A retrospective analysis of the burden of HIV-related admissions and 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 analyzed in Botswana. The main objective of the study was to analyze 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 (RR 0.40 CI 0.28, 0.55) and unknown HIV status (RR 3.40 CI 1.91-6.08), while in the model predicting HIV-related death ART use and unknown HIV status were significant, RR 0.36 CI 0.14, 0.93 and RR 0.40 CI 0.20, 0.81 respectively. In conclusion, there were 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 a Principal Investigator on a multi-site adaptive open-label phase II/III randomized non-inferiority trial comparing alternative short course Ambisome regimens for treatment of Cryptococcal meningitis.

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