

A prospective study of contraceptive use among African women in HIV-1 serodiscordant partnerships.

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Abstract:

BACKGROUND: Dual contraception is important for averting HIV-1 transmission, unintended pregnancy, and maternal-to-child HIV-1 transmission. Few studies have explored contraceptive use in HIV-1 serodiscordant couples, a population at high risk for HIV-1 transmission. **METHODS:** Data from a prospective study of 3407 women in HIV-1 heterosexual serodiscordant partnerships were analyzed to describe use and correlates of contraception. **RESULTS:** Among 2298 HIV-1 seropositive women, 23.5% used contraception at enrollment and 30.2% used contraception after 24 months of follow-up; among 1109 HIV-1 seronegative women, contraceptive use decreased from 21.3% to 14.2%. For both HIV-1 seropositive and seronegative women, contraceptive use was less common among women from East Africa compared to women from southern Africa (adjusted odds ratio [AOR], 0.6; 95% confidence interval [CI], 0.5-0.8 and AOR, 0.6; 95% CI, 0.4-0.8, respectively) and more common among women with at least one child (AOR, 2.4; 95% CI, 1.7-3.4 and AOR, 2.3; 95% CI, 1.2-4.5, respectively). Condom use increased significantly during follow-up from 71.2% to 92.6% and 73.5% to 95.6% among HIV-1 seropositive and HIV-1 seronegative women, respectively, at baseline and 24 months. However, contraceptive use was associated with unprotected sexual activity among both HIV-1 seropositive and seronegative women (AOR, 1.3; 95% CI, 1.1-1.5 and AOR, 1.4; 95% CI, 1.1-1.8, respectively), although not among women who initiated contraception during follow-up. **CONCLUSIONS:** Counseling and provision of dual contraception should receive high priority in programs that care for women in HIV-1 serodiscordant partnerships.