Advancing Health Through the Generations



Thomas J. Vilsack Governor

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Surveillance Program 515-242-5150

Date:	November 4, 2005
To:	HIV/AIDS Surveillance Group
From:	Randy Mayer, Surveillance Program Manager
Re:	2005 Quarter 3 HIV/AIDS Surveillance Report

This quarter, we received reports for 26 HIV diagnoses. So far this year, there have been 79 HIV diagnoses reported, exactly the same as this time last year. Thirty-five percent received concurrent AIDS diagnoses.

There were 57 AIDS diagnoses in the first three quarters of 2005, 20% higher than what we saw at this time last year. Nearly half (47%) of these were persons who had been diagnosed with HIV for at least one year (fifteen years for two persons), and the rest received concurrent HIV and AIDS diagnoses.

In surveillance news, Illinois, Maine, and Philadelphia have announced that they will begin HIV reporting by name on January 1, 2006. Currently they use code or name-to-code systems to report new diagnoses of HIV. The Centers for Disease Control and Prevention do not accept information from areas that report HIV cases by code, so no national surveillance data are available for HIV diagnoses. For this reason, Ryan White CARE Act funds cannot be appropriated according to the number of persons living with HIV. Instead, funds are distributed according to the number of AIDS cases reported to surveillance systems. These data are not representative of current trends in the epidemic and may be rewarding areas for having poorer health care systems.

In the 2000 reauthorization of the CARE Act, Congress required cases of HIV to be incorporated into the funding formula no later than the beginning of FY2007. States that use a code system to report HIV cases stand to lose their care funding if they do not adopt a name-based approach by then.

There remain 12 states and the cities of Philadelphia and the District of Columbia that use a code or name-to-code reporting system for HIV surveillance purposes. The states include California, Delaware, Hawaii, Illinois, Maine, Maryland, Massachusetts, Montana, Oregon, Rhode Island, Vermont, and Washington. Many are reported to be working on switching to name-based reporting.

More on this as it develops. As always, comments are welcome. Please email me at <u>rmayer@idph.state.ia.us</u>

Promoting and protecting the health of lowans

Iowa Department of Public Health

State of Iowa HIV and AIDS Surveillance Report September 30, 2005

HIV and AIDS by Gender, Age at Diagnosis, Race/Ethnicity, and Origin

	HIV Diagnoses ¹			1	AIDS Diagnoses ²				T ining	IIIV and
	Jan - Sep 2005		2004		Jan - Sep 2005		2004		Living HIV and AIDS Cases ³	
	#	(%)	#	(%)	#	(%)	# (%)	#	(%)
Gender										
Male	63	(80)	78	(74)	41	(72)	50 (72)	1037	(79)
Female	16	(20)	28	(26)	16	(28)	19 (28)	275	(21)
Age at Diagnosis ⁴										
Under 5	0		0		0		0		7	(1)
5-12	0		0		0		0		5	
13-19	5	(6)	4	(4)	1		1		25	(2)
20-29	20	(25)	26	(25)	7	(12)	12 (17)	311	(24)
30-39	21	(27)	30	(28)	16	(28)	20 (29)	527	(40)
40-49	23	(29)	29	(27)	21	(37)	24 (35)	323	(25)
Over 49	10	(13)	17	(16)	12	(21)	12 (17)	114	(9)
Race and Ethnicity										
White, Not Hispanic	52	(66)	69	(65)	34	(60)	45 (65)	926	(71)
Black, Not Hispanic	17	(22)	24	(23)	17	(30)	16 (23)	253	(19)
Hispanic, all races	7	(9)	12	(11)	5	(9)	8 (12)	109	(8)
Asian/ Pacific Islander	2		1		0		0		15	(1)
American Indian/Alaska Native	1		0		1		0		6	
Multiple races	0		0		0		0		3	
Country of Origin										
United States or dependency	63	(80)	88	(83)	50	(88)	59	(86)	1,145	(87)
Other	16	(20)	18	(17)	7	(12)	10	(14)	167	(13)
Total	79		106		57		69		1,312	

¹ HIV Diagnoses reflect all cases of HIV infection diagnosed for the first time, regardless of AIDS status. Some may also be counted as AIDS cases, if they received an AIDS diagnosis during the same period of time.

² AIDS Diagnoses reflect all residents of Iowa who first met the criteria for AIDS in that time period, regardless of when the case was reported to the state.

³ Reflects persons diagnosed with HIV or AIDS as a resident of Iowa and who were living on September 30, 2005. All deaths may not have been reported.

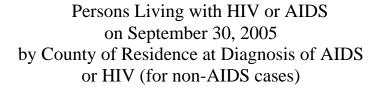
⁴ Patients reported as adolescents or adults may have had pediatric exposures. These persons will be categorized as adult/adolescent at time of diagnosis, but are listed under pediatric exposures on page 2.

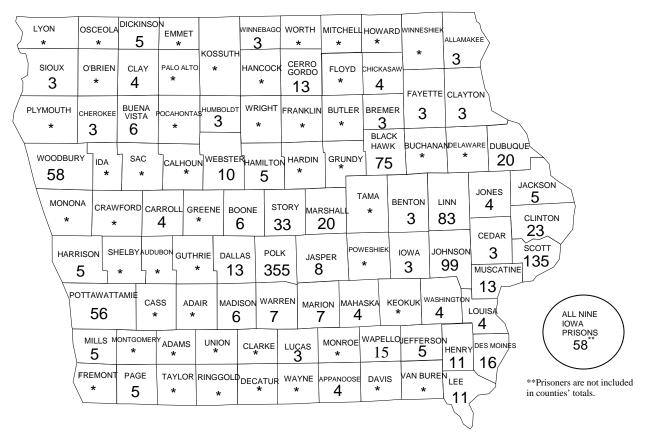
> Iowa Department of Public Health Bureau of Disease Prevention and Immunization 321 East 12th Street Des Moines, IA 50319-0075 515-242-5150

See http://www.idph.state.ia.us/adper/hiv_aids_programs.asp#surveillance for a full epidemiological profile

Adult/Ad	olesce				ric (<13					
	HIV Diagnoses ¹				AIDS Diagnoses ²				Living HIV and	
	2005		2004			005	2004		AIDS Cases ³	
	#	(%)	#	(%)	#	(%)	#	(%)	#	(%)
Adult/Adolescent Exposure -	All Ca	ases								
Men who have sex with men	26	(33)	45	(42)	25	(44)	27	(39)	639	(49)
Injecting drug use	8	(10)	11	(10)	5	(9)	11	(16)	150	(12)
Men who have sex with men	0	. ,	<i>(</i>		4		7		05	
and inject drugs	8	(10)	6	(6)	4	(7)	7	(10)	95	(7)
Hemophilia/coagulation disorder	0		0		0		0		12	(1)
Heterosexual contact	13	(16)	26	(25)	13	(23)	12	(17)	219	(17)
Receipt of blood or tissue	1		0		0		0		22	(2)
Risk not reported/other	23	(29)	18	(17)	10	(18)	12	(17)	159	(12)
Total Adult/Adolescent Cases	79		106		57		69		1,296	
Pediatric Exposure – All Case	S									
Pediatric hemophilia/coag. dis.	0		0		0		0		5	(31)
Mother with/at risk for HIV inf.	0		0		0		0		10	(63)
Receipt of blood or tissue	0		0		0		0		1	
Risk not reported	0		0		0		0		0	
Total Pediatric Exposure Cases	0		0		0		0		16	
			,		Ŭ		Ŭ		20	
Adult/Adolescent Exposure –	Males									
Men who have sex with men	26	(41)	45	(58)	25	(61)	27	(54)	639	(62)
Injecting drug use		(11)	8	(10)	2		6	(12)	96	(9)
Men who have sex with men		. ,		. ,		(1.0)				
and inject drugs	8	(13)	6	(8)	4	(10)	7	(14)	95	(9)
Hemophilia/coagulation disorder	0		0		0		0		12	(1)
Heterosexual contact	5	(8)	9	(12)	3	(7)	4	(8)	73	(7)
Receipt of blood or tissue	1		0		0		0		13	(1)
Risk not reported/other	16	(25)	10	(13)	7	(17)	6	(12)	98	(10)
Total Adult/Adolescent Males	63		78		41		50		1,026	
Pediatric Exposure - Males										
Pediatric hemophilia/coag. dis.	0		0		0		0		5	(45)
Mother with/at risk for HIV inf.	0		0		0		0		5	(45)
Receipt of blood or tissue	0		0		0		0		1	(15)
Risk not reported	0		0		0		0		0	
Total Pediatric Exposure Males	0		0		0		0		11	
Total I culattle Exposure Males	U		•		U		0		11	
Adult/Adolescent Exposure –	Femal	les								
Injecting drug use	1		3	(11)	3	(19)	5	(26)	54	(20)
Hemophilia/coagulation disorder	0		0	(11)	0	(1)	0	(20)	0	(20)
Heterosexual contact	8	(50)	17	(61)	10	(63)	8	(42)	146	(54)
Receipt of blood or tissue	0	(30)	0		0		0	()	9	(3)
Risk not reported/other	7	(44)	8	(29)	3	(19)	6	(32)	61	(23)
Total Adult/Adolescent Females	16		28	<u> </u>	16	<u> </u>	19	× /	270	<u>\</u> -/
Pediatric Exposure - Females	0		0		0		0		0	
Pediatric hemophilia/coag. dis.	0		0		0		0		0	
Mother with/at risk for HIV inf.	0		0		0		0		5	(100)
Receipt of blood or tissue Risk pot reported	0		0		0 0		0		0 0	
Risk not reported	-		0		-		0			
Total Pediatric Exposure Females	0		0		0		0		5	

HIV and AIDS by Exposure Category Adult/Adolescent Cases and Pediatric (<13 yrs) Exposures⁴



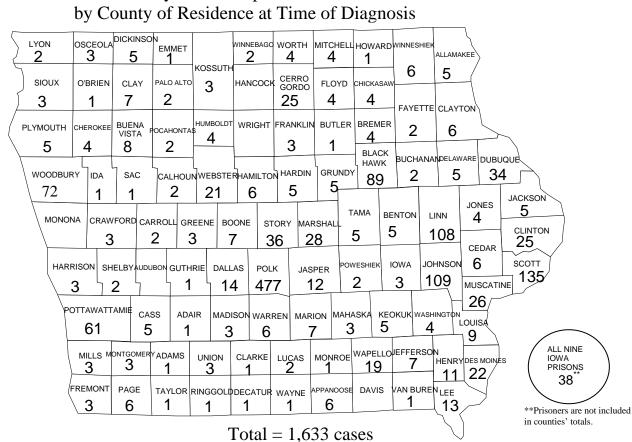


Total = 1,312 (794 AIDS cases and 518 HIV cases)

* Indicates fewer than 3 persons, including those counties with no cases. These persons are included in the total of 1,312 but are not shown on the map.

Note: Does not include 421 persons (273 AIDS and 148 HIV cases) who were diagnosed in other states but who subsequently moved to Iowa or another 299 persons (193 AIDS and 106 HIV cases) who live elsewhere but have received care in Iowa.

This map shows the number of persons living with HIV or AIDS on September 30, 2005. It indicates where persons resided at the <u>time of diagnosis</u> of AIDS, for AIDS cases, or of diagnosis of HIV infection, for HIV cases. Persons may not be currently living in these counties. All deaths may not have been reported. **Prisoners were diagnosed while being held in the following counties: Johnson (51), Jasper (3), Polk (2), Page (1), and Webster (1), but are not reflected in the data from those counties.**



Cumulative AIDS Cases
February 1983 – September 30, 2005
by County of Residence at Time of Diagnosis

Total

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1,633

- Movement between counties or other states, and deaths of persons with AIDS are not reflected in the map.
- Prisoners were diagnosed in the following counties: Johnson (27), Lee (4), Jasper (3), Henry (1), Page (1), Polk (1), and Webster (1).
- Deaths are not necessarily HIV related. HIVinfected persons who died before receiving a diagnosis of AIDS are indicated under "**HIV Deaths**."
- Map and table do not show 836 persons with AIDS who were diagnosed while the individual was residing in another state but who later moved to Iowa (509 persons) or who have received care in Iowa (327 persons) while residing elsewhere.

Through September 30, 2005

¹ HIV Diagnoses reflect all cases of HIV infection diagnosed for the first time, regardless of AIDS status. Some may also be counted as AIDS cases, if they received an AIDS diagnosis during the same calendar year. HIV reporting by name began July 1, 1998.