Safety and Tolerance of Blood Transfusion in Severe Malaria Cases with HIV: Lessons from Pediatric Cases

Article · April 2024

CITATIONS
0

READS
23

2 authors:

Emmanuel Ifeanyi Obeagu
Kampala International University (KIU)
1,686 PUBLICATIONS **23,400** CITATIONS
SEE PROFILE

Getrude Uzoma Obeagu
Kampala International University (KIU)
534 PUBLICATIONS **10,607** CITATIONS
SEE PROFILE

Elite Journal of Laboratory Medicine. Volume 2 issue 4(2024), Pp. 64-83
https://epjournals.com/journals/EJLM

Safety and Tolerance of Blood Transfusion in Severe Malaria Cases with HIV: Lessons from Pediatric Cases

*Emmanuel Ifeanyi Obeagu[1] and Getrude Uzoma Obeagu[2]

[1]Department of Medical Laboratory Science, Kampala International University, Uganda

[2]School of Nursing Science, Kampala International University, Uganda.

*Corresponding authour: Emmanuel Ifeanyi Obeagu, Department of Medical Laboratory Science, Kampala International University, Uganda, emmanuelobeagu@yahoo.com, ORCID: 0000-0002-4538-0161

Abstract

Blood transfusion is a life-saving intervention often employed in the management of severe malaria-related complications, particularly in pediatric populations. However, in regions with high HIV prevalence, the co-occurrence of HIV infection complicates transfusion therapy and raises concerns regarding safety and tolerance. This review examines the safety and tolerance of blood transfusion in severe malaria cases with HIV, focusing on lessons learned from pediatric cases. The paper explores the epidemiology of severe malaria and HIV co-infection in children, discuss the indications and risks associated with blood transfusion, and review strategies for mitigating transfusion-related complications. By synthesizing available evidence and clinical experience, this review aims to provide insights into optimizing transfusion therapy and improving outcomes for pediatric patients with severe malaria and HIV co-infection.

Keywords*: Blood transfusion, severe malaria, HIV, pediatric, safety, tolerance, complications, clinical management*

Introduction

Severe malaria and HIV co-infection pose significant challenges in pediatric healthcare, particularly in regions where both diseases are endemic. Blood transfusion stands as a crucial therapeutic intervention for managing severe malaria-related complications, such as severe anemia, in pediatric populations. However, in the context of HIV co-infection, concerns regarding the safety and tolerance of blood transfusion emerge. Pediatric cases of severe malaria with HIV

Citation: Obeagu EI, Obeagu GU. Safety and Tolerance of Blood Transfusion in Severe Malaria Cases with HIV: Lessons from Pediatric Cases. Elite Journal of Laboratory Medicine, 2024; 2(4): 64-83

co-infection necessitate a nuanced approach to transfusion therapy, considering the potential risks and benefits associated with this life-saving intervention. The epidemiology of severe malaria and HIV co-infection in children reflects the overlapping burden of these diseases in regions with high malaria and HIV prevalence. Pediatric populations in these areas face a disproportionate risk of severe malaria-related complications, exacerbated by concurrent HIV infection. Consequently, blood transfusion becomes a critical component of clinical management, aiming to restore hemoglobin levels and improve tissue perfusion. However, the safety and tolerance of transfusion therapy in pediatric severe malaria cases with HIV co-infection require careful consideration to optimize patient outcomes.[1-30]

Indications for blood transfusion in pediatric severe malaria cases with HIV co-infection stem from the need to address severe anemia and associated symptoms, such as lethargy and pallor. While transfusion therapy can be life-saving, it is not without risks. Transfusion-related complications, including transfusion-transmitted infections (TTIs), transfusion-related acute lung injury (TRALI), and transfusion-associated circulatory overload (TACO), present significant concerns, particularly in immunocompromised pediatric patients with HIV co-infection. Strategies for mitigating transfusion-related complications in pediatric severe malaria cases with HIV co-infection encompass stringent blood safety measures and careful monitoring for adverse events. Stringent blood screening protocols aim to minimize the risk of TTIs, while vigilant monitoring for signs of TRALI, TACO, and other transfusion-related adverse events allows for early recognition and intervention. By implementing these strategies, healthcare providers can optimize the safety and tolerance of blood transfusion and improve outcomes for pediatric patients with severe malaria and HIV co-infection.[31-60]

This review aims to synthesize available evidence and clinical experience to provide insights into optimizing transfusion therapy for pediatric severe malaria cases with HIV co-infection. By understanding the epidemiology, indications, risks, and mitigation strategies associated with blood transfusion in this vulnerable population, healthcare providers can deliver more effective and safer transfusion therapy, ultimately improving the quality of care and outcomes for pediatric patients with severe malaria and HIV co-infection.

Epidemiology of Severe Malaria and HIV Co-infection in Children

The epidemiology of severe malaria and HIV co-infection in children underscores the overlapping burden of these diseases in regions where both malaria and HIV are endemic. Malaria remains a leading cause of morbidity and mortality among children globally, particularly in sub-Saharan Africa, where approximately 94% of all malaria-related deaths occur. Children under five years of age are disproportionately affected, accounting for the majority of malaria-related deaths worldwide. In these endemic regions, the transmission of Plasmodium falciparum, the deadliest malaria parasite species, is highest, leading to a high prevalence of severe malaria cases requiring urgent medical intervention. Concurrently, pediatric HIV infection remains a significant public health concern, with an estimated 1.7 million children under 15 years of age living with HIV worldwide. Sub-Saharan Africa bears the greatest burden of pediatric HIV infection, accounting

for approximately 90% of all new HIV infections among children. Mother-to-child transmission is the primary mode of HIV acquisition in children, highlighting the importance of comprehensive prevention of mother-to-child transmission (PMTCT) programs in reducing pediatric HIV incidence.[61-80]

The co-occurrence of severe malaria and HIV in pediatric populations presents unique challenges in clinical management and complicates disease outcomes. HIV infection is known to increase the risk and severity of malaria infection, leading to more frequent and severe episodes of malaria in children living with HIV. Conversely, malaria has been shown to accelerate the progression of HIV infection and increase the risk of HIV-related complications, including opportunistic infections and mortality. As a result, pediatric patients with severe malaria are more likely to have concurrent HIV infection, further exacerbating disease severity and complicating clinical management. Moreover, the interaction between severe malaria and HIV co-infection in children extends beyond clinical manifestations to impact treatment outcomes and overall morbidity and mortality rates. Children with severe malaria and HIV co-infection are at increased risk of mortality compared to those with either condition alone, highlighting the synergistic effect of these diseases on pediatric health outcomes. Understanding the epidemiology of severe malaria and HIV co-infection in children is crucial for informing clinical practice and guiding public health interventions aimed at reducing disease burden and improving outcomes in this vulnerable population.[81-100]

Indications and Risks of Blood Transfusion

In pediatric cases of severe malaria with HIV co-infection, blood transfusion is often indicated to address severe anemia and associated symptoms, such as lethargy, pallor, and impaired tissue perfusion. Severe anemia is a common complication of severe malaria, particularly in children, and can lead to life-threatening complications if left untreated. Transfusion therapy aims to restore hemoglobin levels, improve oxygen delivery to tissues, and alleviate symptoms of anemia, ultimately reducing morbidity and mortality in affected patients. Despite its life-saving potential, blood transfusion carries inherent risks, particularly in pediatric populations with severe malaria and HIV co-infection. Transfusion-related complications, including transfusion-transmitted infections (TTIs), transfusion-related acute lung injury (TRALI), and transfusion-associated circulatory overload (TACO), are potential concerns that must be carefully considered when weighing the risks and benefits of transfusion therapy in this vulnerable population. Transfusion-transmitted infections (TTIs) pose a significant risk in regions where blood screening and donor selection protocols may be limited or inadequate. HIV, hepatitis B, hepatitis C, and other bloodborne pathogens can be transmitted through transfusion of contaminated blood products, leading to long-term complications and increased morbidity and mortality in pediatric patients with severe malaria and HIV co-infection. Stringent blood screening protocols and donor selection criteria are essential for minimizing the risk of TTIs and ensuring the safety of transfusion therapy in this population.[101-140]

Transfusion-related acute lung injury (TRALI) and transfusion-associated circulatory overload (TACO) are potentially life-threatening complications of blood transfusion that can occur in pediatric patients with severe malaria and HIV co-infection. TRALI is characterized by acute respiratory distress and pulmonary edema following transfusion, while TACO results from volume overload and pulmonary congestion due to excessive transfusion volume. Both complications can exacerbate respiratory compromise and hemodynamic instability, particularly in immunocompromised patients with underlying cardiac or pulmonary conditions. Furthermore, transfusion-related immunomodulation and alloimmunization are additional risks associated with blood transfusion in pediatric severe malaria cases with HIV co-infection. Alloimmunization can lead to the development of antibodies against transfused blood antigens, potentially complicating future transfusion therapy and increasing the risk of hemolytic transfusion reactions. Understanding these risks and implementing strategies to mitigate transfusion-related complications are essential for optimizing the safety and efficacy of transfusion therapy in pediatric patients with severe malaria and HIV co-infection.[141-160]

Strategies for Mitigating Transfusion-related Complications

Implementing rigorous blood screening protocols is paramount for minimizing the risk of transfusion-transmitted infections (TTIs) in pediatric severe malaria cases with HIV co-infection. Blood banks should adhere to established guidelines for donor selection and screening, including serological testing for HIV, hepatitis B and C, syphilis, and other bloodborne pathogens. Additionally, nucleic acid amplification testing (NAT) can enhance the detection of viral pathogens in blood donations, further improving blood safety. Leukoreduction, or the removal of white blood cells from blood products, has been shown to reduce the incidence of transfusion-related complications, including febrile non-hemolytic reactions and alloimmunization, in pediatric transfusion recipients. Leukoreduction filters can effectively remove leukocytes, cytokines, and other potentially immunomodulatory factors from blood products, minimizing the risk of adverse reactions and improving overall transfusion safety. Limiting the volume of transfused blood products and closely monitoring transfusion volume during administration can help prevent transfusion-associated circulatory overload (TACO) in pediatric severe malaria cases with HIV co-infection. Careful assessment of fluid status and hemodynamic parameters, such as blood pressure, heart rate, and respiratory rate, is essential for identifying early signs of volume overload and adjusting transfusion volume accordingly to optimize patient outcomes. Performing pre-transfusion testing, including ABO and Rh blood typing, and crossmatching blood products with recipient serum can help ensure compatibility and reduce the risk of hemolytic transfusion reactions in pediatric patients with severe malaria and HIV co-infection. ABO and Rh compatibility should be confirmed before transfusion to minimize the risk of hemolytic reactions, particularly in patients with known red blood cell alloantibodies. Close monitoring for signs and symptoms of transfusion-related complications, including fever, respiratory distress, hypotension, and hemolysis, is essential for early detection and management of adverse events in pediatric severe malaria cases with HIV co-infection. Healthcare providers should remain vigilant during and after transfusion, promptly addressing any signs of transfusion-related complications to minimize morbidity and mortality in affected patients.[161-180]

Lessons Learned from Pediatric Cases

Pediatric severe malaria cases with HIV co-infection require an individualized approach to transfusion therapy, taking into account disease severity, hemoglobin levels, clinical symptoms, and transfusion-related risks. Each patient presents unique challenges and considerations, and healthcare providers must tailor transfusion decisions based on a comprehensive assessment of the patient's clinical status and transfusion requirements. Pediatric patients with severe malaria and HIV co-infection are at heightened risk of transfusion-related complications, including transfusion-transmitted infections (TTIs), transfusion-related acute lung injury (TRALI), and transfusion-associated circulatory overload (TACO). Early recognition and prompt management of these complications are essential for optimizing patient outcomes and minimizing morbidity and mortality in affected children. Ensuring the safety of blood transfusion is paramount in pediatric severe malaria cases with HIV co-infection. Stringent blood screening protocols, including donor selection and serological testing for TTIs, are essential for minimizing the risk of transfusion-transmitted infections. Additionally, leukoreduction and other blood processing techniques can further enhance blood safety by reducing the risk of transfusion-related adverse events. Pediatric patients with severe malaria and HIV co-infection may be particularly vulnerable to neurocognitive effects of transfusion-related complications, such as TRALI and TACO. Healthcare providers must remain vigilant for signs of neurocognitive impairment in transfusion recipients, including changes in consciousness, behavior, and cognitive function. Early recognition and intervention can help mitigate neurocognitive sequelae and improve long-term outcomes in affected children. Optimal clinical management of pediatric severe malaria cases with HIV co-infection requires a multidisciplinary approach involving healthcare providers from various specialties, including infectious diseases, hematology, transfusion medicine, and neurology. Collaboration among healthcare teams allows for comprehensive assessment, individualized treatment planning, and timely intervention to address the complex needs of pediatric patients with severe malaria and HIV co-infection.[181-194]

Conclusion

Pediatric severe malaria cases with HIV co-infection present unique challenges in clinical management, particularly regarding blood transfusion therapy. Lessons learned from pediatric cases highlight the importance of individualized approaches to transfusion therapy, early recognition and management of transfusion-related complications, stringent blood safety measures, monitoring for neurocognitive effects, and a multidisciplinary approach to clinical management. Optimizing transfusion therapy in this population requires careful consideration of disease severity, hemoglobin levels, clinical symptoms, and transfusion-related risks. Healthcare providers must tailor transfusion decisions based on a comprehensive assessment of each patient's clinical status and transfusion requirements, aiming to maximize benefits while minimizing risks.

Furthermore, ensuring the safety of blood transfusion is paramount in pediatric severe malaria cases with HIV co-infection. Stringent blood screening protocols, including donor selection and serological testing for transfusion-transmitted infections, are essential for minimizing the risk of

bloodborne pathogens. Additionally, blood processing techniques such as leukoreduction can further enhance blood safety by reducing the risk of transfusion-related adverse events. Vigilant monitoring for signs of transfusion-related complications, including neurocognitive effects, is crucial for early recognition and intervention. Collaboration among healthcare teams from various specialties allows for comprehensive assessment and individualized treatment planning, optimizing outcomes for pediatric patients with severe malaria and HIV co-infection.

References

1. Alonso PL, Tanner M. Public health challenges and prospects for malaria control and elimination. Nature medicine. 2013;19(2):150-155.
2. Muhammad F, Abdulkareem JH, Chowdhury AA. Major public health problems in Nigeria: a review. South East Asia Journal of Public Health. 2017;7(1):6-11.
3. González R, Ataíde R, Naniche D, Menéndez C, Mayor A. HIV and malaria interactions: where do we stand? Expert review of anti-infective therapy. 2012 Feb 1;10(2):153-65.
4. De Baets AJ, Bulterys M, Abrams EJ, Kankassa C, Pazvakavambwa IE. Care and treatment of HIV-infected children in Africa: issues and challenges at the district hospital level. The Pediatric infectious disease journal. 2007;26(2):163-173.
5. Bhutta ZA, Sommerfeld J, Lassi ZS, Salam RA, Das JK. Global burden, distribution, and interventions for infectious diseases of poverty. Infectious diseases of poverty. 2014; 3:1-7.
6. Crawley J, Chu C, Mtove G, Nosten F. Malaria in children. The Lancet. 2010;375(9724):1468-1481.
7. Obeagu EI, Obeagu GU, Chukwueze CM, Ikpenwa JN, Ramos GF. EVALUATION OF PROTEIN C, PROTEIN S AND FIBRINOGEN OF PREGNANT WOMEN WITH MALARIA IN OWERRI METROPOLIS. Madonna University journal of Medicine and Health Sciences ISSN: 2814-3035. 2022;2(2):1-9.
8. Obeagu EI, Ibeh NC, Nwobodo HA, Ochei KC, Iwegbulam CP. Haematological indices of malaria patients coinfected with HIV in Umuahia. Int. J. Curr. Res. Med. Sci. 2017;3(5):100-104.
9. Opeyemi AA, Obeagu EI. Regulations of malaria in children with human immunodeficiency virus infection: A review. Medicine. 2023;102(46): e36166.
10. Obeagu EI, Chijioke UO, Ekelozie IS. Malaria rapid diagnostic test (RDTs). Ann Clin Lab Res. 2018;6(4):275.
11. Ogomaka IA, Obeagu EI. Methods of Breast Feeding as Determinants of Malaria Infections among Babies in IMO State, Nigeria. International Journal of Medical Science and Dental Research. 2019;2(01):17-24.
12. Obeagu EI, Obeagu GU. Hematological Changes Following Blood Transfusion in Young Children with Severe Malaria and HIV: A Critical Review. Elite Journal of Laboratory Medicine. 2024;2(1):33-45.
13. Obeagu EI, Obeagu GU. Hematological Changes Following Blood Transfusion in Young Children with Severe Malaria and HIV: A Critical Review. Elite Journal of Laboratory Medicine. 2024;2(1):33-45.

Citation: Obeagu EI, Obeagu GU. Safety and Tolerance of Blood Transfusion in Severe Malaria Cases with HIV: Lessons from Pediatric Cases. Elite Journal of Laboratory Medicine, 2024; 2(4): 64-83

14. Obeagu EI, Obeagu GU. The Role of Blood Transfusion Strategies in HIV Management: Current Insights and Future Directions. Elite Journal of Medicine. 2024;2(1):10-22.
15. Obeagu EI, Obeagu GU. Advances in Understanding the Impact of Blood Transfusion on Anemia Resolution in HIV-Positive Children with Severe Malaria: A Comprehensive Review. Elite Journal of Haematology. 2024;2(1):26-41.
16. Obeagu EI, Babar Q, Obeagu GU. Allergic blood Transfusion reaction: A Review. Int. J. Curr. Res. Med. Sci. 2021;7(5):25-33.
17. Obeagu EI, Okwuanaso CB, Edoho SH, Obeagu GU. Under-nutrition among HIV-exposed Uninfected Children: A Review of African Perspective. Madonna University journal of Medicine and Health Sciences. 2022;2(3):120-127.
18. Obeagu EI. A Review of Challenges and Coping Strategies Faced by HIV/AIDS Discordant Couples. Madonna University journal of Medicine and Health Sciences. 2023 ;3(1):7-12. https://madonnauniversity.edu.ng/journals/index.php/medicine/article/view/91.
19. Obeagu EI, Obeagu GU. An update on premalignant cervical lesions and cervical cancer screening services among HIV positive women. J Pub Health Nutri. 2023; 6 (2). 2023; 141:1-2. links/63e538ed64252375639dd0df/An-update-on-premalignant-cervical-lesions-and-cervical-cancer-screening-services-among-HIV-positive-women.pdf.
20. Ezeoru VC, Enweani IB, Ochiabuto O, Nwachukwu AC, Ogbonna US, Obeagu EI. Prevalence of Malaria with Anaemia and HIV status in women of reproductive age in Onitsha, Nigeria. Journal of Pharmaceutical Research International. 2021;33(4):10-19.
21. Omo-Emmanuel UK, Chinedum OK, Obeagu EI. Evaluation of laboratory logistics management information system in HIV/AIDS comprehensive health facilities in Bayelsa State, Nigeria. Int J Curr Res Med Sci. 2017;3(1): 21-38.DOI: 10.22192/ijcrms.2017.03.01.004
22. Obeagu EI, Obeagu GU. An update on survival of people living with HIV in Nigeria. J Pub Health Nutri. 2022; 5 (6). 2022;129. links/645b4bfcf3512f1cc5885784/An-update-on-survival-of-people-living-with-HIV-in-Nigeria.pdf.
23. Offie DC, Obeagu EI, Akueshi C, Njab JE, Ekanem EE, Dike PN, Oguh DN. Facilitators and barriers to retention in HIV care among HIV infected MSM attending Community Health Center Yaba, Lagos Nigeria. Journal of Pharmaceutical Research International. 2021;33(52B):10-19.
24. Obeagu EI, Ogbonna US, Nwachukwu AC, Ochiabuto O, Enweani IB, Ezeoru VC. Prevalence of Malaria with Anaemia and HIV status in women of reproductive age in Onitsha, Nigeria. Journal of Pharmaceutical Research International. 2021;33(4):10-19.
25. Odo M, Ochei KC, Obeagu EI, Barinaadaa A, Eteng UE, Ikpeme M, Bassey JO, Paul AO. TB Infection Control in TB/HIV Settings in Cross River State, Nigeria: Policy Vs Practice. Journal of Pharmaceutical Research International. 2020;32(22):101-119.
26. Obeagu EI, Eze VU, Alaeboh EA, Ochei KC. Determination of haematocrit level and iron profile study among persons living with HIV in Umuahia, Abia State, Nigeria. J BioInnovation. 2016; 5:464-471. links/592bb4990f7e9b9979a975cf/DETERMINATION-OF-HAEMATOCRIT-LEVEL-AND-IRON-PROFILE-STUDY-AMONG-PERSONS-LIVING-WITH-HIV-IN-UMUAHIA-ABIA-STATE-NIGERIA.pdf.

27. Obeagu EI, Obeagu GU, Egba SI, Emeka-Obi OR. Combatting Anemia in Pediatric Malaria: Effective Management Strategies. Int. J. Curr. Res. Med. Sci. 2023;9(11):1-7.
28. Hassan AO, Oso OV, Obeagu EI, Adeyemo AT. Malaria Vaccine: Prospects and Challenges. Madonna University journal of Medicine and Health Sciences ISSN: 2814-3035. 2022;2(2):22-40.
29. Obeagu EI, Ogbonna US, Nwachukwu AC, Ochiabuto O, Enweani IB, Ezeoru VC. Prevalence of Malaria with Anaemia and HIV status in women of reproductive age in Onitsha, Nigeria. Journal of Pharmaceutical Research International. 2021;33(4):10-9.
30. Obeagu EI, Busari AI, Uduchi IO, Ogomaka IA, Ibekwe AM, Vincent CC, Chijioke UO, Okafor CJ, Okoroiwu HU, Adike CN. Age-Related Haematological Variations in Patients with Asymptomatic Malaria in Akure, Ondo State, Nigeria. Journal of Pharmaceutical Research International. 2021;33(42B):218-24.
31. Ogomaka IA, Obeagu EI. Malaria in Pregnancy Amidst Possession of Insecticide Treated Bed Nets (ITNs) in Orlu LGA of Imo State, Nigeria. Journal of Pharmaceutical Research International. 2021;33(41B):380-386.
32. Obeagu EI, Ubosi NI, Uzoma G. Maternal Hemorrhage and Blood Transfusions: Safeguarding Pregnancy Health. Int. J. Curr. Res. Chem. Pharm. Sci. 2023;10(11):26-35.
33. Obeagu EI, Obeagu GU. Transfusion-Related Complications in Children Under 5 with Coexisting HIV and Severe Malaria: A Review. Int. J. Curr. Res. Chem. Pharm. Sci. 2024;11(2):9-19.
34. Obeagu EI, Obeagu GU. Synergistic Effects of Blood Transfusion and HIV in Children Under 5 Years with Severe Malaria: A Review. Elite Journal of HIV. 2024;2(1):31-50.
35. Obeagu EI, Anyiam AF, Obeagu GU. Managing Anemia in HIV through Blood Transfusions: Clinical Considerations and Innovations. Elite Journal of HIV. 2024;2(1):16-30.
36. Obeagu EI, Obeagu GU. Transfusion Therapy in HIV: Risk Mitigation and Benefits for Improved Patient Outcomes. Sciences. 2024;4(1):32-37.
37. Ifeanyi OE, Obeagu GU. The values of prothrombin time among HIV positive patients in FMC owerri. International Journal of Current Microbiology and Applied Sciences. 2015;4(4):911-916. https://www.academia.edu/download/38320140/Obeagu_Emmanuel_Ifeanyi_and_Obeagu__Getrude_Uzoma2.EMMA1.pdf.
38. Izuchukwu IF, Ozims SJ, Agu GC, Obeagu EI, Onu I, Amah H, Nwosu DC, Nwanjo HU, Edward A, Arunsi MO. Knowledge of preventive measures and management of HIV/AIDS victims among parents in Umuna Orlu community of Imo state Nigeria. Int. J. Adv. Res. Biol. Sci. 2016;3(10): 55-65.DOI; 10.22192/ijarbs.2016.03.10.009
39. Chinedu K, Takim AE, Obeagu EI, Chinazor UD, Eloghosa O, Ojong OE, Odunze U. HIV and TB co-infection among patients who used Directly Observed Treatment Short-course centres in Yenagoa, Nigeria. IOSR J Pharm Biol Sci. 2017;12(4):70-75. links/5988ab6d0f7e9b6c8539f73d/HIV-and-TB-co-infection-among-patients-who-used-Directly-Observed-Treatment-Short-course-centres-in-Yenagoa-Nigeria.pdf

40. Oloro OH, Oke TO, Obeagu EI. Evaluation of Coagulation Profile Patients with Pulmonary Tuberculosis and Human Immunodeficiency Virus in Owo, Ondo State, Nigeria. Madonna University journal of Medicine and Health Sciences. 2022;2(3):110-119.
41. Nwosu DC, Obeagu EI, Nkwocha BC, Nwanna CA, Nwanjo HU, Amadike JN, Elendu HN, Ofoedeme CN, Ozims SJ, Nwankpa P. Change in Lipid Peroxidation Marker (MDA) and Non enzymatic Antioxidants (VIT C & E) in HIV Seropositive Children in an Urban Community of Abia State. Nigeria. J. Bio. Innov. 2016;5(1):24-30. links/5ae735e9a6fdcc5b33eb8d6a/CHANGE-IN-LIPID-PEROXIDATION-MARKER-MDAAND-NON-ENZYMATIC-ANTIOXIDANTS-VIT-C-E-IN-HIV-SEROPOSITIVE-CHILDREN-IN-AN-URBAN-COMMUNITY-OF-ABIA-STATE-NIGERIA.pdf.
42. Ifeanyi OE, Obeagu GU, Ijeoma FO, Chioma UI. The values of activated partial thromboplastin time (APTT) among HIV positive patients in FMC Owerri. Int J Curr Res Aca Rev. 2015; 3:139-144. https://www.academia.edu/download/38320159/Obeagu_Emmanuel_Ifeanyi3__et_al.IJCRAR.pdf.
43. Obiomah CF, Obeagu EI, Ochei KC, Swem CA, Amachukwu BO. Hematological indices o HIV seropositive subjects in Nnamdi Azikiwe University teaching hospital (NAUTH), Nnewi. Ann Clin Lab Res. 2018;6(1):1-4. links/5aa2bb17a6fdccd544b7526e/Haematological-Indices-of-HIV-Seropositive-Subjects-at-Nnamdi-Azikiwe.pdf
44. Omo-Emmanuel UK, Ochei KC, Osuala EO, Obeagu EI, Onwuasoanya UF. Impact of prevention of mother to child transmission (PMTCT) of HIV on positivity rate in Kafanchan, Nigeria. Int. J. Curr. Res. Med. Sci. 2017;3(2): 28-34.DOI: 10.22192/ijcrms.2017.03.02.005
45. Aizaz M, Abbas FA, Abbas A, Tabassum S, Obeagu EI. Alarming rise in HIV cases in Pakistan: Challenges and future recommendations at hand. Health Science Reports. 2023;6(8):e1450.
46. Obeagu EI, Amekpor F, Scott GY. An update of human immunodeficiency virus infection: Bleeding disorders. J Pub Health Nutri. 2023; 6 (1). 2023;139. links/645b4a6c2edb8e5f094d9bd9/An-update-of-human-immunodeficiency-virus-infection-Bleeding.pdf.
47. Obeagu EI, Babar Q, Uduchi IO, Ibekwe AM, Chijioke UO, Okafor CJ, Vincent CC. An Update on Transfusion Related Immunomodulation (TRIM) in a Time of COVID-19 Pandemic. Journal of Pharmaceutical Research International. 2021;33(42A):135-146.
48. Okoroiwu IL, Obeagu EI, Elemchukwu Q, Ochei KC, Christian GS. Frequency of Transfusion Reactions Following Compatible Cross Matching of Blood: A Study in Owerri Metropolis. International Journal of Current Research and Academic Review. 2015;3(1):155-160.
49. Obeagu EI, Oshim IO, Ochei KC, Obeagu GU. Iron and blood donation: A Review. Int. J. Curr. Res. Med. Sci. 2016;2(10):16-48.

50. Ogar CO, Okoroiwu HU, Obeagu EI, Etura JE, Abunimye DA. Assessment of blood supply and usage pre-and during COVID-19 pandemic: a lesson from non-voluntary donation. Transfusion Clinique et Biologique. 2021;28(1):68-72.
51. Anyiam AF, Arinze-Anyiam OC, Irondi EA, Obeagu EI. Distribution of ABO and rhesus blood grouping with HIV infection among blood donors in Ekiti State Nigeria. Medicine. 2023;102(47): e36342.
52. Ogbonna CO, Obeagu EI, Ufelle SA, Ogbonna LN. Evaluation of haematological alterations in children infected by Plasmodium falciparum Species in Enugu, Enugu State, Nigeria. Journal of Pharmaceutical Research International. 2021;33(1):38-45.
53. Okorie HM, Obeagu EI, Obarezi HC, Anyiam AF. Assessment of some inflammatory cytokines in malaria infected pregnant women in Imo State Nigeria. International Journal of Medical Science and Dental Research. 2019;2(1):25-36.
54. Ezeoru VC, Enweani IB, Ochiabuto O, Nwachukwu AC, Ogbonna US, Obeagu EI. Prevalence of Malaria with Anaemia and HIV status in women of reproductive age in Onitsha, Nigeria. Journal of Pharmaceutical Research International. 2021;33(4):10-19.
55. Okorie HM, Obeagu EI, Eze EN, Jeremiah ZA. Assessment of some haematological parameters in malaria infected pregnant women in Imo state Nigeria. Int. J. Curr. Res. Biol. Med. 2018;3(9):1-4.
56. Nwosu DC, Obeagu EI, Ezenwuba C, Agu GC, Amah H, Ozims SJ, Nwanjo HU, Edward A, Izuchukwu IF, Amadike JN, Nwagwu AJ. Antioxidant status of children with Plasmodium falciparum malaria in Owerri municipal council of Imo state. Int. J. Curr. Res. Chem. Pharm. Sci. 2016;3(8):40-46.
57. Obeagu EI, Scott GY, Amekpor F, Ofodile AC, Edoho SH, Ahamefula C. Prevention of New Cases of Human Immunodeficiency Virus: Pragmatic Approaches of Saving Life in Developing Countries. Madonna University journal of Medicine and Health Sciences. 2022;2(3):128-134. https://madonnauniversity.edu.ng/journals/index.php/medicine/article/view/86.
58. Walter O, Anaebo QB, Obeagu EI, Okoroiwu IL. Evaluation of Activated Partial Thromboplastin Time and Prothrombin Time in HIV and TB Patients in Owerri Metropolis. Journal of Pharmaceutical Research International. 2022:29-34.
59. Odo M, Ochei KC, Obeagu EI, Barinaadaa A, Eteng EU, Ikpeme M, Bassey JO, Paul AO. Cascade variabilities in TB case finding among people living with HIV and the use of IPT: assessment in three levels of care in cross River State, Nigeria. Journal of Pharmaceutical Research International. 2020;32(24):9-18.
60. Jakheng SP, Obeagu EI. Seroprevalence of human immunodeficiency virus based on demographic and risk factors among pregnant women attending clinics in Zaria Metropolis, Nigeria. J Pub Health Nutri. 2022; 5 (8). 2022;137. links/6317a6b1acd814437f0ad268/Seroprevalence-of-human-immunodeficiency-virus-based-on-demographic-and-risk-factors-among-pregnant-women-attending-clinics-in-Zaria-Metropolis-Nigeria.pdf.
61. Obeagu EI, Obeagu GU. A Review of knowledge, attitudes and socio-demographic factors associated with non-adherence to antiretroviral therapy among people living with HIV/AIDS. Int. J. Adv. Res. Biol. Sci. 2023;10(9):135-142.DOI:

10.22192/ijarbs.2023.10.09.015 links/6516faa61e2386049de5e828/A-Review-of-knowledge-attitudes-and-socio-demographic-factors-associated-with-non-adherence-to-antiretroviral-therapy-among-people-living-with-HIV-AIDS.pdf

62. Obeagu EI, Onuoha EC. Tuberculosis among HIV Patients: A review of Prevalence and Associated Factors. Int. J. Adv. Res. Biol. Sci. 2023;10(9):128-134.DOI: 10.22192/ijarbs.2023.10.09.014 links/6516f938b0df2f20a2f8b0e0/Tuberculosis-among-HIV-Patients-A-review-of-Prevalence-and-Associated-Factors.pdf.
63. Obeagu EI, Ibeh NC, Nwobodo HA, Ochei KC, Iwegbulam CP. Haematological indices of malaria patients coinfected with HIV in Umuahia. Int. J. Curr. Res. Med. Sci. 2017;3(5):100-104.DOI: 10.22192/ijcrms.2017.03.05.014 https://www.academia.edu/download/54317126/Haematological_indices_of_malaria_patients_coinfected_with_HIV.pdf
64. Jakheng SP, Obeagu EI, Abdullahi IO, Jakheng EW, Chukwueze CM, Eze GC, Essien UC, Madekwe CC, Madekwe CC, Vidya S, Kumar S. Distribution Rate of Chlamydial Infection According to Demographic Factors among Pregnant Women Attending Clinics in Zaria Metropolis, Kaduna State, Nigeria. South Asian Journal of Research in Microbiology. 2022;13(2):26-31.
65. Okorie HM, Obeagu Emmanuel I, Okpoli Henry CH, Chukwu Stella N. Comparative study of enzyme linked immunosorbent assay (Elisa) and rapid test screening methods on HIV, Hbsag, Hcv and Syphilis among voluntary donors in. Owerri, Nigeria. J Clin Commun Med. 2020;2(3):180-183.DOI: **DOI:** 10.32474/JCCM.2020.02.000137 links/5f344530458515b7291bd95f/Comparative-Study-of-Enzyme-Linked-Immunosorbent-Assay-ElISA-and-Rapid-Test-Screening-Methods-on-HIV-HBsAg-HCV-and-Syphilis-among-Voluntary-Donors-in-Owerri-Nigeria.pdf.
66. Ezugwu UM, Onyenekwe CC, Ukibe NR, Ahaneku JE, Onah CE, Obeagu EI, Emeje PI, Awalu JC, Igbokwe GE. Use of ATP, GTP, ADP and AMP as an Index of Energy Utilization and Storage in HIV Infected Individuals at NAUTH, Nigeria: A Longitudinal, Prospective, Case-Controlled Study. Journal of Pharmaceutical Research International. 2021;33(47A):78-84.
67. Obeagu EI. Blood Transfusion: A Powerful Process of Saving Anaemic Patients. EC Emergency Medicine and Critical Care. 2020;4(7):33-40.
68. Obeagu EI, Buhari HA. Implications of Blood Transfusion in Renal Disease Patients. Int. J. Curr. Res. Chem. Pharm. Sci. 2023;10(10):45-49.
69. Anyiam AF, Arinze-Anyiam OC, Omosigho PO, Ibrahim M, Irondi EA, Obeagu EI, Obi E. Blood Group, Genotype, Malaria, Blood Pressure and Blood Glucose Screening Among Selected Adults of a Community in Kwara State: Implications to Public Health. Asian Hematology Research Journal. 2022;6(3):9-17.
70. Obeagu EI, Obeagu GU, Ukibe NR, Oyebadejo SA. Anemia, iron, and HIV: decoding the interconnected pathways: A review. Medicine. 2024;103(2): e36937.
71. Obeagu EI. An update on susceptibility of individuals to diseases based on ABO blood groups. Int. J. Curr. Res. Med. Sci. 2019;5(3):1-8.
72. Okamgba OC, Nwosu DC, Nwobodo EI, Agu GC, Ozims SJ, Obeagu EI, Ibanga IE, Obioma-Elemba IE, Ihekaire DE, Obasi CC, Amah HC. Iron Status of Pregnant and Post-

Partum Women with Malaria Parasitaemia in Aba Abia State, Nigeria. Annals of Clinical and Laboratory Research. 2017;5(4):206.
73. Anyiam AF, Arinze-Anyiam OC, Omosigho PO, Ibrahim M, Irondi EA, Obeagu EI, Obi E. Blood Group, Genotype, Malaria, Blood Pressure and Blood Glucose Screening Among Selected Adults of a Community in Kwara State: Implications to Public Health. Asian Hematology Research Journal. 2022;6(3):9-17.
74. Madekwe CC, Madekwe CC, Obeagu EI. Inequality of monitoring in Human Immunodeficiency Virus, Tuberculosis and Malaria: A Review. Madonna University journal of Medicine and Health Sciences. 2022;2(3):6-15.
75. Offie DC, Ibekwe AM, Agu CC, Esimai BN, Okpala PU, Obeagu EI, Ufelle SA, Ogbonna LN. Fibrinogen and C-Reactive Protein Significance in Children Infected by Plasmodium falciparum Species in Enugu, Enugu State, Nigeria. Journal of Pharmaceutical Research International. 2021;33(15):1-8.
76. Okorie HM, Obeagu EI, Eze EN, Jeremiah ZA. Assessment of coagulation parameters in malaria infected pregnant women in Imo state, Nigeria. International Journal of Current Research in Medical Sciences. 2018;4(9):41-9.
77. Emannuel G, Martin O, Peter OS, Obeagu EI, Daniel K. Factors Influencing Early Neonatal Adverse Outcomes among Women with HIV with Post Dated Pregnancies Delivering at Kampala International University Teaching Hospital, Uganda. Asian Journal of Pregnancy and Childbirth. 2023 Jul 29;6(1):203-211. http://research.sdpublishers.net/id/eprint/2819/.
78. Vincent CC, Obeagu EI, Agu IS, Ukeagu NC, Onyekachi-Chigbu AC. Adherence to Antiretroviral Therapy among HIV/AIDS in Federal Medical Centre, Owerri. Journal of Pharmaceutical Research International. 2021;33(57A):360-368.
79. Madekwe CC, Madekwe CC, Obeagu EI. Inequality of monitoring in Human Immunodeficiency Virus, Tuberculosis and Malaria: A Review. Madonna University journal of Medicine and Health Sciences. 2022;2(3):6-15. https://madonnauniversity.edu.ng/journals/index.php/medicine/article/view/69
80. Echendu GE, Vincent CC, Ibebuike J, Asodike M, Naze N, Chinedu EP, Ohale B, Obeagu EI. WEIGHTS OF INFANTS BORN TO HIV INFECTED MOTHERS: A PROSPECTIVE COHORT STUDY IN FEDERAL MEDICAL CENTRE, OWERRI, IMO STATE. European Journal of Pharmaceutical and Medical Research, 2023; 10(8): 564-568
81. Nwosu DC, Nwanjo HU, Okolie NJ, Ikeh K, Ajero CM, Dike J, Ojiegbe GC, Oze GO, Obeagu EI, Nnatunanya I, Azuonwu O. BIOCHEMICAL ALTERATIONS IN ADULT HIV PATIENTS ON ANTIRETRQVIRAL THERAPY. World Journal of Pharmacy and Pharmaceutical Sciences, 2015; 4(3): 153-160**.** links/5a4fd0500f7e9bbc10526b38/BIOCHEMICAL-ALTERATIONS-IN-ADULT-HIV-PATIENTS-ON-ANTIRETRQVIRAL-THERAPY.pdf.
82. Obeagu EI, Obeagu GU. Effect of CD4 Counts on Coagulation Parameters among HIV Positive Patients in Federal Medical Centre, Owerri, Nigeria. Int. J. Curr. Res. Biosci. Plant Biol. 2015;2(4):45-49.
83. Obeagu EI, Nwosu DC. Adverse drug reactions in HIV/AIDS patients on highly active antiretro viral therapy: a review of prevalence. Int. J. Curr. Res. Chem. Pharm. Sci.

2019;6(12):45-8.DOI: 10.22192/ijcrcps.2019.06.12.004 links/650aba1582f01628f0335795/Adverse-drug-reactions-in-HIV-AIDS-patients-on-highly-active-antiretro-viral-therapy-a-review-of-prevalence.pdf.

84. Obeagu EI, Scott GY, Amekpor F, Obeagu GU. Implications of CD4/CD8 ratios in Human Immunodeficiency Virus infections. Int. J. Curr. Res. Med. Sci. 2023;9(2):6-13.DOI: 10.22192/ijcrms.2023.09.02.002 links/645a4a462edb8e5f094ad37c/Implications-of-CD4-CD8-ratios-in-Human-Immunodeficiency-Virus-infections.pdf.
85. Obeagu EI, Ochei KC, Okeke EI, Anode AC. Assessment of the level of haemoglobin and erythropoietin in persons living with HIV in Umuahia. Int. J. Curr. Res. Med. Sci. 2016;2(4):29-33. links/5711c47508aeebe07c02496b/Assessment-of-the-level-of-haemoglobin-and-erythropoietin-in-persons-living-with-HIV-in-Umuahia.pdf.
86. Ifeanyi OE, Obeagu GU. The Values of CD4 Count, among HIV Positive Patients in FMC Owerri. Int. J. Curr. Microbiol. App. Sci. 2015;4(4):906-910. https://www.academia.edu/download/38320134/Obeagu_Emmanuel_Ifeanyi_and_Obeagu__Getrude_Uzoma.EMMA2.pdf.
87. Obeagu EI, Okeke EI, Anonde Andrew C. Evaluation of haemoglobin and iron profile study among persons living with HIV in Umuahia, Abia state, Nigeria. Int. J. Curr. Res. Biol. Med. 2016;1(2):1-5.
88. Ibebuike JE, Nwokike GI, Nwosu DC, Obeagu EI. A Retrospective Study on Human Immune Deficiency Virus among Pregnant Women Attending Antenatal Clinic in Imo State University Teaching Hospital. *International Journal of Medical Science and Dental Research,* 2018; 1 (2):08-14. https://www.ijmsdr.org/published%20paper/Ii1i2/A%20Retrospective%20Study%20on%20Human%20Immune%20Deficiency%20Virus%20among%20Pregnant%20Women%20Attending%20Antenatal%20Clinic%20in%20Imo%20State%20University%20Teaching%20Hospital.pdf.
89. Obeagu EI, Obarezi TN, Omeh YN, Okoro NK, Eze OB. Assessment of some haematological and biochemical parametrs in HIV patients before receiving treatment in Aba, Abia State, Nigeria. Res J Pharma Biol Chem Sci. 2014; 5:825-830.
90. Obeagu EI, Obarezi TN, Ogbuabor BN, Anaebo QB, Eze GC. Pattern of total white blood cell and differential count values in HIV positive patients receiving treatment in Federal Teaching Hospital Abakaliki, Ebonyi State, Nigeria. International Journal of Life Science, Biotechnology and Pharama Research. 2014; 391:186-189.
91. Obeagu EI. A Review of Challenges and Coping Strategies Faced by HIV/AIDS Discordant Couples. Madonna University journal of Medicine and Health Sciences. 2023; 3 (1): 7-12.
92. Oloro OH, Obeagu EI. A Systematic Review on Some Coagulation Profile in HIV Infection. International Journal of Innovative and Applied Research. 2022;10(5):1-11.
93. Nwosu DC, Obeagu EI, Nkwuocha BC, Nwanna CA, Nwanjo HU, Amadike JN, Ezemma MC, Okpomeshine EA, Ozims SJ, Agu GC. Alterations in superoxide dismutiase, vitamins C and E in HIV infected children in Umuahia, Abia state. International Journal of Advanced Research in Biological Sciences. 2015;2(11):268-271.

Citation: Obeagu EI, Obeagu GU. Safety and Tolerance of Blood Transfusion in Severe Malaria Cases with HIV: Lessons from Pediatric Cases. Elite Journal of Laboratory Medicine, 2024; 2(4): 64-83

94. Ifeanyi OE, Uzoma OG, Stella EI, Chinedum OK, Abum SC. Vitamin D and insulin resistance in HIV sero positive individuals in Umudike. Int. J. Curr. Res. Med. Sci. 2018;4(2):104-108.
95. Ifeanyi OE, Leticia OI, Nwosu D, Chinedum OK. A Review on blood borne viral infections: universal precautions. Int. J. Adv. Res. Biol. Sci. 2018;5(6):60-66.
96. Nwovu AI, Ifeanyi OE, Uzoma OG, Nwebonyi NS. Occurrence of Some Blood Borne Viral Infection and Adherence to Universal Precautions among Laboratory Staff in Federal Teaching Hospital Abakaliki Ebonyi State. Arch Blood Transfus Disord. 2018;1(2).
97. Chinedu K, Takim AE, Obeagu EI, Chinazor UD, Eloghosa O, Ojong OE, Odunze U. HIV and TB co-infection among patients who used Directly Observed Treatment Short-course centres in Yenagoa, Nigeria. IOSR J Pharm Biol Sci. 2017;12(4):70-75.
98. Offie DC, Obeagu EI, Akueshi C, Njab JE, Ekanem EE, Dike PN, Oguh DN. Facilitators and barriers to retention in HIV care among HIV infected MSM attending Community Health Center Yaba, Lagos Nigeria. Journal of Pharmaceutical Research International. 2021;33(52B):10-19.
99. Van Rie A, Harrington PR, Dow A, Robertson K. Neurologic and neurodevelopmental manifestations of pediatric HIV/AIDS: a global perspective. European journal of paediatric neurology. 2007;11(1):1-9.
100. Trivedi S, Chakravarty A. Neurological complications of malaria. Current neurology and neuroscience reports. 2022;22(8):499-513.
101. Eze R, Obeagu EI, Nwakulite A, Vincent CC, Ogbodo SO, Ibekwe AM, Okafor CJ, Chukwurah EF. Frequency of Haemoglobin Genotype Variants, ABO and Rh 'D'Antigen among Madonna Undergraduates of South East Origin, Nigeria. Journal of Pharmaceutical Research International. 2021 May 26;33(29B):149-57.
102. Okoroiwu IL, Obeagu EI, Christian SG, Elemchukwu Q, Ochei KC. Determination of the haemoglobin, genotype and ABO blood group pattern of some students of Imo State University, Owerri, Nigeria. International Journal of Current Research and Academic Review. 2015;3(1):20-27.
103. Oloro OH, Obeagu EI, Puche RO, Lawal OA. Blood Products in Blood Banking: Preparation and Clinical Importance. Madonna University journal of Medicine and Health Sciences ISSN: 2814-3035. 2022;2(3):102-109.
104. Asemota EA, Njar VE, Aguanah IT, Obeagu EI. Distribution of ABO, Rhesus Blood Group and Helicobacter Pylori Infection among Secondary School Students in Calabar South Local Government, Cross River State, Nigeria. Madonna University journal of Medicine and Health Sciences ISSN: 2814-3035. 2023;3(1):32-45.
105. Obeagu EI, Katya MC. A Systematic Review on Physiological Jaundice: Diagnosis and Management of the Affected Neonates. Madonna University journal of Medicine and Health Sciences. 2022;2(3):25-41.
106. Ogbonna LN, Ezeoru VC, Ofodile AC, Ochiabuto OM, Obi-Ezeani CN, Okpala PU, Okafor CJ, Obeagu GU, Busari AI, Obeagu EI. Gender Based Variations of Haematological Parameters of Patients with Asymptomatic Malaria in Akure, Ondo State, Nigeria. Journal of Pharmaceutical Research International. 2021;33(8):75-80.

107. Eberendu IF, Ozims SJ, Agu GC, Amah HC, Obasi CC, Obioma-Elemba JE, Ihekaire DE, Ibanga IE, Amah CC, Obeagu EI, Nwosu DC. Impact of human activities on the breeding of mosquitoes of human disease in Owerri metropolis, Imo state. Int J Adv Res Biol Sci IJARBS. 2017;4(12):98-106.
108. Obeagu EI, Ofodile AC, Okwuanaso CB. A review on socio economic and behavioral aspects of malaria and its control among children under 5 years of age in Africa. J Pub Health Nutri. 2023; 6 (1): 136.
109. Obeagu EI, Obeagu GU, Ede MO, Odo EO, Buhari HA. Translation of HIV/AIDS knowledge into behavior change among secondary school adolescents in Uganda: A review. Medicine (Baltimore). 2023;102(49): e36599. doi: 10.1097/MD.0000000000036599. PMID: 38065920; PMCID: PMC10713174.
110. Anyiam AF, Arinze-Anyiam OC, Irondi EA, Obeagu EI. Distribution of ABO and rhesus blood grouping with HIV infection among blood donors in Ekiti State Nigeria. Medicine (Baltimore). 2023;102(47): e36342. doi: 10.1097/MD.0000000000036342. PMID: 38013335; PMCID: PMC10681551.
111. Echefu SN, Udosen JE, Akwiwu EC, Akpotuzor JO, Obeagu EI. Effect of Dolutegravir regimen against other regimens on some hematological parameters, CD4 count and viral load of people living with HIV infection in South Eastern Nigeria. Medicine (Baltimore). 2023;102(47): e35910. doi: 10.1097/MD.0000000000035910. PMID: 38013350; PMCID: PMC10681510.
112. Opeyemi AA, Obeagu EI. Regulations of malaria in children with human immunodeficiency virus infection: A review. Medicine (Baltimore). 2023;102(46): e36166. doi: 10.1097/MD.0000000000036166. PMID: 37986340; PMCID: PMC10659731.
113. Obeagu EI, Obeagu GU, Obiezu J, Ezeonwumelu C, Ogunnaya FU, Ngwoke AO, Emeka-Obi OR,
114. Obeagu EI, Ubosi NI, Uzoma G. Storms and Struggles: Managing HIV Amid Natural Disasters. Int. J. Curr. Res. Chem. Pharm. Sci. 2023;10(11):14-25.
115. Obeagu EI, Obeagu GU. Human Immunodeficiency Virus and tuberculosis infection: A review of prevalence of associated factors. Int. J. Adv. Multidiscip. Res. 2023;10(10):56-62.
116. Obeagu EI, Obeagu GU. Unmasking the Truth: Addressing Stigma in the Fight Against HIV. Elite Journal of Public Health. 2024;2(1):8-22.
117. Obeagu EI, Obeagu GU, Okwuanaso CB. Optimizing Immune Health in HIV Patients through Nutrition: A Review. Elite Journal of Immunology. 2024;2(1):14-33.
118. Obeagu EI, Obeagu GU. Utilization of immunological ratios in HIV: Implications for monitoring and therapeutic strategies. Medicine. 2024;103(9): e37354.
119. Obeagu EI, Obeagu GU. CD8 Dynamics in HIV Infection: A Synoptic Review. Elite Journal of Immunology. 2024;2(1):1-3.
120. Obeagu EI, Obeagu GU. Implications of B Lymphocyte Dysfunction in HIV/AIDS. Elite Journal of Immunology. 2024;2(1):34-46.
121. Obeagu EI, Obeagu GU. Maternal Influence on Infant Immunological Responses to HIV: A Review. Elite Journal of Laboratory Medicine. 2024;2(1):46-58.

122. Obeagu EI, Obeagu GU. Understanding B Lymphocyte Functions in HIV Infection: Implications for Immune Dysfunction and Therapeutic Strategies. Elite Journal of Medicine. 2024;2(1):35-46.
123. Obeagu EI, Obeagu GU. Platelet-Driven Modulation of HIV: Unraveling Interactions and Implications. Journal home page: http://www. journalijiar. com.;12(01).
124. Obeagu EI, Anyiam AF, Obeagu GU. Managing Hematological Complications in HIV: Erythropoietin Considerations. Elite Journal of HIV. 2024;2(1):65-78.
125. Obeagu EI, Obeagu GU, Hauwa BA, Umar AI. Hematocrit Variations in HIV Patients Co-infected with Malaria: A Comprehensive Review. Journal home page: http://www. journalijiar. com.;12(01).
126. Obeagu EI, Obeagu GU. Synergistic Effects of Blood Transfusion and HIV in Children Under 5 Years with Severe Malaria: A Review. Elite Journal of HIV. 2024;2(1):31-50.
127. Obeagu EI, Anyiam AF, Obeagu GU. Unveiling B Cell Mediated Immunity in HIV Infection: Insights, Challenges, and Potential Therapeutic Avenues. Elite Journal of HIV. 2024;2(1):1-5.
128. Obeagu EI, Obeagu GU. Hematocrit Fluctuations in HIV Patients Co-infected with Malaria Parasites: A Comprehensive Review. Int. J. Curr. Res. Med. Sci. 2024;10(1):25-36.
129. Obeagu EI, Obeagu GU. Transfusion Therapy in HIV: Risk Mitigation and Benefits for Improved Patient Outcomes. Sciences. 2024;4(1):32-7.
130. Obeagu EI, Obeagu GU. Mental Health and Psychosocial Effects of natural disaster on HIV Patients. Sciences. 2024;4(1):38-44.
131. Obeagu EI, Obeagu GU. Eosinophil-Associated Changes in Neonatal Thymic T Regulatory Cell Populations in HIV-Infected Pregnancies. Elite Journal of Health Science. 2024;2(1):33-42.
132. Obeagu EI, Obeagu GU. Advances in Understanding the Impact of Blood Transfusion on Anemia Resolution in HIV-Positive Children with Severe Malaria: A Comprehensive Review. Elite Journal of Haematology. 2024;2(1):26-41.
133. Obeagu EI, Ayogu EE, Obeagu GU. Interactions between Blood Transfusion and Antiretroviral Medications: Implications for Patient Care. Elite Journal of Medicine. 2024;2(2):104-15.
134. Obeagu EI, Obeagu GU. Maternal Eosinophilic Responses in HIV-Positive Pregnant Women: Unraveling Immunological Dynamics for Improved Maternal-Fetal Health. Elite Journal of Immunology. 2024;2(1):47-64.
135. Obeagu EI, Anyanwu CN, Obeagu GU. Challenges and Considerations in Managing Blood Transfusion for Individuals with HIV. Elite Journal of HIV. 2024;2(2):1-7.
136. Obeagu EI, Ubosi NI, Obeagu GU, Akram M. Early Infant Diagnosis: Key to Breaking the Chain of HIV Transmission. Elite Journal of Public Health. 2024;2(1):52-61.
137. Obeagu EI, Obeagu GU. Understanding Hematocrit Fluctuations in HIV-Malaria Coinfection for Improved Management. Elite Journal of Public Health. 2024;2(1):22-34.

138. Obeagu EI, Obeagu GU. The Impact of Erythropoietin on Preeclampsia in HIV-Positive Women: A Review. Elite Journal of Nursing and Health Science. 2024;2(1):21-31.
139. Obeagu EI, Obeagu GU. Platelet Distribution Width (PDW) as a Prognostic Marker for Anemia Severity in HIV Patients: A Comprehensive Review. Journal home page: http://www. journalijiar. com.;12(01).
140. Obeagu EI, Obeagu GU. Neonatal Outcomes in Children Born to Mothers with Severe Malaria, HIV, and Transfusion History: A Review. Elite Journal of Nursing and Health Science. 2024;2(3):38-58.
141. Obeagu EI, Obeagu GU. Assessing Platelet Functionality in HIV Patients Receiving Antiretroviral Therapy: Implications for Risk Assessment. Elite Journal of HIV. 2024;2(3):14-26.
142. Obeagu EI, Obeagu GU. Advancements in HIV Prevention: Africa's Trailblazing Initiatives and Breakthroughs. Elite Journal of Public Health. 2024;2(1):52-63.
143. Obeagu EI, Obeagu GU. Maternal Influence on Infant Immunological Responses to HIV: A Review. Elite Journal of Laboratory Medicine. 2024;2(1):46-58.
144. Obeagu EI, Obeagu GU. Counting Cells, Shaping Fates: CD4/CD8 Ratios in HIV. Elite Journal of Scientific Research and Review. 2024;2(1):37-50.
145. Obeagu EI, Anyiam AF, Obeagu GU. Managing Hematological Complications in HIV: Erythropoietin Considerations. Elite Journal of HIV. 2024;2(1):65-78.
146. Obeagu EI, Obeagu GU. Immune Modulation in HIV-Positive Neonates: Insights and Implications for Clinical Management. Elite Journal of Nursing and Health Science. 2024;2(3):59-72.
147. Obeagu EI, Ayogu EE, Obeagu GU. Impact on Viral Load Dynamics: Understanding the Interplay between Blood Transfusion and Antiretroviral Therapy in HIV Management. Elite Journal of Nursing and Health Science. 2024;2(2):5-15.
148. Obeagu EI, Obeagu GU. Understanding B Lymphocyte Functions in HIV Infection: Implications for Immune Dysfunction and Therapeutic Strategies. Elite Journal of Medicine. 2024;2(1):35-46.
149. Obeagu EI, Anyanwu CN, Obeagu GU. Challenges and Considerations in Managing Blood Transfusion for Individuals with HIV. Elite Journal of HIV. 2024;2(2):1-7.
150. Obeagu EI, Obeagu GU. Understanding ART and Platelet Functionality: Implications for HIV Patients. Elite Journal of HIV. 2024;2(2):60-73.
151. Obeagu EI, Obeagu GU. The Role of Blood Transfusion Strategies in HIV Management: Current Insights and Future Directions. Elite Journal of Medicine. 2024;2(1):10-22.
152. Obeagu EI, AmaezeAA O, Obeagu GU. B Cell Deficiency and Implications in HIV Pathogenesis: Unraveling the Complex Interplay. Elite Journal of Nursing and Health Science. 2024;2(2):33-46.
153. Obeagu EI, Obeagu GU. Eosinophil Dynamics in Pregnancy among Women Living with HIV: A Comprehensive Review. Int. J. Curr. Res. Med. Sci. 2024;10(1):11-24.

154. Obeagu EI, Obeagu GU. Hematocrit Fluctuations in HIV Patients Co-infected with Malaria Parasites: A Comprehensive Review. Int. J. Curr. Res. Med. Sci. 2024;10(1):25-36.
155. Obeagu EI, Obeagu GU. Unveiling the Role of Innate Immune Activation in Pediatric HIV: A Review. Elite Journal of Immunology. 2024;2(3):33-44.
156. Obeagu EI, Obeagu GU. Harnessing B Cell Responses for Personalized Approaches in HIV Management. Elite Journal of Immunology. 2024;2(2):15-28.
157. Obeagu EI, Obeagu GU, Hauwa BA, Umar AI. Neutrophil Dynamics: Unveiling Their Role in HIV Progression within Malaria Patients. Journal home page: http://www. journalijiar. com.;12(01).
158. Obeagu EI, Obeagu GU, Hauwa BA, Umar AI. Hematocrit Variations in HIV Patients Co-infected with Malaria: A Comprehensive Review. Journal home page: http://www. journalijiar. com.;12(01).
159. Obeagu EI, Anyiam AF, Obeagu GU. Managing Anemia in HIV through Blood Transfusions: Clinical Considerations and Innovations. Elite Journal of HIV. 2024;2(1):16-30.
160. Obeagu EI, Obeagu GU. Maternal Eosinophilic Responses in HIV-Positive Pregnant Women: Unraveling Immunological Dynamics for Improved Maternal-Fetal Health. Elite Journal of Immunology. 2024;2(1):47-64.
161. Obeagu EI, Obeagu GU. Platelet Aberrations in HIV Patients: Assessing Impacts of ART. Elite Journal of Haematology, 2024; 2 (3).:10-24.
162. Obeagu EI, Obeagu GU. Hematological Changes Following Blood Transfusion in Young Children with Severe Malaria and HIV: A Critical Review. Elite Journal of Laboratory Medicine. 2024;2(1):33-45.
163. Obeagu EI, Anyiam AF, Obeagu GU. Erythropoietin Therapy in HIV-Infected Individuals: A Critical Review. Elite Journal of HIV. 2024;2(1):51-64.
164. Obeagu EI, Ubosi NI, Obeagu GU, Obeagu AA. Nutritional Strategies for Enhancing Immune Resilience in HIV: A Review. Int. J. Curr. Res. Chem. Pharm. Sci. 2024;11(2):41-51.
165. Obeagu EI, Obeagu GU. The Crucial Role of Erythropoietin in Managing Anemia in HIV: A Review. Elite Journal of Scientific Research and Review. 2024;2(1):24-36.
166. Obeagu EI, Obeagu GU. Impact of Maternal Eosinophils on Neonatal Immunity in HIV-Exposed Infants: A Review. Elite Journal of Immunology. 2024;2(3):1-8.
167. Obeagu EI, Anyiam AF, Obeagu GU. Unveiling B Cell Mediated Immunity in HIV Infection: Insights, Challenges, and Potential Therapeutic Avenues. Elite Journal of HIV. 2024;2(1):1-5.
168. Obeagu EI, Obeagu GU. Anemia and Erythropoietin: Key Players in HIV Disease Progression. Elite Journal of Haematology, 2024; 2 (3).:42-57.
169. Obeagu EI, Obeagu GU. Platelet Dysfunction in HIV Patients: Assessing ART Risks. Elite Journal of Scientific Research and Review. 2024;2(1):1-6.
170. Obeagu EI, Ubosi NI, Obeagu GU, Akram M. Early Infant Diagnosis: Key to Breaking the Chain of HIV Transmission. Elite Journal of Public Health. 2024;2(1):52-61.

171. Obeagu EI, Obeagu GU. Transfusion Therapy in HIV: Risk Mitigation and Benefits for Improved Patient Outcomes. Sciences. 2024;4(1):32-7.
172. Obeagu EI, Obeagu GU. P-Selectin and Immune Activation in HIV: Clinical Implications. Elite Journal of Health Science. 2024;2(2):16-29.
173. Obeagu EI, Obeagu GU. Mental Health and Psychosocial Effects of natural disaster on HIV Patients. Sciences. 2024;4(1):38-44.
174. Obeagu EI, Obeagu GU. Optimizing Blood Transfusion Protocols for Breast Cancer Patients Living with HIV: A Comprehensive Review. Elite Journal of Nursing and Health Science. 2024;2(2):1-7.
175. Obeagu EI, Obeagu GU. Advances in Understanding the Impact of Blood Transfusion on Anemia Resolution in HIV-Positive Children with Severe Malaria: A Comprehensive Review. Elite Journal of Haematology. 2024;2(1):26-41.
176. Obeagu EI, Obeagu GU. Transfusion-Related Complications in Children Under 5 with Coexisting HIV and Severe Malaria: A Review. Int. J. Curr. Res. Chem. Pharm. Sci. 2024;11(2):9-19.
177. Obeagu EI, Obeagu GU. Impact of Blood Transfusion on Viral Load Dynamics in HIV-Positive Neonates with Severe Malaria: A Review. Elite Journal of Scientific Research and Review. 2024;2(1):42-60.
178. Obeagu EI, Ayogu EE, Obeagu GU. Interactions between Blood Transfusion and Antiretroviral Medications: Implications for Patient Care. Elite Journal of Medicine. 2024;2(2):104-5.
179. Obeagu EI, Obeagu GU. P-Selectin Expression in HIV-Associated Coagulopathy: Implications for Treatment. Elite Journal of Haematology, 2024; 2 (3).:25-41.
180. Obeagu EI, Obeagu GU. Eosinophil-Associated Changes in Neonatal Thymic T Regulatory Cell Populations in HIV-Infected Pregnancies. Elite Journal of Health Science. 2024;2(1):33-42.
181. Obeagu EI, Obeagu GU. Exploring the Role of L-selectin in HIV-related Immune Exhaustion: Insights and Therapeutic Implications. Elite Journal of HIV. 2024;2(2):43-59.
182. Obeagu EI. Erythropoietin and the Immune System: Relevance in HIV Management. Elite Journal of Health Science. 2024;2(3):23-35.
183. Obeagu EI, Obeagu GU. The Impact of Erythropoietin on Preeclampsia in HIV-Positive Women: A Review. Elite Journal of Nursing and Health Science. 2024;2(1):21-31.
184. Obeagu EI, Obeagu GU. Unraveling the Role of Eosinophil Extracellular Traps (EETs) in HIV-Infected Pregnant Women: A Review. Elite Journal of Nursing and Health Science. 2024;2(3):84-99.
185. Obeagu EI, Obeagu GU. Hematologic Considerations in Breast Cancer Patients with HIV: Insights into Blood Transfusion Strategies. Elite Journal of Health Science. 2024;2(2):20-35.
186. Obeagu EI, Obeagu GU. L-selectin and HIV-Induced Immune Cell Trafficking: Implications for Pathogenesis and Therapeutic Strategies. Elite Journal of Laboratory Medicine. 2024;2(2):30-46.

Citation: Obeagu EI, Obeagu GU. Safety and Tolerance of Blood Transfusion in Severe Malaria Cases with HIV: Lessons from Pediatric Cases. Elite Journal of Laboratory Medicine, 2024; 2(4): 64-83

187. Obeagu EI, Obeagu GU. The Intricate Relationship Between Erythropoietin and HIV-Induced Anemia: Unraveling Pathways for Therapeutic Insights. Int. J. Curr. Res. Chem. Pharm. Sci. 2024;11(2):30-40.
188. Obeagu EI, Obeagu GU. The Role of L-selectin in Tuberculosis and HIV Coinfection: Implications for Disease Diagnosis and Management. Elite Journal of Public Health. 2024;2(1):35-51.
189. Kalu OA, Ukibe NR, Onyenekwe CC, Okoyeagu RC, Nnaemeka WS, Onyenekwe AJ, Ukibe EG, Ukibe BC, Ukibe VE, Obeagu EI. Assessment of Serum Cystatin C, Microalbumin Levels and Egfr in HIV Seropositive Individuals based on Age and Gender in NAUTH, Nnewi, Nigeria. Elite Journal of Medicine. 2024;2(3):48-59.
190. Obeagu EI, Obeagu GU. Understanding Immune Cell Trafficking in Tuberculosis-HIV Coinfection: The Role of L-selectin Pathways. Elite Journal of Immunology. 2024;2(2):43-59.
191. Obeagu EI, Obeagu GU. Eosinophilic Changes in Placental Tissues of HIV-Positive Pregnant Women: A Review. Elite Journal of Laboratory Medicine. 2024;2(1):14-32.
192. Obeagu EI, Obeagu GU. P-Selectin and Platelet Activation in HIV: Implications for Antiviral Therapy. Elite Journal of Scientific Research and Review. 2024;2(1):17-41.
193. Obeagu EI, Obeagu GU. Strength in Unity: Building Support Networks for HIV Patients in Uganda. Elite Journal of Medicine. 2024;2(1):1-6.
194. Obeagu EI, GU EE. Understanding the Intersection of Highly Active Antiretroviral Therapy and Platelets in HIV Patients: A Review. Elite Journal of Haematology, 2024; 2 (3).:111-7.