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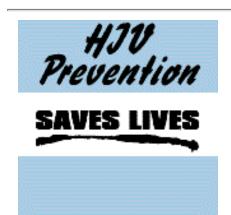
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Status of Perinatal HIV Prevention: U.S. Declines Continue



During the early 1990s, before perinatal preventive treatments were available, an estimated 1,000-2,000 infants were born with HIV infection each year in the United States. Today, the United States has seen dramatic reductions in mother-to-child, or perinatal, HIV transmission rates. These declines reflect the widespread success of Public Health Service (PHS) recommendations made in 1994 and 1995 for routinely counseling and voluntarily testing pregnant women for HIV, and for offering zidovudine (AZT) to infected women during pregnancy and delivery, and for the infant after birth.

Perinatal Prevention Saves Lives and Dollars

On a national level, HIV/AIDS surveillance and other studies continue to demonstrate that perinatal HIV prevention is making a difference, both in terms of lives and resources saved:

- Between 1992 and 1997, perinatally acquired AIDS cases declined 66% in the United States.
- A study conducted in four states (Michigan, New Jersey, Louisiana, and South Carolina) found that the proportion of pregnant women voluntarily tested for HIV increased from 68% in 1993 to 79% in 1996. The percentage of women offered AZT increased from 27% in 1993 to 85% in 1996. However, the study also found that 15% of HIV-infected pregnant women in these states did not receive prenatal care and therefore could not be offered this intervention.
- Among women in CDC's Perinatal AIDS Collaborative Transmission Study (PACTS), AZT

use increased following the publication of PHS guidelines, and the rate of perinatal transmission dropped from 21% to 11%. The PACTS study includes women from four cities - New York City, Newark, Atlanta, and Baltimore.

- Prenatal care that includes HIV counseling and testing and AZT treatment for infected mothers and their children saves lives and resources. Without intervention, a 25% mother-to-infant transmission rate would result in the birth of an estimated 1,750 HIV-infected infants annually in the United States, with lifetime medical costs of \$282 million.
- The estimated annual cost of perinatal prevention in the United States is \$67.6 million. This investment prevents 656 HIV infections and saves \$105.6 million in medical care costs alone a net cost-savings of \$38.1 million annually.

HIV transmission from mother to child during pregnancy, labor, and delivery or by breast-feeding has accounted for 91% of all AIDS cases reported among U.S. children. The best ways to prevent infection in children are to prevent infection in women and to encourage early prenatal care that includes HIV counseling and testing.

Perinatal HIV Transmission Heavily Affects Communities of Color

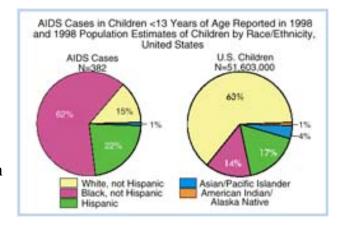
Women of color and their children have always been disproportionately affected by the HIV epidemic. In 1998, of the 10,998 totalAIDS cases reported among U.S. women, 8,830 (80%) were amongAfricanAmerican and Hispanic women. Of the 382 children reported withAIDS in 1998, 321 (84%) were African American and Hispanic (see chart below). We must continue to improve HIV prevention efforts for women of color and ensure that interventions provide the information, skills, and support needed to reduce their HIV-related risks.

What Else Is Needed?

• Perinatal HIV prevention activities must help ensure that all HIV-infected women are reached early in pregnancy with prenatal care and with the opportunity to learn their HIV status. If infected, they should be offered preventive therapy to improve the chances that their children will be born free of infection and to ensure quality HIV care and treatment for mothersand their

babies. Achievingthis goal will require increased access to and use of prenatal care.

 Women who use drugs during pregnancy are the least likely to get prenatal care. Increased efforts are needed at all levels (community, state, national) to integrate substance abuse and HIV prevention activities and assist pregnant women in accessing needed services to improve their own health and the health of their babies.



For information about national HIV prevention activities, see the following CDC fact sheets:

- CDC's Role in HIV and AIDS Prevention
- Linking Science and Prevention Programs The Need for Comprehensive Strategies

For more information...

CDC-INFO:

1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 In English, en Español 24 Hours/Day

CDC National Prevention Information Network:

P.O. Box 6003 Rockville, Maryland 20849-6003 1-800-458-5231

Internet Resources:

NCHSTP: http://www.cdc.gov/nchstp/od/nchstp.html

DHAP: http://www.cdc.gov/hiv
NPIN: http://www.cdcnpin.org/

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