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Effects of meconium aspiration in new-born in developing countries in Sub-Saharan African perspective: How much HIV/AIDS's contributes

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Background: Sub-Saharan Africa still has the highest child mortality rates in the world. Global child mortality has dropped by 53% from 12.7 million in 1990 to 5.9 million in 2015. South Africa has reduced its child mortality rate from 60 deaths per every 1000 live births in 1990 to 41 in 2015, though the MDG target is 20.

Objective: To find out the Infant Mortality due to Meconium Aspiration Syndrome how much it contribute in Child Mortality where Home delivery & HIV/AIDS are predominated.

Methods: Our study were over-served and put on consideration of the following criteria: Detection of prematurity and fetal gasping secondary to hypoxia, inadequate removal of meconium from the airway prior to the first breath and use of positive pressure ventilation (PPV) prior to clearing the airway of meconium etc. The inhaled meconium can cause a partial or complete blockage of the airways, causing difficulty breathing and poor gas exchange in the lungs. In addition, the substance is irritating and causes inflammation in the airways and potentially, causes chemical pneumonia. Factors that promote the passage of meconium in utero include the following: Placental insufficiency, maternal hypertension, preeclampsia, oligohydramnios, maternal drug abuse, especially of tobacco and cocaine, maternal infection-corioaminitis, etc.

Results: The possibility of inhaling meconium occurs in and around 10% of all births. Out of this 1-3% causes MAS. It generally happens after 34 to 42 weeks of gestation. 30% of them need ventilation. In the industrialized world, meconium in the amniotic fluid can be detected in 8-25% of all births after 34 weeks' gestation. Of those newborns with meconium-stained amniotic fluid, approximately 10-15% develop meconium aspiration syndrome.

Conclusion: Our study concludes in HIV/AIDS and TB pre-dominated developing countries with less availability of prenatal care and where home births are common, incidence of meconium aspiration syndrome is thought to be higher than and are associated with a greater infant mortality rate.

Biography

Mir Anwar was graduated in Medicine from Bangladesh in 1975. He obtained Post-graduation in Pediatrics from Ireland in 1982. He completed his MPH concentration Maternity and Child Health from University of Massachusetts, USA in 2003. Then he joined in UN/ WHO and worked as a Pediatric Consultant & Public Health Specialist, around the world including Asia, Japan, Middle East, Africa, Pacific Island, Ireland and USA. Since 2007 he has been working in South Africa in different provinces of South Africa with the Department of Health. Presently he is working as a Clinical Medical Manager in Richmond Chest Hospital, KZN- South Africa. His main interest presently is in Childhood TB and HIV in Sub-Saharan Africa. In his long carrier in Pediatric and Public Health he had attended several International Congress, Conferences and Seminars and presented his original work. Some of them were published in International Journals including *American Child Neurology Journal*, *Japan Pediatric Neurology Journal*, *Pakistan Pediatric Journal*, *Bangladesh Child Medical Journal*, *Nigerian Journal of Obstetrics and Gynecology* etc. For his work he is honored by American Academy of Pediatrics, Royal College of Health, UK and International College of Pediatrics etc. His biography was published in Who's Who in Medicine Cambridge, UK in 1985.

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