

Retroviruses & Novel Drugs

June 08-09, 2015 Chicago, USA

Adherence to PMTCT antiretroviral therapy among HIV infected pregnant women in Area W Clinic, Francistown Botswana

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The purpose of this research was to determine the level of adherence among HIV infected pregnant women on prevention 📘 of mother to child transmission (PMTCT) antiretroviral therapy, and to establish the factors that contribute to poor adherence and their relative importance, in order to suggest intervention strategies that will improve treatment adherence among this population. The study was conducted in Area W Clinic, Francistown Botswana, and was a prospective cross sectional study using semi-structured questionnaire, and data collection form. In total, 61 pregnant women participated in the study and were all within three to nine months gestation, and had been enrolled into the PMTCT program at least more than one month previously. The following were their characteristics: 75% were within the ages of 26 to 42 years old, 90% were single, 81% had attained secondary school education, and 60% were unemployed. Adherence was considered optimum if greater than or equal to 95%. The participants demonstrated a good knowledge of the importance of PMTCT treatment adherence. Reported optimum adherence levels were 84% by virtual analogue assessment, and 82% by pill count. Ninety eight percent of participants reported they did not miss any dose during the last three days before the interview. The most important factors influencing adherence from the study were pregnancy related illnesses, medication side effects, and month of pregnancy of the patient as participants tended to adhere less as they got closer to delivery. It is therefore important for care-givers to carefully monitor patients for these effects, and to carry out continuous adherence counselling with special attention given to those approaching delivery in order to improve or maintain overall adherence to PMTCT therapy. In conclusion, adherence levels to PMTCT therapy among the population sampled was high but can be further enhanced with interventions designed to cover and improve the highlighted areas in the implementation of the preventive therapy.

Biography

Ekwu B B Ochigbo is a Registered Pharmacist and a HIV & AIDS resource person. He holds an MPhil with distinction in HIV & AIDS Management from the Africa Centre for HIV & AIDS Management, Stellenbosch University, Cape Town, South Africa. He is also the Director of TibePharmacare, a pharmaceutical and health research consultancy close corporation. His interests are in therapeutics and treatment outcomes research.

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