

Type: Poster Presentation

Final Abstract Number: 42.128
 Session: Poster Session II
 Date: Friday, March 4, 2016
 Time: 12:45-14:15
 Room: Hall 3 (Posters & Exhibition)

Mothers' knowledge and practice on modified infant feeding for prevention of postnatal HIV transmission in post conflict northern Uganda district

R. Naturinda^{1,*}, G. Akello², C. Muwonge³, V. Nyakato², A. Bameka⁴, J. Esiru⁵, D. Amone², A. Wokorach⁵, L. Oonyu⁶, L. Ssekiswa⁷

¹ Uganda Malaria Research Centre, Kampala, central Uganda, Uganda

² Gulu University, Gulu, Uganda

³ Fort portal Hospital, Fort Portal, Uganda

⁴ Jinja Hospital, Jinja, Uganda

⁵ Lacor Hospital, Gulu, Uganda

⁶ Mbale Hospital, Mbale, Uganda

⁷ Hoima Hospital, Hoima, Uganda

Background: Human Immunodeficiency Virus largely has contributed to infant and child mortality in Uganda today and Africa at large. Women have the potential to transmit HIV to their children during pregnancy, labor and post-natally; about 30-40% of these children acquire the infection in the postnatal period (<http://womenchildrenhiv.org>). To minimize postnatal mother to child transmission (MTCT) of HIV, Various feeding options have been tried but their success has been challenged because little is known about the mothers' beliefs and knowledge about such measures, which thus calls for further investigations into this practice.

Methods & Materials: We did a descriptive cross sectional survey in a post conflict district (more than 2 decades of unrest) to assess the mothers' knowledge and practice of modified infant feeding (MIF) in prevention of postnatal MTCT of HIV. We interviewed HIV positive mothers bringing their children to Young Child Clinic (YCC) and Early Infant Diagnosis clinic (EID) at Gulu Regional Referral Hospital (GRRH) from December 2012 to February 2013.

Results: Out of the 400 HIV positive mothers that were interviewed, 260 (65.1%) were aware of MIF but only 129 (49.6%) put the knowledge into practice

About 73.6% of the mothers were aware of initiating supplementary feeds at 6 months, 91.71% knew they were meant to wean off their babies at the age of one year; 67.4% were informed about replacement feeding. About Practice, 69.3% were breast feeding their infants at the right frequency, 59% introduced supplementary feeds at the right time and 93.5% weaned at the right time.

Conclusion: A good proportion of the HIV positive mothers (65.1%) were knowledgeable about MIF but very few (49.6%) were applying the knowledge which therefore means that there is still a high risk of MTCT of HIV. Therefore this means that apart from knowledge, other factors such as mothers' attitude towards MIF, mothers' income and other maternal illnesses other than HIV need to be studied.

<http://dx.doi.org/10.1016/j.ijid.2016.02.594>

**Type: Poster Presentation**

Final Abstract Number: 42.129
 Session: Poster Session II
 Date: Friday, March 4, 2016
 Time: 12:45-14:15
 Room: Hall 3 (Posters & Exhibition)

CD4 pattern in HIV positive patients on HAART exposed to moringa oleifera leaf powder in south east Nigeria

E.N. Ogbuagu^{1,*}, S. Ufearo², C.N. Ogbuagu³, R. Okonkwo¹

¹ Nnamdi Azikiwe University Teaching Hospital, Nnewi, Nigeria

² Nnamdi Azikiwe University, Nnewi, Nigeria

³ Nnamdi Azikiwe University Teaching Hospital (NAUTH) Nnewi, Nnewi, Anambra State, Nigeria

Background: HIV infects vital cells in the human immune system such as helper T cells (specifically CD4 T cells), macrophages, and dendritic cells (Cunningham et al,2010). HIV infection leads to low levels of CD4 T cells through a number of mechanisms, including apoptosis of uninfected bystander cells (Garg et al,2012) direct viral killing of infected cells, and killing of infected CD4+ T cells by CD8 cytotoxic lymphocytes that recognize infected cells (Kumar,Vinay,2012). Moringa trees are edible and have long been consumed by humans and has also been advocated as an outstanding indigenous source of highly digestible protein. Moringa has been used to combat malnutrition. Moringa's antioxidant and nutritional benefits cannot directly compete with the superior results of modern antiretroviral, even though it shows promise in providing reduced mortality rates and improved health for HIV-positive and AIDS patients.

Methods & Materials: A total of 40 (15 males and 25 females) consenting adult HIV Patients who had been on highly active anti retroviral therapy (HAART) for more than a year were enrolled into the study. The age range was from 18 to 65 years with a mean of 42.5 years. The design was longitudinal randomised convenience sample technique with pre and post treatment check up. Ethical approval was obtained from Nnamdi Azikiwe University Teaching Hospital. Subjects were exposed to 20g daily Moringa oleifera leaf powder (MOLP) mixed with any local meal prepared with palm oil daily for two months. The pre and post CD4 counts were analysed.

Results: The result showed a marked increase in the male post-test CD4 value of 496.1 ± 61.52 cells/mm³ when compared with the pre-test CD4 value of 362.7 ± 49.68 cells/mm³ [$P < 0.05$ (0.0003)]. Also there was a significant increase in the female post-test CD4 value of 547.6 ± 57.9 cells/mm³ compared with pre-test CD4 value of 459.7 ± 40.65 cells/mm³ [$P < 0.05$ (0.0031)]. Comparatively, there was a gender difference with the males (496.1 ± 40.65) gaining more than the females (547.6 ± 57.9) irrespective of the number that was enrolled ($P < 0.05$).

Conclusion: Moringa oleifera has the potential of improving the CD4 count of HIV positive patients on HAART translating to better treatment outcome.

<http://dx.doi.org/10.1016/j.ijid.2016.02.595>

