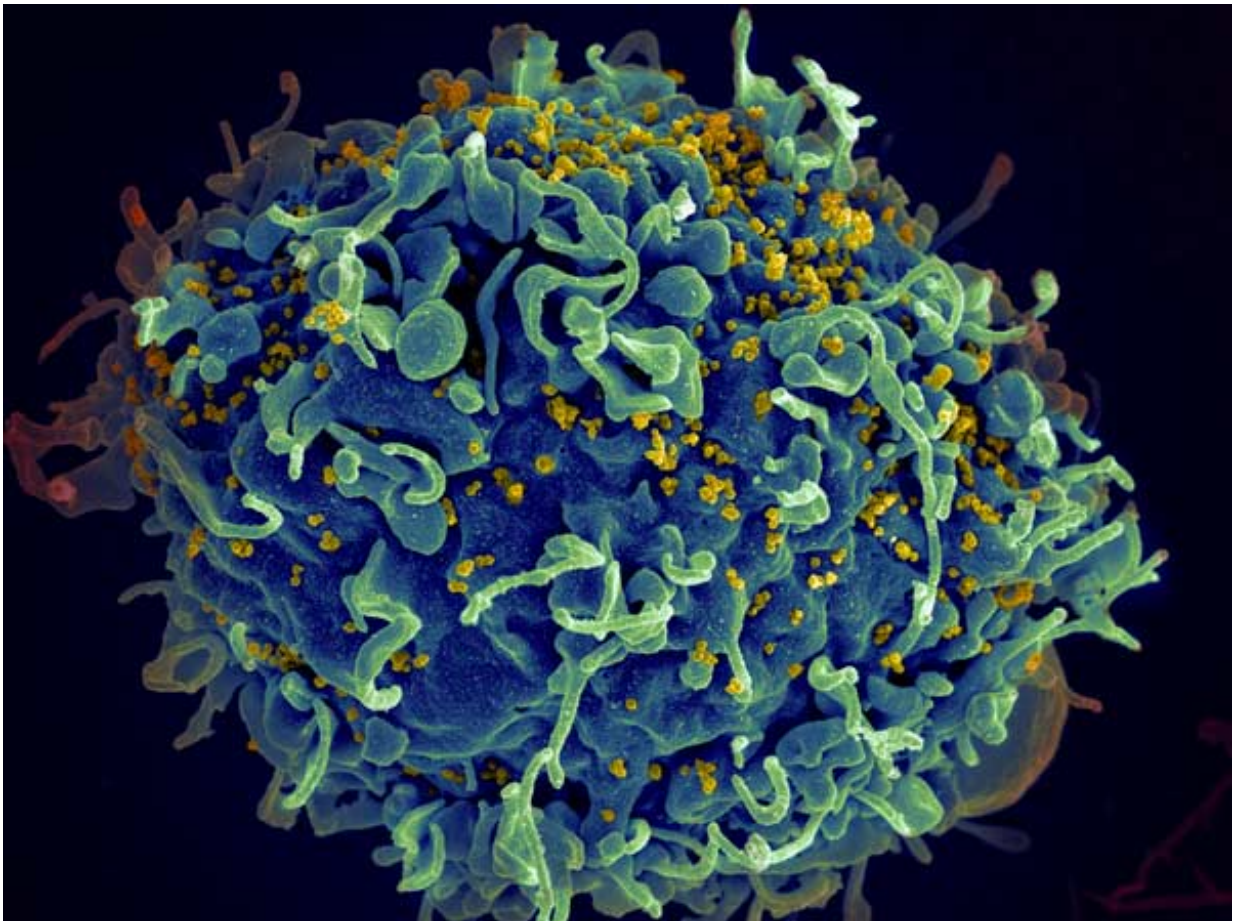


Benin clinic battles mother-to-child HIV transmission

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HIV infecting a human cell. Credit: NIH

Pregnant with her fourth child in a clinic in Benin, Rosine is relieved to

learn that she does not have AIDS, after a free test considered a national health priority.

"I was afraid the test would be positive. My husband is a driver, you know," the woman in her 40s told AFP at the maternity clinic in the small town of Bohicon, where she was screened.

For 15 years, authorities in Benin have sought to tackle mother-to-child transmission of HIV with free care, from the initial tests to antiretroviral (ARV) drugs if a patient proves seropositive.

A programme that covers 87 percent of the public and private maternity clinics in the small west African country has been a success, cutting the rate of mother-to-child transmission almost by half between 2012 and 2016, from 14 percent of cases to 7.6 percent.

"This is completely integrated into maternal care, it's routine," said Blandine Mekpo, who has been a midwife for 11 years. "All the women who come in for a prenatal consultation agree to the test."

Elise cradles her little son in her arms. Fifteen months ago, the young mother learned that she was infected with HIV. The clinic at once provided her with a free box of ARV drugs, which worked. Her child of six months does not have the virus.

"This is a great joy," Elise says. "The treatment saved me, they saved my son and my husband. He is the only one to know. I live a normal life, like all women and all mothers."

Medical staff will nonetheless continue to monitor Elise's son until he is 18 months old.

"When a mother takes ARVs, she doesn't transmit the virus to her child,

neither during pregnancy nor at birth, nor while breast-feeding," Mekpo points out. The risk of transmission is less than one percent, compared with a risk of 35 percent in the absence of preventive treatment.

At 1.2 percent across Benin, the rate of HIV-positive people is low by African standards.

Of every hundred births recorded at the Bohicon clinic during a month, two mothers on average have proved seropositive. But during the entire year, only one child was subsequently infected.

Get the men involved

Several factors contribute to such good results, with free provision of screening and care at the top of the list. The UN Children's Fund (UNICEF) provides test kits, while the Global Fund against AIDS, TB and Malaria provides ARV therapy.

In Bohicon, the drugs are now stored on hospital premises. "Before, there was a risk of running out because everything was stocked in Cotonou," the economic capital on the Gulf of Guinea, said Nicole Paqui, the doctor heading up UNICEF's AIDS programme.

"Today, test kits and medication are available in permanent fashion in all the public health zones," she added.

Training for nurses and care assistants has helped to make maternity clinics friendlier places to welcome mothers. AIDS has become less of a taboo subject and health workers no longer take fright when a new case is detected.

But in Bohicon as elsewhere, difficulties arise for medical and social reasons. Some patients give up on treatment because of unpleasant side-

effects, while others shrug off their HIV-positive status for fear of being stigmatised.

Money can also be a problem, for instance whenever a man refuses to pay for his wife to travel to the maternity clinic.

Female mediators help to overcome such obstacles by accompanying women during the medical process. "When they notice that some women are no longer attending, they go out to their homes to fetch them," said the head coordinator of health care in the area, Blaise Guezo-Mevo.

Seventy percent of the women concerned are found. "And when we recover them, we don't lose them again," the doctor added.

In mid-November, the ministry of health launched an ambitious campaign to bring the rate of mother-to-child transmission of HIV down below five percent in the next four years.

If this goal is to be achieved, men have to be brought into the process. "The involvement of spouses is indispensable," Paqui said.

"When the man is informed and supportive of his spouse, she'll go all the way. But if she has to hide, the protocol is not effective."

Elise is one of the lucky ones. Her husband came to take a test, which proved negative, and he is ready to fetch drugs for her from the clinic.

"Screening husbands is still difficult," Mekpo says. "Yet screening is a matter for couples."

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