





VIRAL INFECTIONS HHV 8, MEASLES, RUBELLA





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HHV 8: Kaposi's Sarcoma

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- Kaposi's Sarcoma is a vascular neoplasm
- It is strongly associated with Human Herpesvirus 8 (HHV-8), also known as Kaposi sarcoma-associated herpesvirus (KSHV).
- It commonly affects immunocompromised individuals, particularly those with HIV/AIDS, but can also occur in elderly Mediterranean men or organ transplant recipients.
- Types
- AIDS-related KS: Most common type, associated with HIV infection
- Classic KS: Affects elderly Mediterranean men
- Endemic KS: Found in sub-Saharan Africa
- latrogenic KS: Occurs in organ transplant recipients
- Clinical Features
- Skin Lesions:
- Purplish, red or brown macules, patches, plaques or nodules
- Lesions can occur anywhere on the body but are often seen on the lower extremities, face and oral mucosa.
- May be asymptomatic or cause pain and swelling, especially in advanced cases.
- Visceral Involvement:
- It can affect internal organs like the lungs, GI tract, lymph nodes.





HHV 8: KAPOSI'S SARCOMA

- Example
- Like grapes on a vine growing over time, forming larger & more prominent lesions.

Measles (Rubeola)

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- Measles is a highly contagious viral disease
- It is caused by the Measles virus, a Paramyxovirus.
- It primarily affects children but can occur at any age.
- Clinical Features
- Prodromal Phase:
- Fever
- Cough, Coryza (runny nose), and Conjunctivitis (the "3 Cs")
- Koplik Spots: Small, white spots on the buccal mucosa 1-2 days before rash
- They look like tiny grains of salt sprinkled on a red<u>background</u>, these spots are an early diagnostic clue for measles.





MEASLES (RUBEOLA)



• Exanthem Phase:

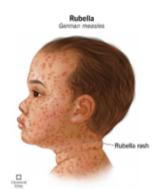
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- Maculopapular rash starts on the face (usually behind the ears) and spreads downward to cover the entire body.
- Rash lasts for about 5-7 days before fading, often leaving a brownish discoloration and fine desquamation (peeling).
- It looks like a red wave starting from the head and going down the body.
- Complications
- Pneumonia
- Encephalitis
- Subacute sclerosing panencephalitis (SSPE) (fatal neurological complication years after infection)
- Diagnosis
- Based on characteristic signs and symptoms
- Serology: Detection of measles-specific IgM antibodies
- PCR: Can confirm the presence of measles RNA
- Management
- Supportive Care: Includes hydration, antipyretics, vitamin A supplementation
- Measles can be prevented with the MMR (measles, mumps, rubella) vaccine.









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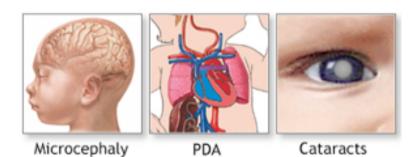
- Rubella is a contagious viral infection caused by the Rubella virus
- It is generally milder than measles.
- If affects pregnant women, it can cause congenital rubella syndrome in the fetus.
- Clinical Features
- Prodromal Phase:
- Mild fever, headache, lymphadenopathy (in posterior auricular and occipital regions)
- Forchheimer Spots: Small, red spots on the soft palate, which may precede or accompany the rash.
- Exanthem:
- Pink, maculopapular rash that begins on the face and quickly spreads to the trunk and extremities.
- Rash is typically less intense than measles rash, lasting about 3 days.
- It looks like a light spray of pink paint across the body.





RUBELLA (GERMAN MEASLES)

Congenital Rubella Syndrome:
Rubella syndrome



- If a pregnant woman contracts rubella, especially in the first trimester, the virus can cause severe birth defects like:
- heart defects

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- cataracts
- hearing loss
- developmental delays
- Complications
- Although rubella is usually mild, complications can include arthritis, thrombocytopenic purpura, encephalitis.

Condition	Clinical Features	Complications
Kaposi Sarcoma	Purplish, red or brown macules, patches, plaques or nodules in HIV/AIDS patient	Visceral involvement, lymphedema
Measles (Rubeola)	Fever, cough, coryza, conjunctivitis, Koplik spots, maculopapular rash	Pneumonia, encephalitis, SSPE
Rubella (German Measles)	Mild fever, lymphadenopathy, Forchheimer spots, pink maculopapular rash	Congenital rubella syndrome, arthritis

