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Cryptosporidium spp. in HIV-Positive Patients with Diarrhea in Ecuador: Diagnostic Concordance and Risk Factors

Inhalt

Cryptosporidium spp. is an opportunistic enteric pathogen in people living with HIV, yet data from Latin America are limited. We conducted a cross-sectional, record-level analysis of 150 stool-sample records from patients with HIV and diarrheal syndrome at a referral hospital in Guayaquil, Ecuador, in 2015. Modified Ziehl–Neelsen microscopy and real-time PCR were compared, and clinical and epidemiological correlates were explored.

Cryptosporidium was identified by microscopy in 6/150 records (4.0%; 95% CI, 1.9–8.5%); two were also PCR-positive. Methods agreed in 146/150 records (97.3% raw agreement): 144 double-negative and two double-positive. Four records were microscopy-positive/PCR-negative; none were PCR-positive/microscopy-negative. All positive records had CD4 counts <200 cells/ μ L (range, 4–196).

In exploratory analyses, positivity was higher among records reporting well or tanker-truck water than among those reporting potable or bottled water (25.0% vs 2.9%; Fisher's exact $p=0.035$). Two records with unmapped water codes were excluded; this association should therefore be interpreted cautiously. Stool frequency, animal contact, boiling water, and recorded gastrointestinal symptoms were not significantly associated with positivity (all $p>0.05$).

The small number of positive records, unresolved water coding, and microscopy–PCR discordance limit causal inference. Larger patient-linked studies with complete exposure coding and assay quality control are needed.

Keywords

Cryptosporidium, HIV, One Health, water exposure, Ecuador

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No, I am not a Junior Scientist.

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