

Secondary Immunodeficiency: A Difficult Diagnosis In Clinical Practice

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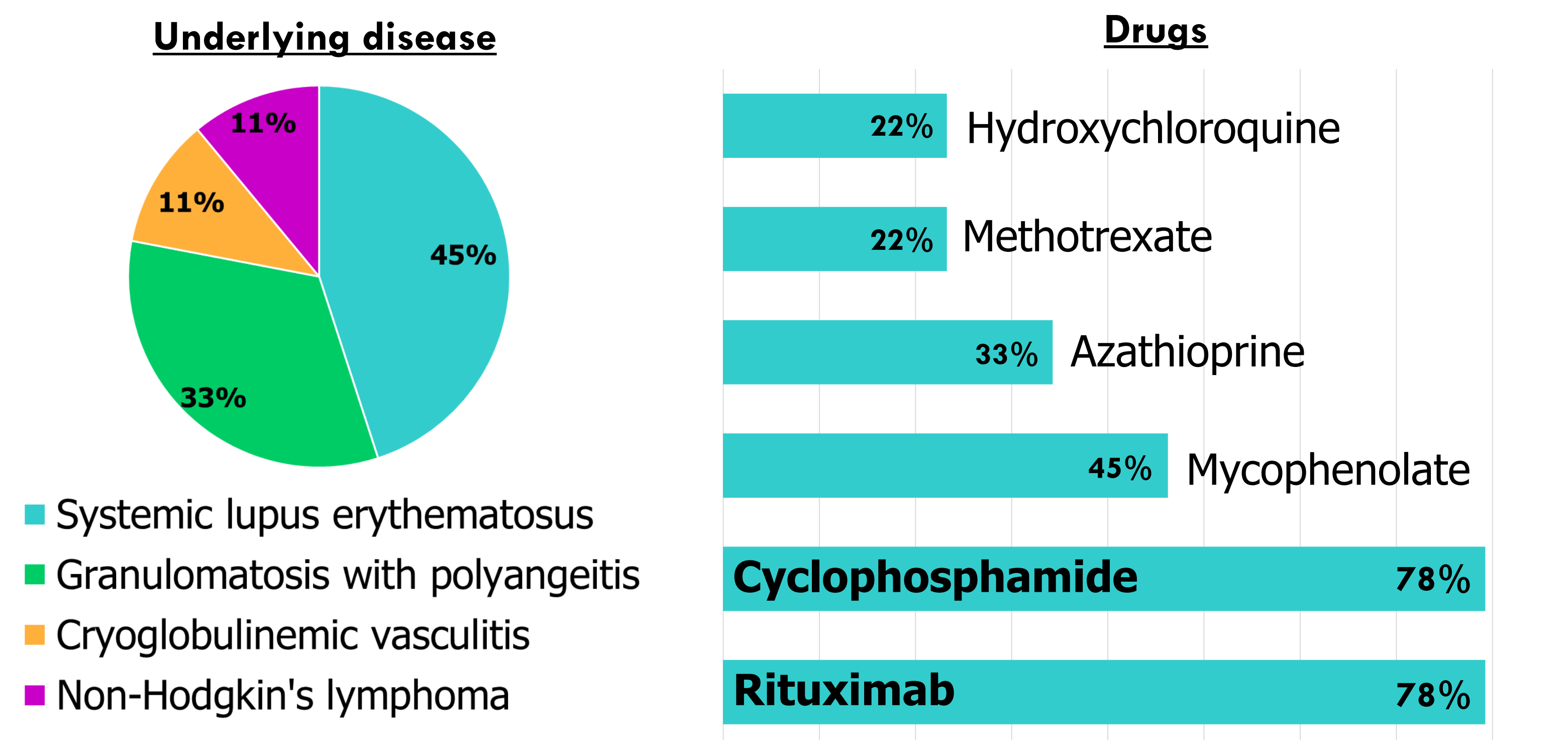
RATIONALE

- Secondary immunodeficiencies (SID) may be caused by hypercatabolism, protein loss, infections and medications.
- The objective of this study was to describe the profile of the patients diagnosed with SID to immunosuppressants followed in an immunology service.

METHODS

- This is a retrospective longitudinal study based on analysis of 9 medical records.
- Levels of IgA, IgM, IgG and CD19 were analyzed before and after immunosuppression. We also investigated the underlying disease, the drugs used and the treatment instituted for SID.

RESULTS



- At the diagnosis of SID, all patients had IgG levels below the 3rd percentile (mean value of 266 mg/dL). Only 3 patients (33%) had CD19 dosage (all of them <3%). 11% had normal IgA dosage, 11% had a normal IgM dosage and 11% had IgM levels above 97th percentile.
- 56% had received more than one immunosuppressant prior to SID.
- Immunoglobulin replacement was indicated for all of them.

CONCLUSIONS

- Immunosuppressive drugs have important and lasting effects on antibody production and immune system interaction.
- Immunological evaluation before treatment is essential to correctly diagnose SID and exclude primary immunodeficiency.

EXTRA

- The mean current age of patients was 48 (± 14) years old.
- 78% (n=7) of the patients were female and 22% (n=2) were male.

Only 22% of the patients had an immunological investigation before immunosuppressive treatment, making the diagnosis of SID questionable.