NATIONAL EPIDEMIOLOGY CENTER

Newly Diagnosed HIV Cases in the Philippines

In July 2014, there were 585 new HIV Ab sero-positive individuals confirmed by the STD/AIDS Cooperative Central Laboratory (SACCL) and reported to the HIV and AIDS Registry (Table 1). This was 30% higher compared to the same period last year (n=449), and the highest number of cases ever reported in a month. [Figure 1]

Table 2. Percentage of HIV Cases per Region (July 2014)

Region	% of Cases		
I	2%		
II	1%		
III	8%		
IVA	17%		
IVB	1%		
V	1%		
VI	4%		
VII	11%		
VIII	1%		
IX	<1%		
X	3%		
XI	6%		
XII	1%		
CAR	1%		
CARAGA	1%		
ARMM	<1%		
NCR	41%		

Philippine HIV and AIIDS Regist

Most of the cases (96%) were male. The median age was 27 years (age range: 16-69 years). The 20-29 year (55%) age group had the most number of cases.

Reported modes of transmission were sexual contact (551) and needle sharing among injecting drug users (34) [Table 3, page 2]. Males having sex with other males (82%) was the predominant type of sexual transmission [Figure 2]. Most (92%) of the cases were still asymptomatic at the time of reporting [Figure 3].

In July 2014, 84% of the new HIV cases came from NCR, Region 4A, Region 7, Region 3 and Region 11 [Table 2].

Table 1. Quick Facts

Demographic Data	July 2014	Jan-July 2014	Cumulative 1984—2014
Total Reported Cases	585	3,399	19,915
Asymptomatic Cases	536	3,090	18,100
AIDS Cases	49	309	1,815
Males	560	3,267	17,927*
Females	25	132	1,977*
Youth 15-24yo	166	954	5,134
Children <15yo	0	1	66

*Note: No data available on sex for (11) cases.

Figure 1. Number of New HIV Cases per Month (2012-2014)

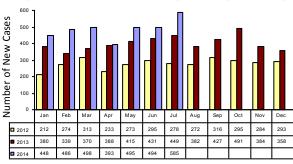


Figure 2. Comparison of the Proportion of Types of Sexual Transmission in 2014, 2013 & Cumulative Data (1984-2014)

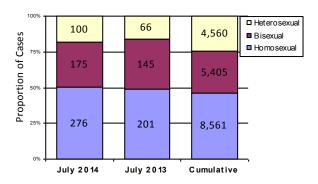
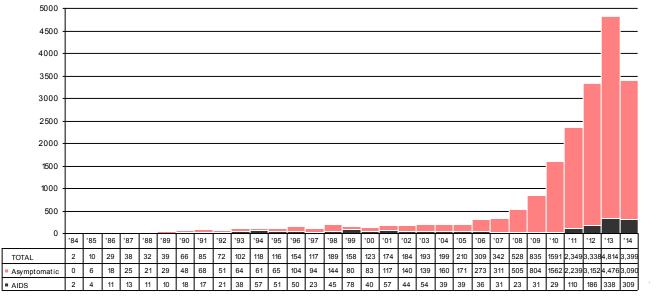


Figure 3. Number of HIV/AIDS Cases Reported in the Philippines by Year, January 1984 to July 2014 (N=19,915)



Demographic Characteristics (1984-2014)

Ninety-six percent of the 3,399 cases in 2014 were male (3,267). Ages ranged from 1 to 82 years old (median 28 years). The 20-29 year old age group had the most (58%) number of cases for 2014. For the male age group, the most number of cases were found among the 20-24 years old (25%), 25-29 years old (33%), and 30-34 years old (20%) [Figure 4].

From 1984 to 2014, there were 19,915 HIV Ab sero-positive cases reported (Table 1), of which 18,100 (91%) were asymptomatic and 1,815 (9%) were AIDS cases. As shown in Figure 4, there is a significant difference in the number of male and female cases reported. Ninety percent (17,927) were male. Ages ranged from 1-82 years (median 28 years). The age groups with the most number of cases were: 20-24 years (23%), 25-29 (31%), and 30-34 years (19%) [Figure 4].

50 & older ■ 1984-2009 ■ 2010 ■ 2011 ■ 2012 ■ 2013 ■ 2014 45-49yo 40-44yo 35-39yo 30-34yo 25-29yo 20-24yo 15-19vo **Number of Male Cases** <15yo 575 550 525 500 475 450 425 400 375 350 325 300 275 250 225 200 175 150 125 100 750 500 250 250 500 750 1000 1250 1500 1750 2000 2250 2500 2750 3000 3250 3500 3750 4000 4250 4500 4750 5000 5250 5500 5750 15-19yo 20-24yo 25-29yo 30-34yo 35-39yo 40-44yo 45-49yo 20-24yo 25-29yo 30-34yo 35-39yo 40-44vo 103 1,093 **2**014 643 2014 2013 147 1,169 1,559 906 363 209 127 103 48 57 43 29 11 13 2013 20 39 23 24 13 12 2012 95 622 289 153 89 71 2012 12

2011

2010

48

42

Figure 4. Comparison of the Distribution of Male and Female HIV Cases by Age-Group and Certain Highlighted Years

■ 1984-2009 30 48 428 741 628 513 *Note: 74 did not report age, 11 did not report sex, 10 did not report age and se

405

2011

2010

Modes of Transmission (1984-2014)

455

256

128

81

In 2014, ninety-four percent (3,181) were infected through sexual contact, 6% (217) through needle sharing among injecting drug users and 1 was infected through mother to child transmission (Table 3). There were 3,058 males and 123 females infected through sexual transmission. The age range of those infected through sexual transmission was 16-82 years old (median 28 years).

Of the 19,915 HIV positive cases reported from 1984 to 2014, 93% (18,526) were infected through sexual contact, 5% (928) through needle sharing among injecting drug users, <1% (63) through mother-to-child transmission, <1% (20) through blood transfusion and needle prick injury <1% (3) [Table 3]. No data is available for 2% (375) of the cases.

Figure 5. Proportion of Types of Sexual Transmission, January 1984—July 2014

100%
90% 8

Table 3. Reported Modes of HIV Transmission

44

258

28

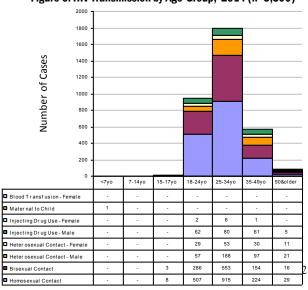
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34

184

Mode of Transmission	July 2014 n=585	Jan-July 2014 n=3,399	Cumulative N=19,915
Sexual Contact	551	3,181	18,526
Heterosexual contact	100(18%)	486(15%)	4,560(25%)
Homosexual contact	276(50%)	1,683(53%)	8,561(46%)
Bisexual contact	175(32%)	1,012(32%)	5,405(29%)
Blood/Blood Products	0	0	20
Injecting Drug Use	34	217	928
Needle Prick Injury	0	0	3
Mother-to-Child	0	1	63
No Data Available	0	0	375

Figure 6. HIV Transmission by Age-Group, 2014 (n=3,399)

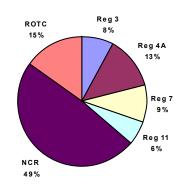


Geographic Distribution (1984-2014)

Since 1984 to present, there were 19,915 cases reported. Almost half (9,048) came from the National Capital Region. [Figure 7]. Thirteen percent (2,491) came from region 4A, followed by 9% (1,779) from Region 7, 8% (1,564) from Region 3, 6% (1,145) from Region 11 and the rest of the country comprises 15% (2,751) of all the cases.

*Note: 1,137 or 6% of the cases had no reported data on their address at the time of diagnosis

Figure 7. Percentage of HIV Cases by Region, January 1984- July 2014



AIDS Cases (1984-2014)

Of the 3,399 HIV positive cases in 2014, three hundred nine were reported as AIDS cases. Ninety eight percent (303) were male and 2% (6) were female. Ages ranged from 17-69 years (median 30 years). Three hundred five acquired the infection through sexual contact (161 homosexual, 103 bisexual and 41 heterosexual) and 4 acquired through injecting drug use.

From 1984 to 2014, there were 1,815 AIDS cases reported. Eighty-four percent (1,524) were male and 16% (291) were female. Median age is 32 years (age range: 1-81 years). Sexual contact was the most common mode of HIV transmission, accounting for 96% (1,737) of all reported AIDS cases. Forty-four percent (761) of sexual transmission was through homosexual contact, followed by heterosexual contact (617) then bisexual contact (359).

Overseas Filipino Workers (1984-2014)

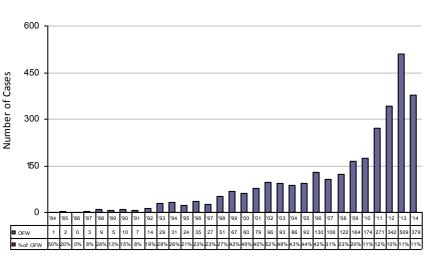
In 2014, there were 379 HIV positive OFWs, comprising 11% of cases reported for the year [Figure 8]. Of these, 334 (88%) were male and 45 (12%) were female. Most were infected through sexual contact (132 heterosexual, 152 homosexual and 94 bisexual).

There were 3,017 HIV positive OFWs since 1984, comprising 15% of all reported cases [Figure 8]. Eighty-one percent (2,456) were males. Ages ranged from 18 to 80 years (median 34 years). Sexual contact (98%) was the predominant mode of transmission (Table 4). Eighty-eight percent (2,668) were asymptomatic while 12% (349) were AIDS cases.

Table 4. Mode of HIV Transmission Among OFWs

Mode of Transmission	July 2014 n=61	Jan-July 2014 n=379	Cumulative N=3,017
Sexual Transmission	60	378	2,951
Heterosexual contact	27(45%)	132(35%)	1,487(50%)
Homosexual contact	16(27%)	152(40%)	834(28%)
Bisexual contact	17(28%)	94(25%)	630(21%)
Blood/Blood Products	0	0	10
Injecting Drug Use	1	1	5
Needle Prick Injury	0	0	3
No Data Available	0	0	48

Figure 8. Number of OFWs and the Proportion of OFWs among the Total HIV Cases by Year



Deaths among People with HIV

From January 1984 to July 2014, there were 1,029 reported deaths among people with HIV [Table 5]. Eighty-two percent (840) were male. In total, there has been 121 deaths among youth (15-24 years old) and 15 deaths among children (<15 years old).

The annual number of deaths from 1984-2010 ranges from 2 to 36 cases with a median of 14 deaths per year. Beginning 2011, there has been an increase in the number of recorded deaths. There were 68 in 2011, and 176 in 2012. The DOH-NEC established an official reporting form in 2012.

From January to July 2014, there were a total of 90 deaths. Ninety-seven percent (87) were male [Table 5]. The highest number of deaths occurred in the 25-29 (39%) age group [Figure 9]. This was followed by the 30-34 (20%) and 35-39 (16%) age groups. For the month of July 2014, there were 17 deaths* [Table 5].

Among the reported deaths in 2014, sexual contact (94%) was the most common mode of HIV transmission (45 homosexual, 28 bisexual, 12 heterosexual). There were 5 cases who got infected through injecting drug use (6%) [Figure 9].

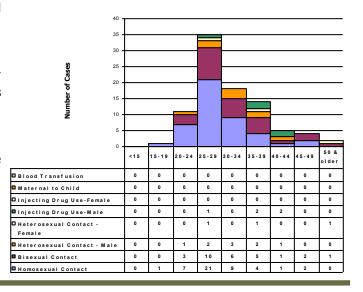
*This include deaths that fall under the reporting month only.

Table 5. Demographic data of reported deaths among People with HIV

	July 2014	Jan-Jul 2014	Cumulative* (1984-2014)
Total Reported Deaths	17	90	1,029
Males	17	87	840
Females	0	3	189
Youth 15-24yo Children <15yo	0 0	12 0	121 15

*Note: No year of death reported for 46 cases

Figure 9. HIV Transmission by Age-Group of Reported Deaths among People with HIV, Jan-July 2014 (n=90)



PLHIV on Anti-Retroviral Therapy (ART)

As of July 2014, there were 7,172* People Living with HIV presently on Anti Retroviral Therapy. These are the combined numbers of adult and pediatric patients currently enrolled and accessing Anti-Retroviral drugs in the 19 treatment hubs listed on the right.

* This is not a cumulative number. It does not include those who already have died, left the country, lost to follow up or decided to stop taking

Treatment Hubs in the Philippines

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

Blood Units Confirmed for HIV

As of July 2014, 240 blood units were confirmed positive for HIV by RITM. There is no available data yet on the total number of blood units donated.

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

Table 6. Number of Confirmed HIV Positive Blood Units

Month 2014 January 40 **February** 29 March 45 34 April 27 July 40 July August September October November December 240 Total



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Philippine HIV & AIDS Registry

The Philippine HIV & AIDS Registry 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 Registry 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-National Epidemiology Center (NEC), and are recorded in the Registry.

The Registry is a passive surveillance system. Except for HIV confirmation by the NRL, all other data submitted to the Registry are secondary and cannot be verified. An example would be an individual's reported place of residence. The Registry is unable to determine if this reported address is where the person got interest, 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.