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Publication schedule: This report reflects events occurring through June 30, 2009, and reported by March 31, 2010, unless otherwise stated. It represents diagnoses made through nine months prior to the publication date because case reporting is 90% complete by that time. Because cases continue to be reported for many months, the final numbers can be expected to be higher.

To receive this report via e-mail, send an e-mail request to: hivreport@health.nyc.gov

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HIGHLIGHTS FROM THE FIRST HALF OF 2009

- As of June 30, 2009, **107,177** persons had been diagnosed and reported in New York City and were presumed to be living with HIV/AIDS (PLWHA).
 - **75%** of all persons presumed to be living with HIV/AIDS are aged 40 years or older, and nearly one-third (**32.5%**) are known to be men who have sex with men (MSM).
- In the first half of 2009, there were **1,823** new diagnoses of HIV/AIDS in New York City. Of these, **418 (22.9%)** were diagnoses of AIDS concurrent with HIV, and **45** were acute HIV infections.
 - **75%** of the **1,405** new HIV (non-AIDS) diagnoses were among men; **44%** were among MSM; and **22%** were among persons reporting heterosexual transmission risk. The proportion of new HIV diagnoses among injection drug users fell from **6.7%** in the first half of 2008 to **4.6%** in the first half of 2009.
 - Manhattan and Brooklyn had the highest proportions of HIV (non-AIDS) diagnoses, followed by the Bronx and Queens.
 - Persons of color continue to be disproportionately affected by HIV/AIDS: **>80%** of new HIV diagnoses in the first half of 2009 were among blacks and Hispanics.
- This is our first report to separate persons living outside NYC from those with unknown borough of residence.
 - In the first half of 2009, **7.2%** of new HIV/AIDS diagnoses were among persons living outside of NYC, but diagnosed in NYC.

HIV-related Partner Notification and Testing in New York City, June 2006 – June 2009

The Field Services Unit (FSU) of the HIV Epidemiology program of NYC DOHMH was established in June 2006 to assist HIV medical providers and patients diagnosed with HIV infection with partner services and linkage to medical care. By the end of 2009, FSU field staff were stationed in 11 hospitals and their affiliates, tuberculosis clinics citywide, and NYC jails.

The proportion of new HIV diagnoses interviewed by FSU has increased substantially since 2006 (Figure 1). In 2009, FSU interviewed more than 380 HIV-infected individuals, or 21% of all new HIV diagnoses in NYC that year. By 2010, FSU aims to interview at least 33% of newly diagnosed cases citywide.

Notifications of sex and needle-sharing partners, number of partners HIV tested, and persons newly diagnosed through this program have grown steadily since 2006 (Figure 2). In 2009, 465 partners were notified, 353 were HIV tested, and 50 were newly diagnosed with HIV. Since FSU started, more than 100 partners have been newly diagnosed with HIV.

Figure 1. Proportion of Newly Diagnosed HIV Patients Interviewed¹ by FSU

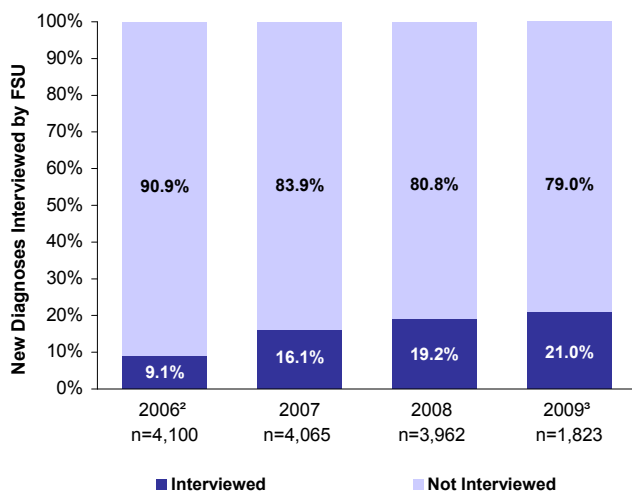
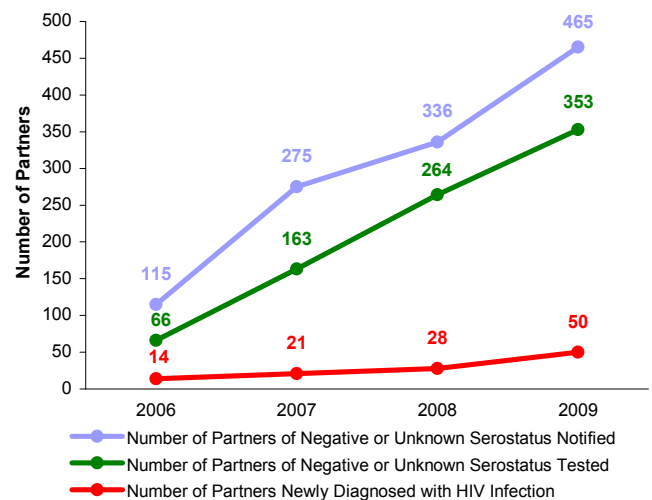


Figure 2. Outcomes of Partner Notification by FSU



¹ Number of interviews excludes additional patients interviewed by the FSU at affiliate clinics due to delayed reporting.

² FSU created in June 2006, so data for 2006 are for June-December 2006 only.

³ 2009 data are for January-June 2009 only.

Table 1. HIV/AIDS diagnoses and deaths occurring January 1, 2009, through June 30, 2009, and persons diagnosed and reported in New York City and presumed to be living with HIV/AIDS as of June 30, 2009¹

	HIV diagnoses ¹							AIDS diagnoses ³		PLWHA as of 6/30/2009		Deaths ⁴	
	Total		Without AIDS		Concurrent with AIDS diagnosis ²			N	%	N	%	N	%
	N	%	N	%	N	%	Row %						
Total	1,823	100.0	1,405	100.0	418	100.0	22.9	1,480	100.0	107,177	100.0	929	100.0
Sex													
Male	1,367	75.0	1,052	74.9	315	75.4	23.0	1,025	69.3	75,550	70.5	620	66.7
Female	456	25.0	353	25.1	103	24.6	22.6	455	30.7	31,627	29.5	309	33.3
Race/Ethnicity													
Black	923	50.6	702	50.0	221	52.9	23.9	758	51.2	48,333	45.1	490	52.7
Hispanic	553	30.3	427	30.4	126	30.1	22.8	461	31.1	34,196	31.9	329	35.4
White	295	16.2	233	16.6	62	14.8	21.0	231	15.6	22,379	20.9	106	11.4
Asian/Pacific Islander	48	2.6	40	2.8	8	1.9	16.7	28	1.9	1,582	1.5	4	0.4
Native American	3	0.2	2	0.1	1	0.2	33.3	2	0.1	151	0.1	0	0.0
Multiracial	1	0.1	1	0.1	0	0.0	0.0	0	0.0	46	0.0	0	0.0
Unknown	0	0.0	0	0.0	0	0.0	0.0	0	0.0	490	0.5	0	0.0
Age group (years)⁵													
0-12	5	0.3	5	0.4	0	0.0	0.0	0	0.0	462	0.4	0	0.0
13-19	87	4.8	76	5.4	11	2.6	12.6	33	2.2	1,537	1.4	1	0.1
20-29	475	26.1	422	30.0	53	12.7	11.2	198	13.4	7,312	6.8	19	2.0
30-39	485	26.6	376	26.8	109	26.1	22.5	363	24.5	17,479	16.3	79	8.5
40-49	466	25.6	340	24.2	126	30.1	27.0	511	34.5	39,296	36.7	278	29.9
50-59	221	12.1	137	9.8	84	20.1	38.0	277	18.7	29,487	27.5	337	36.3
60+	84	4.6	49	3.5	35	8.4	41.7	98	6.6	11,604	10.8	215	23.1
Borough of residence													
Bronx	377	20.7	285	20.3	92	22.0	24.4	327	22.1	22,900	21.4	253	27.2
Brooklyn	505	27.7	374	26.6	131	31.3	25.9	402	27.2	26,378	24.6	242	26.0
Manhattan	480	26.3	384	27.3	96	23.0	20.0	367	24.8	32,303	30.1	239	25.7
Queens	301	16.5	233	16.6	68	16.3	22.6	204	13.8	15,197	14.2	125	13.5
Staten Island	29	1.6	23	1.6	6	1.4	20.7	20	1.4	1,875	1.7	27	2.9
Outside NYC	131	7.2	106	7.5	25	6.0	19.1	160	10.8	8,509	7.9	43	4.6
Unknown	0	0.0	0	0.0	0	0.0	0.0	0	0.0	15	0.0	0	0.0
Transmission risk													
Men who have sex with men	735	40.3	616	43.8	119	28.5	16.2	461	31.1	34,818	32.5	129	13.9
Injection drug use history	91	5.0	64	4.6	27	6.5	29.7	181	12.2	21,149	19.7	365	39.3
Heterosexual ⁶	412	22.6	307	21.9	105	25.1	25.5	362	24.5	20,294	18.9	147	15.8
Perinatal	5	0.3	5	0.4	0	0.0	0.0	19	1.3	2,461	2.3	5	0.5
Other	0	0.0	0	0.0	0	0.0	0.0	1	0.1	270	0.3	4	0.4
Unknown	580	31.8	413	29.4	167	40.0	28.8	456	30.8	28,185	26.3	279	30.0
Clinical status as of 6/30/2009													
HIV (non-AIDS)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	41,825	39.0	141	15.2
AIDS	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	65,352	61.0	788	84.8

PLWHA=Persons living with HIV/AIDS; n/a=Not applicable. All percents are column percents unless otherwise indicated.

¹ For events reported by March 31, 2010. ² HIV diagnosed concurrently with AIDS (within 31 days of HIV diagnosis). Row percent is percent of total HIV diagnoses that were concurrent with AIDS diagnoses. ³ AIDS was diagnosed in 2009 and includes concurrent HIV/AIDS diagnosis. ⁴ Includes deaths from any cause in persons with HIV/AIDS. ⁵ For HIV and AIDS diagnoses, age at diagnosis; for PLWHA, age as of June 30, 2009; and for deaths, age at death. ⁶ Includes persons who had heterosexual sex with a person they know to be HIV-infected, an injection drug user, or a person who has received blood products. For females only, also includes history of prostitution, multiple sex partners, sexually transmitted disease, crack/cocaine use, sex with a bisexual male, probable heterosexual transmission as noted in medical chart, or sex with a male and negative history of injection drug use.

Which HIV-related events are reportable in New York State, and who is required to report?

In 1998, New York State expanded AIDS case reporting to include HIV (Chapter 163 of the Laws of 1998, PHL Article 21). The law took effect on **June 1, 2000**, and was expanded further on **June 1, 2005**. All diagnostic and clinical providers (doctors, nurses, physician assistants, and all others diagnosing HIV or providing care to HIV-infected persons) and laboratories are required by law to report the following events:

Events reportable by providers on the required New York State Provider Report Form (PRF)

- Diagnoses of HIV infection
- Diagnoses of HIV illness in a previously unreported individual (i.e., HIV illness not meeting the AIDS case definition)
- Diagnoses of AIDS-defining conditions

Events reportable by laboratories

- All positive Western blot test results
- All viral load test results (detectable and undetectable)
- All CD4 test results
- All viral nucleotide sequence results

For assistance in reporting a case of HIV/AIDS, to receive Provider Report Forms, or to obtain more information, please call (212) 442-3388



TALK TO US
CNAP
(212) 693-1419

New York State law also requires medical providers to talk to HIV-infected patients about partner notification and report such patients' known sex or needle-sharing partners to the health department. Providers can fill in the *Medical Provider HIV/AIDS and Partner/Contact Report Form* (PRF) or call the NYC DOHMH Contact Notification Assistance Program (CNAP) at (212) 693-1419. Providers can refer HIV-infected patients to CNAP for direct assistance with partner notification.

For more information about the New York State HIV reporting and partner notification law and CNAP, visit:
http://www.nyc.gov/html/doh/html/dires/hcpreporting_how.shtml.

Table 2. HIV/AIDS diagnoses and deaths occurring January 1, 2009, through June 30, 2009, and persons diagnosed and reported in New York City and presumed to be living with HIV/AIDS as of June 30, 2009¹, by sex

	HIV diagnoses ¹							AIDS diagnoses ³		PLWHA as of 6/30/2009		Deaths ⁴	
	Total		Without AIDS		Concurrent with AIDS diagnosis ²			N	%	N	%	N	%
	N	%	N	%	N	%	Row %						
Total (Male and Female)	1,823	100.0	1,405	100.0	418	100.0	22.9	1,480	100.0	107,177	100.0	929	100.0
Male	1,367	100.0	1,052	100.0	315	100.0	23.0	1,025	100.0	75,550	100.0	620	100.0
Race/Ethnicity													
Black	620	45.4	474	45.1	146	46.3	23.5	470	45.9	29,756	39.4	321	51.8
Hispanic	430	31.5	326	31.0	104	33.0	24.2	321	31.3	24,218	32.1	212	34.2
White	271	19.8	214	20.3	57	18.1	21.0	208	20.3	19,789	26.2	84	13.5
Asian/Pacific Islander	43	3.1	36	3.4	7	2.2	16.3	24	2.3	1,278	1.7	3	0.5
Native American	3	0.2	2	0.2	1	0.3	33.3	2	0.2	109	0.1	0	0.0
Multiracial	0	0.0	0	0.0	0	0.0	0.0	0	0.0	32	0.0	0	0.0
Unknown	0	0.0	0	0.0	0	0.0	0.0	0	0.0	368	0.5	0	0.0
Age group (years)⁵													
0-12	2	0.1	2	0.2	0	0.0	0.0	0	0.0	219	0.3	0	0.0
13-19	65	4.8	56	5.3	9	2.9	13.8	18	1.8	783	1.0	0	0.0
20-29	401	29.3	356	33.8	45	14.3	11.2	155	15.1	5,174	6.8	10	1.6
30-39	368	26.9	282	26.8	86	27.3	23.4	262	25.6	11,928	15.8	48	7.7
40-49	334	24.4	238	22.6	96	30.5	28.7	345	33.7	27,471	36.4	163	26.3
50-59	144	10.5	88	8.4	56	17.8	38.9	181	17.7	21,226	28.1	239	38.5
60+	53	3.9	30	2.9	23	7.3	43.4	64	6.2	8,749	11.6	160	25.8
Borough of residence													
Bronx	243	17.8	180	17.1	63	20.0	25.9	184	18.0	13,718	18.2	153	24.7
Brooklyn	361	26.4	262	24.9	99	31.4	27.4	273	26.6	16,722	22.1	156	25.2
Manhattan	405	29.6	325	30.9	80	25.4	19.8	292	28.5	26,192	34.7	175	28.2
Queens	236	17.3	185	17.6	51	16.2	21.6	141	13.8	10,762	14.2	89	14.4
Staten Island	15	1.1	13	1.2	2	0.6	13.3	10	1.0	1,198	1.6	17	2.7
Outside NYC	107	7.8	87	8.3	20	6.3	18.7	125	12.2	6,951	9.2	30	4.8
Unknown	0	0.0	0	0.0	0	0.0	0.0	0	0.0	7	0.0	0	0.0
Transmission risk													
Men who have sex with men	735	53.8	616	58.6	119	37.8	16.2	461	45.0	34,818	46.1	129	20.8
Injection drug use history	63	4.6	44	4.2	19	6.0	30.2	126	12.3	15,019	19.9	254	41.0
Heterosexual ⁶	107	7.8	70	6.7	37	11.7	34.6	96	9.4	5,539	7.3	47	7.6
Perinatal	2	0.1	2	0.2	0	0.0	0.0	6	0.6	1,200	1.6	1	0.2
Other	0	0.0	0	0.0	0	0.0	0.0	1	0.1	139	0.2	3	0.5
Unknown	460	33.7	320	30.4	140	44.4	30.4	335	32.7	18,835	24.9	186	30.0
Clinical status as of 6/30/2009													
HIV (non-AIDS)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	29,136	38.6	89	14.4
AIDS	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	46,414	61.4	531	85.6
Female	456	100.0	353	100.0	103	100.0	22.6	455	100.0	31,627	100.0	309	100.0
Race/Ethnicity													
Black	303	66.4	228	64.6	75	72.8	24.8	288	63.3	18,577	58.7	169	54.7
Hispanic	123	27.0	101	28.6	22	21.4	17.9	140	30.8	9,978	31.5	117	37.9
White	24	5.3	19	5.4	5	4.9	20.8	23	5.1	2,590	8.2	22	7.1
Asian/Pacific Islander	5	1.1	4	1.1	1	1.0	20.0	4	0.9	304	1.0	1	0.3
Native American	0	0.0	0	0.0	0	0.0	0.0	0	0.0	42	0.1	0	0.0
Multiracial	1	0.2	1	0.3	0	0.0	0.0	0	0.0	14	0.0	0	0.0
Unknown	0	0.0	0	0.0	0	0.0	0.0	0	0.0	122	0.4	0	0.0
Age group (years)⁵													
0-12	3	0.7	3	0.8	0	0.0	0.0	0	0.0	243	0.8	0	0.0
13-19	22	4.8	20	5.7	2	1.9	9.1	15	3.3	754	2.4	1	0.3
20-29	74	16.2	66	18.7	8	7.8	10.8	43	9.5	2,138	6.8	9	2.9
30-39	117	25.7	94	26.6	23	22.3	19.7	101	22.2	5,551	17.6	31	10.0
40-49	132	28.9	102	28.9	30	29.1	22.7	166	36.5	11,825	37.4	115	37.2
50-59	77	16.9	49	13.9	28	27.2	36.4	96	21.1	8,261	26.1	98	31.7
60+	31	6.8	19	5.4	12	11.7	38.7	34	7.5	2,855	9.0	55	17.8
Borough of residence													
Bronx	134	29.4	105	29.7	29	28.2	21.6	143	31.4	9,182	29.0	100	32.4
Brooklyn	144	31.6	112	31.7	32	31.1	22.2	129	28.4	9,656	30.5	86	27.8
Manhattan	75	16.4	59	16.7	16	15.5	21.3	75	16.5	6,111	19.3	64	20.7
Queens	65	14.3	48	13.6	17	16.5	26.2	63	13.8	4,435	14.0	36	11.7
Staten Island	14	3.1	10	2.8	4	3.9	28.6	10	2.2	677	2.1	10	3.2
Outside NYC	24	5.3	19	5.4	5	4.9	20.8	35	7.7	1,558	4.9	13	4.2
Unknown	0	0.0	0	0.0	0	0.0	0.0	0	0.0	8	0.0	0	0.0
Transmission risk													
Injection drug use history	28	6.1	20	5.7	8	7.8	28.6	55	12.1	6,130	19.4	111	35.9
Heterosexual ⁶	305	66.9	237	67.1	68	66.0	22.3	266	58.5	14,755	46.7	100	32.4
Perinatal	3	0.7	3	0.8	0	0.0	0.0	13	2.9	1,261	4.0	4	1.3
Other	0	0.0	0	0.0	0	0.0	0.0	0	0.0	131	0.4	1	0.3
Unknown	120	26.3	93	26.3	27	26.2	22.5	121	26.6	9,350	29.6	93	30.1
Clinical status as of 6/30/2009													
HIV (non-AIDS)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	12,689	40.1	52	16.8
AIDS	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	18,938	59.9	257	83.2

PLWHA=Persons living with HIV/AIDS; n/a=Not applicable. All percents are column percents unless otherwise indicated.

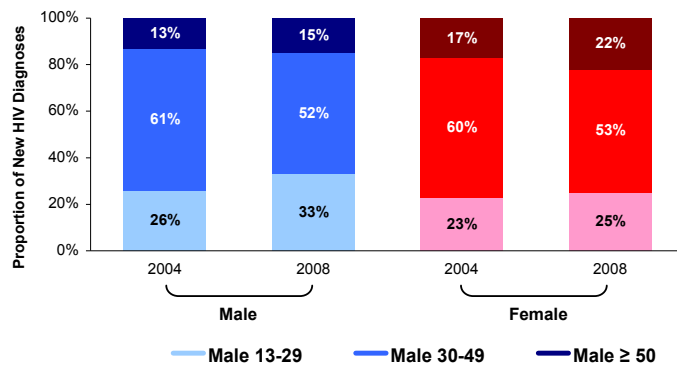
Footnotes appear at the bottom of Table 1.

HIV/AIDS among older adults (50 and over) in New York City, 2004 – 2008¹

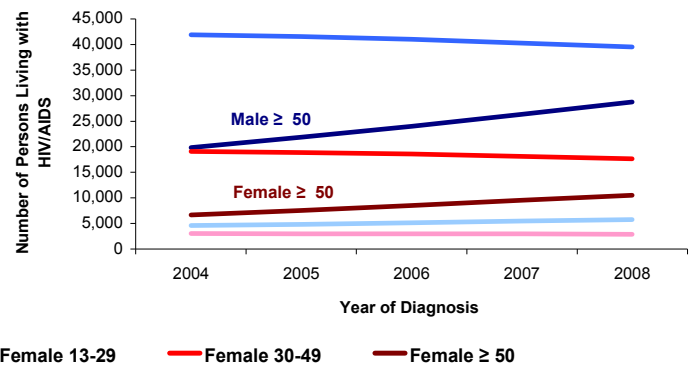
Persons aged 50 and older play an important but under-recognized part in the HIV/AIDS epidemic in New York City. In 2008, persons aged ≥ 50 accounted for 17% of all new HIV diagnoses citywide. Although both case counts for adults ≥ 50 and the proportion of new diagnoses among males ≥ 50 have been stable in recent years, the proportion of new diagnoses among females ≥ 50 increased between 2004 and 2008.

Persons living with HIV/AIDS (PLWHA) in New York City are aging. In 2008, more than one-third (37%) of PLWHA were aged ≥ 50 . Between 2004 and 2008, the numbers of PLWHA aged ≥ 50 increased by 45% (19,840 to 28,761) in males, and by 58% (6,675 to 10,542) in females.

Proportion of New HIV Diagnoses by Age and Sex, 2004 – 2008

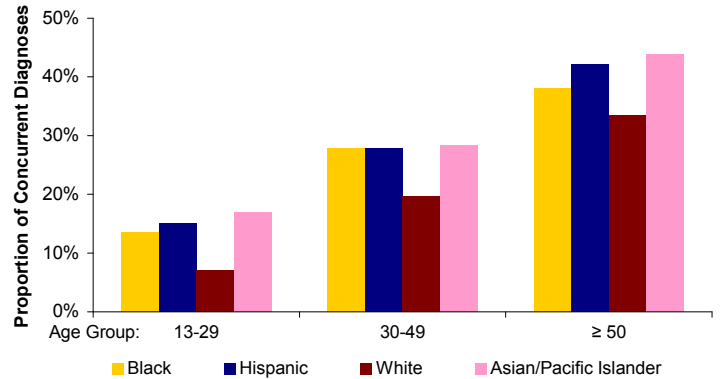


Number of Persons Living with HIV/AIDS, 2004 – 2008

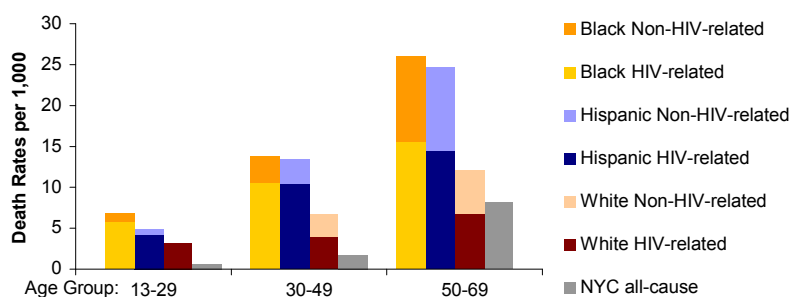


The proportion of HIV diagnoses that are made concurrent with an AIDS diagnosis increases with age. In 2008, 38% of new HIV diagnoses among persons ≥ 50 were concurrent with an AIDS diagnosis, while only 13% among youth aged 13-29 were concurrent. In all age groups, blacks, Hispanics, and Asian/Pacific Islanders had higher concurrency proportions than whites. Higher concurrency proportions among persons ≥ 50 likely reflect lower testing rates in this group compared to younger persons², as well as age-related risk of progression to AIDS³. Moreover, in 2008, 47% of newly HIV diagnosed males ≥ 50 had no reported HIV transmission risk, in contrast to only 18% of males aged 13-29. Together with high concurrency proportions, poor ascertainment of risk among older persons suggests a lack of awareness about the risk of infection in this group, both among patients and medical providers.

Proportion of Concurrent Diagnoses by Age and Race/Ethnicity⁵



Death Rates⁴ by Age and Race/Ethnicity⁵



As expected, death rates among HIV-infected persons in NYC increased with age, and were higher than the overall NYC average. In 2008, the death rate among HIV-infected persons aged 50-69 with a known cause of death was 22.4 per 1,000, 2.8 times higher than the death rate for all New Yorkers aged 50-69. More than half (59%) of deaths in this group were attributed to HIV disease, compared with 76% among individuals aged < 50 .

Death rates varied substantially by race/ethnicity: death rates among blacks and Hispanics aged 50-69 were 2 times higher than among whites aged 50-69.

Conclusions and Recommendations:

- The HIV/AIDS epidemic is affecting New Yorkers of all ages. The sizeable number of new HIV diagnoses and growing HIV-infected population among older adults pose unique challenges to public health practitioners and medical providers, including HIV prevention and clinical management of PLWHA.
- Efforts to monitor trends in HIV/AIDS and to understand the underlying dynamics of infection among older adults should be enhanced.
- Older adults' frequent contact with the healthcare system presents an important opportunity for medical providers to discuss the risk of HIV infection and routinely offer voluntary HIV testing to these patients.

¹ As reported to the New York City Department of Health and Mental Hygiene by September 30, 2009.

² NYC DOHMH Community Health Survey, 2008.

³ Justice AC. HIV and aging: time for a new paradigm. *Curr HIV/AIDS Rep.* 2010 May;7(2):69-76.

⁴ All-cause death rates were calculated per 1,000 New Yorkers using 2008 NYC DOHMH Summary of Vital Statistics report. All other death rates are per 1,000 persons with HIV/AIDS.

⁵ Data for other race/ethnicity groups are based on small numbers and are not presented to protect the confidentiality of members.