

MODERN ART – DECEMBER 2018

ART PREGNANCY & WOMEN'S HEALTH

Everyone with HIV
needs to take HIV treatment
– called antiretroviral
therapy, ART or ARVs



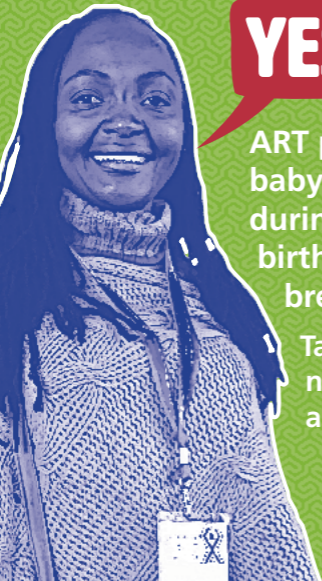
CAN POSITIVE PEOPLE HAVE

HIV NEGATIVE CHILDREN?

YES!

ART protects your baby from HIV during pregnancy, birth and breastfeeding.

Talk to your nurse or doctor about it.



IS TREATMENT THE SAME FOR PREGNANT WOMEN AS FOR OTHER HIV POSITIVE PEOPLE?

World Health Organization (WHO) guidelines now recommend ART for everyone with HIV, whatever their CD4 count or viral load.

This includes pregnant women, adolescent girls and women who wish to get pregnant.

There are a few extra things for women and adolescent girls to consider when starting or taking ART.

NEW ART

COMBINATION

Countries are changing first-line ART.

ART is usually three ARVs in one pill – called a fixed-dose combination.



The new combination of ARVs will be: tenofovir, lamivudine and dolutegravir. This combination is sometimes called TLD.

The older first-line combination was based on a drug called efavirenz.

For more information about TLD, read the “Starting ART” leaflet.



DOLUTEGRAVIR & PREGNANCY

The new first-line combination is based on an ARV called dolutegravir.

There might be a slightly greater risk to an unborn baby whose mother falls pregnant while taking dolutegravir.





One study found a higher rate of neural tube defects than normal in babies whose mothers became pregnant on dolutegravir.

Importantly, this was **BEFORE** the babies were conceived. Women who started dolutegravir after conception showed no problems.

But, this was just from one study and might have happened by chance.

WHAT IS A NEURAL TUBE DEFECT?

The neural tube in a developing baby is what becomes the brain, spinal cord, skull and spine.

The neural tube closes in the first 28 days of pregnancy – that is before most women know they are pregnant.

If it does not fully close for some reason, the baby is said to have a neural tube defect.





Neural tube defects vary, from very minor ones that are easily fixed, to ones that give severe disability and even death.

So, the risk is taken very seriously by departments of health, health workers and patients.

CAN HIV POSITIVE

WOMEN SAFELY TAKE

DOLUTEGRAVIR?

YES*

**But with a few extra
considerations.**

- * All HIV positive women should be told of their options to help them select the appropriate ARV combination with their health worker.**

WHAT IF I AM

ALREADY PREGNANT?

If you have not yet started ART, and it is early in your pregnancy you will be recommended the efavirenz-based combination.

Later in pregnancy (usually after the first trimester) you will be recommended the dolutegravir-based one.

WHAT IF I DO NOT WANT

TO FALL PREGNANT?

If you do not wish to become pregnant, and you are using effective contraception, you will be recommended the dolutegravir-based combination.

Effective contraception means a modern method: condoms, pills, injectable, implant or sterilisation.

WHAT IF I WANT TO GET PREGNANT

AND TAKE DOLUTEGRAVIR?

If you are aware of the risks and benefits, contraception should not be required for you to receive dolutegravir-based ART.

Make sure you receive the counselling and information you need to make this decision.

MAKE SURE YOU ARE COMFORTABLE WITH YOUR DECISION

Planning a pregnancy is very similar whether or not you are HIV positive.

If you were only diagnosed with HIV during pregnancy, you might need lots of support beyond starting ART.





TAKE CARE OF YOURSELF

Your own health
and your own
HIV treatment
are the most
important things
to consider for
ensuring a
healthy baby.



UNDERSTAND

YOUR OPTIONS

Make sure you understand your options – including looking at information like this leaflet.

Make sure your health workers discuss your options with you and respect your decision.



More information

You can find more information
(or ask questions about
treatment) at these websites:

www.tac.org.za
www.i-base.info
www.afrocab.info



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