Short communication Open Access

## A General View on Pregnancy Women with HIV

Routhu Naole Sumbele

Department of Health science, Methodist University of Angola, Luanda, Angola

\*Corresponding author: Sumbele RN, Department of Health science, Methodist University of Angola, Luanda, Angola, E-mail: heresi1g@ccf.org

Received date: December 09, 2021; Accepted date: December 23, 2021; Published date: December 30, 2021

Copyright: © 2021 Sumbele RN. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

## **Description**

During pregnancy, childbirth, and breastfeeding, an HIV-positive pregnant woman can spread the infection to her kid. HIV-positive women must follow their antiretroviral therapy during pregnancy, and breastfeeding essentially eliminates the danger of passing the virus on to your baby. And have to take antiretroviral medicines; this medicine is often called as HIV medicines.

Perinatal transmission involves the spread of HIV from a mother to her child during pregnancy, labour, delivery, or breastfeeding. It is known that HIV can transmit through the placenta and infect the developing fetus. The most prevalent way for children to become infected with HIV is through perinatal transmission. For their own health and to avoid perinatal transmission of HIV, all HIV-positive pregnant women should take HIV drugs throughout their pregnancy. Perinatal HIV transmission is also referred to mother-to-child HIV transmission.

HIV enters the bloodstream through bodily fluids like blood or sperm. The virus infects and destroys CD4 cells once it has entered the bloodstream. CD4 cells are important immune system cells. The body's ability to fight sickness is harmed when these cells are damaged. The newborn may be exposed to the virus in the mother's blood and other bodily fluids during labour and delivery. The amniotic sac ruptures as a woman goes into labour (her water breaks). When this happens, the baby's risk of contracting HIV rises. The majority of HIV-positive newborns become infected around the time of delivery. Breastfeeding might also pass the infection on to the infant.

HIV infection is treatable but not curable. Anti-HIV medications can help persons with HIV stay healthy for a long period and reduce the risk of spreading the virus to others. There is no vaccine that can protect you from contracting HIV. Zidovudine, an HIV treatment taken intravenously, is advised (in addition to the current therapy regimen) for some pregnant women right before delivery (by IV). To reduce the risk of HIV infection, HIV drugs are given orally to the newborn for four to six weeks following birth.

The person has to be in positive mind to give birth to a healthy baby. Pregnant women with HIV should consume a lot of fruits and leafy green vegetables. One have to consume a diet rich in fruits, vegetables, whole grains, and legumes and have to choose protein sources that are lean and low in fat. Sweets, soft drinks, and foods with added sugar should be avoided. They should maintain a high level of food safety awareness. Because HIV impairs the immune system, people with HIV/AIDS are more susceptible to food poisoning. Practicing food safety reduces your chances of being ill. Avoid eating raw or undercooked meat, fish, or eggs; only drink pasteurized milk or cheese; wash fruits and vegetables; and separate raw meats and produce with different knives and cutting boards.

The findings back up the World Health Organization's new recommendations for HIV therapy in pregnant women. Previous study has clearly established that suppressing HIV with antiretroviral medication decreases prenatal HIV transmission and helps both the mother and the child's health.