

8. UROGENITAL SYSTEM

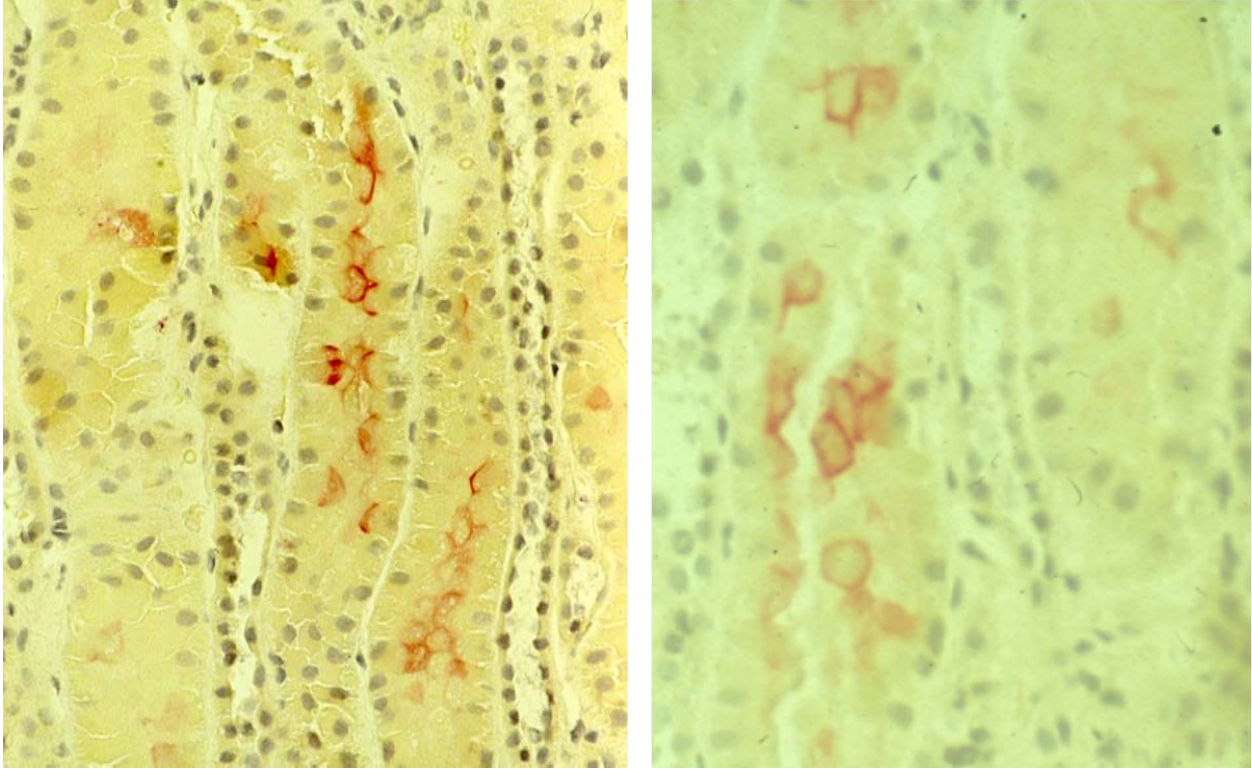
8.1 Introduction

During primary HHV-6 infection, virus can be isolated from peripheral blood cells, saliva and the urogenital tract. Although the HHV-6 receptor CD46 is expressed in renal epithelia and HHV-6 antigen has been shown in tubular epithelial cells, primary HHV-6 caused renal diseases are not reported so far.

Similar to other organ systems, HHV-6 is frequently reactivated in patients with renal allografts, yet graft dysfunction leading to chronic allograft nephropathy was commonly caused by cytomegalovirus infection and not by HHV-6. There may exist though certain mechanisms of mutual transactivation between HCMV and HHV-6.

HHV-6 has been identified in the maternal genital tract during pregnancy (in up to 12.2%), and isolated cases of congenital infections are known (ca. 1-1.6% of pregnancies).

8.2 Figures



Renal biopsy w/o microscopic pathology showing the expression of HHV-6 gp110/65/55 antigen in tubular epithelial cells by immunohistochemistry

8.3 Further Reading

Kaden J, May G, Wagner M, Krueger GRF: Nachweis von Antikörpern gegen humanes Herpesvirus-6 (HHV-6) bei Nierentansplantatempfängern mit Cytomegalievirus (CMV)-Infektion. *Transplantationsmedizin* 9: 28-32, 1997

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Tong CYW, Bakran A, Peiris JSM, Muir P, Herrington CS. The association of viral infection and chronic allograft nephropathy with graft dysfunction after renal transplantation. *Transplantation* 74: 576-578, 2002

Ohashi M, Yoshikawa T, Ihira M, Suzuki K, Suga S, Tada S, Udagawa Y, Sakui H, Iida K, Saito Y, Nisiyama Y, Asano Y. Reactivation of human herpesvirus 6 and 7 in pregnant women. *J Med Virol* 67: 354-358, 2002

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