

Reproductive health among women living with HIV attending Melbourne Sexual Health Centre for HIV care from February 2019 to February 2020

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Background:

In Australia, in 2020 approximately 12.5% of the 29,090 people living with HIV were female. Women living with HIV (WLHIV) have unique care needs and pose different challenges to HIV clinicians than male counterparts. Rates of unintended pregnancy are significantly higher among WLHIV versus HIV negative women, however, uptake of contraception among WLHIV including long-acting-reversible contraceptives (LARCs) remains low. This study was a quality improvement project to identify gaps in reproductive healthcare provided to WLHIV attending Melbourne Sexual Health Centre (MSHC).

Methods:

This was a retrospective case note review of WLHIV attending the HIV clinic at MSHC for HIV care from February 2019 to February 2020. Women aged over 45 years were excluded from analysis. Primary outcomes included proportion using contraception, methods used and whether a sexual or reproductive health history had been taken in the last 12 months.

Results:

100 women were included in the analysis, most were born overseas, predominantly Asia (38%) or Sub-Saharan Africa (34%). Of the 100 women, 5 (5%) were pregnant, 16 (16%) were trying to conceive and 1 (1%) was undergoing elective oocyte preservation. Of 74 women at risk of unintended pregnancy 36 (48.6%) were using any form of contraception. This included 13 (17.6%) women using less-effective methods (withdrawal and condoms), 5 (6.8%) using the combined oral contraceptive pill, 14 (18.9%) using a LARC and 4 (5.4%) using a permanent method. Sexual activity status was documented for 61 (61%) women, 1 (1%) declined to answer and not documented for the remaining 38 (38%).

Conclusion:

Patient demographics and contraceptive use in this study are consistent with other studies of WLHIV in Australia and internationally. Discussions regarding sexual activity and reproductive health were limited. Mechanisms to increase regular clinician-patient discourse regarding contraception and reproductive health should be explored to improve reproductive healthcare for WLHIV.

Disclosure of Interest Statement:

Authors declare no conflict of interest.