

Infectious Diseases and STD-AIDS

April 26-27, 2018 Rome, Italy

Marcondes Juliana Scarlatte et al., J Transm Dis Immun 2018 Volume 2 DOI: 10.21767/2573-0320-C1-003

MAGNETIC RESONANCE IMAGING OF CHAGASIC MENINGOENCEPHALITIS In hiv patients

Marcondes Juliana Scarlatte, Pinheiro Evelyn Albertini, Melo Homero Jose de Frarias and Junior Luiz de Abreu

Sao Camilo University Center, Brazil

Introduction: Acquired Immunodeficiency Syndrome is a disease caused by the Human Immunodeficiency Virus (HIV), with a major involvement of the Thymus Cluster of Differentiation-CD4+ lymphocytes, leaving the organism at the mercy of opportunistic infections such as renal failure, degeneration of the central nervous system, microorganisms and parasites. As a focus of one of the parasitic opportunistic infections, American trypanosomiasis can be recognized, with the etiologic agent Trypanosoma cruzi, which has several mechanisms of transmission. Immunosuppression in patients previously infected by the parasite leads to the reactivation of the chronic disease, with manifestations of exacerbation. HIV-infected individuals often demonstrate secondary involvement of the brain by different infectious agents, and Chagas disease is known as chagasic meningoencephalitis. In this condition, the widening of the turns and narrowing of the brain grooves occurs, being observed less assiduously, in the brainstem and in the cerebellum. Images provided by magnetic resonance imaging (MRI) are better able to demonstrate structures in the brain with minimal changes by exploring the regional and functional anatomy of the brain in remarkably accurate details in most diseases. Among the articles studied, the most common alteration was a hyper signal lesion in TIME (T) 2 and fluid attenuation inversion recovery (FLAIR) and hypo signal weights in T1 weights in the parieto-occipital region.

Objectives: The objective is to demonstrate chagasic meningoencephalitis by MRI in seropositive patients.

Methods: A bibliographical survey was conducted in the Medline, PubMed and Academic databases in 2015. The selection criteria used were articles published in Portuguese and English.

Results: Among the articles surveyed, four emphasized that the most common alteration was a hyper signal lesion in T2 and FLAIR and hypo signal weights in T1 weights in the parieto-occipital region.

Conclusion: Imaging diagnosis, particularly MRI, is the method most used in clinical practice to evaluate meningoencephalitis in seropositive patients because it presents a specific radiological signal.

Biography

Marcondes Juliana Scarlatte has completed her graduation by Sao Camilo University Center (2016), qualified in imaging. Postgraduate in Biomedicine in Diagnostic Imaging by Albert Einstein Israel Institute for Teaching and Research (2018). Currently works at CURA Image and Diagnosis.

juh_scarlatte@hotmail.com