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**Cerebrospinal fluid as marker to determine neurological manifestations in HIV patients****M Srinivasa Rao<sup>1</sup> and K Sai Krishna<sup>2</sup>**<sup>1</sup>Acharya Nagarjuna University, India<sup>2</sup>Guntur Medical College & Govt. General Hospital, India

The cerebrospinal fluid (CSF) is a dynamic, metabolically active substance that has many important functions. It is invaluable as a diagnostic aid in the evaluation of inflammatory conditions, infectious or non-infectious, involving the brain, spinal cord, and meninges as well as in CT-negative subarachnoidal haemorrhage and in leptomeningeal metastases. Cerebrospinal fluid analysis was helpful in differentiating Cryptococcal meningitis from tubercular and non-specific meningitis/encephalitis. The study was carried out in-patients admitted in medicine, neurology and skin and STD wards in KIMS General Hospital, Amalapuram with symptoms screened and confirmed to have nervous system, HIV-1 and/or HIV-2 infection (seropositive) by two HIV test systems (Rapid / ELISA / Western Blot) were enrolled if they met the inclusion criteria. CSF analysis was done in 30 patients. It was not done in 5 patients as it was contraindicated and in 4 patients consent could not be obtained. It was found normal in 2 patients. Cell counts ranged from 00 to 1350 with mean of 140/microltr. Most cases had predominant lymphocytes. Cells >50 per cumm were seen in 10 cases (30%); 7- CNS TB, 3-Cryptococcal meningitis. Protein level ranged from 19 mg/dl to 800 mg/dl with mean of 184 mg/dl (Normal<50), Protein >100 mg/dl was seen in 20 cases (55%); 11- CNS TB, 6- Cryptococcal meningitis. CSF analysis can conclude the diseases that are associated with elevated numbers of various cells with respect to the particular disease.

**Biography**

M Srinivasa Rao has completed his PhD in Biotechnology, presently he is working as Active Researcher in the Department of Biotechnology, Acharya Nagarjuna University, Guntur, Andhra Pradesh, India.

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