

Prevalence and impact of hepatitis C virus coinfection amongst people living with human immunodeficiency virus in era of HAART regimen

Theophilus Kachi Udeani and Uchechukwu Judith Umeha
University of Nigeria, Nigeria

The co-infection of hepatitis C and human immunodeficiency viruses increases the progression the combined antiretroviral therapy. This cross-sectional study investigated the prevalence of hepatitis C virus infection in HIV infected persons on combined antiretroviral therapy. The participants were selected by random sampling and information on demographic characteristics and social lifestyles were obtained using a structured questionnaire. Anti-HCV antibodies were detected by 4th generation EIA while ALT and creatinine and CD4+T-cells values were estimated. The data obtained were analyzed using the chi-square test at $p \leq 0.05$. A total of 186 HIV infected person were enrolled for the study with a mean age of 38.00 ± 12.4 -year-olds and 5.4% were HCV-infected. The males and had equal seropositivity of 2.7% (5/186) each while the age group above 40 years accounted for 3.2% (6/186) The seropositivity of HCV was higher among married couples, 4.8% (9/186). The risk factors for HCV/HIV co-infection indicated that none of the statistically significant but blood transfusion accounted for 0.5% (1/186). The CD4 T not statistically significant on HCV infection. The ALT values indicated that majority of the HCV/HIV co-infected patients were of normal values, while creatinine values were statistically significant in the outcome of HCV/HIV co-infection. At elevated values of $117.37 \pm 5.25 \mu\text{mol/l}$, 7.3% HCV infected participants were in this group, $RR[(95\%CI (7.5, 3.01-18.68)] p=0.001$. In conclusion, HCV/HIV coinfectd patients with elevated creatinine levels are at risk of developing renal failure.

theophilus.udeani@unn.edu.ng