

Monitoring clinical practice of BHIVA supported breastfeeding guidelines for women living with HIV in the UK

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Conflict of interest

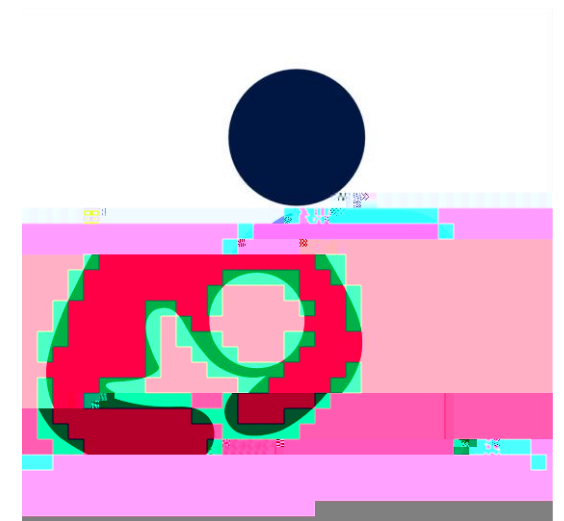
I have no conflict of interest to declare.





Objective

To describe the characteristics and clinical monitoring of BHIVA supported BF among WLWH in the UK in the period 2012-2021



Methods ISOSS data on supported BF

Enhanced BF surveillance is part of the secure online data collection for maternity and paediatric respondents and **covers all cases of planned/supported BF**

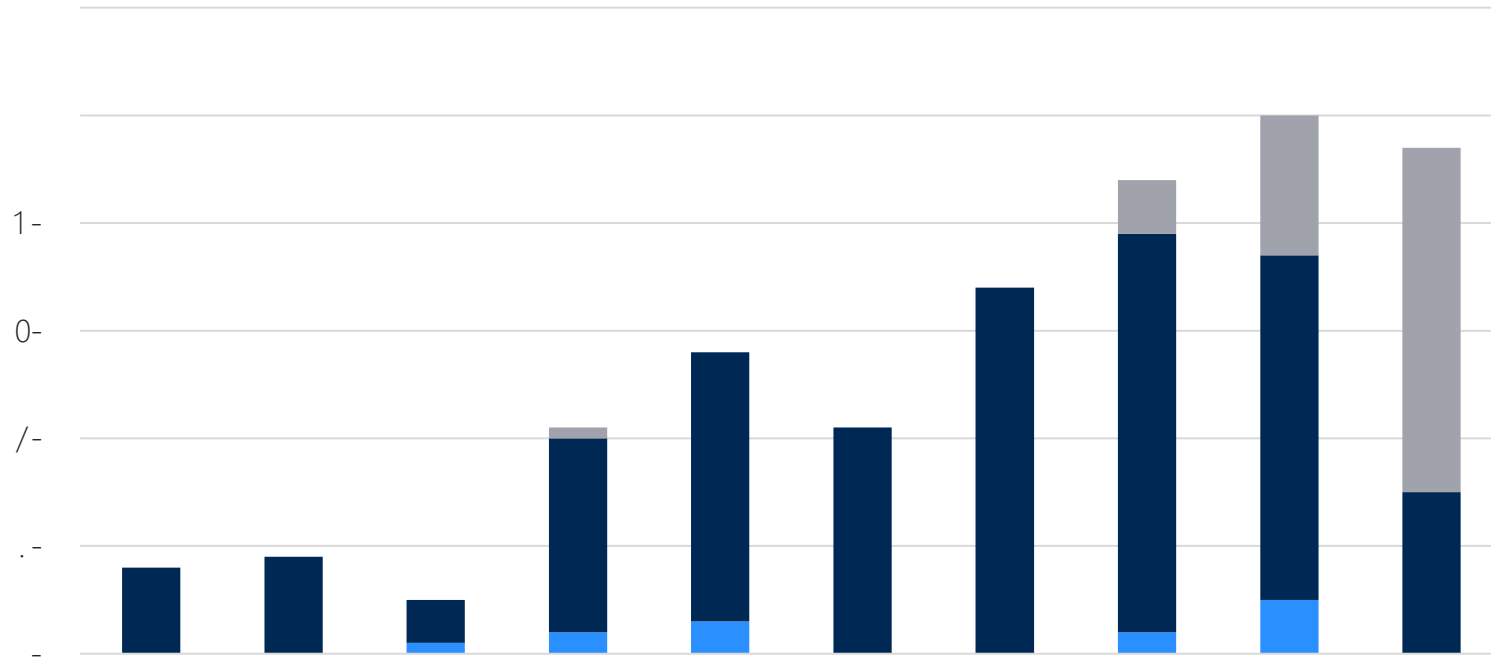
Enhanced surveillance data for cases reported prior to launch of enhanced

Questions include:

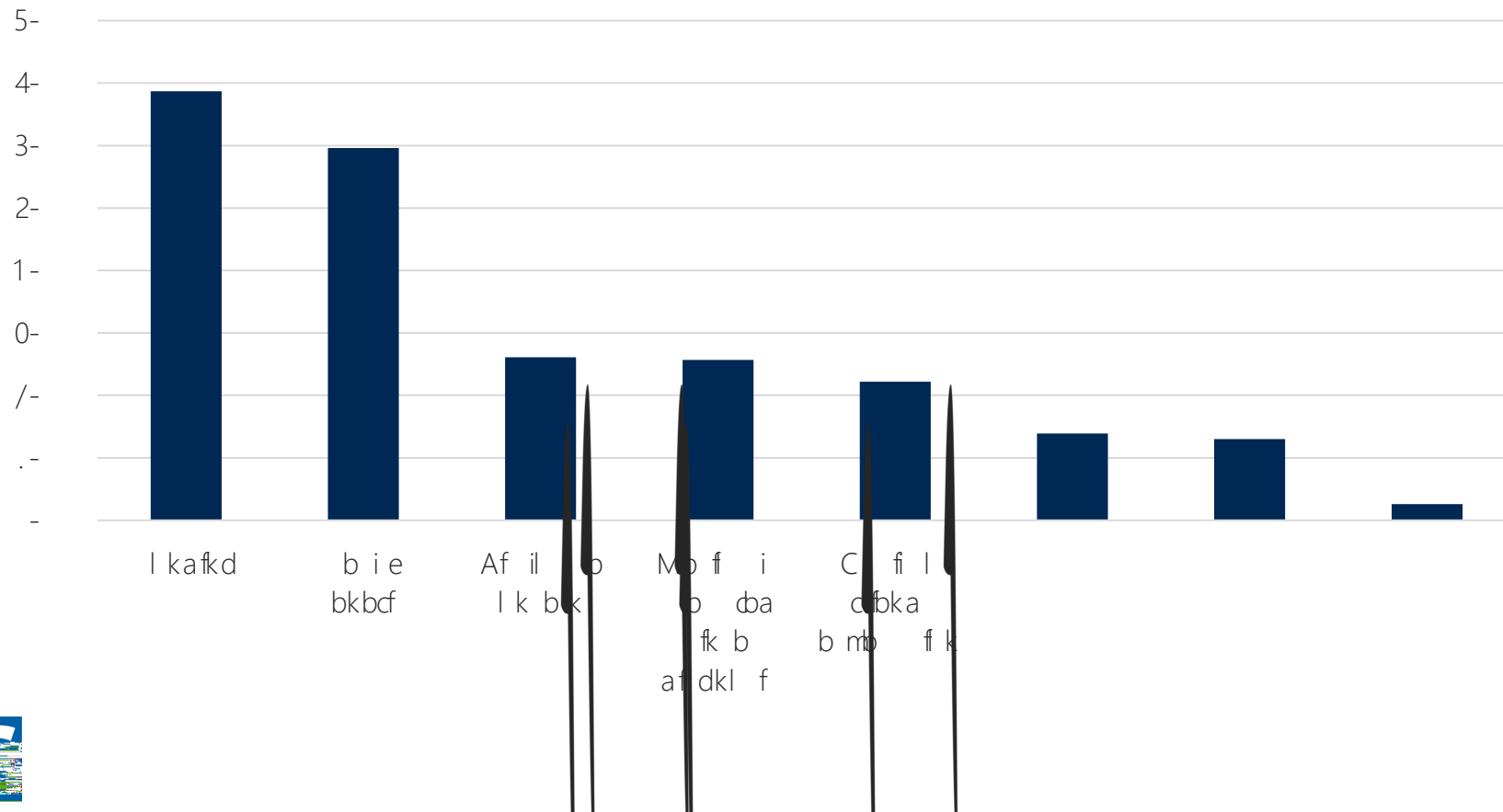
- Reasons for wanting to breastfeed (respondent-reported)
-
- Duration of BF
- Whether any mixed feeding occurred before 6 months of age
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Results cases of BF



Results reasons* for wanting to breastfeed



Results confirmed supported BF

Among 8,513 live birth deliveries, **203 (2.4%) WLWH were supported to breastfeed**, with some BF more than one infant

Maternal characteristics of cases of supported BF (N=203)	N (%) or median (IQR)
Diagnosed before pregnancy (n=201)	190 (95%)
Born abroad * (n=201)	170 (84%)
Age at delivery (years)	35 (31-40)
Duration of BF (where stopped) (N=150)	
Range	1 day 2 years
Number of days	56 (23-140)

Number of WLWH supported to breastfeed increased 4-fold from **<10 per year in 2012-14 to 40-50 per year in 2019-2021**

*79% (154/197) of women were born in sub-Saharan Africa
IQR: interquartile range



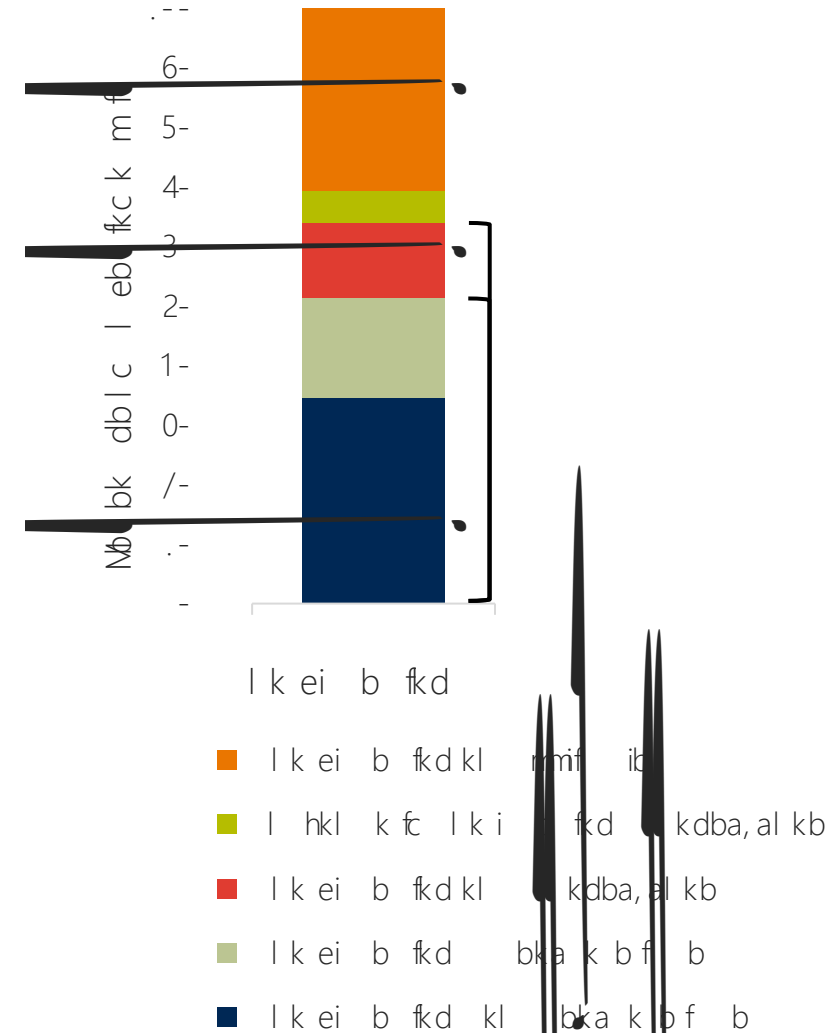
Results monthly testing (N=150*)

In 46 cases, monthly testing was known to be not applicable due to BF duration

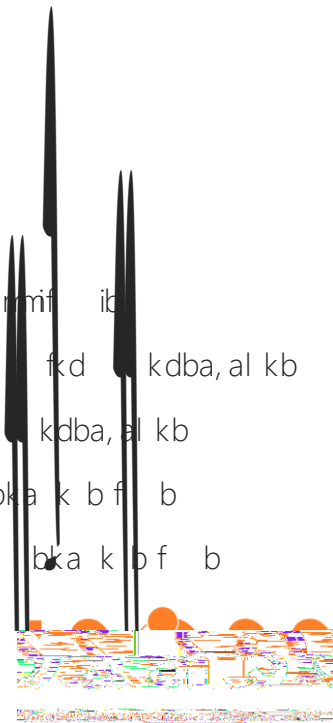
Where reported and applicable, 80.2% (77/96) of mother-infant pairs had monthly testing as per BHIVA guidelines

In 11 cases, reasons for not having monthly testing included scheduling miscommunications, parental requests, long-term maternal virological suppression

Attendance issues were reported in 32.5% (25/77) of cases with monthly testing reported



* BF known to have stopped by December 2021



Results BF cessation & infant follow-up

Cessation of BF was part of a plan to stop for most



Conclusion

The number of women choosing supported BF in the UK has increased in recent years

Pictures of supported BF have varied in terms of duration of BF and attendance for monthly testing

There have been no vertical HIV transmissions identified among those choosing supported BF, though some infants have been lost to follow-up or are still in follow-up

Ongoing monitoring of clinical management and vertical transmission outcomes remains essential to support future guidelines and safe BF for those who choose to breastfeed



