Dear Editor,

In September 2023 issue of the Oman Medical Journal, Al Sharqi et al\(^1\) reported interestingly a case of immature renal teratoma (IRT) in an Omani male newborn. We believe that the following point is worthy. It is important to note that apart from infection, human immunodeficiency virus (HIV)-positive subjects have a heightened likelihood of developing different types of tumors. Despite the fact that immunodeficiency is the main driving factor, other factors, such as co-infection with the oncogenic viruses and lengthy life expectancy because of the utilization of antiretroviral medications, are involved. Infants with perinatal exposure to HIV are more susceptible to various tumors in comparison with non-exposed counterparts.\(^2\) Among tumors, teratoma has been reported in HIV-infected neonates.\(^3\) Although the annual new HIV cases in Oman have increased in the last few years, the HIV epidemic in the country has stayed at a low-prevalence over the past decade.\(^4\) The accessible data showed that prevalence of Omani pregnant with HIV accounted for 0.1% (1:1000) with 0.03% of sero-positive pregnancies (3:10\(^0\)000). Of these sero-positive pregnancies, 78.6% were known HIV carriers and the remaining 21.4% were newly-diagnosed cases.\(^5\) Regrettfully, Sharqi et al\(^1\) didn’t define the HIV situation in both the neonate and his mother by estimating CD4 lymphocyte count and viral load as well as HIV p24 antigen/antibody testing. We believe that the potential of vertical HIV transmission ought to be taken into account in the case in question. In the event that the diagnostic panel was to unveil HIV infection, the studied neonate could be viewed as an unprecedented case report of HIV-related IRT in the Omani literature.

References


