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WHY ARE CHILDREN STILL BEING INFECTED WITH HIV? EXPERIENCES IN PREVENTION OF MOTHER-TO-CHILD TRANSMISSION OF HIV IN A COMPLEX SOUTH LONDON UNIVERSITY HOSPITAL POPULATION

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AIMS: Despite recent advances in efforts to reduce mother-to-child transmission (MTCT) of HIV, there are still children becoming infected. To understand this further, we report on the prevention of MTCT at this hospital between 1993 and 2004.

METHODS: Prospective data collection on all HIV-infected women seen for antenatal care since 1993.

RESULTS: 296 pregnancies to 274 women. 153/274 women (55.8%) were diagnosed from routine antenatal screening. 6/287 (2.1%) pregnancies with adequate follow-up resulted in HIV infection in the infant. We describe the six cases in more detail and highlight relevant points: case 1, illustrating prematurity; case 2, late presentation at 38 weeks gestation; case 3, a missed opportunity for a woman who did not attend follow up; case 4, co-infection with falciparum malaria and TB; case 5, early *in utero* infection, ART started at 27 weeks; case 6, acute seroconversion during pregnancy. 4/6 children were infected *in utero*.

CONCLUSIONS: The low transmission rate of 2% in the multicultural population served by this hospital attests to the efforts of a multidisciplinary care team dedicated to the care of this frequently hard-to-reach population. More importantly, *in utero* infection in these children may have been avoided by starting antiretroviral therapy at an earlier stage than is suggested by BHIVA guidelines.

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