



Thinking about having a baby?

A Resource for HIV+ Men with Female Partners



Advances in HIV treatment and prevention make starting a family a safe, exciting option for many men living with HIV. There are a **number of options** available for serodifferent couples (when one partner is HIV+ and the other is HIV-) who want to have a family.

This pamphlet was written to help you and your partner **make informed decisions** about how to have a family.



What are my options for having a family?

There are several strategies that have been proven to decrease the risk of passing HIV to your partner while trying to have a child together.

Every couple has a unique story and will weigh the pros and cons of each option to decide what is best for their family. **If mom remains HIV-negative during pregnancy and while breastfeeding, there is zero risk the baby will get HIV.**

Getting Ready: This is a great time to make sure you both are in the best shape possible. Before trying to get pregnant, talk to your health care provider about improving your health.

Step 1. Getting to Undetectable

Many studies show that **with a lower viral load, you are less likely to pass HIV to your partner.** Having an undetectable HIV viral load (so low the test cannot detect HIV in your blood even though it is still present in your body) dramatically lowers the risk of you passing HIV. **Poorly controlled HIV can also be associated with decreased fertility,** making it more difficult to get pregnant. Your provider may want to do a fertility evaluation.

Step 2. Get Tested and Treated for Sexually Transmitted Infections (STIs)

It is important for both you and your partner to **get tested and treated for STIs** before trying to get pregnant. Many STIs don't cause symptoms. These infections can increase the chances of your partner getting HIV, may lower your chances of her getting pregnant, and may be dangerous during pregnancy and delivery.

Step 3. Improve Your Health

Planning for pregnancy is a great time to think about your and your partner's overall health, nutrition and exercise. If you have medical conditions like **diabetes, high blood pressure, obesity or asthma,** talk to your medical provider about improving your health. Make sure all of your and your partner's vaccines and screening tests (like pap smears) are up-to-date. If you have Hep C, consider getting treated before getting pregnant.

Quit smoking to increase your chances of getting your partner pregnant. Smoking decreases fertility in men and women. Children exposed to secondhand smoke often have more health problems like asthma. Ask your provider for helpful ways for you and your partner to quit smoking, drinking alcohol, and using drugs.



Photo Credit: http://www.who.int/features/2012/living_hiv/en/

Minimizing the Risk of HIV Transmission When Trying to Get Pregnant

Understanding Ovulation & 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.
- To increase the chance of getting your partner pregnant, have sex on the day of ovulation and 24 hours later.
- Ovulation test kits can be bought for about \$20 and test urine for hormone levels that go up when ovulation is about to begin.



Timed Sexual Intercourse

What is it? Timed intercourse is when you have sex without a condom ONLY when your partner is ovulating. Your chances of pregnancy increase and the risk of getting HIV decreases because you only have unprotected sex when you have the best chance of conceiving a baby.

How it works: Your partner will need to use an ovulation kit to determine the 1-2 days when she is ovulating. Have sex without a condom ONLY while ovulating. During all other times, continue using condoms to prevent passing HIV to your partner.

Important Considerations: It is important that your HIV is under control. An undetectable viral load reduces the risk of passing HIV greatly. It is best to have an undetectable viral load for at least 6 months before trying to get pregnant. Get tested and treated for sexually transmitted infections.

For a video demo of how timed intercourse works, check out this link: <http://www.hiveonline.org/timed-intercourse-for-pregnancy/>

Pre-Exposure Prophylaxis

What is it? Pre-exposure prophylaxis (PrEP) is when the HIV-negative partner takes **HIV medications as a prevention method** against HIV. The medications, combined with timed intercourse, increase chances of pregnancy and reduce chances of HIV transmission.

How it works: Studies show PrEP can decrease the risk of your partner getting HIV by over 90% if medications are taken correctly. **Talk to your partner about the possibility of her taking PrEP.**

Important Considerations: This method requires your partner to take medicine every day, and these meds may have side effects. Anyone taking HIV medicine should be followed by a medical provider. Some may also choose to continue PrEP during pregnancy and breastfeeding. Talk to your medical provider about this.

Assisted Reproductive Technologies

There are centers offering assisted reproductive procedures to HIV-affected couples. An undetectable HIV viral load is required.

Sperm Washing: Your **sperm are separated from other fluid and cells** that may contain HIV and then used for fertilization via intra-uterine insemination (IUI) or in-vitro fertilization (IVF).

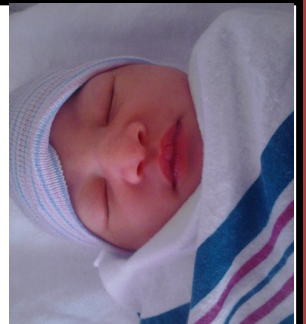
Intrauterine Insemination (IUI): In this method, **prepared sperm is injected directly into your partner's uterus** when she is ovulating. You may choose to have your sperm prepared by sperm washing or to use donor sperm.

In Vitro Fertilization (IVF): Your partner's eggs are removed by an outpatient procedure. Your semen is prepared for fertilization via sperm washing, and **her eggs are fertilized in a lab with prepared sperm**. The fertilized eggs are placed directly into your partner's uterus. IVF may increase the risk of genetic problems and having twins or triplets.

For more info or with help connecting to care, contact HIVE/ Shannon Weber at 415-206-8919 or Shannon.weber@ucsf.edu

Adoption

More than 2% of U.S. children are adopted. Adoption is arranged by state child welfare agencies or by private agencies under contract with states. The Americans with Disabilities Act of 1996 prohibits discrimination based on HIV. As a result, adoption agencies are not allowed to reject prospective parents based on HIV status. The costs vary by agency and there may be wait times. You can also choose to adopt from foster care.



Questions?

For more info,
check out
www.hiveonline.org



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