



Evaluation of knowledge of FICTC Medical Officer regarding Post Exposure Prophylaxis in HIV according to NACP III

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INTRODUCTION:

Avoiding occupational blood exposures is the primary way to prevent transmission of HIV. The free ART initiative in INDIA was launched on 1st April 2004. Appropriate post exposure management guidelines form an important element of work place safety. Through, ART does not cure HIV/AIDS but effective anti-retroviral regimen inhibit the efficient replication of the HIV virus & refuse viremia to undetectable levels.

AIMS:

- To evaluate the knowledge of the Medical officers regarding PEP in HIV.
- To impart and remove their misconception regarding the same.
- To give the knowledge regarding the contraindications of PEP in pregnancy and TB.

METHODOLOGY:

2 days induction study of F-ICTC for 37 Medical Officers were organized at Community Medicine Department B.J. Medical college, Ahmedabad on 1st batch on 19th & 20th February 2013 & 2nd batch on 28th February & 1st March 2013. Pre-test & post-test questionnaire were design to access their knowledge in session. The data was fed in Microsoft Excel 2013 & Epi info7.

RESULTS:

By this pre & post test analysis we are able to impart the knowledge that blood borne infection in HCPs like surgeons, Dentists, Emergency care providers & waste handlers are equally exposed. 2. We also emphasize over the importance of universal precaution pretest (38 %) & posttest (92%). 3. 3.87% of the Medical officers in the post test were able to recall 2 drug PEP used in mild HIV PEP. 4. After the session they were much clear about contraindication of PEP drugs in pregnancy & TB.

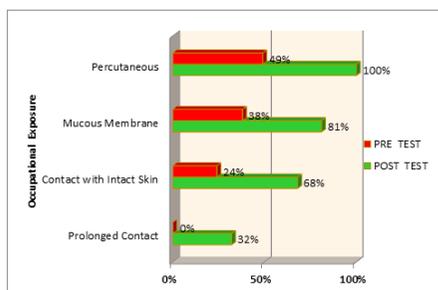


FIGURE 1. Pre and Post test analysis regarding situation in which health care personnel are occupationally exposed

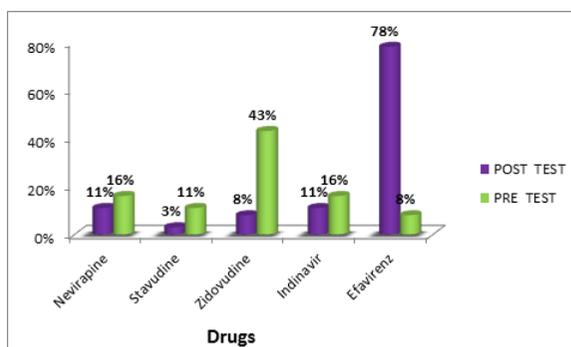


FIGURE 2. Pre and Post test analysis regarding PEP (Post Exposure Prophylaxis) drugs contraindicated during Pregnancy.

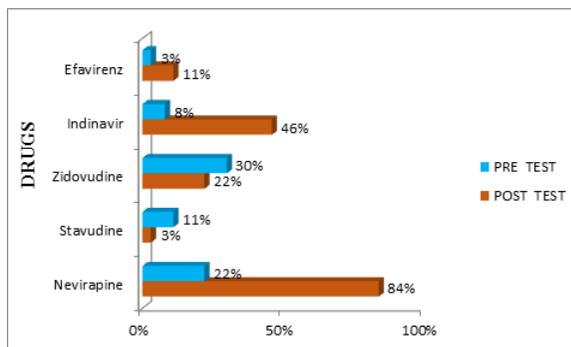


FIGURE 3. Pre and Post test analysis regarding PEP (Post Exposure Prophylaxis) drugs contraindicated during Tuberculosis.

CONCLUSIONS:

Induction training of F-ICTC among the Medical Officers was found highly successful in imparting knowledge regarding POST EXPOSURE PROPHYLAXIS.

It also helps them to remove the misconception & made them clear about various contraindicatory facts.

RECOMMENDATION:

Training and retraining are always required in the medical officers

who are actually working in F-ICTC set up.

It will refresh their knowledge and inform them regarding the recent changes in the programme.

REFERENCES

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