

Ways to Offer Support

- “I want to support you through this process.”
- “I will work with you to find an antiretroviral regimen that takes into consideration your life-style and priorities.”
- “I want to connect you with a program that understands the unique issues surrounding HIV and pregnancy. The HOPE program (Healthier Options for the Parenting Experience) is dedicated to assisting HIV-affected individuals with family planning.
 - ▶ Collaborative program between specialists at University of Colorado Hospital Infectious Disease Group Practice, and Obstetrics and Gynecology and The Children’s Hospital Immunodeficiency Program (CHIP)

Resources

HIV and Pregnancy Experts

- Children’s Hospital Immunodeficiency Program (CHIP)
 - ▶ Children’s HIV specialist and pre-natal care for HIV+ women
 - ▶ Toll Free: 1-800-624-6553 x8233
 - ▶ Main: 720-777-8983
- University of Colorado HIV/AIDS Clinical Program
 - ▶ Speciality care for HIV-infected Women
 - ▶ Main: 720-848-0191
 - ▶ OB/Gyn Women’s Services
720-848-1060
Jill Davies, MD
- Denver Health ID/AIDS Clinic
 - ▶ Main: 303-602-8710

Helpful Websites

- www.aidsinfo.nih.gov
- http://www.thewellproject.org/Womens_Center/ (select “Pregnancy and HIV”)
- <http://womenchildrenhiv.org>



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Preconception Counseling Guide

*Initiating an informed
conversation with patients about
pregnancy and HIV*

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Opening the Door

Rationale

- Most HIV-infected women are of child-bearing age. With antiretroviral treatment HIV can be managed as a chronic disease. This makes getting pregnant a realistic goal for HIV-infected individuals.

Beginning the conversation

- “Have you and your partner considered becoming pregnant and starting a family?”



Addressing Patient Responses

Not Considering Pregnancy

- ▶ “Should your plans change, please let me know so that we may have a conversation about the important factors to consider when becoming pregnant.”
- ▶ In the meantime, let's discuss continuing or beginning to use contraception that will protect against HIV.

May Consider Pregnancy

- ▶ “If you are unsure because of your HIV and health considerations, it may be helpful to know that:
 1. Pregnancy does not alter the natural course of HIV disease; it will not make your HIV worse.
 2. Vertical transmission of HIV from mother to child can be reduced to <2% if the mother is treated with antiretroviral therapy and her viral load is suppressed.
 3. There are technologies available that can make semen from an HIV+ male safe for getting a woman pregnant.”

Definitely Considering Pregnancy

- ▶ “Pregnancy is a realistic and attainable goal for couples when one or both have HIV, and I want to help inform you of your options to do this in the safest and healthiest way possible.”

Pregnancy Considerations

- “As with any pregnancy, there are things we would want to consider before you became pregnant.”
 - ▶ Avoid using EFV, NVP, d4T, ddI, ddC
- “There are also certain things that I would like to discuss with you concerning you and/or your partner's HIV+ status.”
- Obtain current CD4 and VL counts
 - ▶ HIV+ female:
 - “If we can get your viral load down to less than 1,000, there is <2% chance that you would transmit HIV to your child. Would you consider starting an antiretroviral regimen?”
 - ▶ HIV+ male:
 - “I can connect you with a pregnancy specialist who can employ methods to minimize the exposure of your partner as well as the child.”
 - “Also, reducing your viral load may help make pregnancy safer. Would you consider starting antiretroviral treatment.”
 - ▶ HIV+ male and female:
 - “A specialist can discuss the best way to avoid additional risks for both of you and to protect your child.”