ABSTRACT

Background. Human immunodeficiency virus (HIV) infection is the etiology of acquired immune deficiency syndrome (AIDS). HIV targets human’s CD4+ lymphocyte to facilitate its replication, causing the depletion of CD4+ count. This results in immunodeficient condition in which the immune system is compromised. Recurrent aphthous stomatitis (RAS) is an ulcerative inflammation which occurs periodically in the oral cavity with uncertain etiology. This disease could happen to anyone in all age and gender group. Many predisposing factors such as immunocompromised condition can induce the exacerbation frequency and severity. For HIV patients, the occurrence and recurrence of RAS may further compromise the patient’s immune system and increase the progressivity of AIDS. RAS is associated with autoimmune response, in which some proinflammatory cytokynes (TNF-α and IL-1β) take role. In HIV patients, the increasing of CD8+ count can happen by two means, CD4+ count decreases and TNF-α increases. Increasing CD8+ count will destroy the epithelial layer. In transgender with HIV infection, fatigue is apparent and will affect IL-1β polymorphism which can also cause RAS.

Purpose. This study aimed to reveal the prevalence of RAS in HIV/AIDS transgender in Surabaya. Method. Analytic observational study with cross-sectional total sampling method on 108 patients. Result. The prevalence of RAS in HIV/AIDS transgender is 15 out of 45 subjects (33.3%). CD4+ count depletion is not significantly relevant to the occurrence of ulcer. Conclusion. HIV has no significant relation with the occurrence of RAS. People with HIV infection is more susceptible to RAS.

Keywords: human immunodeficiency virus, recurrent aphthous stomatitis, transgender