



Press Release

Embargoed Until Noon ET
Thursday, February 28, 2013

Contact: [CDC Division of News and Electronic Media](#)
(404) 639-3286

Innovative policy to prevent mother-to-child transmission of HIV shows positive impact *New approach in Malawi dramatically increases the number of mothers on treatment*

The number of pregnant and breastfeeding women in Malawi with HIV who started life-saving antiretroviral treatment increased by more than 700 percent in one year, according to a study in CDC's [Morbidity and Mortality Weekly Report](#). The new treatment option, called Option B+, offers all pregnant or breastfeeding women infected with HIV lifelong antiretroviral treatment (ART), regardless of the stage of their HIV infection.

ART reduces mother-to-child HIV transmission rates to less than 5 percent, maintains a mother's health, and prevents transmission of the virus during future pregnancies. Other approaches to prevention of mother-to-child transmission (Option A and Option B) base the decision to start lifelong ART on the stage of a woman's HIV infection. Women not yet eligible for lifelong ART are offered other antiretroviral medications to prevent HIV transmission to their infants. Determining eligibility for lifelong ART requires laboratory tests which can be difficult to access in settings like Malawi with limited equipment and other resources.

"As emphasized in our recent [U.S. President's Emergency Plan for AIDS Relief \(PEPFAR\) Blueprint](#), improving access to lifesaving HIV treatment for mothers and preventing transmission to their infants is critical to achieving an AIDS-free generation. We are supportive of Malawi's Ministry of Health in their adoption of Option B+," said Ambassador Eric Goosby, U.S. Global AIDS Coordinator.

"This practical and innovative program for pregnant and breastfeeding women has shown great success in Malawi," said CDC Director Tom Frieden, M.D., M.P.H. "Approaches such as Option B+ save the lives of the mother, their child, and their family, and stop the spread of HIV."

In Malawi, treatment through Option B+ reduced barriers to women receiving life-saving medications. Option B+ enabled women to receive ART and prenatal care in the same clinic, and required only a positive rapid HIV test result to initiate treatments. While Malawi was the first country to adopt Option B+, other countries, including Rwanda, Uganda, and Haiti, have since adopted it.

"Option B+ gives a window of hope and opportunity to address both reduction of HIV transmission from mother to child while at the same time addressing health of the mother and protecting her uninfected partner," said the Deputy Minister of Health of Malawi Halima Daud. "We are glad that various partners including the United States government are supporting us on this approach."

The Malawi Ministry of Health implemented Option B+ in 2011. The number of women initiated on ART increased from 1,257 in 2011 (prior to Option B+) to 10,663 in 2012 (one year after implementation)—a 748 percent increase. The percent of pregnant and breastfeeding women who remained on Option B+ twelve months after initiation (77 percent) was



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

SAFER • HEALTHIER • PEOPLE™



similar to the 12-month ART retention rate among adults who initiated ART prior to Option B+ implementation (80 percent).

The latest round of data from Malawi's National HIV/AIDS program will be presented at the 20th Conference on Retroviruses and Opportunistic Infections, March 3-6, 2013 in Atlanta.

In 2011, PEPFAR and Joint United Nations Programme on HIV/AIDS (UNAIDS), along with other partners, launched the [Global Plan towards the Elimination of New HIV Infections among Children by 2015 and Keeping their Mothers Alive \(Global Plan\)](#). The Global Plan's central goals are to reduce new HIV infections in children by 90 percent and AIDS-related maternal mortality by 50 percent by 2015. Option B+ is an important innovation to accelerate progress in Malawi and other countries towards reaching these goals.

For information about CDC's global efforts to prevent mother-to-child HIV transmission, visit www.cdc.gov/globalaids. As a PEPFAR implementing agency, CDC provides technical expertise in public health science to more than 75 countries, working side-by-side with Ministries of Health around the globe to build strong national programs and sustainable public health systems that can respond effectively to the HIV/AIDS epidemic and other health threats.

About PEPFAR

The U.S. President's Emergency Plan for AIDS Relief (PEPFAR) is the U.S. Government initiative to save the lives of those affected by HIV/AIDS around the world. This historic commitment is the largest by any nation to combat a single disease internationally, and PEPFAR investments also help alleviate suffering from other diseases across the global health spectrum. PEPFAR is driven by a shared responsibility among donor and partner nations and others to make smart investments to save lives. For more information about PEPFAR, visit www.PEPFAR.gov or read the [PEPFAR Blueprint: Creating an AIDS-free Generation](#) at <http://www.pepfar.gov/documents/organization/201386.pdf>.

###

[U.S. Department of Health and Human Services](#)

[CDC works 24/7](#) saving lives and protecting people from health threats to have a more secure nation. Whether these threats are chronic or acute, manmade or natural, human error or deliberate attack, global or domestic, CDC is the U.S. health protection agency.



**DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION**

SAFER • HEALTHIER • PEOPLE™