COMPLETE REVERSAL OF AN ABERRANT TUMOUR BY KAPOSI’S SARCOMA IN A PATIENT WITH HIV USING HAART PLUS LIPOSOMAL DOXORUBICIN

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Introduction Kaposi’s Sarcoma (KS) is the most common HIV related neoplasm since the outbreak of the HIV epidemic in early 1980s. After the widespread use of highly active antiretroviral therapy (HAART) its incidence has declined drastically, but even today patients find themselves infected with HIV after developing KS.

Methods Case Report.

Results We report the case of a 36 years old, African-american, bisexual man who had his HIV diagnosis all over his body six months earlier. At first visit to our service he has presented with 70 skin lesions, 69 of them were violaceous and nodular, one oral mucous lesion and typical biopsy-proven gastric and sigmoid lesions. His CD4 count was 99 cells/mm3 and HIV viral load was 3412 copies/mm3 (log 3.533). His KS was classified as T1S1. The most disturbing finding, though, was an aberrant presentation of KS on his 2nd left pododactyl, affecting and disturbing the entire normal architecture of this toe, making it three times bigger than usual, displacing the fingernail, along with other nodular lesions on the dorsal face of the left feet. This lesion was very secretive, with a clear and foetid fluid. Patient had already started TDF/3TC/EFZ plus sulfamethoxazol-trimetoprim 1 week earlier and we prescribed liposomal doxorubicin, 20mg/m2 each 21 days, alongside with special dressings on this tumoral lesion thrice a week. He achieved undetectable viral load and proper dressings was successful to completely heal the 2nd pododactyl.

Conclusion A combination of HAART plus extensive chemotherapy and proper dressings was successful to completely heal an unusual aberrant tumour in a patient with disseminated KS.

PHARMACEUTICAL ASSISTANCE IN SYPHILIS PATIENT CARE – FROM PREVENTION TO SUCCESSFUL TREATMENT

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Introduction The expansion of Family Health in the City of Rio de Janeiro, as well as the structure that minimally requires one pharmacist per unit of Family Health Clinic, this professional has been often acting as protagonists in the success of the Treatment and follow-up. In this context, the pharmacist performance in all stages of syphilis care has become paramount for the success of the treatment, acting in all care stages.

Methods Prevention - opportunist the patient’s visit to the pharmacy to identify individuals risk and eligible for actions as pharmaceutical consultation or a educational group, as responsible for the custody and control of the syphilis. Rapid test allows the knowledge of the cases even before the dispensation. Surveillance and notification of public health problems - as soon as the knowledge of the diagnosis, by rapid test result or the demand for the dispensing of the medicine, is also responsible for that notification, and it is up to him to make that request to the professional who made the diagnosis.