

The Optimal Scenario & Context of Care

Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine Guidance for Healthcare Providers regarding Infant Feeding Options for People Living with HIV

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Background

This document from the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) offers guidance for a shared decision-making process between a person living with HIV and their healthcare providers to ensure that informed choices are made concerning infant feeding options.

Materials & Methods

The construction of this guidance was considered through numerous reviews with both specialist HIV clinicians, healthcare providers representing a range of practices in perinatal care and with a diversity of people living with HIV. It takes into consideration the rapidly changing context of research and knowledge development in this area and has been developed in parallel with a resource developed by the National Association of People with HIV Australia and Positive Women Victoria. In developing this guidance,

ASHM evaluated the risks of HIV transmission via breastmilk feeding for mother-to-child transmission (MTCT) in light of accessible combination antiretroviral treatment (cART), weighed against the benefits of breastfeeding. The authors reviewed the latest research relating to the transmission of HIV from parent to child through breastfeeding where the person was on effective cART and fulfilled several essential criteria and have found no evidence of transmission of HIV.

Conclusions

ASHM maintains that the safest choice for a person living with HIV and their infant is formula feeding to ensure that HIV transmission is minimised. However, this guidance recognises that clinicians and healthcare workers providing care and support for people living with HIV will have the experience, or can anticipate the experience, of people who live with HIV expressing a wish, intention to breastfeed.

Results

In recent years, there has been a growing recognition among healthcare providers, researchers and clinicians that breastfeeding can be a viable choice for people living with HIV if they follow several criteria and are willing to engage in strategies to reduce the risk of HIV transmission. This situation is described as the 'Optimal Scenario' and summarised in an important discussion paper published in the *Swiss Medical Weekly* (July 2018). This guidance is based on the underlying evidence for the 'Optimal Scenario' and adds to this scenario what ASHM calls the 'Optimal Context of Care' required to support people living with HIV who may decide to breastfeed.

Both USA and UK guidance provides the following support for this context of care

- People who have questions about breastfeeding have the right to receive patient-centred and evidence-based counselling.
- When people living with HIV choose to breastfeed, they need to be supported with information about risk reduction measures to minimise the risk.
- People who are virologically suppressed on cART with good adherence and who choose to breastfeed should be supported to do so, and should be informed about the risk of transmission of HIV through breastfeeding in this situation and the requirement for extra patient and infant clinical monitoring.



DOWNLOAD RESOURCE

<https://www.ashm.org.au/HIV/breastfeeding/>