

Journal of Advances in Microbiology

Volume 24, Issue 1, Page 61-65, 2024; Article no.JAMB.97575 ISSN: 2456-7116

Immuno-Positivity of HIV among Long Distance Drivers, Short Distance Drivers and Ordinary Drivers in Rivers State

K. F. Williams ^{a*} and D. M. Chioma ^b

^a Department of Microbiology, Faculty of Science, Rivers State University, Rivers State, Nigeria. ^b Department of Microbiology, Faculty of Science, University of Port Harcourt, Rivers State, Nigeria.

Authors' contributions

This work was carried out in collaboration between both authors. Both authors read and approved the final manuscript.

Article Information

DOI: 10.9734/JAMB/2024/v24i1786

Open Peer Review History:

This journal follows the Advanced Open Peer Review policy. Identity of the Reviewers, Editor(s) and additional Reviewers, peer review comments, different versions of the manuscript, comments of the editors, etc are available here: https://www.sdiarticle5.com/review-history/97575

Original Research Article

Received: 14/11/2023 Accepted: 18/01/2024 Published: 24/01/2024

ABSTRACT

In this study, the immuno-positivity of HIV among long, short distance drivers and ordinary drivers in different motor parks in Choba and Rumuokoro community Rivers State was investigated for their retroviral status. A total of 81 commercial drivers between the ages 30-56 while 15 ordinary drivers between the ages 35-60 years old volunteered for the screening.Questionnaires were administered to the participants before their blood samples were aseptically collected. HIV screening was carried out using Determine HIV ^{1/2} strips. The results showed that a 40-year old commercial driver (3%) in the long distance driver category tested positive for HIV 2. However, in the short distance driver category, two commercial drivers aged 38 and 41 respectively (4%) tested positive for HIV 2. The ordinary drivers were all tested negative for HIV 2. The Level of HIV awareness among Long, short distance drivers and ordinary drivers is 84%. Sixteen are aware of all routes of transmission while 16% have very little or no Knowledge of the non-sexual routes. Response from the questionnaire showed a high level (84%) of awareness of HIV infection. Due to the nature of their occupation,

^{*}Corresponding author: E-mail: williamskayode22@gmail.com;

J. Adv. Microbiol., vol. 24, no. 1, pp. 61-65, 2024

commercial drivers are always exposed to multiple sex partners. Therefore, HIV awareness, prevention and treatment should be vigorously encouraged among commercial drivers.

Keywords: Awareness; HIV; long and short distance drivers; ordinary drivers; questionnaires.

1. INTRODUCTIONAND BACKGROUND

Human Immunodeficiency Virus (HIV) belongs to a special class of viruses called retroviruses. Within this class, HIV is placed in a subgroup of lentiviruses. HIV leads to Acquired Immunodeficiency Syndrome (AIDS) a condition which leads to failure in the immune system of very human life [1]. HIV is a highly variable virus which mutates very readily thus, within the body of an infected person there are many different strains of HIV [2]. Based on genetic similarities, the numerous virus strains may be classified into types, groups and subtypes. There are two types of HIV: HIV-1 and HIV-2 [3]. Both types are transmitted largely by sexual contact, through blood and from mother to child. Egah et al. [4] reports that Human immunodeficiency virus and acquired immunodeficiency syndrome remain a major public health issue in the world today. HIV is threatening the very existence of every human kind as one out of every 100 is affected by this disease in the world [4]. The group of people at higher risk of acquiring HIV infection are people with blood and blood product recipients, sex vendors and buyers, both heterosexuals and homosexual, mobile population, and patients treated with unsterilized medical instruments [1]. The risk of HIV infection through unprotected vaginal sex with an infected person is estimated to be 2 to 4 times higher for women than for men [5]. In many developing countries, women are dependent on men socially, economically and emotionally, thus impairing the ability to persuade the sexual partners to use condoms [3]. However, this study aims to establish the immuno-positivity of HIV among the mobile population of long and short distance drivers as well as ordinary drivers in Rivers State, Nigeria.

2. MATERIALS AND METHODS

2.1 Sample Collection and Location

A total of One Hundred (100) Long, Short Distance Drivers and ordinary drivers volunteered to participate in this study across three motor parks in Rivers State. Thirty-One (31) were Long Distance Drivers, fifty (50) were short distance drivers and fifteen (15) were ordinary drivers. Blood samples were collected from the study population after their consent was sought, at Choba Motor Park for Long distance drivers and Rumuokoro Motor Parks for short distance drivers and Choba and Rumuokoro motor parks for ordinary drivers. The samples were immediately transported to the laboratory for analyses.

2.2 Sampling Procedure and HIV Screening

The method used involved the collection of blood sample from the sample population and the subsequent administration of questionnaires to the study population. This was followed by blood sample collection using sterile syringes which was later transferred into properly labeled EDTA bottles. The HIV tests conducted were based on the principle of agglutination or immunodot reactions [6]. The test kit used for the screening was Determine HIV-1/2. The Determine Kit contains 10 HIV 1/2 synthetic peptide coated test card and recombinant antigen. The blood sample was aseptically collected and allowed to settle. The plasma was separated from the whole blood and subsequently used for the screening. A drop of the plasma was aseptically dropped on the HIV strip using Pasteur pipette. A double line and single line on the strip indicates a positive and negative result respectively.

2.3 Data Analysis

The results obtained in the study were represented in tables. The prevalence of HIV was determined from the proportion of positive individuals under consideration and expressed in percentages.

3. RESULTS

A total of 31 blood samples were screened for HIV from long distance drivers and only 1 (3%) was positive. Atotal of 50 blood samples were screened for HIV from short distance drivers and 2 (4%) were positive. Out of the 19 blood samples screened for HIV from ordinary drivers none 0(0%) was positive (Table 1). The level of HIV awareness among long, short distance drivers and ordinary driverswas 84%. Out of the

Category	Samples Size	Number of Drivers Tested Positive	Percentage of Drivers Tested Positive (%)
Long Distance	31	1	3.2%
Drivers	50	2	4.0%
Short Distance Drivers Ordinary Drivers	19	0	0.0%

Table 1. Total immuno-positivity among long, short distance drivers and ordinary drivers

Table 2. HIV awareness of long, short distance drivers and ordinary drivers

Location	Knowledge of HIV	Knowledge of HIV Management	Knowledge of Non-sexual route of HIV Transmission	Knowledge of Window Period
Long Distance Drivers Short Distance Drivers Ordinary Distance Drivers	27 (87%) 41(82%) 16(80%)	4 (13%) 9(18%) 3(20%)	4 (13%) 9(18%) 3(20%)	4 (13%) 9(18%) 3(20%)

Table 3. Sexual history of long, short and ordinary distance drivers

Location	Sample Size	None Condom Users	Condom Users	Drivers who had sex with a sex worker	Drivers who did not had sex with a sex worker
Long Distance Drivers	31	16 (52%)	15 (48%)	12 (39%)	19 (61%)
Short Distance Drivers	50	30 (60%)	20 (40%)	9(18%)	41 (82%)
Ordinary Distance Drivers	19	10(53%)	9(47%)	5(26%)	14(74%)

long and short distance drivers, 27 (87%) and 19 general knowledge of HIV (82%) had respectively while 16 (80%)ordinary drivers had knowledge of the virus (Table 2). Table 2 further shows the respective study population's awareness of HIV management, non-sexual routes of HIV as well as the window period of the virus. In the long distance driver category, 12 (39%) reported that they had sexual intercourse with sex workers while 19 (61%) responded in the negative (Table 3). Fifteen long distance drivers (48%) reported that they used condoms while the other 16 (52%) revealed that they did not use condoms during sexual intercourse with commercial sex workers. The number of short distance drivers who reported that they had sex with sex workers was 9 (18%) while 41 (82%)

said that they had not had sex with sex workers. Twenty of the short distance drivers (40%) reported the use of condoms while 30 (60%) reported non-usage of condoms during sex with commercial sex workers. The number of ordinary distance drivers who reported they had sex with a sex workers was 5 (26%) while 14 (74%) responded in the negative. Out of this group, 9 (47%) used condoms while 10 (53%) reported the non-usage of condoms as shown in Table 3.

4. DISCUSSION

HIV/AIDs is a pandemic affecting the poor and the rich, the educated and illiterate, the married and the single [7]. It has its tentacles in all groups of people. There are factors that predispose an individual to contact this virus. These factors include unprotected sex, use of contaminated sharp object, and receiving of infected blood products [8]. An individual exposed to these conditions is said to be at high risk of contracting the virus [9]. Spending time away from home is one of those factors that predisposes an individual to behaviours that make them at risk of being infected with the virus [8] thus, long distance and short distance drivers are said to be a high risk group for HIV infection because of the nature of their occupation [3]. This study was carried out among long distance drivers, short distance drivers and ordinary drivers in Rivers State. The number of commercial drivers and ordinary drivers who volunteered to participate in this study were low as compared to the total number of drivers in the motor parks and communities used in the study. The reason many of the drivers were unwilling to participate in this study may be as a result of the fear of knowing their HIV status. Also, stigmatization against individuals already infected with the virus discourages many people from getting tested [9]. This is a big challenge towards the fight against the spread of HIV.A total immuno-positivity rate of 3.1% for HIV was recorded among the drivers for both long, short distance drivers and ordinary drivers. The low level of HIV immuno-positivity observed in this study could be as a result of increased awareness which resulted in less risky behaviour among the commercial drivers and ordinary drivers. In addition, the HIV test could have been carried out during when the viral load in the blood was very low which is the window period thus, resulted in the low antibodies production bythe immune system. During the window period, the kit employed in this study shows a visual negative result when screened. This finding of low HIV immuno-positivity is similar to the immuno-positivityrate of 3.1% reported by [10] among prospective blood donors in Osogbo, Nigeria and differs from 6.0% immuno-positivity rate reported by [11] among blood donors in Jos, Nigeria. It also differs from the 10% immuno-positivity rate reported by Frank-Peterside et al. [1] among long distance truck drivers in Nigeria. The study population showed that most of the drivers were above 40years old, (35% for 40 – 44years and 39% for 45 and above). This could have resulted in the low immuno-positivity of HIV observed in this study. This finding agrees with Thomas et al [4] who observed that the older the age, the lower immuno-positivity of HIV in a population. Furthermore, most of the drivers were found to be married to one partner. This may also account for the reason why the immuno-positivity rate of HIV was low in this study. This is because most of the drivers do not have multiple sex partners and as a result are at a lesser risk of being infected with HIV [2]. Having multiple sex partners has been advocated as a risk factor for HIV [12]. Furthermore, 100% of the drivers involved in the study were male while none (0%) were females. The reason is that there are very few female commercial drivers and ordinary drivers in the State. This could be the reason why the rate is low in this study. It was observed that on the basis of HIV awareness that 87%, 82% and 80% of the long distance, short distance drivers and ordinary drivers respectively had knowledge of HIV while a lower proportion of the drivers had knowledge of HIV management and non-sexual route of HIV transmission. This high knowledge of HIV recorded in the study could have contributed to the low HIV immunopositivity rate observed in this study. This is because when there is a high level of awareness, one takes necessary precaution to avoid risk behaviours that could predispose him to getting infected with HIV. However, more awareness programs should be carried out on HIV management and other non-sexual route of HIV transmission in order to further reduce the immuno-positivity of HIV.

5. CONCLUSION

HIV remains one of the global threats of human existence and the best approach to limit its prevalence is prevention of the transmission of the virus. This can be achieved when the risk factors and groups are identified as this will aid targeted HIV prevention campaigns among the groups.Generally, drivers are considered to be at a risk of getting infected because of the attendant exposure in their occupation. In this study, the immuno-positivity of HIV among the drivers was found to be low. However, more HIV awareness campaigns should be encouraged among commercial drivers and mass HIV testing should be conducted routinely on drivers for early detection and adequate management of the disease.

ETHICAL APPROVAL

As per international standard or university standard written ethical approval has been collected and preserved by the author(s).

CONSENT

As per international standard or university standard, Participants' written consent has been collected and preserved by the author(s).

COMPETING INTERESTS

Authors have declared that no competing interests exist.

REFERENCES

- Barre Sinoussi F, Chermann JC, Rey F. Isolation of a T-lymphotropic retrovirus from a patient at risk for acquired immune deficiency syndrome. (Aids). Science. 1983;220(4599):868 – 871. Bibcode 1983 Sci –220 –868b. DOI: 10.11261 Science. 6189183 PM.D 6189183.
 Brocks GE Buttel JS, Morco SA, Jawetz
- Brooks GF, Butel JS, Morse SA. Jawetz, melinick and adelberg's medical microbiology. 22nd ed. Mc.Graw – Hill Companies. 2002;526.
- Buseri FI, Muhibi MA, Jeremiah ZA. Sero epidemiology of transfusion – transmissible infectious diseases among blood. Donors in Osogbo, South – West Nigeria. Blood Transfusion. 2009;7(4):293 –299.
- Egah DZ, Mandong BM, Iya D, Gomwalk NE, Audu ES, Banwat EB, Onile BA. Hepatitis C virus antibodies among blood donors in Jos, Nigeria. Annals of African Medicine. 2004;3(1):35-37.
- Frank Peterside N, Azuonwu O, Erhabor O. HIV infection in long –distance truck drivers in a low income setting in the Niger Delta of Nigeria. Journal of Community health (impact factor: 1.28) 11/2010. 2010;36(4):583-7. DOI: 10:1007/510900 – 010 – 9344 – 4.

- Rick Sowadsky. What is HTLV-111? Retrieved on 2008-0403. (Provide link); 1999.
- Smith J. Incidence of HIV super infection following primary infection. JAMA. 2004;292(10):1177-1178.
- Thomas PE, Voetsch AC, Song B, Calloway D, Goode C, Mundey L, Nobles J, Patterson K, Ward S, Sullivan PS, Heffelfinger JD. HIV risk behaviour and testing history in Historically Black College and University Settings. Public Health Report, 2008;123(Suppl 3):115-125.
- Aleruchi O, Peterside NF, Ezekoye CC. Seroprevalence Of HIV Infection among Blood Donors At The University Of Port Harcourt Teaching Hospital, Rivers State, Nigeria: Global Journal for Biology, Agriculture and Health Sciences 2014. (2):1-7.
- 10. Buseri FI, Musa MA, Jeremiah ZA. Seroepidemiology of transfusion-transmissible infectious diseases among blood donors in Osogbo, south-west Nigeria. Blood Transfus. 2009; 7(4):293-9.
- 11. Ejele OA, Erhabor O, Nwauche CA. Trends in the prevalence of some transfusion-transmissible infections among blood donors in Port Harcourt, Nigeria. Haema. 2005;8:273–7.
- Abbey SD, Erhabor O, Nwoka E, et al. Seroprevalence of Treponema pallidum infection among blood donors in a resource poor setting in the Niger Delta of Nigeria. Niger Biomedical Science Journal 2006;2:29–31.

© 2024 Williams and Chioma; This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

> Peer-review history: The peer review history for this paper can be accessed here: https://www.sdiarticle5.com/review-history/97575