

Abstract

Background

Disease progression, loss to follow-up, and mortality of HIV-2 in children is not well understood compared to HIV-1. This is the first nationwide study on children with the two HIV types in Guinea-Bissau.

Methods

Retrospective follow-up study among HIV-infected children <15 years at nine ART centers from 2006-2021. Baseline parameters and disease outcomes for children with HIV-2 and HIV-1 were compared.

Results

Number of children diagnosed with HIV per year peaked in 2017. HIV-2 (n=64) and HIV-1 (n=1945) infected children were different on baseline median age (6.5 vs 3.1 years, $p<0.01$), but had similar proportions of severe immunodeficiency ($p=0.58$) and severe anemia ($p=0.26$). Within the first year of follow-up 36.3% were lost, 5.9% died, 2.7% had transferred clinic, and 55.2% were still in follow-up. Mortality (HR=1.05 95% CI: 0.53-2.08 for HIV-2) and attrition (HR=0.86 95% CI: 0.62-1.19 for HIV-2) were similar for HIV types.

Conclusion

The drop in children diagnosed per year since 2017 is possibly due to lower HIV prevalence, shortage of HIV tests, and the SARS-CoV-2 epidemic. Children with HIV-2 were twice as old as HIV-1 infected when diagnosed, which suggest a slower disease progression. But once immunosuppression has set in mortality is similar.