

PRECONCEPTION CARE IS A CALL TO ACTION



People who are pregnant or planning to get pregnant should take an HIV test as soon as possible

People with HIV can maintain healthy pregnancies and deliver babies free of HIV

Providing HIV testing, in the context of preconception care promotes overall good health, helps identify people with HIV and/or those at risk, and provides the opportunity for early initiation of biomedical HIV treatment and prevention

In the United States, perinatal HIV transmission (the transmission of HIV during pregnancy, childbirth and breastfeeding) has declined by more than 95% since the early 1990s.ⁱ The risk of transmitting HIV perinatally is now less than 1% if a person with HIV takes anti-retroviral (ARV) medication daily as prescribed throughout pregnancy and childbirth.ⁱⁱ The sooner HIV is diagnosed and treated, and the sooner individuals achieve viral suppression, the more effective the treatment will be in preventing perinatal transmission.ⁱ Knowing one's HIV status before conceiving is an important first step in preventing perinatal transmission, therefore prevention of perinatal transmission begins with HIV testing.

Preconception care provides an important opportunity to make HIV testing more widely available for individuals of reproductive age, regardless of their plan to have children. Preconception care is “medical care a woman or man receives from a health professional that focuses on the parts of health that have been shown to increase the chance of having a healthy baby.” Preconception care is different for every person, depending on his or her unique needs.ⁱⁱⁱ

PREVENTION OF PERINATAL HIV TRANSMISSION BEGINS WITH HIV TESTING

HIV POSITIVE

Initiate ARV medication
as soon as possible

HIV NEGATIVE

- Provide education about pre-exposure prophylaxis (PrEP)
- Provide PrEP for those at significant risk
- Provide post-exposure prophylaxis (PEP) within 72 hours to individuals with unplanned HIV exposure

The Centers for Disease Control and Prevention (CDC) recommends opt-out testing as a routine part of care for people aged 13-64, and more frequently for people at more significant risk.^{iv} The CDC also recommends that:

- All people who are pregnant or planning to get pregnant should take an HIV test as soon as possible.ⁱ
- HIV negative women who have a partner with HIV should talk to their doctor about taking medicine daily (PrEP) to protect themselves while trying to get pregnant, and to protect themselves and their baby during pregnancy.ⁱ
- People who have an unplanned exposure to HIV can access post-exposure prophylaxis (PEP) within 72 hours of exposure.
- Identifying individuals with HIV and/or significant risk for HIV is the gateway to effective treatment and prevention, including the prevention of perinatal transmission.

Click for more information about [Preconception Care](#).

ⁱ CDC, HIV and Pregnant Women, Infants and children, accessed 1/30/20 CDC, <https://www.cdc.gov/hiv/group/gender/pregnantwomen/index.html>

ⁱⁱ CDC, HIV Treatment as Prevention, accessed 2/12/20, <https://www.cdc.gov/hiv/group/gender/pregnantwomen/index.html>

ⁱⁱⁱ CDC, Preconception Health Overview, accessed 1/30/20 <https://www.cdc.gov/preconception/overview.html>

^{iv} CDC, (2006) Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Healthcare Settings Recommendations and Reports,

Preconception Care for People with HIV*

In 2019, the Expert Panel on Treatment of Pregnant Women with HIV Infection and Prevention of Perinatal Transmission updated the Guidelines for Preconception Care (see highlights below):^v

1. Discuss reproductive desires with all people of childbearing age
2. HIV testing should be a standard of care for all sexually active people
3. Provide information about effective contraception
4. Provide information on safer sex and encourage elimination of alcohol, tobacco, and other drugs of abuse; and provide appropriate treatment if elimination is not possible
5. For people with HIV, attain maximum viral suppression before attempting conception
6. Provide counseling and informed decision-making about selection of ARV regimen, based on effectiveness, hepatitis B status, and teratogenic potential of medications
7. Encourage partners to be tested if status is unknown

^v Panel on Treatment of Pregnant Women with HIV Infection and Prevention of Perinatal Transmission. Recommendations for Use of Antiretroviral Drugs in Transmission in the United States. Available at <https://aidsinfo.nih.gov/contentfiles/lvguidelines/PerinatalGL.pdf>, Accessed (1/30/20) [pp. 1-4].

* **Note:** We changed the word women to people to encourage awareness of the need to avoid assumptions based on gender or gender identity. By doing this, these important recommendations can be applied to all individuals able to become pregnant (and their partners).

Preconception Care in Practice

Michelle's journey mirrors the history of HIV testing, perinatal transmission, treatment, and prevention. In 1991, Michelle was the first woman with an HIV positive test result at the health center she went to in Brooklyn. There were no effective treatments for HIV or ways to prevent perinatal transmission. Michelle also found out that her nine-month-old daughter was living with HIV. At this time, HIV test results took up to two weeks to become available. Medical providers and case managers supported Michelle before and after she received the results.

Michelle says her diagnosis was life changing and led to her life's work. She became an active participant in her own health care and learned the evolving science. She became a strong advocate for herself and her community and has been doing this work for 30 years! She shares her stories with both consumers and medical providers:

"My story is an opportunity to put a face, a life, a family in front of a mirror in order to reflect."

Fast forward to 2020: Both Michelle and her daughter are healthy and have been virally suppressed for many years. Thanks to the advances in HIV medication, Michelle is now a devoted grandmother to her four-year-old grandson, who is HIV negative. These advances in HIV medical science and medications allowed Michelle's daughter to access important information, support, and health care throughout her life. The support and advocacy of care providers and her mother helped Michelle's daughter stay healthy and have an HIV negative son. Michelle turned her diagnoses into a call for action to educate providers and consumers.

Michelle offers the following advice to health care providers:

- Think about how you message HIV prevention
- Health care includes sexual health care
- HIV testing should be a routine part of care
- Listen to your patients and give them a voice
- Learn about the medications that prevent and treat HIV

She also has some words of wisdom for others living with HIV:

- Get tested, seek information, and know your status
- We can be ourselves. We can use treatment regimens to stay healthy
- Parenting today, for women living with HIV, is a celebration
- For people who are HIV positive, it is important to understand the medication regimen and how this can allow us to be virally suppressed, undetectable, and unable to transmit the virus
- We are not alone. We need community

Reducing perinatal transmission will require us to address health disparities, particularly in communities of color, in accessing ARV medication, PrEP, and PEP.