



Infant HIV Outcomes at 18 Months and PMTCT service factors at Lumumba Health Centre, Kisumu, Kenya

Odhiambo N.^{1,2}, Lewis-Kulzer J.^{2,3}, Armes M.N.^{2,3}, Abuoqi L.^{2,4},
Eliud A.^{1,2}, Owuor K.^{1,2}, Bukusi EA.^{1,2}, Cohen CR.^{2,3}

1. Research Care and Training Program, Kenya Medical Research Institute (KEMRI) Nairobi, Kenya
2. Family AIDS Care and Education Services (FACES), Kisumu, Kenya
3. Department Obstetrics, Gynecology and Reproductive Sciences, University of California San Francisco (UCSF), USA.
4. Department of Pediatrics, University of Colorado Denver, Aurora, Colorado



Background

- Every year 3.2 million children get infected with HIV worldwide 90% of the infections occur in Africa
- In Kenya, of approximately 1.5 million children born annually:
 - an estimated 50,000 to 60,000 infants are exposed to HIV and in need of Prevention of Mother-to-Child Transmission (PMTCT)
- Nearly all infant HIV infections occur through mother-to-child transmission (MTCT)
- Without PMTCT interventions, 20% of infants infected with HIV will ultimately die before their second birthday

Objectives

- To determine the HIV point prevalence among exposed infants born to HIV-infected mothers who attended a PMTCT clinic
- To evaluate predictors for HIV acquisition



Photo by Beth Novey

Methods

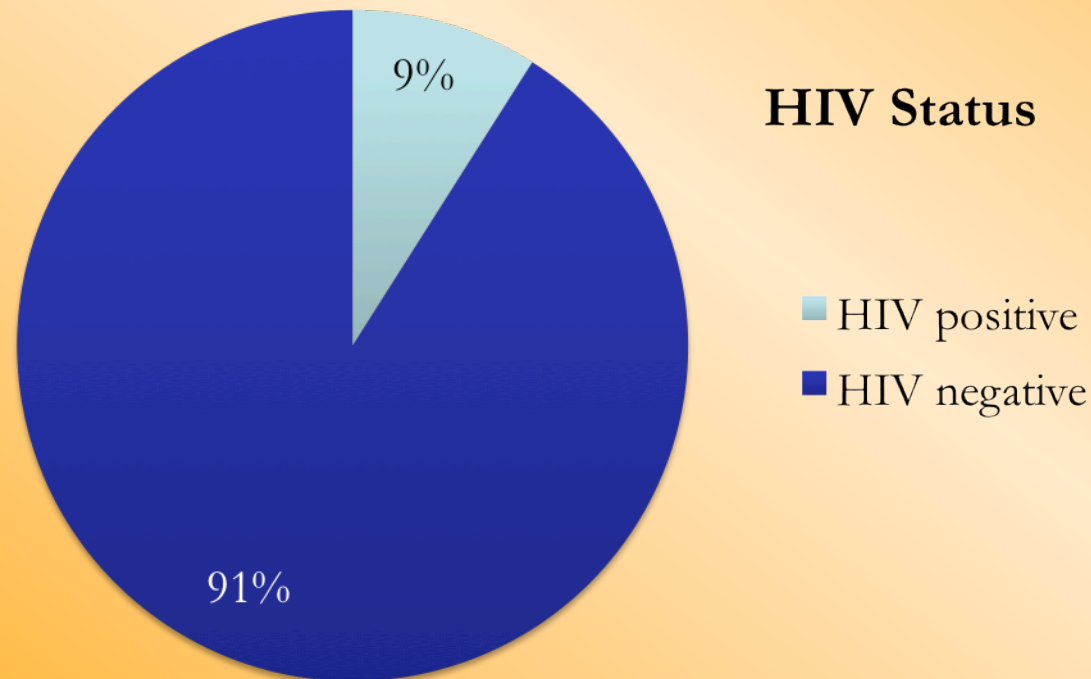
- Retrospective cross sectional study
- Lumumba Health Centre, Kisumu East
- 80 women seen daily in antenatal (ANC)
- Sample randomly selected using STATA
- Inclusion criteria: HIV exposed infants (HEI) who attended PMTCT clinic within 27 months retrospectively from the time of evaluation – Jan 2012
- Data abstracted from HEI electronic database, mother & baby patient charts and registers

Cont. Methods

- Infant HIV outcome
 - 18-month antibody test postnatally
- Predictors
 - Delivery location
 - Infant feeding mode
 - Infant ARV prophylaxis
- Analysis
 - Fisher's exact
 - Epi Info

Results – Point Prevalence

- 138 HEI examined
 - Of which 12 (9%) were HIV positive



Results - Predictors

Table 1: Findings		HIV Status		Fisher’ s Exact test
Predictor		Positive	Negative	p-value
Delivery Location		N=12 (9 %)	N=126 (91 %)	
Hospital		3	89	p<0.001
Home		9	37	
Infant feeding				
Exclusive Breastfeeding		2	100	p<0.001
Other		10	26	
ARV prophylaxis given to infant				
Yes	3	96		p<0.001
No	9	30		

Conclusions

- Infants born to HIV positive mothers are significantly less likely to acquire HIV if:
 - Delivered in a hospital,
 - Receive ARV prophylaxis, and
 - Practice exclusive breastfeeding
- Uptake of these proven preventive interventions needs strengthening to accelerate elimination of MTCT



Photo by Beth Novey

Limitations of the Evaluation

- The sample size was small, hence it is hard to generalize the findings
- The study was conducted in one facility
- There was no comparison group in this study

Acknowledgements



- “I would like to acknowledge our donors, partners, staff and patients at **FACES, KEMRI and UCSF**, who continuously support the program at Lumumba”



University of California
San Francisco

Acknowledgements

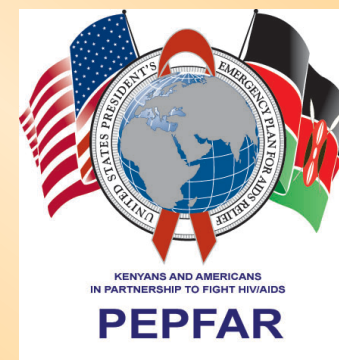


- For more information on the FACES programme, please visit www.faces-kenya.org

The findings and conclusions in this presentation are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention



Family AIDS Care and
Education Services



PEPFAR