

HIV in Pregnancy and the Puerperium

HIV positive couples planning a pregnancy

All couples where one or more partner is HIV positive should be referred to their own HIV team for advice when planning a pregnancy. This will help them to ensure they receive the best advice regarding optimal timing for conception.

General pre-conceptual advice for all situations

• If the mother is on folate antagonists such as co-trimoxazole, folic acid should be given at an increased dose of 5mg and continued throughout pregnancy.

HIV Antenatal Screening

An HIV test is offered to <u>all</u> women during their antenatal care as an integral part of routine antenatal screening. If a woman declines an HIV screen in pregnancy she will be referred on to the HIV multidisciplinary team for further management.

Disclosure protocol

All women are encouraged to disclose a HIV positive result to their GP, However unless there are child protection issues this remains the woman's choice.

Medical management of HIV in pregnancy

Management of women with HIV in pregnancy will be within the specialist HIV multidisciplinary team. This is facilitated when pregnancy is confirmed in a known HIV positive woman or following a new HIV diagnosis during pregnancy.

Women with HIV in pregnancy should be referred to Saint Mary's Hospital as soon as possible. This can be done by contacting the Specialist Midwife for HIV in pregnancy on 0161 276 6081or by emailing Alex.Thomas-Leech@mft.nhs.uk

HIV and Infant Feeding

HIV is present in breast milk and can be transmitted to the neonate both through free virus and via HIV infected cells in the milk. Therefore breastfeeding increases the rate of vertical transmission.

In the UK where safe, affordable alternatives exist, HIV positive women are strongly advised **not** to breastfeed. Cabergoline 1mg is offered post-delivery for suppression of lactation. BHIVA now recommends formula milk should be available on prescription for women with HIV.

There may be a cultural issue which makes it difficult for a woman not to breastfeed her baby. Every effort must be made to prepare the women for challenging questions from family and friends who may not be aware of the woman's HIV status. Further support can also be accessed via voluntary sector organisations such as George House Trust (www.ght.org.uk).



References and Bibliography

British HIV Association guidelines on the use of vaccines in HIV-positive adults 2015 http://www.bhiva.org/documents/Guidelines/Vaccination/2015-Vaccination-Guidelines.pdf

Taylor GP, Anderson J, Clayden P, Gazzard BG, et al. British HIV Association (BHIVA) and Children's HIV Association (CHIVA) Position Statement on Infant Feeding in the UK. BHIVA/CHIVA Writing Group on Infant Feeding in the UK November 2010. http://www.bhiva.org/BHIVA-CHIVA-PositionStatement.aspx