



HERPES LABIALIS AND GENITALIS IN A HIV POSITIVE PATIENT

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A 22-year-old man who was HIV positive, presented with recurrent oral and genital lesions simultaneously.

Key Words: HIV, Herpes labialis, Herpes genitalis

Introduction

Recurrent herpes genitalis as well as herpes labialis is one of the common infections encountered in any Dermatology and Venereology OPD. But both these lesions appearing simultaneously in same patient is unusual. We are presenting a case of simultaneous occurrence of both herpes labialis and herpes genitalis in a HIV positive patient.

Case Report

A 22 - year - old promiscuous unmarried HIV positive man presented with oral and genital ulcers of 10 days duration. Appearance of oral lesions was preceded by fever for 5-6 days. There was no history of drug intake before appearance of the oral lesion. There was history of multiple unprotected sexual contact with commercial sex workers in the last 3 years. Since last one year patient had been suffering from recurrent genital lesions which were diagnosed as herpes genitalis and was treated with acyclovir ointment. There was no history of weight loss, chronic diarrhoea or cough with expectoration, however he complained of generalised weakness since last 2-3 months. Examination revealed multiple small superficial erosions on the lips and a few on the buccal mucosa and tongue. Submandibular lymph node was enlarged and mildly tender. Multiple grouped erosions and intact vesicles were present on the glans penis. Inguinal nodes were enlarged and mildly ten-

der. There was no other lymphadenopathy. Systemic examination was within normal limits. VDRL was non-reactive and routine investigations were within normal limits. He was tested positive for HIV 1 and 2 by ELISA and card test one year back.

Discussion

Our patient presented with recurrent genital lesions and oral ulcers. There was no ophthalmic complaints. Behcets syndrome would have been a closes differential diagnosis, but presence of intact vesicles pointed towards herpes. Herpes labialis and herpes genitalis are quite common infections in general population, but simultaneous occurrence of both these conditions is rare. Though HSV 1 and 2 are structurally closely related, infection with one type and strain of HSV does not protect against superinfection with other type of HSV. Patient with recurrent herpes are still susceptible to the infection when inoculated at other sites even with their own virus.¹ Unfortunately the viral studies are not available in our set up otherwise it would have been interesting to find out the types of HSV at both these sites, whether it is the same virus or different types. It could be two different herpes infections, i.e. HSV 1 and 2 or it could be the same virus as genital herpes with autoinoculation in labial area. In the absence of viral studies it is difficult to comment. Patient responded to oral acyclovir 200 mg five times a day for 7 days.

References

1. Nagington J, Rook A, Hight A. Virus and related infections, In: Textbook of Dermatology, 4th edition, edited by Rook A, Wilkinson DS, Ebling FJG, et al, 1986:686.

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