

World AIDS Day
Press Release
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**World Alliance for
Breastfeeding Action**

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Leadership: Keep the Promise to HIV-Positive Mothers and their Babies

WABA joins UN agencies, governments and all sectors of civil society worldwide in marking the 20th anniversary of World AIDS Day. 2008 also finds us at the halfway mark between the 2001 UNGASS *Declaration of Commitment on HIV/AIDS*ⁱ and the 2015 target for combating HIV/AIDS, and only two years before the agreed target date for universal access to treatment care and support.ⁱⁱ

WABA also remembers that it has been a decade since UNICEF initiated the first pilot projects in 11 developing countries, designed to prevent transmission of HIV from 30 000 mothers to their babies. While progress continues to be made, attainment of the goal of preventing infection of young women and their children in countries of the highest HIV-prevalence continues to be elusive. During an interview at the 2008 International AIDS Conference in Mexico,ⁱⁱⁱ Stephen Lewis, Co-Director of AIDS-Free World, and former UN Special Envoy on HIV/AIDS in Africa noted that " ... in the year 2008 only 34% of the HIV positive women in Africa have access to any form of antiretroviral treatment. Frankly, the treatment tends to be purely single dose nevirapine rather than full HAART, so we are still losing tens of thousands of children every year unnecessarily, not to mention the inadequate treatment of their mothers."

In sub-Saharan Africa, nearly 60% of people living with HIV are women, and the epidemic has orphaned nearly 12 million children under 18 years of age.² In addition, mother-to-child transmission of HIV in poor countries remains one of the most challenging issues in infant health. In particular, how to balance the low but ongoing risk of HIV transmission through breastfeeding against the substantial risk of severe infection or malnutrition and death with breastfeeding avoidance or early cessation, continues to pose a dilemma for policy-makers, healthcare providers and mothers.

Several studies in urban Africa suggest that the rate of HIV transmission through exclusive breastfeeding is one-half to one-tenth the rate when babies are breastfed with the addition of other fluids or foods (mixed fed) early in life. Since exclusive breastfeeding is not yet the norm in most countries, promoting it will not only have a beneficial effect for all infants (including those born to HIV-positive mothers who do not know their status), but make it easier to support exclusive breastfeeding among HIV-positive mothers who have chosen it as their first feeding method.

Studies showing the danger of early breastfeeding cessation in various African settings have also shown that early abrupt cessation does not improve the rate of HIV-free survival among older babies and is harmful to HIV-infected infants.

Thus new research has prompted the World Health Organisation to change its guidance to include the following new wording:^{iv}

1. *Exclusive breastfeeding is recommended for HIV-infected mothers for the first six months of life unless replacement feeding is acceptable, feasible, affordable, sustainable and safe [AFASS] for them and their infants before that time.*

2. *At six months, if replacement feeding is still not acceptable, feasible, affordable, sustainable and safe, continuation of breastfeeding with additional complementary foods is recommended, while the mother and baby continue to be regularly assessed.*

At the same time, it has been suggested that more liberal treatment guidelines supporting sustained maternal HAART for women with CD4 counts under 350 cells/mm³ throughout lactation should improve maternal health and also substantially reduce early transmission through breastmilk.^v

WABA calls for strong leadership to renew support for safer breastfeeding for the vast majority of HIV-exposed babies wherever replacement feeding is not AFASS. Furthermore, WABA calls for the rapid implementation of research and updated training to improve policy makers' and infant feeding counsellors' ability to assist mothers in these settings in better deciding if and when there is an appropriate time to stop breastfeeding.

In order to maximise the health and well-being of mothers and babies, and provide the best chance to reduce onward transmission of HIV, WABA also adds its voice to calls for leaders to keep their promise of universal treatment, care and support.

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Endnotes

ⁱ UN Declaration of Commitment, 25-27 June 2001,
<http://www.un.org/ga/aids/coverage/FinalDeclarationHIVAIDS.html> (accessed 27 November 2008)

ⁱⁱ UNAIDS 2008, Report on the global AIDS epidemic, August 2008
Available at http://data.unaids.org/pub/GlobalReport/2008/JC1510_2008GlobalReport_en.zip
(accessed 20 November 2008)

ⁱⁱⁱ Interview with Stephen Lewis, by Sheila Marunga Coutinho on Thursday 7th August 2008 during the XVII International AIDS Conference held in Mexico. <http://healthdev.net/site/post.php?s=4000>

^{iv} WHO, UNICEF, UNAIDS, UNFPA 2007, HIV and infant feeding, Update, based on the technical consultation held on behalf of the Inter-agency Task Team (IATT) on Prevention of HIV infection in pregnant women, mothers and their infants, Geneva, 25-27 October 2006, ISBN 978 92 4 159596 4
http://whqlibdoc.who.int/publications/2007/9789241595964_eng.pdf [accessed 13 November 2008]

^v Fowler MG. Further evidence that exclusive breast-feeding reduces mother-to-child HIV transmission compared with mixed feeding. *PLoS Med* 2008;5(3): e63.
doi:10.1371/journal.pmed.0050063



The World Alliance for Breastfeeding Action (WABA) is a global network of individuals and organisations concerned with the protection, promotion and support of breastfeeding worldwide based on the Innocenti Declarations, the Ten Links for Nurturing the Future and the WHO/ UNICEF Global Strategy for Infant and Young Child Feeding. Its core partners are International Baby Action Food Network (IBFAN), La Leche League International (LLL), International Lactation Consultant Association (ILCA), Wellstart International and Academy of Breastfeeding Medicine (ABM). WABA is in consultative status with UNICEF and an NGO in Special Consultative Status with the Economic and Social Council of the United Nations (ECOSOC). For more information, please contact: World Alliance for Breastfeeding Action (WABA) • P.O.Box 1200, 10850 Penang, Malaysia • Tel: 60-4-6584816 • Fax: 60-4-6572655 • Email: waba@streamyx.com • Website: www.waba.org.my