Comments on “coinfection of SARS-CoV-2 and HIV in a patient in Wuhan city, China”

Zhu et al¹ report in their letter, coinfection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and human immunodeficiency virus (HIV) in a patient in Wuhan city, China, a case of coronavirus disease 2019 (COVID-19) in an HIV-infected patient. However, from the details given in the report, there are doubts that this patient is living with HIV, and additional information would be needed to confirm it. In addition, the antiretroviral drug treatment mentioned is not within the standard guidelines for someone infected with HIV.

Information on how SARS-CoV-2 infection impacts immunocompromised people, such as those people living with HIV (PLWH), off therapy or on therapy, is of urgent concern to those managing PLWH. In this case report, the authors describe a 61-year-old male, who was a heavy smoker with type II diabetes. He presented with recurrent fever and dry cough and was diagnosed with SARS-CoV-2 pneumonia on a chest computed tomography scan. There is no other demographic information given in the case report, but he does not appear to fall into traditional HIV infection risk groups. There is no information on sexual history, drug use, or blood transfusion, which would assist in evaluating his HIV risk. The authors then mention “an antigen/antibody combination test on blood gave the HIV-positive result,” without discussion of why the test was given, nor what the test was, or if it was repeated more than once. There is no mention of an HIV viral load measurement, or any subsequent follow up for confirmation of his HIV diagnosis. They then say the patient was put on “oral therapy with an anti-HIV drug, lopinavir/ritonavir” for 12 days. This is not an adequate regimen for someone diagnosed with HIV.

While they end on an encouraging note about the patient, with a discussion about his improvement and subsequent isolation at home to recover, they do not discuss any additional follow up for his purported HIV infection with no mention of an adequate treatment regimen.

In this rapidly changing time, it is essential to monitor and discuss reports on COVID-19, and its' impact on the HIV-infected community. It is also important to point out the limitations of studies so that further studies are not compromised.

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REFERENCE

1. Zhu F, Cao Y, Xu S, Zhou M. Co-infection of SARS-CoV-2 and HIV in a patient in Wuhan city, China [published online ahead of print March 11, 2020]. *J Med Virol*. <https://doi.org/10.1002/jmv.25732>