

Background and Aim

The British HIV Association (BHIVA) defines guidelines for management of patients with HIV in pregnancy and postpartum. This study compared these to local clinical management in Croydon Sexual Health Department, to identify areas for improvement.

Methods

- Retrospective audit of 18 pregnant and post-partum patients April 2020 – Dec 2021
- Of these, fifteen delivered by December 2021, two remained pregnant, and one miscarried.
- Data was compared to BHIVA's sixteen auditable outcomes.
- Four outcomes were not applicable to our cohort; outcomes 4, 6, 7, 13. Outcome 5 was not assessed.

Results

Outcome 1: Three patients were diagnosed during pregnancy, 100% received sexual health screening.
Outcome 2: One patient started anti-retroviral therapy (ART) within two weeks of diagnosis.
Outcome 3: 100% were commenced on ART by 24 weeks.
Outcome 8: No patients had invasive testing before HIV status was known.
Outcome 9: 40% had emergency caesarean sections due to early labour/delivery with detectable viral load, or obstetric complications.
Outcome 10: Two infants required three-drug post-exposure prophylaxis (PEP) due to detectable maternal viral load; both administered within 2hrs of delivery.
Outcome 11: 100% of infants received PEP within 4 hours.

Outcome 12: No infants tested positive for HIV on PCR.
Outcomes 14/15: 93.3% of infants and 100% of mothers were reviewed by six weeks post-partum.
Outcome 16: Mental health assessment was documented at booking in 94.4%, post-partum in 71.4%.

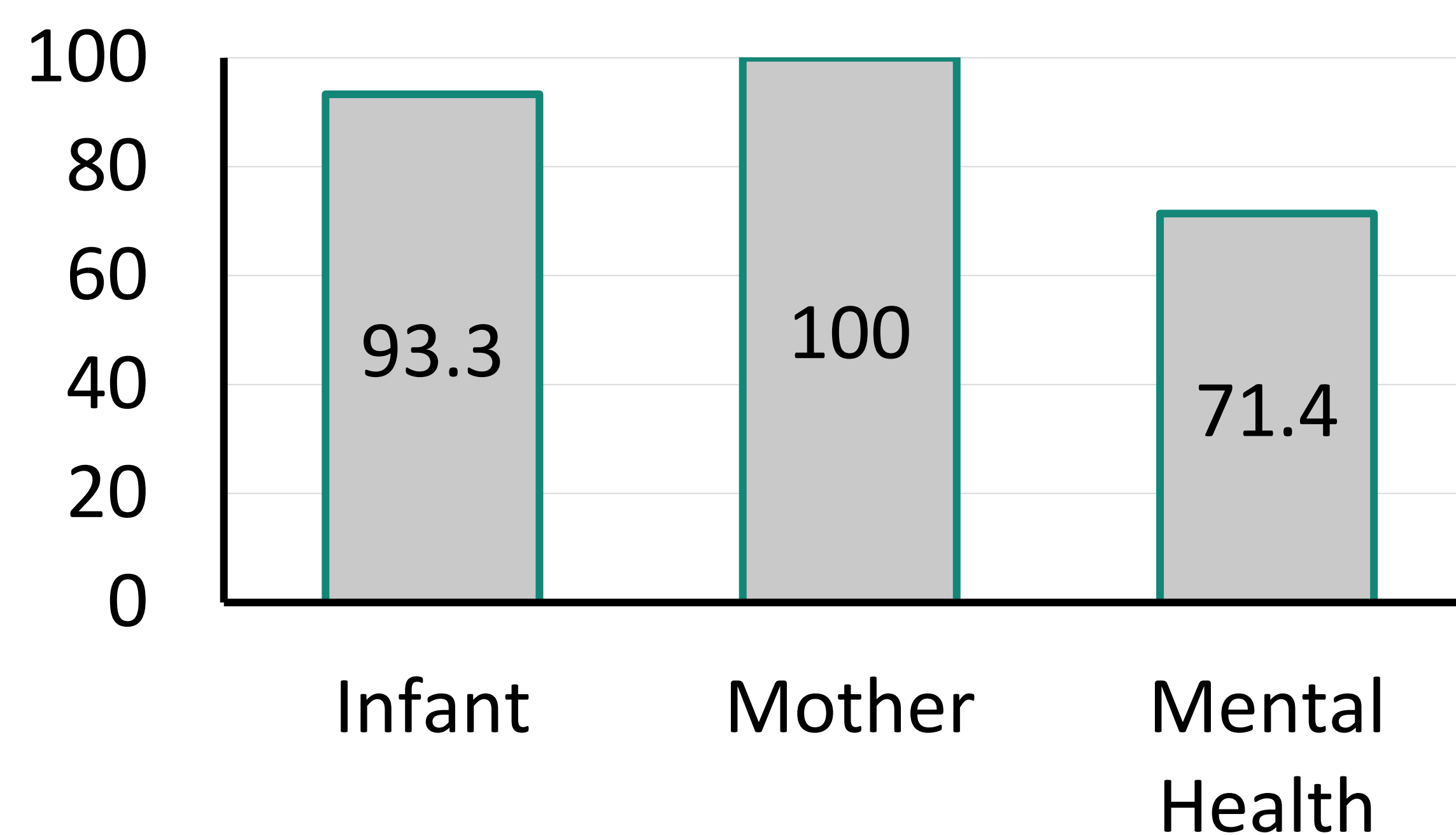


Figure 1. Percentage of patients who received routine postnatal review compared to postnatal mental health review (outcomes 14, 15 and 16).

Discussion and Conclusion

- This study shows good adherence to the BHIVA guidance.
- Delay commencing ART within 2 weeks of diagnosis was due to outstanding investigations in two patients at risk of immune reconstitution inflammatory syndrome.
- Improvement is needed in documenting mental health assessment post-partum.
- Despite a complex caseload and three women with detectable viral loads at delivery there was no vertical transmission of HIV.

References

Gilleece Y, Tariq S, Bamford A et al. British HIV Association guidelines for the management of HIV in pregnancy and postpartum 2018. *HIV Med* 2019; **20 Suppl 3**: s2-s85.