OB/GYN Review Course: Women and HIV Questions

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1. The incidence of HIV in women is increasing the most in which group?

a. Caucasian women  
b. Black, not Hispanic  
c. Hispanic  
d. Asian  
e. American Indian

2. Which statement is true regarding acute HIV in pregnant women?

a. High risk seronegative women should be tested more than one time.  
b. The Elisa test for HIV is sensitive for acute HIV.  
c. The Western Blot test for HIV is sensitive for acute HIV.  
d. A CD4 count is adequate to rule out acute HIV.  
e. An HIV/PCR/RNA test is only accurate in chronic HIV disease.
3. A true statement regarding HIV/RNA levels and differences between men and women is:
   a. HIV/PCR/RNA levels are the same in women and men.
   b. HIV/PCR/RNA levels tend to be higher in women than men.
   c. HIV/PCR/RNA levels tend to be lower in women than men.
   d. HIV/PCR/RNA levels are accurate only when done off a menstrual period.
   e. HIV/PCR/RNA levels are falsely elevated on contraceptive medications.

4. Which statement is true regarding HIV and fertility?
   a. HIV disease doesn’t influence prognosis.
   b. HIV tends to have adverse effect both symptomatic and asymptomatic.
   c. HIV tends to have an adverse effect on fertility only if symptomatic.
   d. HIV has no effect on pregnancy rate.
   e. HIV has no effect on pregnancy loss.

5. All statements regarding STI and HIV in pregnancy are true except:
   a. STDs have caused a risk of decreased fertility.
   b. STDs have very little adverse effect on pregnancy.
   c. HIV positive women commonly have a history of STDs.
   d. HSV tends to increase HIV transmission.
   e. No increase in STD prevalence in HIV when compared with the general population.
6. All factors except one are responsible for decreasing the chances of an HIV woman becoming pregnant:
   a. Depression
   b. Chronic drug use
   c. Menstrual dysfunction
   d. Adequate nutrition
   e. HIV positive male

7. All of the following are recommended in routine care of HIV positive women except:
   a. Yearly gynecological exam and PAP smear.
   b. Assess menstrual regularity.
   c. Discuss condom use and contraception.
   d. Discuss fertility issues and sexual activity.
   e. Breast exam and mammogram in HIV women > 25 years old.

8. An HIV female is given preconceptional counseling. Which statement is true?
   a. Pregnancy can influence HIV disease.
   b. The risk of mother to baby transmission is 50%.
   c. In a treated person, the risk of HIV transmission is 25%.
   d. HIV medication should only be given in the 3rd trimester.
   e. Certain HIV drugs are contraindicated in pregnancy.
9. Which statement is true regarding pregnancy effects on HIV?
   a. CD4 counts decrease but CD4% remains stable.
   b. HIV levels may go up during pregnancy off ART.
   c. Pregnancy adversely affects HIV progression.
   d. The incidence of pregnancy associated AIDS is 20%.
   e. Pregnancy can reduce the CD4 count and CD4% especially during 3rd trimester.

10. Which ART is not recommended for use in women who could become pregnant?
    a. Kaletra
    b. Zidovidine
    c. Sustiva
    d. Tenofovir
    e. Nelfinavir

11. Which statement is true regarding ART in pregnancy?
    a. ART should be given only if viral load is greater than 10,000.
    b. ART should be given only if CD4 is less than 200.
    c. Monotherapy with AZT can be given if viral load is less than 1000.
    d. Combination therapy is given only if viral load is greater than 100,000.
    e. ART should be given only if CD4 is less than 350.
12. All of the NRTI listed below are FDA pregnancy category C except:

a. Abacavir  
b. Lamivudine  
c. Tenofovir  
d. Stavudine  
e. Zidovudine

13. A woman comes to you untreated with a CD4 of 350 and a viral load of 50,000. What is her chance of delivering an infected baby?

a. 50%  
b. 80%  
c. 10%  
d. 25%  
e. 5%

14. What is the risk of mother to child transmission in an HIV woman on HAART?

a. 25%  
b. 15%  
c. 10%  
d. 1.5%  
e. 0%
15. Is this a true or false statement?

All pregnant women who are found to be HIV positive should have a genotype.

a. True
b. False

d. None of the above

16. A pregnant female on HAART presents with acute pancreatitis. Which HIV drug may be responsible?

a. Zidovudine
b. Lopinovir
c. Didanosine
d. Nelfinavir
e. Atazanavir

d. None of the above

17. A pregnant female presents with HIV. Her viral load is 50,000 and her CD4 count is 350. Which drug is contraindicated?

a. Nelfinavir
b. Lopinovir
c. Stavudine
d. Neverapine
e. Tenofovir

d. None of the above