

17<sup>TH</sup> ANNUAL CONFERENCE OF THE  
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British HIV Association  
**BHIVA**

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**HIV Positive pregnant women  
with detectable viral load at 36  
weeks - What is the outcome?**

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## Background

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- With the introduction of HAART, the mother to child transmission rate in the UK is 1.2%
- It is 0.1% if Viral load is undetectable at delivery

*Townsend et al. Low rates of Mother-to-Child Transmission of HIV following effective intervention in the UK and Ireland 2000-2006. AIDS 2008; 22(8): 973-981.*



## Aims

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- To review all pregnancies with a detectable viral load at 36 weeks or at delivery if delivered before 36 weeks
- To identify management changes used to reduce the risk of MTCT



## Methods

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- All pregnancies in HIV positive women since January 2005 were reviewed
- Women with detectable viral load at 36 weeks or at delivery if delivered before 36 weeks were identified
- Reasons for the detectable viral load were studied
- Neonatal outcome was measured



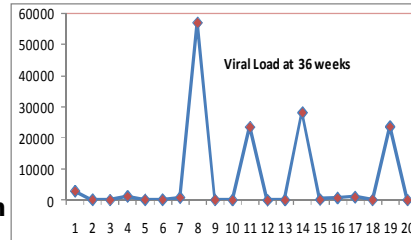
## Results 1

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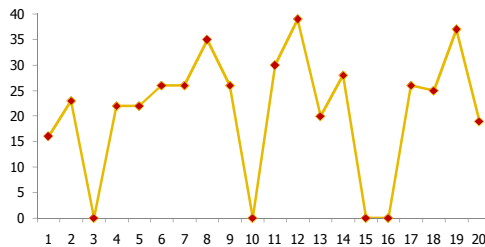
- 105 women delivered between January 2005 and December 2010
- 20 women were included in the study
- 18 women had detectable viral load at 36 weeks
- 2 women with detectable viral load delivered before 36 weeks

## Results 2

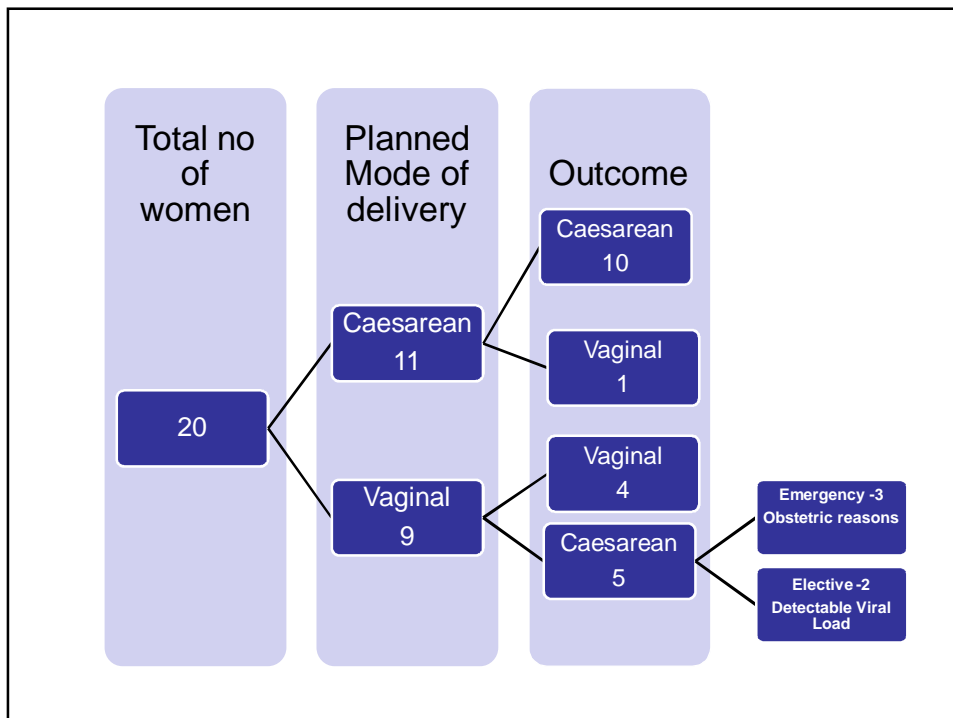
Viral Load at 36 weeks ranged from 52 copies to 56,956 copies/ml

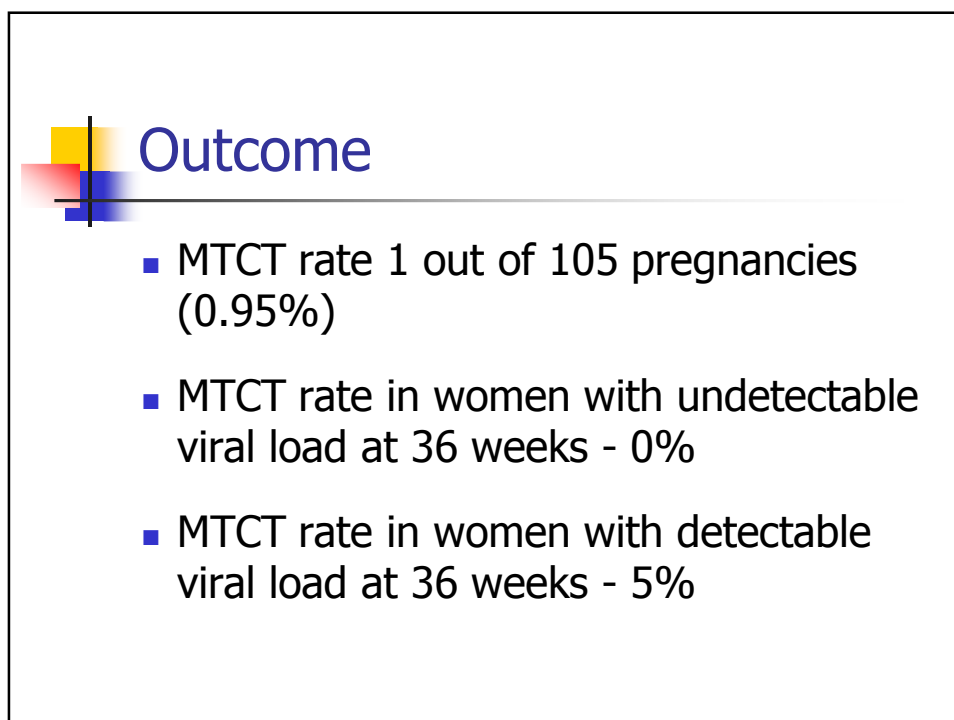
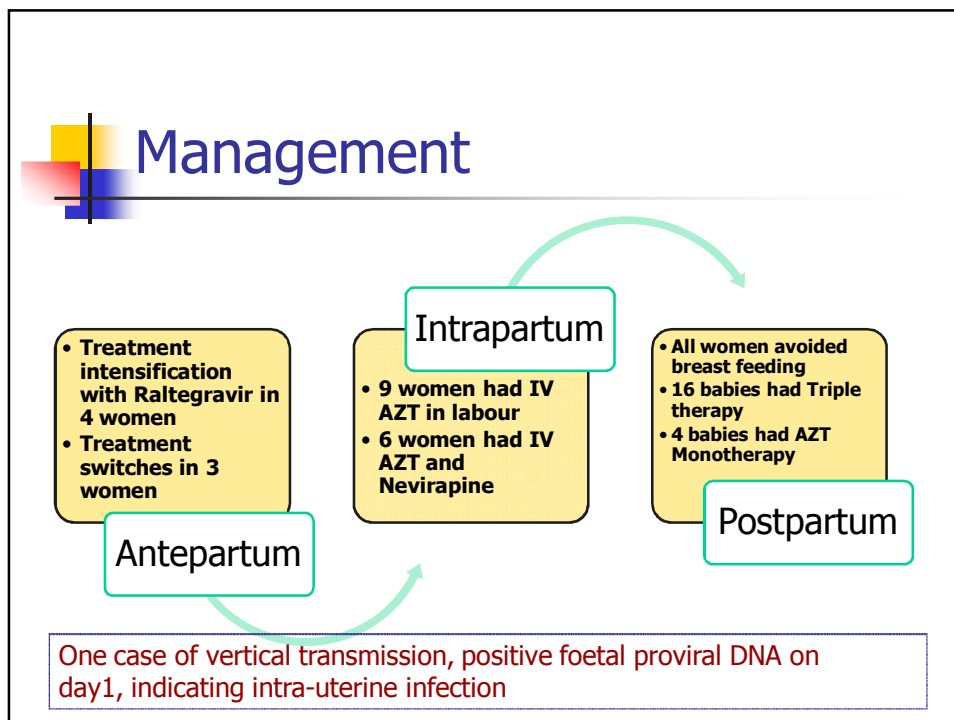


Gestation ARV Commenced (in weeks)



In women who started HAART to prevent MTCT, gestation at initiation of HAART ranged from 16 weeks to 39 weeks







## Conclusion

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- With effective management post-partum and intra-partum HIV transmission is largely preventable
- In-utero transmission is likely to account for increasing proportion of MTCT
- Early testing and timely initiation of HAART ensures good viral control close to delivery