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Attempts have been made by the authors to present the material in the book as completely and up-to-date as possible at the time of publication. However, there are no warranties that the information provided is totally devoid of errors or will remain accurate since new information may become available in the face of changes from new research and clinical experience in the field of HIV medicine. Readers are advised to keep up with new information on the subject matter.

Preface

Sub-Saharan Africa bears the greatest burden of paediatric HIV disease. This atlas is the first of its kind with photographs of varying skin, systemic conditions and opportunistic infections in the HIV-infected paediatric patient. The aim of the atlas is to illustrate conditions which were captured among paediatric patients presenting to HIV clinics and wards in an African setting. Some of the conditions are commonly seen in HIV-infected children while some are not specific to HIV.

The atlas is presented in two parts. The first part of the atlas illustrates and discusses dermatological conditions and the second part non-dermatological diseases in paediatric HIV infection. Paediatric HIV in general and HIV-associated paediatric dermatology in particular, is a grey area for many health care workers.

There is a saying that “One picture is worth a thousand words”. Most published material on HIV focuses on adults and often has limited information on paediatric HIV and is deficient of pictures for illustration. We hope that this atlas with its illustrations will facilitate recognition and management of skin and non-skin conditions seen in HIV-infected children. To enrich the atlas’ appeal, in most instances, photographs are featured to cover the variation in clinical spectrum and severity of the different conditions. It is essential to diagnose both skin and non-skin lesions appropriately as the skin may also be a window into systemic disease. Therefore, early recognition can often save lives. Some skin diseases are life threatening, others are disfiguring and stigmatising while others cause pronounced discomfort for HIV-infected children.

The atlas is intended for use by medical students, doctors and other healthcare professionals at different levels, either in the private sector, public institutions or university setting. Clinical features, diagnostic and treatment modalities are briefly highlighted, based on published literature and the authors’ expertise. A list of references for further reading has also been included on each subject matter.

Regina Oladokun & Rannakoe J Lehloenyia

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Acronyms and abbreviations

ABC	Abacavir
AIDS	Acquired immune deficiency syndrome
ART	Antiretroviral therapy
ARVs	Antiretrovirals
AZT	Zidovudine
BCG	Bacille Calmette Guerin
CDC	Centers for Disease Control and Prevention
CMV	Cytomegalovirus
CNS	Central Nervous System
CT	Computed Tomography
CXR	Chest X-ray
d4T	Stavudine
E	Ethambutol
EFV	Efavirenz
FNAC	Fine needle aspiration cytology
GI	Gastrointestinal
H	Isoniazid
HIV	Human immunodeficiency virus
OFC	Occipitofrontal Circumference
OI	Opportunistic infection
INH	Isoniazid
IRIS	Immune reconstitution inflammatory syndrome
IV	Intravenous
KS	Kaposi sarcoma
LIP	Lymphoid intestinal pneumonitis
LPV/r	Lopinavir/ritonavir
MDR-TB	Multidrug resistant tuberculosis
MAC	Mycobacterium Avium Complex

MRI	Magnetic Resonance Imaging
MTB	Mycobacterium tuberculosis
MUAC	mid upper arm circumference
NNRTI	Non-nucleoside reverse transcriptase inhibitor
NRTI	Nucleoside reverse transcriptase inhibitor
NVP	Nevirapine
PCP	Pneumocystis pneumonia
PCR	Polymerase chain reaction
PI	Protease inhibitor
PO	Per oral
PMTCT	Prevention of mother to child transmission (of HIV)
PTB	Pulmonary Tuberculosis
PZA	Pyrazinamide
R	Rifampicin
RIF	Rifampicin
RTUF	Ready to use foods
SAM	Severe acute malnutrition
TB	Tuberculosis
TBM	Tuberculous Meningitis
WHO	World Health Organisation
Z	Pyrazinamide