

Infant Feeding Basics: For Women Living with HIV in the US

World Health Organization, American Academy of Pediatrics, and Centers for Disease Control recommend that women with HIV in the United States **DO NOT** breastfeed to prevent passing HIV to their baby.

However, many women have questions about infant-feeding options and **may consider breastfeeding.**

It is important to understand the **risks and the benefits** of breastfeeding, as well as other options for feeding. **Talk to your medical provider** to get the support and care you need to make an informed decision that is best for you, your baby, and your family.



Photo Credit: WebMD

If you choose to breastfeed after becoming fully informed of the risks/benefits, it is very important to talk to your health care provider and have a plan in place:

Before you start breastfeeding, while breastfeeding AND before you stop breastfeeding.

Benefits of Breastfeeding

FOR MOTHER

Lowers risk of:

- Ovarian & Breast Cancer
- Postpartum Blood Loss
- Postpartum Depression

FOR BABY

- Best source of nutrition
- Helps with brain development
- Helps protect against future illnesses such as Diabetes, Asthma and Obesity

Lowers risk of:

- Respiratory tract disease
- Ear infections
- Gastrointestinal infections
- Sudden Infant Death Syndrome

Breastfeeding **WITHOUT** antiretroviral medications (ARVs) has a 14% risk of transmission for women diagnosed with HIV pre-pregnancy. The risk is 25-30% for women who acquire HIV during pregnancy or lactation [American Academy of Pediatrics 2016]

Being on ARVs substantially decreases the risk, but there are reports of breastfeeding transmission when women have been adherent to their ARV treatment.

If you choose to breastfeed...

The most important thing you can do to lower the chance of passing HIV to your baby while breastfeeding is take antiretroviral treatment (you and baby) every day.

Together, this can decrease your baby's risk to less than 5%. [American Academy of Pediatrics 2016]



a hub of positive reproductive & sexual health

www.hiveonline.org

Factors that **INCREASE RISK** of passing HIV to baby while breastfeeding

- **Detectable** viral load
- Lower T-cell count
- Length of breastfeeding (the longer a woman breastfeeds, the higher the risk)
- Newly diagnosed (if a woman gets HIV while pregnant or breastfeeding)
- Breast infection or cracked/bleeding nipples
- And in resource-limited settings with women **NOT** on ARVs, mixed feeding of breast milk plus other liquids or food.

Factors that **LOWER** but **DO NOT ELIMINATE** the **RISK** of passing HIV to baby while breastfeeding

- **Undetectable** viral load
- Antiretroviral medications (both mother and baby)
- Prevention of breast infections (contact a lactation consultant or breastfeeding support)

Alternatives to Breastfeeding

Deciding what is Best for You and Your Family

CONSIDERING YOUR OPTIONS MAY BRING UP DIFFERENT FEELINGS AND EMOTIONS. Some women may feel sad at not being able to breastfeed their infant. Some women fear their HIV status will be disclosed in their community if they do not breastfeed.

YOU ARE NOT ALONE.

Talk with your provider and find out what support is available.

Options to Discuss with your Provider:

Milk Bank

- Provides donated, pasteurized breast milk to families in need
- Baby gets all of the nutrients in breast milk
- Zero risk of passing HIV to your baby – breast milk is tested to make sure it is safe
- May be covered by public/private insurance

Check out: **Human Milk Banking Assoc. of North America** www.hmbana.org **OR National Milk Bank** <http://www.nationalmilkbank.org>

Wet Nurse

- When another woman breastfeeds your baby
- Baby gets all of the nutrients in breast milk
- The woman who breastfeeds will need to be tested for HIV before and after breastfeeding

Flash Heating

- A technique that involves heating expressed breast milk
- Does not appear to destroy nutrients in breast milk
- Destroys HIV if done correctly
- **Takes a lot of time and planning**

Check out: <http://www.eatsonfeetsresources.org>

Formula Feeding

- Zero risk of passing HIV to your baby
- You can still closely bond by holding your baby skin-to-skin
- Use iron-fortified formula to prevent anemia

Check out [this brochure](#) about bonding with your baby



Photo Credit: Huffington Post

For More Info:

- **HIVE:** a hub of positive reproductive and sexual health
(415) 206 - 8919 <http://www.hiveonline.org/>
- **National Perinatal HIV Hotline:** Connects pregnant women with appropriate health care. Offers clinician to clinician consultation 24/7
(888) 448 - 8765 www.nccc.ucsf.edu
- **Women, Infants, and Children (WIC):** Provides supplemental foods, health care referrals, and nutrition education
(888) 942 - 9675 <http://www.fns.usda.gov/wic>
- **The Well Project:** HIV Resource Center for Women
<http://www.thewellproject.org/>



Questions?

For more info,
check out

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Disclosure: Alternatives to breastfeeding may involve “disclosure” – telling someone your HIV status. Disclosure is not always a one-time event – it is a process. You may be thinking about that now and may think about it in the future. **Talk to your provider to get support with disclosure.**