

HIV/AIDS

HIV (Human Immunodeficiency Virus)* and AIDS (Acquired Immune Deficiency Syndrome) are both Class C Diseases and are reportable to the state within five business days.

**HIV infection during pregnancy and HIV perinatal exposure are considered Class B Diseases and are reportable to the state within one business day.*

This report is a summary based on the Louisiana 2014 STD/HIV Surveillance Report. For more details, check the STD/HIV program website where reports from 2005 to 2014 are displayed:

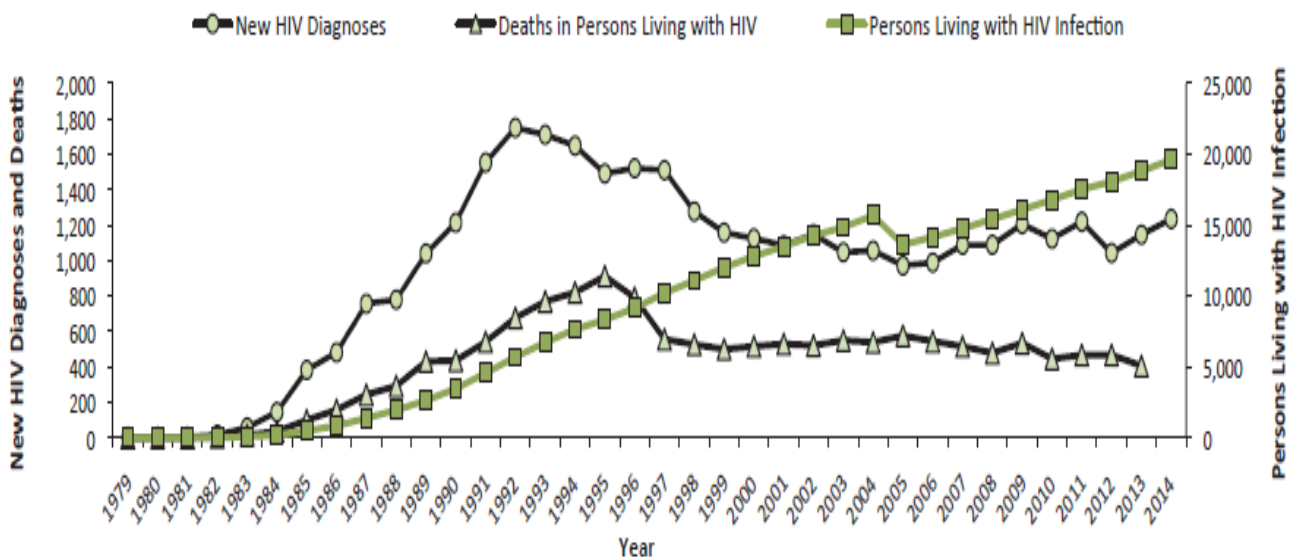
http://new.dhh.louisiana.gov/assets/oph/HIVSTD/2014_STDHIV_SURVEILLANCE_REPORT.pdf

The HIV/AIDS epidemic continues to have a significant impact on the public health of Louisiana. There are persons living with HIV in every parish in the state. In Volume 25 of the *Centers for Disease Control and Prevention (CDC) HIV Surveillance Report*, Louisiana ranked second in the nation for estimated HIV case rates and ninth in the estimated number of HIV cases. This report also indicated that Louisiana is ranked second highest in estimated AIDS case rates and eleventh in the number of estimated AIDS cases in 2014. Although HIV infection is a reportable condition, the data are often underreported because only persons with HIV who choose to be tested confidentially are counted. Most data presented in this summary begins in 2005 and ends in 2014.

Persons Living with HIV

At the end of 2014, 19,612 persons were living with HIV in Louisiana, of whom 10,436 (53%) have been diagnosed with AIDS. Since 2005, the number of persons living with HIV infection has increased (Figure 1).

Figure 1: Number of HIV Diagnoses, Deaths, and Persons Living with HIV Infection - Louisiana, 1979-2014

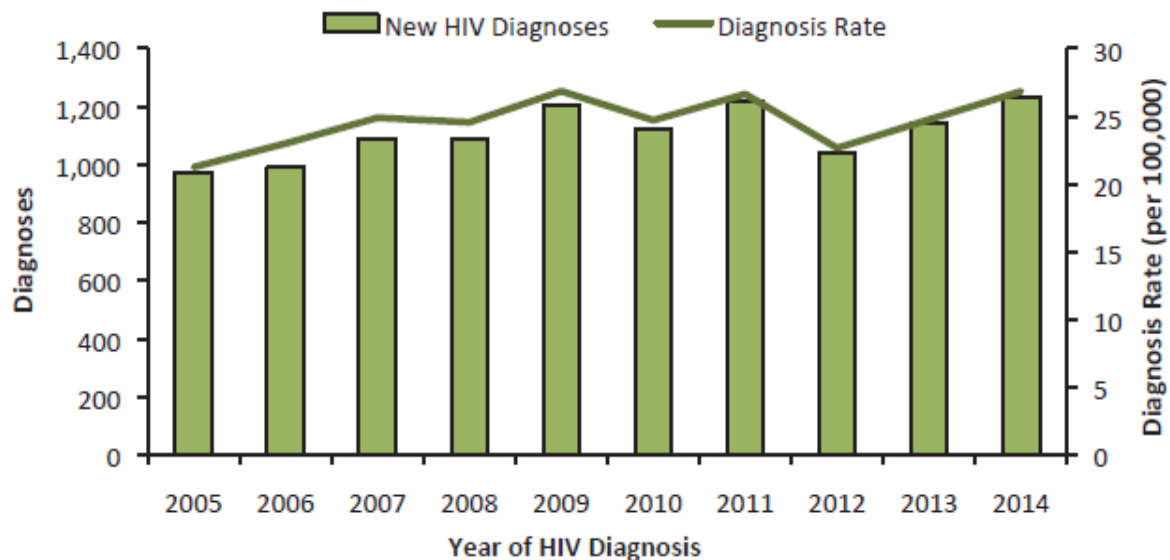


New HIV Cases

New HIV diagnoses represent the number of people diagnosed with HIV at any stage of the disease within the given year. These data have historically served as a measure of new infections (incidence); however people can be infected with HIV for a long time before they are diagnosed, therefore counting new HIV diagnoses is not an accurate representation of new infections. Because persons who have not been tested and those who test anonymously are not included in this data, HIV diagnosis data provide only the minimum estimate of the number of people living with HIV.

Over the 10-year period (2005-2014), the number of new HIV diagnoses has fluctuated. The lowest number of new diagnoses was 972 in 2005. However, due to Hurricane Katrina in 2005, there was an interruption of HIV testing services. The highest number of new cases was 1,235 in 2014 (Figure 2).

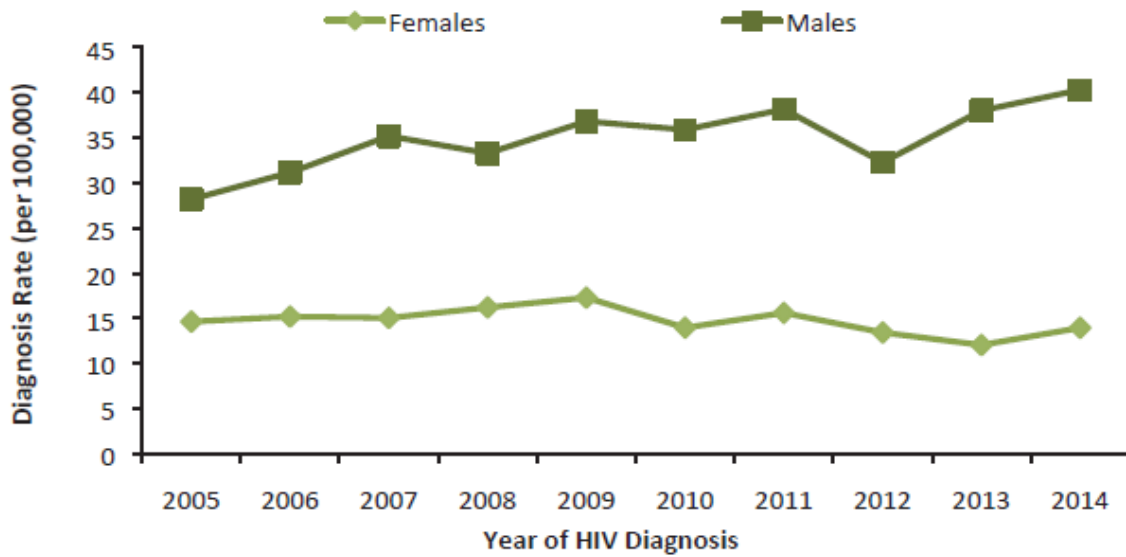
Figure 2: New HIV Diagnoses and Rates - Louisiana, 2005-2014



Sex Distribution

While the HIV diagnosis rate for females in Louisiana has remained relatively stable over the past 10 years, the rate for men has been more variable (between 28.2 and 40.1 per 100,000 males). The male HIV rate in 2014 was 40.1 per 100,000 males, which was a sharp increase from previous years. The HIV diagnosis rate for males was almost three times greater than females in 2014. Cumulatively, males have accounted for 69% of all new HIV diagnoses in Louisiana over the past 10 years (Figure 3).

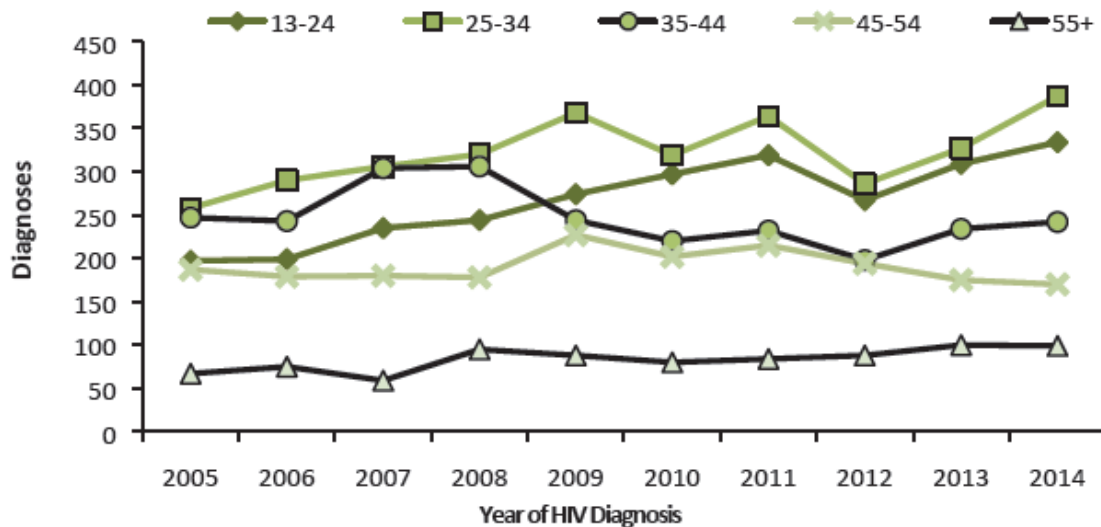
Figure 3: Trends in HIV Diagnoses Rates by Sex - Louisiana, 2005-2014



Age Distribution

The 25 to 34-year age group has the highest number of new diagnoses (31% of all new HIV diagnoses in 2014). The number of new diagnoses in persons aged 35 to 44 years accounted for an additional 20% of all new diagnoses in 2014. In recent years, the number of new diagnoses among youth, aged 13 to 24 years, is of special interest in Louisiana. In 2009, the number of new diagnoses among 13 to 24-year olds surpassed the number of new diagnoses among 35-44 year olds, which makes it the second largest age group for new diagnoses. In 2014, new diagnoses in youth accounted for 27% of new diagnoses, compared to 20% of new diagnoses in 2005 and 2006 (Figure 4).

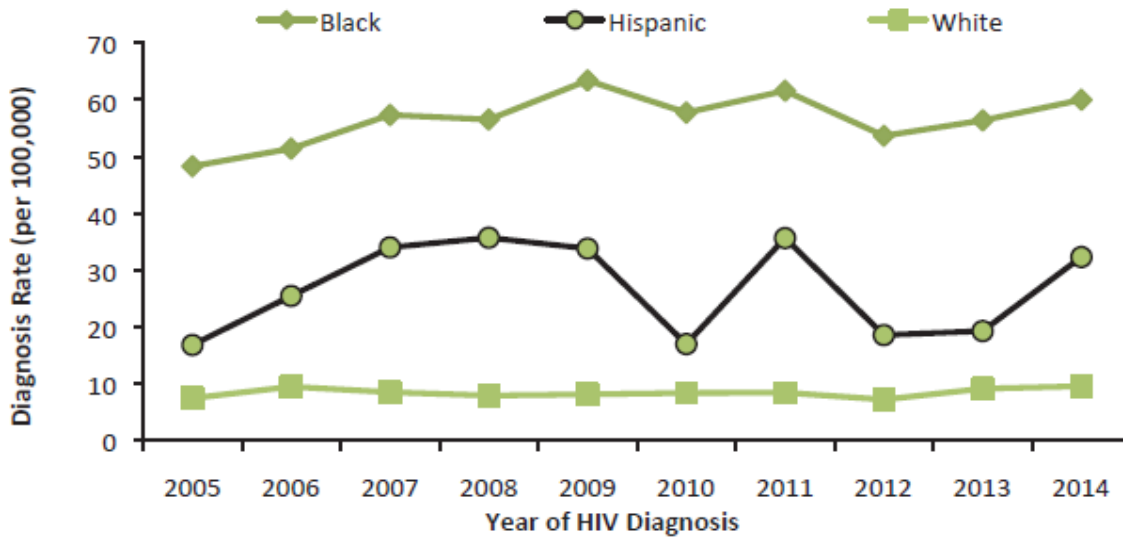
Figure 4: Trends in HIV Diagnoses by Age Group - Louisiana, 2005-2014



Race/Ethnicity Distribution

The HIV diagnosis rate among whites has remained stable over the past 10 years, with a diagnosis rate of 9.5 per 100,000 Whites in 2014. The rate for Blacks has been more variable and has increased from a low of 48.3 per 100,000 Blacks in 2005 to a high of 63.4 per 100,000 Blacks in 2009. Blacks make up only 32.5% of Louisiana’s population, but account for the overwhelming majority of new HIV diagnoses each year. The 2014 diagnosis rate was 60.0 per 100,000 Blacks. This rate for Blacks was over six times greater than the rate for Whites and almost two times the rate for Hispanic/Latinos (32.3 per 100,000 Hispanic/Latinos). The HIV diagnosis rate for Hispanic/Latinos was more than three times greater than for Whites (Figure 5).

Figure 5: Trends in HIV Diagnoses by Race/Ethnicity - Louisiana, 2005-2014

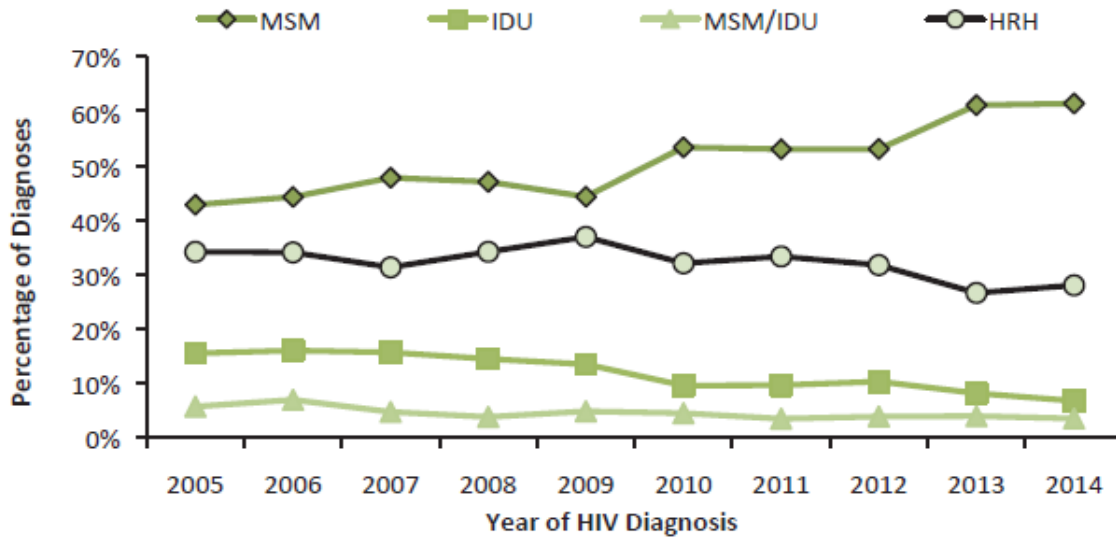


Distribution by Risk Factors

The CDC classifies HIV cases into six transmission categories: men who have sex with men (MSM), high risk heterosexual contact (HRH), injection drug use (IDU), men who have sex with men and inject drugs (MSM/IDU), mother-to-child transmission (pediatric), and cases who received a transfusion or hemophiliac products (transfusion/hemophilia). Cases that do not have risk information reported or do not meet the transmission category criteria are labeled as no identified risk (NIR). Over the last 10 years, 38% of new diagnoses are NIR. A transmission category has been assigned for all NIR cases via imputation so that trends in the percentage of cases for each transmission category can be analyzed. After imputation, the trends for each risk category over the past 10 years are as follows: 51% were MSM, 32% were HRH, 12% were IDU, 5% were MSM/IDU, and 0.5% were pediatric.

The percentage of adult HIV diagnoses attributed to MSM has increased significantly from a low of 43% in 2005 to a high of 61% in 2014. The percentage of HRH diagnoses has decreased slightly, from a high of 37% in 2009 to a low of 28% in 2014. The percentage of diagnoses attributed to IDU and MSM/IDU has declined over the past 10 years from 16% IDU and 6% MSM/IDU in 2005 to 7% and 4% respectively in 2014 (Figure 6).

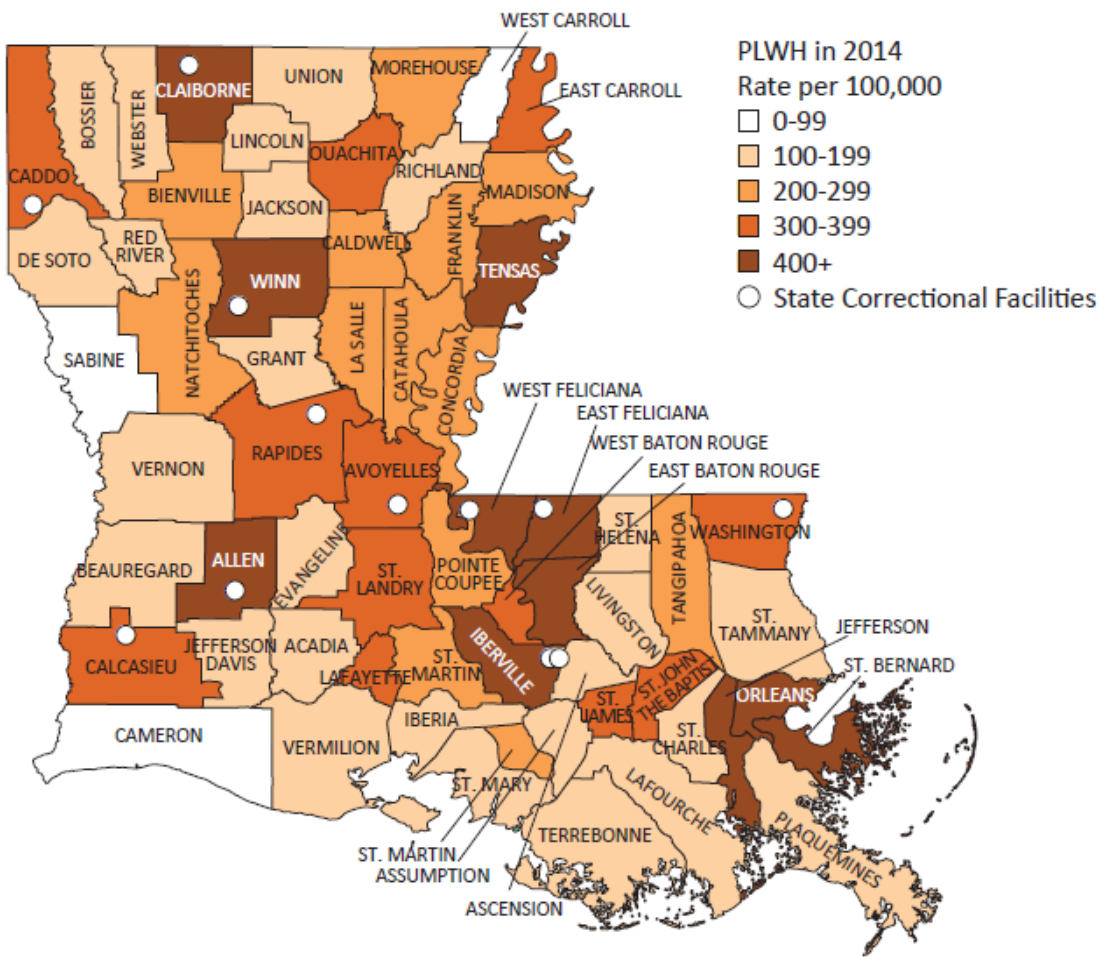
Figure 6: Trends in New HIV Diagnoses by Transmission Category, Adolescents and Adults - Louisiana, 2005-2014



Geographical Distribution

There are persons living with HIV in every parish in Louisiana. At the end of 2014, 12 parishes had a prevalence rate greater than or equal to 400 per 100,000, and an additional 11 parishes had a rate between 300 and 399 per 100,000. Many of the parishes with disproportionate prevalence rates have state correctional facilities that have reported persons who are incarcerated and living with HIV. The majority of persons living with HIV reside in urban areas; however, 13% live in rural parishes (Figure 7).

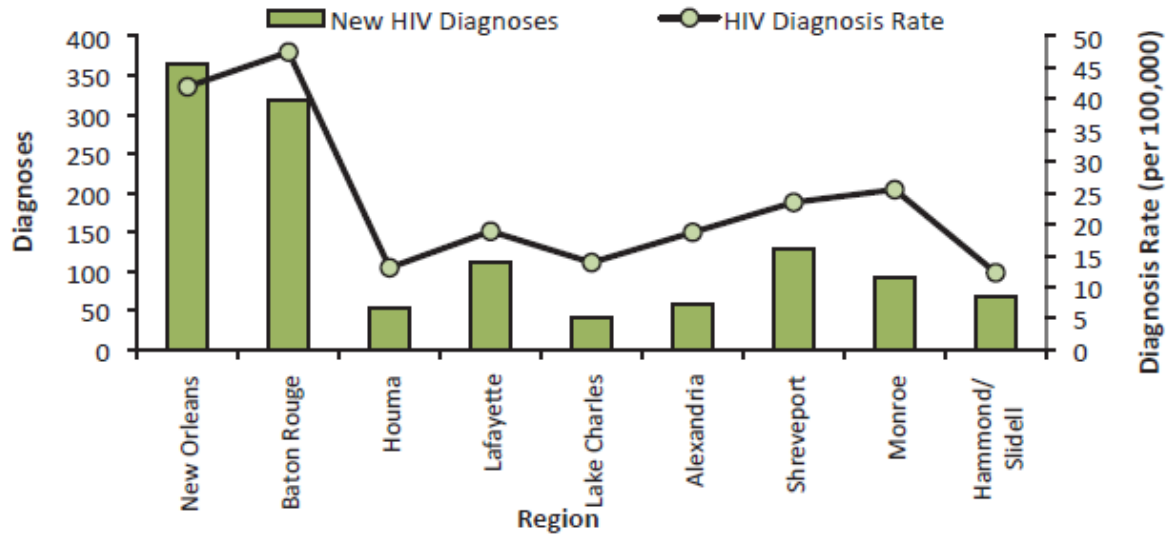
Figure 7: Persons Living with HIV Infection by Parish - Louisiana, 2014



New HIV Diagnoses by Rate and Region

The four public health regions in Louisiana with the highest HIV diagnosis rates in 2014 were New Orleans, Baton Rouge, Shreveport, and Monroe (regions 1, 2, 7, and 8 respectively). Over the past 10 years, the New Orleans and Baton Rouge regions have had the highest rates of HIV in the state. In 2014, New Orleans had the highest number of new HIV diagnoses and the second highest HIV diagnosis rate. The Baton Rouge region had the second highest number of new diagnoses and the highest diagnosis rate (Figure 8).

Figure 8: New HIV Diagnoses by Rate and Region - Louisiana, 2014



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