



KNOWLEDGE OF MEDICAL STUDENTS ABOUT ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)

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ABSTRACT

Human immunodeficiency virus infection and acquired immune deficiency syndrome (HIV/AIDS) is a spectrum of conditions caused by infection with the human immunodeficiency virus (HIV). Following initial infection, a person may not notice any symptoms, or may experience a brief period of influenza-like illness. This cross-sectional study was conducted among medical students at different medical colleges. All the students were given a predefined questionnaire. All the data was entered and analyzed with SPSS Ver. 23.0. There were 60 medical students included in this study. The mean age of the students was 22.12±2.01 years. There were 30 (50%) males and 30 (50%) females in this study. The students participating in this study belonged to first year only. All the students had basic knowledge about AIDS, its causes and mode of spread. When asked about its prevention, they also mentioned some of the precautions.

KEYWORDS: Human Immunodeficiency Virus Infection and Acquired Immune deficiency syndrome.

INTRODUCTION

Human immunodeficiency virus infection and acquired immune deficiency syndrome (HIV/AIDS) is a spectrum of conditions caused by infection with the human immunodeficiency virus (HIV). Following initial infection, a person may not notice any symptoms, or may experience a brief period of influenza-like illness. Typically, this is followed by a prolonged period with no symptoms. If the infection progresses, it interferes more with the immune system, increasing the risk of developing common infections such as tuberculosis, as well as other opportunistic infections, and tumors which are otherwise rare in people who have normal immune function. These late symptoms of infection are referred to as acquired immunodeficiency syndrome (AIDS). This stage is often also associated with unintended weight loss.

HIV is spread primarily by unprotected sex (including anal and oral sex), contaminated blood transfusions, hypodermic needles, and from mother to child during pregnancy, delivery, or breastfeeding. Some bodily fluids, such as saliva, sweat and tears, do not transmit the virus. HIV is a member of the group of viruses known as retroviruses.

Methods of prevention include safe sex, needle exchange programs, treating those who are infected, and pre- & post-exposure prophylaxis. Disease in a baby can often

be prevented by giving both the mother and child antiretroviral medication. There is no cure or vaccine; however, antiretroviral treatment can slow the course of the disease and may lead to a near-normal life expectancy. Treatment is recommended as soon as the diagnosis is made. Without treatment, the average survival time after infection is 11 years.

In 2018, about 37.9 million people were living with HIV and it resulted in 770,000 deaths. An estimated 20.6 million of these live in eastern and southern Africa. Between the time that AIDS was identified (in the early 1980s) and 2018, the disease caused an estimated 32 million deaths worldwide. HIV/AIDS is considered a pandemic a disease outbreak which is present over a large area and is actively spreading.

HIV made the jump from other primates to humans in west-central Africa in the early-to-mid 20th century. AIDS was first recognized by the United States Centers for Disease Control and Prevention (CDC) in 1981 and its cause HIV infection was identified in the early part of the decade.

HIV/AIDS has had a large impact on society, both as an illness and as a source of discrimination. The disease also has large economic impacts. There are many misconceptions about HIV/AIDS, such as the belief that it can be transmitted by casual non-sexual contact. The

disease has become subject to many controversies involving religion, including the Catholic Church's position not to support condom use as prevention. It has attracted international medical and political attention as well as large-scale funding since it was identified in the 1980s.^[1-3] The objective of this study is to see the knowledge of medical students about acquired immunodeficiency syndrome (AIDS)

MATERIAL OF METHODS

This cross-sectional study was conducted among medical students at different medical colleges. All the students were given a predefined questionnaire. All the data was entered and analyzed with SPSS Ver. 23.0. The quantitative variables were presented as mean and standard deviation. The qualitative variables were presented as frequency and percentages.

RESULTS

There were 60 medical students included in this study. The mean age of the students was 22.12±2.01 years. There were 30 (50%) males and 30 (50%) females in this study.

The students participating in this study belonged to first year only. All the students had basic knowledge about AIDS, its causes and mode of spread. When asked about its prevention, they also mentioned some of the precautions.

DISCUSSION

HIV/AIDS has become a chronic rather than an acutely fatal disease in many areas of the world. Prognosis varies between people, and both the CD4 count and viral load are useful for predicted outcomes. Without treatment, average survival time after infection with HIV is estimated to be 9 to 11 years, depending on the HIV subtype. After the diagnosis of AIDS, if treatment is not available, survival ranges between 6 and 19 months. HAART and appropriate prevention of opportunistic infections reduces the death rate by 80%, and raises the life expectancy for a newly diagnosed young adult to 20–50 years. This is between two thirds and nearly that of the general population. If treatment is started late in the infection, prognosis is not as good: for example, if treatment is begun following the diagnosis of AIDS, life expectancy is ~10–40 years. Half of infants born with HIV die before two years of age without treatment.

The primary causes of death from HIV/AIDS are opportunistic infections and cancer, both of which are frequently the result of the progressive failure of the immune system. Risk of cancer appears to increase once the CD4 count is below 500/μL. The rate of clinical disease progression varies widely between individuals and has been shown to be affected by a number of factors such as a person's susceptibility and immune function; their access to health care, the presence of coinfections; and the particular strain (or strains) of the virus involved.^[4-6]

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