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A study of clinical profile of HIV in pediatric patients

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Purpose: To evaluate the modes of clinical presentation and transmission of HIV, opportunistic Infections (OI's), association of tuberculosis in HIV and its relation with CD4, clinical and immunological response of ART and its side effects and failure.

Methods: Prospective study on children living with HIV/AIDS (CLHA) >18 months to 12 years of age admitted and attended in pediatric department. Complete history, physical examination, diagnosis age, symptoms and opportunistic infections, serial CD4 count every 6 month were taken into consideration.

Results & Discussion: All CLHA were affected with OI's after 7 years when diagnosed. 75.52% (219 patients) of newly diagnosed CLHA were symptomatic at the time of presentation. Maximum numbers of symptomatic CLHA fall in WHO clinical stage 3 and based on CD4 count maximum numbers of CLHA have either no or mild immunosuppression. So, it concludes that CLHA having severe clinical disease can have no or mild immunosuppression. Therefore, CD4 count and clinical staging should be done before starting ART. Most common presentations were fever and weight loss followed by chronic cough and oral thrush and most common sign was hepatosplenomegaly. 52 CLHA (37.58%) suffered from TB had CD4 count less than 500. So, at low CD4 counts it was an OI and high CD4 count it was more of a co-infection. 79% of CLHA were anemic and out of them 6% were severely anemic required blood transfusion. 58% CLHA of >5 years were on PCP prophylaxis. Most common opportunistic infections were bacterial pneumonia and oral candidiasis. Most common side effect of ART was abnormal liver function test. 60% patients on ART substituted as because of CLHA were also having AKT. Only one CLHA was switched to 2nd line ART because of immunological failure. During the study period 6% patients died and 11% CLHA are transferred to link centers.

Biography

Pragya Khanna is a Class-1 Pediatrician at General Hospital Vadnagar and Assistant Professor at Gujarat Medical Education and Research Society (GMERS) Medical College Vadnagar, Mehsana, Gujarat, India. She has finished her Bachelor of Medicine and Bachelor of Surgery (MBBS) in 2004 and Pediatric Residency in 2009. She has worked in Special Newborn Care Unit (SNCU) funded by UNICEF - Level 2 Neonatal Care Unit, District Hospital, Shivpuri from July 2009-Jan 2011 and General Hospital, Visnagar, Gujarat from Mar 2011-Nov 2014. She is certified in facility based newborn care under National Neonatology Forum (NNF) and Pediatric Advanced Life Support. She has attended a workshop on Neonatal Ventilator in Ahmedabad, India. She has research interest in infectious diseases in children especially HIV, tuberculosis, malaria and hepatitis B, neonatal critical care, childhood obesity and neonatal resuscitation. She has been involved in newborn care training to auxiliary midwives, skilled birth attendant training and various CMEs.

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