71

Immunologic Evaluation in PGL Patients with Ribavirin Treatment An Open Multicentric Trial. Vazquez V.E.*, Campos L.P.*, Soler C.C.**, Ruiz I.R.***, Garibay V.M., Fortuño C.V. *Unidad Investigacion Biomedica de Occidente, IMSS, Guadalajara, Jal. Mexico, **U. Investigaciones Biomedicas, UNAM, Mexico City, Mexico. ***H.R. 20 de Noviembre, ISSSTE, Mexico City, Mexico.

Objective: To evaluate if treatment with oral Ribavirin (Rb), 1200 mg per day during 24 weeks, prevents disease progression to Stage IV in patients in Stage III (CDC classification). **Method:** Between May 1989 and June 1990, 51 HIV infected patients in Stage III of disease (CDC classification), participed in an open, non-randomized trial. Patients were of both sexes, ages 18 to 35 years, negative for HIV-1 antigen, and with CD4 count 200-500/mm^3. At baseline, informed consent, clinical history and blood samples were obtained for hematology, blood chemistry, urinalysis and serological tests (P24, P41, antibodies, CD4 and CD8 counts, HIV-1 antigen). The tests were repeated on weeks 8, 16, 24 and 28. **Results:** Five of 44 evaluable patients progressed to AIDS, the other 39 patients were asymptomatic by the end of the study. Compared to baseline, an increase in CD4 cells was observed on week 24 ($p < 0.001$), followed by a decrease on week 28, after Rb was stopped. CD4/CD8 rate remains unchanged during Rb treatment. A slight decrease (within normal limits) in hemoglobin and hematocrit values was observed. **Conclusion:** Our study shows a beneficial effect of Rb in PGL patients, no clinical or laboratory evidence of disease progression observed in 39 PGL patients, no side effects were observed during Rb treatment.

72

Comparative Clinical Trial of Ribavirin and Zidovudine in HIV-Infected Pediatric Patients. Mexican Experience. Gorbea M., Perez G., Paquentin J., Fortuño V. Hospital La Raza, Infectology Medical Center, IMSS, Mexico City, Mexico.

Objective: To compare the efficacy and safety of two antiretroviral agents in HIV-infected children. **Material and Methods:** Randomized, single blind, comparative clinical trial performed in 20 HIV-infected children (stage P2 of CDC classification), ages between 18 months to 15 years. Ribavirin (RB) was administered to 9 males and 1 female, at a dose of 30 mg/kg/day, Zidovudine (AZT) was given to 10 males, 20 mg/kg/day, both for 10 months. There were no statistically significant differences between groups at baseline. All patients were anergic to 8 Ag of delayed-type skin test, using the standard Merieux test panel. **Results:** Both treatments achieved similar results. Weight and height remained constant. Hepatosplenomegaly and lymphadenopathy improved. P24 antigenemia was not modified. Although CD4+ cells showed percentage increases, the total lymphocyte counts declined slightly between weeks 4 and 8. The immunoglobulin values were normal. By week 8, 3 of 8 skin test antigens were positive. Three patients were readmitted to the hospital, two from the RB group because of diarrhoea, and one AZT patient with oral thrush. One RB patiend died during the study in hypovolemic shock unrelated to HIV infection or to treatment. No clinical or laboratory adverse effects to RB were observed. Two AZT patients had cephalea and alopecia. **Conclusions:** As with AZT, RB treatment of HIV-infected children improves survival. However, tolerance to RB is better and it has a lower cost.