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serological profile of hepatitis b virus infection hiv infected adult patients in kano, north western nigeria

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Abstract

Objective:To determine the serological profile of Hepatitis B virus infection among HIV infected adult patients in Kano

Methodology: This was a hospital based retrospective observational study where subjects were screened and those who met the inclusion criteria and informed consented were consecutively recruited until required sample size was obtained. Data were collected using the pre-tested interviewer administered questionnaire with sections on socio-demographic information, medical history including risk factors, clinical and laboratory findings. All subjects were thoroughly examined and venous blood samples were taken for necessary investigations and subsequently analysed at the Aminu Kano Teaching Hospital central and PEPFAR laboratories. Data was analysed with SPSS Version 18

Results: 431 HIV subjects were screened for HBV to obtain the required 100 HBV infected patients giving HBV seroprevalence of 23.2% among HIV infected patients. The results were presented as percentage of all patients with HBV/HIV co-infection below:

	Frequency n	**Percentage (%)**
HBsAg	100	100
HBsAb	0	0
HBeAg	47	47
HBeAb	36	36
HBcAb	83	83

Conclusion: The frequency of Hepatitis B seromarkers shows that of all the co-infected patients 83% had HBcAb indicating chronic infection with HBV, out of which 47% are HBeAg positive and are actively replicating while 36% are HBeAb positive and seroconvert to inactive carriers, with zero HBsAb. This explains the increased HBV viral replication observed in HIV patients and supports the fact that Hepatitis Bclearance is more difficult among HBV/HIV co-infected adult patients.

Biography

Ibrahim Musa Yola is an MD, holds an MPH in Epidemiology from Tulane University, and Fellowship of West African College of Physicians (FWACP) in Internal Medicine with interest in infectious and tropical diseases. He is currently enrolled in Masters of Science in Clinical Research as part of the T32 training program. His research focuses on evaluating the lifetime risk of developing heart failure in the Framingham Heart Study (FHS); looking at temporal trends between heart failure with preserved ejection fraction (HFpEF) and those with reduced ejection fraction (HFrEF) and other competing risks of heart failure. He is also evaluating the lifetime risk of developing left ventricular systolic dysfunction (LVSD) in the FHS using echocardiographic and electrocardiographic studies. He is also completing a manuscript on the association of lung diffusion capacity with cardiac remodeling and risk of heart failure in the community. He has further research interests in evaluating the impact of infectious agents (e.g., human immunodeficiency virus, CMV, toxoplasmosis) on cardiovascular diseases in the community as well as looking at the liver and cardiovascular diseases.

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