

AIDS United Statement on the Risk of HIV Transmission from a Person Living with HIV who is on Treatment and has an Undetectable Viral Load

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Substantial evidence strongly demonstrates that a person living with HIV who has a sustained, undetectable viral load cannot sexually transmit HIV to another person. Continued analysis of large-scale clinical trials has shown zero cases of HIV sexual transmissionⁱ. This expands on prior data that the risk of HIV transmission from a person living with HIV who is on antiretroviral therapy and has achieved an undetectable viral load (viral suppression) in their blood for at least 6 months is negligible to non-existentⁱⁱ.

Too many people living with HIV are not getting the message of this benefit of treatment and sustained viral suppression from their clinical providers or the HIV education and advocacy community. Understanding that maintaining viral suppression through successful anti-retroviral therapy not only maintains health but also prevents transmission can encourage people living with HIV to initiate and adhere to treatment regimens and may help reduce HIV-related stigma. We acknowledge, however, that social and structural barriers exist that prevent some people living with HIV from achieving viral suppression.

Outdated HIV criminalization laws and policies in the U.S. do not reflect the current science related to HIV transmission risks.ⁱⁱⁱ Scientific evidence about the reality of transmission risk based in this data about viral suppression and transmission risk has already had an impact on HIV criminalization statutes and prosecutions in Europe.^{iv}

Therefore, AIDS United recommends:

1. That providers and educators consistently share the message that new evidence demonstrates that a person living with HIV who has a sustained, undetectable viral load cannot sexually transmit HIV to another person.
2. That the Department of Health and Human Services Antiretroviral Guidelines Committee examine this issue further and consider updating Guidelines language.
3. That HIV criminal laws and policies in the United States be modernized to reflect the science related to viral suppression and HIV transmission risk.

Additional Information

AIDS United signed on to the [Consensus Statement](#) issued by the Prevention Access Campaign, a relatively new multi-agency campaign to end HIV and HIV-related stigma by expanding access to HIV prevention and empowering people with/vulnerable to HIV with accurate information. The Consensus Statement reads as follows:

People living with HIV on ART with an undetectable viral load in their blood have a negligible risk of sexual transmission of HIV. Depending on the drugs employed it may take as long as six months for the viral load to become undetectable. Continued and reliable HIV suppression requires selection of appropriate agents and excellent adherence to treatment. HIV viral suppression should be monitored to assure both personal health and public health benefits.

AIDS United Public Policy Committee

The AIDS United Public Policy Committee (PPC) is the oldest continuing federal policy coalition working to end the HIV/AIDS epidemic in the United States since 1984. It is the largest body of community based HIV/AIDS Prevention, Treatment, Research, Education and Service organizations and coalitions in the U.S. The PPC has been instrumental in creating and developing important programs including the Ryan White Program and the National HIV/AIDS Strategy. Its national membership covers jurisdictions that include more than two-thirds of the population of People Living with HIV/AIDS and advocates for the millions of people living with or affected by HIV/AIDS in the U.S. & the organizations that serve them.

AIDS United Public Policy Committee Signatories:

AIDS Action Committee of Massachusetts	LA County Department of Public Health
AIDS Alabama	Legacy Community Health Services, Inc.
AIDS Foundation of Chicago	Los Angeles LGBT Center
APLA Health	Metro Wellness & Community Centers
AIDS Resource Center of Wisconsin	Minnesota AIDS Project
Amida Care	Nashville CARES
Association of Nurses in AIDS Care	National Alliance for HIV Education & Workforce Development
BOOMHealth!	National Black Justice Coalition
Cascade AIDS Project	Positive Women's Network – USA
Christie's Place	Prism Health North Texas
Collaborative Solutions	Puerto Rico Community Network for Clinical Research on AIDS (PR CoNCRA)
CrescentCare	San Francisco AIDS Foundation
Delaware HIV Consortium	Southern AIDS Coalition
Equitas Health	Southern HIV/AIDS Strategy Initiative
GMHC	Thrive Alabama
God's Love We Deliver	Treatment Access Expansion Project
Harlem United	Urban Coalition for HIV/AIDS Prevention Services
Harm Reduction Coalition	Whitman Walker Health
Housing Works	The Women's Collective
Howard Brown Health	
JRI-Health	
Latino Commission on AIDS	

ⁱ Alison J. Rodger, Valentina Cambiano, Tina Bruun, et al., *Sexual Activity Without Condoms and Risk of HIV Transmission in Serodifferent Couples When the HIV-Positive Partner Is Using Suppressive Antiretroviral Therapy*, 316 J. AM. MED. ASS'N 171 (2016).

ⁱⁱ HIV Prevention Trials Network, *HPTN 052: A Randomized Trial to Evaluate the Effectiveness of Antiretroviral Therapy Plus HIV Primary Care versus HIV Primary Care Alone to Prevent the Sexual Transmission of HIV-1 in Serodiscordant Couples*, HPTN, <https://hptn.org/research/studies/33>; Alison J. Rodger, Valentina Cambiano, Tina Bruun, et al., *Sexual Activity Without Condoms and Risk of HIV Transmission in Serodifferent Couples When the HIV-Positive Partner Is Using Suppressive Antiretroviral Therapy*, 316 J. AM. MED. ASS'N 171 (2016).

ⁱⁱⁱ U.S. Department of Justice, *Best Practices Guide to Reform HIV-Specific Criminal Laws to Align with Scientifically-Supported Factors*, <https://www.ada.gov/hiv/HIV-guide-reform-crim.pdf>.

^{iv} Pietro L. Vernazza, Edwin J. Bernard, *HIV is not transmitted under fully suppressive therapy: The Swiss Statement – eight years later*, [Swiss Medical Weekly](https://www.swissmedicalweekly.com), 29 January 2016.