



Pat Quinn, Governor
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Health Alert: Steps to Further Reduce Mother-to-Child HIV Transmission in Illinois

Dear Colleague:

The success in reducing pediatric HIV infections in the State of Illinois is a direct result of the hard work and continued support of health care providers like you. The U.S. Centers for Disease Control and Prevention (CDC) have recognized our efforts in Illinois as a model statewide program for perinatal HIV prevention¹. **Repeat third trimester HIV testing for all pregnant women** is a critical element of this strategy. The Illinois Department of Public Health (IDPH) believes it is time for Illinois to take this next important step toward elimination of perinatal HIV. The purpose of this Alert is to inform you of this new recommendation and highlight other strategies to continue reducing mother-to-child HIV transmission (MTCT) in Illinois. They are as follows:

1. HIV Testing in the Third Trimester

Standard of Care

Since 2006, the U.S. Centers for Disease Control and Prevention (CDC) has recommended a second HIV test for pregnant women for HIV in their 3rd trimester, preferably at 32-36 weeks of gestation.² This 3rd trimester HIV test is particularly recommended for women who:

- 1) Receive health care in jurisdictions, such as Illinois, with an elevated incidence of HIV or AIDS.
- 2) Receive health care in facilities in which prenatal screening identifies at least one HIV infected pregnant women per 1000 women screened.
- 3) Are known to be at high risk for acquiring HIV i.e. injection drug users and their sex partners, who exchange sex for money or drugs, who are sex partners of HIV infected persons, who have been diagnosed with another sexually transmitted disease within the last year and women have had a new or more than one sex partner during their pregnancy.
- 4) Have signs or symptoms consistent with acute HIV infection.

The American College of Obstetricians and Gynecologists (ACOG) also recommends repeat third trimester testing for women and states that, "Women who are candidates for third trimester testing,

¹ ["CDC commendation for work on HIV prevention"](#) (Press release). Office of the Governor. April 21, 2008.

² U.S. Centers for Disease Control and Prevention, "Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings," September 22, 2006, <http://www.cdc.gov/mmwr/pdf/rr/rr5514.pdf>

including those who declined testing earlier in pregnancy, should be given a conventional or rapid HIV test rather than waiting to receive a rapid test at labor and delivery".³

Third Trimester Testing is Cost Effective

A second HIV test during the third trimester, preferably <36 weeks gestation, is cost-effective. A CDC analysis found repeat testing was as cost-effective as other common health interventions when HIV incidence among women of childbearing age is ≥ 17 HIV cases per 100,000 person-years, as it is in Illinois.⁴

Seroconversion During Pregnancy and Risk of MTCT

Epidemiologic data indicates that expectant women in Illinois stand to benefit from such an effective clinical intervention. In 2010, Illinois reported at least two women who became HIV-positive during pregnancy and transmitted the virus to their infants. In both cases, the women had negative HIV testing upon entry into prenatal care. No risk factors were identified and therefore no repeat third trimester tests were performed. Consequently, maternal HIV infection was undiagnosed and delivery proceeded without any prophylaxis. Both women were diagnosed with HIV well after delivery and both infants were infected.

In light of the CDC and ACOG recommendations and statistical trends in our state, the Illinois Department of Public Health (IDPH) strongly recommends that all health care providers and facilities serving pregnant women in Illinois institute repeat third trimester HIV testing for all women into their clinical protocols. This is particularly vital for those facilities that meet any of the criteria specified above.

2. Updating Clinical Protocols

With the addition of these recommendations, HIV testing protocols for pregnant women should include the following according to the Illinois Perinatal HIV Prevention act:⁵

- Opt-out HIV testing upon entry into prenatal care for ALL pregnant women
- Opt-out repeat HIV testing in the 3rd trimester (<36weeks) for ALL pregnant women
- Rapid HIV testing for any woman who presents to labor and delivery without a documented 3rd trimester HIV test
- Mandatory HIV testing of newborn if no maternal documentation of HIV status is available prior to delivery
- Mandatory reporting of all preliminary positive rapid HIV test results within 24 hours to the State of Illinois' 24/7 Perinatal HIV Hotline at 1-800-439-4079.

³ [Prenatal and perinatal human immunodeficiency virus testing: expanded recommendations. ACOG Committee Opinion No. 418](http://www.acog.org/About_ACOG/ACOG_Departments/HIV/~media/Committee%20Opinions/Committee%20on%20Obstetric%20Practice/co418.pdf). American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2008; 112:739-42.

⁴ Sansom SL, Jamieson DJ, Farnham PG, Bulterys M, Fowler MG. [Human immunodeficiency virus retesting during pregnancy: costs and effectiveness in preventing perinatal transmission](http://www.acog.org/About_ACOG/ACOG_Departments/HIV/~media/Committee%20Opinions/Committee%20on%20Obstetric%20Practice/co418.pdf). *Obstet Gynecol* 2003;102:782-90.

⁵ The Perinatal HIV Prevention Act. (410 ILCS 335/) (Source: P.A. 93-566, eff. 8-20-03.)
<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=2483&ChapterID=35>

Treatment guidelines for the care of pregnant HIV-positive women and their infants change often. For the most up-to-date treatment recommendations, contact the 24/7 Perinatal HIV Hotline at 1-800-439-4079 and visit their website at www.hivpregnancyhotline.org.

3. Assuring Access to Care and Support Services

All HIV-positive pregnant and postpartum women should be actively linked to medical care and case management.

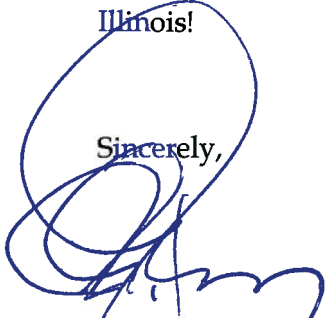
- The State of Illinois supports the 24/7 Illinois Perinatal HIV Hotline at 1-800-439-4079 to facilitate linkage to medical care and case management for women throughout the state, including perinatal HIV enhanced case management services for the highest-risk pregnant women.

Also included with this letter is a resource kit for CDC's One Test. Two Lives.™ Campaign, aimed at increasing HIV testing among pregnant women with the goal of eliminating perinatal HIV transmission.

If you have any questions about what this recommendation means for your facility please contact Christi Jackson, Perinatal Prevention Administrator at 312-814-4846. Additionally, if your facility has implemented this recommendation, IDPH would appreciate hearing about your efforts to institute 3rd trimester testing.

Thank you for all your efforts to reduce mother to child transmission of HIV in the State of Illinois!

Sincerely,

A handwritten signature in blue ink, appearing to read 'LaMar', is written over the word 'Sincerely,'. The signature is stylized and somewhat cursive.

LaMar Hasbrouck, MD, MPH