EARLY INFANT DIAGNOSIS OF HIV IN LASUTH

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Background:

The HIV status of antenatally exposed babies can now be definitely determined at six weeks by PCR done on dry blood spot (DBS) collected on blotting paper. The service is provided free at LASUTH being one of six demonstration sites in preparation for national scale-up of early infant diagnosis (EID).

Objective:

To determine the definitive HIV status of antenatally exposed babies with a view to offering early intervention and to describe the effectiveness of the PMTCT program in LASUTH.

Methods:

The prospective study covers the first 11 months (Feb through Dec 2007) of the ongoing Early Infant Diagnosis program. Subjects were recruited through the PMTCT program of LASUTH and through referrals from other health facilities. The babies were aged between six weeks and eighteen months.

Results:



One hundred and twenty six babies recruited: 67 (53.2%) were referred from other health services and 59 (46.8%) were from the PMTCT program of LASUTH. The PCR-DNA results showed that 42 babies (33.3%) were positive for HIV: six from PMTCT and 36 referred from other health facilities. The results of eight infants (five from PMTCT and three referred from elsewhere) are still awaited. Of the positive referred infants, 15 (45.4%) were breastfed, 11 (33.3%), 4 (0.12%) received mixed feeding while the modes of feeding of three babies were not recorded. Half of the six babies who tested positive from the PMTCT program were breastfed, 2 (33.3%) had formula feeds while one received mixed feeding.

Conclusion:

Early infant diagnosis is now enhancing the effectiveness of PMTCT and needs to be strengthened.