HIV/AIDS and ART Registry of the Philippines (HARP)

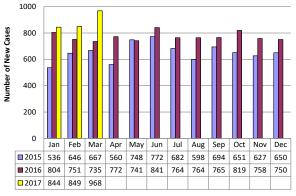
NEWLY DIAGNOSED HIV CASES IN THE PHILIPPINES

Table 1. Quick Facts

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Demographic Data	March 2017	Jan-Mar 2017	Jan 2012 - Mar 2017	Cumulative Jan1984 - Mar 2017			
Total Reported Cases	968	2,661	33,919	42,283			
Asymptomatic Cases	860	2,369	30,944	38,326			
AIDS Cases	108	292	2,975	3,957			
Male	926	2,535	32,446	39,336a			
Female	42	126	1,473	2,936a			
Age Range (Median)	1-79 (27)	1-79 (27)	1-82 (28)	1-82 (28)			
Less than 15 y/o	4	8	61	119b			
15-24 y/o	315	830	9,633	11,550b			
25-34 y/o	481	1,330	17,908	21,716b			
35-49 y/o	137	432	5,552	7,672b			
50 y/o & above	31	61	765	1,152b			
Pregnant WLHIV	4	15		164			
Newly Started on ART	784						
Total PLHIV on ART				19,375			
Reported Deaths	27	155		2,124			

^aNo data available on sex for (11) cases ^bNo data available on age for (74) cases

Figure 1. Number of New HIV Cases by Month (2015-2017)*



*Due to our recent system enhancement, the number of cases for September 2015, March 2016, May 2016, and July 2016 was changed upon undating the database.

In March 2017, there were 968 new HIV antibody sero-positive individuals reported to the HIV/ AIDS & ART Registry of the Philippines (HARP) [Table 1]. This was 32% higher compared to the same period last year (735). This was the highest number of cases ever reported since 1984. Eighty-nine percent of those were asymptomatic at the time of reporting.

Most (96%) were male. The median age was 27 years old (age range: 1 year-79 years). Half belong to the 25-34 year age group while 33% were youth aged 15-24 years.

The regions with the most number of reported cases were:

Cases per Region (March 2017) Region NCR 14% **4**A 3 11% 7 8% 11 5% 12 5% 4% 10 3% 4B 3% 2% NIR* 2% 1 2% CAR 2% 2 2%

Figure 2. Percentage of Newly Diagnosed

* Negros Island Region (Executive Order No. 183)

1

2%

2%

1%

1%

CARAGA

5

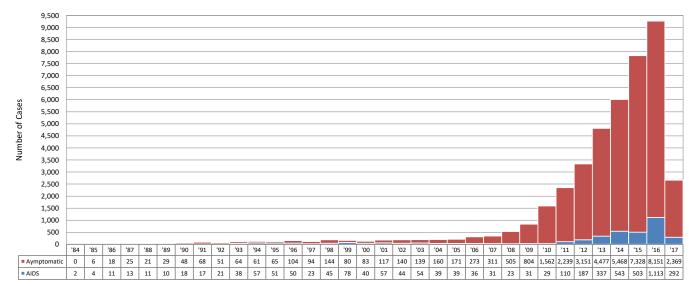
ARMM

National Capital Region (NCR) with 309 (32%) cases, Region 4A with 135 (14%) cases, Region 3 with 107 (11%) cases, Region 7 with 76 (8%) cases, and Region 11 with 52 (5%) cases. An additional 289 cases (30%) came from the rest of the country.

Reported modes of transmission were sexual contact (942), needle sharing among injecting drug users (IDU) [22] and mother-to-child transmission (4). Eighty-seven percent of infections transmitted through sexual contact were among males who have sex with males (MSM^a).

A total of 4 pregnant women were diagnosed with HIV in March 2017. Two cases were from NCR, one case was from Region 4B and one from Region 7.

Figure 3. Number of HIV Cases Reported in the Philippines by Year, January 1984 to March 2017 (N=42,283)*



amale-male sex and sex with both males & females

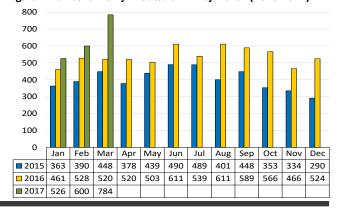
PLHIV on Anti-Retroviral Therapy (ART)

In March 2017, there were 784 patients who started on ART. The median CD4 of these patients upon enrollment was 180 cells/mm³. Three of these patients who started on ART died within the same month.

A total of 19,375* PLHIV were presently on ART as of March 2017. Most (97%) were males. The median age of patients was 31 years (range: 3 months-78 years). Ninety-five percent were on first line regimen, 4% were on second line regimen, and 1% were on other regimen.

*Note: This is the total number of adult and pediatric patients currently enrolled and accessing antiretroviral drugs (ARV) in the 40 treatment hubs and satellites. It does not include patients who were previously taking ARV but have already died, have left the country, have been lost to follow up, or opted not to take ARV anymore. The "lost to follow up" criteria was also moved to 3 months after date of next pick up from the previous 6 months.

Figure 4. Number of Newly-Initiated on ART by Month (2015-2017)



HIV/AIDS EPIDEMIC TRENDS IN THE PHILIPPINES (January 1984 - March 2017)

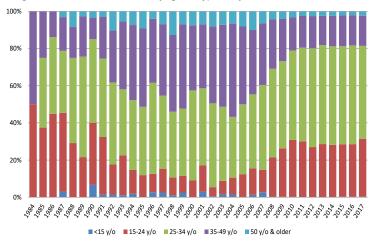
The first AIDS case in the Philippines was reported in 1984. From January 1984 to March 2017, there has been 42,283 HIV Ab sero-positive cases reported to the HARP (Table 1). Ninety-one percent (38,326) of the total reported cases were asymptomatic at the time of reporting. Ninety-three percent (39,336) were male and 2,936 (7%) were female*. The median age* was 28 years old (age range: 1 year-82 years). More than half (21,716 or 51%) were from the 25-34 year age group while 11,550 (27%) were youth aged 15-24 years (Figure 5).

Eighty percent (33,919) of all the 42,283 diagnosed cases in the Philippines were reported from January 2012 to March 2017 (Table 1). Most (91%) of these cases were still asymptomatic at the time of reporting.

In the early years of the epidemic (1984-1990), 62% (133 of 216 cases) were female.

*Note: From 1984—March 2017, 74 did not report AGE, 11 did not report SEX

Figure 5. Distribution of HIV Cases by Age Group, January 1984-March 2017

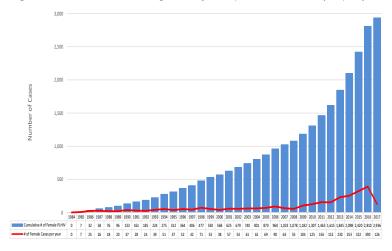


From 1991 to present, males comprised 93% (39,253 out of 42,056) of the total number of HIV/AIDS cases in the Philippines in that time period.

The age group with the biggest proportion of cases has become younger: between 2001 to 2005, it was 35-49 years; starting from 2006, the age proportion shifted to 25-34 years (Figure 5). The proportion of HIV positive cases in the 15-24 year age group increased from 25% in 2006-2010 to 29% in 2011-2017.

Meanwhile, the absolute number of cases among females has also been increasing. Cases of HIV transmission from mother to child are more likely to increase if female patients are not linked to HIV care. Ninety-three percent (2,717) of all female cases were diagnosed when they were between 15-49 years of age.

Figure 6. Number of HIV Cases among Females per Year, Jan 1984-Mar 2017 (N=2,936)



Geographical Distribution

From January 1984 to March 2017, the regions with the most number of reported cases were NCR with 17,825 (42%) cases, Region 4A with 5,970 (14%) cases, Region 7 with 3,812 (9%) cases, Region 3 with 3,628 (9%) cases, and Region 11 with 2,499 (6%) cases. Eighteen percent (7,403) of the cases came from the rest of the country (ROTC) while 1,146 (3%) had no data on region (Table 2).

Of the 2,936 females reported with HIV, 758 (26%) were from NCR, 489 (17%) were from Region 3, 316 (11%) were from Region 7, 279 (10%) were from Region 4A and 790 (27%) were from other regions while 304 (10%) had no data on region.

The regions with the most number of Overseas Filipino Workers (OFW) reported to the HARP were NCR with 1,697 cases, Region 4A with 807 cases, and Region 3 with 510 cases.

Table 2. Percentage of HIV Cases per Region

Region	March 2017 (N=968)	Jan-Mar 2017 (N=2,661)	Jan 2012— Mar 2017 (N=33,919) ^a	Cumulative Jan1984— Mar 2017 (N=42,283) ^b
NCR	309 (32%)	926 (35%)	14,116 (42%)	17,825 (42%)
4A	135 (14%)	415 (16%)	5,086 (15%)	5,970 (14%)
7	76 (8%)	217 (8%)	3,238 (10%)	3,812 (9%)
3	107 (11%)	300 (11%)	2,940 (9%)	3,628 (9%)
11	52 (5%)	154 (6%)	2,117 (6%)	2,499 (6%)
ROTC	289 (30%)	649 (24%)	6,409 (19%)	7,403 (18%)

From January 2012-March 2017, no particular region were reported for 13 cases

Table 3. Reported Modes of HIV Transmission

Mode of Transmission	March 2017 (N=968)		Jan-Mar 2017 (N=2,661)		Jan 2012—Mar 2017 (N=33,919)		Cumulative Jan 1984— Mar 2017 (N=42,283) ^a	
	М	F	М	F	М	F	М	F
Sexual Contact	901	41	2,473	123	30,962	1,373	37,288	2,693
Male-Female Sex	81	41	232	123	3,253	1,373	4,809	2,693
Male-Male Sex	560	0	1,471	0	17,040	0	19,928	0
Sex with Males & Females	260	0	770	0	10,669	0	12,551	0
Blood/Blood Products	0	0	0	0	0	0	5	15
Sharing of Infected Needles	22	0	56	1	1,449	75	1,690	99
Needle Prick Injury	0	0	0	0	0	0	2	1
Mother-to-Child	3	1	6	2	35	25	64	51
No Data Available	0	0	0	0	0	0	287	77

^aFrom January 1984—March 2017, 11 did not report sex

Modes of Transmission (MOT)

From January 1984 to March 2017, MSM was the predominant (32,479 or 83%) mode of transmission among males, followed by male-female sex (4,809 or 12%), and sharing of infected needles (1,690 or 4%) [Table 3]. More than half (17,355 or 53%) of cases among MSM belong to the 25-34 year age group while 9,696 (30%) were youth 15-24 years old. Among females, male-female sex was the most common MOT (2,693 or 92%) followed by sharing of infected needles (99 or 3%) [Table 3]. A total of 106 children (less than 10 years old), 8 adolescents (10-19 years old), and 1 adult foreigner (aged 22 years old) were reported to have acquired HIV through mother-to-child transmission.

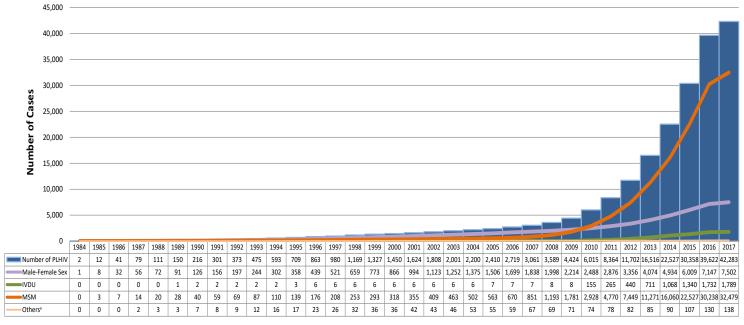
From 1984 to 2009, the predominant mode of transmission was male-female sex. Beginning 2010, the trend shifted to male-male sex as the predominant MOT

and has continually increased since then. From January 2012 to March 2017, 82% (27,709) of new infections through sexual contact were among MSM.

From 1984 to 2009, transmission through sharing of infected needles were at <1% of the total cases reported. The cases among injecting drug users (IDU) spiked in 2010 comprising 9% (147) of the total cases reported that year. However, new cases among people who inject drugs decreased to \leq 6% of the total cases in succeeding years.

In different regions, predominant modes of transmission vary distinctively. Almost half (47%) of the MSM ever reported were from NCR; almost all of the IDU were from Region 7; and 39% of females who engaged in transactional sex were from Region 3.

Figure 7. Cumulative Number of HIV Transmission by Year, January 1984-March 2017 (N=42,283)



ue to our recent system enhancement, the numbers of cases for September 2015, March 2016, May 2016, and July 2016 were changed upon updating the database thers include the following MOT: needle prick injury, blood/blood products, and mother-to-child transmission the following MOT: needle prick injury, blood de of Transmission for (375) cases

REPORT ON SPECIAL POPULATIONS

Youth (15-24 years old)

In March 2017, 315 (33%) cases were among youth aged 15-24 years. Most (96%) were male. Almost all (312) were infected through sexual contact (30 male-female sex, 200 male-male sex, 82 sex with both males & females), and three (3) through needle sharing among IDU.

From January 1984 to March 2017, 11,550 (27%) of the reported cases were 15-24 years old. Eighty-three percent (9,633) of all the youth were reported from January 2012 to March 2017. From 1984 to 2002, more than half of the cases among the youth were females (179 or 71%). However, in 2003, there was an equal number of males and females reported. Since then, the trend reversed to male predominance. Ninety-six percent (11,053) were infected through sexual contact (1,357 male-female sex, 6,196 male-male sex, 3,500 sex with both males & females); 436 were infected through needle sharing among IDU, and 1 was infected through mother-to-child transmission.

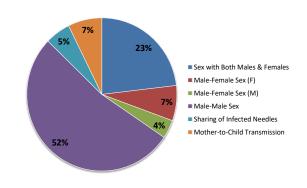
REPORT ON SPECIAL POPULATIONS (continuation)

Children (<10 years old) and Adolescents (10-19 years old)

In March 2017, 45 adolescents aged 10-19 years were reported to HARP. All were infected through sexual contact (3 male-female sex, 31 male-male sex, 11 sex with both males & females).

From January 1984 to March 2017, 1,571 (4%) of the reported cases were 19 years old and below. Seven percent (109 out of 1,571) were children (less than 10 y/o) and among them, 106 were infected through mother-to-child transmission, 1 through blood transfusion and 2 had no specified mode of transmission. Ninety-three percent (1,462 out 1,571) were adolescents. Among these, 1,332 (91%) were male. Most (93%) of the adolescents were infected through sexual contact (177 male-female sex, 824 male-male sex, 361 sex with both males & females), 85 (6%) were infected through sharing of infected needles, 8 (1%) through mother-to-child transmission, and 7 had no specified mode of transmission (Figure 8).

Figure 8. Modes of Transmission Among Children and Adolescents, January 1984—March 2017 (N=1,571)*



*Note: No mode of transmission reported for 9 cases

Overseas Filipino Workers (OFW)

Fifty-nine OFWs were reported in March 2017, comprising 6% of the total newly diagnosed cases. Eighty-six percent (51) were male. All were infected through sexual contact (18 male-female sex, 25 male-male sex, and 16 sex with both males and females) [Figure 10]. The ages of male OFWs ranged from 21-52 years (median: 31 years) and 53% of those belonged to the 25-34 year age group. Among the female OFWs, the ages were 24-50 years (median: 32 years). And among the female OFWs diagnosed in March 2017, most (50%) belonged to the 25-34 years age group.

From January 1984 to March 2017, out of the 42,283 cases, 4,826 (11%) were HIV-positive OFWs (Figure 9). Of these, 4,099 (85%) were male. More than half (58%) were MSM (1,559 male-male sex and 1,241 sex with both males & females). The ages of male OFWs ranged from 16 years-80 years (median: 32 years). Among female OFWs, ages ranged from 20 years-73 years (median: 34 years old).

Figure 9. Number of Reported OFW diagnosed with HIV, Jan 1984—Mar 2017 (N=4,826)

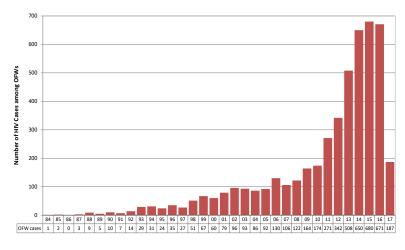
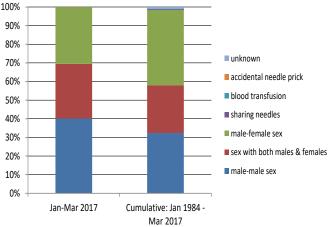


Figure 10. Modes of Transmission among OFW, Jan 1984—Mar 2017 (N=4,826)



People who Engage in Transactional Sex

People who engage in transactional sex are those who report that they pay for sex, regularly accept payment for sex, or do both.

In March 2017, 10% (95) of the reported cases engaged in transactional sex. Most (98%) were male (Table 4) whose ages ranged from 18 to 64 years (median: 30 years) while 2 were female whose ages ranged from 20-31 years (median: 26 years).

A total of 3,788 cases reported in HARP from December 2012 to March 2017 were people who engaged in transactional sex. Ninety-six percent (3,625) were male and 4% (163) were female. There were 2,036 (54%) paid for sex, 1,150 (30%) accepted payment for sex, and 602 (16%) engaged in both.

Table 4. HIV Cases Among People who Engage in Transactional Sex

Type of Transactional Sex	March 2017 (N=95)	Jan-Mar 2017 (N=266)	Cumulative Dec 2012 - Mar 2017 (N=3,788)
Accepted payment for sex only:	35 (37%)	88 (33%)	1,150 (30%)
Male	33	80	1,058
Female	2	8	92
Age Range (Median) in Years	20-42 (27)	18-50 (27)	15-67 (26)
Paid for sex only:	46 (48%)	132 (50%)	2,036 (54%)
Male	46	132	2,023
Female	0	0	13
Age Range (Median) in Years	21-64 (34)	20-64 (32)	16-79 (31)
Engaged in both:	14 (15%)	46 (17%)	602 (16%)
Male	14	41	544
Female	0	5	58
Age Range (Median) in Years	18-41 (28)	18-51 (30)	16-59 (28)

Note: Inclusion of transactional sex in the HARP database was initiated in December 2012

REPORT ON SPECIAL POPULATIONS (continuation)

Pregnant Women Living with HIV

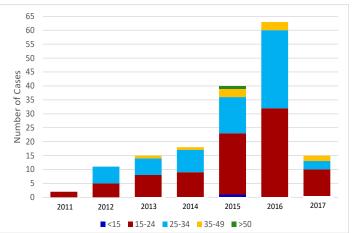
Beginning 2011, pregnant women living with HIV have been included in the HIV/AIDS Registry. The number of reported cases continues to increase yearly (Figure 11).

In March 2017, 4 cases of pregnant women with HIV were reported. Two cases were from NCR, one case was from Region 4B and one was from Region 7. The median age was 28 years old (age range: 16 year-34 years).

Since 2011, a total of 164 pregnant cases were reported. More than half (88) were from the age group 15-24 years old and 39% (64) were from 25-34 years old age group. The regions with highest number of cases are NCR (50%), Region 7 (26%), and Region 4A (7%).

Note: Inclusion of pregnant women living with HIV in the HARP database was initiated in 2011

Figure 11. Number of Diagnosed Pregnant Cases Jan 2011—Mar 2017 (N=164)



DEATHS AMONG PEOPLE WITH HIV

In March 2017, there were 27 reported deaths. All were male (Table 5). Eighteen (67%) of the reported deaths belong to 25-34 year age group, 8 (30%) were from 35-49 year old age group and 1 case from 15-24 year age group. All were infected through sexual contact (3 male-female sex, 16 male-male sex, 8 sex with both males & females) [Figure 12].

A total of 2,124 deaths were reported from January 1984 to March 2017. Eighty-eight percent (1,880) were male. Of the reported deaths, almost half (1,029 or 49%) belong to 25-34 year age group, 605 (29%) were in 35-49 year age group, while 312 (15%) were youth aged 15-24, 158 (7%) were aged 50 years and above, 17 (<1%) were aged <15 years old^a. Sexual contact (96%) was the common mode of HIV transmission (505 male-female sex, 977 male-male sex, 553 both males and females). There were 43 reported deaths among those who were infected through sharing of needles, 16 deaths among those who were infected through mother-to-child transmission, and 9 among those who were infected through blood transfusion (figure 12)^b.

^aNote: No data available on age for (3) cases

Table 5. Demographic data of reported deaths among PHIV

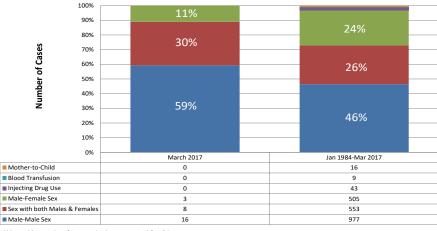
Demographic Data	March 2017	Jan-Mar 2017	Cumulative Jan 1984–Mar 2017
Total Reported Deaths	27*	155	2,124**
Male	27	148	1,880
Female	0	7	244
Less than 15 y/o	0	1	17
15-24 y/o	1	26	312
25-34 y/o	18	85	1,029
35-49 y/o	8	41	605
50 y/o & above	0	2	158

*Note: These are reported deaths for March 2017. Date of death may not necessarily fall in the reporting month.

in the reporting month.

**No data available on age for (3) cases

Figure 12. Modes of transmission of reported deaths among PHIV*



*Note: No mode of transmission reported for 21 cases



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HIV/AIDS & ART Registry of the Philippines (HARP)

The Philippine HIV/AIDS & ART Registry of the Philippines (HARP) is the official record of the total number of laboratory-confirmed HIV positive individuals, AIDS cases and deaths, and HIV positive blood units in the Philippines. All individuals in the registry are confirmed by the STD/AIDS Cooperative Central Laboratory (SACCL) at San Lazaro Hospital. While all blood units are confirmed by the Research Institute for Tropical Medicine (RITM). Both are National Reference Laboratories (NRL) of the Department of Health (DOH).

Mandatory HIV testing is unlawful in the Philippines (RA 8504). The process of reporting to the HARP is as follows: All blood samples from accredited HIV testing facilities that are screened HIV reactive are sent to SACCL (individuals) or RITM (blood units) for confirmation. Confirmed HIV positive individuals and blood units are reported to the DOH-Epidemiology Bureau (EB), and are recorded in the HARP.

The HARP is a passive surveillance system. Except for HIV confirmation by the NRL, all other data submitted to the HARP are secondary and cannot be verified. An example would be an individual's reported place of residence. The HARP is unable to determine if this reported address is where the person got infected, or where the person lived after being infected, or where the person is presently living, or whether the address is valid. This limitation has major implications to data interpretation. Thus, readers are cautioned to carefully weigh the data and consider other sources of information prior to arriving at conclusions.

^bNote: No data available on mode of transmission for (21) cases

LIST OF TREATMENT HUBS AND SATELLITES*

Regions	Treatment Hub/Satellite Treatment Hub	Address	Contact Information
	Ilocos Training and Regional Medical Center	Parian, San Fernando City, La Union	(072) 607-6418/ (072) 607-9912
1	Mariano Marcos Memorial Hospital and Medical Center	Barangay 6 San Julian, Batac, Ilocos Norte	(077) 600 8000
	Region 1 Medical Center	Dagupan City Hall, AB Fernandez E Ave, Downtown District, Dagupan	(+63)9159063375
	Cagayan Valley Medical Center	Dalan na Pagayaya, Carig Sur, Tuguegarao, Cagayan	(078) 304-1410 / (078) 304-1810
2	Veterans Regional Hospital	Magsaysay, Bayombong, Nueva Vizcaya	(078) 805-3561 loc. 1225
	Bataan General Hospital (Bataan HAVEN)	Manahan St., Tenejero, Balanga City, Bataan	(047) 237-1274 (047) 237-1275 loc. 102/103
	Dr. Paulino J. Garcia Memorial Research and Medical Center (Sanctuario De Paulino)	Mabini St., Cabanatuan City, Nueva Ecija	(044)463-8888 loc. 181 / 09176569589 / 09175716869
	Dr. Paulino J. Garcia Memorial Research and Medical Center - Talavera Extension Hospital (Talevera's Hope)	Maestrang Kikay District, Talavera, Nueva Ecija	(044) 806-2276 / 09558451539 / 09984997831
	Jose B. Lingad Memorial Regional Hospital (Bahay LInGAD)	Brgy. San Dolores, San Fernando, Pampanga	(045) 435-6801 / (045) 961-3544 / 09336215028
3	James L. Gordon Memorial Hospital (L.E.A.D. Shelter)	#1 Perimeter Rd., New Asinan, Olongapo City	(047) 602-3436
Ü	Premiere Medical Center (TAHANAN sa Premiere)	Maharlika Highway, Daan Sarile, Cabanatuan City, Nueva Ecija	(044) 463-7845 loc. 2073 / 09322128175 / 09052944300
	Tarlac Provincial Hospital (TPH Cares)	Tarlac Provincial Hospital Compound, San Vicente, Tarlac City	(047) 602-3436 / 09988627015 / 09098312524
	Ospital ng Lungsod ng San Jose del Monte	Sapang Palay, San Jose Del Monte, Bulacan	09324735561/ 09157260311
	Guiguinto RHU II Reproductive Health and Wellness Center (Gintong Kanlungan)	2nd flr, RHU II, Green Estate Subd., Guiguinto, Bulacan	(044) 760-3450 / 09325478488 / 09260726900
	Angeles City HIV Satellite Treatment Hub (Bale Angeleño)	C. Surla St., Balibago, Angeles City	09152990647 (HACT Nurse)
	Batangas Medical Center	Kumintang Ibaba, Batangas City	(043) 723-0165
	Laguna Medical Center	J. De Leon St, Santa Cruz, Laguna	(049) 543-3351 / 09178465901
4A	Dasmariñas City Health Office I (SHC)	Zone 2, Manggubat St., City Health Office I, Dasmariñas, Cavite	(046) 416-0279 / 09177902168
	Antipolo Social Hygiene Clinic	M. Santos St., Brgy. San Roque, Antipolo City	(02) 696-4097
4B	Ospital ng Palawan	220 Malvas St. Puerto Princesa City	(048) 434-6864 / (048) 434-2148
5	Bicol Regional Training and Teaching Hospital	Rizal St., Legazpi City	(052) 483-0017 loc. 4227
	Western Visayas Medical Center	Q. Abeto St., Mandurriao, Iloilo City	(033) 321-1631
6	Dr. Rafael Tumbokon Memorial Hospital—Kalibo, Aklan	Mabini St, Kalibo, Aklan	(036) 268-6299
	Vicente Sotto Memorial Medical Center	B. Rodriguez St., Cebu City	(032) 254-4155 / (032) 253-9891 to 96 loc. 102
7	Cebu Social Hygiene Clinic	General Maxilom Ave., Ext., Carreta, Cebu City	(032) 233-0987 / 09255591663
	Gov. Celestino Gallares Memorial Hospital	M. Parras St., Tagbilaran City	(038) 411-4868
8	Eastern Visayas Regional Medical Center	Magsaysay Boulevard, Tacloban City	(053) 321-3121 / (053) 321-3363
9	Zamboanga City Medical Center	Dr. Evangelista St., Sta. Catalina, Zamboanga City	(062) 991-2934
10	Northern Mindanao Medical Center	Provincial Capitol Compound Cagayan de Oro City	(082) 856-4147
	Southern Philippines Medical Center	J. P. Laurel St., Bajada, Davao City	(082) 227-2731 loc. 5140 / (082) 321-7061
11	Davao Regional Medical Center	Apokon, Tagum City, Davao del Norte	(084) 400-3347
	Davao Reproductive Health and Wellness Center	Emilio Jacinto St, Poblacion District, Davao City, Davao del Sur	(082) 222-4187
	South Cotabato Provincial Hospital	Aguinaldo St., Koronadal City, South Cotabato	(083) 228-4571
12	General Santos City Social Hygiene Clinic	City Health Office, Fernandez St., Lagao, General Santos City	(083) 302-8115
CAR	Baguio General Hospital and Medical Center	Gov. Pack Rd., Baguio City	(074) 442-4216 loc. 381 / 09155816480
	CARAGA Regional Hospital	Rizal St. National Road, Surigao City	(086) 826-0568 / 09173068186
CARAGA	Butuan Medical Center	Km 5 Baan, Butuan City	(+63)9173208799
	San Lazaro Hospital	Quiricada St., Sta. Cruz, Manila	(02) 310-3128
	Philippine General Hospital	Taft Ave., Manila	(02) 554-8400 loc. 3249
	Sta. Ana Hospital	New Panaderos Street, Sta. Ana, Manila	(02) 516-6790
NCR	Manila Social Hygiene Clinic	208 Quiricada St., Sta. Cruz, Manila	(02) 711-6942
	Research Institute for Tropical Medicine	Filinvest Corporate City, Alabang, Muntinlupa City	(02) 807-2628 loc. 332
	The Medical City / I-REACT Clinic	Ortigas Ave., Pasig City	(02) 988-1000 loc. 6765
	Pasig City Treatment Hub (PATH)	CHAMP Bldg, Caruncho Ave, Pasig City	(02) 798-2572
	Makati Medical Center	#2 Amorsolo St., Legaspi Village, Makati City	(02) 888-8999 loc. 2134 (CTTM) / 09178014314
	St. Luke's Medical Center—Global City	Rizal Drive cor. 32nd & 5th Ave.,Taguig City	(02) 789-7700
	Klinika Bernardo	Ermin Garcia St., Brgy. Pinagkaisahan, Quezon City	9324033412
	Marikina City Satellite Treatment Hub	Shoe Ave., Sto. Niño, Marikina City	(02) 948-8925 / 09175631722
	Corazon Locsin Montelibano Memorial Regional Hospital	2nd flr. OPD bldg. CLMMRH, Cor. Burgos, Lacson St. Bacolod City	,
NIR	Negros Oriental Provincial Hospital	Real St., Dumaguete City, Negros Oriental	(034)707-2280 (6335) 225-0950/225-0949

OTHER FACILITIES PROVIDING HIV TREATMENT

Regions	Facility	Address	Contact Information
	Bacoor Social Hygiene Clinic	Floraville Subdivision, Panapaan 1, Bacoor City	(+63)9086144183
4A	Ospital ng Biñan	Canlalay Bridge, Biñan, Laguna	(049) 511-4119
	Occidental Mindoro Provincial Hospital	Paluan Road, Maburao, Occidental Mindoro	(043) 711-1116
	Bernardo Social Hygiene Clinic	Ermin Garcia St., Brgy. Pinagkaisahan, Quezon City	(+63)9193635919
	Project 7 Social Hygiene Clinic / Klinika Project 7	39 Bansalangin St., Veterans Village, Project 7, Quezon City	(+63)9178561158
	Batasan Hills Super Health Center (Social Hygiene Clinic)	#1 IBP Road, Batasan Hills, Quezon City	09322959752 / 09232790558
	Klinika Novaliches	Annex Bldg. flr., A.J. Maximo Health Center Compound, Quirino Highway, Novaliches, Quezon City	(+63)9985734877
	Las Piñas Social Hygiene Clinic	Barrio Hall, Alabang-Zapote Road, Almansa, Las Piñas City	(02) 800-6406
NCR	Mandaluyong Social Hygiene Clinic	20 M. Lerma St. cor. Vicencio St, Mandaluyong City	(02) 546-7799
	Muntinlupa Reproductive Health and Wellness Center	2nd Floor, Putatan Health Center, National Rd, Putatan, Muntinlupa City	(02) 834-5997
	Pasay Social Hygiene Clinic	2nd Floor, Lagrosa Health Center, F.B. Harrrison St. Pasay City	(02) 806-3197
	RITM Satellite Clinic - Mandaluyong (Love Yourself Anglo)	Room 5, 3/F, 715-A Anglo Bldg., Shaw Blvd., Mandaluyong City	(+63)9153665683
	Taguig Social Hygiene Clinic	3/F Goldilocks Bldg., Gen. Luna St., Taguig City	(02) 642-1262 / 09267542917
	Valenzuela Social Hygiene Clinic	Valenzuela City Hall, Poblacion II, Malinta, Valenzuela City	(02) 352-6000 loc. 6046

*as per Department Memorandum No. 2016-0188: Updated List of DOH-Designated Treatment Hubs and Satellite Treatment Hubs