INCIDENCE OF INTENDED AND UNINTENDED PREGNANCIES AMONG HIV+ WOMEN ON ART: 5-YEAR COHORT IN ABIDJAN

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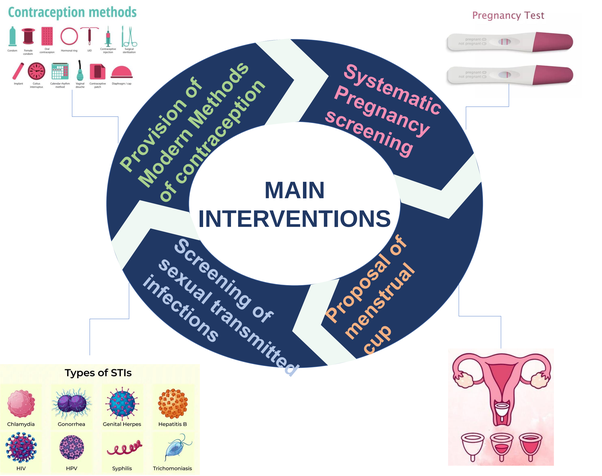
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BACKGROUND

- The advent of antiretroviral treatment (ART) has led to an increase in the number HIV+ women expressing interest in becoming mother.
- Sexual and reproductive health services are suboptimal in Sub-Saharan African to support them in their maternity plan.
- This study examined intended and unintended pregnancies among adult HIV+ women of childbearing age followed in a 5-year cohort study in Abidjan, Cote d'Ivoire.

METHODS

- We implemented an interventional non-comparative prospective cohort of HIV+ women (18 – 49 years) and on ART for less than 24 months at 2 HIV care in Abidjan from 2016 to 2021.
- **Midwives provided services and collected data, modern methods of contraception were provided free of charge, systematic screening of pregnancy was carried every 3 month.**



- Mixed-effects Poisson regression model was use to identify factors associated with the incidence of pregnancy.
- Non homogeneous multistate model was use to identify factors influencing transition from being not pregnant to intended or unintended pregnancy.

The incidence of pregnancy among adult women of childbearing age living with HIV and on ART was found to be high, with more unintended pregnancies despite their access to sexual and reproductive health services free of charge.

RESULTS

- 524 participants included
- Median age: 35 years
- 70% had remunerated work at baseline
- 161 participants pregnant at least once
- 208 pregnancies recorded, 64% were unintended
- **The incidence of pregnancy was 12.5 (CI95% = [11 – 14]) per 100 person year.**

Factors associated with the incidence of pregnancy: cfr Fig.1

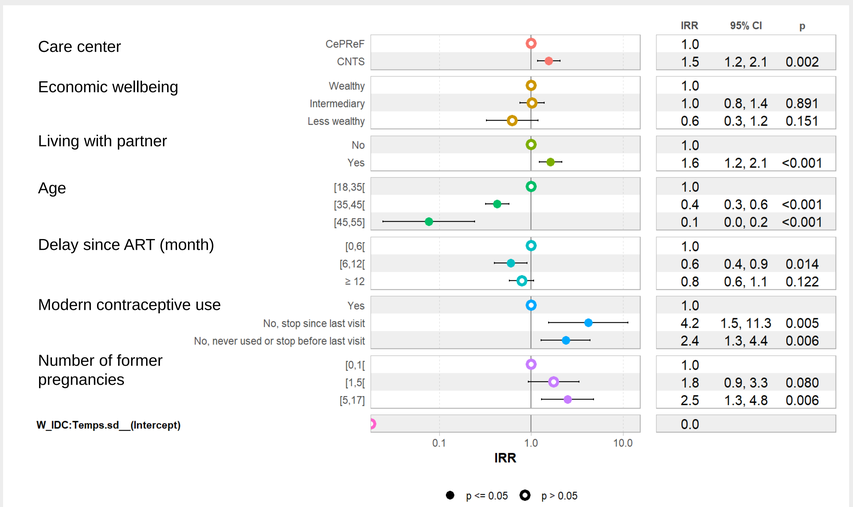


Fig. 1 Factors associated with the incidence of pregnancy, a Multivariable of Mixed-effects Poisson Regression Model Analysis, Abidjan – Côte d'Ivoire, 2016 – 2021.

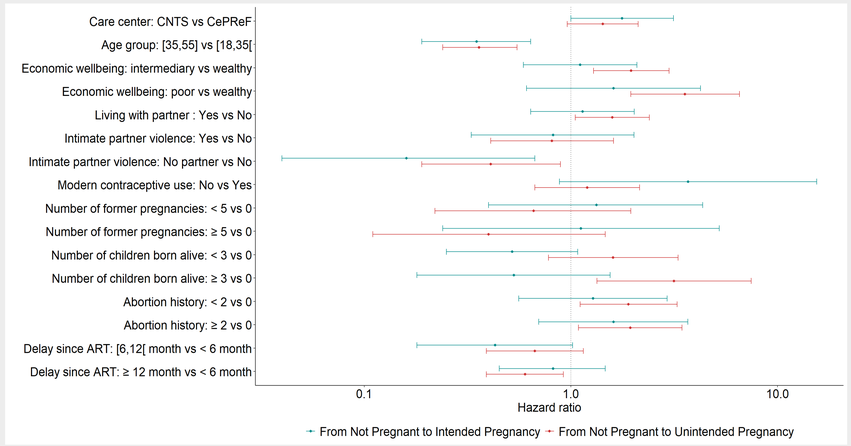


Fig. 2 Factors influencing transition from being not pregnant to intended or unintended pregnancy, a Multivariable of Non homogeneous Multi State Model Analysis, Abidjan – Côte d'Ivoire, 2016 – 2021.

Factors influencing transition from being not pregnant to unintended pregnancy :

*Economic wellbeing (poor: HR = 3.57; CI95% = [1.95 - 6.56], medium: HR = 1.96; CI95% = [1.29 - 2.99] vs wealthy),

*Having more than 3 children born alive (HR = 3.16; CI95% = [1.34 - 7.46] vs 0),

*Abortion history (1: HR = 1.90, CI95% = [1.11 - 3.27]; ≥2: HR = 1.94, CI95% = [1.09 - 3.45] vs 0),

*Living with partner (HR = 1.59; CI95% = [1.05 - 2.40]),

*Delay since ART over 12 month (HR = 0.60; CI95% = [0.39 - 0.92] vs < 6 months).

CONCLUSIONS

- Reliable pregnancy incidence estimates were obtained thanks to systematic and regular pregnancy tests.
- The incidence of pregnancy was much higher than anticipated.
- We are facing challenges with unintended pregnancies despite the provision of reproductive care services.

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