

## Ways to Offer Support

- “I want to support you through this process.”
- “I will work with you to find an antiretroviral regimen that takes into consideration your lifestyle and priorities.”
- “I want to connect you with a program that understands the unique issues surrounding HIV and pregnancy. The HOPE program (Healthier Options for the Parenting Experience) is dedicated to assisting HIV-affected individuals with family planning.
  - ▶ Collaborative program between specialists at University of Colorado Hospital Infectious Disease Group Practice and The Children’s Hospital Immunodeficiency Program (CHIP)

## Resources

### *HIV and Pregnancy Experts*

- Children’s Hospital Immunodeficiency Program (CHIP)
  - ▶ Children’s HIV specialist and pre-natal care for HIV+ women
  - ▶ Toll Free: 1-800-624-6553
  - ▶ Main: 720-777-8233
- University of Colorado Hospital Infectious Disease Group Practice
  - ▶ Speciality care for HIV-infected women
  - ▶ Main: 720-848-0191
- Denver Health ID/AIDS Clinic
  - ▶ Main: 303-602-8710

### *Helpful Websites*

- [www.aidsinfo.nih.gov](http://www.aidsinfo.nih.gov)
- [www.thewellproject.org](http://www.thewellproject.org)
- [www.womenchildrenhiv.org](http://www.womenchildrenhiv.org)



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# Preconception Counseling Guide

*Initiating an informed  
conversation with patients about  
pregnancy and HIV*

## Opening the Door

### *Rationale*

- Most HIV-infected women are of child-bearing age. With antiretroviral treatment HIV can be managed as a chronic disease. This makes getting pregnant a realistic goal for HIV-infected individuals.

### *Beginning the Conversation*

- “Have you and your partner considered becoming pregnant and starting a family?”



## Addressing Patient Responses

### *Not Considering Pregnancy*

- ▶ “Should your plans change, please let me know so that we may have a conversation about the important factors to consider when becoming pregnant.”
- ▶ “In the meantime, let’s discuss continuing or beginning to use contraception that will protect against HIV.”

### *May Consider Pregnancy*

- ▶ “If you are unsure because of your HIV and health considerations, it may be helpful to know that:
  1. Pregnancy does not alter the natural course of HIV disease; it will not make your HIV worse.
  2. Vertical transmission of HIV from mother to child can be reduced to <2% if the mother is treated with antiretroviral therapy and her viral load is suppressed.
  3. There are technologies available that can make semen from an HIV+ male safe for getting a woman pregnant.”

### *Definitely Considering Pregnancy*

- ▶ “Pregnancy is a realistic and attainable goal for couples when one or both have HIV, and I want to help inform you of your options to do this in the safest and healthiest way possible.”

## Pregnancy Considerations

- “As with any pregnancy, there are things we would want to consider before you became pregnant.”
  - ▶ Avoid using EFV, NVP, d4T, ddI, ddC
- “There are also certain things that I would like to discuss with you concerning you and/or your partner’s HIV+ status.”
- Obtain current CD4 and VL counts
  - ▶ HIV+ female:
    - “If we can get your viral load down to less than 1,000, there is <2% chance that you would transmit HIV to your child. Would you consider starting an antiretroviral regimen?”
  - ▶ HIV+ male:
    - “I can connect you with a pregnancy specialist who can employ methods to minimize the exposure of your partner as well as the child.”
    - “Also, reducing your viral load may help make pregnancy safer. Would you consider starting antiretroviral treatment?”
  - ▶ HIV+ male and female:
    - “A specialist can discuss the best way to avoid additional risks for both of you and to protect your child.”