

Intsha yaseNingizimu Afrika ene-HIV nesibalo samasosha e-CD4 aphantsi isengcupheni yokuthola umdlavuza.

ST Communications

Ubungozi bokuthola umdlavuza kwabaqala ukuthomba nabasha abaphila ne-HIV eNingizimu Afrika: ucwaningo lukazwelonke lweqoqo

Isendlalela

Sicwaninge isigameko zobungozi nomthelela wezinhlobo zemidlavuza kwabathombayo nabasha abaphila ne-HIV (AYALWH) eNingizimu Afrika phakathi kuka-2004 no 2014.

Izindlelakwenza

Sifake abaneminyaka ewu-15 kuya ku-24 abavela ocwaningweni lwe-South African HIV Cancer Match, iqoqo elikhulu elivela ekuxhumaneni kwezilinganiso ezivela kumalaborethri ahambisana ne-HIV avela e-National Health Laboratory Services namarekhodi ase-National Cancer Registry(Inqolobane yomdlavuza).

Siqoqele ndawonye ukuvela kwemidlavuza ejwayelekile.

Sihlolisise ukuhlangana phakathi kwalemidlavuza nocansi, iminyaka, unyaka, nesibalo samasosha e-CD4 ngamamodeli e-Cox nama-adjusted hazard ratios (aHR).

Okutholiwe

Sifake u-782,454 wama-AYALWH (89% abesifazane).

Kulabo, u-867 ube nomdlavuza wokuzivelela okubalwa u-429 obe nomdlavuza onesimila i-Kaposi sakhoma, u-107 obe ne-non-Hodgkin limfoma, u-48 ne-Hodgkin limfoma, u-45 nomdlavuza wesibeletso, no-32 nomdlavuza wegazi ilukhimya.

I-Kaposi sarcoma(umdlavuza onesimila) ibiningi kwabaneminyaka ewu-20 kuya ku-24 kunabaneminyaka ewu-15 kuya ku-19 (aHR 1.39, 95% CI 1.03-1.86).

Abesilisa bebetholakala benamazinga aphezulu e-Kaposi sakhoma (aHR 2.06, 95% CI 1.61-2.63), non-Hodgkin limfoma (aHR 3.17, 95% CI 2.06-4.89), e-Hodgkin limfoma (aHR 4.83, 95% 2.61-8.93), nomdlavuza wegazi (aHR 5.90, 95% CI 2.87-12.1).

Amasosha e-CD4 aphantsi ahlangele nezibalo eziphezulu ze-Kaposi sakhoma, umdlavuza wesibeletso, ne-non-Hodgkin ne-Hodgkin limfoma.

Incazelo

Imidlavuza edalwa ukuba nezinye izifo iyona evamile kuma-AYALWH eNingizimu Afrika.

Umthwalo walemidlavuza ungehliswa ngomgomo we-HPV, ukuhlelela i-HIV okunenhloso, ukuqala imishanguzo masinya, nokuthatha imishanguzo ngendlela.

Intsha yaseNingizimu Afrika ene-HIV nesibalo samasosha e-CD4 aphansi isengcupheni yokuthola umdlavuza.

Abantu abaphila ne-HIV abaphakathi kweminyaka ewu-15 no-24 abanesibalo samasosha e-CD4 aphansi basegcupheni yokuthola umdlavuza, ikakhulukazi imidlavuza edalwa izifo ezidalwa igciwane ezihlasela amasosha omzimba.

Abacwaningi bacebisa ukuthi kumele intsha ene-HIV ihlolele umdlavuza wesibeetho, nokuthi igome umgomo we-HPV(huma papillomavirus edala umdlavuza wesibeetho).

Bagququzela nnokwengezwa kokuhlelela i-HIV nokuqala imishanguzo yegciwane ngokushesha ukuze kuzanywe ukugwema imidlavuza edalwa ukugula okudalwa amasoshaomzimba abuthaka.

Ukuthetheleka nge-HIV ebantwini abasha kuyinkinga yezempilo enkulu eNingizimu Afrika.

Ososayensi sebeyazi ukuthi abantu abaphila ne-HIV basengcupheni yomdlavuza, kodwa abakazibhekisisi izigameko zomdlavuza ebantwini abasebasha.

Kulolu cwaningo, abacwaningi bebefuna ukubona ukuthi ingaki intsha ene-HIV enomdlavuza, nokuthi ibuphi ubungozi obukhona bezinhlobo zemidlavuza.

Babheke amarakhodi eziguli ezithize eNingizimu Afrika ezineminyaka ephakathi kuka-15 no-24, phakathi kuka-2004 no-2014.

Bebheke ukuxhumana phakathi kwemidlavuza ehlukene, nobulili, iminyaka, nesibalo samasosha e-CD4 seziguli.

Abacwaningi babika ukuthi i-Kaposi sakhoma iwona mdlavuza obuvamile, ilandelwe i-non-Hodgkin's limfoma, i-Hodgkin's limfoma, umdlavuza wesibeetho, nomdlavuza wegazi.

Bacabanga ukuthi i-Kaposi sakhoma, edalwa ukuthola igciwane, ibingavamile ngoba imbalwa intsha edla imshanguzo ye-HIV.

Abantu abane-HIV abangayidli imidhsnguzo bangaba namasosha omzimba abuthaka angakwazi ukulwa negciwane.

Abacwaningi bathole nokuthi amathuba okuba nomdlavuza abephezulu kwabaneminyaka ewu-20 kuya ku-24 ukudlula abano-15 kuya ku-19.

Isibonelo, bathole ukuthi abanengi abaneminyaka ephakathi kuka-20-24 baqalwe i-non-cervical carcinoma (umdlavuza okhula ezithweni ezingaphakathi) umdlavuza wesibeletso ne-Kaposi sakhoma.

Imiphumela iveze nokuthi abesilisa basemathubeni aphezulu okuthola umdlavuza ngoba u-11% kuphela kubo obungenamdlavuza.

Abacwaningi babika ukuthi ngaphandle kwe-lukhimya (umdlavuza wegazi), isibalo samasosha e-CD4 besihlangene ezibalweni eziphezulu zayo yonke imidlavuza, ikakhulukazi i-Kaposi sakhoma.

Babone izibalo zamasosha e-CD4 ezithe ukukhuphuka kancane kwabaneminyaka ewu-15-19 uma kuqhathaniswa nabano-20-24.

Lolu bekuwucwaningo olukhulu lokuqala olubheke ubungozi bomdlavuza kwabasha abane-HIV eNingizimu Afrika.

Kodwa ngale kokubheka amarekhodi eziguli acishe abe u-800 000, abacwaningi bathe izibalo zemidlavuza ethize bezim'balwa.

Baphinde bathi abakwazanga ukuthole eminye imininingwane yeziguli abebeyifuna.

Baqwashise ukuthi abanye abacwaningi kungenzeka basebenzisa ezinye izindlela zokuchaza a ukuvela komdlavuza, ngalokho lemiphumela ingeqhathaniseke neminye.