



Proactive Measures Reduce Risk to Newborns

Women living with HIV can virtually eliminate the risk of transmitting the virus to their newborn if they take the right precautions. This means taking HIV drugs during pregnancy and delivery. It also means considering a cesarean delivery, and not breast-feeding.

Mother-to-infant HIV infections have always been very low in Minnesota with one or no infections reported in each of the past few years. There is also a dramatic decline in national mother-to-infant HIV infection rates. What's important to know is why these rates are declining.

A recent study by the Minnesota Department of Health (MDH) showed women are more than willing to do their part in preventing newborn infections. In 1998, a group of five Twin Cities prenatal care clinics reported that between 36-78 percent of women chose to get tested for HIV. One year later, the number of women choosing to get tested increased to 80- 97 percent. This was until clinics adopted the practice of routinely informing women about how infection risk for newborns can be reduced, and offering the choice of a test.

Pregnant women who know their HIV status can make informed choices to promote their own and their baby's health, and in Minnesota they can also get resources to make sure both their health needs are met.

For a variety of reasons, Minnesota has never seen the large number of newborn infections experienced in other areas of the country and the world. Still, the state took a proactive stance, primarily due to the Minnesota AIDS Project work at the State Capitol in 1997. MAP recommended the legislature provide money for the MDH study and educational services targeting obstetricians and family practice clinics. The legislature also took action to make sure women who use Medical Assistance get complete education and counseling about transmission and prevention when taking HIV tests.

Preventing newborn infections was a hot topic in Congress in 1995 during the debate over whether to continue providing money for HIV care through the Ryan White CARE Act. The issue came up again this past summer during the CARE Act's reauthorization process. Some think the best way to prevent newborn transmissions is to force every pregnant woman to be tested for HIV, or to test every baby. Yet, mandatory testing for HIV causes a host of problems. The lesson learned in Minnesota is if we give women the information to make the right choices and the opportunity to do so, along with providing access to health care, we can prevent HIV newborn infections.