cases. The results support a clinical profile dominated by headache, fever and lateralization signs. The screening of cryptococcal antigenemia must be interpreted according to the clinical and therapeutic evolution of diagnosis.

Biography

Mbayo Lukasu is pursuing his Post-graduate degree at the University of Lubumbashi in Occupational Health and Environmental Research in Medicine Department. He is a Clinician and Head of the Eligibility Committee to ARVs at Centre of Excellence in HIV/AIDS Care at the University of Lubumbashi. He has published two papers in press in the *Journal of Environmental Science and Engineering*, USA. In addition, he has participated in several scientific congresses locally and at an international level such as NIMR 28th Annual Joint Scientific Conference, and Julius Nyerere International Convention Centre in Tanzania.

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