Eliminating mother-to-child transmission of HIV, hepatitis B and syphilis

Fact sheet: August 2017

Key facts

Every year in the WHO Western Pacific Region, 180,000 babies are infected with hepatitis B, 13,000 with syphilis and 1,400 with HIV.

These infections can be largely prevented by screening and treating mothers during pregnancy and vaccinating newborns shortly after birth.

Poor coordination and inefficiencies among programmes in health systems often force women and their babies to seek these services separately. This is a barrier to quality care.

The shared maternal, newborn and child health platform can coordinate and integrate interventions to achieve efficiencies and cost-effectively prevent these infections to achieve elimination.

Every child should be given the best chance to start life healthy and free from preventable diseases. HIV, hepatitis B and syphilis can be transmitted from mother to child during pregnancy, birth and breastfeeding. But these infections can be effectively prevented by immunization, and screening and treatment of pregnant women.

In this Region, most mothers and children receive health services during pregnancy, delivery and in the months after birth. However, when services for HIV, hepatitis B and syphilis are planned and delivered through separate, uncoordinated, vertical programmes in the health system, this can result in redundancies, missed opportunities, and an inefficient use of resources. It can also make it harder for women and babies to get these important services.

The Regional Framework for the Triple Elimination of Mother-to-child Transmission of HIV, Hepatitis B and Syphilis in Asia and the Pacific 2018–2030 will help countries adopt a coordinated approach to delivering these interventions using the shared Maternal, Newborn and Child Health platform.

Examples of better coordination include simultaneous screening for HIV, hepatitis B and syphilis during a pregnant woman’s first prenatal care visit, prompt referral of women who are found to be positive to relevant specialists for treatment, and providing feedback to midwives administering a dose of hepatitis B vaccine at birth.

Economic evaluations have found integrated and coordinated approaches to eliminating mother-to-child transmission to be highly cost-effective. This is increasingly important in the face of declining external funding and the need to rely on sustainable domestic financing.

WHO response

WHO convened consultations with Member States and experts to develop the Regional Framework. WHO is working with partners to support countries in the Western Pacific Region to strengthen and coordinate approaches through the Maternal, Newborn and Child Health platform.

Implementation of the Regional Framework will contribute to achieving and sustaining elimination of mother-to-child transmission of HIV, hepatitis B and syphilis.