Peripheral neuropathy in AIDS patients at Kenyatta National Hospital

Abstract:

Between June and December 1992 forty AIDS patients as defined by the CDC criteria, admitted to the medical wards of the Kenyatta National Hospital, were studied to determine the prevalence and pattern of peripheral neuropathy. Their mean age was 33 +/- 3 years with a range of 16 to 55 years. Clinical and laboratory assessment were carried out both to confirm peripheral neuropathy and exclude other causes of peripheral neuropathy apart from AIDS. All the patients had nerve conduction and electromyographic studies done. Eighteen patients were asymptomatic while fourteen had both signs and symptoms. The commonest symptom was painful paresthesiae of the limbs (35%) while the commonest sign was loss of vibration sense (60%). When symptoms, signs, and electrophysiological studies were combined, all the patients fitted the definition of peripheral neuropathy. The commonest type of peripheral neuropathy was distal symmetrical peripheral neuropathy (DSPN) (37.5%). PIP: In Kenya, physicians evaluated 40 AIDS patients admitted to Kenyatta National Hospital during June-December 1992 to determine the prevalence and types of peripheral neuropathy in AIDS patients. 75% were 21-40 years old. 18 (45%) of the 40 AIDS patients had symptoms of peripheral neuropathy. Symptoms included increased sensitivity to stimulation (43%), hyperpathia (15%), and muscle or limb weakness (13%). 26 AIDS patients had signs of peripheral neuropathy, especially impaired sense of vibration (60%). 14 of these patients had both signs and symptoms. Electromyographic and nerve conduction velocity revealed peripheral neuropathy in 16 (40%) AIDS patients. The types of peripheral neuropathy included distal symmetrical peripheral neuropathy (37.5%), polyneuropathy, and mononeuritis multiplex. When the symptoms, signs, and electroneurophysiological test findings were considered, all 40 AIDS patients had evidence of peripheral neuropathy.