

## Knowledge of Effect of Exercise on HIV-Infected Persons among Health Care Professionals in North Eastern Nigeria

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### Abstract

**Objectives:** To investigate the knowledge of effect of exercise on HIV- infected persons among health care professionals. **Methods:** The study was conducted at the University of Maiduguri Teaching Hospital (UMTH), a tertiary referral center located in Maiduguri, northeastern Nigeria. Instrument for the study was self administered questionnaire validated by experts in cardiopulmonary physiotherapy and exercise physiology with reliability coefficient of 0.82, and distributed among 289 participants with response rate of 90%. **Results:** The age range and mean age of the participants were 20-59 years and  $37.27 \pm 7.75$  respectively. Substantial number of the participants (46.2%) demonstrated good knowledge of effect of exercise on HIV-infected persons. The mean scores for nurses and dentists were quite low compared to each of the other health care professionals. **Conclusion:** More than a quarter of the participants lacked good knowledge on the effect of exercise on HIV-infected persons. This needs to be remedied through organized enlightenment programs.

**KEY WORDS:** Health Care Professionals; HIV-Infected Persons; Cardiopulmonary Physiotherapy; Highly Active Antiretroviral Therapy; Complementary Therapy; Tertiary Referral health institution

### Introduction

HIV infection was hitherto a fatal condition but with the advent of highly active antiretroviral therapy (HAART) in 1996, it has since changed to a manageable chronic illness. *Cade et al. (2004)* observed that as a result of this breakthrough, a greater number of infected individuals live longer by overcoming the health related consequences and challenges associated with HIV. However, the resultant effect of this life-prolonging antiretroviral therapy is the increase in the pool of HIV infected persons (*Whiteside, 2002*). This increase in population has in turn escalated the

societal burden of the disease, and led to high demand on health care services and resources (*Fido and Al Kazeemi, 2002*). Beside the health benefits of HAART, it has been observed that since the commencement of this therapy, some known and previously unrecognized adverse reactions that were not detected at the early clinical trials are now present. For instance, *Boufassa et al. (2001)* observed that apart from numerous health problems associated with the HIV infection itself, affected individuals also experience adverse effects arising from HAART that could affect the physical, physiological and psychosocial components of their health. Thus, persons