“We investigated 3 hemodialysis unit (HDU) patients with new HIV infections to determine whether transmission was hemodialysis-associated and to correct factors that contributed to transmission.” Mashragi et al (2014).

Reference:

HIV transmission at a Saudi Arabia hemodialysis unit http://ctt.ec/kH3Tm+ @ivteam #ivteam

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Abstract:

Background: Hemodialysis is associated with increased risk of healthcare-associated infections but considered a low-risk setting for human immunodeficiency virus (HIV) transmission. We investigated 3 hemodialysis unit (HDU) patients with new HIV infections to determine whether transmission was hemodialysis-associated and to correct factors that contributed to transmission.

Methods: Each patient was evaluated for HIV risk factors. Blood samples were tested to determine relatedness of HIV strains. Clinical data (gathered over 18 months) was reviewed
to identify seroconversions at 12 HDUs. Infection prevention and control practices were evaluated at 14 HDUs.

Findings: No other HIV seroconversions were identified during the study. HIV gag, pol, and env gene sequences were consistent with a clonal relationship. HIV and hepatitis C virus prevalence rates at one HDU 1 (5.7% and 6.5%, respectively) were higher than for 11 other HDUs (0% and 0.15%, respectively).

Conclusions: Sequencing supports either patient-to-patient or common-source transmission. Infections occurred despite Saudi Arabia’s low HIV prevalence and national dialysis policies that emphasize stringent infection prevention and control practices.

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