Created: 12/04/14

Revision: 10/20/15



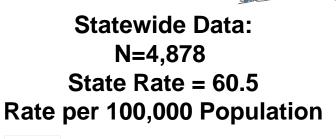
Florida Department of Health
HIV/AIDS Section
Division of Disease Control and Health Protection
Annual data as of 12/31/2014
Living (Prevalence) data as of 06/30/2015

HIV and AIDS Case Data

- Adult cases represent ages 13 and older, pediatric cases are those under the age of 13. For data by year, the age is by age of diagnosis. For living data, the age is by current age at the end of the most recent calendar year, regardless of age at diagnosis.
- Unless otherwise noted, whites are non-Hispanic and blacks are non-Hispanic.
- X Total statewide data will include Department of Correction Cases (DOC) unless otherwise noted. County data will exclude DOC cases.
- Representation of the HIV prevalence data are generated later in the year, usually in July, when most of the "expected" death data are complete.



Adult HIV Infection Case Rates* Among Males, by County of Residence**, Reported in 2014, Florida





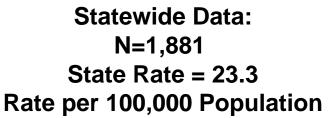
over 75.0

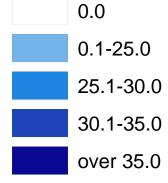


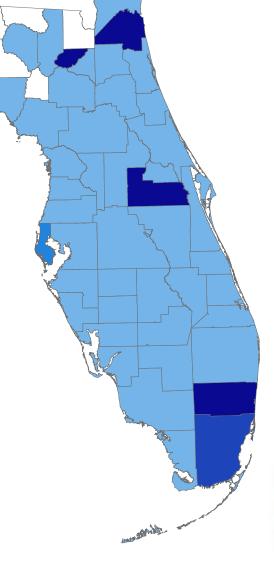
^{*}Population data are from Florida CHARTS

^{**}County totals exclude Department of Corrections cases (N=115).

Adult AIDS Case Rates* Among Males, by County of Residence**, Reported in 2014, Florida



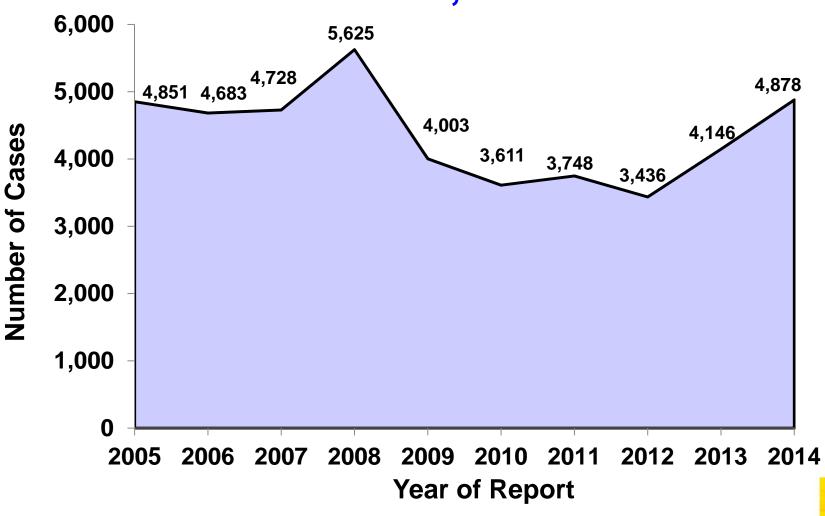




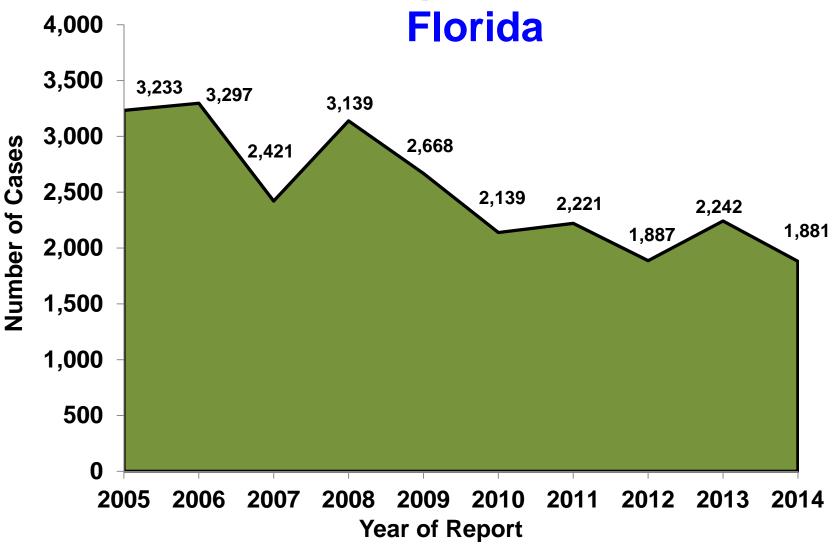
^{*}Population data are from Florida CHARTS

^{**}County totals exclude Department of Corrections cases (N=47).

Adult HIV Infection Cases Among Men by Year of Report, 2005-2014, Florida

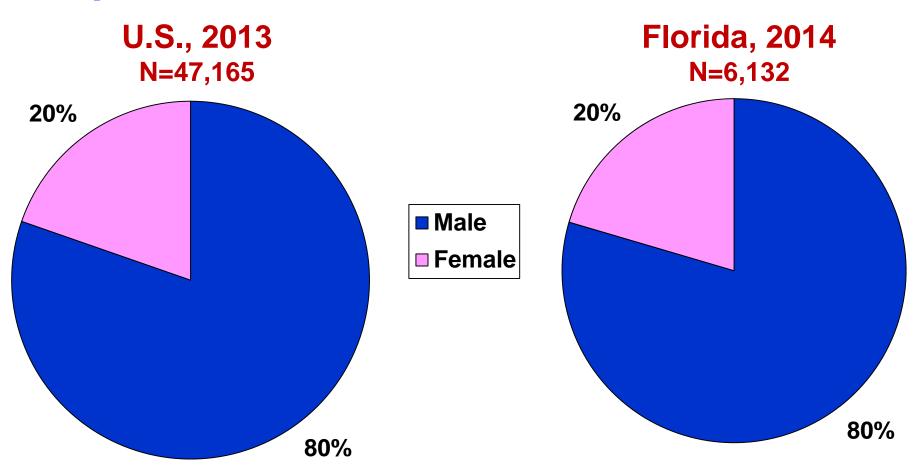


Adult AIDS Cases Among Men by Year of Report, 2005-2014,





Adult HIV Infection Cases, by Sex, Reported in the United States* and Florida

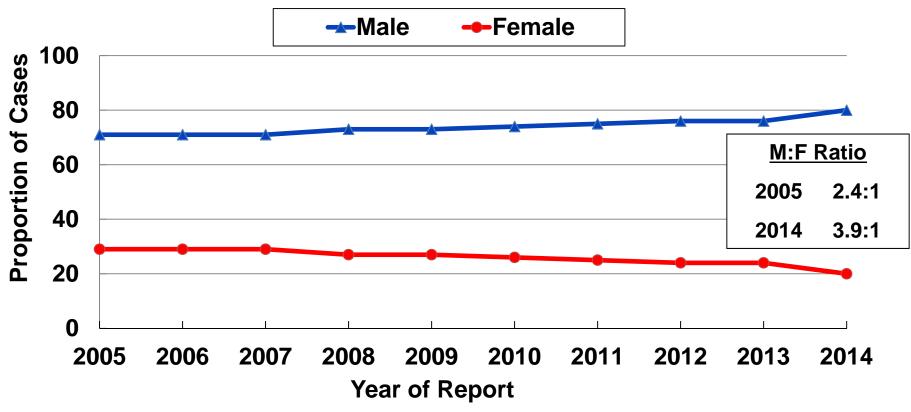


Note: Florida had similar proportion of male and female cases reported in the most recent year, compared to the U.S.

*Source: U.S. data, CDC HIV surveillance report, Vol. 25, Table 1a, 2014 data not available. HIV cases are estimated reports for all 50 states with confidential HIV reporting.



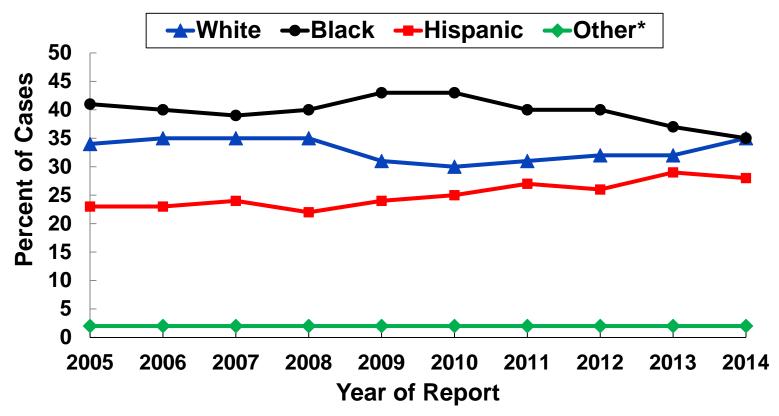
Adult HIV Infection Cases, by Sex and Year of Report, 2005-2014, Florida



Note: In 2014, 80% of the adult HIV infection cases were male, compared to 71% in 2005. Over the past ten years, the proportion of HIV infection cases among men has increased while the proportion among women has decreased. The result is an increase in the male-to-female ratio, from 2.4:1 in 2005 to 3.9:1 in 2014. The relative increase in male HIV cases might be attributed to proportional increases in HIV transmission among men who have sex with men (MSM).



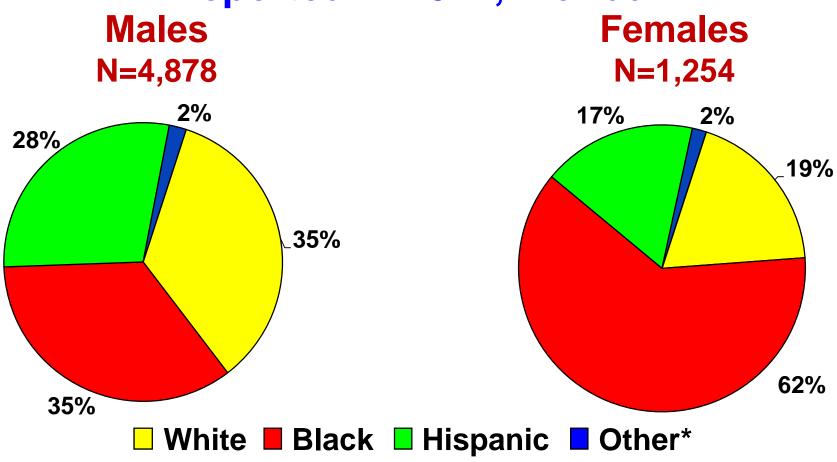
Adult Male HIV Infection Cases, by Race/Ethnicity, and Year of Report, 2005–2014, Florida



Note: Over the past ten years, black men represented the highest proportion (> 35%) of male HIV infection cases by race/ethnicity. From 2005 to 2014, the percentage of male HIV cases increased by 5 percentage points among Hispanics and 1 percentage point among whites. In contrast, the HIV cases decreased by 6 percentage points among blacks over the same time period.

*Other includes American Indian/Alaska Native, Asian/Pacific Islander, and multi-racial.

Adult HIV Infection Cases, by Sex and Race/Ethnicity, Reported in 2014, Florida



Note: In this snapshot of 2014, HIV cases by race/ethnicity among males is more evenly split compared to HIV cases among females where blacks are over-represented, accounting for 62% of adult cases among women.

*Other includes Asian/Pacific Islanders, Native Alaskans/American Indians and multi-racial individuals.



HIV Infection and AIDS Cases and Rates* Among Adult Males by Race/Ethnicity, Reported in 2014, Florida

	HIV		AIDS	
Race/Ethnicity	Cases	Rate	Cases	Rate
White	1,689	35.6	572	12.1
Black	1,698	148.0	831	72.4
Hispanic	1,394	74.7	434	23.2
Other	97	31.9	44	14.5
Total	4,878	60.5	1,881	23.3

HIV rate ratios: Black-to-White – 4.2:1

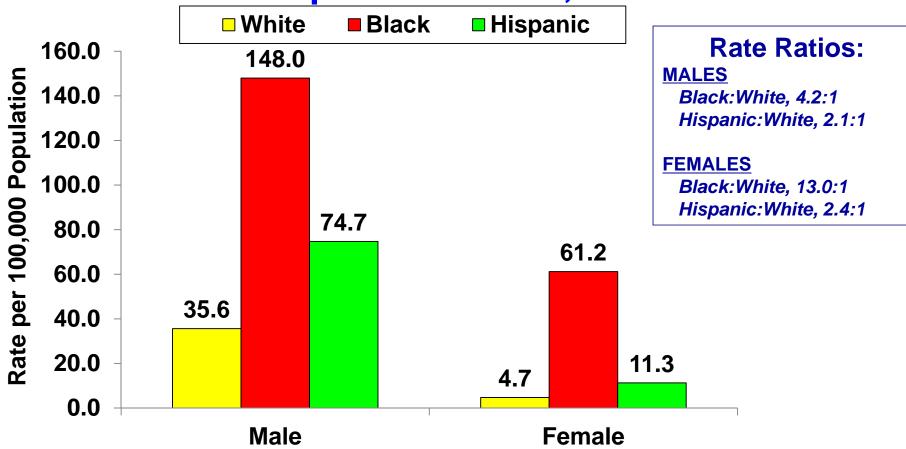
Hispanic-to-White – 2.1:1

AIDS rate ratios: Black-to-White – 6.0:1 Hispanic-to-White – 1.2:1





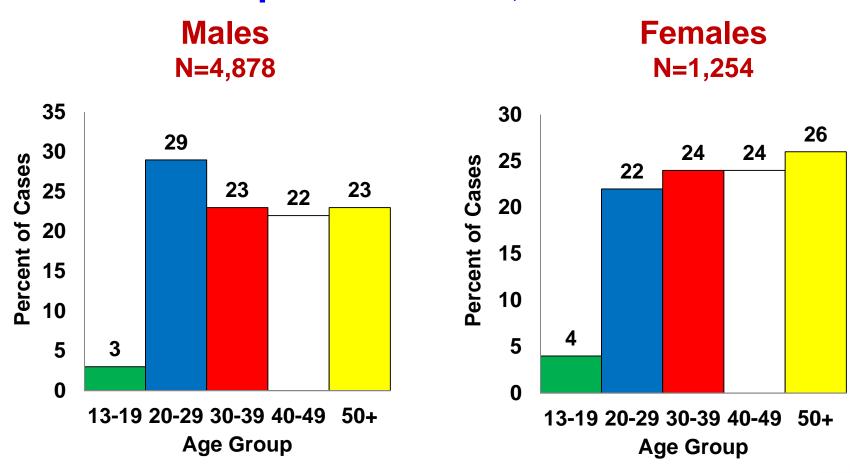
Adult HIV Infection Case Rates* by Sex and Race/Ethnicity, Reported in 2014, Florida



Note: Similar to AIDS, black men and to an even greater extent, black women are over-represented in the HIV epidemic. The HIV case rate for 2014 is 4 times higher among black men than the rate among white men. Among black women, the HIV case rate is 13-fold greater than the rate among white women. Hispanic male and female HIV case rate is higher than the rate among their white counterparts. *Source: Population estimates are provided by Florida CHARTS as of 7/9/2015.



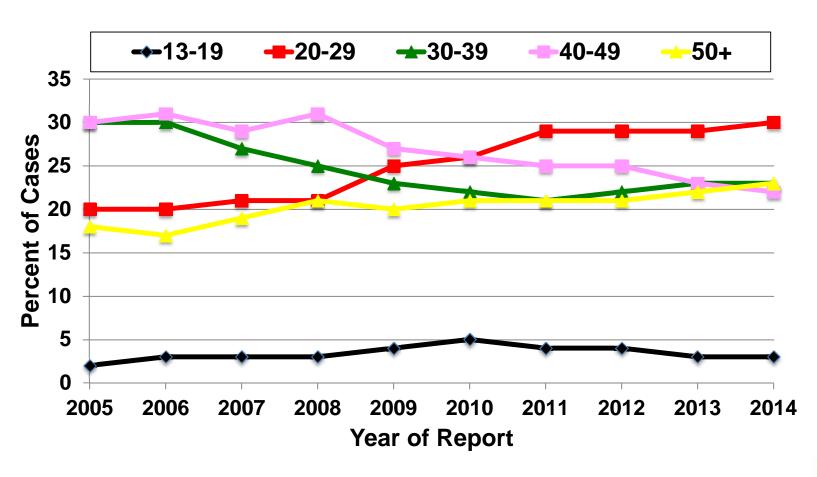
Adult HIV Infection Cases, by Sex and Age Group at Diagnosis, Reported in 2014, Florida



Note: HIV cases tend to reflect more recent transmission than AIDS cases, and thus present a more current picture of the epidemic. With regard to the age group with the highest percent of HIV infection cases, recent estimates show that among males, 29% of HIV infection cases occur among those in the 20-29 age group, whereas among females, 26% of HIV infection cases occur among those in the 50 or older age group.



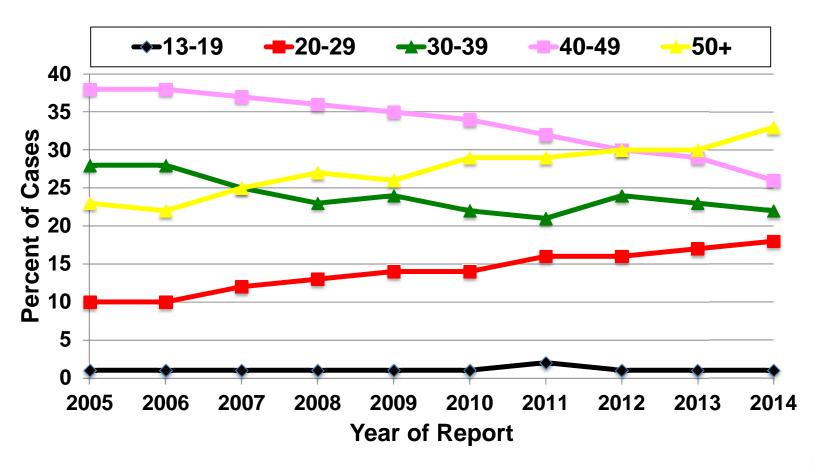
Adult Male HIV Cases, by Age Group at Diagnosis, and Year of Report, 2005–2014, Florida



Over the past several years, the proportion of newly reported HIV cases among men has shown increases for both the 20-29 and 50+ age groups.



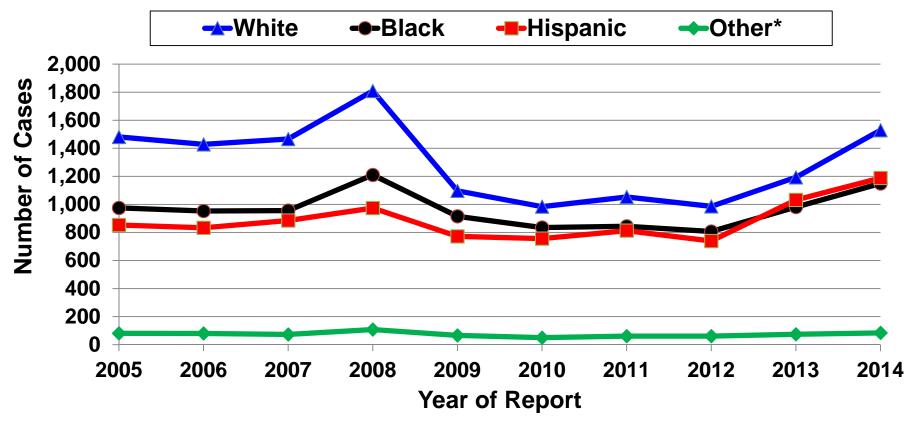
Adult Male AIDS Cases, by Age Group at Diagnosis, and Year of Report, 2005–2014, Florida



Over the past several years, the proportion of newly reported male AIDS cases has shown increases for both the 20-29 and 50+ age groups. The age group 13-19 has remained level.



Adult HIV Infection Cases among MSM* by Race/Ethnicity, and Year of Report, 2005–2014, Florida



Note: Over the past ten years, the number of MSM HIV infection cases increased among whites by 3%, blacks by 18% and Hispanics by 39%, yet remained fairly level among other race/ethnic groups.



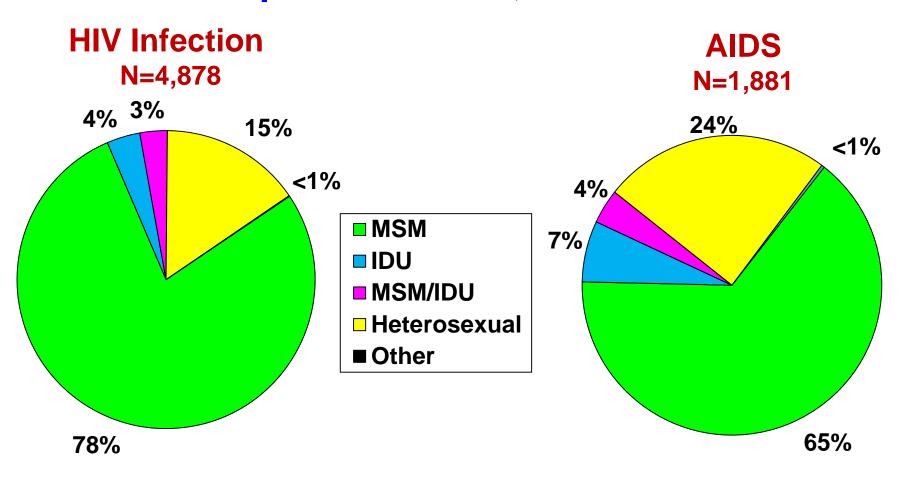
^{*} Male-to-male sexual contact (MSM) includes MSM and MSM/ Injection Drug Use (IDU) cases.

^{**} Other includes American Indian/Alaska Native, Asian/Pacific Islander, and persons of multiple races.

Definitions of Mode of Exposure Categories

- MSM = Men who have sex with men or Male-to-male sexual contact with person with HIV/AIDS or known HIV risk
- ◆ <u>IDU</u> = Injection Drug User
- MSM/IDU = Men who have sex with men or Male-to-male sexual contact & Injection Drug User
- <u>Heterosexual</u> = Heterosexual contact with person with HIV/AIDS or known HIV risk
- OTHER = includes hemophilia, transfusion, perinatal, other pediatric risks and other confirmed risks.
- ♦ NIR = Cases reported with No Identified Risk
- Redistribution of NIRs = This illustrates the effect of statistically assigning (redistributing) the NIRs to recognized exposure (risk) categories by applying the proportions of historically reclassified NIRs to the unresolved NIRs.

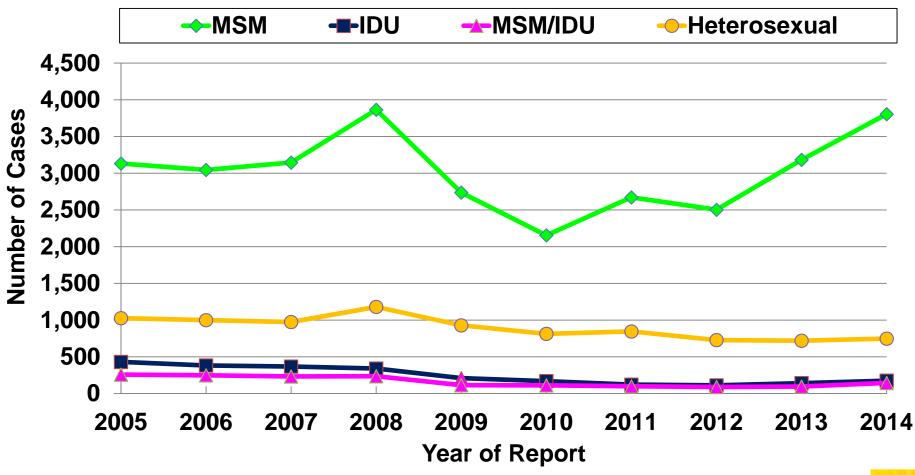
Adult Male HIV Infection and AIDS Cases, by Mode of Exposure, Reported in 2014, Florida



Note: NIRs redistributed. For HIV infection and AIDS cases in men reported in 2014, male-to-male sexual contact (MSM) was the most common risk factor (78% and 65% respectively) followed by cases with a heterosexual risk (15% for HIV and 24% for AIDS). HIV cases tend to represent a more recent picture of the epidemic.



Adult Male HIV Infection Cases, by Mode of Exposure and Year of Report, 2005–2014, Florida



Note: NIRs redistributed. Men who have sex with men (MSM) remains as the primary mode of exposure among male HIV cases in Florida, followed by heterosexual contact.



Persons Living with HIV Disease

- Unless otherwise noted, data in the following slides represent persons living with HIV disease, also referred to Persons Living with HIV/AIDS (PLWHAs), who were reported through the most recent calendar year. Living data are also referred as prevalence cases.
- X HIV prevalence data are generated later in the year, usually in July, when most of the "expected" death data are complete.
- Adult cases represent ages 13 and older, pediatric cases are those under the age of 13. For data by year, the age is by age of diagnosis. For living data, the age is by current age at the end of the most recent calendar year, regardless of age at diagnosis.
- Unless otherwise noted, whites are non-Hispanic and blacks are non-Hispanic.
- X Total statewide data will include Department of Correction Cases (DOC) unless otherwise noted. County data will exclude DOC cases.



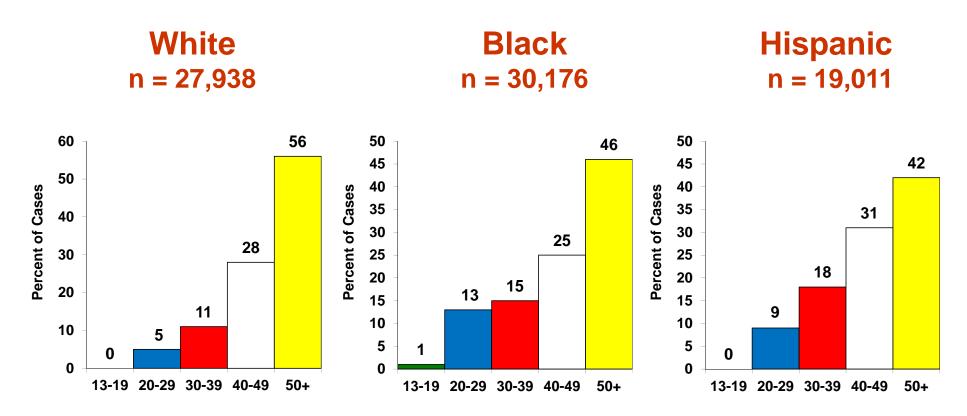
Adult Males Living with HIV Disease, by Race/Ethnicity, Current Age Group and Mode of Exposure, Diagnosed through 2014, Florida

Race/Ethnicity	No.	Percent		
White	27,938	36%		
Black	30,176	38%		
Hispanic	19,011	24%		
Other	1,519	2%		
Age Group				
13-19	332	0%		
20-29	7,011	9%		
30-39	11,365	14%		
40-49	21,660	28%		
50+	38,276	49%		
Mode of Exposure*				
MSM	53,099	68%		
IDU	5,598	7%		
MSM/IDU	4,199	5%		
Heterosexual Contact	15,003	19%		
Other Confirmed Risk	745	1%		
Total	78,644			
Adjustments have been made to redistribute NIR cases.				



^{*}NIRs redistributed.

Adult Males Living with HIV Disease, by Race/Ethnicity and Current Age Group, Diagnosed through 2014, N=78,644, Florida



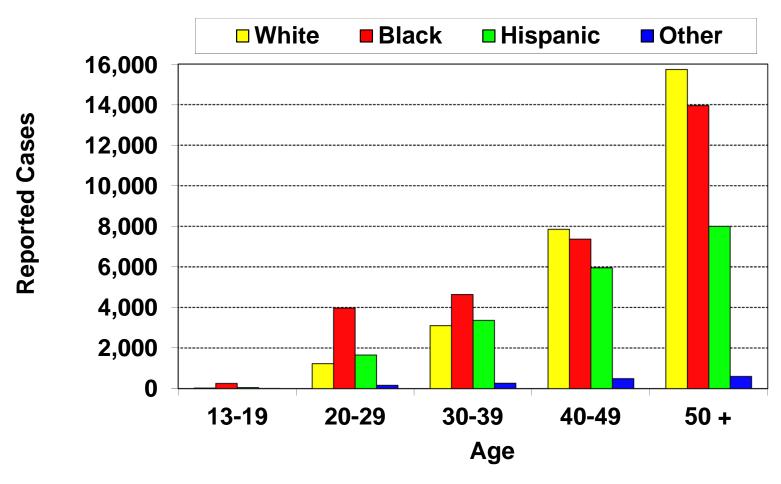
Note: White males living with HIV disease have a higher proportion of cases living past the age of 40 (84%), compared to black males (71%) and Hispanic males (73%).

Data for Other males (which includes Asian/Pacific Islanders, Native Alaskans/American Indians

Data for Other males (which includes Asian/Pacific Islanders, Native Alaskans/American Indians and Multi-racial individuals) are not shown (n=1,519).



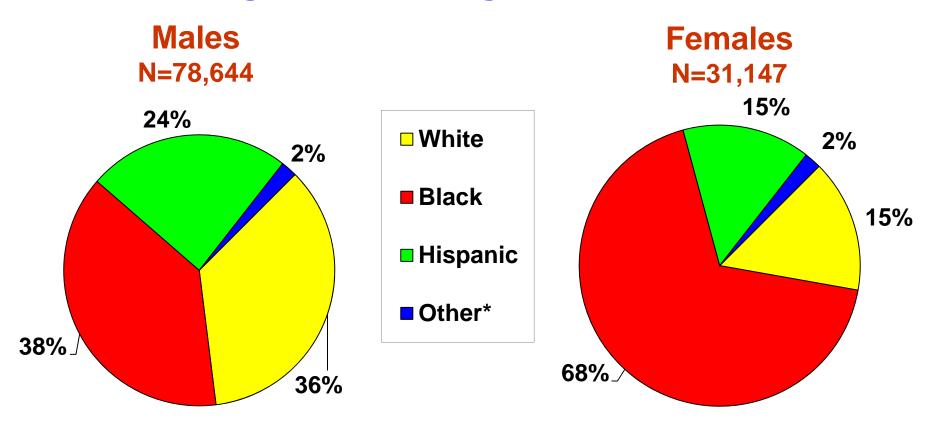
Adult Males Living with HIV Disease, by Current Age Group and Race/Ethnicity, Diagnosed through 2014, N=78,644, Florida



Note: Adult males living with HIV disease vary by race/ethnicity and age group. Black males represent the highest proportions for each age group except 40-49 and 50+, where white males have the highest proportion.



Adults Living with HIV Disease, by Sex and Race/Ethnicity Diagnosed through 2014, Florida

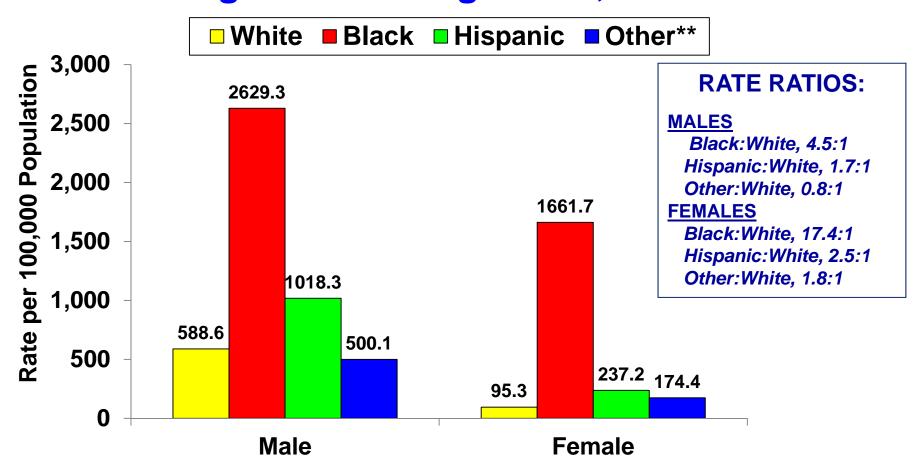


Note: Among adults living with HIV disease, blacks represent the race most affected among both males (38%) and females (68%).



^{*}Other includes Ásian/Pacific Islanders, Native Alaskans/American Indians and Multi-racial individuals.

Case Rates* of Adults Living with HIV Disease, by Sex and Race/Ethnicity, Diagnosed through 2014, Florida



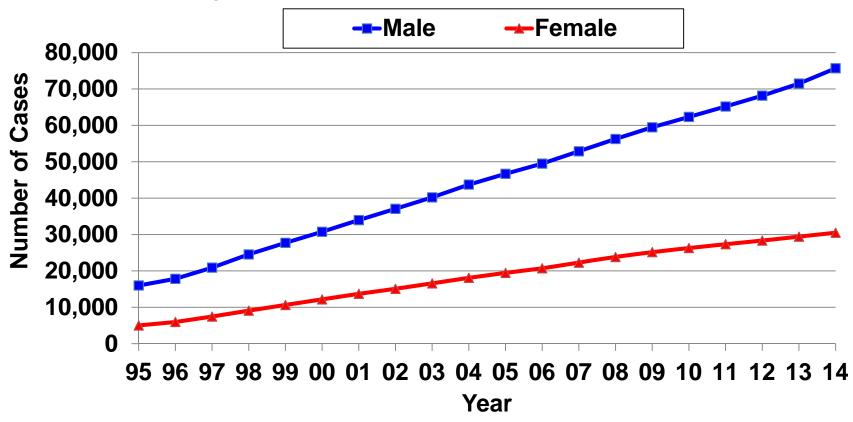
Note: In 2014, among black males, the case rate is nearly 5 times higher than the rate among white males. Among black females, the case rate is 17-fold greater than the rate among white females. Among Hispanic females, the case rate is nearly 3 times higher than the rate among their white counterparts. The case rate among Hispanic males is slightly lower than the rate among their white counterparts.

*Source: Population estimates are provided by Florida CHARTS as of 07/09/2015.



^{**}Other includes Asian/Pacific Islanders, Native Alaskans/American Indians and Multi-racial individuals.

Annual Prevalence of Adults Living with HIV Disease by Sex, 1995-2014, Florida*

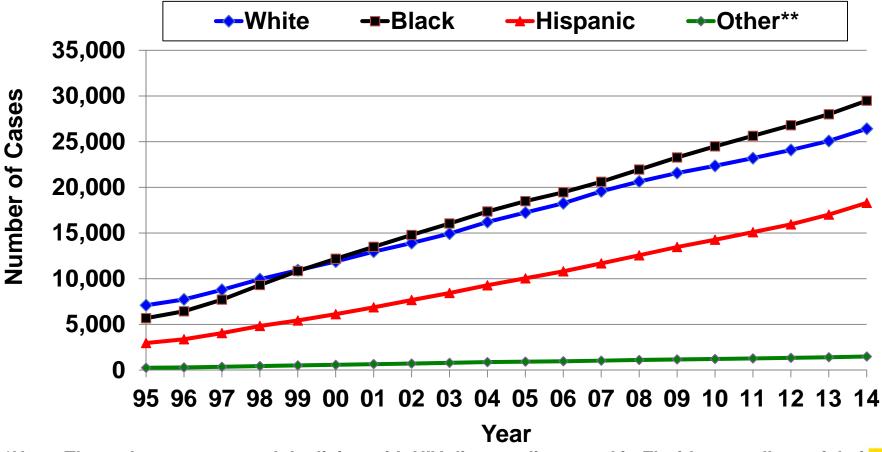


Although increases are seen among both men and women, women account for an increasing proportion of persons living with HIV disease. In 2014, women accounted for 29% of persons living with HIV disease, compared with 24% in 1995.

*Note: These data represent adults living with HIV disease diagnosed in Florida regardless of their current residence.



Annual Prevalence of Adult Males Living with HIV Disease, by Race/Ethnicity, 1995-2014, Florida*



^{*}Note: These data represent adults living with HIV disease diagnosed in Florida regardless of their current residence.

^{**} Other includes American Indian/Alaska Native, Asian/Pacific Islander, and multi-racial individuals.

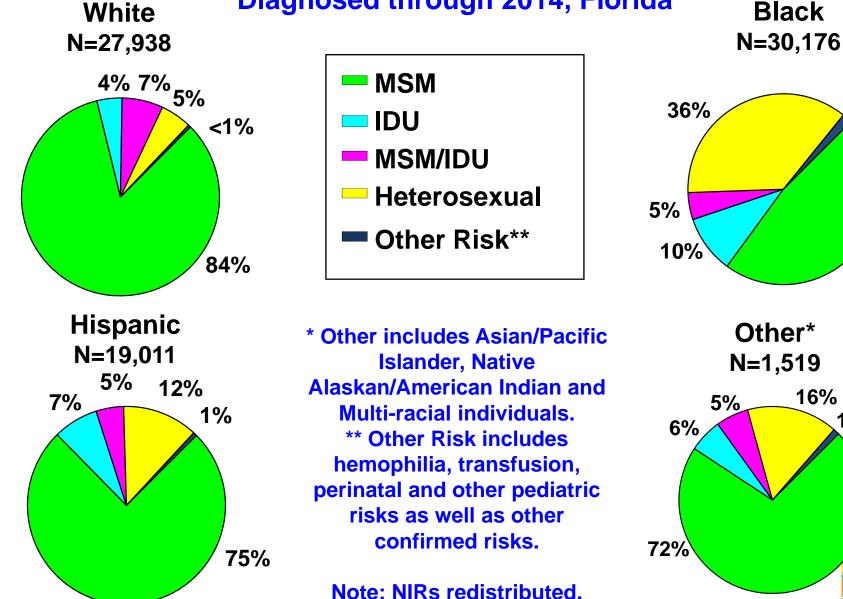
Adult Males Living with HIV Disease by Race/Ethnicity and Mode of Exposure, Diagnosed through 2014, Florida

2%

47%

16%

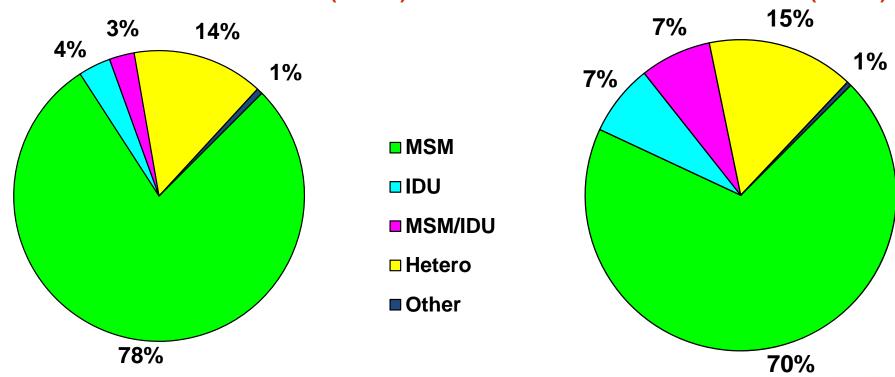
1%



Adult Males Living with HIV Disease by Mode of Exposure, Asian / Hawaiian / Pacific Islanders and American Indians / Alaska Natives, Diagnosed through 2014, Florida

Asian / Hawaiian / Pacific Islanders (N=610)

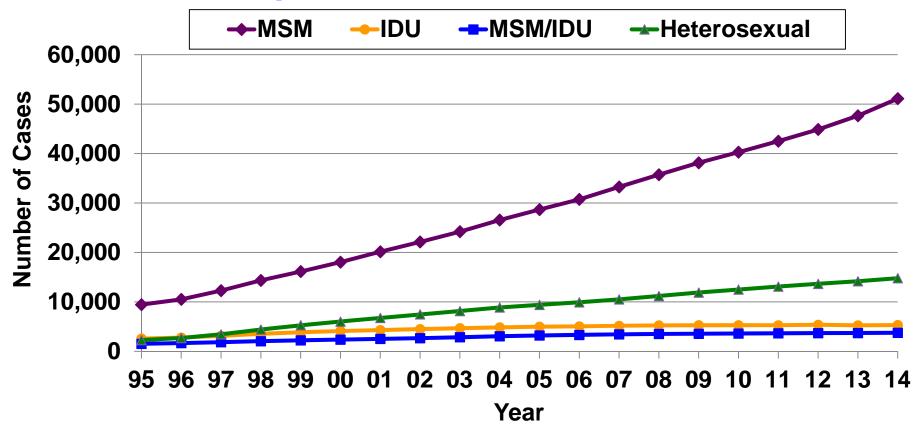
American Indian / Alaska Natives (N=216)



Note: NIRs redistributed. Male-to-male sexual contact (MSM) is the primary risk for each group (78% and 70% respectively), followed by heterosexual contact (14% and 15% respectively). IDU and MSM/IDU had a much larger proportion of cases among American Indians, compared to Asians.



Annual Prevalence of Adult Males Living with HIV Disease by Mode of Exposure, 1995-2014, Florida

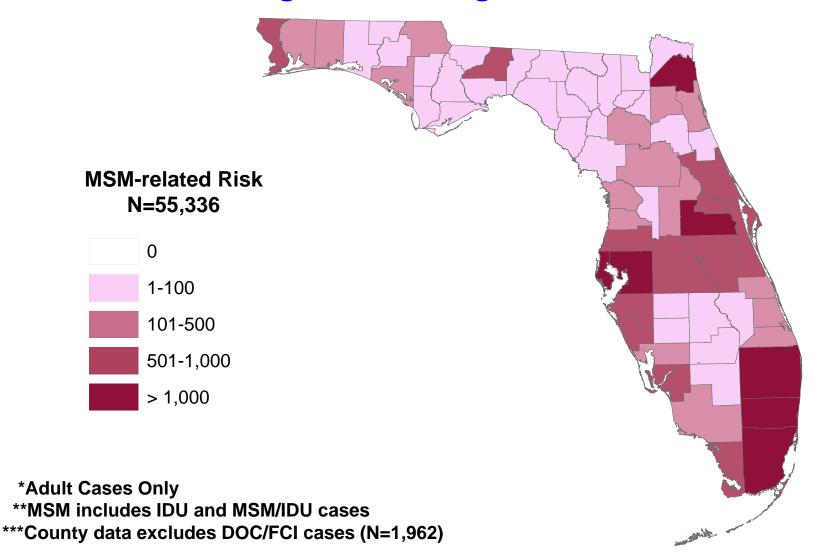


NIRs redistributed. Males living with HIV disease represent those in need of care and secondary prevention initiatives to prevent further transmission. The increase in the number of living male HIV/AIDS cases is primarily attributed to fact that survival time is increasing and outnumbers the annual number of newly reported cases. Male-to-male sexual contact (MSM) is the predominant mode of exposure and is increasing the fastest.
*Note: These data represent adults living with HIV disease diagnosed in Florida regardless of

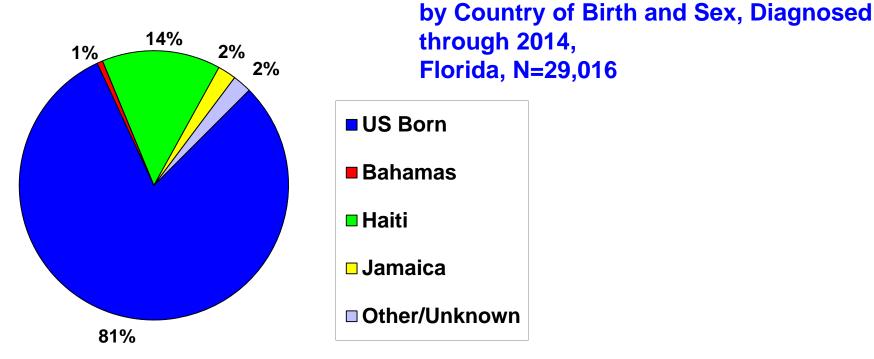
their current residence.



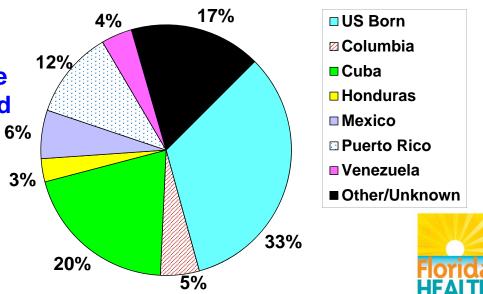
Persons Living with HIV Disease,* with a Male-to-Male Sexual Contact (MSM) Risk,** by County of Residence,*** Diagnosed through 2014, Florida





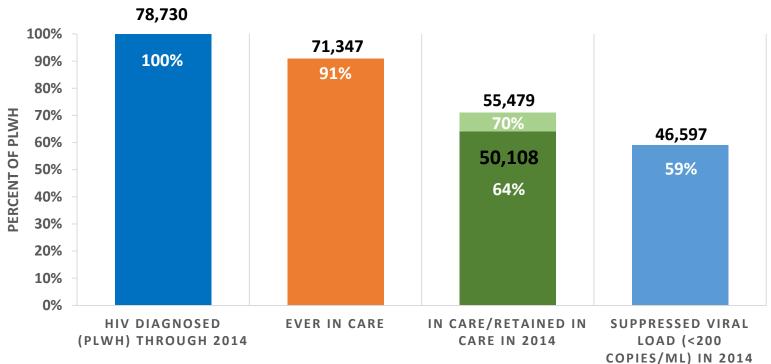


Hispanic Males Living with HIV Disease by Country of Birth and Sex, Diagnosed through 2014, 6 Florida, N=16,892



Black Males Living with HIV Disease

Number and Percentage of Persons Diagnosed and Living with HIV (PLWH) Engaged in Selected Stages of the Continuum of HIV Care Among Males, Florida, 2014



- 83% of those diagnosed with HIV in 2014 had documented HIV-related care within 3 months of diagnosis
- > 84% of PLWH in care had a suppressed viral load in 2014
- (1) HIV Diagnosed: Persons diagnosed and living with HIV (PLWH) in Florida through the end of 2014.
- (2) Ever in Care: PLWH with at least 1 documented viral load (VL) or CD4 lab, medical visit or prescription since HIV diagnosis.
- (3) In Care: PLWH with at least 1 documented VL or CD4 lab, medical visit or prescription in 2014.
 - Retained in Care: PLWH with 2 or more documented VL or CD4 labs, medical visits or prescriptions (at least 3 months apart) in 2014.
- (4) On ART: This bar was omitted on tables with demographic and risk breakdowns because the estimated value is based on small numbers.
- (5) Suppressed Viral Load: PLWH with a suppressed VL (<200 copies/mL) on last VL in 2014.

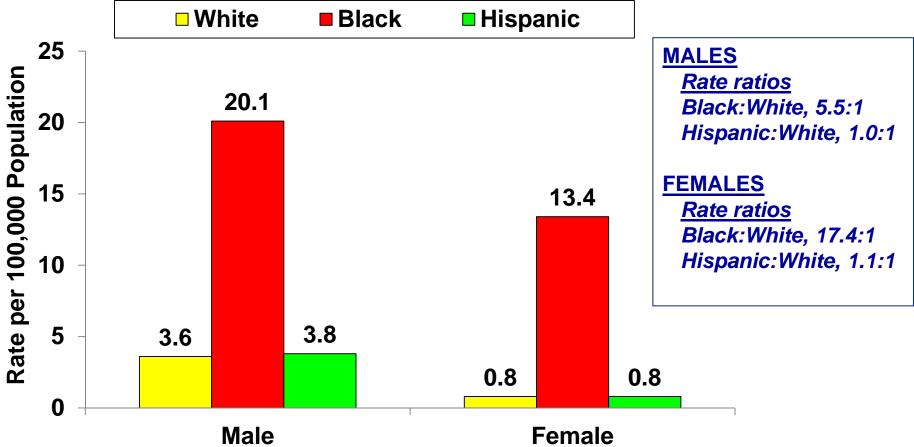


HIV Mortality in Florida

- Resident HIV deaths due to HIV disease represent persons who resided in Florida and whose underlying cause of death was HIV disease, regardless if they were reported with HIV disease in Florida or not.
 - The data source is death certificate data from the Florida Department of Health, Bureau of Vital Statistics.
- HIV case deaths are known cases of HIV disease (regardless of AIDS status) reported in Florida and are known to be dead, regardless of the cause of death. It is important to understand if any known HIV/AIDS cases died in any given year for estimates of the current burden of HIV/AIDS care and treatment needs within the state.
 - The data source is the Florida HIV/AIDS Reporting System (eHARS) from the Florida Department of Health, Bureau of Communicable Diseases.



Rate* of Resident Deaths** due to HIV Disease, by Sex and Race/Ethnicity, 2014, Florida



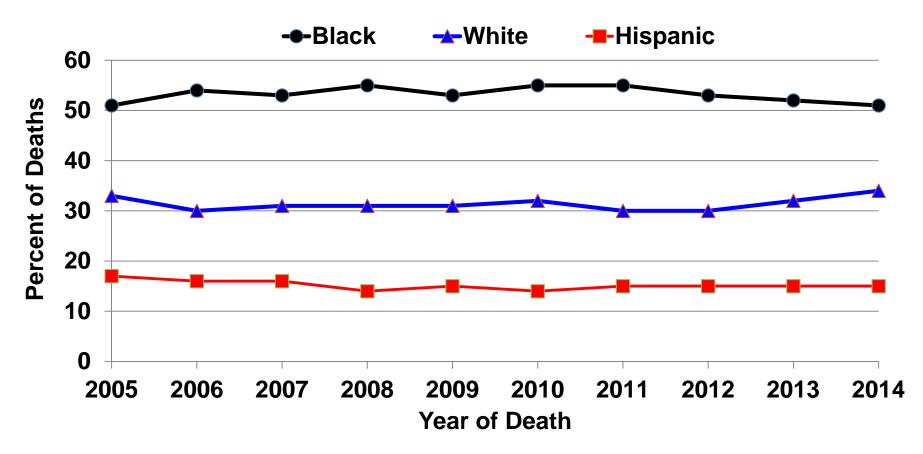
Note: In 2014, black males were nearly 6 times more likely than white males to die of HIV disease. The HIV disease death rate among black females was 17-fold greater than the rate among white females. Hispanic females rate were slightly higher than the rate among their white counterpart. Hispanic males rate were equivalent to the rate among their white counterpart.

*Source: Population data were provided by Florida CHARTS (as of 07/09/2015).



^{**}Source: Florida Department of Health, Bureau of Vital Statistics, Death Certificates (as of 05/31/2015).

Resident Deaths* Due to HIV Disease Among Males, by Race/Ethnicity and Year of Death, 2005-2014, Florida

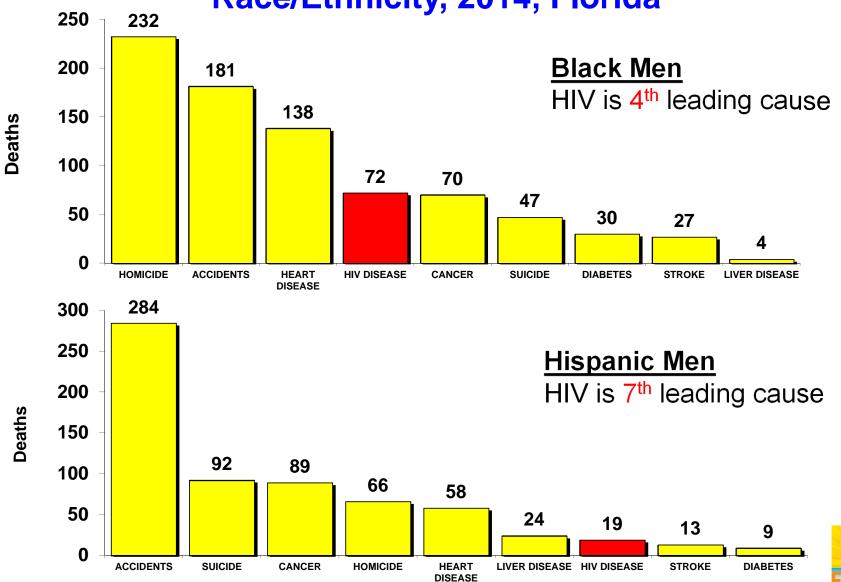


Note: Over the past ten years, the proportional distribution of male resident HIV deaths due to HIV by race/ethnicity has remained fairly level. In 2014, the proportional distribution by race/ethnicity was: 34% among whites, 51% among blacks and 15% among Hispanics.



^{*}Source: Florida Department of Health, Bureau of Vital Statistics, Death Certificates (as of 05/31/2015).

Leading Causes of Death Among Men 25-44 Years Old by Race/Ethnicity, 2014, Florida





Median Survival Time (in months) from AIDS Diagnosis to Death, by Sex and Total Deaths for this Period, 2007-2014, Florida

Period of Death: 2007 - 2014				
Males	<u>Females</u>	TOTAL		
77 mo.	62 mo.	72 mo.		
10,024 deaths	4,448 deaths	14,472 deaths		

Note: These data show that the median survival time for females is about 15 months less than the median survival time for males. This could be due to women being diagnosed with AIDS later in their course of illness thus shortening their apparent survival time. However, it could also reflect that females enter care for HIV disease later, have more drug adherence issues, or a host of other factors that could be damaging to a patient's underlying health status and outcomes.

^{*}Source: Florida Department of Health, Bureau of Communicable Diseases, HIV/AIDS Reporting System (as of 06/30/2015)



Median Survival Time (in months) from AIDS Diagnosis to Death, by Race/Ethnicity and Sex, and Total Deaths for this Period, 2007-2014, Florida

Period of Death: 2007 - 2014					
	Males	Females	TOTAL		
White	97 mo.	64 mo.	90 mo.		
	3,226 deaths	702 deaths	3,928 deaths		
Black	69 mo.	61 mo.	66 mo.		
	4,815 deaths	3,126 deaths	7,941 deaths		
Hispanic	69 mo.	62 mo.	67 mo.		
	1,679 deaths	484 deaths	2,163 deaths		
Amer. Ind.	86 mo.	45 mo.	75 mo.		
	35 deaths	13 deaths	48 deaths		
Asian	26 mo.	26 mo.	26 mo.		
	43 deaths	17 deaths	60 deaths		

Note: These data show that the differences in median survival time by gender discussed on the previous table are not uniform for all racial/ethnic groups. For instance, the gender difference among whites and American Indians are much larger than the difference between genders for blacks, Hispanics and Asians. This confirms the assertion that there are no biologic differences between these groups that account for their differences in outcomes but rather it is most likely social and cultural barriers that are leading to poorer outcomes.

*Source: Florida Department of Health, Bureau of Communicable Diseases, HIV/AIDS Reporting System (as of 06/30/2015)

For Florida HIV/AIDS Surveillance Data

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Ext. 2612

Ext. 2373

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http://www.floridahealth.gov/diseases-and-conditions/aids/surveillance/index.html

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Surveillance Reports, fact sheets and slide sets

http://www.cdc.gov/hiv/topics/surveillance/resources/reports/index.htm