

HIV PREVENTION TOOLKIT FOR YOUNG WOMEN

PREVENTING VERTICAL TRANSMISSION OF HIV



Will children born to HIV-positive parents be HIV-positive?

These days, in Canada, a baby's likelihood of being HIV-negative is excellent if the parent knows they are HIV-positive and has access to good pre-natal care.

Without any treatment, the risk of transmission from a pregnant HIV-positive parent to the baby is about 25%. This drops to 1%- 2% if there is 'ideal care.'

Ideal care includes viral load³ monitoring, taking appropriate medications during pregnancy and labour, having a Caesarean-section (C-section) if viral load is too high, ensuring that the baby takes HIV medication for six weeks after birth, and not breast-feeding or chest-feeding.

Should everyone who is pregnant get tested for HIV?

It's recommended that everybody who is pregnant or planning to get pregnant be offered an HIV test. Approximately one-quarter of people who are HIV-positive don't know they are positive. Testing for HIV in pregnancy is an important consideration for both the parent's own health and the health of their baby.

Vertical transmission of HIV¹ is also known as mother-to-child transmission. HIV can be transmitted from a pregnant HIV-positive parent to an unborn baby during pregnancy or childbirth. It can also be transmitted after the baby is born, through breast-feeding or chest-feeding.²

¹ HIV stands for human immunodeficiency virus, a virus that attacks the immune system and results in a chronic, progressive illness which makes people vulnerable to other potentially serious infections and cancers. (AIDS, which stands for Acquired Immunodeficiency Syndrome, is the advanced stage of HIV infection.)

² Chest-feeding is a term preferred by some trans* men who nurse their infants.

³ Viral load is the level of HIV in an HIV-positive person's blood, and is measured by regular blood tests. Research shows that successful HIV treatment can reduce the viral load to "undetectable" levels and this can significantly lower the risk of HIV transmission.

If one partner is HIV-positive and the other is HIV-negative, how can they conceive without transmitting HIV to the negative partner?

There are many options, which vary according to which partner is positive, as well as cost, complexity, how well they work, and risk of HIV transmission.

- ➔ Some people decide to use no extra precautions if the HIV-positive partner's viral load is 'undetectable,' because the risk of transmission in that case is minimal.
- ➔ Medications (pre-exposure prophylaxis, or PrEP) is a prescription medication taken daily by the HIV-negative partner to significantly lower their risk of acquiring HIV.
- ➔ Other options include artificial insemination, sperm-washing, in vitro fertilization, adoption and/or surrogacy.
- ➔ Health care providers can provide information about the options on an individual basis.



For more information, see the Canadian HIV Pregnancy Planning Guidelines.⁴

What is cART, and is it safe for the fetus?

cART (which stands for 'combination antiretroviral therapy') is a customized combination of different classes of medications used to treat HIV. Generally, cART is considered safe and is recommended for HIV-positive people during pregnancy. However, there are many different medications used to treat HIV and some of these medications are still fairly new so there is limited information about their use during pregnancy. For most of these drugs, animal studies suggest that there is no risk to the fetus, and databases that record information about their use during pregnancy show that they are safe. Well-controlled studies of pregnant humans have not yet been conducted. The decision whether to use cART during pregnancy should be made by the HIV-positive person in consultation with their health care provider about the potential benefits and risks.

⁴ <http://sogc.org/guidelines/canadian-hiv-pregnancy-planning-guidelines-2/>

Can someone have a vaginal delivery if they're HIV-positive?

Many HIV-positive parents deliver their babies vaginally. However, if the pregnant parent's viral load (the amount of HIV in the blood) is detectable toward the end of the pregnancy, the parent and the health care provider will consider if a Caesarean Section (C-section) should be done to reduce the risk of HIV transmission to the baby. Like all people who are delivering, C-sections may also be recommended for reasons other than HIV.

When will the newborn baby's HIV status be known?

It will take a few months to be certain. The baby will be tested several times – once shortly after birth, once several weeks later, and once when it is a few months old. These are blood tests that look for the HIV virus. If the baby is infected, the first test will be reliable about 55% of the time, and the second test will be reliable about 90% of the time. The last test should be 100% accurate in determining if the baby is infected. The baby should start antiretroviral preventive treatment right after birth, and continue for six weeks – this is recommended for all babies of HIV-positive mothers, regardless of the baby's initial test results. Most of the time, this is with just one medication (AZT); two or three medications might be used if there is a higher risk of infection for the baby (for example, if the parent wasn't treated for HIV during pregnancy).

What happens if the baby tests positive for HIV?

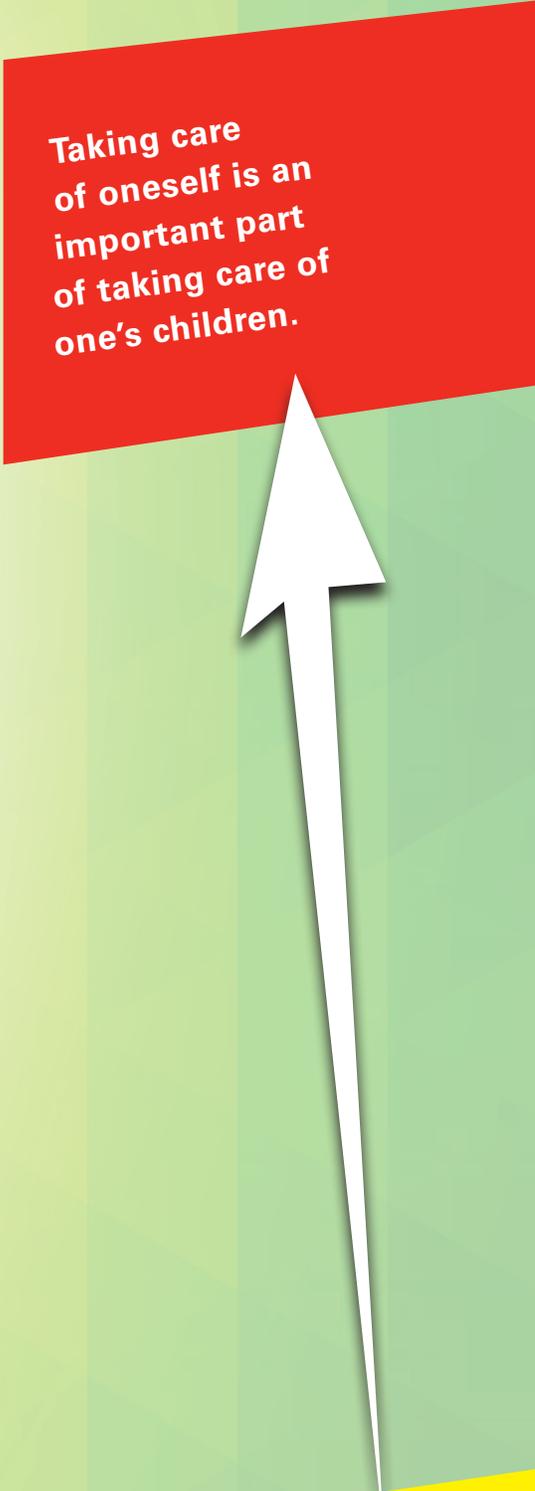
If the baby tests positive for HIV, ongoing 3-drug antiretroviral treatment would be recommended to keep the baby healthy.

Can an HIV-positive parent breast-feed/chest-feed?

In Canada, breast-feeding/chest-feeding by HIV-positive parents is not recommended, because HIV can be transmitted to the baby through breast milk.

Will HIV-positive parents live long enough to finish raising their children?

Every parent, regardless of their HIV status, runs the risk of dying before they've finished raising their children. These days, the lifespan of people with HIV who are receiving treatment is similar to that of people who don't have HIV. Taking care of oneself is an important part of taking care of one's children.



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Resources

There is more information about HIV and pregnancy here:

<http://www.catie.ca/en/practical-guides/pregnancy/resources>

