

The Relationship between Feeding Difficulties and Neurodevelopmental Status in children with HIV at a Tertiary Hospital in the Western Cape

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Background: Neurodevelopmental delays are one of the concerns in children living with human immunodeficiency virus (HIV). Neurodevelopmental delays and HIV had previously been associated with feeding difficulties in children.

Objectives: The primary objectives of this study were to determine the prevalence of feeding difficulties and the association between neurodevelopment status in children with HIV and feeding difficulties as reported by their caregivers.

Methods: An analytical cross-sectional study was done at a tertiary hospital in the Western Cape. Participants were legal caregivers (N=70) who completed questionnaires about the feeding of their children under the age of 5 years with HIV. Neurodevelopmental status was determined by the results of the Molteno Adapted Scale obtained from the children's medical records. Data were analyzed quantitatively.

Results: Data from 70 children were included in the study. The prevalence of feeding difficulties was 22%. An increased prevalence of feeding difficulties was observed in the group of children with developmental delay (33%) versus the group of children with normal development (18%). Developmental status (OR 2.22, CI 0.7–7.09), severity of developmental delay (moderate to profound) (OR 6.66, CI 0.97–45.92), and timing of antiretroviral treatment (ART) initiation (OR 0.62, CI 0.2–1.91) were not associated with feeding difficulties.

Conclusion: Reported feeding difficulties are high among children with HIV. An increase in feeding difficulties was noticed in children with neurodevelopmental delay versus those with normal developmental status. Children with neurodevelopmental delay and HIV do not have a statistical significant increase in risk to develop feeding difficulties. Timing of ART initiation had no influence on the prevalence of feeding difficulties.