

Pregnancy

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Many women with HIV both in Australia and worldwide are choosing to become mothers.

You are able to reduce the chances of your baby acquiring HIV to below 2% by taking [ARV](#) [1]A medication or other substance which is active against retroviruses such as HIV., considering an elective caesarean delivery, and by not breastfeeding. Without these interventions, the rate of HIV infection from mother to infant is between 24-30%.

HIV can be transmitted from mother to infant in the womb, during delivery or after delivery through breast milk. Without any treatment or other intervention, about one in four women with HIV will transmit HIV to her infant.

There are several key factors affecting the likelihood of transmission:

Your health (your [viral load](#) [2]A measurement of the quantity of HIV RNA in the blood. Viral load blood test results are expressed as the number of copies (of HIV) per milliliter of blood plasma. and your immune status), the way your baby is delivered, and the way you feed your baby. Generally speaking, the lower your viral load the less likely you are to transmit HIV to your baby. Caesarean delivery performed before you go into labour also decreases the likelihood of transmission if you have a detectable viral load.

Planned pregnancy

A planned pregnancy gives you the greatest range of options and can minimise stress, leaving you time to discuss issues with your doctor, switch drugs if necessary or to take a treatment break prior to conceiving.

It also gives you a chance to sort out your maternity leave entitlements and financial arrangements if you're in the paid workforce. But life doesn't always go to plan, and you may find yourself accidentally pregnant.

Unplanned pregnancy

An unplanned pregnancy can range from being an unpleasant shock or a welcome surprise, with many other emotions, some of them conflicting, in between. You have every right to consider all your options.

You may want to have a baby. You may definitely not want a baby. You may want a baby some time in the future, but the timing might not be right – your health, your work situation or your relationship status might make having a baby just too hard right now.

It is your right to decide whether to continue with the pregnancy or to have a termination. You may wish to seek expert advice about HIV and pregnancy before you decide, or your decision may have nothing to do with your HIV status. Pregnancy counselling is available in all states and territories through abortion clinics, women's hospitals and GPs.

Most terminations are performed at a clinic or hospital between seven and twelve weeks after the first day of your last period. Non-surgical termination is now available in a few centres in Australia using a combination of two medications. This can be performed up to nine weeks after the first day of your last period. The abortion pill RU486 (mifepristone) is not yet widely available in Australia, though may be in the future.

If you decide to continue with the pregnancy, talk to you doctor as soon as possible about how to reduce the risk of transmitting HIV to your baby.

- [Do I need to take antiretrovirals?](#) [3]
- [Pregnancy check list](#) [4]
- [Your ARV options](#) [5]
- [Genetic testing of foetus](#) [6]

[Do I need to have a caesarean delivery?](#) [7]

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[What is 'best practice' if I have hepatitis C as well as HIV?](#) [9]

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- [ANET resources](#)
- [Positive women](#)
- [pregnancy and childbirth](#)

Links:

[1] <http://www.napwa.org.au/glossary/term/122>

[2] <http://www.napwa.org.au/glossary/term/416>

[3] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/do-i-need-to-take-antiretrovirals>

[4] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/pregnancy-check-list>

[5] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/your-arv-options>

[6] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/genetic-testing-of-foetus>

[7] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/do-i-need-to-have-a-caesarean-delivery>

[8] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/other-issues-in-delivery>

[9]

<http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/what-is-best-practice-if-i-have-hepatitis-c-as-well-as-hiv>

[10] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/feeding-your-new-baby>

[11] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/testing-your-baby-for-hiv>

[12] <http://www.napwa.org.au/resource/treat-yourself-right/pregnancy/looking-after-yourself>

[13] <http://www.napwa.org.au/resource/treat-yourself-right/contraception-and-arv/making-your-choice>

[14] <http://www.napwa.org.au/resource/treat-yourself-right>