

Maternal and Neonatal Management in the Cases of HIVAIDS Infected Pregnant Women in Jambi City

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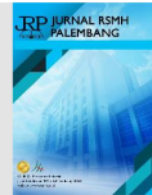
Submission date: 21-Apr-2021 01:34PM (UTC+0700)

Submission ID: 1565424750

File name: the_Cases_of_HIVAIDS_Infected_Pregnant_Women_in_Jambi_City.pdf (536.96K)

Word count: 2294

Character count: 11785



MATERNAL AND NEONATAL MANAGEMENT IN THE CASES OF HIV / AIDS INFECTED PREGNANT WOMEN IN JAMBI CITY

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Management of maternal and neonatal in pregnant women infected by HIV / AIDS in Jambi City

ARTICLE INFO

Keywords:

Neonatal Outcome
HIV/AIDS
Pregnancy

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All authors have reviewed and approved the final version of the manuscript.

<https://doi.org/10.37275/JRP.v1i2.9>

ABSTRACT

Backgrounds: HIV/AIDS is a disease that still becoming a global health problem, and also became a disease that given special attention by Sustainable Development Goals (SDGs) in 2016 points number 3. In Jambi Province recorded that in the year of 2014 the number of cumulative cases of HIV and AIDS is 145 cases of HIV and AIDS 59. Vertical transmission can occur from a mother who is infected by HIV/AIDS to their babies. To increase epidemiological knowledge of perinatal outcome from pregnant mother with HIV/AIDS infection, because in Indonesia this type of information is not much known, In Jambi This kind of information doesn't exist. **Methods:** This is a descriptive research. The data are taken from 41 registers by total sampling. The data analysis is using proportion descriptive method. **Results:** According to 41 data recorded. 35 neonates (85,4 %) delivered with weight around 2500 gram or more, 41 neonates (100 %) delivered with APGAR score (neonatal assthsxia) APGAR 7-9, 32 neonates (78,1 %) delivered by Sectio Caesarean, 40 neonates (97.6 %) born at 36 weeks, and 25 neonates (60,1 %) delivered from mothers infected by HIV/AIDS with CD 4 counts above 350 cell/ml 41 neonates (100%) born without HIV/AIDS infection. **Conclusions:** Neonatal outcome from HIV / AIDS infected mothers in Raden Mattaher the state hospital of Jambi Province were delivered with normal weight, APGAR score 7-9 (normal), delivered by Sectio Caesarea, at the age of 36 weeks or above from mother with CD4 counts over 350 cell/ml without HIV/AIDS infection.

1. Introduction

Human Immunodeficiency Virus (HIV) is a virus that attacks the human immune system causing the human body's defense system to weaken. Decreased body defense will cause the human body to be unable to fight infection and disease, resulting in opportunistic infections. HIV infection can progress to AIDS. Acquired Immunodeficiency Syndrome (AIDS) is a collection of symptoms and signs due to a decreased immune system that can be life-threatening so that until now it is a serious concern (WHO, 2014).

Until now, HIV / AIDS is still a disease that has become a global health problem and has become one of the special concerns in the 2016 Sustainable Development Goals (SDGs) program, point 3 In 2030, ending the epidemic of

HIV / AIDS, tuberculosis, malaria, and neglected tropical diseases, and combats hepatitis, water-borne diseases and other infectious diseases. Based on the latest data released by the World Health Organization (WHO) and the United Nations on HIV / AIDS (UNAIDS) 2013, the number of people with HIV in the world reaches 34 million people (WHO, 2016)

Meanwhile in Indonesia according to data released every three months by the Directorate General of Disease Control (Ditjen PP) and Environmental Health (PL), the Indonesian Ministry of Health reported that in the first and second quarter of 2014 (January to June) there were 15.534 HIV sufferers and 1.700 sufferers. AIDS. In the third quarter (July to September) added a large number,

namely 7.335 people with HIV and 176 people with AIDS, a total of 22.869 HIV sufferers and 1.876 AIDS sufferers from 1 January to 30 September 2014.

Cumulative HIV cases in Indonesia from 1 April 1987 - 30 September 2014 totaled 150.296 people, while for AIDS cases totaled 55.799, among them 16.149 women. In Jambi Province, HIV & AIDS shows a decreasing trend every year. In 2014 in Jambi Province, the cumulative number of HIV and AIDS cases was 145 HIV and 59 AIDS cases. The highest number of HIV and AIDS cases were in Jambi City with 85 cases each and 43 AIDS cases. Meanwhile, the lowest districts / cities in 2014 were Tebo and Sarolangun districts with 1 person with AIDS, and East Tanjab Regency. with 1 person with HIV (Ministry of Health, 2014).

The risk of HIV transmission can occur to health workers when assisting in childbirth, the risk of maternal death and the risk to the fetus that is conceived and born. Abnormalities that can occur in the fetus are neonatal asphyxia, low birth weight, preterm labor, spontaneous abortion and neonatal death (CDC, 2017).

To be able to further increase the knowledge of epidemiological figures on the outcome of neonates born to mothers who suffer from HIV / AIDS because in Indonesia it is not widely known, in Jambi this information does not yet exist. Therefore, researchers are interested in conducting research on maternal and neonatal management of pregnant women infected with HIV / AIDS in Jambi City.

2. Research Methods

This research is a descriptive study, looking at the maternal and neonatal management of pregnant women infected with HIV / AIDS in Jambi City. The research will be carried out in the city of Jambi by taking samples from all hospitals in Jambi City. The study was conducted from April to October 2018. The population in this study were all pregnant women with HIV / AIDS infection in Jambi City. All pregnant women with HIV / AIDS who must meet the inclusion and exclusion criteria. The inclusion criteria in this study were pregnant women with HIV / AIDS infection as evidenced by laboratory results and giving birth in Jambi City in the 2011-2018 period. Exclusion

criteria Pregnant women with HIV / AIDS infection or fetuses died during the study. Sample size was determined by *total sampling method*.

Sampling was carried out by collecting medical records from women who gave birth with HIV infection at the Raden Mattaher Regional Hospital, Jambi Province in 2011 - 2018. Sampling was carried out using a *total sampling method*. Record patient registers in the Obstetrics and Gynecology section, then select them in the medical records section. all medical records sampled were recorded and transferred to the observation table. Then pregnant women with HIV / AIDS are followed by their development until giving birth in Jambi City

3. Results

This study was carried out in RSUD Raden Mattaher using secondary data from medical records and primary data for childbirth patients with HIV / AIDS infection. Based on the collection of data on patients who gave birth with HIV / AIDS infection that was carried out at the Raden Mattaher Regional Hospital until October 2018, 41 patients who gave birth with HIV / AIDS infection were among them 32 patients who gave birth by means of Caesarean section and 9 patients gave birth by way of vaginal.

Description of Birth Weight in neonates resulting from mothers with HIV / AIDS

Based on table 1 above, it can be seen from the results of the study that 6 patients (14.6%) were born with a birth weight of less than 2500 grams and 35 patients (85.4%) were born with a birth weight of 2500 grams or more.

Features of asphyxia in neonates resulting from mothers infected with HIV / AIDS

Based on table 2 above, it can be seen from the results of the study that 41 patients (100%) were born with an APGAR score (Neonatal Asphyxia) APGAR 7-9.

Description of Mode of Delivery in neonates resulting from mothers with HIV / AIDS

Description of Gynecological Age in neonates resulting from mothers with HIV / AIDS

Based on **table 5.4** above, it can be seen from the results of the study that 1 patient (2.4%) was born at a gestational age of less than 36 weeks and 40 patients (97.6%) were born at a gestational age above 36 weeks.

Description of CD4 cell count in mothers with HIV /

AIDS who gave birth to neonates

Based on **table 5** above, it can be seen from the results of the study that 7 patients (17%) were born to mothers infected with HIV / AIDS with CD4 cell counts less than 350 cells/ml or 350 cells / ml blood. As many as 25 patients (60.1%) were born to mothers infected with HIV / AIDS with CD4 cell counts of more than 350 cells/ml blood and 9 patients (21.9%) with no CD4 cell count data.

Table 1 Distribution of Frequency of Birth Weight in neonates resulting from mothers with HIV / AIDS

No	Birth Weight	Frequency (n)	Percentage (%)
1	< 2500 gr	6	14.6
2	≥ 2500 gr	35	85.4
	Total	41	100

Table 2 Frequency Distribution of Asphyxia in Neonates resulting from HIV / AIDS infected mothers

No	APGAR	Frequency (n)	Percentage(%)
1	APGAR 0-3	0	0
2	APGAR 4-6	0	0
3	APGAR 7-9	41	100
	Total	41	100

Table 3 Frequency Distribution Mode of delivery in neonates resulting from HIV / AIDS infected pregnant women

No	Mode of Delivery	Frequency (n)	Percentage (%)
1	Vaginal	9	21.9
2	Sectio separately	32	78.1
	Total	41	100

Table 4 Frequency Distribution of Gynecological Age in neonates resulting from mothers with HIV / AIDS

No	Age Pregnancy	Frequency (n)	Percentage (%)
1	< 36 weeks	1	2.4
2	> 36 weeks	40	97.6
	Total	41	100.0

Table 5 Distribution of Frequency of CD4 Cell Count in mothers with HIV / AIDS who gave birth to neonates

No	Number of CD4 Cells	Frequency (n)	Percentage (%)
1	≤ 350 cells / ml	7	17.0
2	> 350 cells / ml	25	60.1
3	Data Missing	9	21.9
	Total	41	100

2 4. CONCLUSION

Based on the results of research that has been carried out on neonatal output in pregnant women infected with HIV / AIDS at the Raden Mattaher Regional Hospital, Jambi Province in 2018, it can be concluded that the following are the following: Weight of babies born to pregnant women with HIV / AIDS infection is an average of above 2500 grams (normal), all babies born to mothers infected with HIV / AIDS have an APGAR score of 7-9 (good).

Methods of delivery in mothers infected with HIV / AIDS in RSUD Raden Mattaher was 78.1% of delivery by way of Caesarean section, mothers infected with HIV / AIDS who gave birth at RSUD Raden Mataher Jambi had CD4 levels of more than 350 cells / ml as much as 60.1%

The results of this study are expected to provide input to the medical faculty and Jambi University as well as a source of information for materials that can be taught or added to the HIV / AIDS course in pregnancy and neonatal outcomes in pregnant women infected with HIV / AIDS. and further research is needed to monitor the condition of babies born to HIV-infected mothers

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