



# Quick Facts: Perinatal April 2003 – March 2005



## Challenges

- An estimated 6,000 to 7,000 HIV-infected women give birth each year in the United States, resulting in 280 to 370 new perinatal infections.
- Approximately 40% of mothers whose infants are perinatally infected have no documentation of HIV status, despite recommendations that all pregnant women be tested for HIV prenatally.
- About 40% of women of childbearing age are unaware that treatment is available to prevent perinatal transmission.
- Although the acceptability and feasibility of rapid HIV screening in labor and delivery have been demonstrated by the CDC-supported MIRIAD research study (JAMA 2004; 292 219-223), only about 1/3 of U.S. hospitals have rapid HIV testing available to women in labor, and less than half of those have policies or protocols to routinely offer rapid HIV testing to women with undocumented HIV status (CDC unpublished data).
- Studies show that an opt-out testing approach (i.e., pregnant women are told that an HIV test will be included in the standard group of prenatal tests and that they may decline the test) results in higher testing rates than an opt-in approach (i.e., pregnant women receive pre-test HIV counseling and must provide HIV test consent.) However, opt-out testing has not been implemented in many prenatal settings.

## Accomplishments

- Developed a national model protocol to promote rapid HIV screening in labor and delivery when the mother's HIV status is unknown.

- Created partnerships with the American Academy of Pediatrics, the American College of Gynecologists, the American College of Nurse-Midwives, the Health Resources and Services Administration's Bureau of Maternal and Child Health, and the Centers for Medicare and Medicaid Services.
- Collaborated with the American Hospital Association to study perinatal HIV prevention policies and practices at all U.S. hospitals with at least 300 births.
- Created materials on opt-out HIV testing, including a newsletter article, a fact sheet, and questions and answers to distribute to health departments, professional organizations, and healthcare providers seeing pregnant women and women with newborns.
- Completed formative research in 5 cities to learn about obstetrical HIV screening practices by obstetricians/gynecologists and certified nurse midwives. This was in preparation for a social marketing campaign for healthcare professionals to promote opt-out prenatal testing and rapid testing at labor and delivery.
- Provided technical assistance to 16 perinatal HIV prevention grantee sites.
- Funded 5 national organizations to help programs and providers achieve high rates of prenatal HIV testing and to promote rapid HIV testing as the standard of care for women in labor with undocumented HIV status.
- Conducted Enhanced Perinatal Surveillance (EPS) of transmission rates and missed opportunities for perinatal HIV prevention from 1999-2003 in 24 states with CDC-funded grantees with high prevalence of HIV/AIDS among women of childbearing years. During 2004, EPS was conducted as an evaluation in 10 states. During 2005, EPS data collection continues in 8 states.
- Collaborated with the American College of Obstetricians and Gynecologists (ACOG) to study obstetricians' perinatal HIV prevention practices including opt-out testing during prenatal care and at labor and delivery.
- Collaborated with the American College of Obstetricians and Gynecologists on their updated, expanded recommendations for prenatal and perinatal HIV testing.
- Collaborated with the Francois-Xavier Bagnoud Center and the Academy for Educational Development to develop and implement 8 regional strategic planning workshops for hospitals to implement protocols for rapid testing for women in labor. Hospital teams

receive training and assistance with development of action plans, as well as follow-up technical assistance.

- Developed an assessment of perinatal HIV testing rates among a representative sample of delivering women for 14 states, including 12 perinatal HIV prevention grantees.
- Began an evaluation of the opt-out approach to rapid HIV testing for women in labor within the Mother-Infant Rapid Intervention at Delivery (MIRIAD) study.