



CHAIRMAN'S MEMORANDUM

NO. 03-2012 August 7, 2012

TO: SHERIFFS, CHIEF ADMINISTRATIVE OFFICERS, COMMISSIONERS OF CORRECTION, NEW YORK CITY WARDENS, FACILITY MEDICAL DIRECTORS, HEALTH SERVICE ADMINISTRATORS, AND NURSE ADMINISTRATORS.

RE: Preventing Mother-to-Child Transmission (MTCT) of HIV

Why is this important to jails?

The jails have a unique and important role in helping prevent mother-to-child transmission (MTCT) of HIV. Although the number of cases of MTCT in New York has declined significantly, there continue to be cases every year. These cases involve some of the hardest to reach women, many of whom have been in a local correctional facility at some time during their pregnancy. MTCT can be prevented - the key is to ensure that the HIV-positive pregnant woman and her newborn receive antiretroviral medication.

What are the key facts about mother-to-child transmission of HIV?

- HIV can be passed from an HIV-positive mother to her newborn during pregnancy, at delivery and through breastfeeding.
- Without medical treatment, approximately one in four infants born to HIV-positive women will be infected with HIV.
- New York State (NYS), once the state with the highest reported number of children with AIDS, has made tremendous strides toward eliminating MTCT.
- Two key activities have led to this achievement. The first is identifying HIV infection in pregnant women. The second is providing HIV medications that prevent MTCT and help the HIV-positive woman be as healthy as possible.

What are the key elements in preventing MTCT?

- Early access to prenatal care for all women, especially women with or at high risk for HIV.
- HIV testing as early in the pregnancy as possible with repeat testing in the last trimester of pregnancy (34-36 weeks) to identify women who become infected after their first prenatal test.
- To prevent MTCT, all HIV-positive pregnant women should receive antiretroviral (ARV) prophylaxis during pregnancy and during labor and delivery. All HIV-exposed newborns should receive ARV prophylaxis starting within 12 hours of birth and continuing for six weeks.
- Based on their individual clinical situation, HIV-positive pregnant women should have access to highly active antiretroviral therapy (HAART) to maintain optimal health.
- Interruption of ARV medications should be avoided as this increases resistance to the medications and limits their effectiveness.

- Management of ARV medications in a pregnant woman is complicated. The Designated AIDS Center (DAC) in your area can help by co-managing the woman's and her infant's care with you.
- Communication with your local birthing facility is essential to ensure a plan is in place for the woman's delivery and that ARV medication is available for both the mother and newborn.
- HIV-positive women should not breastfeed. If the woman is at a jail with resources for her newborn to remain with her, the jail should ensure that the newborn is formula fed. Coordination with local medical and social services providers as women transition between the community and the jail or between jails and state correctional facilities is essential.
- Women being released into the community should be linked to prenatal care, HIV care and other needed services. The exposed infant should be connected to pediatric care.

Is there information on preventing MTCT specific for a jail setting?

The AIDS Institute has worked with the Commission and jail representatives to develop resources related to caring for HIV-positive pregnant women and prevention of MTCT. The following materials have been developed and will be forwarded to you by regular mail in August of 2012:

- Resources in English and Spanish for inmates and the inmate library.
- A 25 minute video for jail administrators and correction officers about MTCT and how jails can help prevent transmission.
- A 60 minute clinical education video for jail clinical staff and contract obstetrical providers.

Please note that these videos are also available on-line at: <http://www.caiglobal.org/video/ai-corr/>

Safety of Infants:

Local correctional facilities housing HIV positive women with infants should follow existing facility policies and procedures for reporting suspected cases of child neglect or abuse to the appropriate authorities at Child Protective Services. Standard clinical recommendations for infants born to women with HIV include avoiding breast-feeding and administering medication to the infant for the first six weeks of life. Health services staff should educate mothers about these important issues. In instances where insistence on breast-feeding or refusal to give the infant HIV medication is part of a consistent pattern of abuse or neglect, local correctional facilities should consider reporting this to the appropriate authorities.

How can I get assistance if I need it?

- To locate the Designated AIDS Center (DAC) serving your area, go to: http://www.health.ny.gov/diseases/aids/testing/dac_clinic_contacts.htm
- For guidance on managing a pregnant woman living with HIV or assistance with counseling the woman, e.g. on ARV medications to prevent MTCT or avoiding breastfeeding, contact the AIDS Institute's Perinatal HIV Prevention Program (PHPP) at (518) 486-6048.
- For consultation on clinical management issues and guidelines, call the:

New York State Commission of Correction
Alfred E. Smith State Office Building
80 S. Swan Street, 12th Floor
Albany, New York 12210-8001
(518) 485-2346

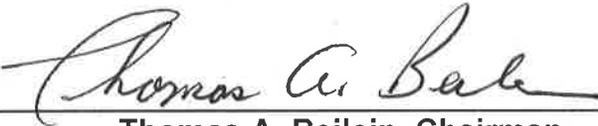
Thomas A. Beilein, Chairman
Phyllis Harrison-Ross, M.D., Commissioner

[3]

- New York State Clinical Education Initiative (CEI) Provider Consultation Line at (866) 637-2342
- National HIV/AIDS Clinician's Consultation Center's Perinatal HIV Hotline at (888) 448-8765.
- For assistance with referrals to a medical provider experienced in caring for HIV-positive pregnant women or for referrals to a community-based social services provider, contact the AIDS Institute's Perinatal HIV Prevention Program (PHPP) at (518) 486-6048 during regular business hours.

Where would I find more information on prevention of MTCT.

- Perinatal HIV Prevention Program at (518) 486-6048 or by email at phpp@health.state.ny.us
- New York State clinical guidelines on preventing MTCT at <http://www.hivguidelines.org/clinical-guidelines/perinatal-transmission>
- National clinical guidelines on prevention of MTCT at <http://www.aidsinfo.nih.gov/guidelines/>
- Educational materials produced by the AIDS Institute at <http://www.health.ny.gov/diseases/aids/publications/>
- New York State Clinical Education Initiative (CEI) website at <http://www.ceitraining.org>
- National HIV/AIDS Clinician's Consultation Center at <http://www.nccc.ucsf.edu/>



Thomas A. Beilein, Chairman

**New York State Commission of Correction
Alfred E. Smith State Office Building
80 S. Swan Street, 12th Floor
Albany, New York 12210-8001
(518) 485-2346**

**Thomas A. Beilein, Chairman
Phyllis Harrison-Ross, M.D., Commissioner**