BIOCHEMICAL EVALUATION IN UNTREATED PARACOCCIDIOIDOMYCOSIS-PATIENT

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Introduction. Paracoccidioidomycosis (PCM) is a systemic disease restricted to Latin America that frequently disseminates to several organs. The clinical evaluation of PCM-patients is frequently completed by laboratory tests. The objective of this study is to evaluate many biochemical variables in untreated patients. **Patients and Methods.** We studied 83 patients with PCM confirmed by identification of the etiological agent or detection of serum antibodies by double agar gel immunodiffusion test, clinically classified according to Mendes (1994): 29 presented the acute/subacute severe form (G_1), 35 the chronic moderate form (G_2) and 19 the chronic severe form (G_3). Biochemical exams were performed in routine clinical laboratories at the University Hospital – UNESP. Comparison of medians were carried out by Kruskal-Wallis test and significance was set up at $p<0.05$. **Results.** Serum total cholesterol presented low levels ($G_1<G_3<G_2$). Total lipids showed normal levels, with difference among groups ($G_1<G_3<G_2$). Mucoproteine serum levels revealed mild increase ($G_1=G_2=G_3$); α_1-acid glycoprotein showed tendency to elevation in G_3; C-reactive protein was always increased ($G_1=G_2=G_3$). Alkaline phosphatase revealed increased levels only in G_1 ($G_1>G_2>G_3$). Blood urea nitrogen and creatinine showed low levels [$G_1<(G_2=G_3)$]. Serum protein electrophoresis revealed increased α_1-globulin ($G_1=G_2=G_3$), normal α_2-globulin and β-globulin and increased γ-globulin serum levels [$G_1>(G_2=G_3)$]. Sodium, potassium, chloride, calcium, phosphorus, glucose (fasted), aminotransferases, uric acid, tryglicerides, γ-glutamil transferase were always normal. **Conclusions.** The biochemical alterations caused by *P. brasiliensis* demonstrates its intense metabolic interference and suggest careful follow-up of PCM-patients.