

# HIV AND HORMONAL CONTRACEPTION

Frequently asked questions



**UNAIDS**  
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

UNHCR  
UNICEF  
WFP  
UNDP  
UNFPA

UNODC  
ILO  
UNESCO  
WHO  
WORLD BANK



**World Health  
Organization**

# Summary

- ▶ WHO has announced in February 2012 that its current recommendation—no restrictions on the use of hormonal contraceptives to avoid unintended pregnancies for women at high risk of, or living with HIV— which is based on current evidence, remains unchanged. In addition, it recommends that women using progestogen-only injectable contraceptives also use condoms or other measures to prevent HIV infection.

This information must be communicated to sexually active women and girls by health workers pro-actively.

- ▶ A stakeholder consultation convened by the World Health Organization (WHO) in Geneva has reviewed all published and in-press epidemiological studies related to HIV transmission and acquisition by women using hormonal contraceptives. After careful review of all available evidence, the stakeholders found that the data were not sufficiently conclusive to change current guidance.
- ▶ While a range of contraceptives protect against unintended pregnancies, only condoms, male and female, provide dual protection by stopping HIV transmission and preventing unintended pregnancies.
- ▶ The level of unmet family planning need among the 1.18 billion women aged 15–49 worldwide is estimated to be 11%. Among the 128 million women (married or in a union) aged 15–49 in sub-Saharan Africa, the estimated unmet need for family planning is more than twice as high, at 25% and may be higher for women living with HIV. This highlights the urgency of finding innovative solutions that address the dual needs of women in preventing HIV and stopping unintended pregnancies.
- ▶ The Joint United Nations Programme on HIV/AIDS (UNAIDS) and WHO recommend that people who are sexually active—particularly women and girls—have full access to information and counselling to make evidence informed choices about their sexual and reproductive health needs. Women and girls must also have access to the widest range of contraceptive and HIV prevention options. Such services must be provided in an integrated manner by health workers.
- ▶ The lack of female controlled methods of HIV prevention and low levels of condom use place women and girls at increased vulnerability to HIV infection. Women need contraceptive and HIV prevention options that they can own and manage. New investments into research for female controlled HIV prevention options and safe contraceptive methods are essential.

# Frequently asked questions

## 1. Do hormonal contraceptives protect against HIV infection?

No. Hormonal contraceptives do not protect against HIV or other sexually transmitted infections (STI). Currently there are no contraceptives, with the exception of condoms (male and female), that protect against HIV. Women using hormonal contraceptives must also use a condom or take other measures to protect themselves against HIV.

## 2. Is the current discussion about all hormonal contraceptives or are some more involved than others?

The discussion was mainly around oral and progestogen-only injectables, on which the majority of the evidence has been analysed. WHO recommends that women can safely use hormonal contraceptives to avoid unintended pregnancies. In addition it encourages women at increased risk of HIV infection to also use condoms or other measures to protect themselves from HIV.

## 3. Does using hormonal contraceptives increase the risk of contracting or transmitting HIV?

We do not know yet. Due to the inconsistency of the body of evidence, available data do not establish a clear causal association with HIV acquisition, nor is the possibility of an association definitively ruled out.

Hormonal contraceptives do not protect against HIV. This is why using dual protection is recommended for preventing both HIV infection and unintended pregnancies.

## 4. What would happen if women were left without contraceptive options?

The United Nations estimates that meeting unmet needs for contraception (including of women living with HIV) alone would reduce up to a third of maternal deaths globally and also reduce the number of children being born with HIV. Having fewer pregnancies and spacing births increase the survival rate of both women and their children. Providing access to both family planning and maternal and newborn care to all women in developing countries who need them would cost \$4.50 per capita. This investment would avert approximately 70 per cent of all maternal deaths and 44 per cent of all newborn deaths.

According to the data sources, the percentage of maternal deaths in South Africa due to HIV varies from 9% to 19.2% as an indirect cause of maternal deaths, pointing to the importance of meeting unmet need for family planning in HIV positive women.

## 5. What is dual protection?

Dual protection means taking steps to protect against unintended pregnancies and sexually transmitted infections (STIs) including HIV infection. This can be achieved either by using condoms (male and female), or with a combination of methods—using both condoms plus another method of contraception, such as an intrauterine device (IUD), implants, the birth control pill or injectables.

Abstaining from sex and abstaining from penetrative sex also offer “dual protection” against pregnancy and STIs, including HIV, but the term “dual protection” usually refers to condom use plus another contraceptive.

Condoms are the only proven contraceptive method that also protects against STI transmission including HIV. However, male and female condoms only protect if they are used consistently and correctly.

## 6. What can be done to increase the ability of women and girls to adopt dual protection?

Counselling about HIV prevention and contraception should be provided to all women and girls, especially those who are sexually active. This should be provided by health workers at sexual and reproductive health clinics, by trainers in sexuality education programmes, and by HIV-related health service providers. Information and support from peers through peer outreach programmes should complement messages from health workers about dual protection. Peer counsellors can also promote male responsibility and engagement on condom use.

## 7. Can women living with HIV use hormonal contraceptives?

Yes, they can. However to protect sexual partners from HIV, condoms (male and female) or other HIV prevention measures must be used. Women living with HIV can talk to their healthcare provider for a full range of HIV prevention and contraceptive options.

## 8. Who should decide on what option is best for women and girls?

All sexually active women and girls should be given the necessary information and the means to decide freely about contraception, HIV prevention and matters related to their sexuality. To help sexually active women and girls make an informed

decision, health workers should provide them with counselling as well as accurate and complete information about their options, the benefits, risks and side effects of each method. Sexual partners of women and girls should also be provided information on contraception and HIV prevention methods.

### **9. Are the current options available for HIV prevention and contraception enough?**

While a range of contraceptives protect against unintended pregnancies, only condoms, male and female, provide dual protection by stopping HIV transmission and preventing unintended pregnancies. The lack of methods of HIV prevention that are controlled by women and girls, along with low levels of condom use place women and girls at increased vulnerability to HIV infection. Women need safe contraceptive and HIV prevention options that they can own and manage. New investments into research for female-controlled technologies that allow women to prevent both HIV and pregnancy are essential.

### **10. Do hormonal contraceptives affect HIV disease progression?**

A systematic review showed that hormonal contraceptives likely have no impact on HIV disease progression. 10 studies in the review showed no association between use of hormonal contraceptives and HIV disease progression, while one randomized controlled trial did show an increased risk of disease progression. Because the majority of the evidence was reassuring, WHO continues to recommend use of hormonal contraceptives for women living with HIV without restriction.

### **11. What is the role of front line health workers?**

Health workers should provide women and girls with evidence-informed options about contraception and HIV prevention. Such counselling should be provided free of stigma, discrimination or coercion, and must respect the rights of women and girls.

## **12. How were the scientific findings on hormonal contraception and HIV evaluated by WHO during a technical consultation?**

WHO's normative role entails the development of expert advice through the systematic evaluation of research that assesses the safety of contraceptive methods. This is done through the review of science and research developments, as well as implications for service delivery. Recommendations for future priorities follow on from the review.

In this case there was not sufficient evidence to change the prior guidance established in 2008; therefore WHO has concluded that women can continue to use hormonal contraceptives. However WHO strongly encourages women who intend to use injectable contraceptives, to use dual protection for preventing HIV infection.

## **13. Who was involved on this consultation?**

The meeting involved 75 individuals representing a wide range of stakeholders including researchers/academics, clinicians with expertise in HIV and family planning, programmers, representatives of networks of women living with HIV and women's groups, and UN experts.

## **14. What did the consultation advise about further research?**

A clear recommendation was made on the need for further research on the issue of hormonal contraception and HIV and on the importance of keeping emerging evidence under close review. Expansion of contraceptive method mix and further research on the relationship between hormonal contraception and HIV infection (acquisition, transmission and progression) is essential.

There are several ongoing research programmes in this area, which include:

A meta-analysis of all data from large cohort studies and trials on oral PrEP, topical PrEP, vaccine trials, (Charles Morrison, FHI-360).

A further study of human, animal, and in vitro models to examine the biological plausibility of a link between hormonal contraceptives and HIV (Gustavo Doncel, CONRAD).

## 15. What more can be done in the field of research?

New studies and HIV prevention trials will be encouraged to collect better data on contraceptive exposure at each study visit and to develop innovative ways to better measure potential HIV exposure.

It is necessary to better understand the association between the different methods of hormonal contraception and HIV acquisition, transmission and disease progression, particularly for the longer-acting methods (implants, patches, IUDs, injectables and contraceptive rings).

Research should also look at ways to expand the range of research methodologies to enable better data collection on HIV testing acceptability, safety, and adherence, along with behavioural (exposure) data, in order to improve the quality of information for decision-making.

More research is needed on interactions between hormonal contraception and antiretroviral medications, as well as further work on all forms of intrauterine devices.

Promising work on combined contraceptive rings/IDU with antiretroviral and contraceptive properties needs to be continued in order to expand the method mix available to women, along with modelling studies to assess the benefits and cost-effectiveness of various method mixes in different settings.

Policy-makers, programme managers, and patient representatives should be involved in setting research priorities.

20 Avenue Appia  
CH-1211 Geneva 27  
Switzerland

+41 22 791 36 66

[unaids.org](http://unaids.org)