

Abstract

OBJECTIVE: To assess the effects of HIV infection on morbidity and the needs of infected women for services in the first year postpartum. **METHODS:** A cross-sectional study with 500 women attending a child-health clinic in Mombasa, Kenya. **RESULTS:** Postpartum duration was a median of 3.3 months (interquartile range, 1.9-6.1 months). The 54 HIV-infected women had a lower income and less financial support than the uninfected women, and they were more likely to experience fever, dyspnea, and dysuria, and to have genital warts (odds ratio [OR], 9.6; 95% confidence interval [CI], 2.6-35.6; $P < 0.001$), candidiasis (OR, 2.9; 95% CI, 1.2-6.8; $P = 0.012$), and bacterial vaginosis (OR, 1.8; 95% CI, 0.95-3.3; $P = 0.066$). Six (nearly 15%) of the HIV-infected women had low- or high-grade squamous intraepithelial lesions, and 21 (42%) had an unmet need for contraception. More than half of all women were anemic, and normocytic anemia was predominant among the HIV infected. **CONCLUSION:** Compared with uninfected women, morbidity was increased for HIV-infected women during the year following delivery. This period could be used to offer these, and all-women, family planning services, cervical cancer screening, and treatment for anemia and reproductive tract infections.