MTCT) Option B+. 

MTCT Option B+ entails that pregnant mother be enrolled on RT for life. In the first, pregnant women were given ART only for the duration of the pregnancy and stopped thereafter. With the new option being piloted, mothers will take the ARVs for life. This will not only keep the mother healthy, but also prevent the baby from acquiring HIV whilst breastfeeding and also allowing mothers to breastfeed their babies until they feel they want to stop. 

The pilot study is being conducted by ICAP and started in February in the Shiselweni region and is expected to proceed to other regions next month. This was revealed by National Pediatric ART Officer, Nobuhle Mhethwa during the second national dialogue on ART at the Mountain Inn yesterday. 

She mentioned that about 33 000 births occur in the country annually and about 15 000 of those children are exposed to HIV. While some are enrolled into ART, other mothers do not take their children to the clinic for HIV services and as a result, some die of pediatric infections. 

Mhethwa explained that in the past they only enrolled children under two years on ART, otherwise those above two years, their enrolment was determined by their CD4 cell count. The World Health organisation then recommended that all children under five years be enrolled on ART if there is a need. 

“We are trying to ensure that mothers can enrol their children on ART at the same centre where they get their own treatment by making the services for children available in all the centres. Nurses have been taught to start ART unlike in the past where patients had to wait for the doctor,” she said.

About 7 341 children in the country are on ART while adults (above 15 years) stand at 83 764 bringing the total of people on ART in the country to 91 091. Mhethwa said their coverage on pediatric ART currently stands at 70% and the aim is to reach more children who need ART with the aim of eliminating pediatric HIV at least by 2015.

“We want to expand coverage to more health facilities, improve on early HIV detection and also give more information to HIV negative mothers on how they can stay negative in order to prevent their babies, especially when breastfeeding,” she said.

STAKEHOLDERS in the health sector gathered yesterday at the Mountain Inn for the second ART dialogue. 

Present during the meeting was Senator Thandi Maziya who is very passionate about health issues, National ART Coordinator Dr Velaphi Okello, Mothers to Mothers Director Sibongile Maseko, representatives from organisations such as SWANNEPA, SAFAIDS, nurses and mentor mothers among others.

STAKEHOLDERS met to discuss achievements and challenges in both pediatric and adolescent HIV among other topics and to come up with a way forward. M2M Director, Sibongile Maseko said HIV positive mothers are faced with a huge burden when hearing about their status for the first time.

The first thing that the pregnant mother worries about is infecting the unborn baby, the challenge of choosing a feeding method for the infant, the possibilities of being stigmatised, disclosing to self as well as to others. “What becomes important is the quality of life as well as support and linkages,” she said. Maseko also observed that there is lack of Sexual Reproductive Health and HIV integration and the challenge of long queues to access health services. She said the problem should addressed holistically; medically and social support.

Laundry OPEN

Specials on Weekend

Swannepa, Snafids, nurses and mentor mothers among others.

STAKEHOLDERS met to discuss achievements and challenges in both pediatric and adolescent HIV among other topics and to come up with a way forward. M2M Director, Sibongile Maseiko said HIV positive mothers are faced with a huge burden when hearing about their status for the first time.

The first thing that the pregnant mother worries about is infecting the unborn baby, the challenge of choosing a feeding method for the infant, the possibilities of being stigmatised, disclosing to self as well as to others. “What becomes important is the quality of life as well as support and linkages,” she said. Maseko also observed that there is lack of Sexual Reproductive Health and HIV integration and the challenge of long queues to access health services. She said the problem should addressed holistically; medically and social support.