

support systems in neonatology, further exploration to overcome guideline variations is necessary. Uniformity in neonatal dosage recommendations of antibiotics can also serve as a basis for developing a set of neonatal defined daily doses (nDDD), a valuable tool for analysis of drug consumption.

309

### POSITIVE IMPACT ON SURVIVAL FOR CHILDREN WITH AIDS IN BRAZIL: COMBINED ANALYSIS OF TWO NATIONAL STUDIES, 1983-1998 AND 1999-2002

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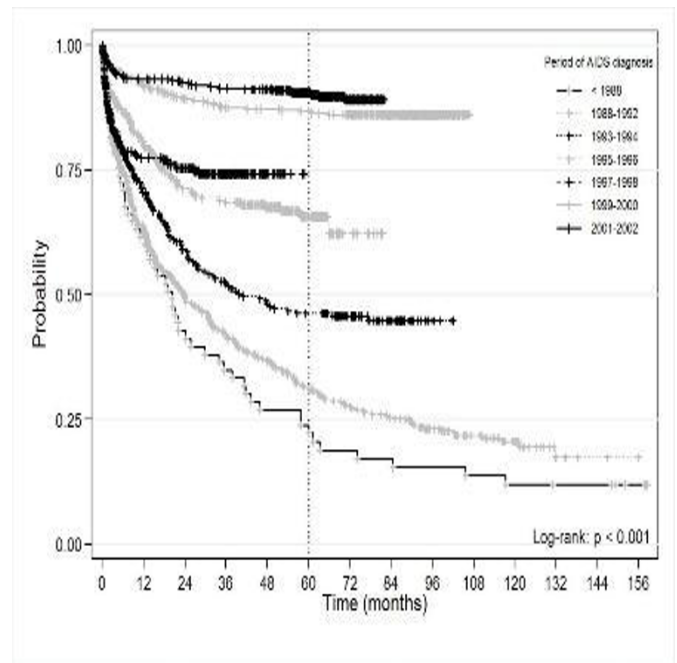
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**Background:** Brazil is known for its AIDS control program, including universal access to prevention, diagnosis, and treatment. Survival data is one indicator for program monitoring and evaluation. However, there are no systematic data on survival of children with AIDS.

**Methods:** This analysis is based on 2 retrospective cohort studies of children under age 13 diagnosed in 1983-1998 and 1999-2002 (N=914 and 920, respectively). Both were randomly sampled from all reported cases in the country and employed similar methods. We calculated probability of survival to 60 months for children diagnosed with AIDS due to vertical transmission.

**Results:** In the first study (1983-1998), overall survival to 60 months was 52.8% (95% CI: 41.9%-60.8%). In the second study (1999-2002), overall survival increased to 86.5% (83.0%-89.3%). During the entire period, the probability of survival to 60 months increased by 4.5-fold, rising from about 20% to 90% (see figure;  $p < .001$  by log-rank test). Among the 16 cases diagnosed 1983-1987, survival was 19.7% (11.2%-30.0%). For the 265 cases in 1988-1992, it was 27.3% (22.9%-31.9%). For 1993-1994, survival was 39.7% (N=196; 33.4%-45.9%). For 1995-1996, it was 59.5% (N=221; 52.8%-65.6%). For 1997-1998, it was 68.2% (N=216; 61.6%-73.9%). For 1999-2000, it was 86.5% (N=470;

83.0%-89.3%); and for 2001-2002, it was 90.2% (N=450; 87.0%-92.7%).



[Survival Curve - Children with AIDS, Brazil]

**Conclusions:** These results demonstrate the impact of Brazilian policies for children with AIDS. But this achievement creates new challenges related to providing longitudinal comprehensive care and maintaining high quality as well as quantity of survival.

310

### TOWARDS ELIMINATION OF VERTICAL TRANSMISSION OF HIV IN SÃO PAULO STATE, BRAZIL - ANALYSIS OF THE PERIOD 1984-2008

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**Background:** São Paulo State has been a pioneer in adopting measures for prevention of mother-to-child transmission (MTCT) of HIV since the mid-1990s. Consequently, HIV infection in children has steadily diminished. Reported AIDS cases in children under five is a useful proxy for MTCT.

**Methods:** We studied AIDS incidence rates in children under five in São Paulo (Brazil southeast)