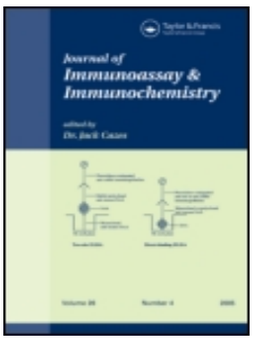

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BASELINE CD4 T CELL LEVEL PREDICTS RECOVERY RATE AFTER INITIATION OF ART IN HIV INFECTED NIGERIANS

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□ *The most characteristic immunologic disorder in HIV infection is the progressive loss of CD4 T lymphocytes, thus, it remains the most important and commonly used marker for monitoring of immune status of HIV-infected individuals. This study monitored CD4 T lymphocyte cell dynamics among HIV patients on ART, and consequently defined an optimal baseline level required for enhanced ARV treatment. Ninety-eight (M = 33; F = 65) out of 106 consenting HIV-infected ARV-naïve patients enrolled and monitored for 24 months were considered in the analysis. The patients were classified into four groups based on baseline CD4 T lymphocyte cell levels, and specific parameters were evaluated at interval. Median CD4 T lymphocyte increased from 114 (Range: 6–330) at baseline to highest 357 (Range: 15–1036) cells/μL at 18 months of therapy. Fifty (51.0%), 58(59.2%), 75(76.5%), 69(70.4%), 63(64.3%), and 69(70.4%) doubled their preceding CD4 levels during the 3rd, 6th, 9th, 12th, 18th, and 24th months of ART, respectively. Maximum 337, 302, 360, and 475 cells/μL of blood were attained by groups commenced on ART with baseline CD4 ≤ 50, 51–100, 101–200, and 201–350 cells/μL of blood, respectively. The results show that higher baseline CD4 T lymphocyte cell level correlates with enhanced restoration and plateau after commencement of ART.*

Keywords ART, baseline CD4 cell, generic, HAART, Nigeria

INTRODUCTION

The most characteristic immunologic disorder in HIV infection is the progressive loss of CD4 T lymphocytes, which are the primary target cells for HIV infection.[1] Specifically, dysfunction and destruction of CD4 T lymphocytes lead to severe immune-depression observed in patients with HIV or AIDS.[1] Thus, CD4 T lymphocyte level remains the most important and most commonly used marker for monitoring of immune status of

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