



THINKING ABOUT HAVING A BABY?

FOR MEN LIVING WITH HIV WITH HIV-NEGATIVE FEMALE PARTNERS

Advances in HIV treatment and prevention make creating a family a safe, exciting option for many men who are living with HIV. For serodifferent couples (where one partner is living with HIV and the other is not), there are many effective strategies to help prevent passing on HIV when trying to get pregnant.

Every couple has a unique story and will weigh each option to decide what is best for their family. If the birthing parent remains HIV negative during pregnancy and while chest/breastfeeding, there is zero chance the baby will get HIV.

Getting Ready

Before trying to get pregnant, talk to your health care provider about your health.

Step 1. Undetectable=untransmittable

HIV treatment helps keep people living with HIV healthy and helps get the virus down to an undetectable level. "Undetectable" means that a test cannot detect the virus in a blood sample from a person living with HIV. Someone who is undetectable for 6 or more continuous months while on HIV treatment does not transmit the virus during sex.

Undetectable doesn't mean that there's no HIV present in the blood. It means the virus is being controlled. This concept is also known as or U=U, short for "undetectable=untransmittable."

Step 2. Get tested and treated for sexually transmitted infections (STIs)

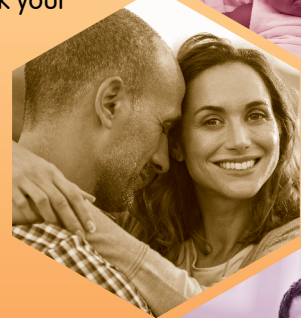
STIs can affect your fertility and, if passed on to your partner, may be dangerous during pregnancy and delivery. Many STIs have no symptoms. It is important for you and your partner to get tested and treated for STIs before trying to get pregnant.

Step 3. Improve your health

Planning for pregnancy is a great time to think about your nutrition, exercise habits, and overall health.

Talk to your health care provider about improving your health and managing any medical conditions like hepatitis C, diabetes, high blood pressure, obesity, or asthma. Make sure all vaccines (shots) and screening tests are up to date for you and your partner.

Smoking decreases fertility, so avoid smoking to increase your chance of getting pregnant. Ask your provider about ways to help you and your partner avoid smoking, drinking alcohol, and using drugs when preparing for and during pregnancy.



Tools for Preventing HIV When Trying to Have a Baby

Before trying to have a baby, it's helpful to understand ovulation and fertilization. Ovulation occurs when an egg is released from the ovary and travels down the fallopian tube to the uterus. Fertilization occurs when the egg and sperm meet. The best time to have sex to increase the chance of getting pregnant is on the day of ovulation and within 24 hours after.

Ovulation test kits can help determine when your partner is most likely to get pregnant. They are available over the counter and test urine for hormones that increase when ovulation is about to begin.

The options below can be used alone or together. Your health care provider can help you sort through the options.

U=U

If a person living with HIV has an undetectable viral load for 6 months or more, they cannot transmit HIV through sex. You and your partner may decide the options below add an extra layer of protection. Or, you may decide they are unnecessary if you maintain an undetectable viral load while trying to get pregnant.

PrEP

PrEP or pre-exposure prophylaxis is a pill to help keep your partner HIV negative. When taken as prescribed, PrEP is highly effective. It's safe and generally well tolerated. Most insurance plans (public and private) cover PrEP.

PrEP works for women, men, people of transgender experience, people of all sexual orientations and gender identities, youth, and people who inject drugs.

PrEP works because the drugs in the pill prevent HIV from multiplying. PrEP must be taken as prescribed for it to work. PrEP is safe to use while trying to get pregnant and during pregnancy and breastfeeding/chestfeeding.

Timed sexual intercourse

Timed intercourse is when you have sex without a condom only during ovulation. If your viral load is detectable, then your chance of passing on HIV goes down if you have condomless sex only during the time when your partner is most likely to get pregnant. Your partner can use an over-the-counter ovulation predictor kit to test urine for hormones that go up when ovulation is about to begin.

Assisted reproductive technologies

Conception requires a sperm, an egg and a uterus. Many couples choose to get pregnant with the help of assisted reproductive technologies. An increasing number of fertility clinics offer these procedures to HIV-affected individuals, couples, and co-parents. Generally, fertility clinics require the person living with HIV has an undetectable HIV viral load. Sperm washing is also routinely done for all assisted reproductive procedures. Sperm washing separates the sperm from seminal fluid, which can contain HIV.

In vitro fertilization (IVF)

A provider removes the eggs and a lab fertilizes them with washed sperm. The provider places the fertilized eggs directly into the uterus. IVF may increase the possibility of genetic problems and the chance of having twins or triplets.

Intrauterine insemination (IUI)

A provider injects prepared sperm directly into the uterus during ovulation. You and your partner may choose to have your sperm prepared via sperm washing, or use sperm from a known or anonymous donor.

Adoption

More than 2% of U.S. children are adopted. You can adopt from foster care, through private companies within the U.S., and from other countries through private organizations and international government entities. The Americans with Disabilities Act of 1996 prohibits discrimination based on HIV status. However, people living with HIV—as well as single parents, same-sex partners, and trans people—may still face discrimination and stigma depending upon where you live. You may decide to seek legal assistance and connect with local adoptive parent support groups to help you on your family-building journey.

