

Intestinal parasitic infections in Thai HIV-infected patients with different immunity status

ABSTRACT

In case of a tropical epidemic, it is important to focus on the non-opportunistic intestinal parasite infections that are prevalent among HIV-infected patients who present with diarrhea.

INTRODUCTION

The incidence of stress-induced gastroduodenal erosions is a common observation pattern among critically ill patients, but it is the level of clinically relevant complications that should be considered when determining which patients should receive prophylaxis. Platelet perforation, hemodynamic instability, and bleeding required for transfusion are clinically significant complications. The absence of published studies documenting these complications limits the conclusions that can be drawn from a large body of literature. Depending on the severity of illness or injury, and concurrent or underlying disease states, clinically important bleeding has yielded inconsistent results in studies. Due to the controversies surrounding previous studies on stress ulcer prophylaxis, Cook et al conducted a meta-analysis of randomised trials. The study revealed that there was no well-defined agent for prophylaxis based on efficacy considerations, but it was suggested that sucralfate could have unintended benefits due to its association with a lower incidence of pneumonia compared to histamine-blocking drugs. The largest randomized study on stress ulcer prophylaxis was reported by Cook et al within 2 years, following the publication of this meta-analysis. The study found that intravenous ranitidine 50 mg/8 h (with dose reduced for renal dysfunction) resulted in a lower incidence of clinically important bleeding than sucralfate 1 g/6 hrs (relative risk 0.44, 95% confidence interval 0.21-0.92, $P = 0.02$), and there was no significant difference between the medications with respect to pneumonia or mortality. The Section of Pharmacy and Pharmacology of the Society of Critical Care Medicine conducted a survey for its members who are well-versed in medications used in the critical care area. This survey was conducted by members of their Research Committee through email, following the publication of important results. In order to assess prescribing practices, the survey was designed to reflect recent publications on stress ulcer prophylaxis. The survey also aimed to evaluate institutional evaluations of this therapy. This survey aims to provide clinicians with insights into how their prescribing and evaluation practices compare to those of other institutions, and may also uncover institutional practices that are not well-researched among researchers.

CONCLUSION

It was shown that Dictyostelium cells exposed to hypertonic conditions exhibit significant internal acidification, a depletion of internal NTP pool, downregulation of vesicular mobility, and inhibition of fluid-phase endocytosis and exocytosis. Furthermore, we demonstrate that cytosolic acidification can act as a signal mediator by inhibiting fluid-phase endocytosis.