Clinical Correlates of Herpes Simplex Virus Viremia Among Hospitalized Adults.

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BACKGROUND: Quantification of herpes simplex virus (HSV) DNA in the peripheral blood is often used to evaluate patients suspected of having disseminated HSV infection. Few studies have examined the clinical correlates of HSV viremia among adults.

METHODS: We conducted a retrospective analysis of blood samples sent to a molecular virology reference laboratory at a university hospital for quantification of HSV DNA from October 2001 through June 2006. Medical records of patients with detectable HSV DNA were reviewed to abstract relevant clinical characteristics.

RESULTS: HSV DNA was detected in 38 (4%) of 951 samples from 29 patients, 19 of whom (66%) were >16 years old. Detailed medical records were available for review from 13 (68%) of 19 adult patients. Of the 10 patients whose HSV infection was typed, 6 (60%) had HSV-2, 3 (30%) had HSV-1, and 1 (10%) had evidence of HSV-1 and HSV-2 coinfection. All patients with viremia were treated with antiviral medications. The most common clinical findings were hepatitis (62%), fever (54%), central nervous system alterations (46%), skin lesions (38%), abdominal pain (31%), and sepsis (31%). Respiratory failure (23%) was uncommon. Patients with HSV viremia were observed to have a high mortality rate (6 of 10 immunocompromised and 1 of 3 immunocompetent individuals).

CONCLUSIONS: HSV viremia may be associated with a variety of signs and symptoms of morbidity in immunocompetent and immunocompromised hospitalized adults and is associated with high rates of mortality, although causality can be determined only by additional studies.

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