

HIV testing for children must be improved

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National HIV programs should recognize that HIV testing and counseling systems designed for adults do not meet the needs of children.

Therefore, according to Scott Kellerman from Management Sciences for Health, Virginia, USA and Shaffiq Essajee from the Clinton Health Access Initiative, New York, USA, specific strategies to increase opportunities for children to access HIV testing, especially in sub-Saharan Africa, need to be designed and implemented.

In an Policy Forum published in this week's [PLoS Medicine](#), the authors argue that inadequate numbers of [children](#) in sub-Saharan Africa are on antiretroviral therapy (ART) because of insufficient detection of HIV in this group. This situation is alarming given that worldwide children account for 18% of HIV-related deaths and 15% of HIV infections each year. Furthermore, an estimated 2.3 million children are infected, and 730,000 urgently need ART but only about 275,000 children currently receive this treatment, the authors report.

Reasons for this detection deficiency include: poor linkages between infant testing programs (as part of prevention of mother-to-child transmission) and pediatric testing programs, provider uncertainty on how best to diagnose and treat infants, and insufficient numbers of pediatric HIV treatment sites. The end result is that many infected children are either never identified or lost from the system before they can be enrolled into care.

The authors discuss a new approach to pediatric testing that could help better detect children with [HIV](#). They argue that the routine testing of

[newborn infants](#) to identify those missed by PMTCT programs, particularly in countries with high prevalence, could be introduced. More targeted testing of infants and children at greater risk may be more cost effective for lower-prevalence countries, the authors say.

The authors conclude that "many of the strategies proposed here have been tried and evaluated; however, implementing them in a coordinated fashion in resource-limited settings requires new investments."

More information: Kellerman S, Essajee S (2010) HIV Testing for Children in Resource-Limited Settings: What Are We Waiting For? PLoS Med 7(7): e1000285. [doi:10.1371/journal.pmed.1000285](https://doi.org/10.1371/journal.pmed.1000285)

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