

## **Examples of Perinatal HIV Prevention Activities for PS12-1201: Comprehensive HIV Prevention Programs for Health Departments**

Perinatal HIV prevention programs, including the testing of pregnant women and treatment for those who are infected have resulted in dramatic declines in the number of children infected with HIV. The estimated number of infants infected with HIV through perinatal transmission decreased from a peak of 1,650 HIV-infected infants born in 1991 to 215-370 in 2005. There continues to be perinatal HIV transmission in the United States each year. These infections are due to missed opportunities for prevention, most often a lack of detection of HIV in pregnant women or a lack of adequate preconception care. Continued efforts are needed to ensure that all women and their providers know their HIV status as early as possible in pregnancy.

The following are demonstrated effective perinatal HIV prevention interventions at the individual level. Jurisdictions should assure that cases are **detected**, **reviewed** for missed prevention opportunities, and **acted** upon both at an individual and a community level.

### **1. Sentinel event case review and community action (where appropriate):**

- Address local systems issues that lead to missed prevention opportunities by utilizing the FIMR-HIV Prevention Methodology (see <http://www.fimrhiv.org/>). This tested methodology involves:
  - Comprehensive, multidisciplinary review of selected cases based on data from medical records and maternal interviews.
  - Identification of systems failures and actions to address factors contributing to these failures.
  - Development and implementation of strategies to address missed opportunities for prevention.
  - Note: Eligible cases must include at minimum infected infants/children and may additionally include other HIV-exposed (but uninfected) infants/children, if desired.

### **2. Real time case-finding (detection) of HIV-infected pregnant women and exposed infants:**

- Create a perinatal services coordination function (detect & review cases on an individual level, assure linkage to comprehensive care (including preconception care) and track health outcomes). Exposures should be identified prior to birth to allow time for appropriate intervention.
- This activity must also include identification of pregnancy among women known to be HIV-infected.

### **3. HIV testing for pregnant women (required):**

- Work with all obstetric health-care providers to promote universal HIV screening for all of their pregnant patients early in prenatal care as well as repeat HIV testing during third trimester and rapid HIV testing during labor as indicated.

**4. Linkage to and assurance of appropriate HIV care and psychosocial services for mother and infant:**

- Assure that women receive appropriate clinical and psychosocial services to optimize their own health and to prevent perinatal HIV transmission.
- At minimum, monitor linkage to care for cases and provide technical assistance to improve these linkages.

**5. Preconception Care: Preventing Unplanned Pregnancies and Planning Desired Pregnancies:**

- Assure HIV-infected women of childbearing age receive (have access to) contraceptive/family planning and preconception care services before and between pregnancies.