

PATIENT EDUCATION



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Preventing HIV With Medication

Human immunodeficiency virus (HIV) is the virus that causes acquired immunodeficiency syndrome (AIDS). If you are not infected with HIV but are at high risk of getting it, you can take medication to help prevent infection. This is called **pre-exposure prophylaxis (PrEP)**. PrEP involves taking a daily pill. Along with other preventive measures, such as using condoms, PrEP may reduce your risk of getting HIV.

This pamphlet explains

- HIV infection
- deciding to take PrEP
- how to take PrEP
- side effects and cost
- pregnancy and PrEP

HIV Infection

HIV is passed from one person to another through contact with an infected person's body fluids, such as **semen**, vaginal fluid, or blood. This can happen during sex or by sharing needles used to inject illegal drugs. An infected woman who is pregnant can pass the virus to her **fetus** during labor. Women with HIV who breastfeed also can pass the virus to their babies.

How does HIV affect the body?

Once HIV is in your body, it attacks the **immune system**. As the immune system weakens, it is less able to resist disease and infections. AIDS is diagnosed when a person infected with HIV develops diseases that the immune system normally would fight off, such as **pneumonia**, certain types of cancer, and harmful infections.

How is HIV infection treated?

There is no cure for HIV infection, but it can be treated. Drugs are available that can help people with HIV stay healthy for a long time. The earlier treatment is started, the better for your long-term health. Early treatment also reduces your risk of giving the virus to uninfected sex partners.

Should I be tested for HIV?

It is important for all women to be tested for HIV at least once during their lifetime. HIV testing also is recommended for women who are pregnant or who are thinking about getting pregnant. Retesting is recommended each year if you have risk factors for HIV infection.

Deciding to Take PrEP

PrEP is a pill that you take once a day. This pill contains two medications: 1) tenofovir and 2) emtricitabine. If you are exposed to HIV, these medications prevent HIV from causing infection. To find out if PrEP is right for you, talk with your **obstetrician-gynecologist (ob-gyn)**. He or she will ask you questions about your risk factors for HIV.

Who is PrEP recommended for?

PrEP is recommended for people who are at high risk of HIV infection but who are HIV negative.

How do I know if I am at high risk of HIV infection?

An HIV-negative woman with a male sex partner who has HIV or AIDS is at high risk of HIV infection. If you are sexually active in an area that has a high number of HIV-positive people, you also may be at high risk of infection if one or more of the following apply to you:

- You do not use condoms at all or do not use them each time you have sex.
- You have a **sexually transmitted infection (STI)**.
- You exchange sex for drugs, money, food, or shelter.
- You inject illegal drugs.
- You are dependent on alcohol.

How to Take PrEP

If you are thinking about taking PrEP, you will be tested for HIV. If you are infected with HIV, you will need HIV treatment. If you are not infected, your ob-gyn may prescribe PrEP.

How often do I take PrEP?

You must take a pill once a day. Missing doses can lower the medication's effectiveness and put you at risk of HIV infection.

What are some possible side effects of PrEP?

The most common side effects of PrEP include

- stomach pain
- headache
- weight loss
- nausea and diarrhea

These side effects usually go away on their own after a few weeks. If these side effects do not go away, talk with your ob-gyn. Serious side effects of PrEP include liver problems and a condition called lactic acidosis, which happens when there is too much acid in the blood. Contact your ob-gyn right away if you have any of the following:

- Symptoms of liver problems, such as yellowing of the skin or eyes, dark urine, light-colored stools, loss of appetite, or stomach pain.

- Symptoms of lactic acidosis, including shortness of breath, weakness and feeling tired, muscle pain, or stomach pain.

Do I need to use condoms while taking PrEP?

PrEP by itself is not guaranteed to prevent HIV infection. You also need to follow safe sex practices while taking PrEP:

- Know your sexual partners and limit their number—Your partner's sexual history is as important as your own. The more partners you or your partners have, the higher your risk of getting HIV or other STIs.
- Use condoms—Using a latex or polyurethane condom every time you have vaginal, oral, or anal sex decreases the chances of HIV infection.

Do I need to do anything else while taking PrEP?

While you are taking PrEP, you will need to be tested for HIV every 2 to 3 months. This is to make sure that you have not become infected. You also may be tested for certain STIs if you have risk factors for them. Some STIs increase your risk of getting infected with HIV. Treating these STIs can lower your HIV risk.

How much does PrEP cost?

PrEP can be expensive. Most health insurance companies cover all or part of the cost of PrEP. It is a good idea to find out whether your insurance covers PrEP. If PrEP is not covered, or if you do not have health insurance, you may be able to get help with the cost. Visit www.cdc.gov/hiv/basics/prep.html for more information.

Pregnancy and PrEP

If you are an HIV-negative woman who wants to get pregnant with an HIV-positive male partner, talk with your ob-gyn about how to prevent infection. Preventing HIV infection also is important once you become pregnant and while breastfeeding. Protecting yourself from infection at these times can include the use of PrEP.

What steps should we take if I want to get pregnant with my HIV-positive partner?

- Your partner should have treatment for HIV infection (if he is not already).
- Have unprotected sex only when your partner has a low or undetectable viral load. Viral load is the amount of HIV in the body. Treatment often causes a person's viral load to become very low or "undetectable" (meaning that HIV cannot be found with a laboratory test). Waiting until your partner has a low or undetectable viral load decreases the risk that you will become infected during unprotected sex.
- Have unprotected sex only on the days that you are most likely to become pregnant. You can track these days with home **ovulation** kits purchased from a pharmacy. You should use condoms at all other times.

Can I use PrEP when I am trying to get pregnant?

HIV-negative women can use PrEP when trying to get pregnant. You should start taking PrEP 1 month before you start trying to get pregnant and continue for 1 month after you have gotten pregnant. PrEP is especially recommended if your partner's viral load is detectable or unknown.

How can I prevent HIV infection during pregnancy?

Once you get pregnant, it is important to prevent HIV infection by always using condoms. You also can consider taking PrEP while pregnant.

Is PrEP safe to take during pregnancy?

Most experts agree that PrEP is safe during pregnancy. The drugs in PrEP are used to safely treat women with HIV during pregnancy. There are no reports of **birth defects** caused by PrEP.

Should I take PrEP while breastfeeding?

If you are HIV negative and at high risk of HIV infection, PrEP can be used while you are breastfeeding. You also should continue to use condoms while you are breastfeeding and taking PrEP. Although the drugs in PrEP can be found in breast milk, the amount is small and unlikely to harm the baby.

Are there other options for getting pregnant?

An HIV-negative woman can use **sperm** from an HIV-negative donor. This may involve the use of **intrauterine insemination (IUI)** or **in vitro fertilization (IVF)**. You also can use your partner's sperm that has been treated in a laboratory to remove the virus, and then go through IUI or IVF. These options may be costly and may not be covered by insurance.

Finally...

If you are at high risk of HIV infection, you can use PrEP to lower your chances of becoming infected. PrEP should be used along with other measures, like always using condoms. You also can use PrEP if you are HIV negative and trying to get pregnant with an HIV-positive sex partner. Talk with your ob-gyn if you want to learn more about PrEP.

Glossary

Acquired Immunodeficiency Syndrome (AIDS):

A group of signs and symptoms, usually of severe infections, in a person who has human immunodeficiency virus (HIV).

Birth Defects: Physical problems that are present at birth.

Fetus: The stage of human development beyond 8 completed weeks after fertilization.

Human Immunodeficiency Virus (HIV): A virus that attacks certain cells of the body's immune system. If left untreated, HIV can cause acquired immunodeficiency syndrome (AIDS).

Immune System: The body's natural defense system against viruses and bacteria that cause disease.

Intrauterine Insemination (IUI): A procedure in which a man's sperm is placed in a woman's uterus.

In Vitro Fertilization (IVF): A procedure in which an egg is removed from a woman's ovary, fertilized in a laboratory with the man's sperm, and then transferred to the woman's uterus to achieve a pregnancy.

Obstetrician–Gynecologist (Ob-Gyn): A doctor with special training and education in women's health.

Ovulation: The time when an ovary releases an egg.

Pneumonia: An infection of the lungs.

Pre-Exposure Prophylaxis (PrEP): Daily medication taken to help prevent infection with human immunodeficiency virus (HIV). Along with other preventive measures, such as using condoms, PrEP may reduce the risk of getting HIV.

Semen: The fluid made by male sex glands that contains sperm.

Sexually Transmitted Infection (STI): An infection that is spread by sexual contact. Infections include chlamydia, gonorrhea, human papillomavirus (HPV), herpes, syphilis, and human immunodeficiency virus (HIV, the cause of acquired immunodeficiency syndrome [AIDS]).

Sperm: A cell made in the male testicles that can fertilize a female egg.

This information is designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. For ACOG's complete disclaimer, visit www.acog.org/WomensHealth-Disclaimer.

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