What is a ‘mixed-status couple’?

When one partner is HIV-negative and one partner HIV-positive. Also known as a serodiscordant couple.

Couples HIV testing and counselling

Testing for HIV together and receiving counselling with your partner can...

✔ Make it easier to disclose your HIV test results to one-another.
✔ Help you to cope if one or both of you receive a positive result.
✔ Make planning for the future a shared responsibility.

AVERT’s ‘HIV Testing’ fact sheet has more info.

Safer sex tips

Mixed status couples are able to have safe sexual relationships by following this advice:

Talk about HIV prevention and family planning together as a couple, and with a healthcare professional.

Use condoms every time you have sex.

Consider your HIV treatment options.

HIV treatment for the HIV+ partner

Antiretroviral drugs lower the amount of HIV in your body.

It can reduce the virus to very low levels (undetectable), making you less likely to pass on HIV.

You should start taking HIV treatment:

✔ straight away after your diagnosis.
✔ this will lower the virus in your body to prevent transmission to your partner.

Seek advice from a healthcare provider about starting treatment.

HIV treatment for the HIV- partner

Treatment taken by HIV-negative partners is called pre-exposure prophylaxis (PrEP).

This is recommended for mixed-status couples.

It prevents exposure to HIV from becoming an infection.

Access to PrEP is limited so it may not be available to you.
Family planning

It is important to plan your pregnancy to protect your partner and baby from HIV.

Your healthcare professional can direct you to family planning services.

Conception options

Having an HIV-negative baby is possible with careful planning.

Your conception options will vary depending on which partner is HIV-positive.

Artificial insemination

Artificial insemination protects the male partner from HIV-infected bodily fluids. His sperm is inserted into the woman’s vagina using a syringe. You can do this at home, but with medical advice!

Artificial insemination is most effective when the woman is ovulating (releasing an egg). Ovulation occurs about 14 days after a woman’s period starts.

Ovulation varies between women, seek advice from your doctor.

Sperm washing

‘Semen’ is the fluid that comes from a man’s penis when he ejaculates (“cums”). This fluid contains sperm and seminal fluid.

HIV-infected semen cannot infect your baby, but can infect your partner.

Sperm washing is a procedure that separates HIV-free sperm from the HIV-infected seminal fluid.

HIV-free sperm can be inserted into the woman’s vagina by artificial insemination - eliminating HIV risk.

Washed sperm can also be used to fertilise the woman’s egg by in vitro fertilisation (IVF).

HIV-negative donor sperm is another option that eliminates HIV risk.

Access to sperm washing and IVF can be limited in some settings.

HIV treatment and timed, unprotected sex

Both types of serodiscordant couples could take HIV treatment and conceive naturally.

The HIV-positive partner can take HIV treatment to lower their viral load.

The HIV-negative partner can take PrEP prior to unprotected sex in some cases (risk of HIV infection still exists).

Get tested and treated for STIs to reduce the risk of HIV transmission.

Monitor your viral load closely if having unprotected sex.

Only have unprotected sex whilst the female partner is ovulating.

But, unprotected sex still risks passing HIV to the negative partner.

Know your rights

You have the right to:

- request or refuse an HIV test
- refuse HIV treatment
- choose if, how and when to conceive.

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