



Southern African HIV Clinicians Society 3rd Biennial Conference

13 - 16 April 2016
Sandton Convention Centre
Johannesburg

**Our Issues, Our Drugs,
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Maternal Characteristics of Women with HIV Positive Infants: a Case Series in Routine Settings in South Africa

Geoffrey Fatti, Eula Mothibi, Najma Shaikh, Oyebola Oyebanji, Bon Egbujie, Ashraf Grimwood

Kheth'Impilo, Cape Town, South Africa

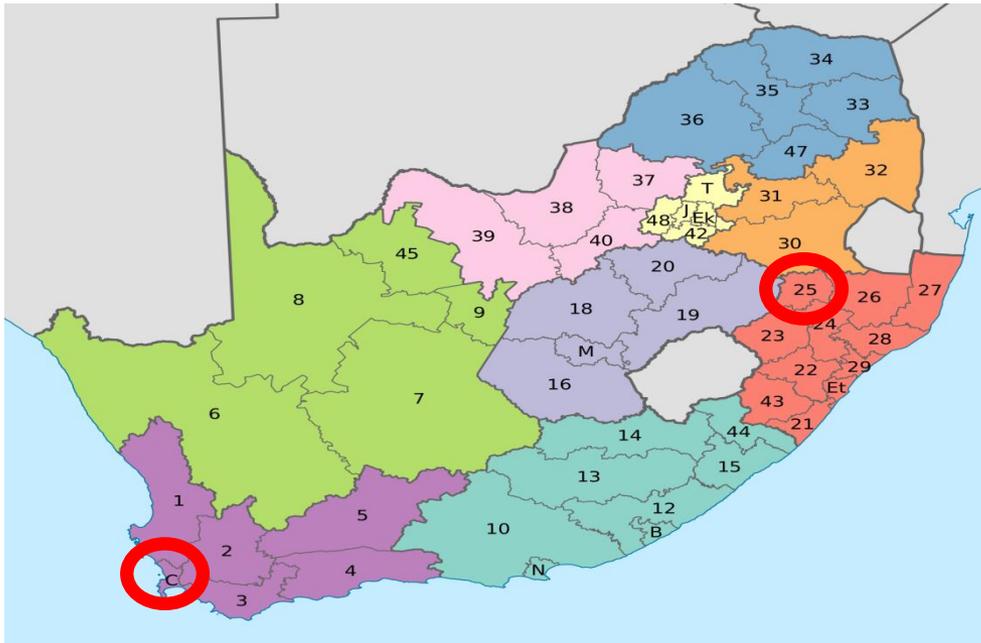
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Background

- Eliminating mother-to-child transmission of HIV is a global health priority.
- Nationally, South Africa has reduced early vertical transmission to < 3%.
- Despite overall progress, there is considerable variation in the uptake of the PMTCT cascade services across SA.
- Relative paucity of data describing the characteristics of pregnant women whose infants acquire HIV in routine settings.
- **Aim:** To describe maternal characteristics of HIV-infected infants in a routine maternal & child health program in two districts.

Methods

- Case series of mother-infant pairs where infants tested HIV-positive (≤ 18 months) at 41 public primary healthcare clinics in Amajuba and Cape Town between February 2013-December 2014.
- Facilities were supported by Kheth'Impilo, a nonprofit organization supporting DoH with public health innovations.
- Nurses abstracted clinical data from mother's folders on a routine basis.



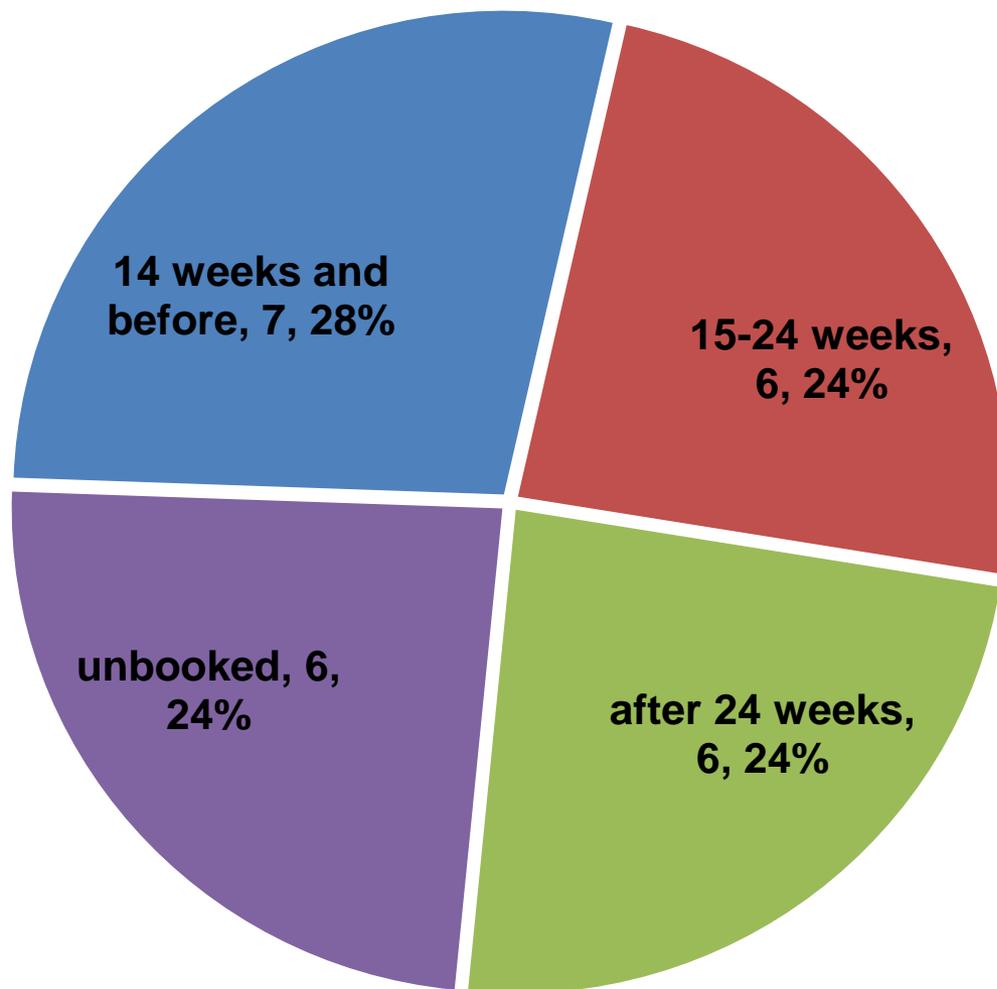
Antenatal HIV prevalences (2013):
Amajuba: 39%
Cape Town Metro: 22%

Infant 6 week PCR positivity
(2013/14):
Amajuba: 1.3%
Cape Town: 1.5%

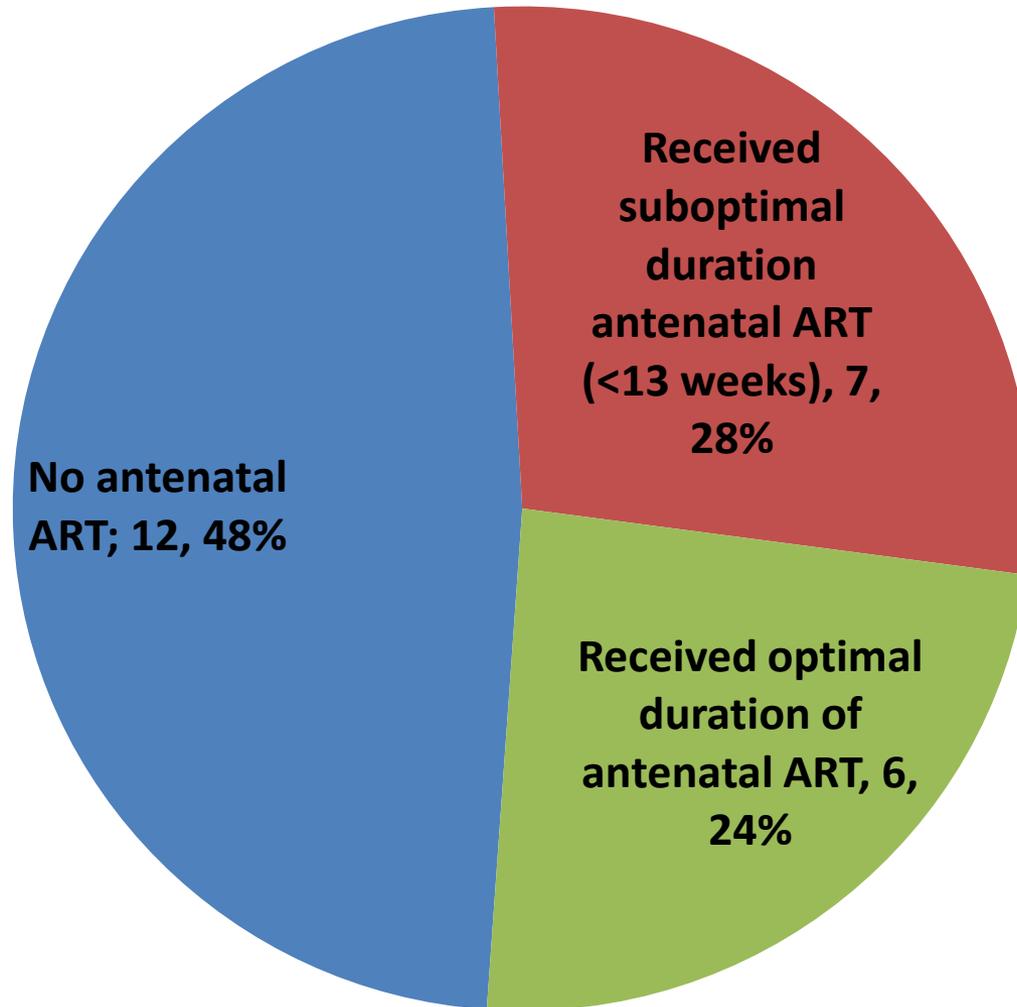
Results

- 25 mother-infant pairs included; 14 from Amajuba and 11 from Cape Town.
- Median age of mothers at delivery 23 years; 68% of women were young women (≤ 24 years).
- Median women's CD4 cell count: 345 cells/ μ L (IQR: 242-450).
- All women booked at PHC, but 14 (56%) delivered at hospitals.

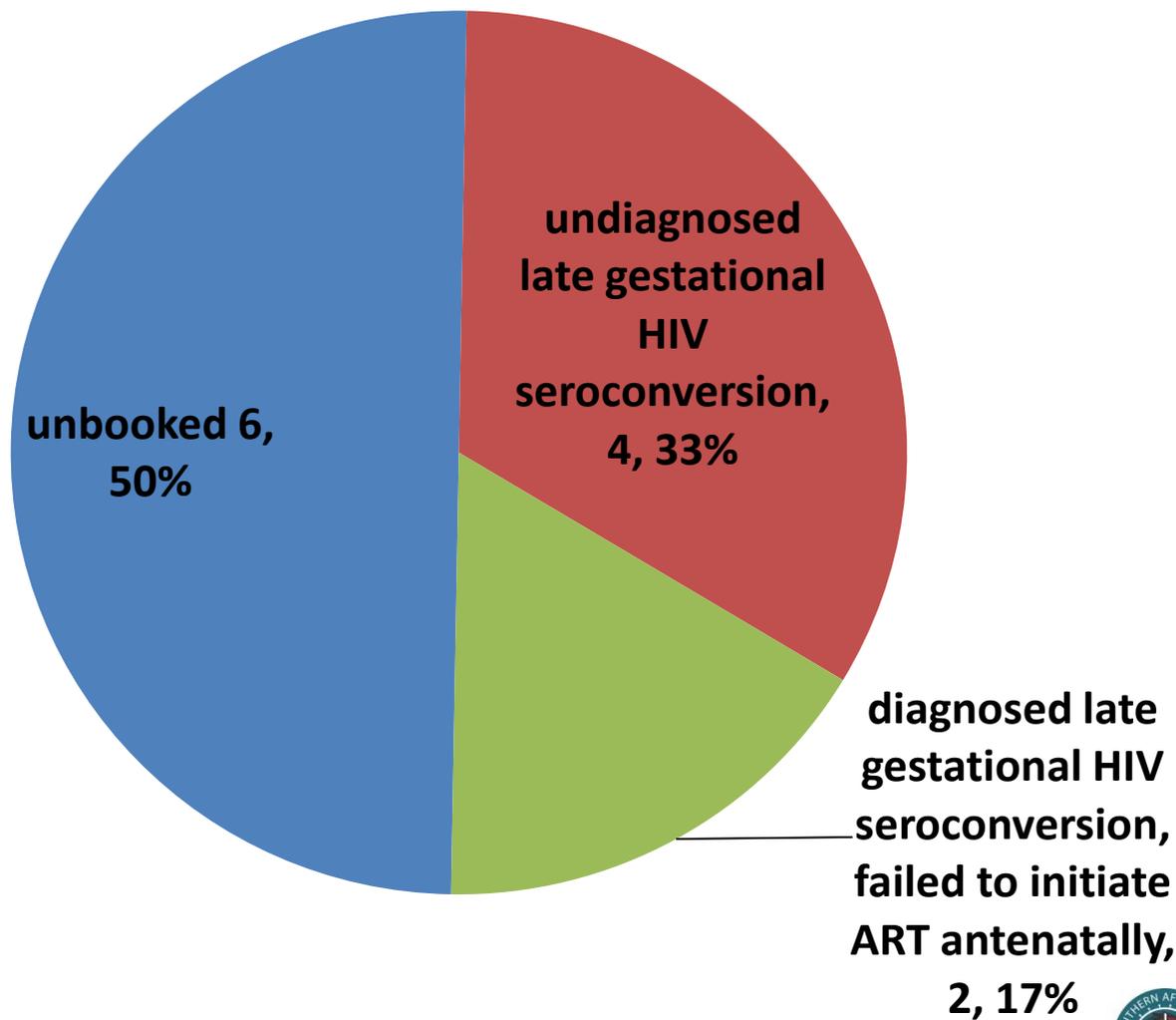
Gestational age at first antenatal clinic visit



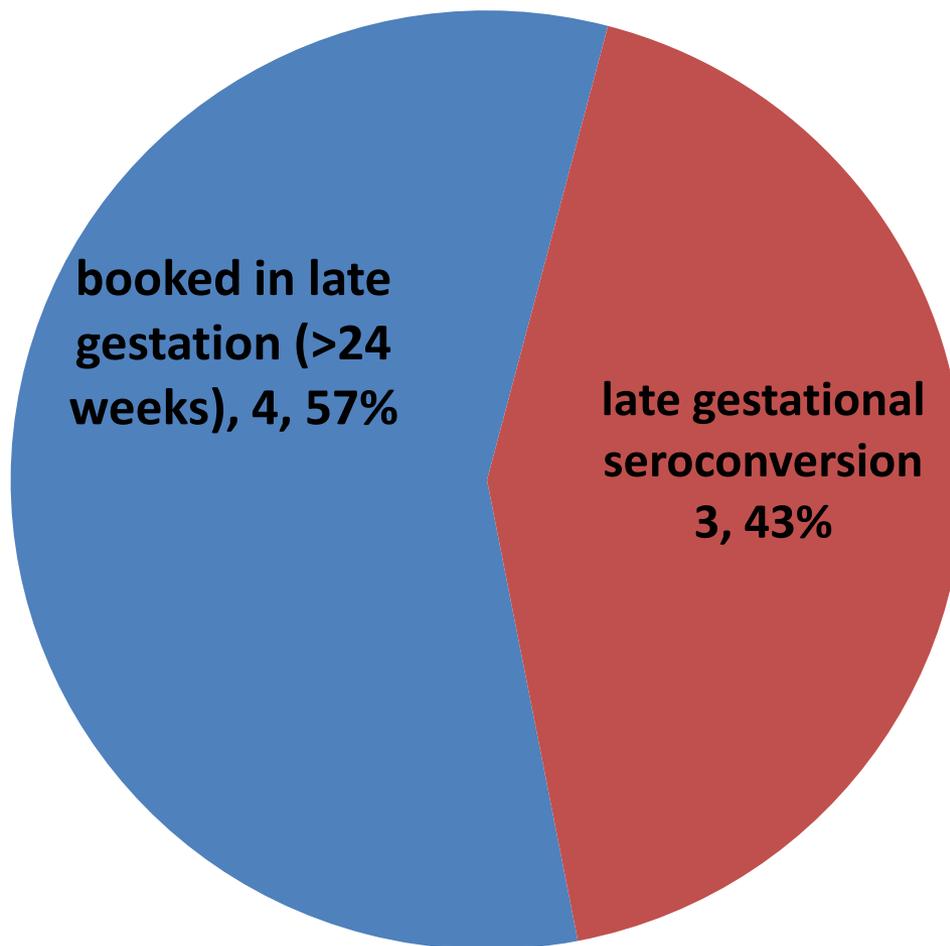
Receipt of antenatal ART



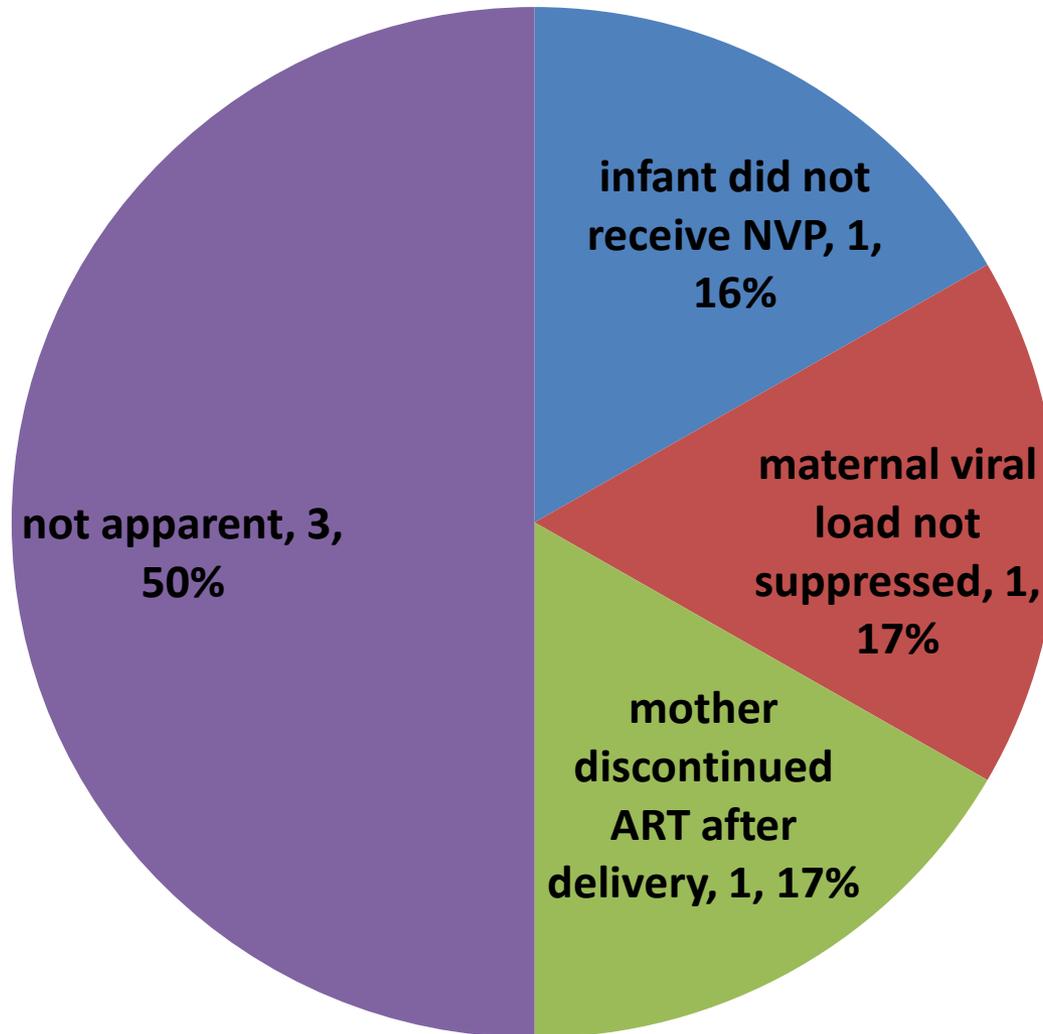
Reasons for not commencing antenatal ART (n=12)



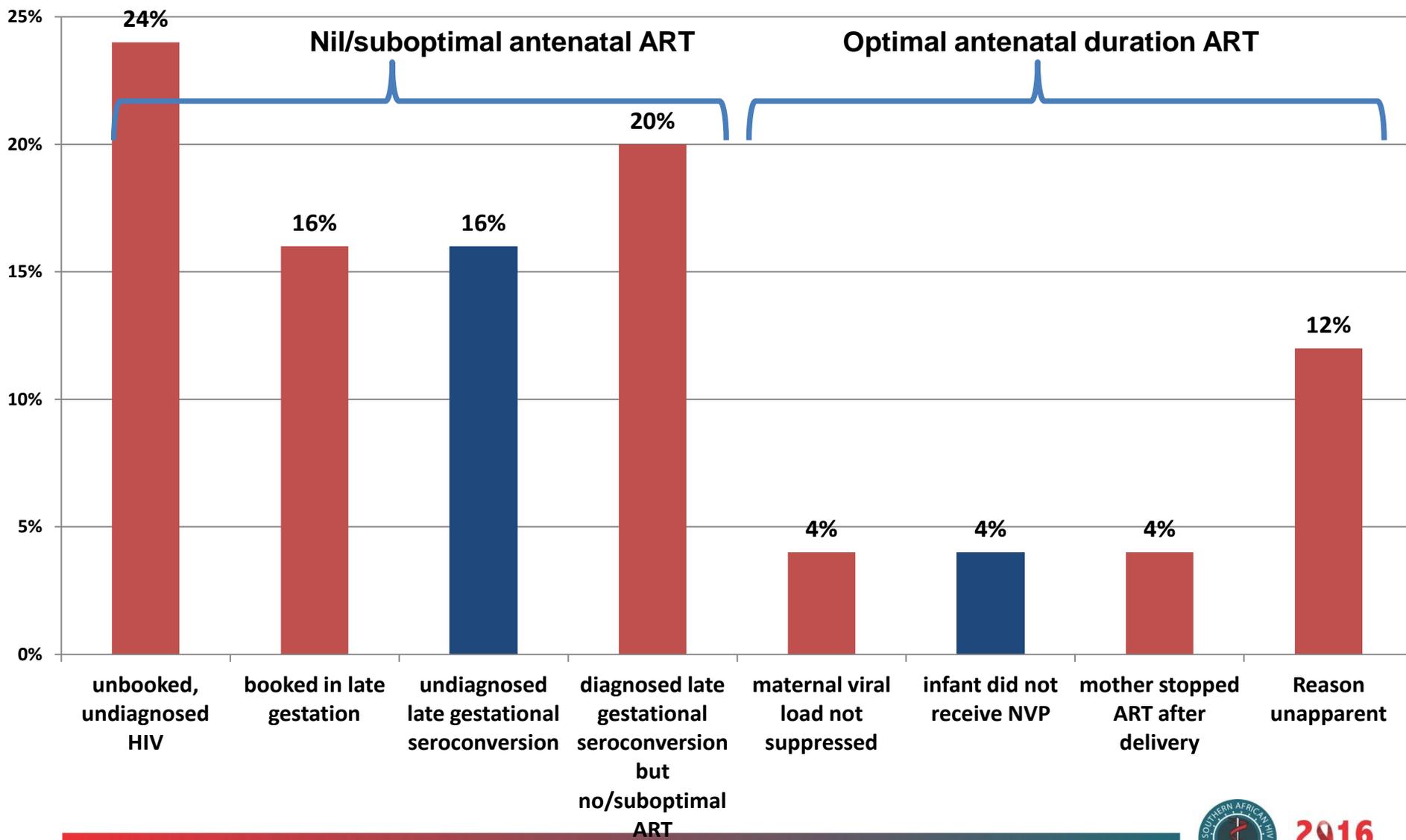
Reasons for suboptimal duration of antenatal ART (n=7)



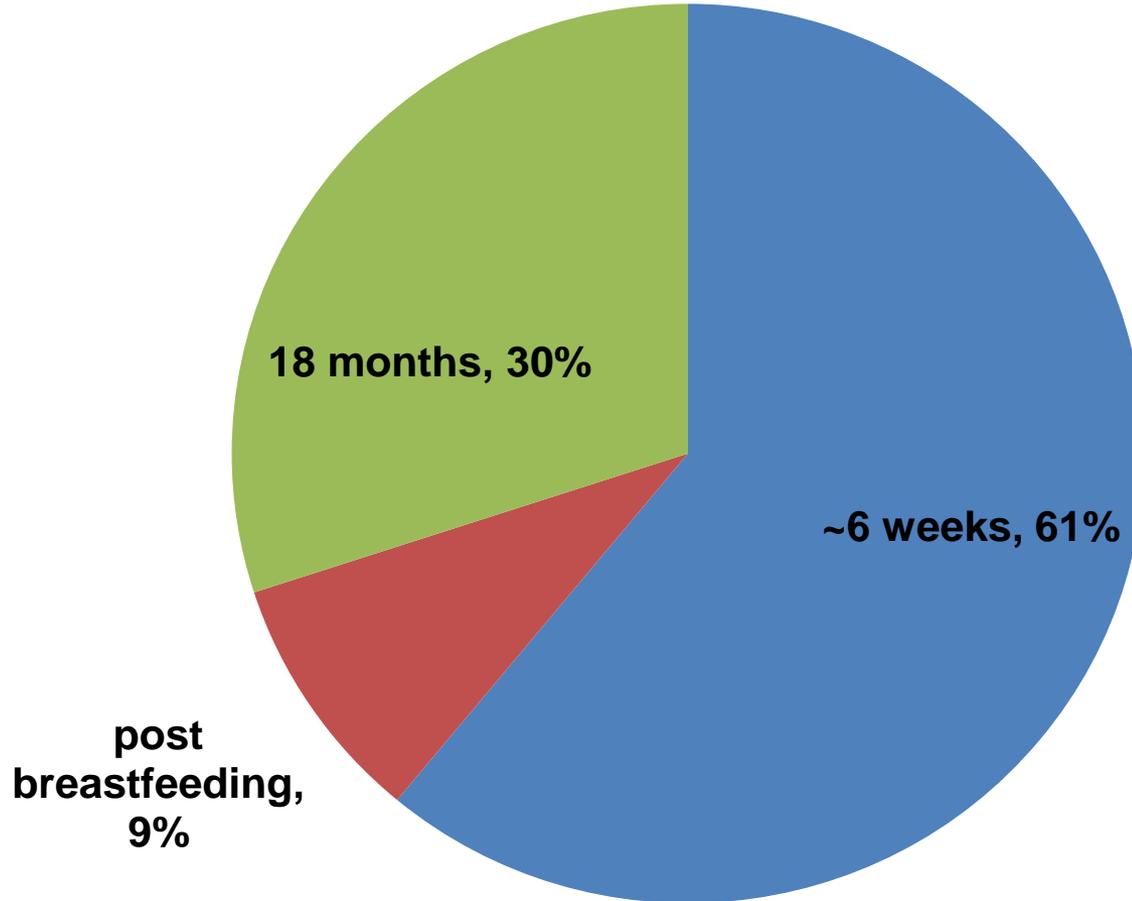
Possible reasons for transmission amongst women with optimal durations of ART (n=6)



Likely reasons for transmission: All mother-infant pairs



Infant age at diagnosis



Amongst children diagnosed after 6 weeks, 55% had a negative test at 6 weeks-late postnatal transmission; remainder were not tested at 6 weeks.

Conclusions

- >2/3 rd of women whose infants acquired HIV were young women
- An array of probable reasons for vertical transmission were apparent.
- Half of women received no antiretrovirals, with a high proportion of whom were unbooked antenatally.
- Late gestational HIV acquisition in women was associated with over a third of all vertical transmissions.
- Late postnatal transmission remains concerning, accounting for 20% or more of transmissions in this case series.
- More frequent antenatal HIV testing (4-6 weekly) should be considered for HIV-negative women, particularly younger women.
- Ongoing quality assurance and improvement is critical for PMTCT services.

Thank you

Acknowledgments

- Departments of Health of KwaZulu-Natal and the Western Cape; City of Cape Town Health.
- PEPFAR and USAID



This presentation was made possible by the Presidents Emergency Plan for AIDS Relief (PEPFAR) through the United States Agency for International Development (USAID). The content of the presentation are the sole responsibility of Kheth'Impilo and do not necessarily represent the official views of USAID or the United States Government.