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THALIDOMIDE FOR AIDS PATIENTS WITH TUBERCULOSIS

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Some of the symptoms of tuberculosis are associated with *tnf alpha* release which has been shown to increase *in vitro* hiv replication. Thalidomide previously has been shown to inhibit the *tnf alpha* release and to decrease *in vitro* hiv replication.

Objectives: to evaluate the effects of thalidomide on the clinical symptoms of tuberculosis aids patients (fever and weight loss).

Methods: a double-blind, randomized, placebo controlled pilot study was conducted in a sample of 10 aids patients with tuberculosis (5 in each arm). Patients were randomly assigned to receive placebo or thalidomide for 28 days, concomitant with RMP + INZ + PZD. Thalidomide doses were 300mg (first week), 200mg (second week), and 100mg (third and fourth weeks). Tuberculosis was the aids defining illness in all patients. Patients were observed in the inpatient unit for at least 7 days, clinical exam and laboratory tests were done to monitor ize, neurologic, hematologic, hepatic, and renal function toxicity at base line, second week, and at the end of the study.

Results: all but two patients (thalidomide arm) completed the study. The two patients who failed to complete the study received at least 15 days of thalidomide. Means weight gain was 4.6 kg in thalidomide group and 2.2 kg in placebo group. The time for defervescence was 7.8 days for the thalidomide arm and 14 for the placebo. Peripheral neuropathy, rash, and transitory granulocytopenia were equally distributed within the two groups. Constipation was referred by one patient in the thalidomide group.

Conclusions: in spite of the small sample size, our results suggest that thalidomide associated with standard tuberculosis treatment may be efficent to decrease fever and weight loss in aids patients with tuberculosis.

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