PRIORITIZING MATERNAL AND CHILD HEALTH

OVERVIEW

Although **mother-to-child transmission of HIV is preventable through antiretroviral treatment during pregnancy and postpartum**, there were more than 150,000 new infections in children (0 – 14 years) worldwide in 2019.[1] Despite the existence of Tuberculosis (TB) preventive treatment including pediatric vaccines, more than 12 percent of TB infections in 2019 occurred in children.[2] As a key implementing agency of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the U.S. Centers for Disease Control and Prevention (CDC) **supports treatment for maternal and pediatric HIV and TB disease, as well as efforts to prevent new infections**.

ELIMINATING MOTHER-TO-CHILD TRANSMISSION

Mother-to-child HIV transmission can occur during pregnancy, child delivery, or postpartum. For a woman living with HIV, achieving viral load suppression with sustained treatment effectively eliminates the possibility of transmitting HIV to her child. To prevent the transmission of HIV from mother to child, in 2020, CDC supported treatment for 483,000 HIV-positive, pregnant women to reduce the risk of mother-to-child transmission—**approximately 60% of all pregnant women who received HIV treatment through PEPFAR**. Since the program's inception, PEPFAR has successfully averted more than 2.7 million infections in children by finding and linking mothers to antiretroviral treatment. In partnership with PEPFAR-supported countries, CDC focuses on eliminating – not just preventing – mother-to-child transmission as a source of new HIV infections.

PEDIATRIC HIV

New HIV infections among children have declined by 52 percent, from 310,000 in 2010 to 150,000 in 2019. While progress has been made towards preventing infections in children, **current efforts must be targeted towards optimizing treatment for young children and adolescents living with HIV**. Without access to testing and treatment, half of all children living with HIV will die by the age of two, and 80 percent will not live to their fifth birthday.[3] Results from CDC-led Population-based HIV Impact Assessments show that children have the lowest viral suppression rates – a measure of HIV in the body – among all age groups. Informed by this data, CDC supports early infant diagnosis programs to rapidly identify and link children who are HIV-positive to lifelong antiretroviral treatment.

PEDIATRIC TB

Of the 10 million people who become ill each year with TB, 1.1 million are children. CDC experts work to integrate TB screening into routine pediatric health care and to identify the best methods to diagnose TB in children. **CDC also supports the scale up of TB preventive treatment for children to ensure a speedy and effective cure for the millions of children who develop TB** each year. In 2019, CDC and the International Union against TB and Lung Disease launched the Sub-Saharan Africa Regional Child and Adolescent TB Center of Excellence. It is the first multi-country collaborative of its kind to gather the world's leading subject matter experts in pediatric TB alongside Ministries of Health from countries with the world's highest TB burden. These experts work together to assess gaps and weaknesses in governance, training, and implementation, and to develop solutions and interventions.

CLOSING REMAINING GAPS

Globally, UNAIDS estimates there were 1.8 million children living with HIV in 2019. Of this number, only 53 percent were accessing antiretroviral treatment.[4] A further analysis shows that 85 percent of pregnant women living with HIV had access to antiretroviral treatment in 2019 to prevent mother-to-child HIV transmission. Sixty percent of childhood TB cases go undiagnosed each year, with most of these cases in the Democratic Republic of the Congo, India, Indonesia, Nigeria, Pakistan, and the Philippines. Globally, children accounted for 16 percent of HIV-negative people who died from TB in 2019.[5] The lack of adequate pediatric medicines and child-friendly formulations remains a challenge in addressing pediatric HIV and TB**. Additional effort must be made to close these gaps in preventing and treating pediatric HIV, and in finding, curing, and preventing pediatric TB disease**.

[1] *UNAIDS. Global HIV & AIDS Statistics – 2020 Factsheet*
[2] *WHO. Global Tuberculosis Report – 2020*
[3] *WHO. Treatment of Children Living with HIV. https://www.who.int/hiv/topics/paediatric/en/*
[4] *UNAIDS. Global HIV & AIDS Statistics – 2020 Factsheet*
[5] *WHO. Global Tuberculosis Report – 2020*