

ASSOCIATION BETWEEN MATERNAL INFLAMMATION AND GROWTH OF CHILDREN WHO ARE HIV-EXPOSED AT AGE 2 YEARS: ROLE OF BREASTFEEDING

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BACKGROUND

Children who are HIV-exposed (CHE) are at increased risk of poor growth outcomes in resource limited settings. Breastfeeding may mitigate these effects through anti-inflammatory pathways. We evaluated whether the association between second trimester maternal inflammation and growth in CHE at 2 years differed by breastfeeding duration.

Breastfeeding duration was found to modify the association between inflammation and CHE growth outcomes. IL-6 and sCD163 showed consistent negative associations with growth among African and Indian CHE whose mothers breastfed ≤ 12 months and mothers who breastfed ≥ 12 months respectively.

METHODS

- We leveraged growth and associated data from a study nested within the IMPAACT 1077BF/FF trial with maternal plasma inflammation data (IFN- γ , IL-6, TNF α , sCD14, sCD163, and I-FABP) measured at antepartum study entry (t0) and four weeks later (t4).
- Continuous variables of Length-for-Age Z-score (LAZ), Weight-for-Age Z-score (WAZ), and Weight-for-Length (WLZ) at 2 years were analyzed using multivariable linear regression models, with inflammatory marker concentrations and changes between t0 and t4 treated as continuous growth predictors.
- Separate analyses were conducted by breastfeeding duration (≥ 12 months or < 12 months), and adjusted parameter estimates and 95% robust confidence intervals (CI) corresponding to a 0.25 log₁₀-unit increase in biomarker concentration were reported.

RESULTS

Analyses included 252 mother-child pairs, including three children who acquired HIV. Results were similar when these children were excluded from each analysis.

Table 2: Associations of Maternal Inflammatory Marker Concentration and child Length-for-Age Z-score at 2 Years by Breastfeeding Status at 12 Months

Biomarker	Breastfeeding ≥ 12 months?	AP Week 0		AP Week 4		Change (AP Week 4 - AP Week 0)	
		Estimate (95% CI)	P-value	Estimate (95% CI)	P-value	Estimate (95% CI)	P-value
I-FABP	No	-0.03 (-0.49, 0.42)	0.88	-0.19 (-0.51, 0.13)	0.25	-0.19 (-0.51, 0.14)	0.26
	Yes	0.06 (-0.13, 0.25)	0.55	0.15 (-0.12, 0.42)	0.29	0.16 (-0.13, 0.45)	0.29
IFN γ	No	0.16 (-0.09, 0.40)	0.21	0.12 (-0.12, 0.36)	0.34	0.09 (-0.20, 0.37)	0.55
	Yes	0.08 (-0.05, 0.21)	0.22	-0.04 (-0.19, 0.12)	0.64	-0.10 (-0.25, 0.05)	0.20
IL-6	No	0.06 (-0.25, 0.37)	0.70	-0.24 (-0.60, 0.12)	0.18	-0.68 (-1.13, -0.23)	0.003
	Yes	0.00 (-0.24, 0.24)	0.98	0.01 (-0.23, 0.25)	0.96	-0.01 (-0.24, 0.22)	0.93
TNF α	No	0.44 (0.16, 0.72)	0.002	0.10 (-0.30, 0.51)	0.62	-0.57 (-1.18, 0.05)	0.073
	Yes	0.29 (0.08, 0.51)	0.007	0.36 (0.10, 0.62)	0.007	0.29 (-0.10, 0.67)	0.14
sCD14	No	0.33 (-0.34, 0.99)	0.34	0.28 (-0.26, 0.81)	0.31	0.18 (-0.59, 0.96)	0.64
	Yes	-0.03 (-0.41, 0.34)	0.86	-0.01 (-0.44, 0.42)	0.96	0.00 (-0.72, 0.72)	>0.99
sCD163	No	-0.07 (-0.62, 0.49)	0.81	-0.08 (-0.59, 0.43)	0.76	-0.10 (-0.69, 0.49)	0.74
	Yes	-0.32 (-0.57, -0.07)	0.013	-0.48 (-0.77, -0.18)	0.002	-0.51 (-0.89, -0.14)	0.008

CONCLUSIONS

- We observed significant differences in associations between specific biomarkers and growth by breastfeeding duration.
- Shorter breastfeeding was characterized by inverse associations between IL-6 and growth, whereas longer breastfeeding showed consistent inverse associations between sCD163 and growth.
- Higher TNF α was positively associated with LAZ regardless of time breastfed.

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