

## INTISARI

**Latar belakang:** Kondiloma akuminata (KA) merupakan penyakit infeksi menular seksual yang disebabkan oleh HPV terutama genotipe risiko rendah. Respon imun seluler yang adekuat pada individu imunokompeten dapat membantu meregresi lesi KA. Gangguan respon imun seluler seperti yang dialami oleh penderita HIV dapat menyebabkan lesi menjadi sulit regresi sehingga diduga dapat menyebabkan karakteristik lesi KA menjadi lebih buruk. Namun, hingga saat ini belum ada studi yang membandingkan karakteristik lesi KA antara penderita HIV dan non-HIV.

**Tujuan:** Mengetahui perbedaan karakteristik lesi KA dari segi ukuran, jumlah dan tipe lesi berisiko tinggi (lesi papul beratap datar hiperpigmentasi) antara penderita HIV dan non-HIV.

**Metode:** Penelitian ini merupakan studi observasional analitik dengan rancangan potong lintang (*cross-sectional*). Penelitian ini merekrut pasien KA berusia 17-65 tahun yang berobat di Poliklinik Kulit dan Kelamin RSUP Dr. Sardjito yang memenuhi kriteria inklusi dan eksklusi selama periode April hingga Agustus 2023 secara *consecutive sampling*. Pengambilan data meliputi data dasar pasien serta karakteristik lesi meliputi ukuran, jumlah serta tipe lesi KA. Hubungan status HIV dengan ukuran dan jumlah lesi akan dianalisa menggunakan *independent t-test* (distribusi normal) atau *Mann-whitney u test* (distribusi tidak normal). Hubungan status HIV dengan tipe lesi akan dianalisa dengan *chi-square*.

**Hasil:** Sebanyak 61 orang penderita KA berhasil direkrut yakni terdiri dari 30 orang penderita HIV dan 31 orang non-HIV. Ukuran dan jumlah lesi KA pada kelompok penderita HIV lebih besar dibandingkan non-HIV. Terdapat korelasi positif antara durasi sakit KA dengan ukuran dan jumlah lesi dan kecepatan pertambahan ukuran dan jumlah lesi KA setiap minggunya lebih cepat pada penderita HIV dibandingkan non-HIV. Tidak terdapat perbedaan antara jumlah tipe lesi berisiko tinggi antara penderita HIV dan non-HIV.

**Kesimpulan:** Penderita HIV memiliki karakteristik lesi KA yang lebih buruk dari segi ukuran dan jumlah lesi KA. Epidemiologi lesi KA tipikal prekanker pada penderita HIV membutuhkan studi lebih lanjut menggunakan pemeriksaan histopatologi dan *genotyping* DNA HPV.

**Kata kunci:** Kondiloma akuminata, kutil anogenital, *human immunodeficiency virus*, *human papillomavirus*, karakteristik

## ABSTRACT

**Introduction:** Condyloma acuminata (CA) is a sexually transmitted infection caused by HPV, primarily low-risk genotypes. Adequate cellular immune response in immunocompetent individuals can help regress CA lesions. Impaired cellular immune response, as experienced by HIV patients, can make lesions difficult to regress, suspected to worsen the CA lesion phenotype. However, to date, no studies have compared the CA lesion phenotypes between HIV and non-HIV patients.

**Objective:** Understanding the differences in the phenotype of CA lesions in terms of size, quantity, and the presence of high-risk lesions (flat-topped papules with hyperpigmentation) between HIV-positive and HIV-negative individuals.

**Methods:** This study is an analytical observational study with a cross-sectional design. The study recruited CA patients aged 17-65 years who received treatment at the Dermatology and Venereology Clinic of RSUP Dr. Sardjito and met the inclusion and exclusion criteria during the period from April to August 2023 through consecutive sampling. Data collection included basic patient information as well as lesion phenotypes, including size, number, and type of CA lesions. The relationship between HIV status and lesion size and number will be analyzed using independent t-tests (for normally distributed data) or Mann-Whitney U tests (for non-normally distributed data). The relationship between HIV status and lesion type will be analyzed using chi-square tests.

**Results:** A total of 61 CA patients were successfully recruited, comprising 30 HIV-positive individuals and 31 HIV-negative individuals. The size and quantity of CA lesions in the HIV-positive group were larger compared to the HIV-negative group. There was a positive correlation between CA duration and lesions' size and quantity. The rate of increase in the size and quantity of CA lesions per week was also faster in HIV-positive patients compared to HIV-negative patients. There was no difference in the number of high-risk lesion types between HIV-positive and HIV-negative patients.

**Conclusion:** HIV-positive individuals have a worse prognosis for CA in terms of lesion size and quantity. The epidemiology of typical precancerous CA lesions in HIV-positive patients requires further study using histopathological examinations and HPV DNA genotyping.

**Keywords:** Condyloma acuminata, anogenital warts, human immunodeficiency virus, human papillomavirus, phenotypes