




 [Current Issue](#) [Browse Issues](#) [Search](#) [About this Journal](#) [Instruction to Authors](#) [Online Submission](#) [Subscription](#) [Contact Us](#) [RSS Feed](#)

## Acta Medica Iranica

2009;47(4) : 43-46

### Recurrent Infections and Bilateral Uveitis in a Patient CD8 Deficiency

Abolhassan Farhoudi, Zahra Chavoshzadeh, Bahram Mir Saeid Ghazi, Asghar Aghamohammadi, Mohammad Gharagozlou

#### Abstract:

CD8 deficiency is a rare primary immunodeficiency with low or absent peripheral CD8 cells which results from TAP deficiency, Zap 70 deficiency and CD8  $\alpha$  gene mutation.

We report a 14 year old female who presented with a history of recurrent pneumonia, bronchiectasis, otitis, severe varicella, herpetic lesions of mouth, bilateral uveitis, and cataract formation since the age of 8 years.

She had growth failure, a huge spleen and moderate clubbing. In immunologic workup, humoral and phagocytic systems were normal. DTH response to candida, PPD and DT were negative but LTT response to PHA mitogen was normal. HLA typing showed normal class I expression. Flowcytometry of peripheral blood showed CD8: 0 to 2% (absolute count, 0-60 cells/mm<sup>3</sup>) with increased CD4/CD8 ratio on several occasions.

Diagnosis of this patient cannot be HLA class I deficiency (TAP1 or TAP2), because class I expression had been normal.

It is possible to be Zap -70 deficiency or CD8  $\alpha$  gene mutation. Bilateral uveitis in our patient was a unique presentation which might have resulted because of immune dysregulation in CID.

#### Keywords:

[Bilateral Uveitis](#) . [CD8 deficiency](#) . [Zap 70 deficiency](#)

TUMS ID: 2736

[Full Text HTML](#)  [Full Text PDF](#)  79 KB

top ▲

[Home](#) - [About](#) - [Contact Us](#)

TUMS E. Journals 2004-2009  
Central Library & Documents Center  
Tehran University of Medical Sciences

Best view with Internet Explorer 6 or Later at 1024\*768 Resolutions