CONTRACEPTIVE METHODS IN WOMEN LIVING WITH HIV AFTER A PREGNANCY: CONDESA'S CLINICS, MEXICO CITY

Cabrera Teresita¹, Toiber Marla², Pérez Edgar³, Nava Carlos¹, Ramos Ubaldo⁴, Soto Ana Karen⁵, Langarica Elena⁶, Cruz Adrián⁷, Viveros Paula⁸, Gónzalez Andrea⁹ Clínica Especializada Condesa Iztapalapa, Gynecology and Obstetrics Service¹, Mexico, Clínica Especializada Condesa Iztapalapa, Mental Health, Mexico City, Mexico. Clinica Especializada Condesa Iztapalapa, Infectious Diseases³, Mexico City, Mexico, Clínica Especializada Condesa, Gynecology and Obstetrics Service⁴, Mexico City, Mexico, Clínica Especializada Condesa Iztapalapa, Social Worker⁵, Mexico City, Mexico, Clínica Especializada Condesa, Social Worker⁶, Mexico City, Mexico City, Mexico City, Clínica Especializada Condesa, Social Worker⁶, Mexico City, Mexico City, Clínica Especializada Condesa, Social Worker⁶, Mexico City, Ondos City, Mexico City, Clínica Especializada Condesa, Social Worker⁶, Mexico City, Clínica Especializada Condesa, Social Worker⁶, Mexico City, Clínica Especializada Condesa, Co Especializada Condesa, Program Coordinator, Mexico City⁸; Clínica Especializada Condesa, Executive Director of the Center for HIV/AIDS in Mexico City⁹, Mexico City, Mexico

BACKGROUND: 82% of pregnant breastfeeding women living with HIV globally accessed antiretroviral treatment in 2022, this has led to a 58% reduction in new HIV infections among children from 2010 to 2022 ¹. In Mexico, 37 cases of perinatal HIV transmission were reported in 2023, compared constants to 133 in 2018 ². Contraceptive methods are a strategy to prevent perinatal HIV transmission, considering women's 📆 reproductive desire. This study describes the contraceptive clinical Esp ${
m I\hspace{-.1em}I}$ methods provided to women living with HIV in two public ${
m I\hspace{-.1em}I}$ Specialized Clinics in Mexico City.

METHODS: Cross-sectional study, of a cohort of pregnant women living with HIV in Condesa Cuauhtemoc and CON 🕆 Condesa Iztapalapa Specialized Clinics, Mexico City. From 🗀 🛌 August 2013 until March 2024.

RESULTS: 282 WLHIV, 47.8% (135) Chronic HIV women who knew their HIV diagnosis previous to their pregnancy and ^o52.1% (147) with newly diagnosed HIV during pregnancy. The formulations of contraceptives examined: Implanon®, Clínica Esp ¶Jadelle®, Mirena®, MiaCare®.

CONTRACEPTIVE METHODS (n=282 women)	
Definitive family planning or sterilization	57% (161)
Intradermal implants	19.1% (54)
Hormonal intrauterine device	10.9% (31)
No family planning method	12% (34)
Unknown	0.7% (2)

The sterilization and long-acting reversible contraception (such intrauterine device, implants), we clinical Est always recommended the simultaneous use of a condom to provide protection against other sexually transmitted infections (STIs). We don't use oral contraceptive pills (OCPs) Clinica Esp Cesarean section was associated with to prevent suboptimal adherence to ART and women can forget to take the pill every day.

Mean age of women with:	
Definitive contraceptive method	32.3 years old
	(SD 5.96)
Hormonal intrauterine device	29.3 years old
	(SD 6.84)
Hormonal implants	27.4 years old
	(SD 5.93)
Women who declined	31.8 years old
contraceptive methods	(SD 7.14)

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ztap	Age at HIV diagnosis	23.5 years old (SD 7.5)

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Education level	
Illiteracy	5.6% (16)
Elementary school	24.4% (69)
Middle school	42.5% (120)
High school	20.5% (58)
University	6.3% (18)
Postgraduate	0.3% (1)

Occupation	
Unpaid employment	72.3% (204)
Employment	21.6% (61)
Student	2.8% (8)
Unhoused	2.8% (8)
In prison	0.3% (1)

CIV	/II Status
Common-law union	73.7% (208)
Single	26.2% (74)

Partifier niv Status	
50% (143)	
39.3% (113)	
3-5% (26)	
16.7 years old (SD 2.7)	
2.3 (SD 1.5)	

Number of sexual partners	
1-3	59.5% (168)
4-6	27.3% (77)
More than 6	2.1% (37)
Resolution of pregnancy	
C-soction hirth	97 0% (249)

Mesolution of pregnancy	
C-section birth	87.9% (248)
Natural birth	6.3% (18)
Legal interruption	2.4% ()
Spontaneous abortion	3.1% (9)
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acceptance definitive contraceptive method (p<0.05).

Virologic suppression 66.6% (188), virologic failure 6.3% (18), lost to follow-up 25.1% (71), death 7%(5). Viral load at ^a the end of pregnancy <1000 c/ml 96% (271) and mean CD4 418 c/ul (SD 236)

CONCLUSION: The acceptance of any contraceptive method in our population was high, always considering women's 📙 reproductive desire; however, we will continue to work in SA 🗟 achieving 100% acceptance of a contraceptive method. alizada clí Through this strategy, we aim to reduce mother to child HIV transmission.

línica Esp Contact: dra.terecabrera@gmail.com





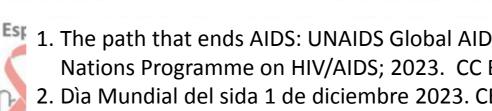












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