



The American College of
Obstetricians and Gynecologists

FAQ

FREQUENTLY ASKED QUESTIONS

FAQ113

PREGNANCY

HIV and Pregnancy

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What is human immunodeficiency virus (HIV)?

Human immunodeficiency virus (HIV) is a virus that attacks cells of the **immune system** called CD4 cells. CD4 cells are the immune system's main infection-fighting cells. Eventually, a person infected with HIV develops **acquired immunodeficiency syndrome (AIDS)**. A person who has been infected with HIV does not get sick with AIDS right away. Over time, HIV destroys CD4 cells and weakens the immune system. It may be months or years before HIV becomes AIDS. As the immune system becomes weaker, people infected with HIV may have weight loss, fatigue, and fever.

What is acquired immunodeficiency syndrome (AIDS)?

AIDS occurs when a person's CD4 count falls below a certain level or if the person becomes sick due to a weakened immune system. A weak immune system puts the body at risk for certain infections and types of cancer that it would normally fight off.

There is no vaccine to prevent HIV infection, and there is no cure for AIDS. But there are drugs that can delay the onset of AIDS and help protect the immune system.

How is HIV infection transmitted?

HIV is passed from one person to another in body fluids. Listed are body fluids that can spread HIV:

- Blood
- Semen
- Vaginal fluids
- Breast milk

An infected person's body fluids must enter another person's body to spread HIV. This can occur during sex or when sharing needles to inject (shoot) drugs. If you are pregnant and have HIV, you can pass it to your baby during pregnancy, labor, delivery, or breastfeeding. During pregnancy, there is a risk that HIV can pass through the **placenta** and infect the baby. During labor and delivery, the baby may be exposed to the virus in the mother's blood and other fluids. Breastfeeding also can transmit the virus because breast milk contains HIV.

When should pregnant women be tested for HIV?

All pregnant women should be tested for HIV as early as possible in their pregnancies. HIV tests do not tell you whether you have AIDS or if you will get sick. They only tell you if you are carrying the virus. There are several types of HIV tests.

The most common type tests for the presence of HIV **antibodies** in your blood. If antibodies are found in your blood, your test result is “positive.” Another test is used to confirm the result. If no antibodies are found, your test result is “negative.”

It takes time for the body to make enough antibodies to be detected by the test. For this reason, if you are at increased risk of infection, you should have another HIV test in the third trimester.

Women who have not been tested for HIV during pregnancy are offered a rapid HIV test when they go into labor. Results of a rapid test are available in a few hours.

Can HIV be treated during pregnancy?

If an HIV-positive woman has been taking medications to treat HIV, she should continue the treatment during pregnancy. If she has not been taking medication, she usually should wait until after the first trimester to start. The drugs help to keep the viral load low and make it less likely that the baby will get HIV.

How is delivery of a baby affected by HIV infection?

During labor and delivery, the baby is exposed to body fluids that can spread the virus. When a woman goes into labor, the **amniotic sac** breaks (her water breaks). Once this occurs, the risk of HIV infection increases. Because of these issues, women with high viral loads are offered a **cesarean delivery**. A cesarean delivery decreases the risk of passing HIV to the baby during labor and delivery. When a woman takes medications to treat HIV during pregnancy and has a scheduled cesarean delivery, the risk of her baby getting HIV is decreased to about 2%.

What special care does a newborn of a woman infected with HIV need?

After the baby is born, he or she will be tested for HIV several times. Many babies who are not infected test positive at first because antibodies from the mother are present in the baby’s blood. By 6 months of age, these antibodies usually disappear.

Babies born to HIV-positive mothers will be treated with medication after birth to further decrease his or her chance of becoming infected. The first dose is given within 12 hours after delivery. Treatment continues for 6 weeks.

How should women infected with HIV feed their newborn babies?

Women who are HIV positive should not breastfeed. Women who are HIV positive can feed their babies infant formula with a bottle. Infant formula is a safe way of providing the baby with all of the nutrients he or she needs to grow and thrive.

Glossary

Acquired Immunodeficiency Syndrome (AIDS): A group of signs and symptoms, usually of severe infections, occurring in a person whose immune system has been damaged by infection with human immunodeficiency virus (HIV).

Amniotic Sac: Fluid-filled sac in the mother’s uterus in which the fetus develops.

Antibodies: Proteins in the blood produced in reaction to foreign substances.

Cesarean Delivery: Delivery of a baby through incisions made in the mother’s abdomen and uterus.

Immune System: The body’s natural defense system against foreign substances and invading organisms, such as bacteria that cause disease.

Placenta: Tissue that provides nourishment to and takes waste away from the fetus.

If you have further questions, contact your obstetrician–gynecologist.

FAQ113: Designed as an aid to patients, this document sets forth current information and opinions related to women’s health. The information does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to institution or type of practice, may be appropriate.

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