

**THREE-YEAR EVALUATION OF UPTAKE AND OUTCOMES OF THE MTCT
PROGRAM AT MOI TEACHING AND REFERRAL HOSPITAL**



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ABSTRACT

Background: There has been a dramatic rise in prevention of mother-to-child transmission (pMTCT) of HIV programs in Kenya since the year 2000 due to an increase in paediatric HIV/AIDS resulting from mother-to-child transmission. Although most of these programs have laid down clear-cut objectives and targets for their activities, what is lacking is regular evaluation to demonstrate efficiency, effectiveness and impact of these programs. The pMTCT program at MTRH had similarly not been evaluated since 18th March 2002 when it was initiated even though the program objectives indicate that an evaluation should have been done after two years. Therefore, a study to evaluate this program was necessary so as to show to what extent the program has been able to reduce MTCT of HIV by assessing the uptake and outcome trends from the program.

Objective: To assess selected trends in uptake and outcomes of the pMTCT program at MTRH for a period of three years.

Study Design: Cross-sectional descriptive study.

Study Setting: Moi Teaching and Referral Hospital, Eldoret, Western Kenya.

Subjects: Eligible subjects were HIV-positive pregnant and postnatal women plus their children who had been exposed to vertical transmission of HIV, and recruited on the pMTCT program between 18th March 2002 and 14th March 2005.

Main Outcome Measures: HIV infection status of children on the program at six to eight weeks (or first encounter) and at more than eighteen months of age.

Analysis: Data analysis was done using SPSS version 11.0. Both univariate and bivariate analysis was done.

Results: A total of 28570 mothers attended ANC plus maternity services at MTRH during the study period. Out of these, 67.7% were counselled for HIV. Out of those counselled 85.1% accepted to be tested and out of those tested, 8.4% were HIV positive and were recruited on the program. 31.4% of the HIV positive mothers who attended ANC at MTRH came back to deliver at MTRH, ARV uptake rate was 92.0% and partner/spousal involvement was generally poor and erratic. Overall client satisfaction with the program was good-to-excellent and the MTC transmission rate was 22.6% at 6-8weeks and 21.8% at > 18 months of age.

Conclusions: HIV vertical transmission rate among the clients of the pMTCT program at MTRH is still very significant compared to what has been achieved in the developed countries and all intervention measures should therefore be applied in tandem to prevent further transmission. ARV uptake, use of infant formula feeds and uptake of counseling/testing services are already being well utilized but use of hospital delivery and adoption of elective C/S as opposed to emergency C/S are not being uniformly practiced.