Vasculitis and oral and genital ulcers: Behçet’s syndrome or HIV infection?

Sir,

Rheumatic diseases in the course of human immunodeficiency virus (HIV) infection are not common. Septic arthritis and psoriatic arthritis are the most frequent rheumatic syndromes described (1, 2). Vasculitis is being increasingly reported in the setting of HIV infection. Behçet’s syndrome is a disease with protan vasculitic manifestations that has been occasionally described in association with HIV infection (3-6). We present a case of Behçet’s syndrome or HIV arthritis, an association between the two diseases, but results were obtained in all cases (8). There were negative. Biopsy of the oral ulcers yielded a yellow fluid with 1840/mm³ WBC (6% polymorphonuclear, 15% lymphocytes, 79% monocytes). Crystals were not observed and a culture was negative. A skin biopsy was performed and microscopic examination showed a leukocytoclastic vasculitis. HIV serology (enzyme linked immunosorbent assay and Western blot analysis) was positive and CD4 lymphocytes were 174 mm³. Plasma HIV-1 RNA (Ambiclot, Roche Molecular System, Inc., Madrid) was of 357.476 copies/ml. Cultures from the genital ulcers were negative. Biopsy of the oral ulcers showed an eroded epidermis and lymphocytic and monocytic inflammatory infiltrates in the dermis. There was no evidence of malignancy or infection. An ophthalmological examination was normal.

Treatment with prednisone (40 mg daily) was begun and her symptoms improved quickly. Retroviral treatment with stavudine, amivudine and indinavir was added. When prednisone was tapered to 10 mg, the arthritis and oral and genital ulcers recurred.

The association of Behçet’s syndrome and HIV infection is rare. We performed a literature search (Medline 1985-1997) and found 4 other cases (3-6), whose characteristics are summarized in Table I. All patients fulfilled the international criteria for Behçet’s disease, except for the one reported in reference 5 (oral and genital ulcers) (7). The association of Behçet’s syndrome and HIV infection is controversial. The two diseases share many clinical features, namely arthritis, oral and genital ulcers and vasculitis. Interestingly enough, in a Spanish study HIV serology (ELISA) was performed on a cohort of 23 patients with Behçet’s disease and negative results were obtained in all cases (8). There are no epidemiological studies to suggest an association between the two diseases, but considering the cases reported in the literature, an association between HIV infection and Behçet’s disease may exist (3-6).

Table I. Characteristics of patients with Behçet’s disease and HIV infection.

<table>
<thead>
<tr>
<th>Reference</th>
<th>Age</th>
<th>Sex</th>
<th>Race</th>
<th>Transmission</th>
<th>Stage</th>
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<tbody>
<tr>
<td>Reference 4</td>
<td>33</td>
<td>male</td>
<td>white</td>
<td>heterosexual</td>
<td>B1</td>
</tr>
<tr>
<td>Reference 3</td>
<td>25</td>
<td>male</td>
<td>white</td>
<td>i.v. drug abuser</td>
<td>A2</td>
</tr>
<tr>
<td>Reference 5</td>
<td>69</td>
<td>male</td>
<td>white</td>
<td>heterosexual</td>
<td>A2</td>
</tr>
<tr>
<td>Reference 6</td>
<td>27</td>
<td>female</td>
<td>black</td>
<td>heterosexual</td>
<td>B3</td>
</tr>
</tbody>
</table>

References


Highly positive dsDNA antibodies in minocycline-induced lupus

Sir,

We read with great interest the cases reported by Knights et al. dealing with the condition of minocycline-induced arthritis (1). We would like to report the first case of minocycline-induced lupus associated with high titers of dsDNA antibodies.

A 22-year-old female was admitted in August 1997 for a four-week history of jaundice and abdominal pain. Her past medical history included facial acne for which she had been taking minocycline 100 mg daily for 2 years. Two weeks before her hospitalization, she stopped minocycline on her own initiative because her acne was improving.

On admission she had no fever, arthralgia, myalgia, nor cutaneous involvement (except for a slight facial acne). Her physical examination was normal. Laboratory studies revealed acute hepatic cytolysis (ALAT 12N,