WEB ANNEX E. RECOMMENDATIONS FOR USE OF HORMONAL CONTRACEPTION FOR WOMEN LIVING WITH HIV USING ANTIRETROVIRAL THERAPY (ART)

In:

Updated recommendations on first-line and second-line antiretroviral regimens and post-exposure prophylaxis and recommendations on early infant diagnosis of HIV: interim guidelines. Supplement to the 2016 consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection



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Recommendations for use of hormonal contraception for women living with HIV using antiretroviral therapy (ART)		
ARV CLASS	MEDICAL ELEGIBILITY CRITERIA (MEC) RECOMMENDATION	GRADE ASSESSMENT OF QUALITY OF EVIDENCE
Nucleoside/nucleotide reverse transcriptase inhibitors (NRTIs)	Women taking any NRTI can use all hormonal contraceptive methods without restriction: COCs, CICs, combined contraceptive patches and rings, POPs, POIs (DMPA and NET-EN), and LNG and ETG implants (MEC Category 1).	Range: Low to very low
	Women taking any NRTI can generally use the LNG-IUD (MEC Category 2), provided that their HIV clinical disease is asymptomatic or mild (WHO Stage 1 or 2).	
	Women living with severe or advanced HIV clinical disease (WHO stage 3 or 4) and taking any NRTI generally should not initiate use of the LNG-IUD (MEC Category 3 for initiation) until their illness has improved to asymptomatic or mild HIV clinical disease.	
	Women taking any NRTI who already have had an LNG-IUD inserted and who develop severe or advanced HIV clinical disease need not have their IUD removed (MEC Category 2 for continuation).	
Non-nucleoside reverse transcriptase inhibitors (NNRTIs) containing efavirenz or nevirapine	Women using NNRTIs containing either efavirenz or nevirapine can generally use COCs, CICs, combined contraceptive patches and rings, POPs, NET-EN, and LNG and ETG implants (MEC Category 2).	Range: Low to very low
	Women using efavirenz or nevirapine can use DMPA without restriction (MEC Category 1). Women taking any NNRTI can generally use the LNG-IUD (MEC Category 2), provided that their HIV clinical disease is asymptomatic or mild (WHO Stage 1 or 2).	
	Women living with severe or advanced HIV clinical disease (WHO stage 3 or 4) and taking any NNRTI generally should not initiate use of the LNG-IUD (MEC Category 3 for initiation) until their illness has improved to asymptomatic or mild HIV clinical disease.	
	Women taking any NNRTI who already have had an LNG-IUD inserted and who develop severe or advanced HIV clinical disease need not have their IUD removed (MEC Category 2 for continuation)	

Recommendations for use of hormonal contraception for women living with HIV using antiretroviral therapy (ART)		
ARV CLASS	MEDICAL ELEGIBILITY CRITERIA (MEC) RECOMMENDATION	GRADE ASSESSMENT OF QUALITY OF EVIDENCE
NNRTIs containing etravirine and rilpivirine	Women using NNRTIs containing either efavirenz or nevirapine can generally use COCs, CICs, combined contraceptive patches and rings, POPs, NET-EN, and LNG and ETG implants (MEC Category 2).	Range: Low to very low
	Women using efavirenz or nevirapine can use DMPA without restriction (MEC Category 1).	
	Women taking any NNRTI can generally use the LNG-IUD (MEC Category 2), provided that their HIV clinical disease is asymptomatic or mild (WHO Stage 1 or 2).	
	Women living with severe or advanced HIV clinical disease (WHO stage 3 or 4) and taking any NNRTI generally should not initiate use of the LNG-IUD (MEC Category 3 for initiation) until their illness has improved to asymptomatic or mild HIV clinical disease.	
	Women taking any NNRTI who already have had an LNG-IUD inserted and who develop severe or advanced HIV clinical disease need not have their IUD removed (MEC Category 2 for continuation).	
Protease inhibitors (PIs)	Women using protease inhibitors (e.g. ritonavir and ARVs boosted with ritonavir) can generally use COCs, CICs, combined contraceptive patches and rings, POPs, NET-EN, and LNG and ETG implants (MEC Category 2).	Range: Low to very low
	Women using protease inhibitors (e.g. ritonavir and ARVs boosted with ritonavir) can use DMPA without restriction (MEC Category 1).	
	Women taking any PI can generally use the LNG-IUD (MEC Category 2), provided that their HIV clinical disease is asymptomatic or mild (WHO Stage 1 or 2).	
	Women living with severe or advanced HIV clinical disease (WHO stage 3 or 4) and taking any PI generally should not initiate use of the LNG-IUD (MEC Category 3 for initiation) until their illness has improved to asymptomatic or mild HIV clinical disease.	
	Women taking any PI who already have had an	

Recommendations for use of hormonal contraception for women living with HIV using antiretroviral therapy (ART)		
ARV CLASS	MEDICAL ELEGIBILITY CRITERIA (MEC) RECOMMENDATION	GRADE ASSESSMENT OF QUALITY OF EVIDENCE
	LNG-IUD inserted and who develop severe or advanced HIV clinical disease need not have their IUD removed (MEC Category 2 for continuation)	
Raltegarvir (integrase inhibitor)	Women using the integrase inhibitor raltegravir can use all hormonal contraceptive methods without restriction (MEC Category 1).	Range: Low to very low
	Women taking raltegravir can generally use the LNG-IUD (MEC Category 2), provided that their HIV clinical disease is asymptomatic or mild (WHO Stage 1 or 2).	
	Women living with severe or advanced HIV clinical disease (WHO stage 3 or 4) and taking raltegravir generally should not initiate use of the LNG-IUD (MEC Category 3 for initiation) until their illness has improved to asymptomatic or mild HIV clinical disease.	
	Women taking raltegravir who already have had an LNG-IUD inserted and who develop severe or advanced HIV clinical disease need not have their IUD removed (MEC Category 2 for continuation).	

ART: antiretroviral therapy; ARV: antiretroviral (medication); CHC: combined hormonal contraceptive; CIC: combined injectable contraceptive; COC: combined oral contraceptive; Cu-IUD: copper-bearing IUD; DMPA: depot medroxyprogesterone acetate; ETG: etonogestrel; GRADE: Grading Recommendations, Assessment, Development and Evaluation; GRC: Guidelines Review Committee; IM: intramuscular; IUD: intrauterine device; LNG: levonorgestrel; NET-EN: norethisterone enanthate; POC: progesterone-only contraceptive; NRTI: nucleoside/nucleotide reverse transcriptase inhibitor; NNRTI: non-nucleoside/nucleotide reverse transcriptase inhibitor; POI: progresterone-only injectable; POP: progesterone-only pill; SC: subcutaneous; SVT: superficial venous thrombosis; VTE: venous thromboembolism.

	MEC categories for contraceptive eligibility
1	A condition for which there is no restriction for the use of the contraceptive method
2	A condition where the advantages of using the method generally outweigh the theoretical or proven risks
3	A condition where the theoretical or proven risks usually outweigh the advantages of using the method
4	A condition which represents an unacceptable health risk if the contraceptive method is used.

References

Medical Eligibility Criteria for Contraceptive Use. 5th edition. Geneva: World Health Organization; 2015. Available from : http://www.who.int/reproductivehealth/publications/family_planning/MEC-5/en/