

MODERN ART FOR TANZANIA

ART PREGNANCY & WOMEN'S HEALTH

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

APRIL 2021



CAN POSITIVE PEOPLE HAVE

HIV NEGATIVE CHILDREN?

YES!

ART protects your baby from HIV during pregnancy, birth and breastfeeding.

Talk to your nurse or doctor about it.



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

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





**This includes
pregnant women
and women
who wish to
get pregnant.**

**There a few extra
things for women
to consider
when starting
or taking ART.**

**We explain these
in this booklet.**



ARV COMBINATION FOR TANZANIA

First-line ART is usually three ARVs in one pill – called a fixed-dose combination.

First-line ART in Tanzania 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 while taking 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.





Neural tube defects vary, from very minor ones that are easily fixed, to ones that cause severe disability and even death.

So, the risk is taken very seriously by the department of health, health workers and patients.

That said, bigger studies have recently found that the dolutegravir-related risk of neural tube defect is much lower than initially thought.

CAN HIV POSITIVE

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.

WHAT IF I

DO NOT WANT TO

FALL PREGNANT?

If you do not wish to become pregnant, you will be recommended the dolutegravir-based combination.

It is important to use effective contraception if you do not want to get pregnant – which means a modern method like condoms, oral contraceptives, injectable, implant or IUCD.

WHAT IF I DO WANT TO BECOME PREGNANT?

If you plan to become pregnant you should be given all the necessary information on dolutegravir- and 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.

MAKE SURE YOU ARE 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.

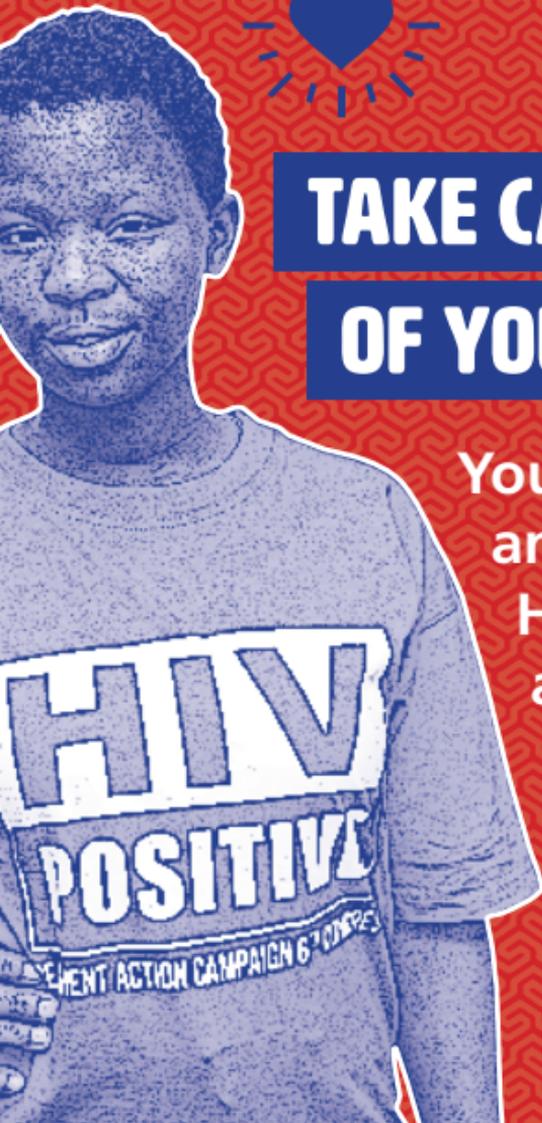




TAKE CARE

OF YOURSELF

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



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:
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