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Case 29-2013: An HIV-positive man with dyspnea and skin lesions.

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In the Case Record of the man with Kaposi's sarcoma and inflammatory symptoms, we think it worthwhile to point out another possible diagnosis — multicentric Castleman's disease (MCD) related to Kaposi's sarcoma herpesvirus (KSHV), or KSHV-MCD. This lymphoproliferative disorder, which is often fatal if untreated, may occur concurrently with Kaposi's sarcoma and could account for the fever, cachexia, anemia, adenopathy, hypoalbuminemia, and splenomegaly in this case.¹ KSHV-MCD should be included in the differential diagnosis of inflammatory symptoms in patients with Kaposi's sarcoma, because it is often missed if not specifically considered. Diagnosis requires pathological evaluation of an affected node. KSHV replication and dysregulation of human and viral interleukin-6 have been implicated in its pathogenesis.² To date, few cases have been reported from Africa, but given the high prevalence of KSHV in the region, it may be underappreciated. Kaposi's sarcoma-associated IRIS is currently defined according to various clinical case definitions.³ Its pathogenesis may differ from that of other forms of IRIS, and the clinical and pathophysiological relationship between it and other KSHV-associated inflammatory syndromes is worthy of further study.^{4,5}

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