

Sexual and Reproductive health

Key

- R** A **right** you have as a user of a service
- E** An **expectation** you should have as a user of a service, based on best practice and professional standards
- A** This is **advice** on how to get the most out of your services

What sexual health checks should I have?

As part of your HIV care your clinic will also make sure that your general sexual health is as good as it can be. Your sexual health is very important. Untreated sexually transmitted infections (STIs) can have an impact on how successful your HIV treatment is in controlling the virus in your system.

You will be offered a sexual health 'screen' (set of tests) within four weeks after your HIV diagnosis and after that at least once a year. Gay and bisexual men will also be recommended to test for syphilis (a blood test) every 3 to 6 months.¹ **E**

Your doctor might suggest that you have STI checks more often if they think that you may be at greater risk of getting a new infection.

[1] BHIVA Standards of Care – Standard 7 - Sexual health and identification of contacts at risk of infection. <http://www.bhiva.org/standards-of-care-2012.aspx>

As a woman living with HIV, can I get contraception?

Women living with HIV who do not want to become pregnant should be prescribed whichever contraceptive method is suitable for their needs.¹ **E** As well as male and female condoms, this may include the hormonal contraceptive pill (The Pill), implants, injections IUDs (intrauterine device), IUS (intrauterine system) and vaginal ring. To learn more about different types of contraception, read [this guide](http://www.nhs.uk/Conditions/contraception-guide/Pages/what-is-contraception.aspx). <http://www.nhs.uk/Conditions/contraception-guide/Pages/what-is-contraception.aspx>

This resource was proposed by an advisory board, attended by an expert panel of voluntary sector/patient organisations. The writing of the resource was undertaken by NAT (National AIDS Trust). Merck Sharp & Dohme Limited (MSD) funded and attended the advisory board, and had the opportunity to check the resource for accuracy and balance. Final editorial control was held by NAT, taking account of input from the advisory board members and other experts.

Your GP will be able to prescribe at least some of these methods but not all surgeries offer all options. You can also ask for contraception from community contraception clinics <http://www.fpa.org.uk/findaclinic> and some sexual health clinics <http://www.nhs.uk/Service-Search/Sexual-health-information-and-support/LocationSearch/734> . But as some HIV medication can interact badly with hormonal contraception, it is best to talk to your HIV doctor about what the best option is for you and make sure whoever prescribes your contraception is aware of all the medication you are on.

[1] BHIVA/BASHH/FRSH Guidelines for the management of the sexual and reproductive health of people living with HIV infection 2008 <http://www.bhiva.org/UKGuidelines2008.aspx>

Can I have a baby?

Mother-to-child-transmission of HIV remains a concern for many people living with HIV who are thinking about having children. But in the UK you can get medical help to prevent this and less than 1% of babies born to HIV positive mothers who get this help will have HIV.¹

If you are in a relationship where only one partner is living with HIV, it is possible to conceive a baby without the HIV negative partner getting HIV. But the options are different depending on whether the mother or father is living with HIV. Some methods are easy to do yourself at home but for others you need assistance from a fertility clinic ('assisted conception services').² **E** Your HIV doctor can give you information on this. Some hospitals also have specialist clinics for people living with HIV who are trying to have a baby.

Your HIV clinic should give you advice and support with whatever reproductive choices you want to make.³

E This includes contraception (if you don't want to get pregnant – see also [As a woman living with HIV, can I get the contraceptive pill from my GP?](#)) and any plans to have children. Even if you don't have any immediate plans to have a family, you can have a general conversation with your HIV doctor or nurse about getting pregnant and having a baby while living with HIV.

In addition to the information in the sections below, NAM have developed a practical tool <http://www.aidsmap.com/resources/HIV-pregnancy/page/2630749/#intro> to provide you with personalised information if you are:

- a woman living with HIV who is pregnant
- a woman living with HIV who wishes to become pregnant
- a woman who is HIV negative and wishes to have a baby with an HIV positive male partner.

Positively UK also has resources and practical help http://www.positivelyuk.org/pregnancy_and_beyond.php for women living with HIV who are pregnant and couples affected by HIV who wish to have a baby.

[1] HIV Medicine (2012),13(suppl. 2),p97

[2] NICE Fertility Guidance 2013 <http://www.nice.org.uk/CG156>. BHIVA Guidelines for the management of HIV infection in pregnant women 2012. <http://www.bhiva.org/PregnantWomen2012.aspx>

[3] BHIVA Standards of Care – Standard 8 – Reproductive health. <http://www.bhiva.org/standards-of-care-2012.aspx>

Can I get help becoming pregnant?

People living with HIV are more likely to experience problems with getting pregnant than the general population.

Also, if you are in a relationship where one partner is HIV negative and the other HIV positive, you might need to use assisted conception methods (from a fertility clinic) to prevent HIV transmission. Men who are HIV positive and want to have a child might be recommended to use 'sperm-washing' services to prevent HIV transmission. (however, this may not be necessary if the man is on effective treatment).¹

Your HIV clinic should have plans in place to refer you to any fertility or assisted conception services you need.² **E** These services might be different depending on where in England you are living. In some areas you might be able to get all your services paid by the NHS, but in many cases you will be asked to pay for some or all of your treatment. If you are being asked to pay, talk to your HIV clinic or HIV support organisation. They may be able to help you ask the local NHS for the funding you need.

[1] NICE Fertility Guidance 2013. <http://www.nice.org.uk/CG156>

[2] BHIVA Standards of Care – Standard 8 – Reproductive health. <http://www.bhiva.org/standards-of-care-2012.aspx>; NICE Fertility Guidance 2013 <http://www.nice.org.uk/CG156>

How will I be supported during pregnancy?

Many women living with HIV are diagnosed during routine ante-natal screening. If this happens you would have been referred to an HIV doctor to support you during your pregnancy. If you were diagnosed before pregnancy and already have an HIV doctor, you may have already told them about your plans to have a baby. If not, it is good to tell them as soon as possible when you find out you are pregnant. This is so they can plan the treatment and care you will need to prevent your baby from contracting HIV. With the right treatment and care, there is a less than 1% chance that your baby will contract HIV.

During your pregnancy, you will be under the care of an expert team including¹ **E**:

- An HIV doctor
- An obstetrician
- A specialist midwife
- A paediatrician.

The most important tool in making sure your baby remains HIV negative will be the HIV medication that your doctor prescribes for your pregnancy (your baby will also get some medication after s/he is born). It is increasingly common for HIV positive women to be recommended to have a vaginal ('natural') birth as the best option for mother and baby. However, your doctor may still recommend a planned caesarean section as a precaution against transmission of HIV to your baby. If you have any worries about the HIV medication or the type of birth your doctor has recommended, ask for more information. You can also talk to your HIV nurse or someone at your local HIV organisation if you are worried about how your pregnancy is being managed. **A**

[1] BHIVA Standards of Care – Standard 8 – Reproductive health. <http://www.bhiva.org/standards-of-care-2012.aspx>. HIVA. 2013.

Standards of care for people living with HIV