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Ageing and HIV-risk in non-gravid adult female humans

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Statement of the Problem: There is palpable evidence to suggest that mammalian endocrine reproductive system is associated with a number of immune functions, some potentially beneficial against viral illnesses. However, the concept of endocrine reproductive (dys)-functions against HIV infection in humans is only poorly understood.

Methodology & Theoretical Orientation: A secondary data analysis was done, out of a prospective, observational, hospital-based study conducted at public municipal referral hospitals in Dar es Salaam, Tanzania between March-October 2017. The primary study population included all women planned for total abdominal hysterectomy. We specifically analysed data on chronological age, family and social history, comorbidity stata, medication history, twice screened HIV serostatus, vitals at the ward pre-, peri-and up to 72-hours post-operatively as well as clinical indications for total abdominal hysterectomy. Each participant in the primary study was followed-up, from the time of surgery plan, up to at most 72-hours post-hysterectomy and/or discharge from the ward, whichever came first. Data were analysed by fitting a generalized linear model using SAS statistical software version 9.4. A verbal informed consent was sought from each participant prior to recruitment into the primary follow-up study.

Findings: We analysed 40981 women-days of follow-up. In essence, none of the participant seroconverted against HIV during the follow-up period, making an HIV-incidence of 0/40981 patient-days. All participants were black Africans (median age 42 (IQR: 37-47) years). Serial correlation between age and HIV-serostatus was found ($\gamma=-0.514$, $P<0.001$). We also found a statistically significant drop in HIV-risk with age (aOR: 0.919, 95% C.I.: .848 – .997) among hysterectomised women. Association was barely significant between reported HIV and marital stata ($\chi^2= 8.0176$, $df=3$; $p=.0457$)

Conclusion & Significance: There appears to be a statistically significant reduced risk of HIV with age among hysterectomised participants in this prospective observational study. Participants who reported married had the highest HIV-seropositivity rate. None of the participant seroconverted against HIV during the follow-up period.

Recommendations: Ageing process may not necessarily be a deleterious process in humans!

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