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Early infant diagnosis, key factor in the effectiveness of the prevention of HIV mother-to-child transmission (PMTCT) program in Senegal

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Background: To improve care and treatment of HIV exposed children, early infant diagnosis (EID) was carried out in Senegal using dried blood spot (DBS) since 2007, making molecular diagnosis accessible for patients living in decentralized settings. This study aimed to determine the evolution of the HIV transmission rate in children from 2008 to 2015 and to analyze associate factors.

Methods: Data were analyzed using EID reports from reference laboratory database. Information related to socio-demographic characteristics, HIV profile, mother and child prophylaxis and feeding mode were included. Descriptive statistics, bivariate analysis and multivariate logistic regression analysis were performed.

Results: During this period of time, a total of 5418 samples (5020 DBS and 398 BC) from 168 primary PMTCT sites in Senegal were tested. They were collected from 4443 children with a median age of 8 weeks [1-140 weeks] and a sex ratio (M/F) of 1.1 (2309/2095). One third (35.2%; n=1564) had been diagnosed in their first 6 weeks of life. Twenty percent (20%) (n=885) have benefited of more than one molecular diagnosis testing. A significant decrease of the transmission rate was observed over the time from 14.8% in 2008 to 4.1% in 2015 (CI 95%, p<0.001) allowing to reach less than 5%.

Conclusion: This study showed the effectiveness of PMTCT and proved that the efforts in decreasing MTCT rate should be maintained and strengthened to achieve eradication of mother to child transmission rate to less than 2%.

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