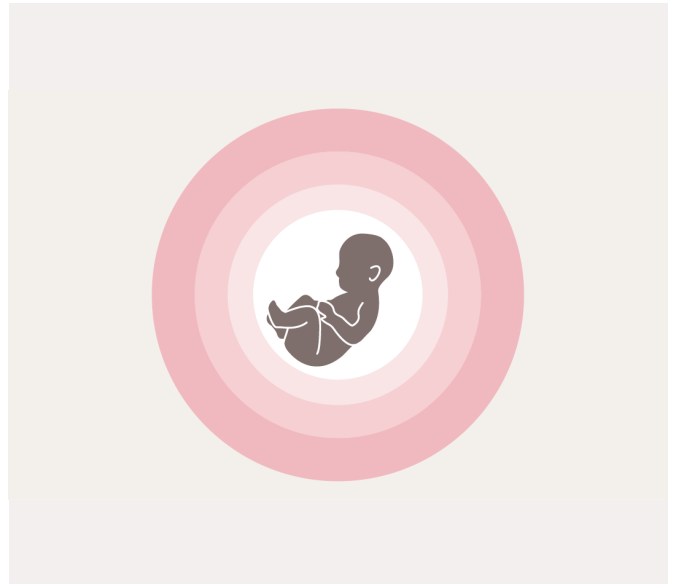


Factsheet HIV and having a baby

Key points

- Women living with HIV can give birth without passing on HIV to the baby.
- Your options for conception will depend on your health and your partner's HIV status.
- Your doctor will recommend you start HIV treatment during your pregnancy if you are not already taking it.



Women living with HIV can have healthy pregnancies and give birth to healthy babies without passing on HIV. Most of the advice for women with HIV is the same as it would be for anyone else thinking about starting a family or having another baby. Some extra steps are necessary to reduce the risk of HIV being passed on.

There is lots of information on the NHS Choices website about having a healthy pregnancy. There's advice on morning sickness, diet, giving up smoking, cutting down on alcohol, finding out about ultrasound tests and much more. Visit www.nhs.uk/pregnancy

Conception options

Your options for getting pregnant will depend on your circumstances. Are you taking HIV treatment? Does your partner have HIV? Are you generally in good health? Are you taking any other medication? It's a good idea to talk to your HIV doctor for information and advice specific to you.

All women planning a pregnancy – whether or not they have HIV – are advised to take a daily folic acid supplement. Folic acid (vitamin B9) helps cells in the body to develop. It is difficult to get enough through your diet. Supplements are recommended while you are trying to conceive and for the first 12 weeks of pregnancy.

If your partner does not have HIV and you are concerned about passing on HIV to him, there are several options. If you are taking HIV treatment and your viral load is undetectable, the risk of passing HIV on during vaginal sex without a condom is very low. You and your partner could

learn more about this, talk about it, and decide whether this is an option you are comfortable with. NAM has published two factsheets on this topic, called *Viral load and transmission – a factsheet for people with HIV* and *Viral load and transmission – a factsheet for HIV-negative people*.

You could also consider self-insemination – using a plastic syringe to squirt your partner’s semen into your vagina.

Whichever option you choose make sure you have had an up-to-date sexual health screen.

You can find out more about conception in our booklet *HIV & women*, available on our website at www.aidsmap.com/booklets

HIV treatment during pregnancy

HIV treatment reduces the level of virus in your body (viral load). Keeping your viral load very low, ideally ‘undetectable’, is good for your health and also reduces the risk of HIV being passed on to your baby.

In the UK, treatment and care for women living with HIV is generally very good. If you are taking HIV treatment and your viral load is undetectable, the risk of HIV being passed on to your baby is just 0.1%, or one in a thousand.

If you are already taking HIV treatment, you can generally continue taking the same treatment throughout your pregnancy.

It’s a good idea to talk to your doctor about your pregnancy or your plans to conceive, particularly if you have any concerns about the treatment you are currently taking.

If you are not already taking HIV treatment, your HIV doctor will recommend that you start taking treatment during your pregnancy. This is so that your viral load can be brought down, reducing the risk of HIV being passed on to your baby.

Your birth plan

For women living with HIV who are taking an HIV treatment combination and have an undetectable viral load at week 36 of pregnancy, the options for delivery are the same as for women who don’t have HIV. If there are no other considerations, then having a vaginal birth is an option for you. Depending on your local maternity services, you should also be able to consider having your baby in hospital, in a midwife-led unit, or at home.

If your viral load is high, your doctor is likely to recommend a planned caesarean delivery. During vaginal births, babies may come into contact with HIV in their mother’s blood and other fluids. A caesarean reduces the risk of passing on HIV.

It’s a good idea to talk to your health care team about your options and preferences. There may also be other medical factors to take into consideration when choosing where and how to give

birth. Your doctor or midwife can also talk to you about other factors you might want to consider, such as pain relief during labour, and whether you would like to have someone with you during the birth.

Feeding your baby

HIV is present in breast milk and HIV can be passed on during breast feeding. In countries where formula feeding is safe, like the UK, women living with HIV are advised not to breast feed. Instead, only using infant formula to feed your baby is recommended.

If you have any concerns about this, talk to your health care team so they can give you more information and advice. There is financial help available for sterilising equipment and formula if the cost of using formula might be an issue for you.

"If you are already taking HIV treatment, you can generally continue taking the same treatment throughout your pregnancy."

It is also recommended that your baby takes a type of HIV treatment for the first few weeks. You can give this treatment as a syrup. This provides extra protection against HIV.

There's more information on all of these subjects in our *HIV & women* booklet, available on our website at www.aidsmap.com/booklets

Help and support

Having a baby can be a fulfilling, rewarding, joyful experience, but it is also difficult at times. Having good support during pregnancy and once your baby is born can really help. Support from a partner, family and friends can be really helpful – whether it's emotional support or more practical help. Having a good relationship with the health professionals caring for you and your baby is also important, including your HIV doctor, your midwife and your health visitor.

Some women find talking to other women living with HIV who have had children really helpful. If you don't already know someone you can talk to, you could get in touch with your local HIV organisation and see if they have a group meeting, or peer support service you could join.

Positively UK, a national organisation based in London, offers various types of peer support for mothers with HIV. There's a mother and toddler group, mentor mothers, and pregnancy workshops. Call their helpline on 020 7713 0444 or visit their website for more information: <http://positivelyuk.org/pregnancy>

Find out more

Having a baby Basic leaflet with pictures

HIV & women Information booklet

HIV & pregnancy Online, interactive tool