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HIV Treatment

When to Start HIV Medicines

Last Reviewed: March 2, 2020

Key Points

- Treatment with HIV medicines (called [antiretroviral therapy or ART](#)) is recommended for everyone with HIV. HIV medicines help people with HIV live longer, healthier lives and reduce the risk of [HIV transmission](#).
- People with HIV should start taking HIV medicines as soon as possible after their HIV is diagnosed. For people with HIV who have the following conditions, it's especially important to start taking HIV medicines right away: pregnancy, [AIDS-defining conditions](#), and early HIV infection. (Early HIV infection is the period up to 6 months after infection with HIV.)
- Before starting HIV treatment, people with HIV should discuss the importance of medication adherence—taking HIV medicines every day and exactly as prescribed—with their health care provider.

When is it time to start taking HIV medicines?

Treatment with HIV medicines (called [antiretroviral therapy or ART](#)) is recommended for everyone with HIV. People with HIV should start taking HIV medicines as soon as possible after their HIV is diagnosed.

A main goal of HIV treatment is to reduce a person's [viral load](#) to an undetectable level. An [undetectable viral load](#) means that the level of HIV in the blood is too low to be detected by a viral load test. Maintaining an undetectable viral load helps a person with HIV live a longer, healthier life. People with HIV who maintain an undetectable viral load have effectively no risk of transmitting HIV to their HIV-negative partners through sex.

To reduce their viral load, it's important for people with HIV to start taking HIV medicines as soon as possible. Starting HIV medicines right away is especially important for people with HIV who have certain conditions.

What conditions make it especially important to start HIV medicines right away?

The following conditions make it especially important to start HIV medicines right away:

- Pregnancy
- Early HIV infection
- [AIDS-defining conditions](#)

Pregnancy

All pregnant women with HIV should take HIV medicines to protect their health and prevent [mother-to-child transmission](#) of HIV. All pregnant women with HIV should start taking HIV medicines as soon as possible during pregnancy.

In most cases, women who are already on an effective [HIV regimen](#) when they become pregnant should continue using the same regimen throughout their pregnancies. Women with HIV who become pregnant and are not already taking HIV medicines should start taking HIV medicines as soon as possible.

The risk of mother-to-child transmission of HIV during pregnancy and childbirth is lowest when a woman with HIV has an undetectable viral load. Maintaining an undetectable viral load also helps keep the mother-to-be healthy.

Early HIV infection

Early HIV infection is the period up to 6 months after infection with HIV. During early HIV infection, a person's viral load is often very high.

Studies suggest that even at this early stage of HIV infection, HIV medicines can begin to protect a person's health. In addition, starting HIV medicines during early HIV infection reduces the risk of HIV transmission.

AIDS-defining conditions

AIDS-defining conditions are certain infections and cancers that are life-threatening in people with HIV. Having an AIDS-defining condition indicates that a person has [AIDS](#), which is the final, most severe stage of HIV infection. Although HIV has already severely damaged the [immune system](#) of a person with AIDS, starting HIV medicines as soon as possible can improve immune function.

Once a person starts taking HIV medicines, why is medication adherence important?

Medication adherence means sticking to an HIV regimen—taking HIV medicines every day and exactly as prescribed. Medication adherence is key to maintaining an undetectable viral load, which protects the immune system and reduces the risk of HIV transmission.

Before starting HIV treatment, it's important to talk to your health care provider about any issues that can make adherence difficult. For example, a busy schedule or lack of health insurance can make it hard to take HIV medicines consistently. Health care providers can recommend resources to help people deal with any issues that may interfere with adherence.

Read the following *AIDSinfo* fact sheets to learn more about medication adherence:

- [HIV Treatment Adherence](#)
- [Following an HIV Regimen: Steps to Take Before and After Starting HIV Medicines](#)

This fact sheet is based on information from the following sources:

From the Department of Health and Human Services:

- Guidelines for the Use of Antiretroviral Agents in Adults and Adolescents with HIV:
 - [Initiation of Antiretroviral Therapy](#)
 - [Acute and Recent \(Early\) HIV Infection](#)
- Recommendations for the Use of Antiretroviral Drugs in Pregnant Women with HIV Infection and Interventions to Reduce Perinatal HIV Transmission in the United States: Recommendations for Use of Antiretroviral Drugs During Pregnancy:
 - [Overview](#)
 - [Pregnant Women Living with HIV Who Are Currently Receiving Antiretroviral Therapy](#)
 - [Pregnant Women Living with HIV Who Have Never Received Antiretroviral Drugs \(Antiretroviral Naive\)](#)