Difficult Case 2

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- 43 year old Ugandan lady
- UK for 10yrs, one stable partner
- 4 months of fever, weight loss, night sweats, intermittent diarrhoea and abdominal pain and more recently (4 weeks) cough and shortness of breath
- New diagnosis of HIV, CD4 122 viral load 28000 c/ml
- HBV/HCV/Syphilis negative
- Serum CrAg negative





- Broncho-alveolar lavage performed
- PJP confirmed
- ZN stain and TB-PCR negative
- Multiple stool specimens negative microscopy
- Started on high-dose co-trimoxazole and steroids
- Transferred to our unit

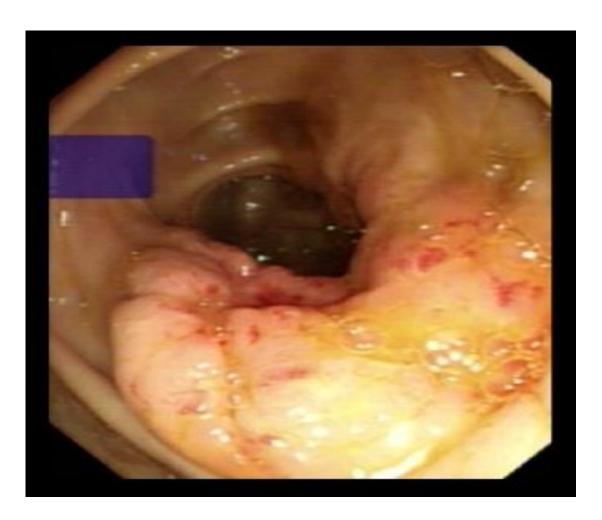
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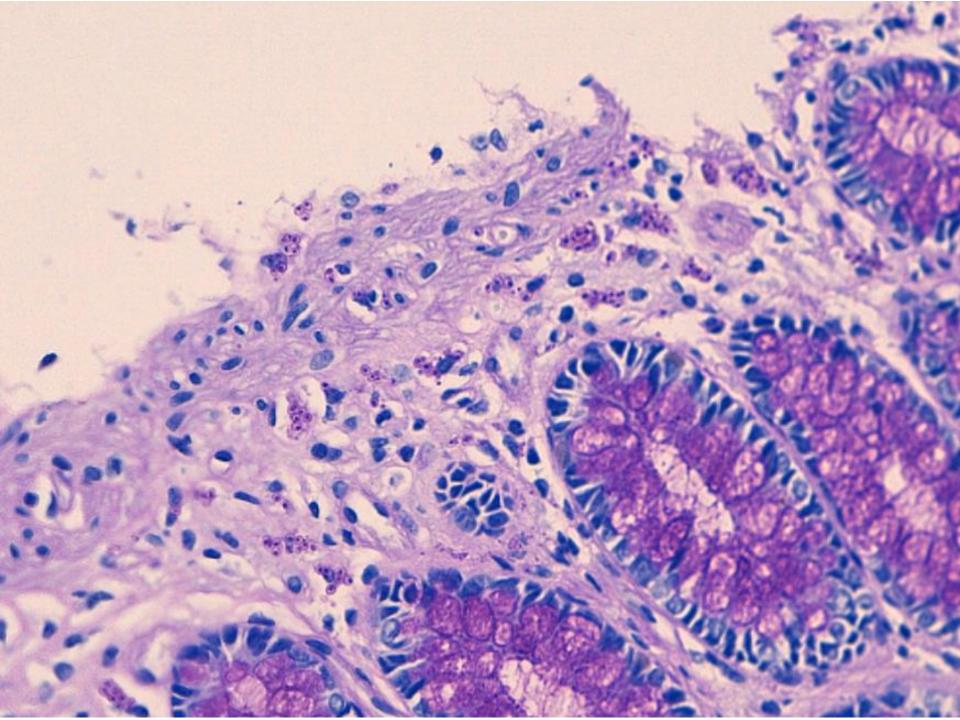
- Advanced HIV disease CD4 ~120
- Non-specific but weight loss, abdominal and respiratory symptoms
- Diagnosis of PCP confirmed

Do we want to do anything else?



What else is now in the differential diagnosis and what other tests?

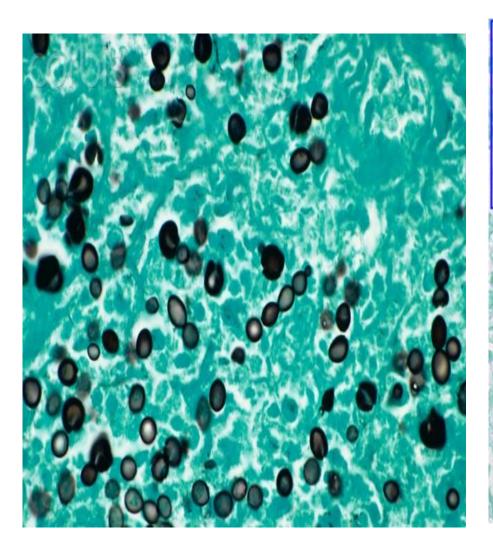


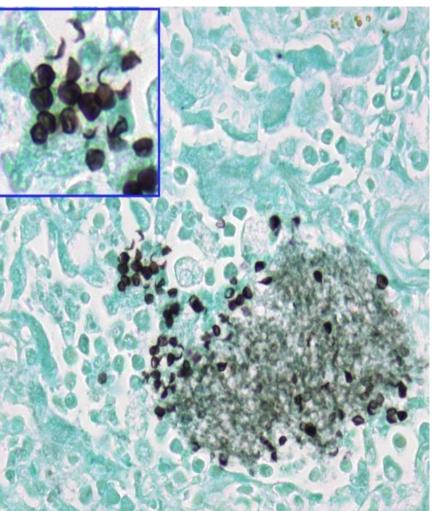


So do we have two diagnoses?

- PCP
- Histoplasmosis

Histoplasma vs. Pneumocysitis





Occam's Razor

 one should not increase, beyond what is necessary, the number of entities required to explain anything