Retrospective analysis of 144 cases was undertaken to ascertain compliance of documentation of offer of contraception. All HIV positive female patients attending the department in 2010 aged less than 50 were included in the audit. 74 women were excluded from the audit. The exclusion criterion was currently pregnant, previous hysterectomy and no sexual partner in last 12 months. 23% were not sexually active in 2010.

Antiretroviral drugs have the potential to either decrease or increase the bioavailability of steroid hormones in hormonal contraceptives. If a woman on antiretroviral treatment decides to initiate or continue hormonal contraceptive use, the consistent use of condom is recommended. This is for both preventing Human Immunodeficiency Virus (HIV) transmission and to compensate for any possible reduction in the effectiveness of the hormonal contraceptive.

An audit was carried out to review the adherence to the 2008 United Kingdom (UK) National guidelines for the management of the Sexual and Reproductive health of people living with HIV infection. According to the guidelines consistent condom use should be encouraged in conjunction with an additional contraception method.

Majority of patients (66%) were black African and 52% were aged 36-50. Condoms were offered in 83% of cases and contraception was discussed in 51%. Out of 36 patients using Contraception, 33 were on Highly Active Antiretroviral Therapy (HAART). Out of 14 patients using hormonal contraception, 4 were consistently using condoms. Use of condoms was not documented in rest of 10 patients.

The recommendations were made to discuss drug interactions and consistent use of condoms with patients using hormonal method of contraception and HAART. This will help to prevent HIV transmission as well as unwanted pregnancies.

As Genitourinary Medicine (GUM) services are moving towards integration with contraceptive services, priority should be given to HIV positive women to seek contraceptive advice in order to enhance their overall care.