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Assessment of Socio-Economic, Demographic and Health Factors that Influences the Survival/Death Status of HIV Positive People under Art Follow-Up at Wolaita Sodo Referral Hospital (Ottona), Ethiopia

Getachew Tekle

Wachemo University, Ethiopia, E-mail: getch.55tekle@gmail.com

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Abstract: Human Immunodeficiency Virus (HIV) is that the virus that causes Acquired Immune Deficiency Syndrome (AIDS). HIV attacks and destroys certain sorts of white blood cells that are essential to the body's system, the biological ability of the physical body to fight infections. The most aim of this study was to seek out some socioeconomic, demographic and health factors that influence the survival/death status of HIV positive people under ART follow-up. It's a cross sectional study supported data from the ART clinic in Ottona Hospital, south Ethiopia. The analytical methodologies Descriptive analysis and Binary Logistic regression were employed to spot the covariates that have a statistically significant effect on the survival time of HIV infected patients. The logistic multivariate analysis of the study from ART clinic of Wolaita Sodo University referral hospital gave results confirming that the factors age, weight, CD4 level, functional status, TB treatment and sex use have statistically significant effects on the survival of patients. Researchers should specialize in this field of study i.e. within the medical area of health centers and ART program.

Introduction: All over the planet the prevalence of Human Immunodeficiency Virus (HIV)/Acquired Immune Deficiency Syndrome (AIDS) has become a stumbling stone ongoing of human civilization and may be a huge concern for people worldwide. Since the identification of the HIV within the early 1980s, much has been learned about how the virus is transmitted and the way it attacks the body's system and causes the AIDS. The HIV/AIDS epidemic has grown on an unprecedented scale within the last three decades since it had been first recognized, and now it's considered a worldwide crisis. The countries, which need to fight with the concentrated or generalized HIV/AIDS epidemic, face enormous socio-economic problems. In 2011, the entire number of individuals living with HIV was 34.2 million, newly infected with HIV was 2.5 million, and AIDS deaths was 1.7 million. The cases are reported altogether regions of the planet, but largest part those existing with HIV (97%) reside in low- and middle-income countries, particularly in Sub-Saharan Africa. the bulk new infections are transmitted heterosexually, while the danger factors vary. In some countries, men who roll in the hay with men (MSM), injecting drug users (IDUs), and sex workers (SW) are at significant risk. Most of the people living with HIV or in danger for HIV do not have access to prevention, care, and treatment, and there is still no cure.

HIV/AIDS may be a burning public health issue everywhere the planet. The HIV disease may be a leading explanation for deaths worldwide and therefore the favorite explanation for death in Africa. HIV primarily affects those in their most efficient years; about half new infections are among those below the age 25 years. The women, especially younger ladies, are biologically more vulnerable to HIV. As a result, young women are twice more likely to become infected with HIV than that of male globally. Women embodied about half all people living with HIV globally, and quite half (60%) in Sub-Saharan Africa. HIV is that the leading explanation for deaths among women in their reproductive age (15–49 years). Gender inequalities, differential access to services, and sexual violence increase women's vulnerability to HIV. Young adolescent girls aren't only biologically more vulnerable to HIV infection: they're more likely to possess older sexual and partners who are IDUs, consequently increasing their potential exposure to HIV. An intersection of two infections disorders can have a synergistic effect on mortality and morbidity. In fact, HIV not only affects the health of people, it impacts households, communities, and therefore the development and economic process of countries.

The prevalence of HIV disease levels can vary considerably between different countries and between different populations within a rustic also as globally. It's related to far more variation in socio-demographic and health factors than is admitted in broad statements and projections about pandemics supported crude epidemiological data. Differences between cultures and countries in terms of contraceptive use, educational attainment, circumcision practices and access to treatment for sexually transmitted diseases (STDs) can therefore explain much of the observed variation in HIV prevalence levels. These differences may relate to and reflect standards and designs of living, especially in family life, rearing of youngsters, adolescence and occupational preferences. This diversity is typically due to a variety of socioeconomic, biological, demographic and behavioral factors. The positive relationship between lower socioeconomic status and HIV progression is well documented. Numerous studies are conducted globally and particularly in Sub-Saharan Africa on risk factors of HIV infection. These determinants or risk factors are often grouped into two categories, including sexual behavioral risk factors and influential risk factors. Thus, much has been known about what determines the spread also as prevention of the HIV/AIDS epidemic. From better of our knowledge a couple of studies are undertaken on the associations of socioeconomic and health factors with HIV/AIDS epidemic within the global context. So, it will differ from other studies in several important aspects and it will use a broader range of explanatory variables supported more current and relevant data to supply a more comprehensive view of HIV implication.

Conclusion: This study examined how strongly social and health factors influence the sizes of HIV/AIDS epidemic by using best known statistical tools. That specialize in HIV/AIDS pandemic within the globe, and this will offer to the policy makers in sociohealth options to combating the disease and its routes of infection.