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A retrospective analysis of the burden of HIV-related admissions & mortality in Princess Marina Hospital, Gaborone in the year 2000

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Historically, facility-based information showing the prevalence of Human Immunodeficiency Virus and Acquired Immunodeficiency Syndrome related (HIV/AIDS-related) conditions has not been analysed in Botswana. The main objective of the study was to analyse the proportion of HIV-related admissions and HIV-related deaths in the year 2000 (pre-Anti-Retroviral Therapy era) together with the associated socio-demographic factors. Patients' medical records from Princess Marina Hospital (PMH), (N=9795) for the year 2000 were reviewed. Cases were identified by documented HIV status and/or using section B20-B24 of the International Classification of Diseases (ICD 10 B20-B24) list of opportunistic infections. Outcomes were the proportion of HIV-related admissions and deaths to all admissions and deaths, respectively. The in-hospital Case Fatality Rate (CFR) was also calculated. Two log-binomial regression models in STATA were used to determine factors significant for HIV-related admission and death. The proportion of HIV-related admissions and deaths were 10% (988/9748) and 38% (291/761) in the year 2000, respectively. The in-hospital HIV- Case Fatality Rate (CFR) was 29% (291/988). In an adjusted log-binomial model predicting HIV-related admission the significant risk factors were ART use (RR0.40 CI0.28,0.55) and unknown HIV status (RR3.40 CI1.91-6.08), while in the model predicting HIV-related death ART use and unknown HIV status were significant, RR0.36 CI0.14,0.93 and RR0.40 CI0.20,0.81, respectively. In conclusion, there was a significant proportion of HIV-related admissions and deaths, with high Case Fatality Rate in PMH in 2000. Although this period was before wide-scale ART use in Botswana, it was evident that ART reduced the risk of HIV-related admissions and deaths among patients studied.

Biography

Mooketsi Molefi holds a Bachelor of Medicine and Surgery and a Master of Clinical Epidemiology. He is an Epidemiologist in the Department of Public Health and Family Medicine at the newly established Faculty of Medicine, University of Botswana. He is a young enthusiastic researcher who has done marvelous HIV/AIDS research work with international collaborators from the University of Pennsylvania (USA), Harvard University (USA) and The London School of Hygiene and Tropical Medicine (UK). He is currently Principal Investigator on a multi-site adaptive open-label phase II/III randomised non-inferiority trial comparing alternative short course Ambisome regimens for treatment of *Cryptococcal Meningitis*.

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