

Antiretroviral treatment for children living with HIV



FAST FACTS

- Antiretroviral treatment (ART) can keep your child healthy and help them lead a normal, fulfilling life with HIV.
- A healthcare professional will be able to give you guidance on matching the right type of treatment to your child's age and existing health condition.
- There may be circumstances which mean that your child can't take a certain medicine, but there's no need to worry as treatment can always be changed.
- If you're living with HIV and have recently given birth, then continuing to take HIV treatment while breastfeeding will help protect your new baby.

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

Talk to your child's healthcare professional about any questions you have. The information on this page may help you to think about what you might want to ask.

My child has HIV, what treatment do they need?

Treatment for HIV is [not a cure](#), but it can keep HIV under control and prevent your child from becoming ill from HIV. Without treatment, HIV will damage your child's immune system, and this puts them at risk of serious illnesses. For babies and young children, untreated HIV is very serious.

Once your child has started HIV treatment, it is important that they take it every day. For babies and young children, some HIV drugs are available as liquids or syrups. However, not all HIV drugs for children are available in this form, and some may not be available where you live.

The dose of the drug – how much you give your child – will be explained by a healthcare professional. The doses will change as your child gets bigger and heavier.

National guidelines on what drugs your child can take may vary, and the decision may change depending on your child's individual situation and local availability of drugs.

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

You may worry about whether your child will take their HIV treatment, particularly if they find the pills difficult to swallow, or don't like the taste of a liquid drug.

Seeing the medicine as a normal part of your child's daily routine can help you and your child – just like washing, brushing teeth, or getting ready for bed. If you are also taking medication, then taking your medication at the same time as your child can help them accept it. Some parents find it helpful to reward and praise their child when they have taken their medication, particularly when they are younger.²

Remember that many other parents have had children with HIV – talk to your child's healthcare professional about your concerns and if you know other families affected by HIV, ask other parents for tips.

It's also important to be aware of possible side-effects that the drugs your child is taking could cause and to keep an eye out for them. If you do think your child may be experiencing side-effects, talk to your healthcare professional about what to do.

As your child gets older, particularly when they reach adolescence, having support from their peers – such as through a community group of other [young people living with HIV](#) – can really help them to stick to their treatment.³

What happens if the treatment stops working?

Your child's healthcare professional will monitor your child's viral load (level of HIV) and CD4 count (strength of immune system), as well as their general health and development, to make sure that the treatment is working.

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

If the treatment is not working, then it can be changed. You can discuss with your child's healthcare professional what the next best treatment option would be for your child.

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, to reduce the risk of HIV being passed on to their baby.⁴

Once your baby is born, they will also need to take an HIV drug in the form of a syrup for a few weeks to help prevent HIV infection. Your baby will be tested for HIV after this point, and if the result is negative they can stop taking the syrup. If the result is positive they will need to start taking treatment too.⁵

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1. WHO (2015) 'Guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV'
 2. Children's HIV Association 'Taking Medication' [accessed April 2015]
 3. World Health Organisation (2013) 'HIV and adolescents: Guidance for HIV testing and counselling and care for adolescents living with HIV - Guidance document'
 4. WHO (2015) 'Guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV'
 5. WHO (2015) 'Guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV'

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