Theron Moodley: Causes and Prognosis for HIV Mother to Child transmission

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Rockhampton, Queensland Jan 14, 2022 (<u>Issuewire.com</u>) - According to <u>Dr. Theron Moodley</u>, an expert in Gynecology, HIV infection in young children is most commonly passed down from mother to child transmission (MTCT). Only 1.5-2 percent of MTCT during pregnancy is believed to occur transplacentally. Maternofetal blood transmission during parturition and postnatal breastfeeding causes most cases.

All pregnant women are encouraged to be examined for HIV, syphilis, hepatitis B, and rubella during their antenatal visit. If a woman starts declining HIV tests, Dr. Theron Moodley states that it should be noted in her maternity notes, her reasons should be carefully considered. Also, screening should be offered again around 28 weeks.

For Dr. Theron Moodley, a negative maternal HIV test at booking doesn't rule out neonatal infection; maternal infection and seroconversion can occur at any time during pregnancy and lactation. It has been well-documented in HIV-endemic nations and has been observed worldwide.

This article will deal with the various facets of the phenomenon and give informed observations based on <u>Dr. Theron Moodley</u>'s years of experience in the field.

Epidemiology through Dr. Theron Moodley's Professional Lens

In 2013, 2.5 pregnant women in every 1,000 (1,750/688,760) were HIV-positive, with the majority (five out of six) diagnosed before pregnancy. Also, Dr. Theron Moodley notes that HIV-positive women born in the UK increased from around 17,000 in 2006 to 26,000 in 2013.

Without treatment, the good doctor believes that 15-45 percent of infants born to HIV-infected mothers in the worst-affected countries are also infected. With the right interventions, transmission rates can be reduced to less than 1%.

Factors leading to MTCT Risk

<u>Dr. Theron Moodley</u> noted the following factors as the reason for risk increases:

- Elevated maternal viremia levels.
- HIV's primary antigens.
- The mother's CD4 count is lower.
- A woman will become infected with the virus for the first time during pregnancy.
- Other contagious diseases coexist with chorioamnionitis.
- Fetal scalp electrodes, forceps, and ventouse are examples of invasive intrapartum procedures.
- Rupture of the Membrane (especially if delivery is more than four hours after the membranes ruptured).
- Birth through the cervix.
- Premature delivery.

- Female babies are more likely than male babies to become infected early in life (via transplacental/perinatal routes).
- Maternal age has risen.
- The firstborn twin child (born to an HIV-infected mother).

Among the factors that minimize the risk of transmitting, Dr. Theron Moodley considers the following ones as significant:

- Anti-HIV antibody levels have increased.
- There is the option of a Caesarean section.
- Zidovudine is a drug (ZDV).
- Monitoring or more minor invasive intrapartum procedures

How to Manage the MTCT Risk?

<u>Dr. Theron Moodley</u> maintains that rapid recognition of maternal HIV infection can reduce mother-to-child transmission (MTCT). Pregnant women should be provided HIV screening early in the pregnancy because appropriate antenatal interventions can lessen the MTCT of HIV infection.

According to Dr. Theron Moodley, elective cesarean section delivery, antiretroviral therapy (ART), and avoidance of after-delivery breastfeeding are all viable interventions used to reduce HIV MTCT during the antenatal period. These interventions can reduce the risk of HIV transmission from mother to child from 25-30% to less than 1%.

Dr. Theron Moodley insists that all HIV-positive pregnant women must be screened for it and treated for genital infections throughout their pregnancy. It should be done as early in the pregnancy as possible and reiterated around the 28th week.

Pre-eclampsia, cholestasis, or other indications of liver dysfunction during pregnancy may indicate drug toxicity, and slightly earlier consultation with HIV healthcare professionals is essential.

The Prognosis

In <u>Dr. Theron Moodley</u>'s professional opinion, universal antenatal HIV screening can lead to the possibility of entirely separate artificial formula feeding when implemented. There is also a provision for ART and cesarean section delivery when necessary. Hence, he believes that MTCT is mainly preventable.

MTCT transmission has been reported in 25% of deliveries due to utter lack of intervention and was reduced to 8% with ART with ZDV. cART, cesarean section, and refraining from breastfeeding can reduce the risk of transmission to 1%.

Dr. Theron Moodley notes that MTCT rates in the United Kingdom fell from 2.2 percent in 1998 to 0.46 percent in 2010. According to current research, pregnancy does not influence the growth of AIDS, HIV-related illnesses, or severe immune suppression for close to a year after delivery or abortion.

Finally, Dr. Theron Moodley notes that HIV infection can negatively affect pregnancy, especially maternal postpartum endometritis and the increased risk of spontaneous abortion.

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