



PMTCT PROJECT

(Prevention of Mother To Child Transmission of HIV/AIDS)

Period Covered: Annual Report March 2006 - April 2007

INTRODUCTION

The programme was started in the year 2003 April with an aim of reducing HIV/AIDS infection from mother to child in Karungu division under the supervision and sponsorship by CMMB (Catholic Medical Mission Board), their aim being “born to live”

ACTIVITIES

Trainings

- Trainings have taken place with the first being training of the existing traditional birth attendants on improved ways of safe delivery since 80% of deliveries are conducted at home and not in hospitals. This was also to encourage them to refer Ante-natal mothers to the clinic as ante-natal care was not well undertaken in the vast Karungu division.
- In the year 2006-2007, a total of 8 PMTCT nurses have been trained, 6 by CMMB and 2 by MEDS.
- As part of sensitizing the community on HIV care and prevention, a 2 day PMTCT community and religious leaders seminar was held in Karungu, Kadem and part of Gwassu division on the 3rd and 4th of April 2007. This was made possible by the CMMB. Its main objectives included increasing awareness of PMTCT uptake by 80% by the end of 2007 and to create a two-way feedback mechanism.

Counselling and testing

Counselling and testing is done at every first visit to all ANC mothers to avoid missed opportunities, hence increase birth of HIV negative babies. Emphasis is put on the following:

- Results are given to the mothers, whether positive or negative
- Nevirapine and AZT given to positive mothers
- Exclusive breastfeeding
- PCR (*Polimerous Chain Reaction*) sample collection at 6 weeks to all exposed children
- Delivery in the hospital for all positive mothers and prim-gravidas.
- Testing at 18 months

Introduction of PCR (Polimerous Chain Reaction) test in 2005 by the CDC has offered to do the infant PCR test for free for HIV exposed infants from the age of 6 weeks and not at 18 months as it was before, hence early management and initiation of ARV.

So far, the number of children testing negative has increased following the PMTCT interventions. A second PCR test is normally done 2 months after a negative result hoping it remains the same with complete cessation of breast milk.

PCR TESTS DONE FOR THE YEAR 2006

MONTH	N° OF TESTS	NEGATIVE	POSITIVE
JANUARY	1	1	0
FEBRUARY	2	1	1
MARCH	0	0	0
APRIL	12	11	1
MAY	6	4	2
JUNE	0	0	0
JULY	10	8	2
AUGUST	16	14	2
SEPTEMBER	12	8	4
OCTOBER	27	NOT RETURNED	NOT RETURNED
NOVEMBER	11	9	2
DECEMBER	4	4	0
TOTAL	103	62	14

Negative 81.58%
Positive 18.42%

CHALLENGEES

- Follow-up of mothers and children since the programme started
- Mothers still practice mixed feeding
- Disclosure of test results to partners since mothers come alone to the clinic
- Stigmatization as concerns to the HIV status

ACHIEVEMENTS

- Quite a number of men have started coming to the clinic
- The rate at which HIV is transmitted has reduced
- Number of ANC mothers has also increased
- Small gifts of sugar and soap alternated with rice are given to the mothers and this has seen an increase in general MCH clinic attendance.

PMTCT STATISTICS FOR THE YEAR MARCH 2006-APRIL 2007

MONTH	ANC FIRST VISIT	COUNSELLED AND TESTED	ANC HIV POSITIVE
MARCH 06	35	14	7
APRIL 06	28	14	2
MAY 06	48	32	8
JUNE 06	34	27	5
JULY 06	32	40	7
AUGUST 06	42	51	9
SEPTEMBER 06	26	40	5
OCTOBER 06	36	32	4
NOVEMBER 06	44	39	3
DECEMBER 06	22	25	2
JANUARY 07	22	12	4
FEBRUARY 07	33	20	5
MARCH 07	28	20	7
APRIL 07	38	25	6