MODERN ART FOR ZIMBABWE

PREGNANCY & WOMEN'S HEALTH **Everyone with HIV** needs to take HIV treatment called antiretroviral therapy, ART or ARVs

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CAN POSITIVE PEOPLE HAVE HIV NEGATIVE CHILDREN?

YES!

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

Women should visit their health provider as soon as they suspect that they are pregnant. Getting the right care during pregnancy gives you the best possible chance of having a healthy baby.

> If you test positive when you are already pregnant you should start ART as soon as possible to reduce risk of transmitting HIV to the baby.

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

ART for pregnant women is mostly the same as for other HIV positive people.

Zimbabwean 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.

We describe these differences in this booklet.

NEW ART FOR ZIMBABWE

We are changing our first-line ART.

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

TDF 🕂 3TC 🕂 DTG 💳 TLD

The new combination of ARVs is: tenofovir, lamivudine and dolutegravir.

The older (alternative) firstline combination contains tenofovir, lamivudine and efavirenz.

For more information about TLD, read the "Starting ART" leaflet.



CAN HIV POSITIVE WOMEN SAFELY TAKE DOLUTEGRAVIR?

BUT with a few extra considerations.

* All HIV positive women should be given all the information from their health care providers to help them make an informed decision.

WHAT ARE THE RISKS OF DOLUTEGRAVIR IN PREGNANCY?

There might be a slightly greater risk of neural tube* defects to an unborn baby whose mother falls pregnant while taking dolutegravir. 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.

Since the original concern with dolutegravir and neural tube defects was reported in 2018, the risk has reduced. So many ART guidelines, including the World Health Organisation (WHO) and Zimbabwe, recommend dolutegravir in pregnancy.

WHAT ARE THE BENEFITS OF DOLUTEGRAVIR IN PREGNANCY?

These include fast viral suppression and health for the mothers.

It also lowers risk of transmission to the baby or your sexual partner(s).

WHAT IF I DO <u>NOT</u> WANT TO FALL PREGNANT?

As is always the practice, you are advised to use effective contraception if you are not planning to conceive.

> Please consult your health care provider on the range of effective contraceptives available to you.

IS THERE AN ALTERNATIVE TO DOLUTEGRAVIR?

Zimbabwean and WHO guidelines recommend ART with Efavirenz 400mg (plus Tenofovir and Lamivudine) as an alternative to dolutegravir.

This is safe for use in pregnant women.

MAKE SURE YOU ARE COMFORTABLE WITH YOUR DECISION

If you were only diagnosed with HIV during pregnancy, you might need lots of support beyond starting ART.

TAKE CARE OF YOURSELF

NIG.

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.

More information

You can find more information (or ask questions about treatment) from your local clinic, hospital or at these websites:

www.i-base.info & www.pzat.org











