

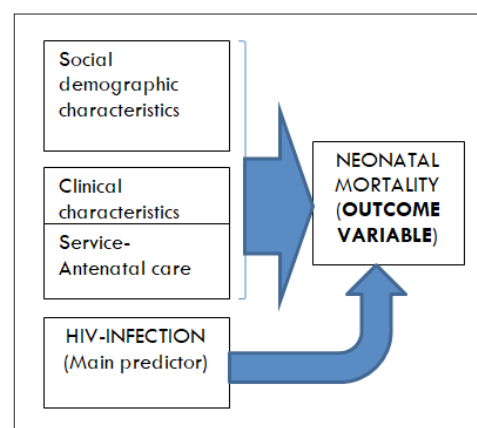
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### Risk predictors for neonatal mortality and its association with HIV infection among postnatal women attending Pumwani Maternity Hospital (PMH), Kenya

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HIV in pregnancy has contributed to early neonatal deaths. Rate of HIV among pregnant women is 15-40% in countries with the highest overall HIV prevalence. Poor pregnancy outcomes are higher among HIV+ women. PMTCT focus on vertical HIV transmission, but no data on poor pregnancy outcomes with HIV among postnatal women. The study design was unmatched case control. The information was extracted from every file records of the woman and the newborn outcome within the first twenty eight days after birth randomly and considering age, sex, anthropometric measurements and other clinical factors of the newborn and mother. A total of 256 records were reviewed to retrieve the information retrospectively on cases and controls at 1:1 ratio. Mothers' pregnancy history, clinical and social economic, comorbidities and health factors were considered for both cases and controls. The data was analyzed using SPSS version 20.0. Chi-square test was used to establish the association between the dependent and independent variables and the level of statistical significance was set at  $p\text{-value} < 0.05$ . Multiple logistic regression analyses were performed to adjust for confounding. Adjusted Odds Ratio (AOR) with corresponding 95% confidence interval was estimated. Out of 128 cases (neonatal mortalities) 12.5% were born from HIV-positive mothers compared to 3.9% among 128 controls HIV sero-positive was found to be significantly associated with neonatal mortality in bivariate analysis [OR=3.51; 95% CI:1.25-9.91;  $P=0.012$ ] but not sustained after adjusting for other factors at the multivariate analysis [AOR=2.33; 95% CI:0.76-7.15;  $P=0.139$ ]. Multiple logistic regression revealed; LBW [AOR=3.97; 95% CI:2.26-6.98;  $P<0.001$ ], co-morbidities [AOR=3.84; 95% CI:1.32-11.16;  $P=0.013$ ]. Mother's hemoglobin level [AOR=3.18; 95% CI:1.19-8.46;  $P=0.021$ ], unemployment [AOR=0.43; 95% CI: 0.22-0.85;  $P=0.016$ ]. There's increased risk of neonatal mortality with HIV infection among postnatal women.



**Figure 1:** The conceptual frame work, Independent variables and dependent variables.

### Recent Publications

1. Mosioma P, Otundo D, Wambura F Muchiri, Chimbevo Mwangandi L, Muthuka J K, Wang'ombe Ann (2017) Association of pre-antiretroviral treatment body mass index with Cd4+ T-lymphocyte immune reconstitution among HIV-infected adults and adolescents. *International Journal of HIV/AIDS Prevention, Education and Behavioral Science*; 3(3): 28-35.

### Biography

John Kyalo Muthuka has his interest in HIV/AIDS, Maternal, Child and Neonatal (MCNH), reproductive and adolescent health. He is a Health Educator and Promoter with over 9 years of experience in both local community and national settings. He is Researcher, Trainer, Lecturer and Community Organizer with a strong focus towards improving the population's quality of life through innovative health approach and research. He is a health communication expert and social/community mobilizer. His work on maternal and child health has boosted current health programs and initiatives to determine what areas need improvement in a child's health through training, develop new strategies and programs to boost child health, implement educational tools and programs that raise awareness about child health.

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