

NEWLY DIAGNOSED HIV CASES IN THE PHILIPPINES

Table 1. Quick Facts

Demographic Data	Feb 2015	Jan-Feb 2015	Jan 2010 - Feb 2015	Cumulative Jan 1984 - Feb 2015
Total Reported Cases	646	1,182	19,285	23,709
Asymptomatic Cases	603	1,078	17,975	21,556
AIDS Cases	43	104	1,310	2,153
Male	619	1,127	18,314	21,545 ^a
Female	27	55	971	2,153 ^a
Age Range (Median)	1-73 (28)	1-73 (28)	1-82 (28)	1-82 (28)
Less than 15 y/o	2	2	20	72 ^b
15-24 y/o	181	312	5,466	6,191 ^b
25-34 y/o	333	618	10,095	11,953 ^b
35-49 y/o	115	215	3,214	4,652 ^b
50 y/o & above	15	35	490	767 ^b
Newly Started on ART	374			
Total PLHIV on ART				9,113
Reported Deaths	17	31	713	1,149

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

In February 2015, there were 646 new HIV Ab sero-positive individuals (Table 1). This was 33% higher compared to the same period last year (486) [Figure 1], and was the highest number of cases reported since 1984. Most (93%) of the cases were still asymptomatic at the time of reporting (Figure 3).

Most of the cases (96%) were male. The median age was 28 years old (age range: 1 year-73 years). More than half (51%) belong to the 25-34 year age group while 28% were youth aged 15-24 years old.

Figure 2. Percentage of Newly Diagnosed Cases per Region (February 2015)*

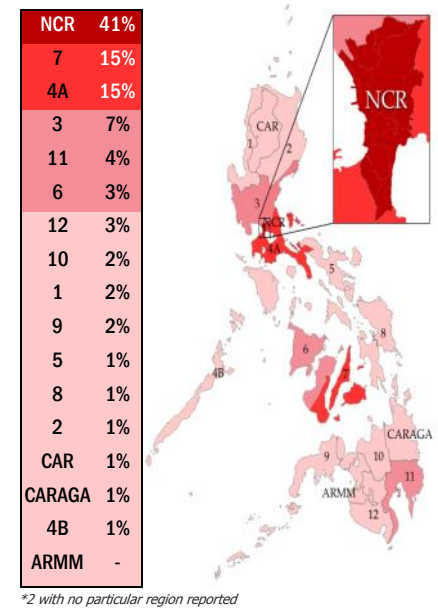
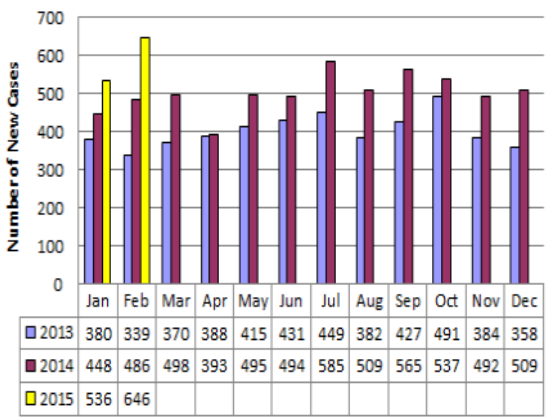


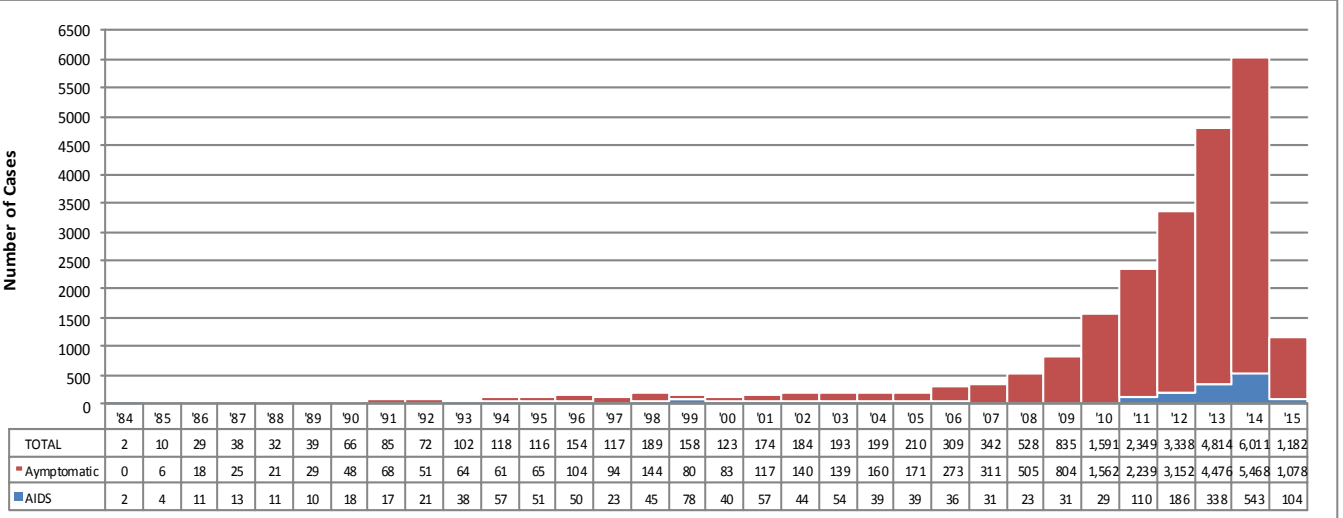
Figure 1. Number of New HIV Cases by Month (2013-2015)



The regions with the highest number of reported cases for February 2015 were NCR with 262 (41%) cases, Region 7 with 96 (15%) cases, Region 4A with 95 (15%) cases & Region 3 with 48 (7%) cases. One hundred fifteen (18%) cases came from the rest of the country (Figure 2).

Reported modes of transmission (MOT) were sexual contact (586), needle sharing among injecting drug users (IDU) [58], and mother to child transmission (2). Eighty-four percent of the sexually transmitted cases were among males who have sex with males (MSM).

Figure 3. Number of HIV Cases Reported in the Philippines by Year, January 1984 to February 2015 (N=23,709)



PLHIV on Anti-Retroviral Therapy (ART)

As of February 2015, there were 9,113 People Living with HIV (PLHIV) presently on ART. This is the total number of adult and pediatric patients currently enrolled and accessing antiretroviral drugs (ARV) in the 19 treatment hubs. It does not include patients who were previously taking ARV but have already died, have left the country, or opted not to take ARV anymore.

List of Treatment Hubs in the Philippines

- | | |
|--|---|
| 1. Ilocos Training and Regional Medical Center | 11. Bicol Regional Training and Teaching Hospital |
| 2. Cagayan Valley Medical Center | 12. Corazon Locsin Montelibano Memorial Regional Hospital |
| 3. Baguio General Hospital and Medical Center | 13. Western Visayas Medical Center |
| 4. Jose B. Lingad Medical Center | 14. Gov. Celestino Gallares Memorial Hospital |
| 5. James L. Gordon Memorial Hospital | 15. Vicente Sotto Memorial Medical Center |
| 6. Makati Medical Center | 16. Zamboanga City Medical Center |
| 7. Philippine General Hospital | 17. Southern Philippines Medical Center |
| 8. Research Institute for Tropical Medicine | 18. Northern Mindanao Medical Center |
| 9. San Lazaro Hospital | 19. Eastern Visayas Regional Medical Center |
| 10. The Medical City | |

HIV/AIDS EPIDEMIC TRENDS IN THE PHILIPPINES (Jan 1984—Feb 2015)

The first case of HIV infection in the Philippines was reported in 1984. From January 1984 to February 2015, there has been 23,709 HIV Ab sero-positive cases reported to the HARP (Table 1). Ninety-one percent (21,556) of the total reported cases were asymptomatic at the time of reporting. Most (21,545 or 91%) were male*. The median age* was 28 years old (age range: 1 year-82 years). Half (11,953 or 51%) were from the 25-34 year age group while 6,191 (26%) were youth aged 15-24 years old (Figure 4).

In the early years of the epidemic (1984-1990), 62% (133 of 216 cases) were female. Beginning in 1991, more males were reported to be infected with HIV in the Philippines (Figure 5). From 2010 to 2015, males comprised 95% (18,314) of the reported 19,285 cases.

Eighty-one percent (19,285) of all the 23,709 diagnosed cases in the Philippines were reported in the past five years, from January 2010 to February 2015 (Table 1). Most (93%) of these cases were still asymptomatic at the time of reporting.

The age group with the biggest proportion of cases has become younger: from 2000 to 2004, it was 30-39 years; from 2005 to 2009, it was 25-34 years; and from 2010 to 2015, it was 20-24 years (Figure 4). Notably, the proportion of PLHIV in the 15-24 year age group increased from 20% in 2005 to 28% in 2009.

*Note: From February 1984—February 2015, 74 did not report AGE, 11 did not report SEX while 10 did not report both AGE and SEX

Figure 4. Distribution of PLHIV by Age Group, Jan 1984-Feb 2015

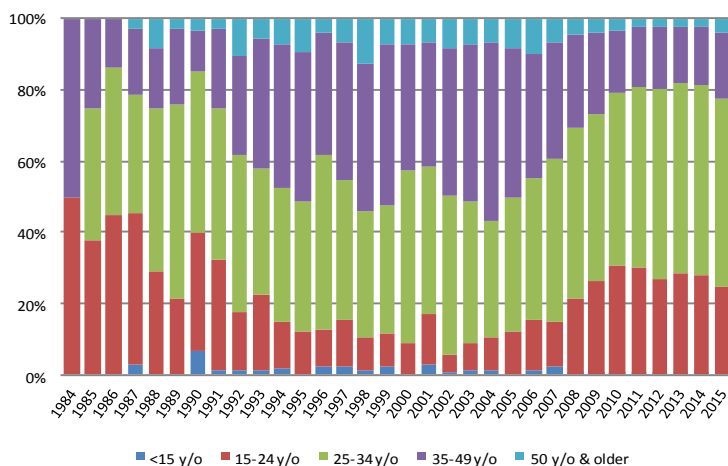
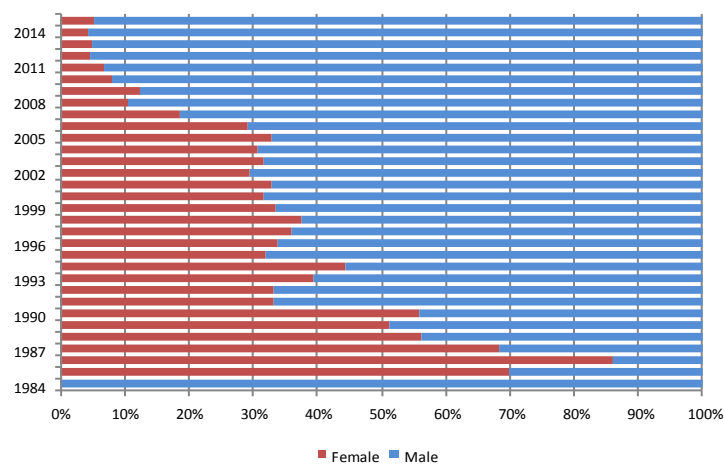


Figure 5. Distribution of PLHIV by Sex, Jan 1984-Feb 2015



Geographical Distribution

From January 1984 to February 2015, the regions with the most reported cases were NCR with 10,579 (45%) cases, Region 4A with 3,036 (13%) cases, Region 7 with 2,152 (9%) cases, Region 3 with 1,920 (8%) cases, and Region 11 with 1,391 (6%) cases. Fifteen percent (3,485) of the cases came from the rest of the country while 1,146 (5%) had no data on region (Table 2).

Table 2. Percentage of HIV Cases per Region

Region	Feb 2015 (N=646) ^a	Jan-Feb 2015 (N=1182) ^a	Jan 2010 - Feb 2015 (N=19,285) ^b	Cumulative Jan 1984—Feb 2015 (N=23,709) ^c
NCR	262 (41%)	487 (41%)	8,903 (46%)	10,579 (45%)
4A	95 (15%)	174 (15%)	2,580 (13%)	3,036 (13%)
7	96 (15%)	124 (10%)	1,972 (10%)	2,152 (9%)
3	48 (7%)	101 (9%)	1,458 (8%)	1,920 (8%)
11	28 (4%)	62 (5%)	1,274 (7%)	1,391 (6%)
ROTC*	115 (18%)	232 (20%)	2,931 (15%)	3,485 (15%)

Of the 2,153 females reported with HIV, 508 (24%) were from NCR, 389 (18%) were from Region 3, 228 (11%) were from Region 7, 182 (8%) were from Region 4A and 846 (39%) were from other regions.

The regions with the most number of Overseas Filipino Workers reported to the HARP were NCR with 1,238 cases, Region 4A with 553 cases, Region 3 with 342 cases, and Region 6 with 178 cases.

^a2 with no particular region reported
^b167 with no particular region reported
^c1,146 with no particular region reported

Table 3. Reported Modes of HIV Transmission

Mode of Transmission	February 2015 N=646	Jan-Feb 2015 (N=1182)	Jan 2010- Feb 2015 N=19,285	Cumulative Jan 1984- Feb 2015 (N=23,709)
Sexual Contact	586	1,120	18,119	22,114
<i>Heterosexual</i>	94 (16%)	168 (15%)	2,888 (16%)	5,102 (23%)
<i>Homosexual</i>	310 (53%)	589 (53%)	9,223 (51%)	10,395 (47%)
<i>Bisexual</i>	182 (31%)	363 (32%)	6,008 (33%)	6,617 (30%)
Blood/Blood Products	0	0	1	20
Sharing of Needles	58	60	1,120	1,128
Needle Prick Injury	0	0	0	3
Mother-to-Child	2	2	20	69
No Data Available	0	0	25	375

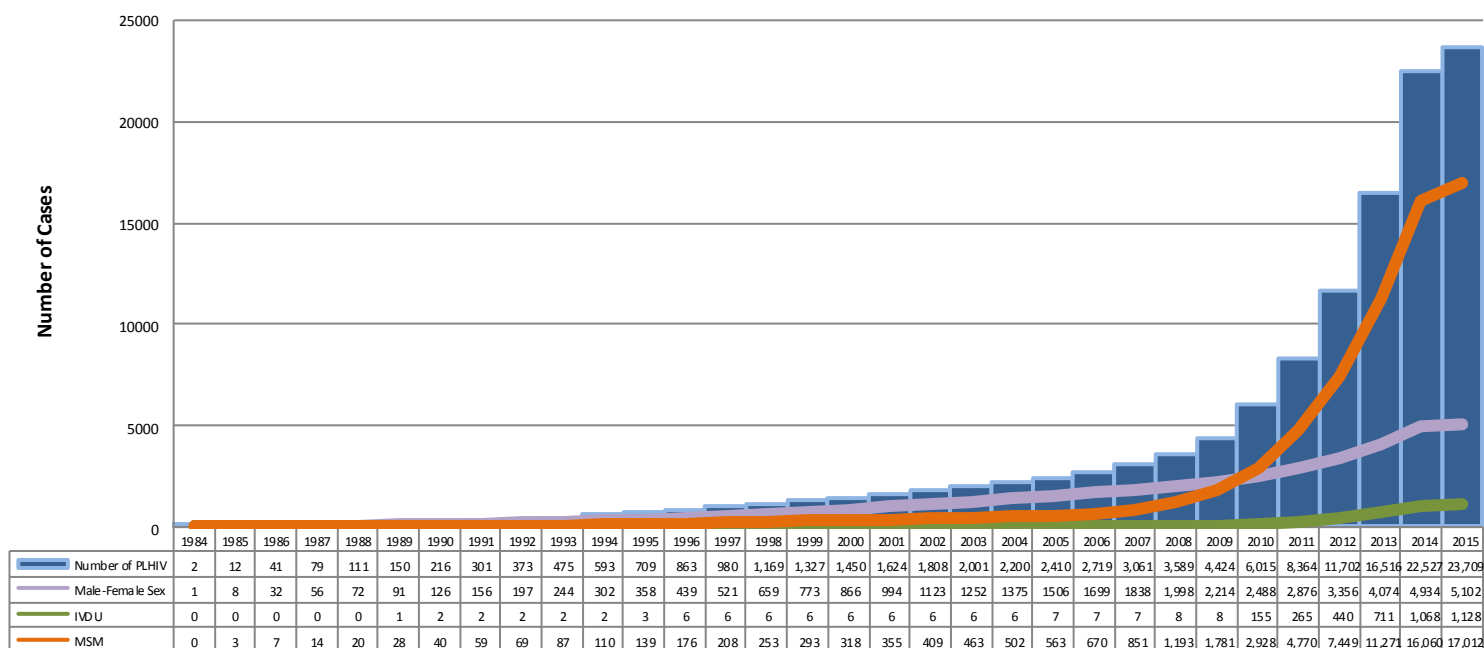
Modes of Transmission (MOT)

From January 1984 to February 2015, MSM (homosexual and bisexual) was the predominant (17,012 or 79%) type of sexual transmission among males, followed by male-female sex (3,150 or 15%), and sharing of needles (1,052 or 5%) [Figure 6]. More than half (54% of 9,105) of cases among MSM belong to the 25-34 year age group while 4,967 (29%) were youth 15-24 years old. Among females, male-female sex was the most common MOT (1,952 or 91%) followed by sharing of needles (76 or 4%). A total of 67 children (<10 years old) and 2 adolescents were reported to have acquired HIV through mother-to-child transmission, while 20 people were infected through blood transfusion (Table 3).

From January 2010 to February 2015, 84% (15,231) of sexually transmitted infections were among MSM. From 2005 to 2009, MSM comprised 60% (1,279) of sexual transmissions. Fifty-four percent (8,260) of the MSM cases from 2010 to 2015 were among the 25-34 years age group while 4,584 (30%) were among youth aged 15-24 years old. Meanwhile, cases among IDU also increased from <1% in 2005 to 2009 to 6% within the past five years.

Different modes of transmission are predominant in different regions. More than half (52%) of the MSM ever reported were from NCR; while 99% of the IDUs were from Region 7; and 49% of females who engaged in transactional sex were from Region 3.

Figure 6. Cumulative Number of HIV Transmission by Year, January 1984-February 2015 (N=23,709)



REPORT ON SPECIAL POPULATIONS

Youth (15-24 years old)

In February 2015, 181 (28%) cases were among youth aged 15-24 years. Most (97%) were male. Ninety-three percent (169) were infected through sexual contact (17 heterosexual, 105 homosexual, 47 bisexual) and 12 (7%) through needle sharing among IDUs.

From January 1984–February 2015, 6,191 (26%) of the reported cases were 15-24 years old. Eighty-eight percent (5,466) of all the youth were reported in the last five years (2010-2015). A steep increase in cases among youth was seen in 2008, wherein the total number of cases (111) is 171% higher than that in 2007 (41). 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-three percent (5,785) were infected through sexual contact (818 heterosexual, 3,093 homosexual, 1,874 bisexual); and 346 were infected through sharing of infected needles.

Note: From February 1984–February 2015, 60 did not report mode of transmission

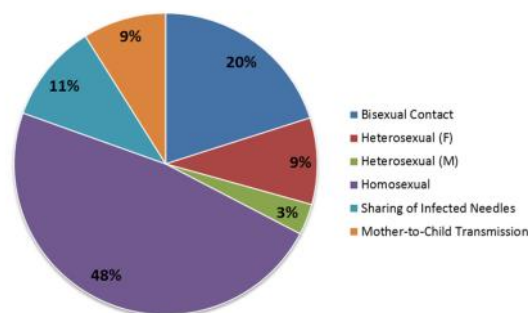
REPORT ON SPECIAL POPULATIONS (continuation)

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

In February 2015, there were 2 children, infected through mother to child transmission, reported to HARP. Twenty-one (3%) of the reported cases were among adolescents aged 17-19 years old; all were male. Ninety-five percent were infected through sexual contact (3 heterosexual, 13 homosexual, 4 bisexual) and 1 through sharing of infected needles.

From January 1984 to February 2015, 786 (3%) of the reported cases were 19 years old and below. Of these, 70 (<1%) were children. Eighty-three percent of these children and adolescents were reported in the past five years (2010 to 2015). Sixty-seven children were infected through mother-to-child transmission, 1 through blood transfusion and 2 did not specify MOT. Among the adolescents, 637 (89%) were male and majority (87%) were infected through sexual contact (98 heterosexual, 373 homosexual, 155 bisexual); 81 (11%) were through sharing of needles and 2 through mother-to-child transmission (Figure 7).

Figure 7. Modes of Transmission Among Children and Adolescents, Jan 1984–Feb 2015 (N=786)



Note: 9 with no MOT reported

Overseas Filipino Workers (OFW)

Sixty-seven OFWs were reported to the HARP in February 2015, comprising 10% of the total newly diagnosed cases for the month (Figure 8). Most (97%) were male. Almost all (99%) were infected through sexual contact (14 heterosexual, 30 homosexual, 22 bisexual) and 1 through sharing of infected needles (Figure 9). The ages of male OFWs ranged from 22 years-48 years (median: 30 years) and more than half (65%) belonged to the 25-34 year age group. Among female OFWs, ages ranged from 21 years-37 years (median: 29 years).

From January 1984 to February 2015, out of the 23,709 cases, 3,400 (14%) were HIV positive OFWs. Of these, 2,795 (82%) were male. More than half (51%) were MSM (981 homosexual contact and 744 bisexual contact). The ages of male OFWs ranged from 18 years-80 years (median: 33 years). Among female OFWs, ages ranged from 20 years-73 years (median: 34 years old).

Figure 8. Number of Reported OFW diagnosed with HIV, Jan 1984–Feb 2015 (N=3,400)

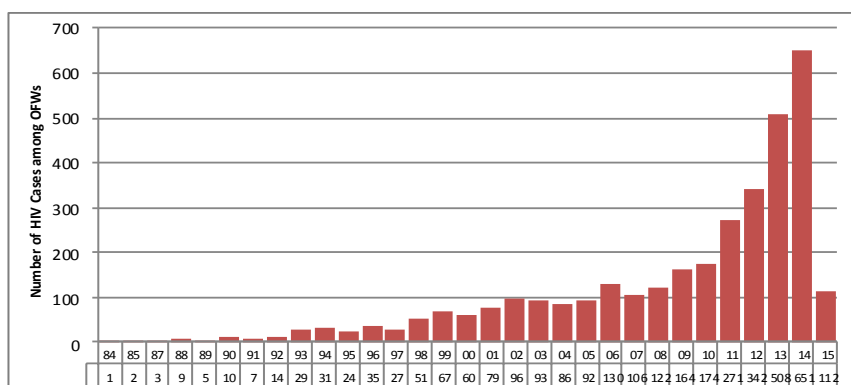
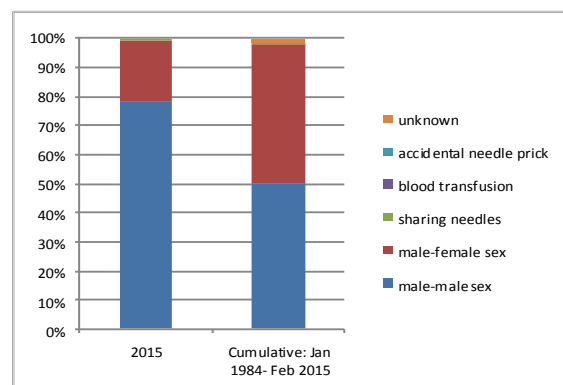


Figure 9. Modes of Transmission among OFW, Jan 1984–Feb 2015



People who Engage in Transactional Sex

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

In February 2015, 15% (94) of the reported cases engaged in transactional sex. Most (94% or 88) were male (Table 4) whose ages ranged from 17 years-73 years (median: 29 years). Fifty-six percent of males who engaged in transactional sex were the ones who paid for sex. For females, ages ranged from 21 years-36 years (median: 27 years). Sixty-seven percent of females who engaged in transactional sex reported having accepted payment for sex.

A total of 1,795 cases reported in HARP from October 2012 to February 2015 were people who engaged in transactional sex. Ninety-five percent were male. Of the 1,795 cases, 989 (55%) paid for sex, 531 (30%) accepted payment for sex, and 275 (15%) engaged in both.

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

Type of Transactional Sex	Feb 2015 (N=94)	Jan-Feb 2015 (N=185)	Cumulative : Oct 2012– Feb 2015 (N=1,795)
Accepted payment for sex only:	26 (27%)	59 (32%)	531 (30%)
Male	22	49	481
Female	4	10	50
Age Range (Median) in Years	17-56 (24)	17-56 (27)	15-67 (25)
Paid for sex only:	49 (52%)	99 (54%)	989 (55%)
Male	49	98	980
Female	0	1	9
Age Range (Median) in Years	22-73 (32)	18-73 (33)	17-79 (31)
Engaged in both:	19 (20%)	27 (15%)	275 (15%)
Male	17	24	244
Female	2	3	31
Age Range (Median) in Years	21-50 (30)	21-50 (30)	18-59 (28)

*Inclusion of transactional sex in the HARP database was initiated in October 2012

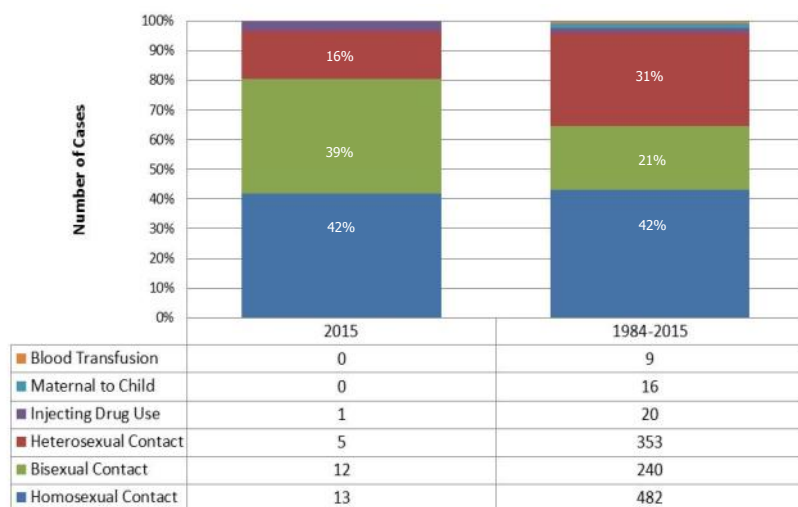
DEATHS AMONG PEOPLE WITH HIV

The DOH established a separate reporting mechanism for deaths in 2012. Prior to this, deaths were infrequently reported to the HIV/AIDS Registry. It is likely that the number reflected here is an underestimate of the total number of deaths among people with HIV in the Philippines.

For the month of February 2015, there were 17 reported deaths. Of the 17 reported deaths, 15 (88%) were male. (Table 5). There were no reported deaths among children less than 10 years old, adolescents nor the youth. The highest number of deaths occurred in the 25-34 years (65%) age group. This was followed by the 35-49 years (29%) and 50 years and older (6%) age groups. Sexual contact was the most common mode of HIV transmission (3 bisexual, 9 homosexual, 4 heterosexual). There was 1 death among injecting drug users (IDU) [Figure 10].

From January 1984 to February 2015, there were a total of 1,149 reported deaths. Nine hundred fifty-five (83%) were male (Table 5). In total, there has been 15 (1%) reported deaths among children less than 10 years old, 13 (1%) among adolescents (10-19 years old) and 138 (12%) among youth (15-24 years old). The highest number of deaths occurred in the 25-34 years (45%) age group. This was followed by the 35-49 years (31%) and 15-24 years (12%) age groups. Sexual contact (94%) was the most common mode of HIV transmission (353 heterosexual, 482 homosexual, 240 bisexual). There were 20 deaths among IDU (Figure 10).

Figure 10. Modes of transmission of reported deaths among PLHIV**



**Note: No mode of transmission reported for 29 cases.

Table 5. Demographic data of reported deaths among PLHIV

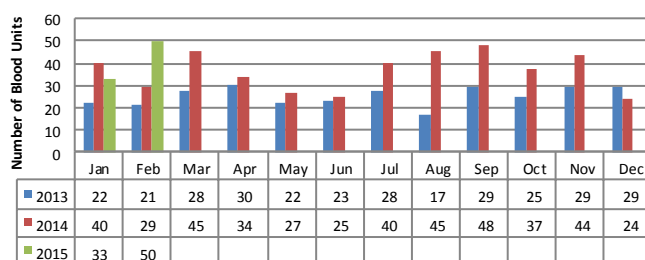
Demographic Data	Feb 2015	Jan-Feb 2015	Cumulative* Jan 1984–Feb 2015
Total Reported Deaths	17	31	1,149
Male	15	28	955
Female	2	3	194
Children <10yo	0	0	15
Adolescents 10-19yo	0	0	13
Youth 15-24yo	0	0	138


BLOOD UNITS CONFIRMED FOR HIV

In of February 2015, 50 blood units were confirmed positive for HIV by RITM. There is no available data yet on the total number of blood units donated.

These were confirmed positive blood units, not blood donors. One donor can donate more than one blood unit. HIV positive blood donors are not in the HIV & AIDS Registry unless they underwent voluntary counseling and testing.

Figure 11. Number of Confirmed HIV Positive Blood Units by Month (2013-2015)





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

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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.