

Michigan Department of Health and Human Services Division of HIV and STD Programs

Undetectable = Untransmittable (U=U)

FREQUENTLY ASKED QUESTIONS

1. Can a person with HIV on treatment with an undetectable viral load transmit HIV?

No. A person living with HIV on antiretroviral therapy (ART) with an undetectable HIV viral load that is maintained over time and monitored every 4-6 months cannot transmit HIV through sex. There is effectively no risk of transmitting HIV sexually.

2. What is the evidence?

Three large multinational research studies involving couples in which one partner was living with HIV and the other was not—HPTN 052, PARTNER, and Opposites Attract—observed no HIV transmission to the HIV-negative partner when the partner with HIV had a undetectable viral load. These studies included thousands of condom-less sex acts, both men and women, gay and straight couples.

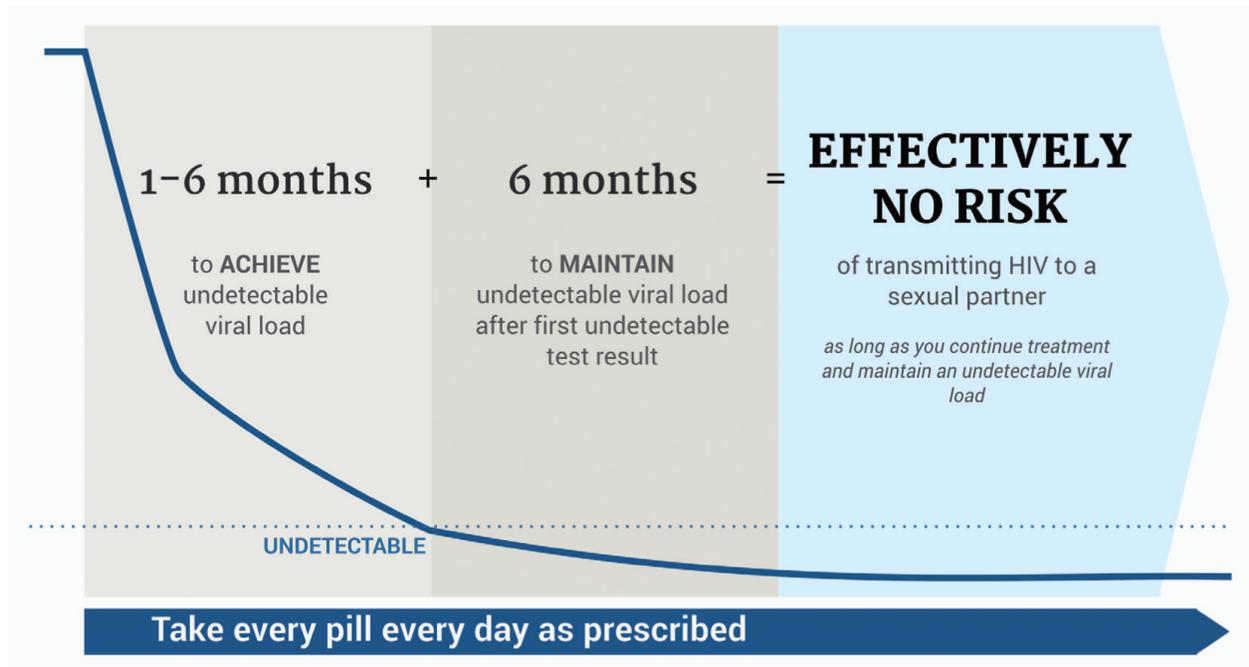
3. What is "viral load suppression" and what is an "undetectable viral load"?

Viral load suppression is when a person's HIV viral load is ≤ 200 copies/mL of blood (line for enrollment and monitoring in PARTNER and Opposites Attract Studies). This is also how the term is defined by HRSA and understood by those providing medical and support services to people living with HIV in Michigan.

Undetectable viral load is when the viral load lab test is unable to detect any HIV virus in the blood. The patient still has HIV, however very little is circulating in the blood. For the purposes of the U=U campaign, the term "undetectable" is used synonymously with the term "virally suppressed."

4. After a person begins HIV treatment, how long does it take for the risk of sexually transmitting HIV to become effectively zero?

There is effectively no risk of sexual transmission of HIV when the partner living with HIV has achieved an undetectable viral load and then maintained it for at least six months. Most people living with HIV who start taking antiretroviral therapy daily as prescribed achieve an undetectable viral load within one to six months after beginning treatment.



People living with HIV who achieve and then maintain an undetectable viral load have effectively no risk of sexually transmitting the virus to an HIV-negative partner. Credit: NIAID

5. Does everyone who starts HIV treatment become and remain undetectable?

Almost everyone who starts ART finds a drug regimen that works within six months. About one out of six people will need additional time to find the right treatment due to tolerance and adherence issues. Nearly everyone who starts HIV treatment can become and remain undetectable.

6. Does being undetectable mean that the virus has left the body?

Even when the viral load is undetectable, HIV is still present in the body. When therapy is interrupted by missing doses, taking a treatment holiday, or stopping treatment, the virus emerges and begins to multiply, becoming detectable in the blood again. It is essential to take every pill every day as directed to achieve and maintain an undetectable status.

7. What happens if a person stops taking antiretroviral therapy?

When therapy is stopped, viral load rebounds, and the risk of transmitting HIV to a sexual partner in the absence of other prevention methods returns. Taking antiretroviral treatment daily as directed to achieve and maintain undetectable status stops HIV infection from progressing, helping people living with HIV stay healthy and live longer while offering the benefit of preventing sexual transmission.



8. How often does a person need to be tested to confirm they are undetectable?

For a person wanting to use U = U as their prevention strategy, viral load should be monitored at least every 4-6 months, and more frequently for those new to antiretroviral therapy or changing regimens.

9. Does a person need to disclose their HIV status to their sex partner if they are undetectable?

Having an undetectable viral load for at least six months and continuing to stay on medication and monitor viral load means there is effectively zero risk of transmitting HIV sexually. However, Michigan law still requires that a person living with HIV notify a sex partner of their HIV status prior to sexual penetration.

10. Should a person stop using condoms and/or PrEP if they are with someone who is undetectable?

Having an undetectable viral load, using PrEP and using condoms are all HIV prevention strategies that people can choose to use alone or in combination. Some people may prefer to use several HIV prevention strategies for a variety of reasons such as to reduce transmission risk anxiety, to prevent other STDs, to prevent pregnancy, or if the partner with HIV has a history of inconsistent ART adherence. Condoms are the only method that helps prevent HIV, STDs, and pregnancy.

11. Does a person still need to worry about other sexually transmitted diseases?

Neither HIV treatment nor PrEP prevents other sexually transmitted diseases, or STDs. Ways to reduce the risk of STDs include having both partners frequently tested at all sites of exposure (butt, mouth, etc.) - followed by timely treatment if an infection is identified, limiting the number of sexual partners, and using condoms. Vaccines are available to prevent some STDs, including hepatitis B and human papillomavirus (HPV).

12. Does having an STD affect the chance of HIV transmission when a person is undetectable?

Based on recent studies, having an STD is not significant to HIV transmission when the partner with HIV has an undetectable viral load. In both the PARTNER and Opposite Attracts studies, STDs were reported by a number of enrolled couples and zero linked transmissions occurred. To date, the risk of transmission when syphilis is present in a couple has not been assessed.



13. What does U = U mean for people living with HIV and having children?

A person living with HIV, who has an undetectable viral load that is maintained and monitored, can impregnate their partner, or conceive a baby without using alternative insemination practices. The science behind U = U provides peace of mind that they will not transmit HIV to their uninfected partner during sex. An undetectable viral load also dramatically reduces the risk of mother to child transmission during pregnancy and at delivery.

14. Does U=U apply to transmission through needle sharing?

U=U does not apply to HIV transmission through needle sharing. There is not yet enough research to draw a conclusion.

Resources:

For more information about U = U visit www.preventionaccess.org

For a summary of the evidence supporting U = U visit <http://i-base.info/htb/32308>

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