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Cognitive Functions Impairment Reflection Immunologic Status of People with HIV Positif

Abstrak :

ABSTRACT

Comorbidity of psychiatric disorder has been linked with HIV (human immunodeficiency virus) since the early epidemics of AIDS (acquired immunodeficiency syndrome), and until recently there have been many literatures focusing on psychiatric problems in relations with HIV seropositive patients (Morrison 2002). Among these patients, 72.3% have psychiatric problems (Cohen et al. 2002). The existing psychiatric problems may exist as dementia, delirium, anxiety, adaptation disorder, depression, substance abuse, and even suicide (Saddock 2003). Data from AIDS treatment house in the United States showed that 65% of the patients had psychiatric disorder other than substance dependency and neurocognitive disorders. If the last two diagnoses are included, the prevalence rate becomes 99.8% (Cohen 1998). In addition, regardless of its correlation with disease progressiveness, the presence of psychiatric disorder may influence life quality, social function, and general health condition of the patients with HIV seropositive (Sherbourne et al 2000). The identification of psychiatric disorders, particularly the disturbance of cognitive function in HIV seropositive patients, becomes important since it has correlation with

HIV seropositive progressiveness to become AIDS and to maintain the patients' quality of life. This study examined cognitive function of 34 patients with HIV seropositive in Dr Soetomo Hospital, Surabaya, and correlated it with their immunological status. We found 22 samples in MMSE test who had cognitive disorder (64.7%), and the remaining 12 samples were in normal condition (35.3%). Short memory disorder was found in 19 samples (55.9%) and the other 15 samples were normal (44.1%). The reduction of CD4 immunological status to less than 200 was found 23 respondents (67.6%) and the others had CD4 of more than 200. Significant correlation was found between cognitive function disorder and immunological status of individuals with HIV seropositive ($p = 0.021$). The cognitive function disorder may reflect immunological status of HIV patients. Therefore, regular testing of cognitive function may be a practical and cost-saving marker of CD4 reduction. Studies using longitudinal design are suggested to find correlation between cognitive function disorder and immunological status with period of cognitive function restoration after receiving ARV. Case-control studies should also be performed to find causal correlation and correlation of each MMSE test items with the decrease of immunity to create a more sensitive measuring tool and to identify early symptoms of cognitive disorder.

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Keywords: cognitive function, immunity status, HIV/AIDS

Dokumen Artikel Penelitian ini milik penulis/peneliti yang diserahkan sebagian (judul dan Abstrak) hak ciptanya kepada Universitas Airlangga untuk digunakan referensi dalam penulisan artikel ilmiah.

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