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Evaluation of Ribavirin in Patients with Generalized Lymphadenopathy Syndrome. 76 Weeks of Follow-Up. Vazquez V.*, Illescas R.M.**, Campos P.*, Torres B.*., Garibay M. *Unidad Investigaciones Biomedicas de Occidente, IMSS, Guadalajara, Jal., Mexico. **Hospital "20 de Noviembre", ISSSTE, Mexico City, Mexico.

OBJECTIVE: Evaluate if treatment with 1200 mg of Ribavirin (RB) daily for 76 weeks is useful to avoid disease progression to stage IV in patients with stage III of the CDC classification. **METHODS:** Patients with stage III of the CDC classification, who were included in an open non randomized trial, and finished 44 weeks of treatment were invited to continue treatment. After patient acceptation samples were taken for haematological, chemical, urine and serological tests (CD4, CD8, CD4/CD8 ratio) at weeks 52. 60, 68 and 76. Informed consent was obtained and patients received RB capsules 1200 mg daily for 32 weeks more. **RESULTS:** Of the 15 patients who ended 44 weeks, 15 accepted to continues in treatment. 2 patients from the 15 original group abandoned study. CD4 cells at week 76 showed an increase when compared with basal values (week 0, mean 475.75 s.d.$\pm$48.59; week 76, mean 500.62 s.d.$\pm$214.83 p.n.s.), CD4/CD8 ratio decreases at week 76 (week 0, mean 1.25 s.d. $\pm$0.49; week 76, mean 0.86 s.d. $\pm$0.31 p = 0.031). Heamatological examinations showed a slight decrease in haemoglobin and haematocrit but these changes remains between normal values and were without clinical significance. One patient died during treatment and was considered as a failure since death was due to P. carinii pneumonia. **DISCUSSION AND CONCLUSIONS:** Our study shows a benefical effect of RB in LGP patients since 12 had no clinical or laboratory evidence of progression to AIDS after 76 weeks of treatment.

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Improvement of Health Status of HIV Infected Individuals Treated with Solutein™. D. F. Smee[1], J. K. Yamamoto[2], D. R. Warden[3], J. C. Diaz[3], and A. Glanville[3]. [1]Utah State University, Logan, Utah, [2]University of California, Davis, California, and [3]Zenith Corp., Ogden, Utah USA.

Solutein is a composite of three venoms from the eastern water moccasin, Thai cobra and many-banded krait. Because cobra venom was found to have antiviral activity in the early 1950s, and the krait and water moccasin venoms have neurological and hematological properties, respectively, Solutein was evaluated on a long term basis (since 1986) to treat HIV infected individuals at a clinic in Tijuana, Mexico. Blood work was performed either at UC Davis or clinical laboratories in Los Angeles. Solutein was found to inhibit reverse transcriptase activity in a manner similar to heparin. Patients were started on a very low dose of Solutein, which was gradually increased as the patient developed immunotolerance. This protocol was not toxic and the only adverse reactions were soreness at the injection site during the first 1-2 months. No adverse effects on 30 blood parameters were noted. Patients responded by showing an increase in energy level, appetite, mental alertness, sleep pattern, and quality of life. Three of 4 patients analyzed showed a complete suppression of p24 antigen in serum after 3 months. After 1 month on Solutein, the body's immune system actively fought and reduced lymphadenopathy, which in some patients the effects were striking. T4+ cell counts stabilized and/or increased and T8+ cell counts went down in some patients, resulting in improvements in T4/T8 ratios. Patients on concurrent AZT/Solutein therapy did not do well, suggesting that the toxic effects of AZT override the immunological effects of Solutein. Our current hypothesis based upon reports of similar effects of repeated vaccination with typhus and avian parainfluenza virus antigens is that non-specific vaccination with certain substances may benefit HIV infected individuals.