Preterm Delivery and/or Low Birth Weight among Neonates Born to HIV-positive Mothers in Selected Health Facilities in Migori County, Kenya.


Affiliations: Kenya Medical Research Institute, Kenyatta University, UCSF and the Bill and Melinda Gates Foundation

Preterm Birth Initiative (PTBi), is working in 17 health facilities (hospitals and health centers) in Migori county with the aim of reducing neonatal mortality (NNM) of preterm born babies through use of four key interventions;

Background
In sub-Saharan Africa, several hundreds of pregnancies are exposed to HIV infections annually. Neonates of women living in endemic areas where HIV is a major public health problem experience a variety of adverse perinatal outcomes from this infection including Low birth weight (LBW) and/or Preterm delivery (PTD). Maternal HIV infection has been shown to be associated with these adverse perinatal outcomes.

Objective
We aim to describe maternal HIV infection in relation to preterm births, low birth weight births and term births in the 17 health facilities under the Preterm Birth initiative (PTBi) study in Migori County.

Methods
This was a retrospective cohort study whereby we reviewed maternity register data on all babies born to HIV-positive mothers from January 2017 to December 2017. Descriptive analysis was conducted to determine the prevalence of preterm, LBW, and term deliveries to HIV positive mothers. We included all neonates born to HIV positive mothers.

Results
In the year 2017, out of 9401 deliveries there were 716 (7.6%) neonates born to HIV-Positive mothers and 8685 (92.4%) neonates born to HIV-negative mothers. Out of the 716 neonates, 106 were PTD and/or LBW (14.8%) while 610 were term neonates (85.2%). Out of the 106 neonates, 42 were PTD (39.62%) while 64 were LBW (60.38%). The ratio of a HIV-positive mother giving birth to a PTD and/or LBW to term babies was 1:6 while the prevalence of a HIV-positive mother giving birth to LBW to PT was higher by 20.76%.