Perinatal HIV Transmission: Effects on Child Development

By Marla Vaughn

Every year 590,000 infants around the world are infected with HIV transmitted from their mothers. Thanks to prenatal counseling and testing, and the administering of such treatments as AZT to women before, during, and after childbirth, the number of perinatally acquired cases in the United States declined 66% between 1992 and 1997. However, there are still many children slipping through the cracks due to poor prenatal care or failed drug treatments. There are also children who were born before effective prenatal treatments but are now receiving drug therapies that have enabled them to live longer, healthier lives. According to the Centers for Disease Control, there are now an estimated 40,000 children living in the U.S. with HIV. These children are growing into adolescents who have not yet developed AIDS. For them, HIV is a chronic disease.

In order to help HIV infected children and adolescents live fuller and more productive lives, it is important to evaluate the effects of perinatal HIV infection on functional status and social and cognitive development. Since this is a relatively new area, there have been very few studies analyzing these effects. In a recent study published by the American Academy of Pediatrics (August, 2000) researchers found that although nutritional and weight factors were important predictors for change in functional status of children infected with HIV, the strongest predictors were not medical. Race and socioeconomic status were extremely important. Nonwhites and those who lived in poorer inner city neighborhoods had greater declines in functional status. Also, children still in the care of their biological parent were at greater risk of overall decline in functional status. This is most likely due to the fact that the parent also has HIV and may
not be able to be an effective caregiver due to dealing with his or her own medical and emotional problems. The study concludes that environmental factors may have more effect on the development of the child than symptoms from the HIV. More studies should be conducted that use control groups with a similar socioeconomic status, or children who were prenatally exposed but not infected. This could distinguish more clearly causes that stem from the HIV infection itself and factors which are environmental. This will enable community and health care workers to determine the best ways to provide support for these children.

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