A 36-year-old male patient newly diagnosed as having human immunodeficiency virus/acquired immunodeficiency syndrome with a CD4 count on presentation of 3 cells/μL presented with an oral lesion. This lesion was previously thought to be a dental abscess that persisted despite incision and drainage (Figure). The lesion had a raised nodular appearance, was purple, and seemed to be of vascular origin. This was highly suspicious for Kaposi sarcoma. This suspicion was confirmed by a biopsy showing tumor cells positive for CD31 and human herpesvirus 8. Kaposi sarcoma is a low-grade vascular tumor associated with human herpesvirus 8 infections. Kaposi sarcoma related to human immunodeficiency virus/acquired immunodeficiency syndrome can present as mild minimal disease or as rapidly progressing neoplastic disease. It can be either localized or disseminated, often with cutaneous manifestations or visceral manifestations involving the gastrointestinal tract or the respiratory tract. Treatment depends on the stage of the disease. This patient had no evidence of visceral involvement, and his lesions resolved completely after initiation of combination antiretroviral therapy with efavirenz/emtricitabine/tenofovir and recovery of his CD4 count.

Potential Competing Interests: The authors report no competing interests.

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