



Issue Brief



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OHIO

Prevention of Perinatal HIV Transmission and Ohio's HIV Testing Laws

Background

The human immunodeficiency virus (HIV) is the virus that leads to the development of acquired immunodeficiency syndrome (AIDS). The virus is passed from one person to another through blood-to-blood and sexual contact.¹ Additionally, infected pregnant women can transmit HIV to their babies during pregnancy, labor, delivery, or breastfeeding. This form of transmission, known as perinatal transmission, is responsible for nearly all childhood HIV cases in the United States.²

The risk of perinatal HIV transmission can be greatly reduced with medical interventions if the mother and her doctors are aware of her HIV status during pregnancy or delivery. These include the use of antiretroviral drugs, delivery by cesarean section, and formula feeding. By taking these precautions, the risk for mother-to-child transmission is reduced from 25 percent to less than two percent.³ However, current estimates from the Centers for Disease Control and Prevention (CDC) indicate that of the more than one million individuals living with HIV in the United States, 25 percent are unaware of their infection.⁴ Given the serious nature of HIV infection and the high likelihood of success in preventing perinatal transmission, it is critically important that pregnant women be tested for HIV. As a result, the U.S. Public Health Service has recommended universal HIV testing of pregnant women since 1995.

HIV Testing in Ohio

In October 2010, Ohio House Bill 1 made changes to the HIV testing process in the State of Ohio whereby consent for HIV screening can be combined into one general consent form.⁵

Thus, HIV tests may be offered to pregnant women as part of a panel of prenatal tests, without the need for separate informed consent, pre-test counseling, or post-test counseling for those with negative results. Pregnant women now opt-out of testing rather than opt-in. Such opt-out testing policies are supported by the CDC, the Institute of Medicine, and the American College of Obstetricians and Gynecologists as studies have shown that states making the transition to opt-out HIV testing policies observe a substantial increase in testing rates among pregnant women.³ Regardless of state HIV testing policies, all pregnant women should be offered an HIV test.

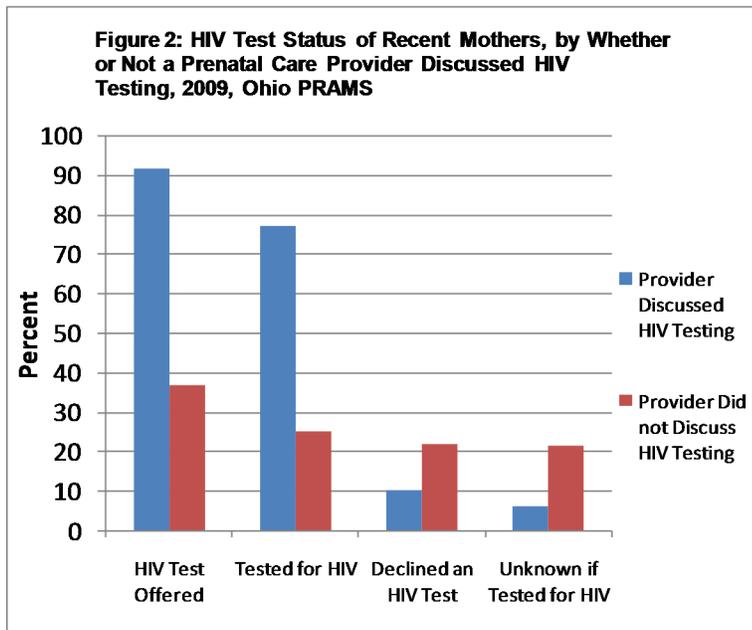
Key Facts

- Prenatal transmission accounts for nearly all childhood cases of HIV in the U.S.²
- Preventive measures reduce the risk of perinatal transmission from 25 percent to less than 2 percent.³
- Lack of knowledge about one's HIV status is considered a primary risk factor for perinatal transmission.⁴
- HIV testing should be offered to all pregnant women, yet, in 2009, only 61.6 percent of Ohio mothers reported that they were tested during pregnancy or delivery.
- As of October 2010, a separate consent form and pre- and post-test counseling are no longer required for HIV testing in Ohio.

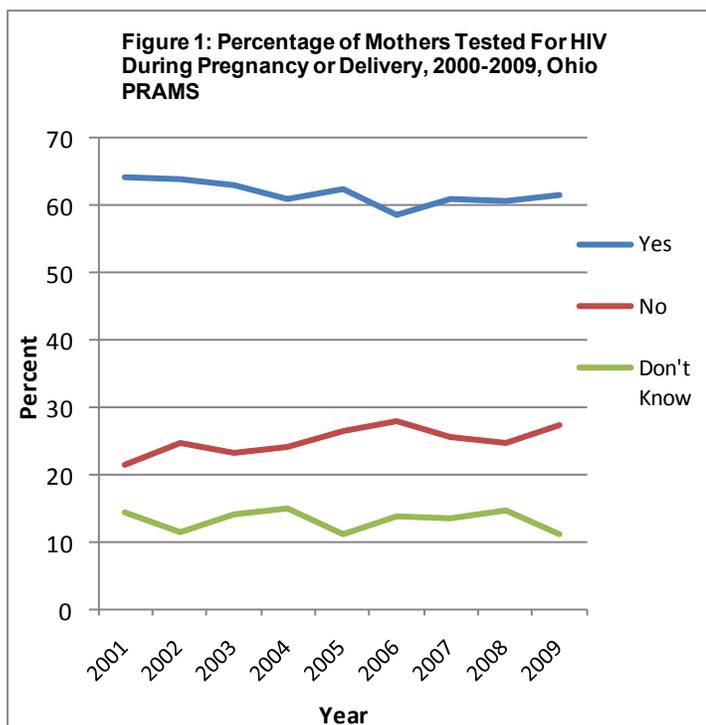
Status of HIV Testing of Pregnant Women in Ohio

Information from the Ohio Pregnancy Risk Assessment Monitoring System (PRAMS) indicates that only 76.4 percent of recent mothers were offered an HIV test during pregnancy or delivery in 2009. The percentage who were tested was 61.6, not different from previous years (Figure 1). Although these data represent a period when Ohio's HIV testing laws required separate informed consent and pretest counseling, it is nevertheless of concern that Ohio test rates have been far below the national recommendation of universal testing. In addition, between 11 and 15 percent of mothers each year were unaware of whether or not they had been tested, indicating a need for education of pregnant women about their HIV testing rights in Ohio.

"They take so many tests I don't know [if I was tested for HIV] ..."
 —Ohio PRAMS mother



Source: Ohio Pregnancy Risk Assessment Monitoring System, Ohio Department of Health, 2011



Source: Ohio Pregnancy Risk Assessment Monitoring System, Ohio Department of Health, 2011

Whether or not an HIV test was offered, conducted or declined was related to having a discussion about HIV testing with a provider during a prenatal care visit (Figure 2). In addition, women were more likely to be uncertain about their HIV test status when they did not have this discussion. Given that only 12.1 percent of women declined the test when it was offered, it appears that HIV test rates could be significantly improved in Ohio by offering all pregnant women an HIV test and by discussing the importance of testing during a prenatal care visit.

For more information, contact Ohio PRAMS:

1-888-PRAMS88 (772-6788)

prams@odh.ohio.gov

References

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- [2] CDC. (2007, October). *Mother-to-Child (Perinatal) HIV Transmission and Prevention*. Retrieved June 2011: <http://www.cdc.gov/hiv/topics/perinatal/resources/factsheets/perinatal.htm>.
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- [5] Ohio Administrative Code 3701-3-11.

