

By Rebecca Denison

Getting Pregnant When One or Both Partners is HIV+

If you have decided to have a child, there are strategies for getting pregnant that reduce the risks to the mother, the father and the baby.

The chances of getting pregnant will go up and the risk of an uninfected partner getting HIV will go down if you only attempt to conceive when you are fertile. You can tell when a woman is fertile if:

- It's 13-15 days before her next period.
- She feels cramping or a pinch on one side of her abdomen when she releases an egg (ovulates).
- Her vaginal discharge increases and it's thin, clear and stretchy (like raw egg white).
- An ovulation test kit says her egg's being released.

Another way for a woman to tell when she's fertile is by tracking her temperature on a chart. Here's how:

- Take temperature first thing in the morning.
- Record temperature every day for a few months.
- Normally the temperature will be lower before ovulation and higher after.
- She is most fertile during or right after this temperature change.

A man can improve his fertility by not soaking in a hot bath or a hot tub; not using alcohol, marijuana and other drugs; not wearing tight pants.

You can lower the risk of transmitting HIV to the baby or an uninfected partner by reducing your viral load (or your partner's), before trying to get pregnant. Having an undetectable viral load does not eliminate the risk, but it does reduce it.

Once viral load is undetectable and the woman is in a fertile period of her cycle, there are a number of ways to try to get pregnant:

If the woman is HIV+, but the man is not:

Zero risk - "Artificial insemination"

- Have the man ejaculate (cum) in a clean cup. Use a syringe (with no needle) to transfer the man's semen into the woman's vagina. It's best if the woman is on her hands and knees, shoulders down and hips in the air, and stays there as long as possible. This can be done in a clinic or at home.

Very low risk

- Have sex with a lubricated latex condom with no spermicide. After sex, withdraw the penis from the vagina with the condom still on. Use a syringe to transfer semen from the condom to the woman's vagina.

Medium risk

- Wear a lubricated condom without spermicide, but poke a tiny hole in it for the semen to get through. Warning: the hole increases the risk of the condom breaking.
- Wear a condom during sex until the man's ready to ejaculate and then take the condom off and ejaculate inside the woman.
- Have unsafe sex only when the woman is fertile.

Most risk

- The riskiest way is to have sex without a condom at any time of the month until the woman gets pregnant.

If the man is HIV+ but the woman is not:

There is currently no "zero risk" method for a couple in this situation to conceive. Such couples are often encouraged to look into adoption, foster parenting or using artificial insemination with semen from an uninfected (tested) donor.

To reduce, but not eliminate, the risk of a man infecting a woman during conception:

- Treat any STDs or vaginal infections.

- Avoid anything that could cause vaginal irritation or lesions.
- Have a fertility check up.
- Talk with your doctor about whether the woman should take HIV drugs to prevent getting infected.

A process called sperm washing can also reduce the risk, as can having sperm evaluated for evidence of virus. Unfortunately, there are very few places in the U.S. that do this. Two resources are:

- Mark Sauer, MD, Columbia University, NY at www.columbiaivf.org.
- Duncan Holly Biomedical at www.duncanholly.com.

If both partners are HIV+:

If you are both HIV+ and have unprotected sex, there is a possibility that one of you may pass on a worse or drug-resistant strain of HIV to the other. This is called "reinfection."

To reduce this theoretical risk:

- Follow your drug regimen exactly to prevent HIV from developing resistance.
- Consider waiting until you both have undetectable viral loads before having unprotected sex.
- Think about sperm washing.

Go to your doctor for "preconception" health care and counseling before you start trying to have a baby. Your doctor can make referrals to specialists and advise you on medical conditions or other issues that may affect your pregnancy.

A more-detailed version of this article appears in the March 2002 issue of *WORLD* (Women Organized to Respond to Life-Threatening Diseases) magazine. Visit *WORLD*'s website at: www.womenhiv.org. 