

Spectrum of Vih & Aids Linked Diseases to Endocrinopathies

Editorial

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Purpose

Acquired immunodeficiency disease is a global illness that is the mechanism of endocrinopathy justifying a review of this aspect.

Keywords: AIDS; Endocrinopathy, Diabetes, Adrenal, Thyroid, Gonade

Main points

Adrenal gland is the first localization of endocrine disease during immunodeficient acquired syndrome. It is frequently infected by cytomegalovirus and can be affected by treatment by cetoconazole. ACTH Hypersecretion is frequently the fact of adrenal lesion. Adrenitis by cytomegalovirus is extremely frequent as indicated by many authors. Its etiologies can be bacterial sepsis, viral infection and hypotension is the main feature. Pneumocystis carinii can realize a thyroiditis diagnosed by fine needle aspiration biopsy. It has been described multiple neoplasms of smooth muscle and thyroid cancer during HIV

infection. Parathyroid alteration is relatively rare but must be known. Sexual dysfunction and its problems of mood alteration energetic appetite deficit during VIH infection have motivated testosterone treatment. Peripheral insulinresistance appears has the most severe metabolic complication of antiprotease treatment. This new lipodystrophic syndrome (characterized by insulinresistance, hypertriglyceridemia and fat redistribution), recently described in VIH infected patients realize metabolic abnormalities occurring at basal status in infected women independently of antiprotease treatment. Cardiovascular risk factors and risk of diabetes must be identified and blood glucose controlled in all patients receiving proteases inhibitors.

Perspectives

A management of endocrine glands is necessary in some cases of AIDS and better knowledge of their pathophysiology is the goal for better treatment.