

June 07-08, 2018
London, UKJ Prev Infect Control 2018, Volume 4
DOI: 10.21767/2471-8084-C1-003

HBV CARRIAGE IN CHILDREN BORN FROM HIV-SEROPOSITIVE MOTHERS IN SENEGAL: THE NEED OF BIRTH-DOSE HBV VACCINATION

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Background: Hepatitis B is a major public health problem in Senegal, a country with high prevalence and a transmission occurring mainly during infancy. Only, one 6–8 weeks vaccination campaign was initiated in 2005 and it was part of the expanded program of immunization.

Aim: The aim of this study was to determine the prevalence of HBsAg in children born from HIV-seropositive mothers by using dried blood specimens.

Methods: Specimens were collected between July 2007 and November 2012 from children aged 2–48 weeks in Dakar and decentralized sites working on HIV mother-to-child transmission prevention. HBsAg detection was performed using Architect HBsAg Qualitative II kit (Abbott Diagnostics, Ireland) and for all reactive samples confirmation was done using Architect HBsAg

Qualitative II Confirmatory kit (Abbott Diagnostics, Ireland).

Results: Nine hundred thirty samples were collected throughout the country with 66% out of Dakar, the capital city. The median age was 20 weeks and 88% of children were less than one year of age with a sex ratio of 1.27 in favor of boys. HBsAg was detected in 28 cases giving a global prevalence of 3%. According to age, HBsAg prevalences were 5.1% for children less than six weeks, 4.1% and 4.6%, respectively, for those aged 12–18 weeks and 18–24 weeks of age. The HIV prevalence was 2.6% with no HIV/HBV co-infection.

Conclusion: This study showed a high rate of HBV infection in children less than 24 months, and highlighted the need to promote birth-dose HBV vaccination as recommended by WHO.

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