Elite Journal of Public Health. Volume 2 issue 4(2024), Pp. 94-110
https://epjournals.com/journals/EJPH

Climate Change and HIV: Assessing Risks and Vulnerabilities

*Emmanuel Ifeanyi Obeagu[1], Daniel Maada Mami[2] and Getrude Uzoma Obeagu[3]

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

[2]Department of Community Medicine and Populations Health, University of Alabama, USA.

[3]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

Climate change and HIV/AIDS are two global challenges with profound implications for human health and well-being. This review examines the intersection of climate change and HIV/AIDS, assessing the risks and vulnerabilities associated with their interactions. We explore how environmental factors influenced by climate change, such as temperature variability, extreme weather events, and ecological disruptions, impact HIV transmission dynamics. Additionally, we examine socio-economic vulnerabilities, including poverty, gender inequality, and limited access to healthcare, which exacerbate susceptibility to both climate change and HIV/AIDS. Furthermore, we discuss adaptation strategies and policy implications to mitigate the impact of climate change on HIV/AIDS and promote health equity within communities.

Keywords*: Climate Change, HIV/AIDS, Risks, Vulnerabilities, Adaptation, Health Equity*

Introduction

Climate change and HIV/AIDS represent two of the most pressing global health challenges of the 21st century, each posing significant threats to human health, well-being, and development. Climate change, driven primarily by human activities, is altering ecosystems, exacerbating extreme weather events, and reshaping environmental conditions worldwide. Concurrently, HIV/AIDS remains a persistent pandemic, with millions of people living with the virus and millions more at risk of infection. Understanding the intersection of these two phenomena is

critical for comprehensively addressing the complex challenges they pose to global health. While climate change and HIV/AIDS may appear distinct, their interactions and interconnectedness are increasingly recognized. Environmental factors influenced by climate change, such as temperature fluctuations, changes in precipitation patterns, and ecological disruptions, can impact the transmission dynamics of HIV/AIDS. Moreover, socio-economic vulnerabilities exacerbated by climate change, including poverty, gender inequality, and limited access to healthcare, can increase susceptibility to HIV/AIDS and hinder effective prevention and treatment efforts.[1-15]

This review article aims to assess the risks and vulnerabilities associated with the intersection of climate change and HIV/AIDS. By examining the interplay between environmental factors, socio-economic determinants, and health outcomes, we seek to elucidate the complex relationships shaping the spread and impact of HIV/AIDS in a changing climate. Furthermore, we aim to explore adaptation strategies and policy implications to mitigate the impact of climate change on HIV/AIDS and promote health equity within communities. Understanding the risks and vulnerabilities associated with climate change and HIV/AIDS requires a holistic approach that considers the interconnectedness of environmental, social, and health systems. By identifying the pathways through which climate change influences HIV/AIDS transmission dynamics and exacerbates vulnerabilities, policymakers, healthcare providers, and communities can develop targeted interventions and policies that address the root causes of vulnerability and promote resilience to both climate change and HIV/AIDS.[16-30]

Environmental Factors and HIV Transmission

Environmental factors play a significant role in shaping the transmission dynamics of HIV/AIDS, with climate change exerting notable influences on the spread of the disease. These environmental factors encompass a wide range of elements, including temperature, precipitation patterns, ecological disruptions, and changes in vector behavior, all of which can directly and indirectly impact the prevalence and transmission of HIV/AIDS within populations. Temperature fluctuations associated with climate change have the potential to influence HIV transmission in various ways. Warmer temperatures can impact the survival of the virus outside the human body, potentially prolonging its viability in bodily fluids and increasing the likelihood of transmission during sexual activity or through contaminated needles. Additionally, elevated temperatures may create environments conducive to the proliferation of disease vectors such as mosquitoes, which can transmit HIV alongside other vector-borne diseases in regions where they coexist. Changes in precipitation patterns and water availability also play a role in HIV transmission dynamics. Climate-induced alterations in rainfall can affect the availability and quality of water sources, impacting hygiene practices and sanitation infrastructure. Inadequate access to clean water and sanitation increases the risk of opportunistic infections and co-infections among individuals living with HIV/AIDS, complicating disease management and treatment outcomes.[31-50]

Ecological disruptions resulting from climate change, such as deforestation, urbanization, and habitat degradation, can further influence HIV transmission dynamics. These disruptions can alter

human interactions with disease reservoirs and vectors, potentially increasing the risk of zoonotic transmission of HIV-related viruses. Additionally, displacement of populations due to environmental factors, such as flooding or drought, can lead to overcrowding, inadequate housing, and limited access to healthcare, thereby exacerbating vulnerability to HIV transmission. The interplay between environmental factors and HIV transmission underscores the importance of holistic approaches to public health and climate change mitigation. Strategies aimed at addressing environmental determinants of health, such as promoting access to clean water and sanitation, mitigating habitat degradation, and enhancing vector control measures, can contribute to reducing the risk of HIV transmission. Furthermore, integrating climate change adaptation measures into HIV/AIDS programming can enhance the resilience of healthcare systems and communities to the impacts of environmental stressors, ultimately contributing to more effective prevention and control of HIV/AIDS.[51-60]

Socio-Economic Vulnerabilities

Socio-economic vulnerabilities intersect with HIV transmission dynamics in intricate and multifaceted ways, shaping the distribution, prevalence, and impact of the disease within communities. These vulnerabilities are influenced by a myriad of factors, including poverty, gender inequality, limited access to healthcare, stigma, discrimination, and lack of education. Understanding the socio-economic determinants of HIV/AIDS is crucial for developing targeted interventions and policies that address the root causes of vulnerability and promote health equity. Poverty stands as one of the most significant socio-economic factors driving vulnerability to HIV/AIDS. Individuals living in poverty often face limited access to healthcare services, including HIV testing, treatment, and prevention programs. Economic deprivation may also lead to high-risk behaviors such as transactional sex, substance abuse, and engagement in informal labor sectors, which increase the risk of HIV transmission. Moreover, poverty can exacerbate the impact of HIV/AIDS by reducing household income, increasing food insecurity, and limiting access to education and social support systems. Gender inequality is another critical determinant of vulnerability to HIV/AIDS, particularly among women and girls. Gender disparities in access to resources, education, economic opportunities, and decision-making power contribute to unequal power dynamics within relationships, increasing the risk of sexual violence, coercion, and unprotected sex. Moreover, societal norms and expectations around masculinity and femininity may discourage women from negotiating safer sex practices or seeking HIV testing and treatment, further exacerbating their vulnerability to HIV transmission.[61-90]

Limited access to healthcare services, including HIV testing, treatment, and prevention programs, is a significant barrier for individuals living in socio-economically marginalized communities. Structural barriers such as lack of transportation, cost of healthcare, and discrimination may prevent individuals from accessing essential HIV/AIDS services. Moreover, stigma and discrimination associated with HIV/AIDS can deter individuals from seeking testing and treatment, further perpetuating the cycle of vulnerability and contributing to the spread of the disease within communities. Education plays a crucial role in mitigating vulnerability to HIV/AIDS by empowering individuals with knowledge, skills, and resources to make informed decisions about their sexual health. However, socio-economic disparities in access to education,

particularly among marginalized populations, limit the effectiveness of HIV/AIDS prevention efforts. Lack of comprehensive sexual education, misinformation, and cultural taboos surrounding sexuality may contribute to risky sexual behaviors and hinder efforts to promote condom use, HIV testing, and other preventive measures.[91-100]

Adaptation Strategies

Adaptation strategies are essential for mitigating the impact of climate change on HIV/AIDS and promoting resilience within communities. These strategies encompass a range of interventions aimed at enhancing adaptive capacity, reducing vulnerability, and improving health outcomes in the face of changing environmental conditions. Strengthening healthcare systems is crucial for ensuring the continuity of HIV/AIDS services amidst climate change-induced challenges. This includes investments in healthcare infrastructure, equipment, and human resources to enhance service delivery, capacity, and quality of care. Improving healthcare governance, management, and financing mechanisms is critical for building resilient health systems that can effectively respond to the evolving challenges posed by climate change and HIV/AIDS. Building climate-resilient healthcare facilities is essential to ensure the continuity of HIV/AIDS services during extreme weather events and other climate-related emergencies. Retrofitting existing healthcare facilities to withstand climate-related hazards, such as floods, storms, and heatwaves, can minimize disruptions in service delivery and protect healthcare workers and patients. Incorporating climate resilience considerations into the design, construction, and operation of new healthcare facilities can enhance their ability to withstand future climate impacts.[101-120]

Integrating HIV/AIDS and climate change adaptation strategies is essential for maximizing synergies and leveraging resources to address common challenges. This involves mainstreaming climate change considerations into HIV/AIDS programming and vice versa. For example, incorporating climate risk assessments into HIV service planning and delivery can help identify vulnerable populations and prioritize adaptation measures. Similarly, integrating HIV/AIDS services into broader climate change adaptation initiatives, such as community resilience-building programs, can enhance the effectiveness and sustainability of both interventions. Telemedicine and digital health solutions offer innovative approaches to overcoming barriers to healthcare access and delivery in the context of climate change. Leveraging mobile technology, telemedicine platforms, and digital health tools can facilitate remote consultations, medication adherence support, and health education for HIV/AIDS patients, particularly in remote and hard-to-reach areas. These technologies can also enhance healthcare system efficiency, improve data collection and surveillance, and support decision-making in HIV/AIDS programming and climate adaptation efforts. Strengthening community health systems is essential for delivering HIV/AIDS services and supporting community-based adaptation to climate change. This involves empowering community health workers, engaging communities in healthcare planning and decision-making, and promoting local ownership of healthcare initiatives. Strengthening community health systems can enhance resilience, improve health outcomes, and promote sustainability in the face of climate change and HIV/AIDS.[121-140]

Policy Implications

Policy implications at the intersection of climate change and HIV/AIDS are critical for addressing the complex challenges posed by these interconnected phenomena. Effective policies can help mitigate the impact of climate change on HIV/AIDS and promote health equity within communities. Policymakers should adopt integrated approaches that address both climate change and HIV/AIDS comprehensively. This includes mainstreaming climate change considerations into HIV/AIDS policies and programs and vice versa. Integrated approaches can leverage synergies, optimize resource allocation, and enhance the effectiveness of interventions aimed at reducing vulnerability to both climate change and HIV/AIDS. Strengthening healthcare systems is essential for ensuring the continuity of HIV/AIDS services in the face of climate change. Policymakers should prioritize investments in healthcare infrastructure, human resources, and capacity-building initiatives to enhance the resilience of health systems. This includes improving healthcare governance, management, and financing mechanisms to ensure sustainable service delivery and equitable access to HIV/AIDS prevention, treatment, and care. Community engagement and empowerment are critical for building resilience to both climate change and HIV/AIDS. Policymakers should prioritize community-based approaches that involve local communities in decision-making processes, healthcare planning, and adaptation initiatives. Empowering communities to identify and address their own healthcare needs can enhance resilience, foster social cohesion, and promote sustainable development outcomes.[141-145]

Gender-responsive policies are essential for addressing the differential impacts of climate change and HIV/AIDS on women, girls, and marginalized gender groups. Policymakers should prioritize gender equality and women's empowerment in climate change adaptation and HIV/AIDS programming, including addressing gender-based violence, promoting sexual and reproductive health rights, and ensuring access to education and economic opportunities for women and girls. Continued research and innovation are essential for advancing knowledge and developing evidence-based strategies to address the complex interactions between climate change and HIV transmission dynamics. Policymakers should support interdisciplinary research initiatives that explore the underlying drivers of vulnerability, identify effective adaptation strategies, and evaluate the impact of policy interventions. Investing in research and innovation can inform policy and practice and facilitate the development of scalable solutions to address both climate change and HIV/AIDS. International cooperation and partnerships are essential for addressing the global challenges of climate change and HIV/AIDS. Policymakers should prioritize multilateral collaboration, knowledge-sharing, and capacity-building initiatives to support countries in implementing climate-resilient HIV/AIDS programs and strengthening health systems. International cooperation can facilitate the mobilization of resources, transfer of technology, and exchange of best practices to enhance resilience and promote sustainable development outcomes worldwide.[146-152]

Conclusion

The intersection of climate change and HIV/AIDS presents complex challenges that require urgent and coordinated action from policymakers, healthcare providers, researchers, and communities worldwide. Climate change influences the spread of HIV/AIDS through various pathways, including environmental factors, socio-economic vulnerabilities, and disruptions to healthcare

infrastructure. Conversely, HIV/AIDS exacerbates vulnerability to climate change impacts, creating a vicious cycle of health disparities and environmental degradation. Addressing these interconnected challenges requires integrated approaches that prioritize health equity, resilience, and sustainable development. Strengthening healthcare systems, promoting community engagement and empowerment, mainstreaming gender equality, investing in research and innovation, and fostering international cooperation are essential components of an effective response. By understanding the connections between climate change and HIV spread, policymakers and stakeholders can develop holistic strategies that address the root causes of vulnerability and promote adaptive responses to mitigate the impact of climate change on HIV/AIDS.

References

1. McMichael AJ. Planetary overload: global environmental change and the health of the human species. Cambridge University Press; 1993.
2. Reser JP, Swim JK. Adapting to and coping with the threat and impacts of climate change. American Psychologist. 2011;66(4):277.
3. Irwin AC, Millen JV, Fallows D. Global AIDS: myths and facts: tools for fighting the AIDS pandemic. South End Press; 2003.
4. Snowden FM. Emerging and reemerging diseases: a historical perspective. Immunological reviews. 2008;225(1):9-26.
5. Russell BS, Eaton LA, Petersen-Williams P. Intersecting epidemics among pregnant women: alcohol use, interpersonal violence, and HIV infection in South Africa. Current HIV/AIDS Reports. 2013; 10:103-110.
6. 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.
7. 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.
8. 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.
9. 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.
10. 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

Citation: Obeagu EI, Mami DM, Obeagu GU. Climate Change and HIV: Assessing Risks and Vulnerabilities. Elite Journal of Public Health, 2024; 2 (4): 94-110

11. 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.
12. 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.
13. 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.
14. 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.
15. 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.
16. 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.
17. 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
18. 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
19. 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.
20. 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.

Citation: Obeagu EI, Mami DM, Obeagu GU. Climate Change and HIV: Assessing Risks and Vulnerabilities. Elite Journal of Public Health, 2024; 2 (4): 94-110

21. 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.
22. 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
23. 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
24. 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.
25. 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.
26. 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.
27. 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.
28. 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.
29. 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.
30. 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

31. 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.
32. 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
33. 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.
34. 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.
35. 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.
36. 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/.
37. 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.
38. 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
39. 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

40. 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.
41. 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.
42. 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.
43. 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.
44. 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.
45. 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.
46. 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.
47. 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.
48. 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.
49. 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.

Citation: Obeagu EI, Mami DM, Obeagu GU. Climate Change and HIV: Assessing Risks and Vulnerabilities. Elite Journal of Public Health, 2024; 2 (4): 94-110

50. 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.
51. 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.
52. Arthur RF, Gurley ES, Salje H, Bloomfield LS, Jones JH. Contact structure, mobility, environmental impact and behaviour: the importance of social forces to infectious disease dynamics and disease ecology. Philosophical Transactions of the Royal Society B: Biological Sciences. 2017;372(1719):20160454.
53. Oramasionwu CU, Daniels KR, Labreche MJ, Frei CR. The environmental and social influences of HIV/AIDS in sub-Saharan Africa: a focus on rural communities. International journal of environmental research and public health. 2011;8(7):2967-2979.
54. 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.
55. 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.
56. 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.
57. 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).
58. 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.
59. 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.
60. 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.
61. 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.
62. 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.

63. 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.
64. Obeagu EI, Obeagu GU, Obiezu J, Ezeonwumelu C, Ogunnaya FU, Ngwoke AO, Emeka-Obi OR,
65. 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.
66. 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.
67. Obeagu EI, Obeagu GU. Unmasking the Truth: Addressing Stigma in the Fight Against HIV. Elite Journal of Public Health. 2024;2(1):8-22.
68. 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.
69. Obeagu EI, Obeagu GU. Utilization of immunological ratios in HIV: Implications for monitoring and therapeutic strategies. Medicine. 2024;103(9): e37354.
70. Obeagu EI, Obeagu GU. CD8 Dynamics in HIV Infection: A Synoptic Review. Elite Journal of Immunology. 2024;2(1):1-3.
71. Obeagu EI, Obeagu GU. Implications of B Lymphocyte Dysfunction in HIV/AIDS. Elite Journal of Immunology. 2024;2(1):34-46.
72. Obeagu EI, Obeagu GU. Maternal Influence on Infant Immunological Responses to HIV: A Review. Elite Journal of Laboratory Medicine. 2024;2(1):46-58.
73. 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.
74. Obeagu EI, Obeagu GU. Platelet-Driven Modulation of HIV: Unraveling Interactions and Implications. Journal home page: http://www. journalijiar. com.;12(01).
75. Obeagu EI, Anyiam AF, Obeagu GU. Managing Hematological Complications in HIV: Erythropoietin Considerations. Elite Journal of HIV. 2024;2(1):65-78.
76. 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).
77. 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.
78. 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.
79. 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.
80. Obeagu EI, Obeagu GU. Transfusion Therapy in HIV: Risk Mitigation and Benefits for Improved Patient Outcomes. Sciences. 2024;4(1):32-7.
81. Obeagu EI, Obeagu GU. Mental Health and Psychosocial Effects of natural disaster on HIV Patients. Sciences. 2024;4(1):38-44.

Citation: Obeagu EI, Mami DM, Obeagu GU. Climate Change and HIV: Assessing Risks and Vulnerabilities. Elite Journal of Public Health, 2024; 2 (4): 94-110

82. 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.
83. 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.
84. 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.
85. 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.
86. 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.
87. 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.
88. Obeagu EI, Obeagu GU. Understanding Hematocrit Fluctuations in HIV-Malaria Coinfection for Improved Management. Elite Journal of Public Health. 2024;2(1):22-34.
89. 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.
90. 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).
91. 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.
92. 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.
93. Obeagu EI, Obeagu GU. Advancements in HIV Prevention: Africa's Trailblazing Initiatives and Breakthroughs. Elite Journal of Public Health. 2024;2(1):52-63.
94. Obeagu EI, Obeagu GU. Maternal Influence on Infant Immunological Responses to HIV: A Review. Elite Journal of Laboratory Medicine. 2024;2(1):46-58.
95. 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.
96. Obeagu EI, Anyiam AF, Obeagu GU. Managing Hematological Complications in HIV: Erythropoietin Considerations. Elite Journal of HIV. 2024;2(1):65-78.
97. 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.
98. 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.

Citation: Obeagu EI, Mami DM, Obeagu GU. Climate Change and HIV: Assessing Risks and Vulnerabilities. Elite Journal of Public Health, 2024; 2 (4): 94-110

99. 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.
100. 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.
101. Obeagu EI, Obeagu GU. Understanding ART and Platelet Functionality: Implications for HIV Patients. Elite Journal of HIV. 2024;2(2):60-73.
102. 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.
103. 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.
104. 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.
105. 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.
106. 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.
107. Obeagu EI, Obeagu GU. Harnessing B Cell Responses for Personalized Approaches in HIV Management. Elite Journal of Immunology. 2024;2(2):15-28.
108. 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).
109. 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).
110. 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.
111. 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.
112. Obeagu EI, Obeagu GU. Platelet Aberrations in HIV Patients: Assessing Impacts of ART. Elite Journal of Haematology, 2024; 2 (3).:10-24.
113. 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.
114. Obeagu EI, Anyiam AF, Obeagu GU. Erythropoietin Therapy in HIV-Infected Individuals: A Critical Review. Elite Journal of HIV. 2024;2(1):51-64.

115. 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.
116. 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.
117. 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.
118. 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.
119. Obeagu EI, Obeagu GU. Anemia and Erythropoietin: Key Players in HIV Disease Progression. Elite Journal of Haematology, 2024; 2 (3).:42-57.
120. Obeagu EI, Obeagu GU. Platelet Dysfunction in HIV Patients: Assessing ART Risks. Elite Journal of Scientific Research and Review. 2024;2(1):1-6.
121. 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.
122. Obeagu EI, Obeagu GU. Transfusion Therapy in HIV: Risk Mitigation and Benefits for Improved Patient Outcomes. Sciences. 2024;4(1):32-7.
123. Obeagu EI, Obeagu GU. P-Selectin and Immune Activation in HIV: Clinical Implications. Elite Journal of Health Science. 2024;2(2):16-29.
124. Obeagu EI, Obeagu GU. Mental Health and Psychosocial Effects of natural disaster on HIV Patients. Sciences. 2024;4(1):38-44.
125. 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.
126. 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.
127. 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.
128. 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.
129. 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.
130. Obeagu EI, Obeagu GU. P-Selectin Expression in HIV-Associated Coagulopathy: Implications for Treatment. Elite Journal of Haematology, 2024; 2 (3).:25-41.
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. Exploring the Role of L-selectin in HIV-related Immune Exhaustion: Insights and Therapeutic Implications. Elite Journal of HIV. 2024;2(2):43-59.

133. Obeagu EI. Erythropoietin and the Immune System: Relevance in HIV Management. Elite Journal of Health Science. 2024;2(3):23-35.
134. 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.
135. 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.
136. 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.
137. 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.
138. 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.
139. 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.
140. 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.
141. 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.
142. 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.
143. 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.
144. Obeagu EI, Obeagu GU. Strength in Unity: Building Support Networks for HIV Patients in Uganda. Elite Journal of Medicine. 2024;2(1):1-6.
145. 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).:111-117.
146. Brault MA, Vermund SH, Aliyu MH, Omer SB, Clark D, Spiegelman D. Leveraging HIV care Infrastructures for integrated chronic disease and pandemic management in sub-Saharan Africa. International journal of environmental research and public health. 2021;18(20):10751.
147. Schwartländer B, Stover J, Hallett T, Atun R, Avila C, Gouws E, Bartos M, Ghys PD, Opuni M, Barr D, Alsallaq R. Towards an improved investment approach for an effective response to HIV/AIDS. The Lancet. 2011;377(9782):2031-2041.

Citation: Obeagu EI, Mami DM, Obeagu GU. Climate Change and HIV: Assessing Risks and Vulnerabilities. Elite Journal of Public Health, 2024; 2 (4): 94-110

148. Watkins-Hayes C. Intersectionality and the sociology of HIV/AIDS: Past, present, and future research directions. Annual Review of Sociology. 2014; 40:431-457.
149. Nyasimi M, Ayanlade A, Mungai C, Derkyi M, Jegede MO. Inclusion of gender in Africa's climate change policies and strategies. Handbook of Climate Change Communication: Vol. 1: Theory of Climate Change Communication. 2018:171-85.
150. Braaf R. Addressing the intersections of climate change, energy, environmental degradation and gender-based violence. Prepared for the United Nations Development Programme. Accessed on November. 2016; 12:2022.
151. Obeagu EI, Mami DM, Obeagu GU. Climate Change as a Driver of HIV Transmission Dynamics: A Review. Elite Journal of HIV, 2024; 2(4): 110-127
152. Obeagu EI, Mami DM, Obeagu GU. The Nexus Between Climate Change and HIV Spread: Understanding Intersections, Impacts, and Interventions. Elite Journal of HIV, 2024; 2(4): 128-145