1) Introduction

Women who are HIV positive or have an HIV positive male partner can still consider pregnancy, adoption and other ways to have children. In Australia around 14,800 people are living with HIV infection, including about 2000 women.

In Australia the human immunodeficiency virus (HIV) is most commonly spread through unprotected anal or vaginal intercourse with an infected person.

In some cases, one partner is HIV positive and the other is not, this is sometimes referred to as ‘serodiscordant’. Relationship issues such as sex and having children are complicated for serodiscordant couples, and counselling may be helpful.

2) How HIV is spread

The HIV virus is found in blood, semen (cum), pre-ejaculate (pre-cum), vaginal fluids and breast milk. The virus can pass directly across the lining of the vagina or rectum during sexual intercourse. It can also enter the bloodstream directly if contaminated injecting equipment is used.

HIV can also pass from mother to baby during pregnancy, birth, or breastfeeding.
3) Planning a family

Deciding to have a baby is a big decision for anyone. For a woman who is HIV positive or has a partner with HIV, the decision is more complicated. However a number of HIV positive women in Australia have given birth to healthy infants. If you are in this situation you should try to find out as much as you can before you become pregnant. It may help to talk the issues through with:

- A counsellor who specialises in this area
- Other women who have been in this situation
- The doctor who is treating you.

4) HIV positive women and conception

Many HIV positive women who want to become pregnant to their HIV negative partners choose to use artificial insemination at home, using their partner’s semen, rather than risk unprotected sex.

You can improve the odds of pregnancy by artificially inseminating at the most fertile time of your menstrual cycle. Your doctor can advise you on the various methods of insemination and calculating ovulation. Ovulation detection kits are available from chemists and, they may help to predict ovulation.

Other options such as foster care, permanent care and adoption may be worth exploring. It is important to be aware that the application process involved with permanent care and adoption may be intrusive and offers no guarantee of receiving a child.

5) HIV positive men and conception

If the woman’s partner is HIV positive, she risks infection if they have unprotected sexual intercourse.

The in vitro fertilisation (IVF) technique called intracytoplasmic sperm injection (ICSI) can achieve pregnancy with a low risk of HIV transmission. The partner’s sperm is washed to remove infected fluid and cells. A number of the woman’s eggs (ova) are surgically removed, and a single sperm from her partner injected into each. The fertilised eggs are then implanted into the woman’s prepared uterus.
6) Pregnancy issues for HIV positive women

There is no evidence that pregnancy will change the course of HIV progression for HIV positive women. There is also no evidence to suggest that babies born to HIV positive mothers are more likely to have birth abnormalities.

However, without treatment, up to 35 per cent of babies born to HIV positive women will contract the virus. With medical intervention, the transmission rate from mother to child can be less than two per cent. Ways to reduce the risk of transmission include:

- Antiretroviral drug treatment before conception to reduce the woman’s viral load as much as possible (the lower the viral load, the lower the risk of transmission).
- Antiretroviral drugs treatment throughout pregnancy and during labour and delivery.
- Caesarean section rather than vaginal delivery.
- Avoiding invasive obstetric procedures where possible.
- Antiretroviral drugs given to the newborn for around six weeks after birth.
- Bottle feeding the baby with formula, rather than breastfeeding.

Women should talk to their doctor about their treatment. It is important to note that not all antiretroviral medications should be used during pregnancy.

7) Tell your doctor about your HIV status

It is important to tell your doctor or midwife about your HIV status. This helps your health professional to offer you appropriate treatment, and allows them to take steps to minimise the risk of accidental transmission during any medical procedures.

8) After a pregnancy

All babies born to HIV positive mothers will be regularly tested for HIV, usually until the infant is 18 months old. Testing of the baby may involve a combination of antibody and PCR tests. It is important that babies exposed to antiretroviral agents continue to be monitored.

9) Managing with illness as a parent

At some time in the future, the HIV negative partner may have to manage with the chronic illness of their spouse while at the same time raising children. Some families may need extra support.
10) Where to get help

- Your specialist HIV doctor
- HIV Education & Resource Centre at The Alfred Tel. (03) 9276 6993
- Royal Women’s Hospital, Infectious Diseases Tel. (03) 9344 2000
- Royal Women’s Hospital - Chronic Viral Illness Program (for positive males) Tel. (03) 9344 2057
- The Victorian HIV Service Tel. (03) 9276 6076
- Positive Women Victoria Tel. (03) 9276 6918
- Straight Arrows Tel. (03) 9276 3792
- AIDSLINE Tel. (03) 9347 6099 or 1800 133 392
- Victorian AIDS Council Tel. (03) 9865 6700
- Positive Living Centre Tel. (03) 9863 0444
- People Living with HIV/AIDS (PLWHA) Tel. (03) 9865 6772
- Melbourne Sexual Health Centre Tel. (03) 9347 0244 or 1800 032 7000
- Family Planning Victoria Tel. (03) 9257 0100
- Sexually Transmissible Infections and Blood-Borne Virus Program, Department of Human Services Victoria Tel. (03) 9616 7777.
- Victorian Department of Human Services (For information on foster care, permanent care and adoption) Tel. (03) 9533 6324.

11) Things to remember

- HIV can pass from mother to baby during pregnancy or birth, or via breast milk
- With medical intervention, the HIV transmission rate from infected mother to unborn child can be less than two per cent
- If the woman’s partner is HIV positive, IVF may be an option

12) Further information

Further information URLs
The Body: an AIDS and HIV Information Resource
http://www.thebody.com/treat/pregnancy.html

Australian Federation of Aids Organisations
www.afao.org.au

AIDSinfo: Offering information on HIV/AIDS treatment, prevention & research
http://aidsinfo.nih.gov/other/factsheet.aspx
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