



Combination Prevention: Preventing Mother-to-Child Transmission

Recent scientific advances have created an exciting moment for the global AIDS response. We now have the scientific tools to push the rate of new infections downward dramatically. In each country, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) is prioritizing a strategic combination of activities based on sound scientific evidence to maximize impact on reducing new HIV infections and saving lives.

One core intervention is the prevention of mother-to-child transmission (also known as vertical transmission) of HIV. PMTCT efforts have a triple benefit: not only saving the life of the baby, but keeping the mother alive by getting her the treatment she needs, and protecting other children in the family from being orphaned.

Basic Facts:

- An HIV-positive mother is at risk of transmitting HIV to her child during pregnancy, labor, delivery, or breastfeeding.
- Without intervention, the likelihood of transmission ranges from 25%-40%.
- In 2010, approximately 390,000 children were born with HIV globally, with 90% of these infections occurring in 22 countries.
- Mother-to-child transmission has been virtually eliminated in the developed world. The science behind this is clear and demonstrates that the use of appropriate antiretroviral (ARV) medication during pregnancy and breastfeeding can reduce the risk of vertical transmission to less than 5%.

PEPFAR Results in 2011:

- Since its inception, PEPFAR has been a global leader in the dramatic progress made in eliminating new pediatric infections in developing countries.
- In 2011, PEPFAR supported HIV testing and counseling to ensure that more than 9.8 million pregnant women knew their HIV status.
- Of those pregnant women found to be infected with HIV, more than 660,000 received ARVs to prevent vertical transmission.
- These PEPFAR interventions allowed more than 200,000 children to be born HIV free.
- PEPFAR's programs look somewhat different in every country, based on local needs, but are delivering remarkable results toward the goal of an AIDS-free generation.

Shared responsibility -- PEPFAR and the Global Plan:

- In June 2011, PEPFAR and UNAIDS led an effort that outlined the Global Plan towards the virtual elimination of new pediatric infections and keeping mothers alive. This is a path toward achieving a 90% reduction in new HIV infections among children and halving AIDS-related maternal mortality by 2015.
- The 22 countries most heavily contributing to the global burden of new pediatric HIV infections have signed on to prioritize PMTCT interventions in their fight against HIV/AIDS.
- Key principles endorsed by the Global Plan include ensuring access to ARVs for all women; respecting the rights of women living with HIV; garnering adequate and predictable resources from domestic and international sources; leveraging synergies between HIV, maternal, neonatal and child health and family planning programs; engaging and empowering communities living with HIV; and holding national and global leaders accountable for delivering results.
- A comprehensive set of interventions is needed to accomplish these ambitious goals, and national programs, supported by international partners, target interventions to address identified barriers and gaps in each of these areas.
- In January 2012, a Business Leadership Council for a Generation Born HIV Free was launched, bringing the strengths of the private sector to support the Global Plan.

PEPFAR Moving Forward:

- On World AIDS Day 2011, President Barack Obama announced a new PMTCT goal, in addition to other combination prevention goals:
- By the end of 2013, PEPFAR will reach more than 1.5 million more HIV-positive pregnant women with ARVs to prevent them from passing the virus to their children.
- To achieve this goal, PEPFAR is supporting the rapid scale-up of high quality PMTCT services in the highest burden countries. PEPFAR has developed PMTCT Acceleration Plans together with local Ministries of Health to address critical bottlenecks in national PMTCT programs.
- PMTCT programs, like all HIV efforts, must be owned and led by the countries themselves. PEPFAR is collaborating with partner governments and civil society as they build the commitment and capacity needed to end vertical transmission.

Broader Combination Prevention Benefits of PMTCT

- PMTCT programs offer an opportunity to improve the coverage of HIV-positive women on antiretroviral treatment -- significantly decreasing their risk of transmitting the virus to uninfected partners.
- When an HIV-positive pregnant woman enters the health care system, it provides an opportunity to link the rest of her family with highly effective prevention interventions, such as HIV counseling and testing for other family members, treatment for eligible male partners, voluntary male medical circumcision, and other health services.