

Antiretroviral treatment for children living with HIV



FAST FACTS

- Antiretroviral treatment (ART) can keep your child healthy and help them lead a normal life with HIV.
- Your healthcare professional can help you find the right type of treatment for your child.
- In some cases, your child may not be able to take a certain medicine but their treatment can always be changed.
- If you're living with HIV and have recently given birth, continuing to take HIV treatment while breastfeeding will help protect your baby.

If you are the parent or carer of a child with HIV, it's likely you will have lots of questions. The most important thing to remember is that with the right treatment, your child can live a normal, healthy life. It's recommended that children living with HIV start treatment straight away.¹

You can talk to your child's healthcare professional about any questions you have. Here is some information that may help you to think about what to ask.

I have HIV and I've just had a baby. Will my baby need treatment?

Women living with HIV are advised to take HIV treatment [during pregnancy and throughout breastfeeding](#), and for the rest of their lives. This reduces the risk of HIV being passed onto your baby.²

Once your baby is born, they will also need to take an HIV drug (in the form of a syrup) to help prevent HIV infection.

After a few weeks your baby will be tested for HIV, and if the result is negative they can stop taking the syrup. However, your baby should be tested again at 18 months (and/or at the end of breastfeeding if this is later). It is very important to take your baby for this final HIV test to make sure they are HIV-negative.

If the result is positive for either of these tests, your baby will need to start taking treatment straight away.³

My child has HIV, what treatment do they need?

Taking HIV treatment won't cure your child but it can keep HIV under control. Without treatment, HIV will damage your child's immune system – putting them at risk of getting ill. Untreated HIV is particularly serious for babies and young children.

Once your child has started treatment, it's important that they take it every day. Your healthcare professional will explain how much of the drug (the dose) you need give your child. This will change as your child grows and gets heavier.

The drugs your child can take may vary according to national guidelines. Some types of HIV medication for babies and young children are available as liquids or syrups. However, not all drugs are available in this form and some may not be available where you live.

How do I talk to my child about their HIV treatment?

Sometimes children can find it difficult to understand why they need to take medication every day. Talking to your child about their treatment can help them to accept it. Depending on your child's age, you can decide how much detail to go into.

Encourage your child to ask questions and let them know that they can always speak to you if they are worried or confused. Be prepared to answer any questions your child may have by learning more about how their treatment works.

Remember that many other parents have had children with HIV. Talk to your child's healthcare professional for more information and advice. If you know other families affected by HIV, you could ask them for tips.

My child doesn't like taking medicine, what can I do?

Children may find pills difficult to swallow, or dislike like the taste of a liquid drug. Some children can't understand why they have to take medication every day. There are lots of things you can do to make it easier for them, such as:

- Making the medicine part of your child's daily routine – just like washing, brushing teeth, or getting ready for bed. This will help it to feel more normal.
- Praising or rewarding your child after they have taken their medicine.

- If you are also on treatment, taking it at the same time as your child to set a good example.
- Talking to them to understand why they don't like taking their treatment, so you can better support them.

It's also important to be aware of possible side-effects of the drugs your child is taking and to look out for them. If you think your child is experiencing side-effects, talk to your healthcare professional.

Your child may need more support as they get older, particularly when they become a teenager. Being able to meet other [young people living with HIV](#) - for example, through a community group - can help them to stick to their treatment.

What happens if the treatment stops working?

Your child's healthcare professional will monitor your child's viral load (amount of virus in body) and CD4 count (strength of immune system), as well as their general health, to make sure their treatment is working.

If it seems that treatment isn't working, your child's healthcare professional will want to investigate why. If your child is having problems taking the treatment, or you have been forgetting to give it to them, you may be able to get support and stay on the same treatment.

However if the treatment itself isn't working, you can discuss with your child's healthcare professional what the next best treatment option is for your child.

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2. WHO (2016) 'Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection'
3. WHO (2015) 'Guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV'

Last full review:

23 April 2020

Next full review:

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Sources:

Chiva 'Taking Medication'

Chica 'Teenagers & Medication'

The Well Project (2020) Care and Treatment for Children Living with HIV