

HIV Viral Load Distribution, Georgia, 2012

Viral Load (VL) Distribution among Persons Living with HIV, Georgia, 2012

Viral suppression (undetectable viral load or VL < 200 copies/ml) is a critical component of care for persons living with HIV and of prevention of viral transmission.

Thirty-nine percent of the 46,495 persons living with HIV in Georgia in 2012 achieved viral suppression.

Twelve percent of Georgians living with HIV had viral loads >200.

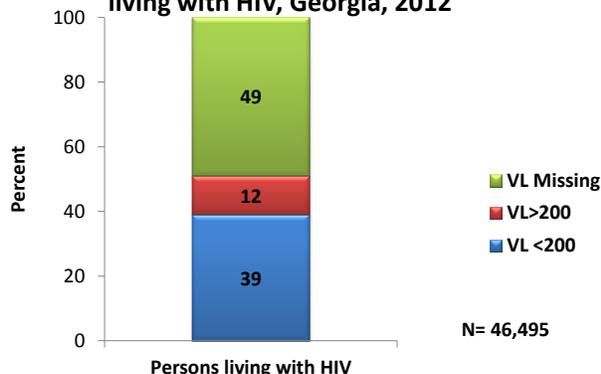
Most half (49%) did not have a viral load measured in 2012 and presumably fallen out of care.

Viral Load Distribution among Persons Newly Diagnosed with HIV in 2011

In contrast, among the 2885 persons newly diagnosed with HIV infection in 2011 in Georgia, 45% achieved viral suppression, 38% had VL>200 copies/ml, and only 19% had no VL measured within 4-15 months after diagnosis.

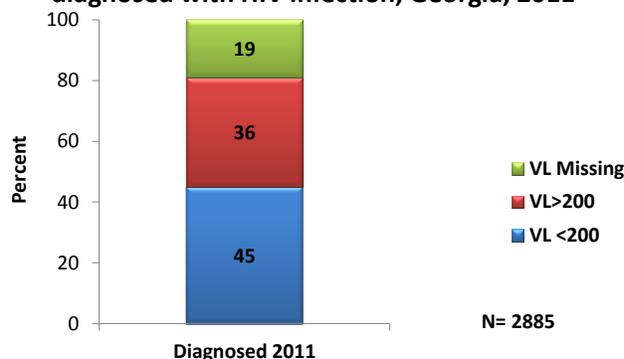
Low proportions of viral suppression among new diagnoses reflect both those lost to care (19%) and those in care but with VL >200 (36%). Further analysis is needed to quantitate viral loads in this group and examine ART prescription and adherence.

Viral load (VL) among adults and adolescents living with HIV, Georgia, 2012



Persons >= age 13, diagnosed by 09/30/2011, living 12/31/2012, Georgia
 Most recent viral load measured in 2012
 VL <200 copies/ml = viral suppression
 VL >200 copies/ml = no viral suppression
 VL Missing = no apparent viral load measured in 2012

Viral load (VL) among adults and adolescents, diagnosed with HIV infection, Georgia, 2011



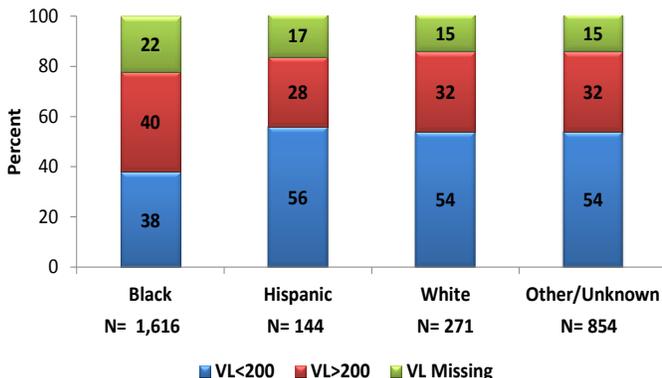
Persons >= age 13, diagnosed 2011, alive 15 months after diagnosis, Georgia
 Most recent viral load measured in 2012
 VL <200 copies/ml = viral suppression
 VL >200 copies/ml = no viral suppression
 VL Missing = no apparent viral load measured in 2012

Disparities in poor viral suppression can result from being lost to follow up (no VL) or from lack of optimal ART use among those in care (VL measured but >200)



Viral Load Distribution, Georgia, 2012 Fact Sheet

Viral load (VL) among adults and adolescents, diagnosed in Georgia, 2011, by race/ethnicity



American Indian/Alaska Native, Asian and Native Hawaiian/Pacific Islanders counted together constitute <1% of persons diagnosed with HIV in Georgia, 2011 and are grouped with those of mixed or unknown race/ethnicity

Viral Load Distribution by Age (Years)

Among adults and adolescents diagnosed in 2011 and followed for 15 months, viral suppression increases with increasing age.

A higher proportion of those aged 13-24 years at diagnosis in 2011 had VL > 200 (41%) than VL < 200 (34%).

Among the newly-diagnosed, even the youngest age group is at least initially engaged in care, but a higher percent have VL > 200 than have viral suppression (41% vs 34%)

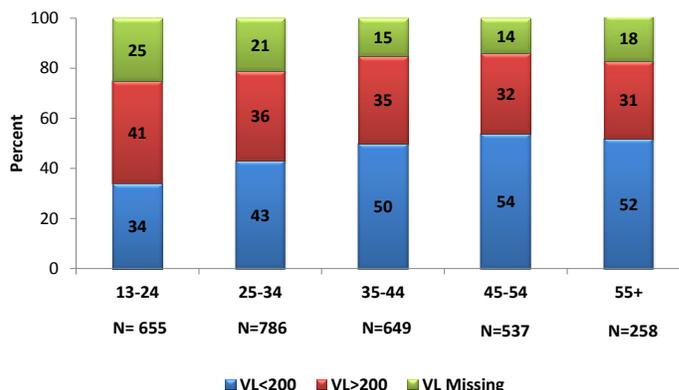
Viral Loads by Race/Ethnicity

Blacks newly diagnosed with HIV in 2011 were less likely to be virally suppressed than Hispanic/Latinos or Whites. Blacks had higher proportions of both VL > 200 and VL missing than any other racial/ethnic group.

In contrast to persons living with HIV, the majority (78%) of Blacks newly-diagnosed with HIV had viral loads measured 4-15 months after diagnosis, indicating some level of HIV care.

Lower levels of viral suppression compared to other race/ethnicities may be a function of poor ART adherence or decision not to prescribe ART.

Viral load (VL) among adults and adolescents, diagnosed 2011, Georgia, by age at diagnosis (years)



Georgia Law and HIV Reporting

The HIV/AIDS Epidemiology Section is authorized under Georgia Surveillance Law (O.C.G.A. §31-12-1) to conduct notifiable disease surveillance of HIV and AIDS. Public health surveillance activities are not subject to HIPPA restrictions.

All health care providers diagnosing and/or providing care to a patient with HIV are required by law to report them using the HIV/AIDS Case Report Form within seven (7) days of diagnosing a patient with HIV and/or AIDS or within seven (7) days of assuming care of an HIV positive patient who is new to the provider, regardless of whether the patient has previously received care elsewhere. All laboratories certified and licensed by the State of Georgia are required to report laboratory test results indicative of HIV infection, such as positive Western Blot results, all detectable and undetectable viral loads, all CD4 counts, and all viral nucleotide sequence results

For additional HIV surveillance data, slide sets, reports and fact sheets visit

<http://dph.georgia.gov/georgias-hivaids-epidemiology-surveillance-section>

