MODERN ART FOR UGANDA



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

NOVEMBER 2020







CAN POSITIVE PEOPLE HAVE HIV NEGATIVE CHILDREN?



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

Ugandan guidelines now recommend ART for everyone with HIV, whatever their CD4 count or viral load.



ARV COMBINATION FOR UGANDA

The first-line combination of ARVs in Uganda is: tenofovir, lamivudine and dolutegravir. This combination is sometimes called TLD.

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

DOLUTEGRAVIR & PREGNANCY

There is a very slightly higher rate of neural tube defects than normal in babies whose mothers become pregnant on dolutegravir.

But starting dolutegravir after six weeks or more of pregnancy does not have this risk.

WHAT IS A NEURAL

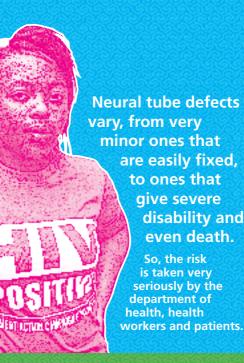
TUBE DEFECT?

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.



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 are already pregnant and taking dolutegravir-based ART, you will be recommended to continue on it.

If you are less than six week pregnant, you will be recommended the efavirenz-based combination.

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 dolutegravirbased combination.

Effective contraception means a modern method: condoms, oral contraceptives, injectable, implant and IUCD.

WHAT IF I <u>DO</u> WANT TO BECOME PREGNANT?

If you plan to become pregnant you should be given all the necessary information on dolutegravirand efavirenz-based combinations.

This includes the risk of neural tube defects. Be sure you have been given all the information you need. Your health worker must note that you have made an informed choice. This information must be included in your chart/file.

COMFORTABLE WITH YOUR DECISION

This is very important!

It is also important to know that if you decide to have a baby and you are taking dolutegravir and concerned about neural tube defects, you can switch to efavirenz.

Or if you chose to take efavirenz around conception you can change to dolutegravir later.

You can switch if your viral load is undetectable on ART.



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

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.





Find out more about treatment and the free app at: www.modernartforsouthafrica.co.za

f @modernart4sa



















