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NIAID FUNDS MAJOR STUDY ON TRANSMISSION OF HIV DURING PREGNANCY AND BIRTH

The National Institute of Allergy and Infectious Diseases (NIAID) has awarded three 5-year contracts totaling $29.4 million dollars in a major collaborative effort to determine what factors influence transmission of human immunodeficiency virus (HIV), the cause of AIDS, during pregnancy and birth.

As of June 27, 1988, 1049 children less than age 13 have been diagnosed with AIDS, and many more are believed to be seropositive for the virus. Approximately 80 percent of these children acquired the infection from their mothers. Transmission from an infected mother to her newborn occurs 20 to 60 percent of the time. The exact mechanisms of transmission during pregnancy and birth are unknown.

"This collaborative study reflects a deep concern of NIAID--namely how to stop the spread of AIDS from women to their babies," said NIAID Directory Dr. Anthony S. Fauci. "Recently we have seen a sharp rise in the numbers of AIDS-infected babies, especially among those born to black or Hispanic women who are drug abusers or whose sexual partners are infected. These studies will clarify the risks for pregnant women who are already infected and will provide an opportunity to educate the study participants about how to avoid infection in themselves, their sexual partners, and their infants."
Specific goals of the study include determining the following—
- Modes of transmission during pregnancy and birth;
- Frequency of transmission during pregnancy and birth;
- Cofactors—biological, nutritional, and environmental— influencing transmission;
- The effect of pregnancy on the course of HIV infection in the mother;
- The effect of maternal HIV disease on pregnancy and the fetus;
- The incidence and clinical spectrum of HIV infection in children.

The three institutions receiving funding are Brigham and Women's Hospital in Boston ($12.1 million), University of Illinois Hospital in Chicago ($9.1 million), and Presbyterian Hospital in New York City ($8.2 million).

Each center will recruit a cohort of at least 500 women from area hospitals and clinics. Women entered into the study will be those who are seropositive for HIV or are at increased risk of HIV infection and who are pregnant or have a high probability of becoming pregnant within two years. These women will be compared with control groups of seronegative women who are pregnant or at risk of becoming pregnant. Children born to these seronegative and seropositive groups of women will also be studied. Special efforts will be made to include women from minority populations, in which the prevalence of AIDS is known to be higher than in the general population.

Medical research teams at each center will periodically administer questionnaires and medical exams, including psychiatric evaluations, obtain clinical specimens, and perform tests for HIV and other infections. Individual counseling and education will be provided to at-risk women and their families.

Data collected in this study will be used to design improved prevention, diagnostic, and treatment programs for women at risk of HIV infection and their children.

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