

## **Enteric cryptosporidiosis in pediatric HIV infection.**

Guarino A; Castaldo A; Russo S; Spagnuolo MI; Canani RB; Tarallo L;

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**BACKGROUND:** Enteric cryptosporidiosis is a frequent problem in adults with human immunodeficiency virus (HIV) infection, but little is known of its features in children. The aim of this study was to investigate the incidence and the clinical features of cryptosporidiosis in HIV-infected children. **METHODS:** Thirty-five children with symptomatic HIV infection were screened every 2 months, and in case of diarrhea, for the presence of *Cryptosporidium*. Intestinal function tests were performed, and the fecal osmotic gap was measured in children with cryptosporidiosis. **RESULTS:** Seventy episodes of diarrhea occurred in 16 children in a median period of 17 months. *Cryptosporidium* was detected in five cases, all with full-blown acquired immunodeficiency syndrome. Cryptosporidiosis was significantly more protracted than any other form of diarrhea and was associated with dehydration and severe weight loss. Intestinal function was not modified during cryptosporidiosis. Osmotic gap values were consistent with secretory rather than osmotic diarrhea. In four cases, recovery was observed without specific treatment. **CONCLUSIONS:** Enteric cryptosporidiosis is a severe problem in advanced stages of HIV infection. It does not induce intestinal malabsorption. It induces diarrhea of secretory type. Recovery may be observed independently of therapy.

\*Cryptosporidiosis/EPIDEMIOLOGY \*Diarrhea/PARASITOLOGY \*HIV Infections/COMPLICATIONS

\*Intestinal Diseases, Parasitic/EPIDEMIOLOGY

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