Abstract

The Georgia Department of Public Health (DPH) analyzed trends in AIDS diagnoses and deaths in Georgia 1996-2012, and trends in HIV prevalence and new diagnoses in Georgia 2005-2012. AIDS deaths have steadily decreased since 1996. After a peak in 2007-2008, HIV infections and AIDS diagnoses have overall decreased. Trend analysis stratified by sex, age, and race/ethnicity for Georgia 2007-2011 revealed an increasing trend in HIV infections among younger Black males (aged 13-24 years), older Black females (aged 50+), and increasing AIDS diagnoses among Hispanic/Latinos of both sexes.

Objectives

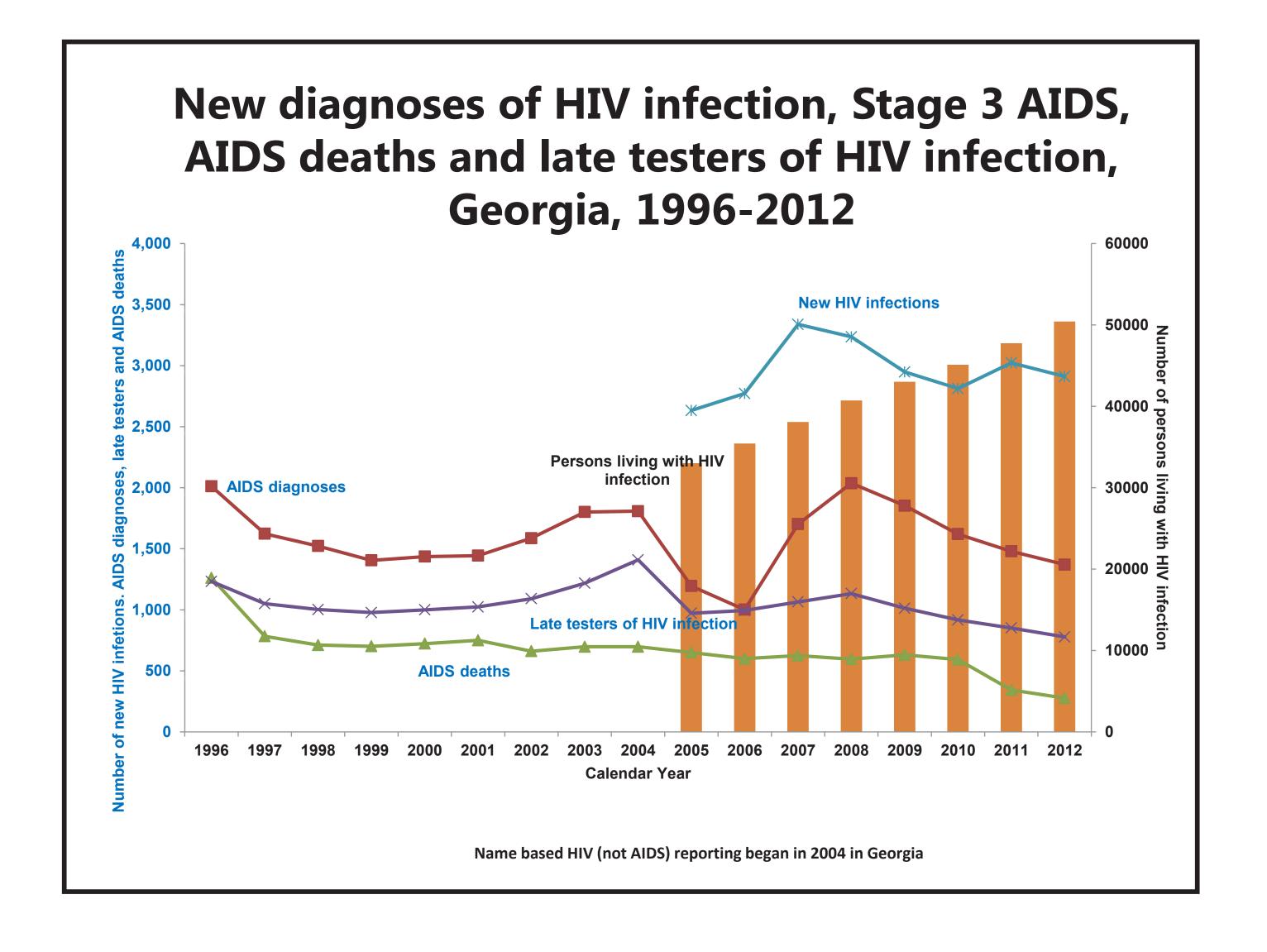
- Define the methodology used in identifying new HIV and AIDS diagnoses in Georgia
- Describe disparities in HIV and AIDS diagnosis trends

Background

Name-based HIV reporting began in Georgia in 2004, and AIDS reporting in 1995. Previous analyses have identified a high proportion of late diagnoses (Stage 3 AIDS by CD4 count <200 on first CD4 result within 12 months of diagnosis) in Blacks (25%), Hispanic/Latinos (35%) and Whites (28%) in Georgia, 2012.

Trend analysis stratified by sex, age, and race/ethnicity, would provide another tool to identify disparities in HIV burden, improve the ability to estimate transmission rates, and offer a metric for monitoring treatment outcomes on a population level.

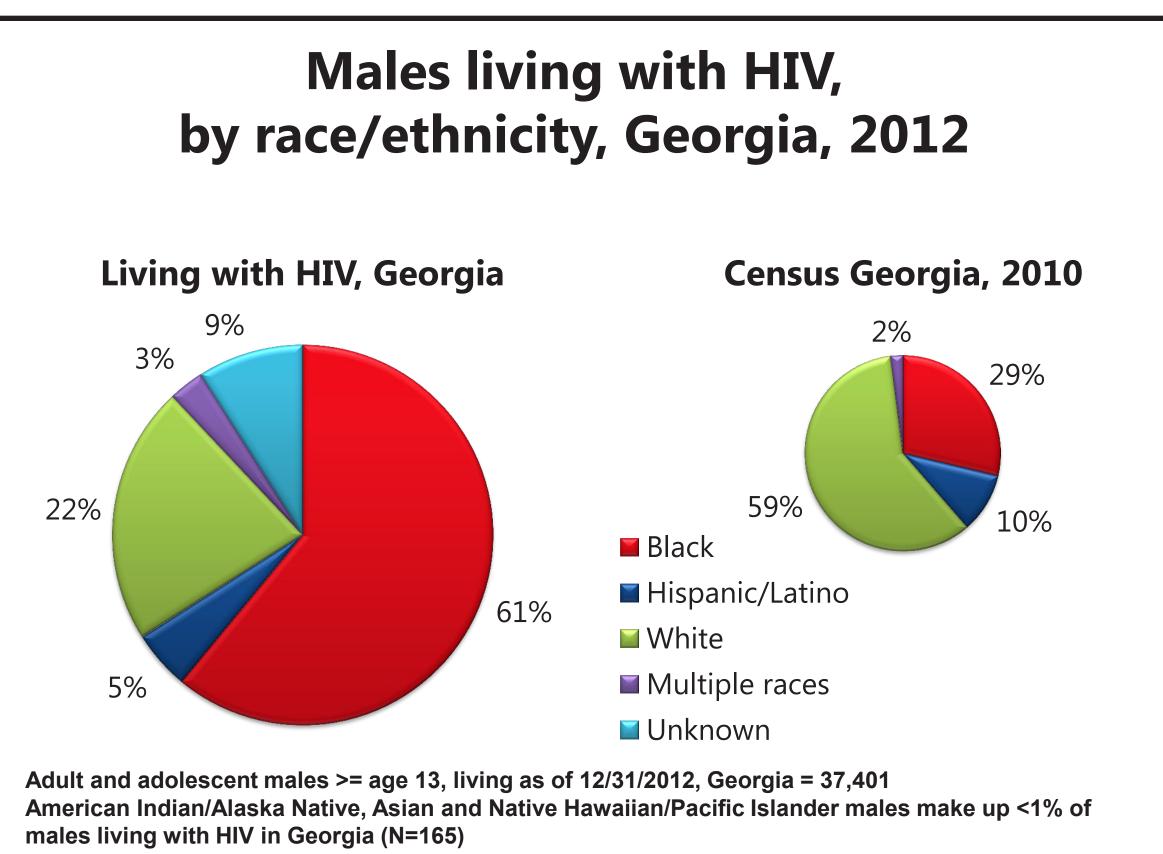
Overall trends for new HIV diagnoses, AIDS diagnoses, deaths and late diagnoses were previously published in the 2012 Georgia DPH HIV Surveillance Summary.

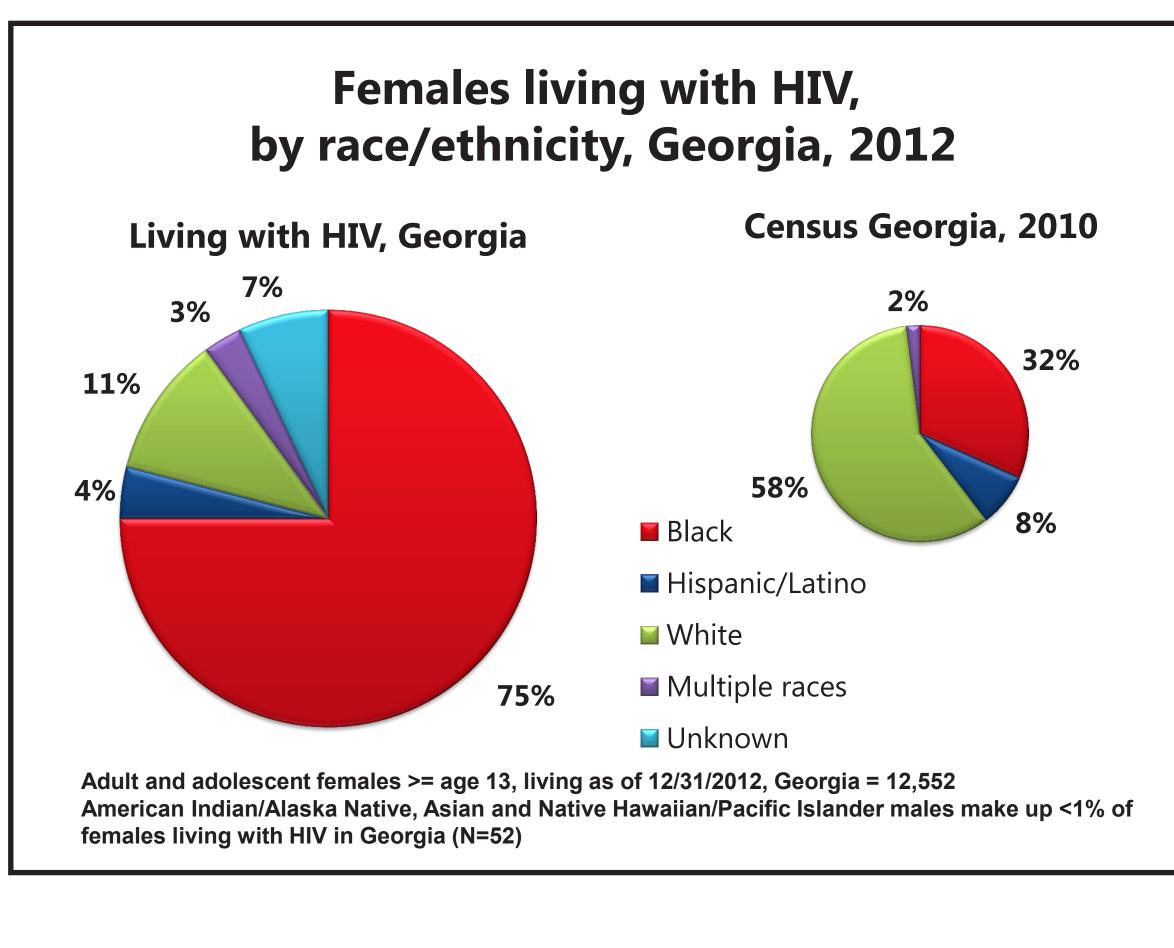




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HIV Demographics in Georgia





- System (eHARS).

Trends in New HIV and AIDS Diagnoses, Georgia, 2012

• Sixty-one percent of males living with HIV in Georgia are Black, compared to 29% of the general population in the state

• The racial disparity in HIV is even more striking among females: 75% or females living with HIV are Black, compared to 32% of the general population

 After multiple imputation is used to assign probable transmission category when risk information was missing or incomplete, 70% of males are assigned the men who have sex with men (MSM) transmission category and 70% of females are assigned the heterosexual contact (HET) transmission category

Methods

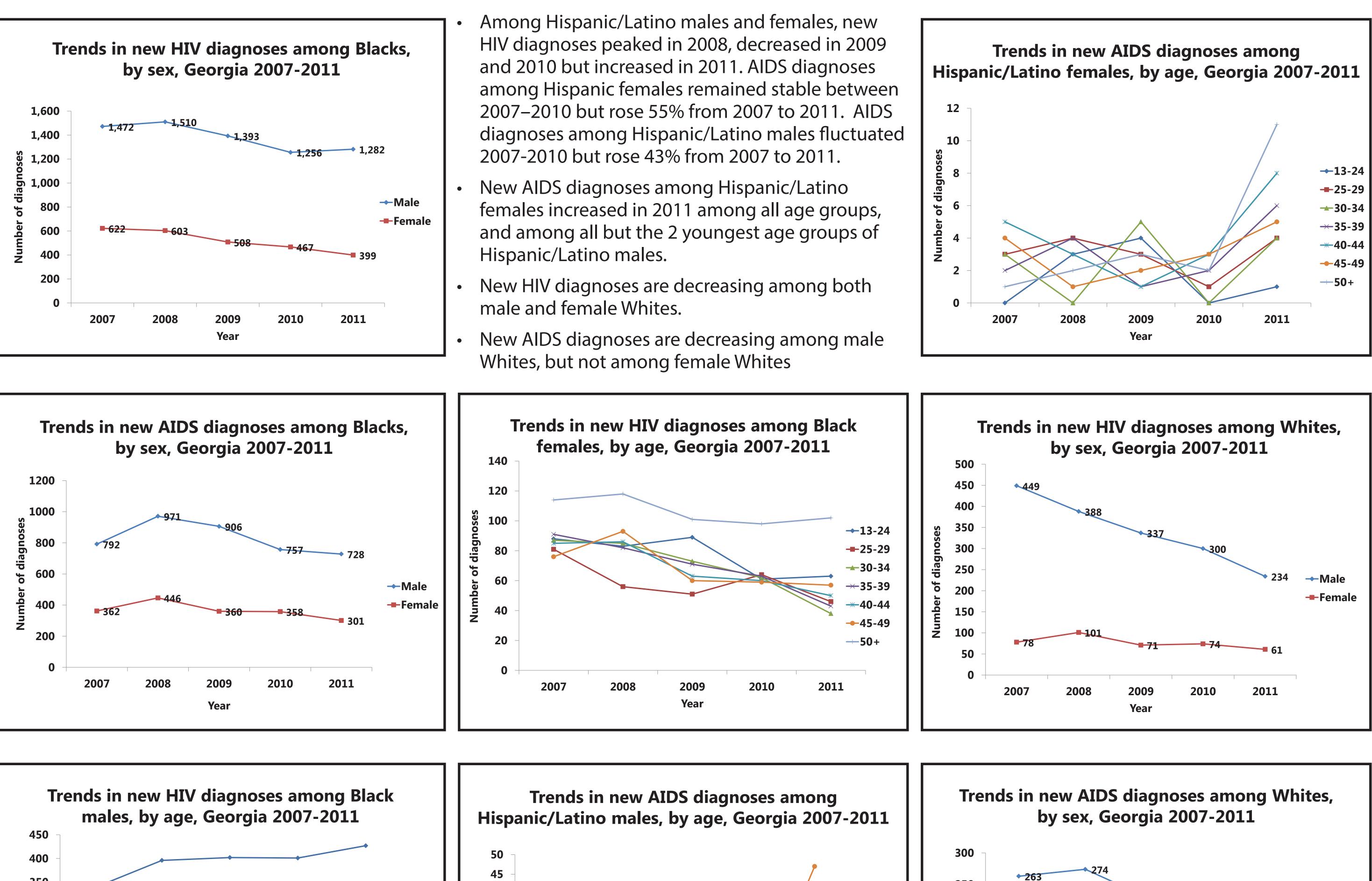
• In accordance with Georgia law (O.C.G.A. §31-12-2(b)), all laboratory facilities licensed by the state must report all HIV-related laboratory results, and health care providers must report any person with HIV new to their clinical care. In addition to demographic data, HIV risk behaviors information e.g., sexual activity and injection drug use, are collected.

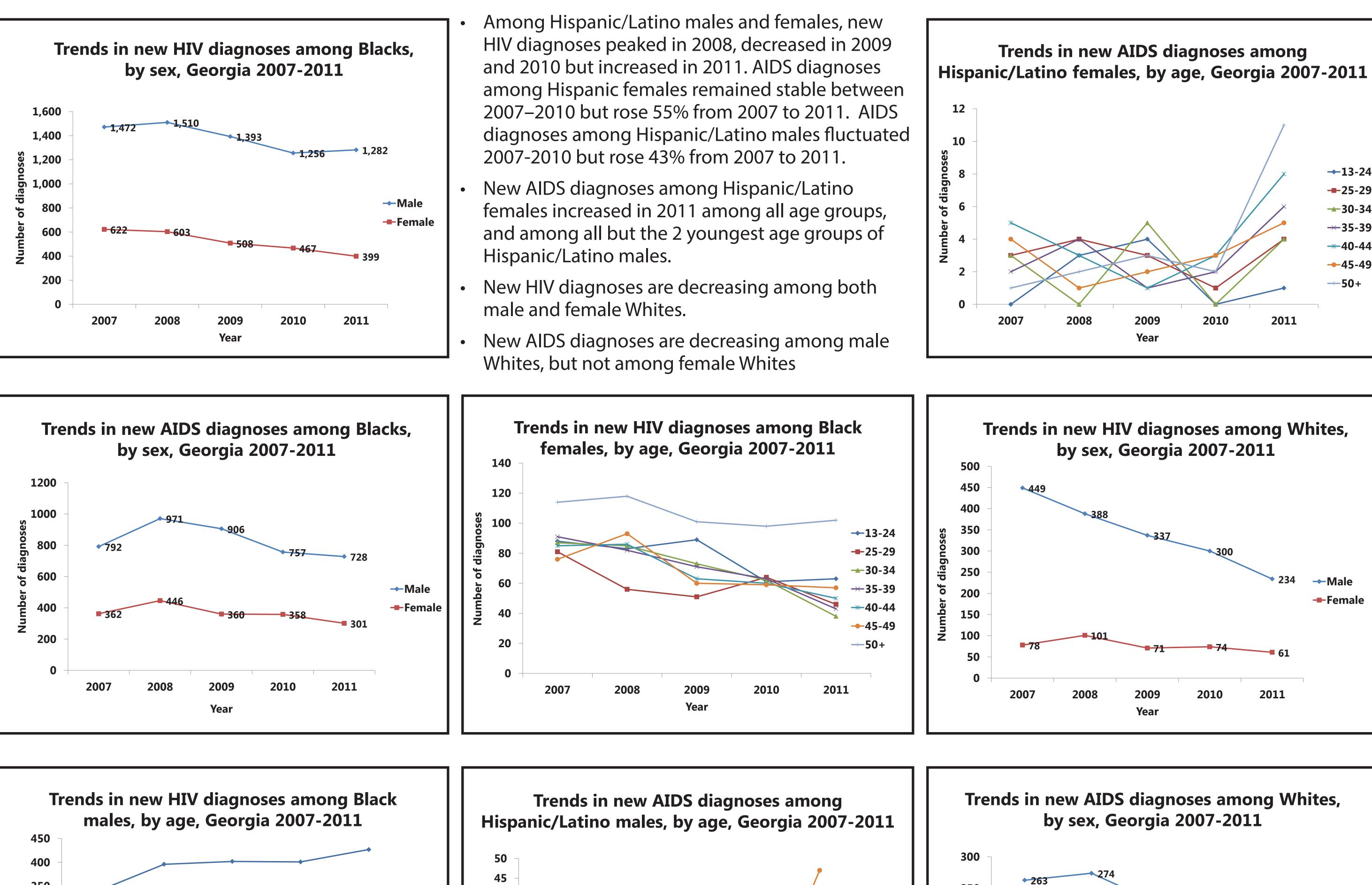
These data are entered into the Enhanced HIV/AIDS Reporting

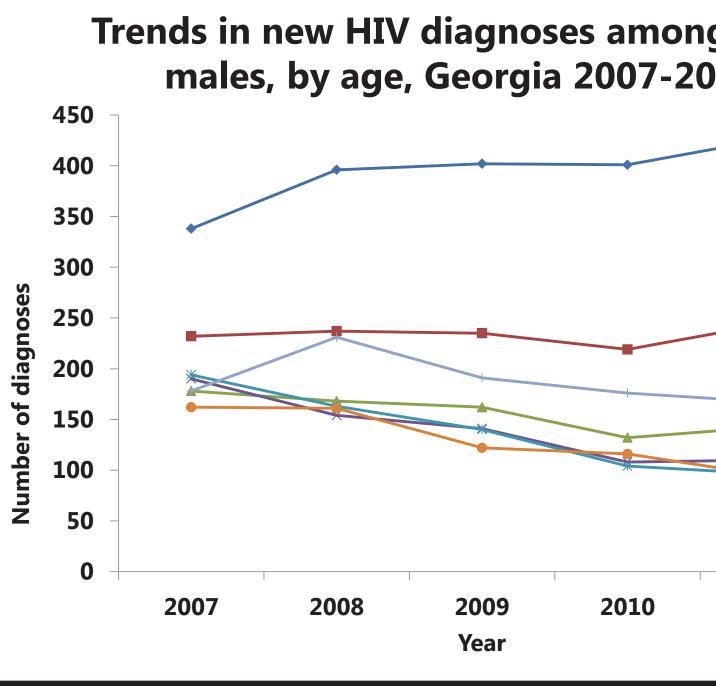
• We performed trend analysis of new diagnoses by year stratified by sex, age, race/ethnicity Georgia 2007-2011.

- of 4% from 2011 (3,023)
- Seventy-eight percent (2,263) of those diagnosed with HIV infection in Georgia during 2012 were male and 22% (633) were female. Sex was not reported for 15 persons. No individuals with transgender identity were diagnosed with HIV in 2012.
- 29% of new diagnoses.

- New HIV diagnoses decreased among Black females overall.







Results

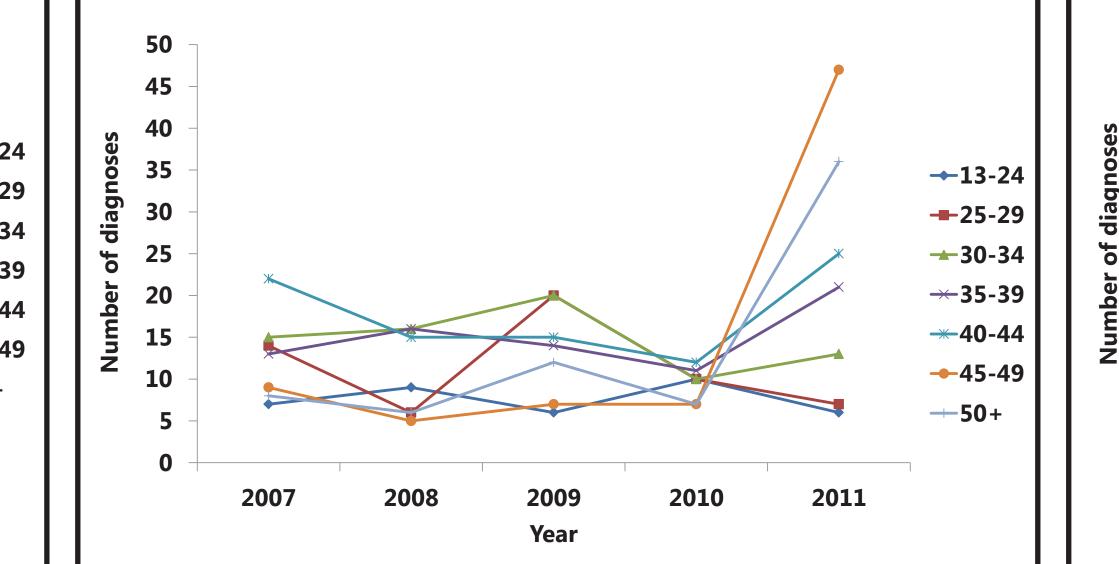
The number of new diagnoses of HIV infection per year varied from 2005 to 2012. There were 2,911 new HIV diagnoses in 2012 in Georgia; a decrease

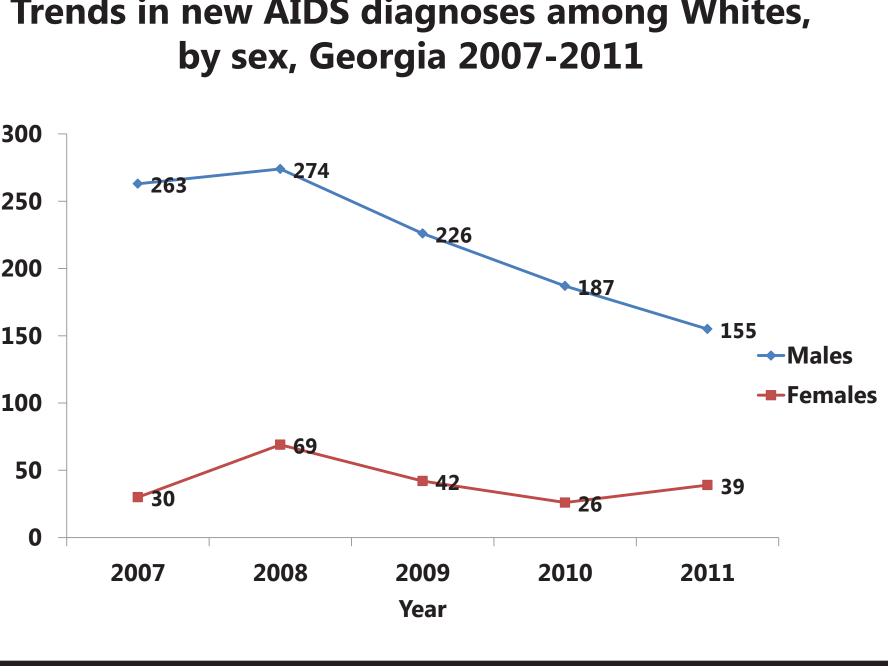
• Fifty-five percent (55%) of new diagnoses of HIV infection in Georgia were among Black/Non-Hispanic. Information on race/ethnicity was not reported in

 Although overall trends in HIV and AIDS diagnoses have been decreasing in Georgia from 2008 to 2012, new diagnoses are increasing in some sub-populations. New AIDS diagnoses decreased among Black males and females from 2008-2011.

• Among Black males, HIV diagnoses are increasing among those age 13-24, 25-29, 30-34, and 35-39 years.

• The two youngest (13-24 and 25-29) age groups not only show an increase in HIV diagnoses, but also comprise the greatest number of new HIV diagnoses.







Conclusions

- Overall, new diagnoses of AIDS and deaths among people living with HIV are decreasing.
- New HIV diagnoses among Blacks overall are decreasing
- New HIV diagnoses are increasing among younger Black males and older Black females
- Many Hispanic/Latino males and females are diagnosed late with HIV, and the number of new AIDS diagnoses is increasing

Recommendations

- Although the proportion of Hispanic/Latinos living with HIV in Georgia is smaller than that of White and Blacks, increasing trends in new HIV and AIDS diagnoses may auger a greater epidemic.
- Increasing trends in new HIV diagnoses in the two youngest age groups among Black males and oldest age group among Black females imply different determinants and risk behaviors.
- Prevention messages need to be developed for diverse populations including women, Hispanic/Latinos of both sexes and youth who may not recognize their risk for HIV infection.

Limitations

- Incomplete reporting
- Missing data for race/ethnicity, sex, and address at diagnosis
- Missing risk factor data used to generate transmission category information
- Missing laboratory reports
- Out-migration

Acknowledgements

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