

*Commentary*

## Prevention of perinatal transmission of HIV

John Franklin\*

Department of Immunology, University of Pennsylvania, Pennsylvania, USA

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### INTRODUCTION

Perinatal HIV transmission occurs when HIV is transferred from an HIV-positive woman to her child during pregnancy, childbirth (also known as labor and delivery), or nursing (through breast milk). Perinatal HIV transmission is also known as mother-to-child HIV transmission. In the United States and Europe, the use of HIV medications and other methods has helped to reduce the risk of prenatal HIV transmission to 1% or less. (HIV medications are known as antiretroviral.)

Women should be tested for HIV before becoming pregnant, or as soon as feasible throughout each pregnancy. The earlier HIV is discovered, the sooner HIV treatment may begin. To avoid perinatal transmission of HIV, pregnant women with HIV should take HIV medications throughout their pregnancy and delivery. In women with a high viral load or an unknown viral load at the time of birth, a planned caesarean delivery can lower the risk of perinatal transmission of HIV. Babies born to HIV-positive mothers should receive HIV medications after delivery to limit the risk of perinatal HIV transmission. Several variables influence which HIV medications new-borns take and for how long they receive them. Despite continued maternal HIV medication treatment after childbirth, a mother with HIV can spread HIV to her infant during nursing. Infant formula is a safe and easily accessible alternative to breast milk in the United States. For these reasons, HIV-positive moms in the United States should not breastfeed their children.

#### HIV medicines prevent perinatal transmission of HIV

HIV-positive pregnant women should take HIV medications to lower the risk of perinatal HIV transmission. HIV medications can be more successful at preventing neonatal HIV transmission if begun early. Women with

HIV who are seeking to conceive should begin HIV treatment before becoming pregnant to avoid perinatal HIV transmission. To avoid perinatal transmission of HIV, pregnant women with HIV should take HIV medications throughout their pregnancy and delivery. HIV medications also preserve the health of the lady. When HIV medications are taken as intended, they prevent HIV from spreading and lower the quantity of HIV in the body (called the viral load). When the level of HIV in the blood is too low to be identified by a viral load test, the viral load is said to be undetectable. When a woman with HIV has an undetectable viral load during pregnancy and delivery, the risk of perinatal transmission of HIV is lowest. Maintaining an undetectable viral load also contributes to the mother-to-be healthy. Some HIV medicines used during pregnancy that are passed from the pregnant woman to her unborn baby via caesarean delivery (also known as a C-section) can reduce the risk of perinatal HIV transmission in women with a high viral load (more than 1,000 copies/mL) or an unknown viral load near the time of delivery. Babies born to HIV-positive mothers are given HIV medications after delivery to lessen the risk of perinatal HIV transmission. Several variables influence which HIV medications newborns take and for how long they receive them.

#### Different ways to prevent perinatal transmission of HIV

Despite continued maternal HIV medication treatment after childbirth, a mother with HIV can spread HIV to her infant during nursing. Infant formula is a safe and easily accessible alternative to breast milk in the United States. For these reasons, HIV-positive moms in the United States should not breastfeed their children. Women living with HIV can speak with their health care professionals about alternate feeding choices before their kids are born, or even if they are already nursing.

\*Corresponding author. John Franklin, E-mail: [linjohn01@edu](mailto:linjohn01@edu)