Breastfeeding for HIV+ Mothers in the US

It is recommended that women with HIV in the United States DO NOT breastfeed to prevent passing HIV to their baby, according to the World Health Organization, American Academy of Pediatrics, and Centers for Disease Control. However, many women may consider breastfeeding. It is important to learn the risks and benefits, as well as other options. Talk to your provider to get the support and care you need to make an informed decision that is best for you, your baby, and your family.

This document was created to support you. Most information found online is aimed for women who do not live in the US and can be confusing when considering recommendations.

**Benefits of Breastfeeding**

**FOR THE MOTHER**
- Ovarian Cancer
- Breast Cancer
- Postpartum Blood Loss
- Postpartum Depression

**LOWERS RISK of:**
- Respiratory tract disease
- Ear infections
- Gastrointestinal infections
- Sudden Infant Death Syndrome (SIDS)

**FOR THE BABY**
- Best source of nutrition
- Helps with brain development
- Helps protect against infections and illnesses
- Helps protect against future illnesses:
  - Diabetes
  - Asthma
  - Obesity

**LOWERS RISK of:**
- Ovarian Cancer
- Breast Cancer
- Postpartum Blood Loss
- Postpartum Depression

The most important things you can do to limit the risk of passing HIV to your baby while breastfeeding is strictly adhering to antiretroviral treatment (both mother and baby) AND exclusively breastfeeding. Together, this can decrease your baby’s risk to 0-3%.*

(USAID, 2010)

* There are case reports of transmission via breastfeeding when women have been adherent to their ARV treatment and exclusively breastfed.

**BREASTFEEDING WITHOUT ANTIRETROVIRAL MEDICATIONS:**
Every month you breastfeed without ARVs, there is a 1% INCREASE in risk of passing HIV to your baby.
(World Health Organization, 2006)

**Factors that INCREASE RISK of passing HIV to my baby.**
- Lower T-cell count
- High viral load
- Length of breastfeeding – the longer a woman breastfeeds, the higher the risk
- Newly infected with HIV – if a woman tests positive while pregnant or breastfeeding
- Mixed feeding – breast milk AND anything else (such as formula, baby food, water, or juice)
- Breast infection or cracked/bleeding nipples
- Open sores in baby’s mouth

**Factors that LOWER RISK of passing HIV to my baby.**
- Low viral load
- Antiretroviral medications (ARVs; both mother and baby)
- Exclusive breastfeeding (breast milk WITHOUT formula, baby food, water, or juice)
- Prevention of breast infections – contact a lactation consultant for breastfeeding support
Alternatives to Breastfeeding for HIV+ Mothers in the US

Deciding what is Best for You and Your Family
Considering your options may bring up different feelings and emotions. Some women feel sad at the loss of 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.

Milk Bank
Provides donated 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
A certain time frame may be covered by public/private insurance

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 destroy nutrients in breast milk
Destroys HIV
Takes a lot of time!

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

For More Information:
Bay Area Perinatal AIDS Center
(415) 206 - 8919
http://hiv.ucsf.edu/care/perinatal.html

National Perinatal HIV Hotline
(888) 448 - 8765
www.nccc.ucsf.edu
Connects HIV-positive pregnant women with appropriate health care
Offers clinician to clinician consultation 24/7

Human Milk Banking Assoc. of North America
(817) 810 - 9984
www.hmbana.org
A certain time frame may be covered by public/private insurance
A social worker may be able to help you receive breast milk

National Milk Bank
http://www.nationalmilkbank.org

Women, Infants, and Children (WIC)
(888) 942 - 9675
http://www.fns.usda.gov/wic
Provides supplemental foods, health care referrals, and nutrition education

Flash Heating
http://www.eatsonfeetresources.org

HIV Resource Center for Women
http://www.thebody.com/index/whatis/women.html
www.thewellproject.org

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