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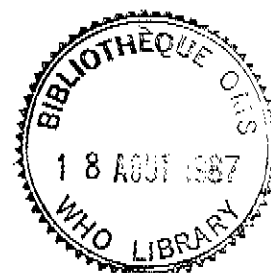
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SPECIAL PROGRAMME ON AIDS  
AND  
SPECIAL PROGRAMME OF RESEARCH,  
DEVELOPMENT AND RESEARCH TRAINING  
IN HUMAN REPRODUCTION

JOINT STATEMENT

CONTRACEPTIVE METHODS AND  
HUMAN IMMUNODEFICIENCY VIRUS (HIV)



A meeting on contraceptive methods and human immunodeficiency virus (HIV) infection was organized by the Special Programme of Research, Development and Research Training in Human Reproduction, and the Special Programme on AIDS, on 29-30 June 1987. Its purpose was to review available information on the possible interactions between contraception and HIV infection, and to identify research needs in this area. Sixteen participants from 9 countries attended the meeting. The participants represented epidemiology, immunology, sexually transmitted disease control, reproductive physiology, and gynaecology.

Women at risk of HIV infection need safe and effective contraception. Furthermore, given the substantial risk of perinatal transmission, it is particularly important that women already infected with HIV have access to effective methods of fertility regulation. In both cases, the potential interaction between HIV infection and contraception must be considered. Three areas of potential interaction were reviewed: a) susceptibility to HIV infection; b) infectiousness of HIV-infected persons; c) development and course of HIV-related illness.

All current methods of contraception were reviewed. The following methods were reviewed in detail, since they present the highest potential for interaction with HIV infection: a) intrauterine devices (IUDs); b) combined oral contraceptives; c) progestogen-only contraceptives (e.g., injectables, implants, progestogen-only oral contraceptives).

Irrespective of whether other contraceptive methods are used, condoms should always be used whenever there is a risk of sexual transmission of HIV infection. Condoms and spermicides will be reviewed in more detail at another meeting.

A number of theoretical interactions, both adverse and beneficial, between the contraceptive methods and HIV infection were considered. Conclusions were difficult to draw because of the marked paucity in this area of basic and epidemiological data. For example, no epidemiological data are currently available on the relationship between HIV infection and the use of IUDs, or progestogen-only contraceptives. In addition, although the data in one unpublished report have suggested a possible association between oral contraceptives and susceptibility to HIV infection, the data are preliminary and insufficient to support any conclusion at this time. Moreover, the data in other preliminary reports have suggested no association between oral contraception and susceptibility to HIV infection.

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The group made the following recommendations:

1) Additional research is urgently needed. Areas of highest priority are:

a) epidemiological studies of the influence of combined oral contraceptives, depot-medroxyprogesterone acetate (DMPA) (a progestogen-only contraceptive), and IUDs on susceptibility of HIV infection, infectiousness of HIV-infected women, and the development and course of HIV-related illness;

b) basic studies of the mechanism of HIV transmission (both in humans and in animal models) and their modification by contraceptive methods;

c) epidemiological studies of the influence of pregnancy on the development and course of HIV-related illness;

d) studies of immune function in women without HIV infection who are using hormonal contraception.

The need for WHO to coordinate research in this field and to undertake epidemiological studies, particularly in developing countries, was emphasized.

2) In light of current information, no changes in existing recommendations concerning contraceptive use are warranted. The choice of contraceptive method for an individual/couple should continue to take into account the risks and benefits of each method, and the particular circumstances and lifestyle of the individuals concerned. In particular, IUDs are not a method of choice for women who are at high risk for sexually transmitted diseases, including HIV infection. The group also reiterated the need for sterilization of needles and other equipment used in fertility regulation.

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