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Eliminating mother-to-child transmission of the human immunodeficiency virus in sub-Saharan Africa: The journey so far and what remains to be done



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KEYWORDS

Global Plan; Mother-to-child transmission; HIV; Priority countries; Sub-Saharan Africa Summary This review was carried out to provide a comprehensive overview of efforts toward elimination of mother-to-child transmission (MTCT) of human immunodeficiency virus (HIV) with respect to progress, challenges, and recommendations in 21 sub-Saharan African priority countries. We reviewed literature published from 2011 to April 2015 using 3 databases; PubMed, Scopus, and Web of Science, as well as the 2014 Global Plan Progress Report. A total of 39 studies were included. Between 2009 and 2013, there was a 43% reduction in new HIV infections, the final MTCT rate was reduced from 28% to 18%, and antiretroviral therapy (ART) coverage increased from 11% to 24%. Challenges included poor adherence to antiretroviral therapy, poor linkage between mother—child pairs and post-natal healthcare services low early infant diagnosis coverage, low pediatric ART coverage, and high unmet needs for contraceptive services. Future recommendations include identification of key barriers, health system strengthening, strengthening community involvement, and international collaboration. There has been significant progress toward eliminating MTCT of HIV, but more effort is still needed.

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Introduction

Human immunodeficiency virus (HIV) infection contributes significantly to causes of death in sub-Saharan African countries [1]. Mother-to-child transmission (MTCT) of HIV occurs during pregnancy, labor, and breastfeeding [2]. New pediatric HIV infections have declined since prevention of MTCT (PMTCT) programs were initiated in the 1990s, but 2009 records show that about 370,000 children were newly infected globally [3]. In 2009, it was estimated that 42,000-60,000 HIV-infected women died from HIV infection and its complications [3]. As at 2009, over 90% of the countries with high childhood HIV infection and high MTCT rates are located in sub-Saharan Africa. The majority of HIV-infected women requiring antiretroviral therapy (ART) for PMTCT are located in these countries. These countries also account for over 90% of HIVinfected children who need ART [3]. There is significant global disparity in rates of MTCT of HIV. High income countries record almost zero new pediatric HIV infections or maternal and infant mortalities due to HIV infection. However, most low and middle income countries, especially those located in sub-Saharan Africa, record substantial numbers of new infections, since relatively few women can access HIV prevention and treatment services. The same situation applies to their children, resulting in new pediatric infections and death [4].

In May 2009, the Joint United Nations Programme on HIV/AIDS (UNAIDS) made a clarion call for global elimination of MTCT (EMTCT). This call was supported by many other multilateral and bilateral agencies such as African Development Bank, Bill

& Melinda Gates Foundation, Global Fund to Fight AIDS, Tuberculosis and Malaria etc. Other bodies such as regional coordinating bodies like African Union, Caribbean Community (CARICOM) and New Partnership for Africa's Development, national governments, and their HIV/acquired immunodeficiency syndrome (AIDS) control agencies were also involved. To further this noble cause, in 2010 the World Health Organization published new guidelines, which included the best available scientific and programmatic tools to accelerate reduction of MTCT and achieve the virtual EMTCT of HIV.

In the effort to eliminate new pediatric HIV infections, an initiative known as "Global Plan Towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive" was launched in July 2011. This Global Plan covered low- and middle-income countries, but focused on high burden countries with the highest numbers of pregnant women living with HIV and new pediatric HIV infections. There are 22 such countries, referred to as priority countries, accounting for about 90% of pregnant women living with HIV globally. Twenty-one of these countries are located in sub-Saharan Africa, the 22nd being India, located in Asia. These countries need exceptional efforts to achieve the virtual elimination goal [3].

The Global Plan initiative focuses on HIVinfected women prior to pregnancy, through pregnancy, and until the end of the breastfeeding period, as well as their children. The treatment needs of the women and children, as well as the HIV preventive needs of the children aim to be met

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