An exploratory study on adherence to exclusive breastfeeding with antiretroviral therapy intervention among HIV-infected mothers in South Africa and Nigeria.

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Background: Even in the presence of HIV infection, exclusive breastfeeding (EBF) is recommended for the first six months of an infant's life, formula feeding or mixed is still common. A prospective cohort study was conducted to determine adherence and factors associated with adherence to EBF among HIV-infected mother-infant pairs in South Africa and Nigeria.

Methods: Data for this analysis was drawn from the INFANT Study, a longitudinal cohort study of HIV-infected breastfeeding mothers and their HIV-exposed uninfected infants (April 2013 to March 2015). Mothers were recruited from site B Clinic in Khayelitsha, South Africa and Plateau State Specialist Hospital, Nigeria. Descriptive statistics were used to characterize breastfeeding practices and logistic regression using odds ratios (OR) and 95% confidence

intervals (CI) was used to identify factors associated with EBF for the first 6 months. **Results:** Overall 110 of 237 (46%) mothers

Results: Overall 110 of 237 (46%) mothers reported EBF up to 6 months. Compared to periurban South African women, more rural Nigerian women reported EBF up to 6 months (48% vs 40%, odds ratio 1.67, 95% confidence interval: 0.84 to 3.32). No standard baseline demographic or clinical characteristics were significantly associated with EBF.

Conclusion: Despite the changed recommendations and promotion of EBF for HIV-infected mothers and their exposed infants, a majority of HIV-infected mothers' practice mixed infant feeding modes within the first six months of life. There is an urgent need to understand factors that may influence poor adherence to EBF and develop strategies that improve HIV-infected women's adherence to EBF.