

Title: Utilization of HIV post exposure prophylaxis among healthcare workers in selected health institutions in Nairobi, Kenya

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Abstract: Although avoiding contact with infected blood is one of the primary strategies of preventing occupationally acquired Human Immunodeficiency Virus (HIV) infection, appropriate post-exposure management (PEP) is an important element in workplace safety. The concern to optimise such interventions is heightened if the institution caters for populations in which the prevalence of HIV is high, as is the case of health facilities in Nairobi Province, Kenya. In their practice the exposure of Health Care Workers (HCWs) to blood and other potentially infectious body fluids is of major concern and justifies a specific prevention and surveillance strategy. This was a descriptive cross-sectional study that sought to establish the main factors that underlie utilization of PEP services among the occupationally exposed Health Care Workers in Nairobi Province, Kenya. The instruments used for data collection included a questionnaire for HCWs in direct care of patients, a question guide for focus group discussions (FGDs) and interview schedules for hospital administrators in charge of the infection control units and the pharmacists in the hospitals. Four research assistants were recruited and trained to assist in data collection. A total of 179 purposively sampled health-care workers consisting of nurses, physicians, surgeons, dentists and laboratory personnel were interviewed. Three focus group discussions were carried out among HCWs in the three hospitals namely Kenyatta National Hospital, Aga Khan Hospital and Mbagathi District Hospital. Knowledge of risk of occupational HIV transmission and available options for PEP was below average with only 54.8% having adequate knowledge. Although the majority (92.2%) of the respondents strongly believed that they were at risk of contracting HIV/AIDS from occupational exposure and 83.2% of these had taken a protective measure against occupational exposure to HIV, they did not know the options available for PEP. However, they also correctly identified other blood borne diseases that pose a risk to the HCWs at the work place such as Hepatitis B virus (HBV), Hepatitis C virus (HCV) and Human T Lymphotropic Virus (HTLV) I and II. Almost half (45.8%) of the respondents had rational attitude towards PEP. However they had the misconception that adverse effects caused by antiretroviral regimens used were irreversible. Only 14.7% of the previously exposed respondents reported that they had utilised PEP services that is, had sought professional attention. There was need to increase awareness of occupational HIV transmission and the available options for PEP so that a more rational attitude towards PEP is developed. Improving HCW education, information and communication would bridge the knowledge-practice gap and achieve this. An urgent need for the government to formulate and enforce through appropriate strategies, a policy on HIV-PEP for public health institutions has become evident. This calls for a multidisciplinary expert consultation to put together feasible suggestions and assess the most appropriate implementation process.