



KNOWLEDGE, PRACTICE AND ATTITUDE OF PREGNANT WOMEN ABOUT HIV/AIDS AT N'DJAMENA MOTHER AND CHILD HOSPITAL (CHAD)

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ABSTRACT

Introduction: United Nations/ Acquired Immunodeficiency Syndrome (UNAIDS) report showed 25 million deaths due to the Acquired Immunodeficiency Syndrome (AIDS) in the world and 33.3 million persons lived with HIV/AIDS. Sub-Saharan African region was widely concerned with 68% of cases, mostly women.

In Chad, according to previous data, HIV prevalence was 3.3% and unequally distributed.

Objective: to evaluate knowledge, attitude and practice of pregnant women on HIV during antenatal consultation.

Methodology: It was a prospective and descriptive survey, of 4 months (from March 15th 2014 to July 15th, 2014) carried out at N'Djamena Mother and Child Hospital (Chad) about knowledge, attitude and practice of pregnant women on HIV during antenatal consultation. Before including patient to this survey, her consent should be gotten. Data were analyzed by SPSS 17.0.

Results: The age group 20-24 years was more represented (42.7%). The main source of information on HIV/AIDS was the radio in 71.5%.

Pregnant women' knowledge on HIV/AIDS transmission way was: 53.2% for sexual and 5.3% evoked mother to child transmission of HIV. HIV' screening result was accepted in 90.4%. HIV prevalence among pregnant women was 14.9%.

Conclusion: HIV/AIDS prevalence of pregnant women is high, but pregnant women' knowledge on HIV remains limited.

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INTRODUCTION

United Nations/ Acquired Immunodeficiency Syndrome (UNAIDS) report in 2009 showed 25 million deaths due to the Acquired Immunodeficiency Syndrome (AIDS) in the world and 33.3 million persons lived with HIV/AIDS¹. Sub-Saharan African region was widely concerned with 68% of cases, mostly women^{2,3}.

In Chad, according to previous data, HIV prevalence was 3.3% (for person of 15 to 49 years) and unequally distributed. People in rural area were less infected than those living in urban area (2.3 % versus 7%). Women were infected 2 times than men (4% versus 2%)^{2,3}. Factors like: poverty, sexual practices, and lack of information are cited among elements allowing increasing of HIV prevalence. Sensitization and behaviour change appear determinant for the decreasing of this situation. In the same way, Chad government since 2009 applied the policy of free treatment for persons infected with HIV. This policy aimed to care of pregnant women reducing mother to child transmission. Our objective is to evaluate knowledge, attitude and practice of pregnant women HIV during antenatal consultation in order to orient new strategy.

MATERIAL AND METHOD

It was a prospective and descriptive survey, of 4 months (from March 15th 2014 to July 15th, 2014) carried out at N'Djamena Mother and Child Hospital (Chad) about knowledge, attitude and practice of pregnant women on HIV during antenatal consultation.

Before including patient to this survey, her consent should be gotten.

Studied variables were: previous serological status, prevalence of the HIV, information about the HIV, perceptions and beliefs concerning HIV, transmission and HIV' preventions means, knowledge about mother to child transmission of HIV. Data were analyzed by SPSS 17.0.

RESULTS

Information on the HIV

We recorded 323 pregnant women, 317 were informed, giving a proportion of 98.14%.

Table 1 Information Source on HIV

Source	Number	%
radio	231	71.5
sensitization campaign	54	16.7
Parent	18	5.6
Health staff	10	3
Religious leaders	5	1.6
other	5	1.6
Total	323	100

Radio was cited in 71.5% followed by sensitization campaign (16.7%).

Table 2 Perception or Belief on HIV

Perception/belief	Number	%
Dangerous/incurable disease	91	28.2
Divine Sanction	56	17.3
Sexually transmitted disease	53	16.4
World curse	29	9.0
Frightens disease	23	7.1
Chronic malaria	17	5.3
Ashamed disease	15	4.6
Blood disease	14	4.3
Infectious disease	8	2.5
Salts illness	7	2.2
No answer	6	1.9
Bones disease	4	1.2
Total	323	100

Around the third (28.2%) thought HIV/AIDS is a dangerous / incurable disease.

Table 3 knowledge on HIV transmission way

HIV transmission way	Number	%
Sexual	172	53.2
Soiled objects with blood	49	15.2
Saliva	38	11.7
mother to child	17	5.3
Mosquito sting	17	5.3
Blood transfusion	11	3.4
Injection	7	2.1
Food	6	1.9
No answer	6	1.9
Total	323	100

Fifty three point two per cent (53.2%) knew that HIV is transmitted by sexual way.

Table 4 knowledge on HIV preventing means.

HIV preventing means	Number	%
Condom	156	48.3
Faithfulness	89	27.6
Abstinence	39	12.1
Protection from soiled objects	24	7.4
Divine protection	11	3.4
No answer	4	1.2
Total	323	100

Condom was reported as preventing means in 48.3%.

Table 6 knowledge on HIV' period of transmission from mother to child

period of HIV transmission	Number	%
Postnatal nursing	118	36.5
No answer	93	28.8
pregnancy	69	21.4
delivery	43	13.3
Total	323	100

For one hundred eighteen patients (36.5%) postnatal nursing are period when mother can transmit the HIV to her child.

HIV prevalence and acceptance of screening result among pregnant women

HIV screening was accepted by 291 patients (90.4%). The

remaining 32 patients (8.6%) refused.

HIV test was positive for 43 patients giving a prevalence of 14.9%. Seven patients (2.38%) didn't accept the positive result for HIV test.

DISCUSSION

All pregnant women are recommended screening for HIV infection, syphilis, hepatitis B and rubella in every pregnancy at their booking antenatal visit. Mother-to-child transmission (MTCT) of HIV infection can be greatly reduced through early diagnosis of maternal HIV infection. Perinatal HIV transmission occurs when no interventions are undertaken during pregnancy, delivery or the neonatal period. Some transmissions occur in utero, but the majority occurs at the time of delivery, with an additional risk if the newborn is breastfed. The decrease of mother to child transmission is gone with information and sensitization. Sensitization is an element bringing to behavior change. Almost all patients were informed on HIV infection. Our findings are like what reported by earlier African authors⁴⁻⁶. In Chad, The proportion is increasing than previous study that noted 64%⁷.

Among media, radio is the easiest and accessible. Then it remains the best sensitization way for HIV/AIDS⁵⁻⁶. Organizations and government used it to reach populations⁸. Knowledge about HIV/AIDS is diverse. Factors like schooling, sensitization help understanding deeply HIV/AIDS. Beliefs and some attitude make HIV/AIDS wrong perception for some people. Fifty one point four per cent (51.4%) had had correct conceptions on HIV/AIDS (incurable disease, sexually transmitted disease, blood disease and infectious disease).

Seventeen point three percent (17.3%) thought HIV is a divine sanction. Findings about HIV perception were reported in various ways. For Boureima's report⁴, VIH would be an invented disease according to 31% .

Knowledge about HIV transmission mode showed that fifty three point two per cent knew sexual as main way. Soiled objects infected by blood were reported in fifteen point two per cent (15.2%). A few proportion of pregnant women (5.3%) cited mother to child transmission of HIV. Through literature, one observed a divergence about the proportion of HIV transmission' way. Tatagan⁹ and Cartoux¹⁰ on one hand reported more sexual contamination for Sallah¹¹ and Mbu¹² in the other hand, mother to child transmission was the main of HIV transmission.

HIV is preventable disease. Organizations struggling against HIV are promoting these preventable means for population. One can cite: condom, abstinence, antiretroviral drug screening...

Condom was reported as preventing means in 48.3%, faithfulness, and abstinence represented respectively 27.6%, and 12.1%. Few patients (3.4%), claimed rather for sanctification and redemption prayer. In this same way, Boureima⁴ showed 2.3% women confided in God for protection.

The mother-to-child transmission of HIV refers to the

transmission of HIV from an HIV-positive woman to her child during pregnancy, labour, delivery or breastfeeding. MTCT is by far the most common way that children become infected with HIV. Mother-to-child transmission of HIV infection can be greatly reduced through early diagnosis of maternal HIV infection. The earlier a woman becomes aware of her HIV status, the better the chance of optimizing her own health, diminishing the risk of horizontal spread to sexual partners and preventing vertical transmission. The goal is less known by patients in our survey. Five point three per cent (5.3%) cited Mother-to-child transmission of HIV among transmission way. There are disparities about moment when mother can transmit HIV to her child. For 36.5% transmission can occur during maternal nursing. Twenty one point four per cent (21.4%) cited pregnancy as moment of transmission. Contrary to ours findings, Traoré¹³ reported 83.9% pregnant women cited pregnancy as moment of transmission and 12.4% for maternal nursing.

Without treatment, the likelihood of HIV passing from mother-to-child is 15-45 percent. However, antiretroviral treatment (ART) and other effective interventions for the prevention of mother-to-child transmission can reduce this risk to below 5 percent. Then antenatal consultations are important moment for HIV screening^{5, 7, 14-16}.

Antenatal consultations are moment to propose HIV screening. Therefore, the screening is not generally accepted by all. Like us, earlier African authors reported a refusal proportion among pregnant women¹⁶⁻¹⁹. HIV prevalence was 14.9%. Our findings are in common with earlier studies that reported HIV prevalence between 5.5% à 38.7%¹⁶⁻¹⁹.

CONCLUSION

HIV prevalence among pregnant women is high. Sensitization for screening during antenatal consultation is important for reducing Mother-to-child transmission. More actions are needed for population's sensitization on HIV/AIDS.

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