

SUCCESS STORY

Program Element: Health

Title: Improving Maternal Retesting at Iganga Hospital

Key Issues: HIV Care and Treatment

Operating Unit: USAID/Uganda

Headline: Enabling safe deliveries of HIV negative newborn babies through Maternal Retesting at Iganga Hospital.

For people who SeroConvert, prompt knowledge of one's HIV status and early access to Antiretroviral Treatment(ART) has dual benefits of optimizing clinical outcomes and preventing further spread of HIV. Frequent retesting of HIV-uninfected individuals at high risk allows for early identification of new infections and for linkage to expanding HIV prevention service options.

At Iganga Hospital maternal retesting was sub-optimally done at only 1.6% in September 2022 against the Ministry of Health (MOH) 100% recommended target. This was attributed to the knowledge gap on when to retest in Antenatal Care (ANC), how to document and how to report, shortage of HIV testing kits at the testing points and failure to identify mothers for retesting among others. This was therefore limiting the identification of maternal HIV infection and prevention of Mother- to- Child HIV transmission (MTCT) whose early detection and effective treatment would reduce MTCT making testing a crucial component of prevention of Mother to Child Transmission (PMTCT). "I was not aware that it was important for every pregnant mother to retest during ANC because for my earlier pregnancies, this was not done, and I had safe and healthy deliveries. But with health education, I realized retesting helps to protect my unborn from being infected with HIV said Hajira Nakisige. Their husbands even expose them more to HIV because of unfaithfulness. "My husband is truck driver and comes home thrice a month, I can't be sure what he does while away so retesting helps to ascertain my HIV status and that of my unborn baby" said Hajira Nakisige. She was worried about the husband's whereabouts that they can't be trusted and to make matters worse convincing them to attend ANC with them is a myth. But with the introduction of maternal resting, they are safe with their unborn babies. She said they are always reminded by the midwives when they are due for a retest.

Newly acquired HIV infections during and after pregnancy may go undetected and untreated if the retest is not done. "Not until 2(two) cases of seroconversion were registered at Iganga Hospital than we were awakened, to focus on retesting for the pregnant mothers during ANC and in labor", Faith Nyemere, an enrolled nurse said. One case was identified at Iganga Hospital and another mother was referred from a nearby clinic and both were linked to care at Iganga Hospital. These two cases were an awakening call which necessitated management to take up the intervention as a priority focusing on teamwork handling as the mechanism to quickly address the issue. " Mothers have embraced this intervention because most mothers even demand for the service since they are informed about the benefits and the side effects of not receiving it'. Faith said.

The MOH guidelines recommend HIV retesting among HIV-negative pregnant women in the third trimester, at delivery, and /or postpartum. If an antibody-only test is a negative repeat HIV testing should occur six weeks, three months, and six months following the exposure since it can take up to six months for the body to make antibodies to the HIV virus. Given this background, maternal retesting was intensified at Iganga hospital and most of the mothers have been delivering healthy babies, thanks to the health team for the positive reception and teamwork.

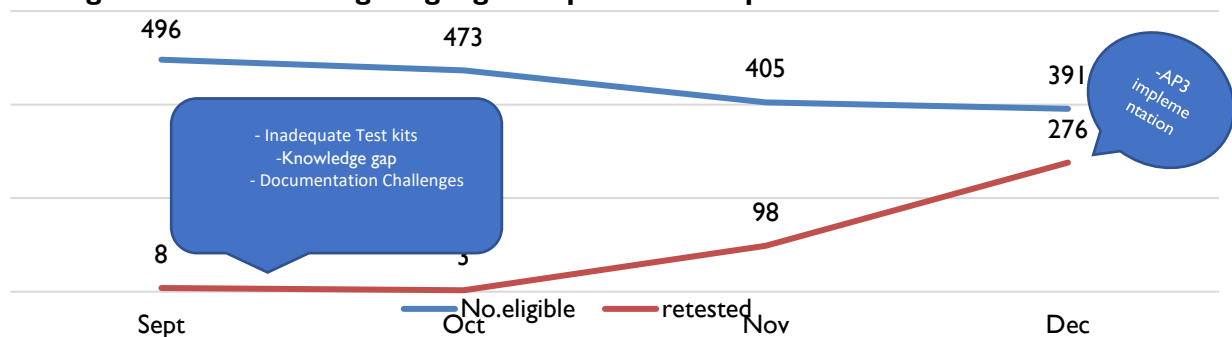


Hajira Nakisige seated at the examination table waits to receive her retest at Iganga

However, although it is a requirement by MOH to have a retest done to mothers during and after delivery, synthesized data at Iganga Referral Hospital revealed that in September 2022 only 16% of ANC Mothers had received a retest and this was exposing the mothers and the unborn babies to a high risk. The facility however, implemented several strategies aimed at having all ANC mothers by December 2022 receive 100% retest. At Iganga Hospital with support from USAID MJAP Local Partner Health Services East Central (LPHS EC) to implement several interventions, there is tremendous change registered. Maternal Retesting at Iganga Hospital was not a priority because they were saving on the testing kits reserving the few for the new tests, so using them for retesting was taken as a waste by the midwives. They imagined that using the duo syphilis to retest mothers was a wastage of testing kits since they were having limited stock of Determine to test new mothers.

Nyemere explains further that the testing kits were limited, and they were using them reservedly, so using them on new mothers was better than using them to retest since they least expected some mothers would Seroconvert. "We had to change strategy and resorted to team building to tackle this emergency issue" said Nyemere. Continuous Medical Education (CME) on maternal HIV retesting was conducted with the midwives offering ANC services, identification and booking mothers for retesting and line listing of mothers due for retesting and expected delivery date(EDD) cohort monitoring, Simulation exercise on how to retest was done with the data team on data collection, harmonization and timely reporting using respective data tools, timely requisitioning of laboratory(LAB) logistics by the lab and RCT(Routine Counselling and Testing) volunteers on retesting services, routine health talks on retesting by the counselors on pre and post counseling (PSS) but also involving the clinicians on clinical assessment were game changers that enabled the tremendous progress and improved percentage of maternal retesting from 16% as of September 2022 to 71% by December 2022 as displayed in the graph below.

Graph Showing Maternal Retesting at Iganga Hospital from Sept 2022 to Dec 2022



The above shows the increment in the number of retested mothers and whereby two were identified and linked to care.

USAID's Local Partner Health Service East Central Uganda (USAID LPHS-EC) works to ensure that both the UNAIDS target and that set by the Ministry of Health is met, and even surpassed. The above improvement portrays that Maternal resting has been prioritized by both the project and the facilities. Therefore, all pregnant mothers tested at ANCI should receive an HIV retest in the third trimester or at any earliest opportunity like PNC (Postnatal Care), YCC (Young Child Clinic), Labor and other service delivery points to EMCTC of HIV and this can be achieved through timely quantifying and requisitions of testing kits.

World Health Organization (WHO) recommends annual retesting of HIV negative mothers but however not all mothers receive the retest appropriately therefore USAID LPHS will continue engaging the health teams to prioritize this and educate the mothers to encourage their partners undertake the same. This will go a long way in reducing the number of Mothers getting infected but above all deliver healthy babies. Two heads are better than one, handling an intervention as a team ensures quality and timely implementation.

Pull-out Quote: “Not until two cases of Seroconversion were registered at Iganga Hospital than we were awakened, to focus on retesting for the pregnant mothers during ANC and in labor” says Faith.

Background Information: Maternal Resting has greatly reduced on the number of HIV positive children since detected PMTCT is introduced to the mothers, but the issue now lies with the noncompliant partners. By chance, a man will only receive a test at the first ANC visit and the subsequent tested required will not be done. USAID LPHS will embark on special focus to the husbands by carrying out men alone sessions on the importance of having to do a retest and ensure stocking self-testing kits so that whenever they do not turn up at the facility for a retest, their partners can carry them home for retesting.

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