Getting Pregnant and HIV [1]

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Para leer este hoja informativa en español, presione aquí [2].
Interested in Having Children?

Are you living with HIV (HIV+) and interested in having children? Are you HIV-negative and interested in having children with a partner who is living with HIV? Then know that you are not alone. The majority of women living with HIV are of child-bearing age. Advances in HIV treatment have dramatically lowered the chances that a mother will pass HIV on to her baby (known as the rate of perinatal transmission, mother-to-child transmission, or vertical transmission). The chances of passing HIV from mother to baby can be as low as one in 100 when certain steps are taken (see below for more detail).

These same advances have made it much more possible for people living with HIV to live longer, healthier lives. They have also made it possible to reduce the chances of passing HIV to a partner when trying to have a child. The different choices or options for getting pregnant while reducing the chances of transmitting HIV are known as options for safer conception.

Given the number of effective options for safer conception, it is no surprise that women and men living with HIV are interested in having children. A 2009 study showed that almost seven in ten women living with HIV (ages 18 to 52) and based in Toronto, Canada wanted to give birth. The Women Living Positive Survey found that the same proportion of women living with HIV in the US considered family planning an important part of their HIV care.

Some of the major safer conception options that have become available recently include treatment as prevention (TasP) and pre-exposure prophylaxis (PrEP). In 2011, an important study called HPTN 052 showed that HIV treatment could greatly reduce the chances of an adult living with HIV spreading HIV to another adult through sexual contact. Further studies in this area have confirmed that, if your partner living with HIV has an undetectable viral load, it eliminates your chances of acquiring HIV from him or her during sex. In simple terms: Undetectable Equals Untransmittable. This is treatment acting as prevention. PrEP is for HIV-negative people and involves taking HIV drugs before being exposed to HIV to prevent infection.

Options for Safer Conception

There are several different options for reducing the chances of passing on HIV while trying to get pregnant. Safer conception options are a bit different depending on whether the members of the couple are seroconcordant (both people are living with HIV) or serodifferent (also known as serodiscordant, "mixed status couples" or "magnetic couples"). In serodifferent couples, one person is living with HIV while the other is not. Options for safer conception within serodifferent couples are based on which member of the couple is living with HIV – the man or the woman.

Please click the links below to see safer conception options that best suit your situation. The
options are listed so that you can weigh the risks and benefits of each option, understand what might be the best for you, and prepare for discussions with your health care provider.

- HIV+ woman and HIV-negative man (serodiscordant or serodifferent) [8]
- HIV+ man and HIV-negative woman (serodiscordant or serodifferent) [9]
- HIV+ single woman or HIV+ woman in same-sex relationship [10]
- HIV+ single man or HIV+ man in same-sex relationship [11]
- HIV+ woman and HIV+ man (seroconcordant) [12]
- View all the above options on one page [13]

It is important to note that the risk of a baby having HIV is based only on the HIV status of the mother. If you are a woman living with HIV and interested in getting pregnant, please also see our fact sheet Pregnancy and HIV [14], which provides important information about what to do before you become pregnant, care during pregnancy, labor and delivery, and preventing HIV transmission [3] to your baby.

Finding a Provider and Building a Support Network

Despite the number of people living with HIV who want to get pregnant, there is sometimes limited access to information, options, and therapies. Many health care providers are not discussing family planning with their patients with HIV. Some do not have adequate information to share, while others openly discourage people living with HIV from having children. In the US, some laws prevent access to fertility treatments for those living with HIV, and many insurance plans do not cover these procedures. Despite the challenges you may face when wanting to get pregnant, it is possible for people living with HIV to have children.

When choosing to have a child as a person living with HIV, it is important to be an advocate for yourself and your future child. Finding the right health care provider who is supportive of your plans to get pregnant is a big first step! A friendly health care provider can talk with you about many issues around pregnancy and having children: which conception option is right for you, appropriate HIV treatments for you and/or your partner, whether to disclose your HIV status to others (including other providers, your child's pediatrician, additional friends and family), and how to handle the stigma and fear around living with HIV and being pregnant.

When The Well Project's Founder, Dawn Averitt, asked providers about getting pregnant more than 15 years ago, she faced some very negative reactions before she found a wonderful provider who supported her desire to have children. While her original experience in getting pregnant and having two healthy HIV-negative daughters is discussed in the three articles listed below, Dawn has also posted a blog about Getting Pregnant while Living with HIV in 2015 [17]. Here's part of what she said:
My own children are now 11 and nearly 13, and in most urban settings, no one raises an eyebrow when they say "my mom has HIV." I wish I could say this was universal, but it isn’t. Many health care providers are not familiar enough with the information about HIV to know that HIV-positive women can choose to become pregnant, and that, with access to good prenatal care and HIV treatment, their risk of transmitting HIV to their infants is less than two percent. This is why it is so important to find a health care provider who is knowledgeable about HIV and pregnancy – they are definitely out there! Dawn Averitt, Getting Pregnant while Living with HIV in 2015 [17]

For more information about Dawn's experience in trying to get pregnant, please explore the links below:

- Breaking the Taboos: Pregnancy Planning and Fertility Issues for PLWHAs in the US [19] (transcript from presentation at AIDS 2010 in Vienna, Austria, courtesy of TheBody.com)

The Well Project has started a list of friendly family planning providers [21] in the US who are informed about pregnancy planning for people living with HIV. Even though the providers listed might not be in your area or town, it might be worth a call or email to answer any questions you might have or for possible referrals. Pregnant women living with HIV, their exposed infants, and HIV-affected couples seeking safer conception options can also contact Karishma Oza, the program coordinator at HIVE [22] (karishma.oza@ucsf.edu [23]) for referrals to local providers.

Given the existing stigma [16] against people living with HIV having children, you may encounter judgmental responses from others. Therefore, it is important that you build a strong support network [24] of loving family, friends, and providers. Your support network can help you make good decisions and get through the negative, sometimes disheartening moments. If you do not have a good number of friends and family who support you, you may consider starting your own support group; for more information, see our fact sheet on Starting a Support Group [25].

Ultimately, you get to choose when and whether to have children. You deserve to be treated with respect and given access to the information necessary to make an informed decision and plan for your future.

Tags:

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- HIV+ pregnant [28]
- HIV+ want a baby [29]
- serodiscordant pregnant [30]
- seroconcordant pregnant [31]
- home insemination HIV [32]
- assisted reproduction HIV [33]
- Intra-vaginal insemination HIV [34]
- IVI HIV [35]
- Intra-uterine insemination HIV [36]
- IUI HIV [37]
- In-vitro fertilization HIV [38]
- IVF HIV [39]
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- HIV+ woman pregnant [46]
- HIV fertility [47]
- HIV+ have children [48]
- magnetic couples [49]
- PMTCT [50]
- serodifferent pregnant [51]
- mixed status [52]
- PrEP pregnant [53]
- Pre-exposure prophylaxis pregnant [54]

**Additional Resources**

Select the links below for additional material related to getting pregnant and HIV.

HIVE: A Hub of Positive Reproductive and Sexual Health [22]
Safer Conception Toolkit for HIV-affected Individuals and Couples and Healthcare Providers (HIVE) [55]
Supporting All People With HIV Around Fertility, Conception and Family Building (TheBodyPRO.com) [56]
Video: Is There Any Way the Baby Will Catch the Virus? (HIVE) [57]
Video: Every Pregnant Woman Should Know Her HIV Status (HIVE) [58]
You Can Have a Healthy Pregnancy if You Are HIV-Positive (CATIE) [59]
HIV-Friendly Reproductive Services and Providers [21]
Becoming a Positive Parent: Reproductive Options for People with HIV (BETA) [60]
Positively Negative: Love, Pregnancy, and Science’s Surprising Victory over HIV [61]
Effects of Antiretroviral Therapy to Prevent HIV Transmission to Women in Couples [62]
Attempting Conception When the Man... (CDC) [63]
PrEP Appears Safe for Use in Conception, but May Not Be Necessary if Partner is Taking Treatment (AIDSmap) [64]
Conception (AIDSmap) [65]
Multiple Strategies for Safer Conception Need to Incorporate Couples’ Preferences (AIDSmap) [66]
Can a Couple in Which One Person is HIV Positive Conceive a Baby without the Uninfected Partner Becoming Infected? (USVA) [67]
Assisted Reproductive Technology (ART) (CDC) [68]
PrEP Watch [69]
Fertility Awareness (Planned Parenthood) [70]
How to Track and Chart Your Basal Body Temperature to Get Pregnant (VeryWell) [71]
Blank Basal Body Temperature Chart (PDF) (BabyCenter) [72]
The HIV and Preconception Care Toolkit (ACOG) [73]
As Mixed-Status HIV Couples Weigh Risks, More Choose to Conceive the Old-Fashioned Way (The Washington Post)