

Pregnancy Planning Information for HIV+ Women and Their Partners



As an HIV positive woman, you may be wondering if you should have children. Improved treatment and care of HIV has reduced vertical transmission (mother-to-child) to less than 1 percent. As a result, many women with HIV are starting to think about having children. If you are one of them, here is some information that could help you.

Before trying to get pregnant

There are many things you can do before you get pregnant to have a healthy pregnancy and healthy baby. These include:

- Taking folic acid (found in vitamin supplements)—1 mg a day at least two to three months before you become pregnant and during the first trimester. This will reduce the risk that your baby will have neural tube defects. You can visit www.sogc.org for more information about Canadian folic acid guidelines.
- Giving up smoking, drinking alcohol and using recreational drugs. There are resources available to support you while you quit.
- Getting tested for rubella (German measles) and getting immunized if you haven't already done so.
- You and your partner should be tested for sexually transmitted infections (STIs), even if you had children before and/or if you have no symptoms. Many STIs have no noticeable symptoms, but they can still seriously affect your fertility and be passed on to your partner and to the fetus.

HIV drugs and other medications during pregnancy

You will need to take anti-HIV drugs during your pregnancy to reduce the risk of HIV passing from you to your baby. Your baby will also need to take these medications for the first six weeks of life. You should talk to your HIV specialist **before** becoming pregnant to make sure that you are in good health and that you are not taking medications that are unsafe during pregnancy. Some anti-HIV medications, such as efavirenz (Sustiva™ and in Atripla™) are not safe during pregnancy and should not be used.

If you or your male partner is also taking drugs for hepatitis C, such as ribavirin and pegylated interferon, you need to know that these drugs may harm the fetus. You should stop taking them for at least six months before trying to become pregnant. This is true for both you and your male partner.



What are my options for getting pregnant safely?

There are several options for getting pregnant. It is important that you and your partner fully understand the risks and benefits of each option before you choose one. Factors that will help you decide which option to choose include the HIV status of your partner, viral load and current treatment for both you and your partner, and whether or not you have any fertility issues.

Home Insemination

Home insemination is a cheap and simple method of becoming pregnant. Home insemination involves placing sperm in the vagina at the time of ovulation—the time when you are most likely to become pregnant. You ovulate for only one day per menstrual cycle and it happens approximately 14 days before the first day of your next period. This is also 14 days after the first day of your period, if your periods are regular (28 days).

Home insemination is typically done on two days: the day before and the day of ovulation. Another option is to repeat this entire process every other day between day 12 and 17 of your menstrual cycle. (Your menstrual cycle begins on the first day of your period).

How to do a home insemination: Your male partner or sperm donor ejaculates into a clean cup. Then, using a clean turkey baster (you can buy it from a dollar store) or large oral syringe (you can buy it from a pharmacy) you suck up the semen and insert the baster or syringe deep into your vagina and deposit the semen. Your healthcare provider can give you more information on this procedure.

What are ways to tell that I am ovulating?

To track your menstrual cycle, mark down on a calendar the first day of your menstrual period. After you have done this for a few months, bring the calendar to your doctor, who can help you figure out when you will likely ovulate or visit www.womenshealthmatters.ca/centres/sex/birthcontrol/ovulation.html.

Watch for changes in the appearance and amount of your vaginal fluids. When you ovulate, the amount of discharge will increase and it will be thinner, clearer and more wet and slippery. During ovulation the discharge is commonly described as being like egg whites and lasts for two to three days. Do the insemination every other day while the discharge is watery and stop when it thickens again.

You may feel pain on one side of your lower belly or pelvis.

You can use ovulation sticks/strips to figure out when you're ovulating. You can get them at your local pharmacy. Instructions are provided at the back of the package, but generally you should pee on a stick every day in the morning beginning at day 11 of your menstrual cycle. If there are two lines on the stick, you will ovulate the next day. You should do the insemination the day that the stick has two lines (the day before you ovulate) and the next day (the day of ovulation).



Assisted Reproduction

Assisted reproduction means that sperm fertilizes an egg with the help of a doctor. It is used when the potential parents require assistance to prevent HIV transmission between partners or donor sperm is used or if the parents have difficulty getting pregnant at home due to fertility issues.

Assisted reproduction is usually done in a fertility clinic. There are four main ways that it can be done:

Intra-vaginal insemination

This procedure is similar to home insemination and is rarely done in a clinic. Semen or washed sperm is inserted into the vagina close to the cervix and allowed to swim up into the uterus (womb) to fertilize the egg.

Intra-uterine insemination (IUI)

The egg is fertilized inside the body by delivering sperm into the uterus. The sperm is drawn up into a catheter (a tube small enough to be inserted into the body) and delivered directly into the uterus through the cervix.

In-vitro fertilization (IVF)

The egg is fertilized outside of the body. Fertility drugs are taken to stimulate egg production. When the egg is ready, it is removed from the ovary and put together with the sperm in a special fluid where it will be fertilized. Once the egg and sperm form an embryo (the first few cells of the baby), it is put back into the woman's body.

Intra-cytoplasmic sperm insemination (ICSI)

ICSI is a type of IVF. The egg is fertilized outside of the body by injecting a sperm directly into the egg using a very thin needle. When the embryo forms, it is put back into the woman's body. This procedure is usually recommended for men with a low sperm count or whose sperms are an abnormal shape or do not swim well. ICSI may be safer than IVF in cases when there is an HIV positive male and HIV negative female, because it reduces the exposure to sperm.

Having unprotected sex

Some people decide to have unprotected sex, even though there is a risk of passing HIV to the HIV negative partner. You may have heard that it is safer to have unprotected sex with your partner if you are taking HIV drugs and your viral load is undetectable and you have no other STIs. While experts generally agree that the risk is lower, they also say that unprotected sex is not completely safe and is not recommended. The amount of virus in your blood is not always the same as the amount of virus in your genital fluids, so even if your viral load is undetectable there is a possibility that your HIV negative partner could become infected with HIV if you have unprotected sex.

The risk of passing on HIV is reduced when unprotected sex is limited to when you are ovulating (when your ovary releases an egg), however some risk still exists. This is the time when you are most likely to become pregnant. Timing your ovulation is described above. You can also ask your doctor or nurse to help you time your ovulation.

If you intend to have unprotected sex to get pregnant, you must tell your male partner that you are HIV positive. Exposing someone to HIV without telling him that you are HIV positive can result in serious legal action being taken against you.

If your partner is HIV positive and you have unprotected sex, there is a risk of super-infection—either of you could become infected with a different strain of HIV. People who are super-infected may become resistant to medications they have never taken; this means that those medications would not work for them and, as a result, their HIV infection may be more difficult to manage. The risk of super-infection is reduced if both partners have an undetectable viral load and if they have unprotected sex only during ovulation.

HIV can be found in your male partner's semen. With sperm washing, his sperm can be removed from the semen and cleaned of HIV. Washing of your male partner's semen reduces the risk of super-infection. The washed sperm can then be used to fertilize your egg using IUI. Sperm washing and assisted insemination must be done in a fertility clinic.

Donor Sperm

You can choose to use donor sperm from a sperm bank or sperm from someone you know to become pregnant. Sperm donors are anonymous, and they are tested for their fertility, health, diseases, blood type and more to make sure that their sperm is safe and able to result in pregnancy. You may also choose a sperm donor based on ethnic background, interests, appearance and other factors. For more information, speak to your obstetrician or contact a fertility clinic.

Surrogacy

You can choose to have another woman, known as a "surrogate mother," carry and give birth to your child. After the egg is fertilized through IVF, it is transferred into the surrogate mother's womb, where it develops to term. Special legal and medical considerations are involved in a surrogate birth. For more information, contact a fertility clinic or visit the Assisted Human Reproduction Canada (AHRC) website at www.ahrc-pac.gc.ca.

Egg Donation

You can choose to use eggs donated by other women to create a baby. The donors are screened for disease and infertility. You can contact a fertility clinic near you to see if it offers an egg donation program or visit the AHRC website at www.ahrc-pac.gc.ca.

How do I find a fertility clinic and how much will it cost?

Only some fertility clinics in Canada take on HIV positive clients and sometimes only for certain procedures. To find a fertility clinic you can consult the list of IVF clinics provided by the Canadian Fertility and Andrology Society at www.cfes.ca. You will need to contact the fertility clinic directly and ask if they take on HIV positive clients.

The cost varies depending on which option you choose and on how many months (cycles) it takes to get pregnant. In Canada, sperm washing with IUI is the least expensive and most common procedure (approximately \$500 to \$1,000 per cycle). IVF and ICSI each cost more than \$10,000 per cycle and are usually only used if the man or woman has fertility issues. Most fertility clinic procedures are not paid for by provincial, territorial or private insurance.

Access to fertility services varies depending on where you live in Canada. Not all communities have fertility clinics and you may need to travel to a clinic (and pay for travel and accommodation).

What about adoption?

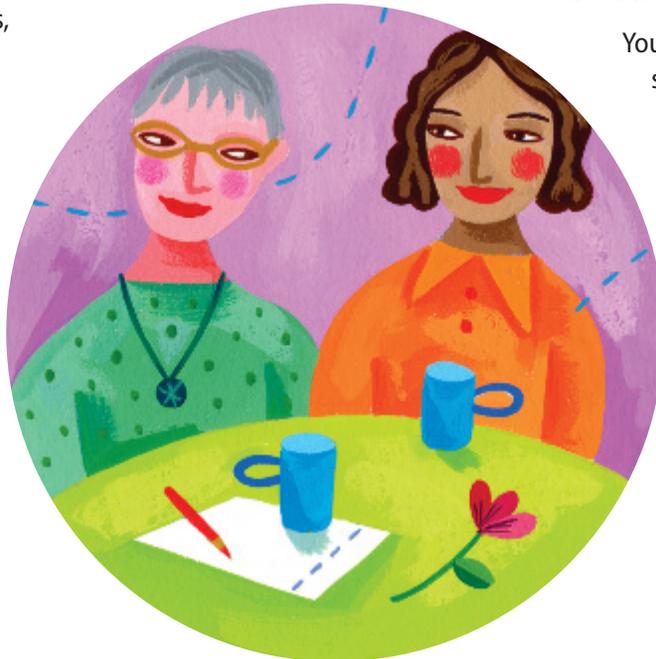
Adoption may be an option for HIV positive people who don't wish to conceive or cannot conceive. Very little information is available about the success of the adoption process for HIV positive people in Canada, although successful cases have been documented in the United States.

Once I'm pregnant, how do I find a good obstetrician?

Usually your family doctor or HIV specialist will refer you to an obstetrician with expertise in HIV. It is important to have an open, honest relationship with your obstetrician (and any other healthcare provider), so you can discuss all of your questions and concerns.

How do I deal with the pressure and stigma of being HIV positive and pregnant?

As an HIV positive woman, you most likely know what it is like to experience stigma. People may judge you differently or even more harshly for your decision to have children. In many cultures and religions, starting a family is very important and you may already face pressure to become pregnant. However, some people feel that you should not have children if you have HIV, and you may face pressure to not become pregnant.



Whatever the case, you need to be informed to make the right decision for yourself. And, since no one can do it alone, you need a good support system—including family, friends, other people with HIV, doctors, nurses and staff at AIDS service organizations—who can share your thoughts and care for you in a nonjudgmental way.

If your family and friends do not support your decision to have a child and are not knowledgeable about this topic, you can seek out professionals and organizations that can support you. You may want to consider the services of a counselor or therapist.

When choosing a counselor, keep these things in mind:

- Think about whom you would be comfortable talking to and sharing your feelings with. Is it important for the counselor to be a woman or someone from your own ethnic or religious background?
- Check your health insurance plan to see if counseling is covered and what the terms are.

You may also want to seek out support from other HIV positive women. Talk to your local AIDS service organization to find out if it hosts support groups or other activities where women can connect.

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Where can I get support and more information?

A partial list of resources that help HIV positive women with their pregnancy and fertility needs:

Mother Risk
Toronto, Ontario
1-888-246-5840
momrisk@sickkids.ca
www.motherisk.org

*AIDS Coalition of
Nova Scotia*
Halifax, Nova Scotia
902-425-4882 x225
1-800-566-2437
sc@acns.ns.ca
www.acns.ns.ca

*Centre for AIDS
Services Montreal
(Women)*
Montreal, Quebec
514-495-0990
direction@casm-mtl.org
netrover.com/~casm

*Ontario Aboriginal
HIV/AIDS Strategy*
Toronto, Ontario
416-944-9481
1-800-743-8851
info@oahas.org
www.oahas.org

The Teresa Group
Toronto, Ontario
416-596-7703
info@teresagroup.ca
www.teresagroup.ca

*Women's Health in
Women's Hands*
Toronto, Ontario
416-593-7655
whiwh@web.net
www.whiwh.com

*Nine Circles
Community Health
Centre*
Winnipeg, Manitoba
204-940-6000
1-888-305-8647
ninecircles@ninecircles.ca
www.ninecircles.ca

*Positive Women's
Network*
Vancouver,
British Columbia
604-692-3000
1-866-692-3001
pwn@pwn.bc.ca
www.pwn.bc.ca

Oak Tree Clinic
Vancouver,
British Columbia
604-875-2212
1-888-711-3030 (in BC)

*Canadian Fertility
and Andrology
Society*
Montreal, Quebec
514-524-9009
info@cfas.ca
www.cfas.ca