AIDS orphans

The HIV/AIDS epidemic will leave from 72,000 to 125,000 U.S. children orphaned by the year 2000, researchers with The Orphan Project, administered by the Fund for the City of New York, reported.

Researchers calculated maternal deaths in the six hardest-hit cities — New York; Newark, N.J.; Miami; Los Angeles, Washington, D.C.; and San Juan, Puerto Rico. (See accompanying graph.)

The report, "Orphans of the HIV Epidemic: Unmet Needs in Six U.S. Cities," describes the complex needs of these children, and is the first nationwide analysis of the anticipated lack of available services to AIDS orphans, their families and service providers, researchers reported.

Areas of concern include: lack of counseling services, inadequate legal services to implement custody, loss of AIDS-related benefits to children and their potential guardians, loss of housing subsidies, and lack of appropriate evaluations by juvenile justice and school staff for referral to community-based services.

The study focused on inflexibility of current foster-care and guardianship laws. The authors contend that orphans' relatives often are ineligible for needed child-care subsidies, sometimes making it financially impossible for children to be placed with family members, the study stated.

For information, contact The Orphan Project, 121 Avenue of the Americas, 6th Floor, New York, NY 10013, (212) 925-5675.

Hib greatly reduced

Haemophilus influenzae type b (Hib) disease among children younger than 5 years has declined more than 90 percent since 1989, according to a report from the U.S. Centers for Disease Control and Prevention (CDC).

The CDC attributed the disease's decline to the introduction of the Hib conjugate vaccine in 1988. The CDC has included the disease in its list of vaccine-preventable diseases targeted for elimination in the United States by 1996.

Based on 1992 findings from the National Health Interview Survey, the CDC reported 67 percent of children, ages 12 months to 23 months, had received at least one Hib vaccine. Thirty-six percent had received three or more doses. CDC researchers attributed the 90 percent decline in Hib to decreased transmission, and subsequent reduced exposure to unvaccinated persons.

Early detection of developmental delays

A new screening test developed by researchers at The Ohio State University might detect developmental problems in children as early as age 3 years, according to a study reported in Vol. 97 of the American Journal on Mental Retardation.

Using birth certificates and telephone surveys, researchers found six biological and environmental factors that might predispose children to developmental delays.

Parents' perceptions of whether their children "liked to be read to" was the variable with the highest correlation to developmental delays, researchers said. They speculated that parental inattention to children's intellectual growth might contribute to delayed development.

Other risk factors for delays included: low-quality home environment, including lack of stimulating materials or overly punitive parenting styles; large numbers of children in families; congenital malformations; and complications during the mother's pregnancy. Also, since 63 percent of developmentally delayed children were male, researchers stated that boys appeared more prone to developmental difficulties than girls.

Researchers concluded that neither biological damage nor low environmental quality alone predisposed children to developmental delays, but rather a combination of both.

AZT reduces maternal AIDS transmission

Zidovudine therapy (AZT) reduced transmission of the AIDS virus from HIV-infected pregnant women to their infants by two-thirds, according to preliminary results of a collaborative study supported by the National Institute of Child Health and Human Development (NICHD), the National Institute of Allergy and Infectious Diseases (NIAID), and two French biomedical research agencies.

Study results showed an 8.3 percent transmission rate when both mothers and infants received AZT, compared with a 25.5 percent transmission rate for those receiving a placebo, NICHD researchers reported.

HIV-positive pregnant women between 14 weeks and 34 weeks of gestation began taking 100 milligrams of AZT, five times daily before delivery, according to a report of the same study results published by the American College of Obstetricians and Gynecologists (ACOG). During labor and delivery, an intravenous dosage was given. After birth, infants were given an AZT syrup for six weeks, beginning eight to 12 hours after birth, ACOG reported.

The NIAID's clinical alert and a summary of the "AIDS Clinical Trial Group (ACTG) study 076" may be obtained from the ACTG information service, (800) TRIALS-A (874-2572).