

Spotlight

## **Gynaecological morbidity in HIV infected pregnant women.**

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<http://healthdev.net/site/post.php?s=3522>

An article from the HDN Key Correspondent Team

15 September 2008

Gynaecological morbidity in HIV infected pregnant women has been largely ignored by researchers despite its frequency and severity, according to study conducted among HIV-positive women in Cameroon.

Gynaecological morbidity is defined as 'any condition, disease or dysfunction of the reproductive system that is not related to pregnancy, abortion or childbirth but may be related to sexual behaviour'. The study states that these gynaecological conditions are frequent in women infected with HIV.

Cameroon is one of several sub-Saharan African countries with a high prevalence of HIV- 6.8% of women of a reproductive age live with the disease. The study aimed to compare the prevalence of gynaecological conditions among HIV infected and non-infected pregnant women. More than 2000 pregnant women were screened for HIV, lower genital tract infections and lower genital tract neoplasia during booked antenatal visits.

About 10% of the women were found to be HIV positive. In addition, all lower genital tract infections, except candidiasis, were found to be more prevalent among HIV positive women.

According to the study, '[Gynaecological morbidity among HIV positive pregnant women in Cameroon](#)', both pregnancy and HIV predispose women to certain gynaecological conditions because of the modification of the immune system. Only HIV and syphilis are screened during antenatal care in Cameroon, despite the fact that HIV is known to be associated with other sexually transmitted infections, the study said. There is a clear disconnect between practice and evidence-based information, which has identified the infections that can affect women during pregnancy.

This disconnect is common to many HIV and AIDS programs. Scientific information about HIV and AIDS is often ignored as implementers are engrossed in work related to the social manifestation of the epidemic. In order to achieve progress against AIDS, program implementers need to incorporate evidence-based recommendations into their projects.

The study found sexually transmitted infections (STIs) and pre-invasive cervical lesions to be more prevalent among HIV-infected pregnant women. Previous studies have reported that sexually transmitted infections producing ulcerative lesions such as syphilis, chancroid and the genital herpes simplex virus are associated with a higher rate of HIV transmission. In addition, non-ulcerative STIs are also associated with a three to five-fold increase in the risk of HIV transmission.

According to the study, the routine screening and treatment of STIs during antenatal care in Cameroon and other countries with similar social profiles needs to be conducted on a regular basis. For pregnant women, antenatal care also offers an excellent entry point for those considering HIV treatment