Obstetricians and Gynecologists

WOMEN'S HEALTH CARE PHYSICIANS

Women's Health • EP195

Preventing HIV With Medication

Tuman immunodeficiency virus (HIV) is the virus that causes **acquired immunodeficiency syndrome (AIDS)**. If you are not infected with HIV but are at high risk of getting it, you can take medication to help prevent infection. This is called **pre-exposure prophylaxis (PrEP)**. PrEP involves taking a daily pill. Along with other preventive measures, such as using condoms, PrEP may reduce your risk of getting HIV.

This pamphlet explains

- HIV infection
- deciding to take PrEP
- how to take PrEP
- side effects and cost
- pregnancy and PrEP

HIV Infection

HIV is passed from one person to another through contact with an infected person's body fluids, such as *semen*, vaginal fluid, or blood. This can happen during sex or by sharing needles used to inject illegal drugs. An infected woman who is pregnant can pass the virus to her fetus during labor. Women with HIV who breastfeed also can pass the virus to their babies.

How does HIV affect the body?

Once HIV is in your body, it attacks the *immune system*. As the immune system weakens, it is less able to resist disease and infections. AIDS is diagnosed when a person infected with HIV develops diseases that the immune

system normally would fight off, such as pneumonia, certain types of cancer, and harmful infections.

How is HIV infection treated?

There is no cure for HIV infection, but it can be treated. Drugs are available that can help people with HIV stay healthy for a long time. The earlier treatment is started, the better for your long-term health. Early treatment also reduces your risk of giving the virus to uninfected sex partners.

Should I be tested for HIV?

It is important for all women to be tested for HIV at least once during their lifetime. HIV testing also is recommended for women who are pregnant or who are thinking about becoming pregnant. Retesting is recommended each year if you have risk factors for HIV infection.

Deciding to Take PrEP

PrEP is a pill that you take once a day. This pill contains two medications, tenofovir and emtricitabine. If you are exposed to HIV, these medications prevent HIV from causing infection. To find out if PrEP is right for you, talk with your *obstetrician-gynecologist* (*ob-gyn*) or other health care professional. He or she will ask you questions about your risk factors for HIV.

Who is PrEP recommended for?

PreP is recommended for people who are at high risk of HIV infection but who are HIV negative.

How do I know if I am at high risk of HIV infection?

An HIV-negative woman with a male sex partner who has HIV or AIDS is at high risk of HIV infection. If you are sexually active in an area that has a high number of HIV-positive people, you also may be at high risk of infection if one or more of the following apply to you:

- You do not use condoms at all or do not use them each time you have sex.
- You have a sexually transmitted infection (STI).
- You exchange sex for drugs, money, food, or shelter.
- You inject illegal drugs.
- You are dependent on alcohol.

How to Take PrEP

If you are thinking about taking PrEP, you will be tested for HIV. If you are infected with HIV, you will need HIV treatment. If you are not infected, your ob-gyn or other health care professional may prescribe PrEP.

How often do I take PrEP?

You must take a pill once a day. Missing doses can lower the medication's effectiveness and put you at risk of HIV infection.

What are some possible side effects of PrEP?

The most common side effects of PrEP include the following:

- · Stomach pain
- Headache
- Weight loss
- Nausea and diarrhea

These side effects usually go away on their own after a few weeks. If these side effects do not go away, talk with your ob-gyn or other health care professional. Serious side effects of PrEP include liver problems and a condition called lactic acidosis, which happens when there is too much acid in the blood. Contact your ob-gyn or

other health professional right away if you have any of the following:

- Symptoms of liver problems, such as yellowing of the skin or eyes, dark urine, light-colored stools, loss of appetite, or stomach pain.
- Symptoms of lactic acidosis, including shortness of breath, weakness and feeling tired, muscle pain, or stomach pain.

Do I need to use condoms while taking PrEP?

PrEP by itself is not guaranteed to prevent HIV infection. You also need to follow safe sex practices while taking PrEP:

- Know your sexual partners and limit their number—Your partner's sexual history is as important as your own. The more partners you or your partners have, the higher your risk of getting HIV or other STIs.
- Use condoms—Using a latex or polyurethane condom every time you have vaginal, oral, or anal sex decreases the chances of HIV infection.

Do I need to do anything else while taking PrEP?

While you are taking PrEP, you will need to be tested for HIV every 2–3 months. This is to make sure that you have not become infected. You also may be tested for certain STIs if you have risk factors for them. Some STIs increase your risk of getting infected with HIV. Treating these STIs can lower your HIV risk.

How much does PrEP cost?

PrEP can be expensive. Most insurance carriers cover all or part of the cost of PrEP. It is a good idea to find out whether your insurance covers PrEP. If PrEP is not covered, or if you do not have health insurance, you may be able to get help with the cost. Visit www.cdc. gov/hiv/pdf/risk/prep/cdc-hiv-paying-for-prep.pdf for more information.

Pregnancy and PrEP

If you are an HIV-negative woman who wants to get pregnant with an HIV-positive male partner, talk with your ob-gyn or other health care professional about how to prevent infection. Preventing HIV infection also is important once you become pregnant and while breastfeeding. Protecting yourself from infection at these times can include the use of PrEP.

What steps should we take if I want to get pregnant with my HIV-positive partner?

- Your partner should undergo treatment for HIV infection (if he is not already).
- Have unprotected sex only when your partner has a low or undetectable viral load. Viral load is the amount of HIV in the body. Treatment often causes a person's viral load to become very low or "undetectable" (meaning that HIV cannot be found with a laboratory test). Waiting until your partner

has a low or undetectable viral load decreases the risk that you will become infected during unprotected sex.

 Have unprotected sex only on the days that you are most likely to become pregnant. You can track these days with home *ovulation* kits purchased from a pharmacy. You should use condoms at all other times.

Can I use PrEP when I am trying to get pregnant?

HIV-negative women can use PrEP when trying to get pregnant. You should start taking PrEP 1 month before you start trying to become pregnant and continue for 1 month after you have become pregnant. PrEP is especially recommended if your partner's viral load is detectable or unknown.

How can I prevent HIV infection during pregnancy?

Once you become pregnant, it is important to prevent HIV infection by always using condoms. You also can consider taking PrEP while pregnant.

Is PrEP safe to take during pregnancy?

Most experts agree that PrEP is safe during pregnancy. The drugs in PrEP are used to safely treat women with HIV during pregnancy. There are no reports of birth defects caused by PrEP.

Should I take PrEP while breastfeeding?

If you are HIV negative and at high risk of HIV infection, PrEP can be used while you are breastfeeding. You also should continue to use condoms while you are breastfeeding and taking PrEP. Although the drugs in PrEP can be found in breast milk, the amount is small and unlikely to harm the baby.

Are there other options for getting pregnant?

An HIV-negative woman can use sperm from an HIV-negative donor. This may involve the use of *intrauterine insemination (IUI)* or *in vitro fertilization (IVF)*. You also can use your partner's sperm that has been treated in a laboratory to remove the virus, and then undergo IUI or IVF. These options may be costly and may not be covered by insurance.

Finally...

If you are at high risk of HIV infection, you can use PrEP to lower your chances of becoming infected. PrEP should be used along with other measures, like always using condoms. You also can use PrEP if you are HIV negative and trying to become pregnant with an HIV-positive sex partner. Talk with your ob-gyn or other health care professional if you want to learn more about PrEP.

Glossary

Acquired Immunodeficiency Syndrome (AIDS): A group of signs and symptoms, usually of severe infections, occurring in a person whose immune system has been damaged by infection with human immunodeficiency virus (HIV).

Human Immunodeficiency Virus (HIV): A virus that attacks certain cells of the body's immune system and causes acquired immunodeficiency syndrome (AIDS).

Immune System: The body's natural defense system against foreign substances and invading organisms, such as bacteria that cause disease.

Intrauterine Insemination (IUI): A procedure in which a man's semen is placed into a woman's vagina, cervix, or uterus.

In Vitro Fertilization (IVF): A procedure in which an egg is removed from a woman's ovary, fertilized in a laboratory with the man's sperm, and then transferred to the woman's uterus to achieve a pregnancy.

Obstetrician—Gynecologist (Ob-Gyn): A physician with special skills, training, and education in women's health

Ovulation: The release of an egg from one of the ovaries.

Pre-exposure Prophylaxis (PrEP): Daily use of medication to prevent a person from becoming infected by human immunodeficiency virus (HIV).

Semen: The fluid made by male sex glands that contains sperm.

Sexually Transmitted Infection (STI): An infection that is spread by sexual contact, including chlamydia, gonorrhea, human papillomavirus (HPV), herpes, syphilis, and human immunodeficiency virus (HIV, the cause of acquired immunodeficiency syndrome [AIDS]).

This Patient Education Pamphlet was developed by the American College of Obstetricians and Gynecologists. Designed as an aid to patients, it sets forth current information and opinions on subjects related to women's health. The average readability level of the series, based on the Fry formula, is grade 6–8. The Suitability Assessment of Materials (SAM) instrument rates the pamphlets as "superior." To ensure the information is current and accurate, the pamphlets are reviewed every 18 months. The information in this pamphlet does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to the institution or type of practice, may be appropriate.

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