Abstract

A retrospective review of autopsy findings and medical records in 33 HIV-infected children living in a Kenyan orphanage is described. Their ages ranged from 1 month to 18 years and median age at death was 71 months (range 7-156). Respiratory disorders were probably the primary cause of death in 21 (64%), in 19 (90%) of whom pyogenic parenchymal lung disease was detected. A presumptive clinical diagnosis of pulmonary tuberculosis had been made in 14 (67%); these children also had a history of recurrent acute lower respiratory tract infections (more than four infections/year). At autopsy, however, only one case of tuberculosis was identified (disseminated disease). *Pneumocystis carinii* pneumonia was not identified. Primary bacterial meningitis was detected in 33%. The associated findings included disseminated Kaposi sarcoma in two children and cryptococcal meningitis in one child. It is concluded that pyogenic infections are common causes of morbidity and mortality in HIV-1-infected African children. Management should include prompt treatment and, if indicated, prophylaxis for recurrent bacterial infections, and early evaluation and treatment of pulmonary tuberculosis.