

Protecting, Maintaining and Improving the Health of All Minnesotans

April 9, 2025

Summary: The Minnesota Department of Health (MDH) recommends supportive counseling be provided to pregnant women living with HIV regarding infant feeding options, including donor breast milk, formula, and breastfeeding for those with sustained viral suppression.

Dear Colleague,

In Minnesota, an average of 50 infants are born to pregnant women living with HIV (PWLWH) each year. If a pregnant woman is on antiretrovirals and has sustained viral suppression during and after pregnancy (at minimum throughout the third trimester and at delivery), the risk of HIV transmission through breastfeeding is less than 1%, though not zero.

### **Recommendations:**

MDH, American Academy of Pediatrics (AAP), and the Centers for Disease Control and Prevention (CDC) recommend:

- Providers should consult with, and patients with HIV should be referred to, a specialized pediatric HIV care provider and program to discuss infant feeding options.
- These discussions should occur as early in the pregnancy as possible (ideally preconception) and should be reviewed again throughout the pregnancy and at delivery.
- PWLWH who have sustained viral suppression should be counseled about the options of breastfeeding, donor breast milk, or formula. Those who choose to breastfeed should be supported in their decision.

MDH encourages clinicians who are working with PWLWH to consult the Perinatal & Pediatric HIV Program at Children's Minnesota as soon as possible. Children's Minnesota is available to provide support to eligible PWLWH throughout Minnesota, along with consultation to clinicians caring for them. For PWLWH that are part of the Hennepin Healthcare System, they have their own system in place (see contact below).

Children's Minnesota and Hennepin Healthcare System will provide consultation to PWLWH with a pediatric infectious disease clinician on infant feeding choices, following the new guidelines, perinatal nurse care coordination, a delivery plan, and medical consultation for clinicians. Specific contacts are listed below.

For questions, please contact Jean Larson, HIV Nurse Specialist, at <a href="mailto:Jean.T.Larson@state.mn.us">Jean.T.Larson@state.mn.us</a> or 651-785-8182.

Nick Lehnertz, MD, MPH, MHS

Medical Specialist, Minnesota Department of Health

# Clinical guidelines for infant feeding options in people living with HIV in the United States:

- AAP: Infant Feeding for Persons Living With and at Risk for HIV in the United States: Clinical Report (https://doi.org/10.1542/peds.2024-066843)
- CDC: Infant Feeding for Individuals with HIV in the United States
   (https://clinicalinfo.hiv.gov/en/guidelines/hiv-clinical-guidelines-pediatric-arv/infant-feeding-individuals-hiv-united-states)
- CDC: HIV and Breastfeeding (https://www.cdc.gov/breastfeeding-specialcircumstances/hcp/illnesses-conditions/hiv.html)
- CDC: Diagnosis of HIV Infection in Infants and Children
   (https://clinicalinfo.hiv.gov/en/guidelines/perinatal/management-infants-diagnosis-hiv-infection-children)

#### **Children's Minnesota Perinatal Care Coordination Services:**

Tracy Jackman, RN Nurse Coordinator

Children's Minnesota Perinatal and Pediatric HIV Program

Phone: 612-387-2989

Referral forms can be faxed to 612-813-6770.

#### **Medical Consultation:**

Dr. Farah Cassis-Ghavami, MD Clinical Director Children's Minnesota Perinatal and Pediatric HIV Program Contact Physician access: 612-343-2121 (24/7)

## **Hennepin Healthcare Perinatal HIV Services:**

Cindy Yang, RN High Risk OB Clinical Care Coordinator Hennepin Healthcare

Phone: 612-873-5074, Mobile: 612-477-3703

# **Additional resources:**

National Clinician Consultation Center: (https://nccc.ucsf.edu)

- National Perinatal HIV/AIDS Hotline: 1-888-448-8765 (24/7)
- Perinatal HIV Reporting:

(https://www.health.state.mn.us/diseases/hiv/hcp/perinatal/perinatalrept.pdf)