

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

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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. 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 neonates born to HIV-Positive 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 is 1:6 while the prevalence of a HIV-positive mother giving birth to LBW to PT is higher by 20.76%.

Conclusion

The above results demonstrates that most of the neonates of women infected with HIV within Migori County were term. The prevalence of a HIV-positive mother giving birth to a term baby in Migori County to PTD and/or LBW is higher by 70.4%.