

## **PS1.065**

### **Ethics in HIV communication**

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**Background & Aim:** Infection by HIV/AIDS always raised ethical questions regarding medical practice, in particular the situations of conflict of duties by the family doctor.

**Method:** Case description.

**Results:** 39-year-old woman, for the first time to the query that is pregnant with unknown time. Was questioned for personal/family background history, having the patient referred to history of psychiatric pathology, with attempted suicide 20 years ago. She denied other background. She was referred to Obstetrics. At the end of the consultation, was accessed the electronic clinical process and it was found that the patient was HIV positive.

Six months later, she returns, along with her husband, being assessed separately. She states that they are trying to get pregnant and, when confronted with the data obtained, the user refuses to inform her husband of her condition of HIV carrier. The husband appealed for Subfertility and apparently unaware of the fact that the wife was HIV positive. It was requested for analytical study of screening HIV, syphilis and Hepatitis.

The couple never returned to schedule appointment, were summoned and missed. Guided contacts with public health and Infeciology in order to intervene on this couple to identify possible risk of contagion.

**Conclusion:** The communication of the HIV carrier state to the spouse can raise ethical issues. First arises the problem of doctor-patient confidentiality before the HIV carrier. Secondly the right to the spouse to maintain his health, that is, the "right to life". The third problem arises when the user does not use the query, being so important to the advocacy of the patient and the management of contacts with the various specialties, for the prevention of the spread of contagious diseases.