

# FOLLOW-UP OF EXPOSED NEWBORNS TO HIV IN PREGNANCY IN A TERTIARY HOSPITAL



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## BACKGROUND AND IMPORTANCE

The rate of new HIV diagnoses due to **vertical transmission (VT)** in Spain is very low and the new cases are related to failures in the implementation of prevention measures.

## AIM AND OBJECTIVES

**Identify and quantify risk factors (RF) for VT in the prenatal, intrapartum and postnatal periods and to evaluate the adequacy of antiretroviral (ART) prophylaxis, the appearance of adverse events and follow-up during the first year of life.**

## MATERIAL AND METHODS

A descriptive, retrospective and observational study was designed which included all **children** who were **followed up** in the hospital **during 2010-2020**. The main RFs that could contribute to VT were defined in the three periods (prenatal, intrapartum and postnatal periods) and demographic and clinical variables of mothers and children were collected. The follow-up was recorded during the first year.

## RESULTS

A total of **30 children**, of **22 HIV+ mothers**, were included. They were young women, mostly from immigrant communities and without toxic habits.



### Mothers

**17%** were **diagnosed** during the **pregnancy controls**

**20%** did **not take ART treatment** at the **beginning of pregnancy**

At **birth time**, **34.5%** had **detectable viral loads (VL)**.

### Newborns



**57%** were born by **cesarean section** and **13%** were **premature**

**RF detected** correspond prenatal period (62.5%), followed by the intrapartum (26.8%) and the postnatal period.

The **most frequent RFs** were **detectable VL** followed by **premature rupture of membranes**.

**All the children received prophylaxis** that was well tolerated, observing discrepancies regarding the regimen received.

All children could be **analytically confirmed the absence of VT**, in some cases after 18 months.

## CONCLUSION AND RELEVANCE

**None of the newborns** became **infected** with HIV.

Although the majority of mothers carried out controls during pregnancy, the **absence of ART before/during pregnancy** stands out, together with **detectable CVs as the main RF detected**.

**Information campaigns** are necessary for the prevention of VT viewing during pregnancy, as well as, training of professionals and **constant update of protocols** to guarantee the correct management of children exposed to HIV.

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