Prevalence of malnutrition and its associated factors among adult people living with HIV/AIDS receiving anti-retroviral therapy at Butajira Hospital, southern Ethiopia

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Background: Malnutrition and HIV/AIDS are highly prevalent in Sub-Saharan Africa and they are linked in a vicious cycle. Intestinal parasite co-infection worsens the effect of malnutrition among HIV patients. However, the magnitude of malnutrition and its associated factors among people living with HIV/AIDS are not well understood at Butajira in particular and in Ethiopia in general.

Objective: The aim of this study was to assess the prevalence of malnutrition and its associated factors among adult people living with HIV/AIDS receiving ART.

Methods: Institution based cross-sectional study was conducted and systematic random sampling technique was used to select study subjects. A total of 305 study subjects were enrolled in the study. Structured and pre-tested questionnaire were used to collect socio-demographic, clinical and nutritional related data. From each sampled patient, anthropometric and laboratory data were collected. Both bivariate and multivariate logistic regression analyses were used to assess the effect of the various factors on the level of malnutrition. P value ≤0.05 at 95% CI was considered statistically significant.

Results: The overall prevalence of malnutrition was 25.2% (95% CI: 20.0%–30.2%), of which 49 (63.6%), 19 (24.7%), 9 (11.7%) were mildly, moderately and severely malnourished, respectively. Multivariate logistic regression analysis revealed that living in rural area (AOR=1.98, 95% CI: 1.10, 3.53), anemia (AOR=1.94, 95% CI: 1.05, 3.57), eating difficulty (AOR= 2.69, 95% CI: 1.41, 5.11), using Ready to Use Therapeutic Food (AOR= 0.18, 95% CI: 0.08, 0.40), and intestinal parasitic co-infection (AOR=2.85, 95% CI: 1.54, 5.27) were significantly associated with malnutrition.

Conclusion: Malnutrition was found to be high among HIV/AIDS patients receiving ART. Living in rural area, anemia, eating difficulty, ready use therapeutic food, and intestinal parasitic co-infection were found to be significant factors associated with malnutrition. To alleviate the problems, strengthening household food security, following up for intestinal parasites and anemia consistently, and identifying and treating the cause of poor dietary consumption as early as possible, should be considered.

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