Original Article

Seroprevalence of Human

HIV

Immunodeficiency Virus (HIV) in Southern Punjab

1. Saadat Parveen 2. Abdul Latif 3. Muhammad Ashraf

1. Consultant Hematologist, Dept. of Pathology, CMH, Multan 2. Asstt. Prof. of Paediatric Surgery, Nishtar Hospital Multan 3. Asstt. Prof. of Paediatric Surgery, The Children's Hospital & Institute of Child Health, Multan

ABSTRACT

Objectives: To find out the seroprevalence of HIV detected on blood screening in population of Southern Punjab.

Study Design: Observational Study

Place and Duration of Study: This study was carried out at the Department of Pathology, Combined Military Hospital (CMH), Multan from January to December 2013.

Materials and Methods: Serological blood screening of blood donors and candidates coming for recruitment in armed forces of Pakistan at CMH Multan Center was performed. Suspected cases confirmed with third generation ELISA technique. Bio-data of HIV positive cases was collected, analyzed and compared with national and international literature.

Results: A total of 10666 persons were screened out. Only two (0.018%) was HIV positive.

Conclusion: Seroprevalence of HIV/ AIDS is less common in our country as compared to rest of the world especially than that of neighbor countries. Awareness of the disease along with prophylactic and preventive measures are necessary to decrease the prevalence and spread of this disease.

Key Words: HIV, AIDS, Blood Screening

INTRODUCTION

Near about half of a century is going to be completed since detection of Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) epidemic1. A person once infected and becoming HIV positive does not mean that he is suffering from AIDS. The virus continues to involve and damage the immune system of the body and infected person may develop serious infectious disease known as AIDS. Disease spreads from infected individual to healthy persons through blood transfusion, prick of infected needle, barber shop and sex partnership². Spread of the disease can be minimized by protective measures against above mentioned predisposing factors. Globally an estimated 100 million people have been found to be infected with HIV since detection of the disease³. The number of annual AIDS related deaths is decreasing steadily worldwide due to decrease in incidence of the disease which started in late 1990's. Because of rapid awareness programmes, control, treatment, care and support measures in the population, the prevalence of HIV/AIDS is declining⁴. According to WHO, approximately 35 million people are suffering from HIV/AIDS worldwide⁵. The prevalence rate of HIV varies in different regions of world from 9% in India, 5% in Africa, 0.9% in Eastern Europe, 0.6% in North America^{6,7,8}. The first case of AIDS in India was reported in 1986 and now India is the Country with second largest population of HIV infected individuals9.

MATERIALS AND METHODS

This is a retrospective study carried out between January 2013 to December 2013 at Haematology unit of Department of Pathology, Combined Military Hospital (CMH) Multan. All the persons coming for blood screening were included in the study. Majority group consisted of blood donors and other were candidates for recruitment in Armed Forces of Pakistan appearing at Multan Center from different areas of Southern Punjab. Among the Blood donors, majority consisted of volunteers of Armed forces, relative of patients requiring blood at CMH, Department of Paediatric Surgery, Nishtar Hospital and Institute of Child Health Multan. The study protocol consisted of the informed consent, age, address, occupation, education, marital and socio economic status. Five ml blood was taken from each candidate and screened for various serologically positive infective diseases including Human Immunodeficiency Virus (HIV). Seropositivity was confirmed by third generation ELISA technique. All the information were collected on a predesigned performa. Results regarding various infective diseases as Hepatitis B, C and HIV were noted. Bio-data of HIV positive cohort was separated, analyzed and compared with national and international literature.

RESULTS

A total of 10666 persons were screened for HIV. Among these, 6216 persons were blood donors and 4450 were candidates for recruitment in Armed forces

of Pakistan at Combined Military Hospital (CMH), Multan. In blood donors, 5990 (96%) were males and 226 (4%) were females. All the candidates for recruitment were male. This means that out of 10666 persons, 10440 (98%) were male and 226(2%) were female. Age range was between 18-40 years in blood donors while candidates for recruitment were 18-24 years. Out of 6216 blood donors, 2(0.3%) were positive and both were male of 40 years of age. None out of 4450 (0.00%) candidates for recruitment in armed forces was positive for HIV. Similarly no female (0.00%) was positive for HIV. Overall, 10666 persons were screened and only 2 (0.18%) were found positive for HIV. Both of these HIV positive persons were not having full blown AIDS disease.

Table No.1- Prevalence in Blood Donor Group

Tuble 11011 11e tulence in Blood Bonot Group			
Total number	HIV +	Percentage	
Screened			
6216	2	0.03%	

Table No.2: Prevalence in Recruits Group

Total number Screened	HIV +	Percentage
4450	0	0%

Table No.3: Prevalence as a whole

Total number Screened	HIV +	Percentage
10666	2	0.018%

DISCUSSION

This study was an attempt to define the seroprevalence of HIV in relatively healthy and young population in Southern Punjab. Data consisted of analysis of the results of blood screening in candidates of recruitment in armed forces of Pakistan and blood donors at CMH, Multan during one year from January to December 2013. The testing method consisted of third generation ELISA technique which is used by the majority of the screening centers. As minimum age limit for blood donation and recruitment in Armed Forces is 18 years, so it was not possible to assess the minimum age of acquisition of HIV in this study. It is not necessary for HIV positive personas to develop AIDS, so seroprevalence of only HIV is more than prevalence of actual AIDS disease. In this study seroprevelance of HIV in 4450 candidates for recruitment in armed forces who were otherwise healthy and young between 18 to 24 years age was zero (0.00%). But in 6216 blood donors, 2 (0.03%) persons of 40 years age were HIV positive. None of these two HIV positive cases had any evidence of full blown developed AIDS. Overall, seroprevalence of HIV in both groups screened at CMH Multan was 2 out of 10666 (0.018%). Mujeeb et al have

reported no positive case of HIV¹⁰, while Katepotor et al reported the HIV prevalence of .02%¹¹. Khattak et al reported the prevalence of HIV ranging from 0.02% to 0.04% during his five year study¹². In another center prevalence rate for HIV was 0.003%. However, National AIDS programme in which Kazi et al reported the results of screening of 23,40,000 blood samples throughout the country, HIV positive cases were 0.6% and full blown AIDS cases were 0.007%¹³. According to WHO, approximately 35 million people are living with HIV/AIDS worldwide⁵. The prevalence rate of HIV in adult varies in different regions of the world from 5% in Africa, 0.9% in Eastern Europe and 0.6% in North America⁶. India is the Country with second largest population of HIV infected individuals^{7,9}.

CONCLUSION

From this study it is concluded that HIV/AIDS is not common in our country. Public awareness about disease, its modes of transmission and preventive measures are necessary to decrease the prevalence and spread of this disease.

REFERENCES

- Takalakar AA, Madhekar NS, Bhayya SM. Overview of HIV / AIDS in Andhra Pradesh. Al Ameen J Med Sci 2010;3:355-356.
- 2. Beelen V, Nel. HIV/AIDS and the military: fighting the war against HIV/STIs. Sexual Health Exchange 2014;7.
- 3. UNAIDS, Overview of global AIDS. Epidemic 2006. Report on the global AIDS Epidemic.
- Constantine NT, Vander Groeh G, Belsey E. Sensitivity of HIV antibody assays as determined by seroconversion panels. AIDS 1994;8: 1718-1720.
- WHO/UNAIDS, AIDS Epidemic Update, Dec 2007. Available at: http://www.unaids.org/en/ HIV data.
- Cotton DJ. AIDS in woman. In: Merigan, Bartlett, Bolognesi, editors. Text book of AIDS medicine. William and Wilkins; 1999.p.151-158.
- 7. Park K. Epidemiology of communicable diseases. Text book of preventive and social medicine. Bhanot Publishers; 2011.p.316-329.
- 8. Radhakrishna M, Krishna Reddy M, Krishna DR. HIV sero-prevalence in general population of Warangal, A.P. India. J Environmental Biol 2007; 28:865-867.
- 9. Brown AE, et al. Prevalence of markers for HIV, hepatitis B and hepatitis C infection in UK military recruits. Epidemiol and Infect 2011;1166-1171.

- 10. Mujeeb SA, Mehmood K. Prevalence of HBV, HCV and HIV infections among family blood donors. Ann Saudi Med 1 996;1 6:702-3.
- 11. Katepotor GN, Bhally HS, Khaliq G, et al. Epidemiology of blood-born viruses: a study of healthy blood donors in Southern Pakistan. Southeast Asian J Trop Med Public Health 1996; 27:703-6.
- 12. Khattak MF, Salamat N, Bhatti FA. Seroprevalence of Hepatitis B, C and HIV in Blood donors in Northern Pakistan. J Pak Med Assoc. 2002;52(9): 398-402.

13. Kazi BM, Saleem M, Salaman MS, et al. Epidemiological trends of HIV/AIDS in Pakistan. a twelve year experience at the national AIDS programme. Pak J Med Res 1999;38:164-67.

Address for Corresponding Author: Saadat Parveen,

Consultant Hematologist, Dept. of Pathology, CMH, Multan / Brigadier, Department of Pathology, Combined Military Hospital, Multan,

Phone: 0300-8639700

E-mail: saadatparveen@gmail.com