iHIV

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World AIDS Day 2013
Columbia University
School of Social Work
NYC has had the largest number of HIV cases of any U.S. city.

We have made important progress in improving care along the care continuum.

In 2012, nearly seven in 10 adult New Yorkers (aged 18-64) reported having ever been tested for HIV, a significant increase from five in 10 in 2002.
HIV/AIDS in NYC, 2011

• 3,404 new HIV diagnoses (41.6 diagnoses per 100,000 persons)
  o 2,734 HIV without AIDS
  o 670 HIV concurrent with AIDS (19.7%)

• 2,208 new AIDS diagnoses
  o Includes 670 concurrent HIV/AIDS diagnoses

• 113,319 persons living with HIV/AIDS
  o 1.4% of the population of NYC

• 1,690 deaths among persons with HIV/AIDS (14.9 deaths per 1,000 persons)

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2012.
National HIV/AIDS Strategy

- Nation’s first comprehensive HIV/AIDS roadmap for a more coordinated response to the epidemic

- Primary Goals:
  - Reduce the number of people who become infected with HIV
  - Increase access to care and optimize health outcomes for people living with HIV
  - Reduce HIV-related health disparities
Reducing HIV infections

- Lower the annual number of new infections by 25%
- Reduce the HIV transmission rate by 30%
- Increase to 90% (from 79%) HIV+ serostatus awareness
New HIV Diagnoses, NYC 2007-2011

As reported to the New York City Department of Health and Mental Hygiene by September 30, 2012.
Increasing access to care and improving health outcomes

- Increase to 85% newly diagnosed patients who link to care within 3 months

- Increase to 80% Ryan White clients who are in continuous care
  - At least 2 visits for routine HIV medical care in 12 months at least 3 months apart
Among persons newly diagnosed with HIV (non-AIDS), 71% initiated HIV-related medical care within 91 days.
Ryan White Linkage to Care

- 2009-2012 Plan Actual
- 2012-2015 Plan Projection
Return to Care during 2010
Among New Yorkers with HIV/AIDS who received care in 2009 and survived through 2010

DHHS guidelines* recommend that CD4 count and VL be measured every 3-6 months.

93% of persons living with HIV/AIDS who were in care in 2009 returned to care in 2010 (i.e., had a VL or CD4 test).

Ryan White Retention in Care

2009-2012 Plan Actual

2012-2015 Plan Projection

56%  67%  62%  80%

2008  2009  2010  2011  2012  2013  2014
EMA Retention in Care

- 2009-2012 Plan Actual
- 2012-2015 Plan Projection

- 74% in 2008
- 76% in 2009 and 2010
- Projection to 80% in 2013 and 2014
HIV Care Continuum in the United States, 2009

<table>
<thead>
<tr>
<th>Stage of Care</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnosed</td>
<td>82%</td>
</tr>
<tr>
<td>Linked to Care</td>
<td>66%</td>
</tr>
<tr>
<td>Retained in Care</td>
<td>37%</td>
</tr>
<tr>
<td>Prescribed ART</td>
<td>33%</td>
</tr>
<tr>
<td>Virally Suppressed</td>
<td>25%</td>
</tr>
</tbody>
</table>
New York City’s HIV Care Continuum, at the end of 2011

<table>
<thead>
<tr>
<th>Engagement in HIV care</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated HIV-infected</td>
<td>100%</td>
</tr>
<tr>
<td>Ever HIV-diagnosed</td>
<td>86%</td>
</tr>
<tr>
<td>Ever linked to HIV care</td>
<td>73%</td>
</tr>
<tr>
<td>84% of diagnosed</td>
<td></td>
</tr>
<tr>
<td>Retained in HIV care in 2011</td>
<td>54%</td>
</tr>
<tr>
<td>75% of linked to care</td>
<td></td>
</tr>
<tr>
<td>Presumed ever started on ART</td>
<td>49%</td>
</tr>
<tr>
<td>90% of retained in care</td>
<td></td>
</tr>
<tr>
<td>Suppressed viral load (≤200 copies/mL) in 2011</td>
<td>38%</td>
</tr>
<tr>
<td>78% of started on ART</td>
<td></td>
</tr>
</tbody>
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As reported to the NYC DOHMH by September 30, 2012.
For definitions of the stages of the continuum of care, see Appendix (2).
Ryan White Viral Load Suppression

- 2009-2012 Plan Actual-MCM Programs Only
- 2012-2015 Plan Projection

- 2008: 69%
- 2009: 70%
- 2010: 71%
- 2011: 55%
- 2012: 65%
- 2013: 75%
- 2014: 70%
EMA Viral Load Suppression

- 2009-2012 Plan Actual
- 2012-2015 Plan Projection

- 2008: 62%
- 2009: 66%
- 2010: 70%
- 2011: 75%
- 2012: 75%
- 2013: 75%
- 2014: 75%
Gaps in New York City’s HIV Care Continuum, at the end of 2011

Number of HIV-infected persons

<table>
<thead>
<tr>
<th>Step</th>
<th>Persons achieving each step</th>
<th>Persons lost from previous step</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated HIV-infected</td>
<td>18,447</td>
<td>17,636</td>
</tr>
<tr>
<td>Ever HIV-diagnosed</td>
<td>14%</td>
<td>17,636</td>
</tr>
<tr>
<td>Ever linked to HIV care</td>
<td>13%</td>
<td>24,194</td>
</tr>
<tr>
<td>Retained in HIV care in 2011</td>
<td>18%</td>
<td>6,941</td>
</tr>
<tr>
<td>Presumed ever started on ART</td>
<td>5%</td>
<td>14,357</td>
</tr>
<tr>
<td>Suppressed viral load (≤200 copies/mL) in 2011</td>
<td>11%</td>
<td></td>
</tr>
</tbody>
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Engagement in HIV care
Changing Epidemic 2011

• Changing epidemic citywide
  
  o HIV diagnoses declining modestly in nearly all groups, but increasing in MSM 13-29 years old
  
  o AIDS diagnoses and deaths declining
  
  o Population of PLWHA still increasing, and aging
Change Agents

- Ensure access and reduce transmission at multiple levels
  - Encourage testing *(Bronx Knows, Brooklyn Knows, NYS HIV testing law since Sept. 2010)*
  - Promote timely linkage to HIV medical care and other forms of support after diagnosis
  - Recommend treatment be offered to all persons with HIV *(since Mar. 2012)*
  - Suppress Viral Load