Impact of COVID-19 Pandemic on Vertical Transmission of HIV in an Endemic Area in Indochina: A Preliminary Report

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Dear Editor,

The COVID-19 outbreak has had an effect on the health-care industry. Priority was placed on preventing COVID-19 infections, and employees and resources for the health-care sector were redistributed. As noted by Shrivastava and Shrivastava, telework is the need during the pandemic.[1] In addition to the known necessity of implementation of telecare, it is interesting to think about how the COVID-19 pandemic would affect typical medical screening procedures in public health care.

HIV infection is still relatively common in many parts of the world, particularly Southeast Asia. In many remote places, prenatal diagnosis, treatment, and comprehensive care continue to present significant problems. Another important concern is the extent to which diagnosed cases have received all essential vertical transmission prevention. The effects of conventional medical care are an intriguing topic that is rarely discussed. The COVID-19 pandemic affected the rate of vertical HIV transmission in areas where the illness is a serious problem, according to the study's authors.

The investigation is being carried out in the study province, a remote region of an Indochina nation (GPS location 16.48355004115785, 103.42716030986728). It is 540 kilometers away from the capital. The rate of HIV infection in this location is extremely high.[2] In addition, a high rate of vertical transmission is seen.[3] Local policies have been put in place, including HIV vertical transmission prophylaxis, to address the issue.[4,5] In terms of the outbreak of COVID-19 in the research area, this is COVID-19's second invasion of the planet. In waves, more outbreaks followed the discovery of the first COVID-19 infections in January 2020. Millions of people around the country have already contracted the disease. Because of efforts to contain it, the disease is still present today. The primary data, which was obtained from a public source (http://203.157.71.148/data/cluster/mom/download/SitMCH62-64.pdf), are used in the retrospective data analysis. Each year's vertical HIV transmission rate is directly compared. To compare it, simple arithmetic is utilized. The absence of statistical comparisons, hypothesis tests, or analytical statistical procedures renders the significance test worthless. The examination of the data covers the period from before the release of COVID-19-2021 when COVID-19 started to have an impact on the study environment.

The overall number of pregnant women who had syphilis treatment between 2017 and 2021 is disclosed in the study's Table 1. Following the COVID-19 attack, a noticeably higher rate of vertical HIV transmission has been noted. The declining completion rate may be caused by the difficulties in obtaining standard medical care, such as prophylaxis against vertical HIV transmission. The knowledge gained from this observation can be applied to the COVID-19 pandemic continuum and other potential problems in the future. Retrospective in nature, the current study focuses on a specific criterion about the frequency of traditional syphilis therapy. A notable limitation of the current study is the possibility of other originating factors, such as the recently identified SARS-CoV-2 variation, the availability of the COVID-19 vaccine, and changes in local socioeconomic and political conditions.

Table 1: Data on vertical transmission of HIV*

Year	Rate (%)	Change (%)
2017	0	N/A
2018	0	0
2019	0	0
2020	0	0
2021	3.57	+3.57

*After COVID-19 appeared in 2010, the lockdown policy was put into place, and it wasn't cancelled until 2021. N/A: Not available

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Conflicts of interest

There are no conflicts of interest.

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References

1. Shrivastava SR, Shrivastava PS. Coronavirus disease-19 pandemic and telework: Banking upon the collaboration between workers and employers. Mustansiriya Med J 2022;21:87-9.
2. Trotter AB, Hong SY, Srikantiah P, Abeyewickreme I, Bertagnolio S, Jordan MR. Systematic review of HIV drug resistance in Southeast Asia. AIDS Rev 2013;15:162-70.
3. Ye S, Pang L, Wang X, Liu Z. Epidemiological implications of HIV-hepatitis C co-infection in South and Southeast Asia. Curr HIV/AIDS Rep 2014;11:128-33.

4. Hurst SA, Appelgren KE, Kourtis AP. Prevention of mother-to-child transmission of HIV type 1: The role of neonatal and infant prophylaxis. Expert Rev Anti Infect Ther 2015;13:169-81.
5. Lala MM, Merchant RH. Vertical transmission of HIV-an update. Indian J Pediatr 2010;77:1270-6.

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