Atypical Presentation of Kaposi’s Sarcoma in an HIV-Infected Patient

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A 41 year old black African HIV-infected man with 247 CD4 cells/µl and thrombocytopenia (54,000/µl) presented at a local clinic in Botswana with a 2 month history of generalized body weakness, fever, night sweats, loss of appetite and weight loss. Examination revealed enlarged (2–3 cm) non-tender, rubbery and mobile lymph nodes in the cervical and inguinal regions. No cutaneous or oral lesions were found. Lymph node cytology following fine-needle aspiration was consistent with chronic lymphadenitis. In view of the high prevalence of tuberculosis in Botswana, the patient was started on anti-TB therapy.

Two months later the patient presented at Princess Marina Hospital in Gaborone to begin antiretroviral therapy. His symptoms had persisted and he now had hepatosplenomegaly as well. Chest X-ray was normal. Blood cultures were negative. Hemoglobin was 4.1 g/dl and the patient received a blood transfusion. After one week of hospitalization hemoglobin was again 4 g/dl and platelets were 16,000; he again received a transfusion. Melena was absent but a fecal blood test was positive. Lymphoma with hypersplenism was suspected; however, lactate dehydrogenase level was normal. A week later the patient developed acute respiratory distress with chest pain and died. A postmortem examination showed Kaposi’s sarcoma (lymph nodes and gastrointestinal tract) [Figures 1 and 2] and pulmonary thromboembolism with hemorrhagic infarction [Figure 2].

Visceral involvement from Kaposi’s sarcoma occurs in up to 25% of cases of human immunodeficiency virus-associated KS [1] and tends to be more common in patients with low CD4 cell counts. KS often involves the gastrointestinal tract but only rarely presents as gastrointestinal bleeding in the absence of cutaneous and mucosal lesions [2-4]. Patients with extensive involvement of a lower extremity with KS and lymphedema can have pulmonary thromboembolism [5]. Our case is unusual as the patient had no cutaneous or oral mucosa involvement and no involvement of the lower extremities. In addition, his CD4 cell count was not too low. A high index of suspicion for KS in HIV-infected patients with anemia and constitutional symptoms should be maintained, and lymph node biopsy rather than fine needle aspiration should be performed in patients with lymphadenopathy.

Figure 1. Small intestine wall in the submucosa showing proliferating spindle cells with slit-like vascular spaces (arrow) (x 4, hematoxylin & eosin)
**Figure 2.** Infarction area in the lung (x 4, hematoxylin & eosin)

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**Capsule**

**Arab Muslin heads Emergency Medicine at Hadassah**

Dr. Aziz Darawshe, former head of emergency medicine at Ha’Emek Medical Center in Afula, was recently appointed director of Emergency Medicine at Hadassah University Medical Center in Jerusalem (Ein Kerem campus). Darawshe earned his reputation for medical excellence while working at Ha’Emek, where consumer satisfaction polls performed by Clalit Health Services rated his team among the best. An oasis for Jewish-Arab coexistence, almost 40% of the medical staff at Ha’Emek is Arab and the staff work together without discrimination and regardless of the political situation. According to Darawshe, “The integration of Arabs in to the medical field has been impressive in this country. In the health system, Arabs and Jews get along excellently on an individual level. It’s an oasis. Since the establishment of the State of Israel, this has been so in hospitals and health funds and in Education Ministry institutions. The rate of Arab pharmacists is about 40%.”

Darawshe studied medicine at the University of Sofia in Bulgaria, specializing in cardiology, emergency medicine and internal medicine. He also possesses a masters’ degree in health management systems from Ben-Gurion University of the Negev. Additionally, since 2010, he has served as chairman of the Israel Society for Urgent Medicine, and as of 2011 is an honorary member of the American College of Emergency Physicians. From a family with little education, his parents prioritized a better future for their children – Aziz’s siblings include three physicians, a dentist, an engineer, and five sisters with academic degrees. His eldest son has a medical degree from Jerusalem. Known as a political moderate, Darawshe believes that by healing the sick, without discriminating based on nationality, coexistence is possible.

With thanks to Rachel Avraham

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“**For all our conceits about being the center of the universe, we live in a routine planet of a humdrum star stuck away in an obscure corner... on an unexceptional galaxy which is one of about 100 billion galaxies. ... That is the fundamental fact of the universe we inhabit, and it is very good for us to understand that**”

Carl Sagan (1934-1996), American astronomer, astrophysicist, cosmologist, author, science popularizer and science communicator in astronomy and natural sciences. He spent most of his career as a professor of astronomy at Cornell University where he directed the Laboratory for Planetary Studies.

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**References**


