VIII ENCONTRO DO INSTITUTO ADOLFO LUTZ

HEMATOLOGICAL EVALUATION IN UNTREATED PARACOCCIDIOIDOMYCOSIS-PATIENTS.

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Introduction. Paracoccidioidomycosis (PCM) is a systemic granulomatous 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 some hematological 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). Hematological 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.** Hemoglobin (g%) [G_1=11.1; G_2=15.1; G_3=14.6] and hematocrit (%) [G_1=34.5; G_2=44.2; G_3=43.4] showed low values only in G_1 [$G_1<(G_2=G_3)$]; eosinophils count (no./mm^3) [G_1=616; G_2=430; G_3=256] was increased only in G_1 [$G_1>(G_2=G_3)$]; platelet count (no./mm^3) [G1=380,500; G_2=311,000; G_3=358,000] was normal in all the groups, but with difference among them [$G_2<(G_1=G_3)$]; neutrophils [G_1=5,519; G_2=6,360; G_3=6,6,832], total lymphocytes [G_1=1,821.5; G_2=2,121; G_3=2,125] and monocytes [G_1=480; G_2=485; G_3=820] count were normal ($G_1=G_2=G_3$). Erythrocyte sedimentation rate (mm/1st hour) [G_1=43; G_2=29; G_3=30] was always increased [$G_1>(G_2=G_3)$]. **Conclusions.** The hematological alterations caused by *P. brasiliensis* suggest careful follow-up of PCM-patients, with routine evaluation of the hemogram and erythrocyte sedimentation rate.