

Care for pregnant women living with HIV/AIDS: an integrative review*Atención a las mujeres embarazadas que viven con el VIH / SIDA: una revisión integradora**Cuidados com as mulheres gestantes vivendo com HIV/AIDS: uma revisão integrativa***Vanessa Priscila da Silva
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Gonçalves VPS, Goulart LFS, Alves RN, Silva RP, Ferreira MA, Martins ERC, Costa CMA, Santos BCG, Silva Junior MD, Lopes JS. Care for pregnant women living with HIV/AIDS: an integrative review. Glob Acad Nurs. 2021;2(Sup.1):e126. <https://dx.doi.org/10.5935/2675-5602.20200126>

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Chief Editor: Caroliny dos Santos

Guimarães da Fonseca

Executive Editor: Kátia dos Santos

Armada de Oliveira

Submission: 06-19-2021**Approval:** 07-03-2021

Introduction: The acquired immunodeficiency virus (HIV) affects the body's defense cells, enabling infections by diseases, with CD4+ T lymphocytes being the most affected by HIV. It can alter the lymphocyte's DNA to duplicate itself, destroying the cell, seeking to penetrate new cells and propagate the infection. AIDS is caused by HIV, and the fact that the individual is a carrier of the virus does not mean that he will show signs and symptoms of the disease, but he is able to transmit the virus to other people, during unprotected sexual intercourse, as well as through vertical transmission (TV) when it occurs from the mother to the fetus during pregnancy or after birth when breastfeeding¹. In Brazil in 2017, 16,371 new cases of HIV infection were reported, of which 4,491 were women. When analyzing the Reporting Diseases Information System (SINAN) of 2017, the rate of 96.8% of cases in seropositive women older than 13 years is observed in the category of heterosexual exposure and only 1.7% among drug users injectables. It is notorious that these women are being infected by men¹. The severity of HIV-infected pregnant women is associated with the vulnerability that newborns are exposed to by vertical transmission. The highest incidence of vertical transmission occurs in labor with 65%, others follow intrauterine with 35%, especially in the last weeks of pregnancy and in breastfeeding, categorizing a risk of contagion from 7% to 22%². In this context, nursing care is essential for HIV-positive pregnant women and their babies exposed to the virus, providing direct and permanent care to this clientele. The nurse, simultaneously with the multidisciplinary team, develops from the diagnosis of infection with the use of Anti-HIV testing, continuing with therapeutic follow-up for the mother and her child prone to infection. Also carrying out health education actions aiming to encourage adherence to prophylactic treatment to prevent vertical transmission³.

Main Objective: Describe the role of nurses in the care provided to pregnant women living with HIV/AIDS, with the purpose of recognizing the importance of this professional in the care provided to this clientele to seek support for a better quality of life and treatment adherence, reducing the possibility of vertical transmission.

Methodology: This is an integrative, qualitative review that gathered and synthesized, in a systematic and orderly manner, research results on the role of nurses in the care provided to pregnant women living with HIV/AIDS. It was systematized and programmed in order to identify the productions related to the theme of the review: objective; guiding question; search tactics; search in databases highlighting pregnant women living with HIV/AIDS; nursing care for these women; search strategies on diversified platforms; descriptors selected in the search; descriptor interception; inclusion and exclusion criteria, categorization and evaluation of studies; interpretation of data and synthesis of knowledge evidenced in the analyzed studies. 1st step: Identification of the theme and selection of the research question: to conduct this review, the following guiding question was elaborated: Does the care provided by nurses to pregnant women living with HIV/AIDS reduce the risk of vertical transmission? The survey of scientific productions took place from April 2018 to December 2018. To select them, the inclusion criteria were original research articles referring to the survey of scientific productions took place from April 2018 to December 2018. To select them, the inclusion criteria were original research articles on the subject in Portuguese and English, articles available online in full ad free of

charge that portrayed the theme refers to nursing care for pregnant women living with HIV/AIDS and indexed in the databases in the last 05 years. The search of databases: BIREME/BVS, which includes "Nursing Database (BDENF), Latin American and Caribbean Literature on Health Sciences (LILACS), Online Medical Literature Analysis and Retrieval System (MEDLINE), PubMed and CAPES Periodical Portal, these platforms were chosen for reaching the studied subject in a more specific way. We applied the following descriptors in DeCS – Health Science Descriptors: "Nursing Care", "Pregnant Woman", "HIV", "Women". The interception of these descriptors was used through the Boolean operator AND and OR. 2nd stage: Identification of pre-selected and selected studies: for proper selection of articles, the inclusion criteria were defined: complete, free scientific articles, that answered the guiding question and were in the last five years. Exclusion criteria were articles without abstracts in the database, literature review articles or incomplete, theses, theses chapters, TCC projects (Course Completion Work) and articles that did not answer the research question. Regarding the computerized search in the Bireme database, 68 articles were found, of which 04 were included in this review. In the PubMed database, 33 articles were found, including 2 articles. From the search in Capes Periodicals, 88 articles were located, but none were included in the search. 3rd step: Definition of information to be extracted from selected studies / categorization of studies: after reading the selected articles, data will be synthesized in a pilot form, consisting of variables related to the identification of articles: year of publication, study code, authors /title of the article, periodicals, types of violence, authors' profession, State and Country, language, type of study, article objectives, public or private university, level of evidence, synthesis of results and search site Search strategies in database and the reasons for exclusion will be represented through a flowchart, as recommended by the PRISMA group⁴. The 4th, 5th and 6th steps: analysis and interpretation of results and presentation of the review/synthesis of knowledge were carried out after the compilation of the articles that will be effectively analyzed.

Results and Discussion: In this research, the six articles analyzed met the inclusion criteria previously established as elucidated in the methodology. Of these six productions were published between 2014 and 2017, we did not find articles in 2018. Regarding the scientific productions found, it is noteworthy that the producers are predominantly

nurses with doctors and masters, including doctors and a psychologist. Among the research subjects are HIV-positive women, nurses, nursing technicians and nursing assistants. The predominant language of publication was English. As for the methodological aspects, it was observed that the qualitative approach was the most used, all selected articles were original. To better learn the data found and carry out a clearer analysis, as well as a good presentation of the results, the division by thematic area was elaborated, summed up in four categories: communication, training, breastfeeding, and nursing protagonism. In the communication category, it is related to two articles, in which one article the subjects were pregnant women and the other with nursing professionals, the synthesis of its results demonstrates the importance of nurses in providing care within professional ethics, with a focus on humanization and prioritizing guidance on the treatment of the mother-child binomial. The training category comprises an article that exposes and analyzes evidence-based practice by nursing professionals, showing the importance of professional updating and access to scientific methods. In studies referring to the breastfeeding category, women were unable to breastfeed because they were living with HIV, both studies demonstrate the importance of the reception performed by nursing professionals. In the categorization of the nurse's protagonism, it adds in this perspective that the nurse in their theoretical-practical experiences demonstrated that their work with pregnant women and in the postpartum period are essential to enhance the assistance of these professionals in the prevention of vertical transmission to bring more results positive in caring for these women than the medical professional.

Conclusion: In the analysis, we found the importance of nurses in caring for pregnant women living with HIV, but updates and evidence-based practices for vertical prevention are needed. As a clear result, the need to provide care aimed at humanization and integrality as the professional routine of nurses, together with the nursing staff to prevent transmission from mother to child, both during pregnancy and in the puerperal period immediate. It proved essential for nurses to have prejudice and discrimination during nursing care to ensure the professional bond to conquer these women and positively influence the therapeutic adherence and better quality of life of the mother and her baby.

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