

Lack of efficacy of ozone therapy in HIV infection

Velio Bocci; Giuletta Venturi; Marinunzia Catucci; Pier Egisto Valensin & Maurizio Zazzi

Clinical Microbiology & Infection 4: 667-669, 1998.

Journal written in English

No abstract available

Comment by Miika Sallinen

In spite of blatant title "Lack of efficacy of ozone therapy in HIV infection" this study yielded positive results. The study population was limited only to seven HIV-positive patients. They received O₃-autohemotherapy treatments twice weekly at least 16 sessions. One patient received citrate-phosphate-dextrose-adenine (CPDA) as an anticoagulant, when all of the other patients were treated with heparin calcium salt. Use of heparin enhances immune activation, and patient, who received CPDA did not achieved positive results. However, for the other patients, the treatment was at least successful. No patient reported any side effect, and hematologic parameters remained stable or improved. A Few patients noted a decreased incidence of oral candidosis and herpes labialis. With the exception of CPDA-treated patient, there was a significant increase in CD4+ cell numbers ($p = 0,001$). In these patients mean CD4+ count increased from 268 to 365 CD4/mL and b2-microglobulin levels improved also significantly. Only measured parameters which did not improved, were HIV-1 DNA copies in CD4 cells and HIV-1 RNA copies in plasma. Thus Ozone therapy did not affected in HIV-infection, but this was not a whole truth. In his book "Oxygen-Ozone Therapy: A Critical Evaluation" professor Bocci told that the title of the article was imposed by the editor. He also told that he was unable to find his patients later, so he could not say anything about their later status. Ozone was certainly not a miracle cure, but according to this study, it could be at least useful adjuvant therapy for patients with advanced HIV-infection and/or AIDS.