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Topic: **Human Immunodeficiency Virus (HIV) infections in rural area of Ekiti state Nigeria**

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Abstract

HIV (*human immunodeficiency virus)* is a virus that attacks cells that help the body fight infection (Lymphocyte), making a person more vulnerable to other infections and diseases. It is spread by contact with certain bodily fluids of a person with HIV, most commonly during unprotected sex or through sharing injection drug equipment. If left untreated, HIV can lead to the disease AIDS (*acquired immunodeficiency syndrome*). This study aims to determine prevalence of HIV among pregnancy women patients attended Ekiti Stats Specialist Hospital, Ijero-Ekiti. Descriptive research survey type was adopted. Medical records were collected from Health Information Management department of Ekiti Stats Specialist Hospital, Ijero-Ekiti. SPSS 19, version19 software was used to analyze data. Data were expressed in frequency expressed in percentages and bar chart. Result shown that (195) 99 % were negative and (2) 1% was positive. The ages of the women tested positive were 21 and 34 years. Mean of age group of pregnancy women were 2.97. His prevalence of HIV is low but more awareness creation should be made among the people and husband of every pregnancy women should be tested for HIV

Key words: Pregnancy, Patients, Tested, Awareness, Lymphocyte

Introduction

There are two retroviruses, HIV-1 or HIV-2. HIV-1 causes most HIV infections worldwide, but HIV-2 responsible for many HIV infections in West Africa. HIV increasingly destroy certain types of white blood cells called CD4+ lymphocytes. Therefore, when HIV kills CD4+ lymphocytes, people become more susceptible to attack by another infectious organisms (Edward,2021). Both HIVs are the outcome of multiple cross-species transmissions of simian immunodeficiency viruses (SIVs) naturally infecting African primates (Sharp & Hahn, 2011). HIV can be transferred through the exchange of a different body fluids from infected people, such as, vaginal secretions, blood, breast milk and semen. HIV can also be transferred through a mother to her child during pregnancy and delivery. Individuals cannot become infected through ordinary day-to-day contact such as hugging, kissing, shaking hands, or sharing personal objects, water or food (WHO, 2021). Some of the critical conditions of HIV infection, including death, usually result from these other infections and not from HIV infection directly (Edward,2021).

According to WHO, (2021). Stated that people living with HIV have a tendency to be most infectious in the first few months after being infected, many are incognizant of their status until the later stages. In the first few weeks after first infection people may experience no symptoms or an influenza-like illness including fever, headache, rash or sore throat. As the infection progressively subvert the immune system, they can develop other signs and symptoms, such as inflamed lymph nodes, weight loss, fever, cough and diarrhoea. Without treatment, they could also arise to severe illnesses such as tuberculosis (TB), cryptococcal meningitis, severe bacterial infections, and cancers such as lymphomas and Kaposi's sacoma.

Acquired Immune Deficiency Syndrome (AIDS) was initially recognized as a new disease in 1981 when increasing numbers of young homosexual men yield to unusual opportunistic infections and rare malignancies (Sharp & Hahn, 2011). Anti-retroviral drugs has

been approved for treatment of HIV/AIDS which has greatly reduce mortality rate of HIV/AIDS in the world. HIV, the virus that causes AIDS, is one of the world's most serious public health challenges. But there is a global commitment to stopping new HIV infections and ensuring that everyone with HIV has access to HIV treatment (HIVgov, 2023). .

38 million people worldwide are correctly living with HIV or AIDs (HIVgov, 2021). Sub-Saharan Africa- more heavily affected by HIV&AIDS compared to any other region of the world: 22.5 million people living with HIV in the region,2009 around 1.3 million people died from AIDS in sub-Saharan Africa,1.8 million people became infected with HIV and 14.8 million children have lost one or both parents to HIV/AIDS (Flaria, S. 2011)

Nigeria has the second largest HIV epidemic in the world (NACA, 2017).Although HIV prevalence among adults is much less (1.3%) than other sub-Saharan African countries such as South Africa (19%) and Zambia (11.5%), the size of Nigeria's population means 1.8 million people were living with HIV in 2019(UNAIDS,2020). Many people living with HIV in Nigeria are unaware of their status. Nigeria continues to fall short of providing the recommended number of HIV testing and counseling sites. It is estimated that 58% of the people living with HIV are women in Nigeria. People in rural area are not care to know their HIV/AIDS status. This study is delimited to pregnancy women attended antenatal in Stats Specialist Hospital, Ijero-Ekiti from January 2019 to December 2020. Therefore the purpose of this study was to determined prevalence of HIV/AIDS in rural area in South West Nigeria.

Method

Descriptive research survey type was adopted. Medical records of pregnancy women were collected from Health Information Management department of Ekiti Stats Specialist Hospital, Ijero-Ekiti. Data collected were analyzed by using BMI SPSS Software, windows version 19.0 (SPSS version 19, Chicago,IL. Data were expressed in frequency, percentages and bar chart.

Results

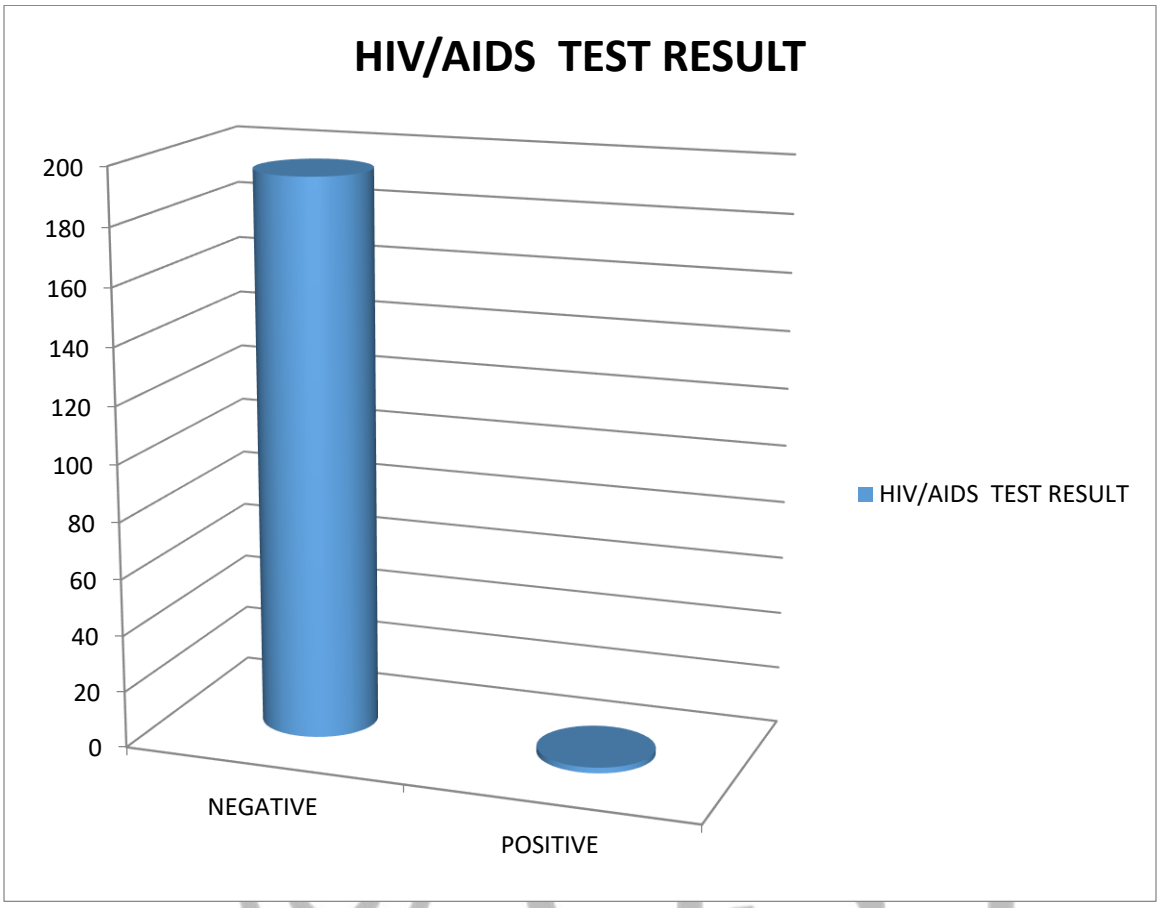
The study was carried out on 197 pregnancy women attended antenatal at State Specialist Hospital in Ijero-Ekiti. Age range of 18-47 years stratified in age groups (18-22, 23-27, 28-32,33-37, 38-42, >=43). The age mean ± deviation of the study participants was 2.97 ±1.12 year. This is illustrated in table 1. Result shown that (195) 99 % were negative and (2) 1% was positive in ratio of 99: 1 respectively. The ages of the women tested positive were 21 and 34 years. This is illustrated in fig. 1

TABLE ONE:

	Frequency	Percent
18-22	21	10.7
23-27	47	23.9
28-32	63	32.0
33-37	49	24.9
38-42	16	8.1
43-47	1	.5
Total	197	100.0

	N	Means	Standard deviation
Age	197	2.97	1.12

Figure 1



Discussion

The results of this study revealed that 1% of pregnancy women were positive while the 99% were negative to HIV/AIDS. This study similar to some studies carried out in Ekiti state, stated that the HIV prevalence for Ekiti State has risen from 0.2 to 2.9% (NARHS, 2012; Sentinel Survey, 2014). However, the study by Ologunde et al who reported prevalence of HIV/AIDS among pregnancy women at Ikere Ekiti was 4.3%, is disagree with this study. The study by Daramola et al who reported on Prevalence of HIV Infection among Adolescents and Young People at a Tertiary Health Facility in Ekiti State, Southwest Nigeria was 3% is contrary to this

study. The variation in the findings it may be different in locations within the state and increase in HIV/AIDs sanitizations in rural area among the pregnancy women during antenatal visit to the clinic or hospital. It has been Ekiti state policy for every pregnancy women should be tested for HIV/AIDs. This study found that the age of the women that positive was in between 21 to 34; shows that they were young women. Young women have a higher HIV prevalence and are infected earlier in life than men of the same age group (NACA, 2015). In 2016, more than 46,000 young women were infected with HIV compared to 33,900 young men (UNAIDS, 2018).

Conclusion and Recommendation

Ekiti state has the lowest prevalence of HIV ranks in Nigeria. Therefore, State Government, NGOs and health educators should create more awareness HIV/AIDS in the rural area in order to prevent sudden surge of HIV. Husband of pregnancy women should be also tested for HIV.

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