

Malnutrition, the HIV Fertile Terrain (A Review)

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Food and Nutrition security play important but still under rated roles in addressing HIV/AIDS [1]. According to millennium development goals, a holistic approach is needed. Food insecurity and malnutrition may accelerate the spread of HIV/AIDS both by increasing people exposure to the virus and increasing susceptibility to infections [1].

Food insecurity may place people in situation of heightened risk of exposure to the virus, since food insecurity is related to poverty which may reduce access to information in HIV/AIDS and/or ability to act on information on control of HIV/AIDS when available [2]. Food insecurity may force people from their families to earn livelihood. The separation raises temptation to illicit sex and exposure to HIV/AIDS [1,2]. Women may be forced into transactional sex in order to feed their families.

Food insecurity leads to increased malnutrition rates which in turn lead to increased HIV/AIDS transmission efficiency [2], by lowering immunity. The observation that high rates of HIV/AIDS prevalence in Africa are mainly related to high levels of sexual activity has restricted policy interventions. However several studies stress the need to look beyond proximal factors of high risk behavior in HIV/AIDS transmission [3].

Malnutrition weakens the immune system increasing the risk of ill health which in turn can aggravate disease transmission [5,6] (including HIV/AIDS). Both protein/energy and micronutrient deficiency are associated with significant defects in cell mediated immunity and depressed phagocytic function. Infection for example AIDS are therefore longer lasting and more severe in someone who is malnourished.

One of the main factors determining the risk of transmission of HIV/AIDS from mother to the unborn baby is the health and nutritional status of the mother [5]. The maternal immune status is strongly related immune status which is related to weight and health of baby at birth. Studies in Kenya have shown deficiency of vitamin A among women increases HIV/AIDS shedding in lower genital track, potentially increasing the risk of transmission of virus from the mother to the baby during delivery [6].

Malnutrition and HIV and AIDS can form a vicious cycle whereby for patients under nutrition increases susceptibility to HIV infection [4] and consequently worsens the severity of HIV and AIDS infection, which in turn results in further deterioration of nutritional status. Hence, a person with asymptomatic, infection, the virus impairs their nutritional status leading to loss of appetite, inability to absorb nutrients and wasting.

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