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## Summary

A 47-year-old unmarried male from Piliyandala presented to sexually transmitted disease (STD) clinic, Colombo with perianal warts. He was found to be positive for retro viral infection and late latent syphilis infection during routine sexually transmitted disease screening.

At the time of presentation he didn't have clinical features suggestive of opportunistic infections due to HIV or features suggestive of cardiovascular, neuro or gummatous syphilis.

He was a male who had sex with men (MSM) and had more than 50 non-regular partners during his life time. He used to engage in sexual activities under the influence of a

lcohol. He had never used condoms due to lack of awareness about its health benefits.

He studied up to G.C.E. A/L and worked as a pattern designer in a garment factory. He had poor social and family support and his serostatus was not disclosed to anyone.

His baseline investigations were normal except elevated serum triglyceride level. Screening for opportunistic infections was negative. His baseline CD4 cell count was 551cells/uL and viral load was 64,192copies/ml.

He was started on Antiretroviral Therapy (ART) with Tenofovir 300mg + Emtricitabine 200mg + Efavirenz 600mg once a day at night. Isoniazid prophylaxis for 6 months was started for latent tuberculosis infection following chest referral. Three doses of intramuscular benzathine penicillin 2.4 MU were given as the treatment for late latent syphilis. His perianal warts were initially treated with 5 cycles of 90% trichloroacetic acid. As there was no response treatment was changed into cryotherapy with liquid nitrogen.

He was counselled repeatedly regarding the HIV infection, positive living and safe sexual practices. Adherence counseling was done to maintain 100% adherence to drugs. Partner tracing was unable to perform as he didn't have contact details of his sexual partners.