Docs Should Discuss Breast Feeding With HIV-Positive Women

North American experts weigh in on the role of breast feeding in the lives of mothers with well-controlled HIV.

January 29, 2021 By Heather Boerner

For better infant outcomes and to affirm birthing parents' human rights, clinicians should share breast-feeding decision-making with women living with HIV.

That's the recommendation from a cadre of HIV experts and activist groups from the United States and Canada in a recent consensus statement on breast feeding and Undetectable = Untransmittable.

Although breast feeding is the standard of care in low-resource settings, where it has been shown to promote the overall survival and well-being of HIV-exposed infants with an extremely low risk of HIV transmission when the breast-feeding parent has sustained viral suppression, guidelines in the United States, Canada and other high-resource settings oppose breast feeding among women living with HIV, primarily out of concern for potential transmission.

The new recommendation pushes practice changes that are starting to be acknowledged in updates to the Department of Health and Human Services' guidelines for pregnancy and perinatal outcomes. So far, only Switzerland has issued suggestions for how to monitor viral load among women who choose to breast-feed. But both guidelines continue to discourage breast feeding.

"Insistence on a 'zero-transmission-risk' choice concerning breast feeding is also at odds with the autonomy of parents living with HIV and their fundamental right to make informed choices about their children's care without judgment or interference from providers or government," write the authors of the consensus statement, which was published on The Well Project's website.

Signers include such HIV research luminaries as Rebecca Zash, MD, of Harvard Medical School, lead author of the dolutegravir and birth defects surveillance data out of Botswana; Deborah Cohan, MD, of the University of California at San Francisco; Rajesh Ghandi, MD, of Harvard Medical School; and pediatrician Allison Agwu, MD, of Johns Hopkins School of Medicine. Nurses, public health experts and HIV advocates also signed on.

In addition to arguing that clinicians should provide all data to birthing parents on the risks and

benefits of breast feeding for them in particular, the statement recommends that clinicians do the following:

- “Recognize, account for and advocate to change” policies that impact women with HIV who might want to breast-feed, such as systemic racism, economic disparities and misogyny.
- Uphold HIV-positive women’s bodily autonomy, not just regarding breast feeding but along the entire sexual and reproductive health continuum and life span.
- Take the lead in developing education and tools to make sure all clinicians understand and support the above.
- Advance research on breast feeding and HIV.
- Support peer and parent resources so that women with HIV know all their options.

With widespread endorsement of this consensus statement, the cosigners hope to build momentum that will help improve the landscape for parents living with HIV. Individuals and organizations are invited to sign on to endorse the statement.

Click here to read the full statement.

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