

Postpartum care pathway of women living with HIV in the North of France from 2011 to 2021

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Background

In France, **1500 women living with HIV (WLWH)** give birth each year, with a very low mother-to-child transmission (MTCT) rate of **0.2%**.

French recommendations address obstetric and infectious prenatal care but less the **postpartum period**, although it's known to be at risk of loss to follow-up and virologic failure.

Main objective : Adequacy of the WLWH care pathway to French recommendations during the postpartum period.

Secondary objective : Study the follow-up of WLWH at one and two years after delivery.

Materials and methods

- Observational retrospective study
- In Tourcoing and Lille hospitals (in North of France)
- WLWH pregnant between 01/01/2011 and 31/12/2021
- Main criterion based on **composite score of adequacy of postpartum medical follow-up** :
 - consultation with infectious disease (ID) specialist < 3 months after delivery,
 - and consultation with gynecologist < 2 months after delivery,
 - and HIV viral load (VL) test < 1 month after delivery.

Results

185 WLWH and 258 pregnancies were studied.
 Mean age was 33 years, 79.8% were of foreign origin.
 During pregnancy, 99.6% received antiretroviral therapy but only **79.5% delivered with undetectable VL** (5.8% unknown).
No MTCT detected in the 265 children.

Our score for postpartum care found only 9.3% adequacy :

- 26.7% saw their gynecologist within two months,
- 19.8% had an HIV VL test within one month,
- but 76.7% saw their ID specialist within 3 months.

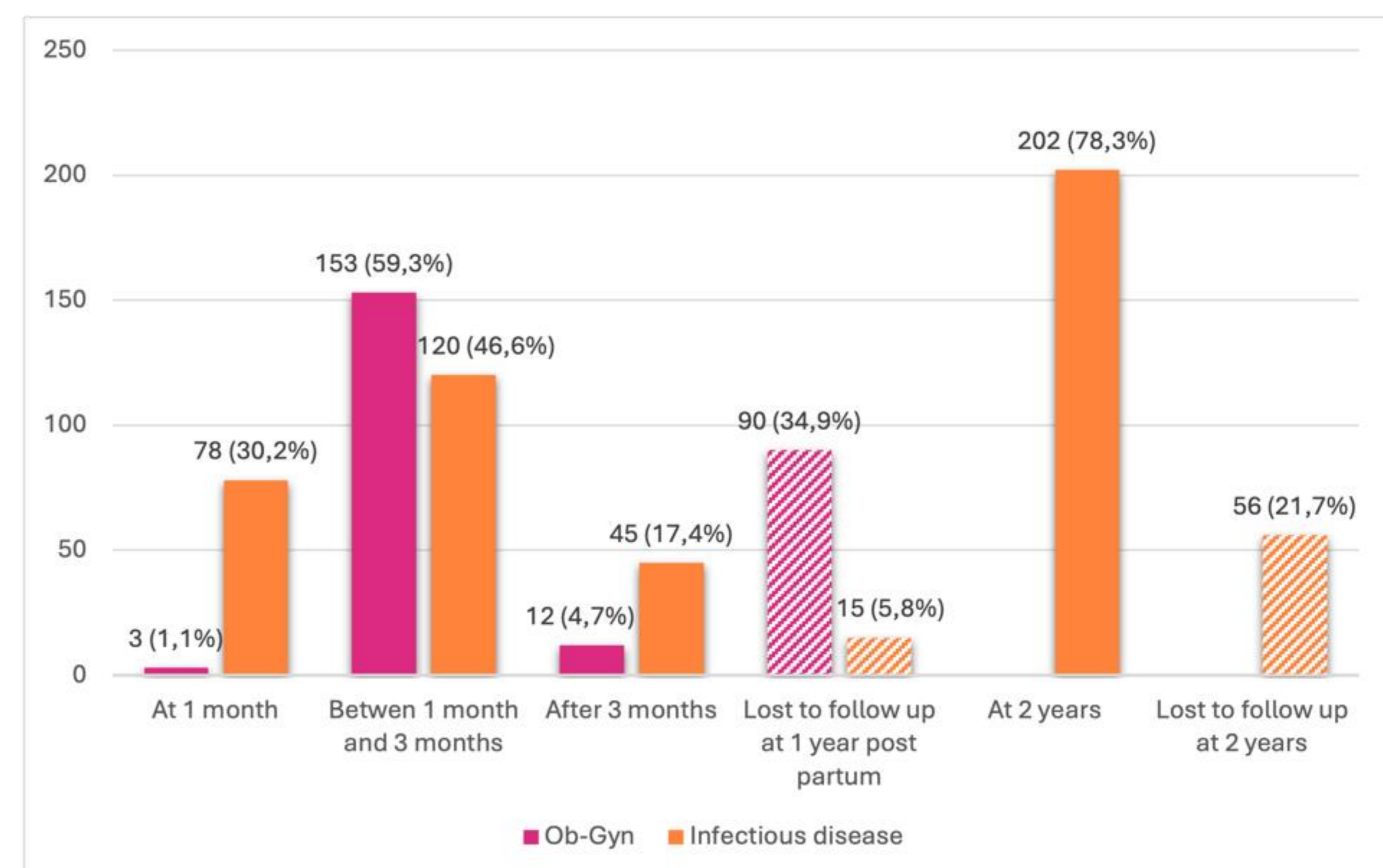


Figure 2 : Women Living With HIV (WLWH) postpartum follow-up in Lille and Tourcoing hospitals between 2011 and 2021 (N=258)

After 1 year : 5.8% of WLWH stopped their follow-up with the ID specialist and 34.9% with the obstetrician.

After 2 years : only 75% of WLWH maintained viral suppression

An **inadequate postpartum score** appeared to be at **higher risk of loss follow-up** (22.6% vs 12.5%, p =0.065).

Follow-up of the children appeared to be better : 88.4% of them had three HIV VL tests, all negative.

POST PARTUM FOLLOW UP	✓ ADEQUACY N=24 ¹ (9,3%)	✗ INADEQUACY N=234 ¹ (90,7%)
Gynecologist consult at 2 months	24	76
Lost follow-up	0	158
Infectious disease consult at 3 months	24	174
Lost follow-up	0	60
HIV viral load at 1 month	24	31
Missing	0	203

¹ n (%) **Figure 1** : Results of the postpartum score for adequacy of the care pathway

Conclusion

There is a severe lack of adherence to the postpartum care pathway of WLWH.

Simplification of the pathway by a joint postpartum consultation with ID specialist, obstetrician and pediatrician could improve adherence.

These data also suggest the need for **very close management of women who are going to breastfeed.**