

SOUTHWESTERN NEWS

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HAART THERAPY SIGNIFICANTLY PROLONGS SURVIVAL IN AIDS PATIENTS DIAGNOSED WITH CENTRAL NERVOUS SYSTEM LYMPHOMA

DALLAS – July 30, 2003 – AIDS patients with primary central nervous system lymphoma who receive the HAART “cocktail” therapy live much longer than those not treated with the therapy, researchers at UT Southwestern Medical Center at Dallas found.

A study published in today’s issue of the journal *AIDS* reports that patients treated with HAART – Highly Active Antiretroviral Therapy – survived at least 22 months, compared with a median of 29 days for those who didn’t take the prescription drug regimen.

“Traditionally, patients with primary central nervous system lymphoma have a very poor prognosis with a survival of only a few weeks to months after diagnosis,” said Dr. Daniel Skiest, associate professor of internal medicine at UT Southwestern and the study’s senior author.

Skiest, also the associate chief for clinical infectious diseases at UT Southwestern, reviewed records of AIDS patients diagnosed with central nervous system lymphoma at Parkland Memorial Hospital – a 990-bed hospital serving Dallas County which is the primary teaching institution of Southwestern Medical School – between 1995 and 2001 to determine the effects of HAART on survival rates.

During the six-year study, 25 patients were identified. Of those, 19 were definite cases of CNS lymphoma and six were probable cases. Six of seven patients treated with HAART survived at least one year and 10 months after diagnosis. The 18 who did not receive the therapy all died.

Of those who died, patients who received radiation therapy lived longer. Eleven patients who received neither HAART nor radiation had a median survival of only 29 days.

“While HAART has led to much better outcomes in many AIDS-related complications, it has not been clear whether there is a benefit of HAART in patients with primary CNS lymphoma,” Skiest said. “Ours is only the second series to demonstrate a significant survival benefit. It is not yet clear whether the survival benefit is related to prevention of other AIDS-

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related complications or to the immune restoration induced by HAART resulting in improved host control of the lymphoma.”

The other author of the paper is Craig Crosby, a clinical data specialist in UT Southwestern’s department of internal medicine.

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