SUMMARY

This study to evaluate the current TB/HIV co-infection rate in the Lagos metropolis, was advised by our experience of seeing few such cases in the chest clinic of LUTH, which was corroborated by two low seroprevalence rates (2.40% and 3.20%) obtained in Lagos metropolis more than a decade ago, and the fact that these were at variance with the widely held belief that Nigeria has high TB/HIV co-infection rates.

Three hundred and twenty one sputum AFB smear positive patients were randomly selected from IDH Yaba and LUTH Idi-Araba. Their demographic data, symptoms, physical signs, weight, height, BMI among others, and chest radiographic features were documented in a questionnaire. They were screened for HIV seropositivity using capillus, Genie II and Determine Kits. Samples reactive to 2 of these Kits were taken as positive. CD4 count of each seropositive patient was also documented. These documented clinical and radiographic features were compared between the seropositive and the seronegative patients. The frequencies of use of Diagnostic test for TB were noted.
The results showed seroprevalence rate of 7.80% and significant differences in the clinical and radiologic features between seropositive and seronegative patients. Sixty percent had CD4 counts <200 cells/mm³, implying significant immunodeficiency. This agrees with our clinical and radiologic findings.

TB/HIV co-infection rate in Lagos metropolis has increased. Most of them at presentation were significantly immunodeficient (as shown by the CD4 count) and therefore showed the classical features expected in HIV-AIDS clinically and radiologically. The use of ESR and Mantoux test in the management of TB from this study is very low. Sequel to our results; condom use should be encouraged. Government should merge and fund adequately the TB and HIV control programmes. Further studies on various aspects of TB/HIV co-infection were recommended.