No Transmission and Few Birth Defects in Babies Born to African Mothers on HIV Treatment

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There were no HIV transmissions and few birth defects in the babies of HIV-positive African women who were treated with antiretroviral (ARV) therapy, according to a study presented at the Fifth International AIDS Society (IAS) Conference on HIV Pathogenesis, Treatment and Prevention in Cape Town.

Combination ARV therapy has had a remarkably positive effect on pregnancy in the developed world. Few babies become infected with HIV from pregnant women on effective ARV regimens, and concerns about side effects to the babies have largely been put to rest. There are less data, however, on combination ARV therapy and pregnancy in women in developing nations.

To examine this situation, Paula Munderi, MRCP, of the MRC/UVRI Uganda Research Unit on AIDS in Entebbe, Uganda, enrolled 1,867 HIV-positive women of childbearing age in the development of antiretroviral therapy (DART) study. All of the women were enrolled in either Uganda or Botswana. Between 2003 and 2008, there were 365 pregnancies reported in 293 women. Of the 313 pregnancies where the outcome was known, there were 179 live births, 20 stillbirths and 114 terminations or miscarriages. Prophylactic HIV treatment was given to 135 of the newborns.

Over time, 133 of the babies born have been followed. Of the 133, there were eight birth defects and nine deaths in the babies—though none from HIV/AIDS—and two of the mothers died.

The fact that no children became infected is a remarkably positive outcome, and thus far unusual for sub-Saharan Africa. That there were so few birth defects is also good news. The high number of stillborn infants is a cause for concern, but the authors state that given so many other factors that can influence this, such as poor nutrition and poorer prenatal care, it is difficult to determine the cause.

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