

Poster presentation

Surveillance of perinatal AIDS and HIV diagnoses in France

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Background

Since the use of zidovudine to reduce the mother-to-child HIV transmission, the number of children perinatally infected has dramatically declined. HIV/AIDS surveillance provides data to assess the effect of prevention on the perinatal HIV transmission.

Materials and methods

In France, mandatory surveillance of first AIDS diagnoses and new HIV diagnoses was implemented in 1986 and 2003 respectively. Paediatric notifications are reported by clinicians with an anonymous code to the Institut de veille sanitaire.

We analysed trends in perinatal AIDS and HIV cases reported by 12/31/2006, adjusted for reporting delays. Characteristics of perinatal AIDS diagnoses were analysed for 2 periods (before and since 1998) and new HIV diagnoses since 2003.

Results

By December 2006, a total of 703 children were reported with perinatally acquired AIDS. The annual number of cases declined from 69 in 1994 to 8 in 1998, since when it has remained stable.

Before 1998, mean age of children at AIDS diagnosis was 2.4 years, one third of the HIV-infected mothers were infected through injection drug use and one quarter were of French origin.

Comparatively, between 1998 and 2006, mean age of children was 7.3 years, no mother was injecting drug user

and 6% were of French origin. The most common AIDS indicative diseases were oesophageal candidiasis (16%), *Pneumocystis carinii* pneumonia (15%), HIV encephalopathy (15%), cytomegalovirus disease (10%), lymphoid interstitial pneumonitis (9%) and tuberculosis (9%).

Between 2003 and 2006, 106 new HIV diagnoses were notified in children perinatally infected, with a decrease from 35 in 2004 to 19 in 2006. Half of the children were born in sub-Saharan Africa and 40% in France. Mean age at diagnosis was 5.3 years.

For the 42 children born in France (23 since 2003), the mother's geographic origin was as follows: sub-Saharan Africa (19), Caribbean (13), metropolitan France (6) and other (4). 22 mothers were not known as HIV-infected at pregnancy and the infection was known for the 20 others: a complete antiretroviral treatment (prenatal, intrapartum and neonatal) was given in 13 cases, the treatment was incomplete in 5 cases and 2 children didn't receive any treatment.

Conclusions

Paediatric cases are probably under-reported, but exhaustivity could be improved by the modifications of the system introduced in July 2007. Although number of AIDS/HIV diagnoses is low in the last years, a few cases could still have been avoided by screening and treatment of all HIV+ pregnant women. Furthermore, early testing should be systematically proposed for children from endemic countries.