

Project Inform - an American HIV/AIDS Treatment Information Service for people living with HIV/AIDS
1-800-833-7422 • <http://www.projinf.org/>

British Columbia Persons with AIDS Society
1-604-681-2122 • www.bcpwa.org

The Centre for AIDS Services of Montreal (Women) - based in Quebec, Montreal link to AIDS services for women
514-843-3636 • www.netrover.com/~casm (bilingual)

The Teresa Group Child and Family Aid - based in Ontario, Toronto link to AIDS services for women and children. The Teresa Group is a contact agency for Ontario's free formula program
1-416-596-7703 • www.teresagroup.org

Québécoises

Ligne d'écoute par les pairs pour les femmes vivant avec le VIH/sida
1-866-240-0090 • www.criss.org

Comité des personnes atteintes du VIH du Québec (CPAVIH)
1-800-927-2844 • www.cpaviv.qc.ca/

Coalition des organismes communautaires québécois - sida (Cocq-sida)
1-514-844-2477 • www.alqi.qc.ca/asso/cq.html

Clinique du VIH de Sainte-Justine : Clinique de VIH de Montréal, au Québec, pour les femmes et les enfants
(514) 345-4836 • www.hsj.qc.ca (francophone)

Le Centre d'action sida Montréal (Femmes) : Installé au Québec, lien montréalais avec les services associés au sida pour les femmes
514-843-3636 • www.netrover.com/~casm (bilingual)

Je suis fière d'être Autochtone et je fais ma part pour prévenir la propagation du VIH dans ma communauté. Je veux protéger ceux que j'aime.

I am proud to be Aboriginal and I am doing my part to prevent the spread of HIV in my community. I want to protect the people I love.

Prenez soin de toi !
Take care of yourself!

Akua tutatish!

David Coyne
Amaut Cui

LE CERCLE DE L'ESPOIR
THE CIRCLE OF HOPE
Partnership between the Centre for AIDS Services of Montreal and the Centre for HIV/AIDS Support

Information for pregnant women who have HIV

Developed by the CPS Infectious Diseases and Immunization Committee. Published in Paediatrics & Child Health, April 2000. ; Canadian Paediatric Society, 2204 Walkley Road, Suite 100, Ottawa, (On) K1G 4G8; Phone: 613-526-9397, fax: 613-526-3332; www.caringforkids.cps.ca/babies/HIV&pregnancy.htm; www.caringforkids.cps.ca/babies/HIV&pregnancy.htm

If you have HIV (the virus that causes AIDS) and are pregnant, you probably have many questions. This handout will help you learn about:

- whether your baby will have HIV too;
- the best way for you to deliver your baby; and
- what will happen to your baby after birth.

I am HIV positive and pregnant. Will my baby be infected too?

Without treatment, your baby has a one in four chance of getting HIV. But there are things that can help reduce the risk. During your pregnancy and delivery, you can take a drug called zidovudine. If your newborn baby also receives this drug, the chance of the baby being infected with HIV drops to about one in 20. As well, if you are taking special drugs for HIV such as a triple combination that lowers your viral load, it is even less likely that your baby will be born with HIV.

If I am HIV positive and pregnant, should I deliver the baby by Caesarean Section?

If you are not taking any medicine for HIV or if you are just taking zidovudine, it is better for your baby to be delivered by caesarean section rather than vaginally. Otherwise, the risk of your baby being infected with HIV is twice as great if you deliver vaginally.

If you are taking a combination of drugs (to control your infection) and the amount of virus circulating in your blood is undetectable, there seems to be no clear advantage for a caesarean delivery compared with a vaginal delivery. You should talk to your doctor, who can look at your particular situation and give you appropriate advice for your situation.

If I take antiretroviral drugs during pregnancy, will that hurt my baby?

Not very many pregnant women have taken these drugs and the babies born to these women are still very young. To date, children exposed to these drugs during pregnancy haven't had major problems. It's still too early to say for sure that there will not be problems. If you have questions about taking HIV drugs during pregnancy, you should call this toll-free number: 1-888-246-5840.



Do babies with HIV infection look different?

No.

When will I know whether my baby is HIV positive?

Blood tests will tell whether the virus has been passed on. There are usually three tests performed:

- within the first few days of the baby being born;
- at 1 month of age; and
- at 2 to 4 months of age.

If all 3 tests are negative for HIV, the baby does not have the virus. If any one of the tests is positive, another test is performed. If 2 tests are positive, then the baby is infected with HIV.

If I am HIV positive, should I breastfeed my baby?

No, the baby could get HIV from your breast milk.

If I am HIV positive, will my baby need any extra medicine?

Your baby should be given a drug called zidovudine (in syrup form) for 6 weeks to provide extra protection against HIV infection. After that, until you know whether the baby is HIV positive, the baby should be given an antibiotic (called trimethoprim/sulphamethoxazole [TMP/SMX], also known as Septra [manufactured by Glaxo Wellcome Inc] or Bactrim [manufactured by Hoffmann-La Roche Limited]), to help to prevent pneumonia that can occur in babies with HIV infection.

Should I take my baby to an expert?

Your doctor should check with a specialist in HIV in children to make sure that you and your baby get the information and services that you need. Most HIV specialists are part of a team of health care workers (doctors, nurses, social workers, dieticians, pharmacists, physiotherapists and occupational therapists), and some of those people may be useful resources for you, too.



HIV antibody testing in children

From Infectious Diseases and Immunization Committee, Canadian Paediatric Society (CPS); Canadian Medical Association Journal 1993; 148(5): 759-761; Canadian Paediatric Society, 2204 Walkley Road, Suite 100, Ottawa, (On) K1G 4G8; Phone: 613-526-9397, fax: 613-526-3332; <http://www.caringforkids.cps.ca/babies/HIVtesting.htm>

As the number of women and children infected with human immunodeficiency virus (HIV) continues to increase in Canada, family physicians and pediatricians are more likely to care for HIV-infected children. Since few physicians in Canada are familiar with HIV infection in children and how to test for it, the Canadian Paediatric Society has provided answers to some of the most commonly asked questions.

When is HIV antibody testing indicated?

Many children and adolescents with HIV infection are asymptomatic. In infants the early signs may be nonspecific: failure to thrive, diarrhea, developmental delay, fever of unknown origin, hepatosplenomegaly and lymphadenopathy. Persistent oral candidiasis or recurrent bacterial infection may occur. Infants may rapidly become symptomatic: within the first year of life illnesses defining acquired immunodeficiency syndrome (AIDS), such as *Pneumocystis carinii* pneumonia, may develop. In older children and adolescents the early symptoms are similar to those in adults: fatigue, weight loss or lack of weight gain and chronic diarrhea. For many children with acquired HIV infection and some of those with vertically transmitted infection the progression to AIDS may take many years. When is HIV antibody testing indicated?

HIV antibody testing may be used for diagnosis, screening or determination of risk of infection to others after exposure.

Diagnosis

HIV infection should be considered if there are clinical symptoms or signs, particularly if there are known epidemiologic risk factors. Children with such factors include the following.

- Infants of HIV-positive mothers or those whose mothers are injection drug users, have multiple sexual partners or an HIV-positive sexual partner, or live in a community where the prevalence of HIV infection is high.
- Adolescents who have high-risk behaviours such as injection drug use, unprotected sex with an HIV-positive partner, multiple sexual partners, and males who have sex with males or street youths.
- Children who have received blood or blood products that have not been screened for HIV antibody (in Canada screening of blood donations began in November 1985). Children who have received blood or blood products from many