Adult T - lymphoma / leukemia is an aggressive T lymphoproliferative entity associated with retrovirus HTLV-1. HTLV-1 infection is endemic in Japan, the Caribbean, Africa, South America, and the Middle East. In South America, we have Peru, Brazil, Colombia, and Chile.

Peru is endemic for this virus. The prevalence of retroviruses in Europe and the USA is less than 1%, but in Peru it is estimated that around 3% of the healthy adult population is a carrier of the retrovirus.

From Chile, there have been several ATLL reports since 1992 by Dra. Cabrera et al.

Other diseases caused by retroviruses include tropical spastic paraparesis, uveitis, infectious dermatitis, and other rheumatologic, psychiatric, and infectious disorders.

Only 2% to 4% of virus carriers will develop ATLL. The viral genes involved in the malignant transformation are Tax and HBZ.

Five clinical types are identified in this disease: latent, chronic, cutaneous, lymphomatous, and acute. However, the acute and lymphomatous forms are the most aggressive and also the most prevalent.

As to prognosis, the poor prognosis factors are: clinical stage, performance status, age, albumin, and soluble IL-2 receptor.

The survival of the acute forms can be 2 months, while the lymphomatous forms can have a survival time of around 9 months.

Treatment for leukemic forms is Interferon alfa and zidovudine; the lymphomatous form responds to chemotherapy. Allogeneic transplantation may be the only curative form of the disease.

In this issue of the journal, a complete review of this entity is presented by Dra. Cabrera et al.