Anaemia in pregnancy is an important cause of maternal and neonatal mortality. It is a recognized co-morbidity of HIV infection. This study aimed to determine the risk of anaemia in H I V positive pregnant women. Methodology - This is a cross sectional study of healthy pregnant women attending Adeoyo Hospital, a secondary health centre in South-western Nigeria over a 1- month period (January 2007). During the study period, 2,737 eligible women presented for antenatal care. About 98 % (2,682) of these women consented to H IV testing. Ove r all, their mean (± S.D) packed cell volume w a s 30.96% (±4.13). The prevalence of H IV infection w a s 2.9% (95% CI 2.3% - 3.6%) and the overall prevalence of anaemia was 33.1%. Frequency of anaemia was significantly higher in HI V +v e women (57.3% vs. 42.7%, p= 0.00. OR=2.8l, C I= 1.72-4.58). H IV + v e women presented more frequently with moderate or severe anaemia. In the logistic regression analysis only H IV infection (OR=2.4, 95%CI=1.37 - 4.21) and primigravidity (OR= 1.25,95% CI= 1.04-15.2) remained independently associate d with anemia. Anaemia is commo n in H IV positive pregnant women in this environment. Car e providers must endeavor to determine the H IV status of every pregnant woman especially if she presents with anaemia with a view to providing appropriate interventions.