

## **DIAGNOSIS, MANAGEMENT AND FOLLOW UP:**

- DIAGNOSIS: HIV with Disseminated histoplasmosis and hyperferritinemia
- Patient was started on Antiretroviral therapy along with Amphotericin
- Following commencement of treatment, he developed profound neutropenia and profuse diarrhoea
- The patient succumbed to multi organ failure following septic shock

## **DISCUSSION:**

- The first reported case of histoplasmosis in a human, was by Samuel Darling Panama [1]
- Histoplasmosis is caused by a fungal infection, *Histoplasma capsulatum*. There are two varieties of the pathogen, *Histoplasma capsulatum* var. capsulatum and *Histoplasma capsulatum* var. duboisii that cause disease in humans [2]
- It became a public health issue when it was listed by Center for Diseases Control and Prevention (CDC) among the AIDS-defining illnesses in 1987 [3]
- The disease is classified into:
  - 1. Acute pulmonary histoplasmosis (normal host/immunocompetent). The acute histoplasmosis is usually asymptomatic [4].
  - 2. Disseminated histoplasmosis (immune defect). The disseminated form of the disease usually occurs in immunocompromised individuals such as those with acquired immune-deficiency syndrome (AIDS), transplant recipients, those with haematological malignancies, infants and those on corticosteroids, and it is caused by defective cell mediated immunity in these individuals [5].
  - 3. Chronic pulmonary histoplasmosis (structural defect). It's a slowly progressive and generally fatal infection due to H. capsulatum that occurs mostly in older adults who are not overtly immunosuppressed.