2020 ANNUAL HIV SURVEILLANCE SUMMARY REPORT

Bureau of Epidemiology

(Published September 2021)



Contact Information and Contributors

The Annual HIV Surveillance Summary is prepared by the Bureau of Epidemiology Pennsylvania Department of Health

Bureau of Epidemiology Division of Infectious Disease Epidemiology

Sharon Watkins, PhD, director, Bureau of Epidemiology Lisa McHugh, PhD, MPH, assistant director, Bureau of Epidemiology Godwin Obiri, DrPH, MS, director, HIV Surveillance and Epidemiology Martin Ngokion, MD, MPH, epidemiologist Michael Allen, MPH, epidemiology research associate Bonnie Krampe, MPH, epidemiology research associate Ikechukwu Onukogu, MS, MPH, epidemiology research associate Emily Tholen, MPH, epidemiology program specialist Kaitlyn Blomberg, MPH, epidemiology program specialist

The HIV Surveillance and Epidemiology Section gratefully acknowledges the support of community health districts, county/municipal health departments, physicians, hospitals, and laboratories reporting HIV cases in Pennsylvania.

This project is funded by a grant award from the Centers for Disease Control and Prevention.

Requests for reprints, updates and inquiries may be sent to:

ATTN: 'Annual HIV Surveillance Summary Report' Requests HIV Surveillance and Epidemiology Section Division of Infectious Disease Epidemiology Bureau of Epidemiology Pennsylvania Department of Health Health and Welfare Building, Room 933 625 Forster St Harrisburg, PA 17120

The data provided in the tables, figures, and maps are based on HIV reports received through March 31, 2021. Expanded analysis of data presented in the Annual HIV Surveillance Summary and other HIV data may be requested by sending email to c-hivepi@state.pa.us or by telephone/fax to our office at 717-787-3350 (tel) or 717-772-6975 (fax).

The Pennsylvania Department of Health is an equal opportunity provider of grants, contracts, services, and employment

Suggested citation of data source: Annual HIV Surveillance Summary Bureau of Epidemiology, Pennsylvania Department of Health Publication Number: HD0234P

A Special Note for the Readers of Pennsylvania HIV Surveillance Report Explanation for Changes in the Annual HIV Surveillance Summary Report

This note is intended to inform readers of changes that have been introduced in the Pennsylvania Annual Human Immunodeficiency Virus (HIV) Surveillance Summary Report. These changes were first introduced into this report beginning in 2011 and to ensure readers are familiar with these changes, they are explained in the following text. Format changes have been made to reflect the way HIV is viewed and to make this report more understandable to a wider audience. This report considers HIV infection as a single disease entity with varying degrees of severity rather than using separate disease classifications for HIV infection without Acquired Immunodeficiency Syndrome (AIDS) and AIDS.

Since the inception of the Annual Summary Report, HIV has been depicted as two conditions, HIV infection without AIDS and AIDS, respectively. This separation served a purpose at the time. However, with advances in the clinical and epidemiologic experiences with HIV infection, HIV disease is now viewed as a spectrum condition; progressing from early stage of infection to full-blown symptomatic infection.

In 2002, Pennsylvania promulgated public health regulations revising the reportability of adult and pediatric AIDS, adding HIV, CD4 count (<200 cells/uL or <14%), detectable viral load, and perinatal exposure to HIV. The new regulations took effect on October 18, 2002 and active surveillance was conducted retrospectively to January 1, 2000. Since that time, HIV reporting has been ongoing statewide with the exception of the county of Philadelphia, where it did not become reportable by name until October 2005.

In addition, the US Centers for Disease Control and Prevention (CDC) has made changes to the HIV case definition, taking into account advances in testing and detection. This new case definition recognizes HIV infection as a disease with varying degrees of severity. For adults and adolescents (i.e. persons aged \geq 13 years), the HIV infection classification system and the surveillance case definitions for HIV infection and AIDS were revised by the CDC in 2008 and combined into a single case definition for HIV infection. In addition, the HIV infection case definition for children aged <13 years and the AIDS case definition for children aged 18 months to <13 years were also revised. No changes were made to the HIV infection classification system, the 24 AIDS-defining conditions for children aged <13 years, or the AIDS case definition for children aged <18 months. These case definitions are intended for public health surveillance only and not as a guide for clinical diagnosis. Further revisions to the HIV disease case definition were published by CDC in 2014.¹

The data in previous years tables and figures were constructed separately for HIV infection without AIDS and AIDS. Most tables and figures now have HIV infection without AIDS combined with AIDS under one identity called HIV disease. Consequently, any comparison of this report to previous years should take into account these differences.

Questions and comments can be directed to Dr. Godwin Obiri, director, HIV Surveillance and Epidemiology Bureau of Epidemiology 717-787-3350 or email: <u>gobiri@pa.gov</u>

Table of Contents

HIV Surveillance Spotlight4
Executive Summary
Methods
Findings7
Figure 1: Annual Diagnoses of HIV Disease by Year of Diagnosis in Pennsylvania, 1980-20207
Figure 2: Cases of AIDS and HIV Infection Without AIDS by Vital Status and Year of Diagnosis, Pennsylvania, 1995-2020
Table 1: Annual Diagnoses of HIV Disease Among Residents of Pennsylvania, 1980-20209
Table 2: Number of Cases of HIV Disease by Sex, Race/Ethnicity, and Year of Diagnosis,Pennsylvania, 2015-2020
Table 3: Number of Cases of HIV Disease by Age at Diagnosis and Year of Diagnosis,Pennsylvania, 2015-2020
Table 4: Number of Cases of HIV Disease by Mode of Transmission and Year of Diagnosis,Pennsylvania, 2015-2020
Table 5: Number of Cases of HIV Disease by Mode of Transmission and Race/Ethnicity,Pennsylvania, 1980-202013
Table 5a: Number of Cases of HIV Disease for Males by Mode of Transmission andRace/Ethnicity, Pennsylvania, 1980-202014
Table 5b: Number of Cases of HIV Disease for Females by Mode of Transmission andRace/Ethnicity, Pennsylvania, 1980-2020
Table 6: Cumulative Cases of HIV Disease by Vital Status and County of Residence,Pennsylvania, 1980-202016
Table 7: Annual Diagnoses and Rates of HIV Disease by County of Residence, Pennsylvania,2017-202017
Figure 3: New Diagnoses of HIV Disease by County in Pennsylvania, 2019
Figure 4: Rate* (Per 100,000 County Residents) of New HIV Disease Diagnoses by County, Pennsylvania, 2019
Table 8: Characteristics of HIV Disease by Time Interval of Diagnosis and HIV Planning Area,Pennsylvania, 2015-202020

Characteristics of HIV Disease for Seven Geographic Areas

Table 9: Characteristics of HIV Disease by Time Interval of Diagnosis for AIDS Activities Office in Pennsylvania, 2015-2020	21
Table 10: Characteristics of HIV Disease by Time Interval of Diagnosis for AIDSNET in Pennsylvania, 2015-2020.	22
Table 11: Characteristics of HIV Disease by Time Interval of Diagnosis for Diagnosis for Northeast United Way of the Wyoming Valley in Pennsylvania, 2015-2020	23
Table 12: Characteristics of HIV Disease by Time Interval of Diagnosis for NorthcentralDistrict AIDS Region in Pennsylvania, 2015-2020	24
Table 13: Characteristics of HIV Disease by Time Interval of Diagnosis for Family HealthCouncil of Southcentral Pennsylvania, 2015-2020	25
Table 14: Characteristics of HIV Disease by Time Interval of Diagnosis for SouthwestPennsylvania Jewish Healthcare Foundation in Pennsylvania, 2015–2020	26
Table 15: Characteristics of HIV Disease by Time Interval of Diagnosis for NorthwestPennsylvania Rural AIDS Alliance, Pennsylvania, 2015-2020	27
Figure 5: Confirmed Cases of Pediatric HIV Disease and Perinatal HIV Exposure,	
Pennsylvania, 2009-2020	28
Citations	29

HIV Surveillance Spotlight

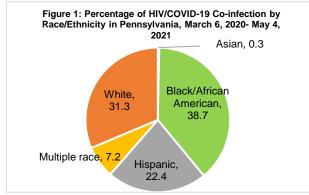
Characteristics of People Living with HIV Infection who Contracted COVID-19 in Pennsylvania, March 6, 2020 – May 4, 2021

Introduction: COVID-19 is a respiratory disease caused by a virus called SARS-CoV-2. Our understanding of COVID-19 is still evolving. The purpose of this spotlight is to describe the characteristics of individuals co-infected with COVID-19 and HIV in Pennsylvania.

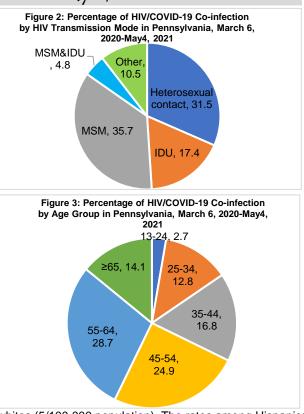
Methods: HIV surveillance data reported to the Enhanced HIV/AIDS Reporting System were matched to confirmed COVID-19 cases that were reported to the Pennsylvania National Electronic Disease Surveillance Systems from March 6, 2020 through May 4, 2021. Also included in the analysis were COVID-19-related deaths that occurred during the same time period.

Results: As of May 4, 2021, a total of 977,457 individuals (7.6% of Pennsylvania population) were considered confirmed COVID-19 cases in Pennsylvania. Of this number, a total of 1,576 individuals were co-infected with HIV, representing an estimated 0.16% of all confirmed COVID-19 cases. Looking specifically at the estimated 36,000 individuals living with a diagnosed HIV infection in Pennsylvania, approximately 4.4% of these individuals were coinfected with COVID-19.

By race/ethnicity (unadjusted for population), 610 (38.7%) of co-infected persons are black/African American, 494 (31.3%) are white, 353 (22.4%) are Hispanic, 5 (0.3%) are Asian, and 114 (7.2%) are of multiple race (Figure 1). By mode of HIV transmission, there were more men who had sex with men (35.7%) compared to individuals who are heterosexuals (31.5%) (Figure 2). More than 53% of individuals co-infected with HIV were individuals 55 years and older (Figure 3).



The crude rate of infection with COVID-19 is lower among people living with HIV (PLWH) (4.4%) than in the general population (7.6%). The risk ratio of PLWH compared to the general population is 0.6. The rates per 100,000 population among PLWH coinfected with COVID-19 differ by race/ethnicity. The rate among blacks/African Americans (44.1/100,000 population) was approximately 9 times that of



whites (5/100,000 population). The rates among Hispanics and individuals of multiple races was 37.5 per 100,000 population and 54.4 per 100,000 population, respectively.

In looking at mortality, a total of 45 (2.9%) COVID-19 related deaths were recorded among the HIV/COVID-19 co-infected individuals compared to 2.4% (23,676/977,457) in the general population. By mode of HIV transmission, 17 (37.8%) of the deceased individuals had heterosexual risk, 13 (28.9%) were injection drug use, 9 (20%) were men who have sex with men (MSM) and 6 (13.4%) were through other modes of transmission. By race/ethnicity, 21 (46.7%) of deaths in PLWH identified as blacks/African Americans, 13 (28.9%) were whites, 11 (24.5%) were Hispanics and individuals of multiple races. By age group at death, all deceased were age 45 and older.

Summary: This investigation indicates that PLWH in Pennsylvania are less likely to be reported as a COVID-19 case compared to the general Pennsylvania population as evidenced by a risk ratio of 0.6. Disparities were observed among individuals age 55 and older, blacks/African Americans and MSM are disproportionately impacted. However, these are preliminary findings, and more analyses will be needed to understand the interaction of COVID-19 on HIV disease.

Executive Summary

Human immunodeficiency virus (HIV) can cause acquired immunodeficiency syndrome (AIDS) and is typically spread by exposure to body fluids or tissue from an infected individual. Sex and injection drug use (IDU) are the most common ways of becoming infected. The first cases of AIDS were described in 1981, and confirmed cases in Pennsylvania date back to 1980 (identified through retrospective review).

HIV infects humans and causes damage by taking over cells in the immune system—the part of the body which usually works to fight off infection, bacteria, and disease. If left untreated, it usually progresses to AIDS, disability and death. Although no cure or vaccine is currently available, HIV is a treatable condition, and individuals can live normal lives. Highly active antiretroviral treatments (HAART) first became available in the mid-1990s. These treatments are very effective in preventing or slowing the progression of the disease and have the added benefit of reducing the likelihood of transmitting the virus to others. In the past few years, some individuals at high risk for infection are now administered certain antiretroviral drugs as a measure to reduce their risk for contracting the virus.

Since 1981, more than 63,200 residents of Pennsylvania have been diagnosed with HIV disease. More than 27,000 of these persons have died, and nearly 36,000 are currently living with the disease. The proportion of people with HIV disease who have died has declined steadily since the mid-1990s. The most common methods of transmission are sex between men, heterosexual sex and IDU. Although cases have been diagnosed and people are living with HIV disease in nearly every county in Pennsylvania, HIV disease has had a disproportionate impact on blacks/African Americans and is more common in large population centers.

The number of newly diagnosed individuals peaked in the early 1990s when almost 3,000 new diagnoses were reported annually. In 2020, fewer than 1,000 new diagnoses were reported. Approximately, 3 times as many males have been diagnosed with HIV disease compared to females. Blacks/African Americans and Hispanics make up 12% and 6.6% of the population of Pennsylvania, respectively, but account for 49.2% and 13.8% of all new diagnoses among Pennsylvania residents. Although a person can be infected at any age, the majority of new diagnoses occurred in persons who are between the ages of 20 and 49.

The epidemic has evolved since the first cases were reported in 1980s. Men who have sex with men (MSM) is the predominant mode of transmission, and heterosexual contact is increasing as a risk factor since the 1990s. Perinatally acquired infections have declined sharply with only two new cases of confirmed perinatal HIV disease identified in 2020.

In October 2020, Pennsylvania amended the HIV reporting regulations to include the reporting of all CD4, viral load, and genetic sequence test results to the Pennsylvania Department of Health (DOH) through the Pennsylvania National Electronic Disease Surveillance System (PA-NEDSS).² Impact of this regulation will become more visible in coming years.

5

Methods

Pennsylvania HIV regulations require that health care providers such as physicians, hospitals, and clinical laboratories must report new diagnoses of HIV disease within 5 days to the DOH.^{2,3} HIV disease encompasses the diagnoses of AIDS and HIV infection without an AIDS diagnosis. HIV infection without an AIDS diagnosis became reportable in Pennsylvania in 2002. HIV disease encompasses both AIDS and HIV infection without an AIDS diagnosis and cases are counted using standard criteria established by the CDC. Typically, cases are first reported electronically by clinical laboratories whenever there is a preliminary or confirmatory event, such as a positive HIV laboratory test or the occurrence of an AIDS defining clinical condition. The cases are reported through the PA-NEDSS. In addition, data are routinely transferred from PA-NEDSS to the Enhanced HIV/AIDS Reporting System (eHARS) for purposes of data management, analysis and reporting to the CDC.⁴

All reports are followed up by epidemiologists and disease intervention specialists to collect additional information about the case, such as risk factors, residence at diagnosis, race, etc. These data are continuously processed through electronic data systems that use standardized algorithms to calculate the date of confirmed diagnosis, age at diagnosis, the most likely way the person was infected (e.g. sex, IDU, etc.), clinical status and a variety of other characteristics. The surveillance of HIV is guided by standard procedures, policies, and practices as established by the CDC.^{5,6}

These data are used to (1) monitor trends in the epidemic, (2) identify communities or demographic groups or geographic areas for prevention and outreach efforts, (3) monitor potential outbreaks or clusters of cases, and (4) develop strategies and tools for preventing new infections and ensuring persons who are living with HIV disease are able to receive medical care and support services.

Data in this report are based on confirmed HIV cases among persons who were residents of Pennsylvania at the time of diagnosis for cases diagnosed in calendar year 2020 and reported to the DOH by March 31, 2021. Nationally a case must meet certain minimum requirements to be considered a "countable" case. These requirements are the same as those used by the CDC for publishing national estimates.¹ At a minimum, a case must have a confirmed diagnosis (either through a standard laboratory testing algorithm or confirmed by a physician) and the following characteristics must be known: the person's date of birth, sex at birth, county of residence at diagnosis, vital status (i.e. alive or deceased), race, and last name. These data are regularly matched with other databases such as state vital records data to ascertain vital status of cases. In addition, Pennsylvania and all other states regularly exchange information to determine if a case is truly a new diagnosis or if the report of a case that has been previously diagnosed in another state.

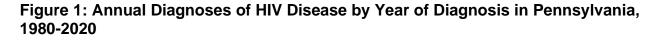
For the purpose of this report, data are extracted from the Pennsylvania eHARS database and analyzed using the SAS software version 9.4. The programs and methods to extract and analyze these data have been standardized since 2012.

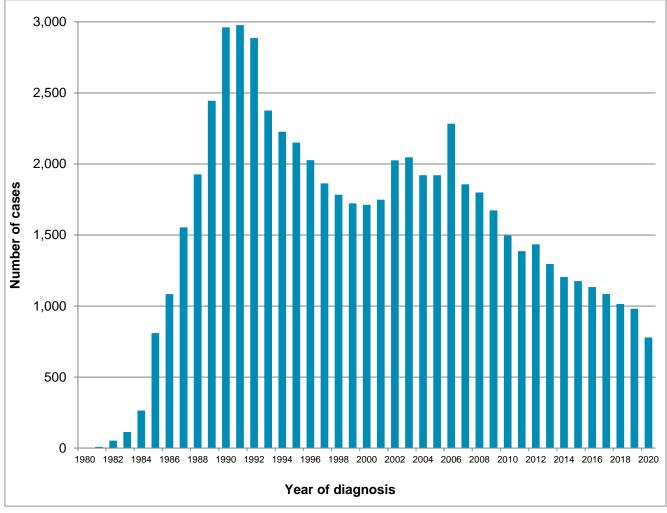
6

Findings

The first case of AIDS in Pennsylvania was reported just after the start of the epidemic in 1981, although subsequent epidemiological investigation identified cases that were diagnosed in 1980. The 1980s and first half of the 1990s saw a rapid increase in the number of new cases with a peak occcurring in 1991. In the mid-1990s, the number of new cases in Pennsylvania began to steadily decline. In 2020, 779 new diagnoses of HIV disease among residents of Pennsylvania were reported. This number may have been impacted by the COVID-19 pandemic and may be incomplete due to lags in reporting.

Figure 1 below depicts the number of new diagnoses of HIV disease among Pennsylvania residents by year of diagnosis. For each year, the bars represent new cases of HIV disease. The numbers show persistent decline in new diagnoses of HIV disease.





Note: HIV Infection without AIDS became reportable in Pennsylvania in October 2002.

Figure 2 below displays the vital status of people with HIV disease by diagnosis status and year of diagnosis. Mortality among individuals living with HIV disease has decreased over time in Pennsylvania, and this has been observed in every population group.HAART first became available in the mid-1990s, having a dramatic impact on the number of deaths among people living with HIV disease. The number of deaths among individuals with HIV disease has decreased each year, while the number of people living with this condition has continued to increase every year.

Figure 2: Cases of AIDS and HIV Infection without AIDS by Vital Status and Year of Diagnosis in Pennsylvania, 1995-2020

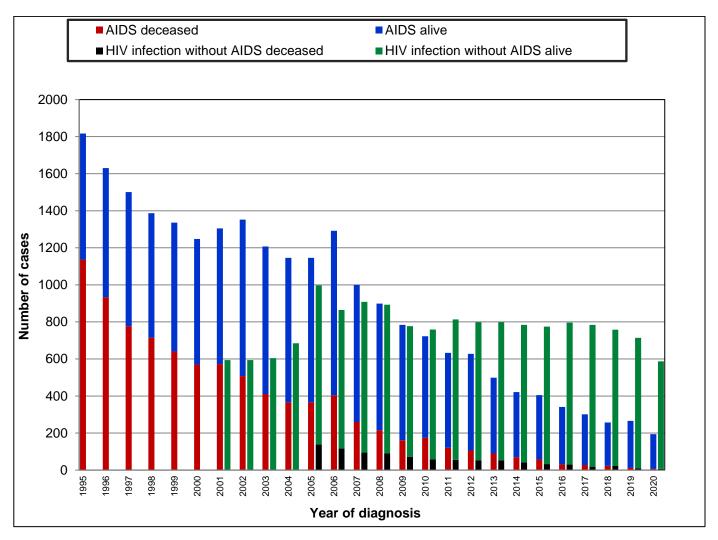


Table 1 provides a tabulation of all reported cases of HIV disease among persons who were residents of Pennsylvania at the time of diagnosis from 1980 through 2020. New HIV disease diagnoses peaked in 1991 with 2,939 cases. Pediatric cases are those that were diagnosed with HIV infection before age 13. The number of perinatally exposed cases of HIV disease, which represents the largest portion of pediatric cases among Pennsylvania residents, has declined sharply since 2010.

Year of diagnosis	Adult/Adolescent	Pediatric	Total
1980	3	0	3
1981	8	1	9
1982	49	3	52
1983	108	5	113
1984	260	4	264
1985	782	27	809
1986	1,068	16	1,084
1987	1,536	18	1,554
1988	1,903	23	1,926
1989	2,421	23	2,444
1990	2,922	40	2,962
1991	2,939	38	2,977
1992	2,819	67	2,886
1993	2,306	70	2,376
1994	2,186	41	2,227
1995	2,108	43	2,151
1996	1,995	32	2,027
1997	1,838	25	1,863
1998	1,748	35	1,783
1999	1,692	31	1,723
2000	1,695	18	1,713
2001	1,724	24	1,748
2002	2,008	18	2,026
2003	2,023	24	2,047
2004	1,911	10	1,921
2005	1,908	13	1,921
2006	2,271	13	2,284
2007	1,846	11	1,857
2008	1,785	14	1,799
2009	1,667	6	1,673
2010	1,484	12	1,496
2011	1,380	6	1,386
2012	1,425	9	1,434
2013	1,292	4	1,296
2014	1,201	3	1,204
2015	1,169	6	1,175
2016	1,131	3	1,134
2017	1,083	1	1,084
2018	1,013	1	1,014
2019	980	0	980
2020	777	2	779
TOTAL	62,464	740	63,204

9

Table 2 below depicts HIV disease by sex, race/ethnicity, and year of diagnosis from 2015 to 2020 and cumulative data from 1980 to 2020. Multiple race is a selection which encompasses individuals indicating one or more racial categories. HIV disease has had a differential impact on various racial/ethnic groups. Overall, Blacks/African Americans account for over 49.2% of cases. Black/African American males and females are disproportionally impacted with 46% and 59% of cases, respectively.

	20	15	20	16	20	17	20	18	20	19	202	20*	-	O DATE -2020
	Number	Percent												
TOTAL MALE	915	100	878	100	849	100	792	100	753	100	618	100	47,709	100
White (non- Hispanic)	273	30	284	32	261	31	249	31	241	32	202	33	17,603	37
Black/African American (non- Hispanic)	468	51	389	44	420	49	348	44	337	45	287	46	22,019	46
Hispanic	128	14	162	18	136	16	155	20	139	18	103	17	6,337	13
Asian/Pacific	16	2	18	2	12	1	21	3	14	2	8	1	336	1
Native American	2	0	3	0	2	0	1	0	1	0	4	1	47	0
Multiple races	28	3	22	3	18	2	18	2	21	3	14	2	1,367	3
TOTAL FEMALE	260	100	256	100	235	100	222	100	227	100	161	100	15,408	100
White (non- Hispanic)	55	21	46	18	50	21	52	23	53	23	41	25	3,314	22
Black/African American (non- Hispanic)	162	62	155	61	131	56	119	54	130	57	91	57	9,065	59
Hispanic	32	12	44	17	46	20	42	19	40	18	26	16	2,395	16
Asian/Pacific	5	2	4	2	2	1	3	1	0	0	0	0	88	1
Native American	0	0	2	1	0	0	0	0	0	0	0	0	18	0
Multiple races	6	2	5	2	6	3	6	3	4	2	3	2	528	3
TOTAL	1,175	100	1,134	100	1,084	100	1,014	100	980	100	779	100	63,117	100

Table 2: Number of Cases of HIV Disease by Sex, Race/Ethnicity and Year of Diagnosis, Pennsylvania, 2015-2020

* Count may be incomplete due to lag in reporting.

Note: Percentages may not add to 100% due to 'rounding.'

Table 3 below provides a tabulation of all reported cases of HIV disease among Pennsylvania residents at the time of diagnosis from 2015-2020 and cumulative data from 1980 to 2020. A person may be diagnosed with HIV disease at any age, but many of the persons are diagnosed between ages 20 and 49. In the past 5 years, persons between the ages 20-29 years have accounted for the highest proportion of the new diagnoses each year.

	20	15	20	16	20	17	20	18	20	19	20	20*	-	TO DATE -2020
	Number	Percent												
Age group (years)	1,175	100	1,134	100	1,084	100	1,014	100	980	100	779	100	63,204	100
0-12	6	1	3	0	1	0	1	0	0	0	2	0	740	1
13-19	59	5	52	5	64	6	44	4	52	5	37	5	2,095	3
20-29	424	36	425	37	387	36	376	37	362	37	297	38	16,006	25
30-39	256	22	279	25	285	26	274	27	259	26	198	25	21,524	34
40-49	192	16	165	15	158	15	127	13	140	14	108	14	14,557	23
OVER 49	238	20	210	19	189	17	192	19	167	17	137	18	8,282	13

Table 3: Number of Cases of HIV Disease by Age at Diagnosis and Year of Diagnosis in Pennsylvania, 2015-2020

^{*} Count may be incomplete due to lag in reporting.

Table 4 below provides a summary of all reported cases of HIV disease among Pennsylvania residents from 2015-2020 and cumulative data from 1980 to 2020 by the most likely mode of transmission of the virus. HIV disease is transmitted from person to person through exposure to body fluids or tissues of persons already infected. The most common means of transmission is MSM, heterosexual sex and IDU. Most pediatric HIV disease cases occur through perinatal exposure. During the early part of the epidemic, some people were infected through transplant of tissues, transfusions, and the use of anticoagulant blood products. While all tissues used for transplantation and transfusion are now tested for HIV before use, there still exists a very small risk for infection through transfusion and transplantation. The predominant mode of transmission followed by heterosexual contact each year. IDU has persistently declined as a risk factor for HIV in Pennsylvania for over 15 years, but we have begun to see a reversal of that trend between 2017 and 2019. The decline in IDU diagnosis in 2020 may be a reflection of mitigation efforts associated with the COVID-19 pandemic.

Table 4: Number of Cases of HIV Disease by Mode of Transmission and Year of Diagnosis in Pennsylvania, 2015-2020

	20	15	2016		2017		2018		2019		2020*		TOTAL TO DATE 1980-2020	
	Number	Percent	Number	Percent										
ALL MODES	1,175	100	1,134	100	1,084	100	1,014	100	980	100	779	100	63,204	100
Men sex w/ men (MSM)	635	54	623	55	560	52	485	48	518	53	407	52	24,493	39
Injection drug use (IDU)	68	6	60	5	79	7	104	10	106	11	50	6	15,450	24
MSM and IDU	27	2	25	2	24	2	33	3	31	3	31	4	3,075	5
Coagulation disorder	0	0	0	0	0	0	0	0	0	0	0	0	258	0
Heterosexual contact	335	29	395	35	262	24	231	23	207	21	131	17	15,574	25
Transfusion received	0	0	0	0	0	0	0	0	0	0	0	0	219	0
Undetermined/other	103	9	27	2	157	14	158	16	118	12	158	20	3,378	5
All pediatric modes**	7	1	4	0	2	0	3	0	0	0	2	0	757	1

*Counts may be incomplete due to lag in reporting.

** Includes adult cases that had pediatric modes of transmission (e.g., perinatal exposure)

Note: Percentage may not add to 100% due to "rounding."

Table 5 below provides a summary of all reported cases of HIV disease among Pennsylvania residents from 1980-2020 by mode of transmission and race/ethnicity. As data quality and reporting has improved, data from the 2001-2020 is likely the most accurate reflection of true case distribution. This table shows that MSM was the most common mode of transmission and accounted for 52% and 39%, respectively, of all reported cases in the first and most recent periods (1980-1990 and 2001-2020). During the second period (1991-2000), IDU was the predominant mode of transmission at 36%. Heterosexual transmission increased from 21% during the second period (1991-2000) to 35% in the the most recent period (2001-2020). Other modes of transmission, such as perinatal exposure or transfusion, have became much less common in the most recent period.

Table 5: Number of HIV Disease by Mode of Transmission and Race/Ethnicity in Pennsylvania, 1980-1990, 1991-2000 and 2001-2020

	White Hispa	•	Black/African (non-Hist		Hisp	anic	Asian/I	Pacific	Native A	merican	Multipl	e races	ALL R	ACES
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
						1980-199	0							
ALL MODES	5,477	100	4,261	100	1,304	100	25	100	4	100	149	100	11,220	100
Men sex w/men (MSM)	3,748	52	1,752	52	225	52	19	52	2	52	58	52	5,804	52
Injection drug use (IDU)	697	27	1,548	27	783	27	1	27	1	27	54	27	3,084	27
MSM and IDU	332	8	434	8	97	8	1	8	0	8	28	8	892	8
Coagulation disorder	188	2	10	2	6	2	0	2	0	2	0	2	204	2
Heterosexual contact	235	6	327	6	142	6	2	6	0	6	7	6	713	6
Transfusion received	118	1	18	1	3	1	1	1	0	1	0	1	140	1
All pediatric modes	57	1	70	1	31	1	0	1	1	1	1	1	160	1
Undetermined/other	102	2	102	2	17	2	1	2	0	2	1	2	223	2
						1991-200	0							
ALL MODES	6,692	100	11,542	100	2,847	100	65	100	13	100	567	100	21,726	100
Men sex w/men (MSM)	3,620	32	2,775	32	389	32	29	32	6	32	154	32	6,973	32
Injection drug use (IDU)	1,493	36	4,809	36	1,386	36	4	36	2	36	217	36	7,911	36
MSM and IDU	334	6	687	6	150	6	1	6	0	6	49	6	1,221	6
Coagulation disorder	42	0	2	0	1	0	0	0	0	0	1	0	46	0
Heterosexual contact	883	20	2,716	20	714	20	18	20	3	20	117	20	4,451	20
Transfusion received	41	0	21	0	3	0	5	0	0	0	1	0	71	0
All pediatric modes	54	2	252	2	81	2	2	2	0	2	11	2	400	2
Undetermined/other	225	3	280	3	123	3	6	3	2	3	17	3	653	3
					•	2001-2020							u .	
ALL MODES	8,733	100	15,250	100	4,642	100	333	100	48	100	1,252	100	30,258	100
Men sex w/men (MSM)	4,590	39	5,043	39	1,469	39	149	39	21	39	444	39	11,716	39
Injection drug use (IDU)	1,186	15	2,048	15	991	15	14	15	3	15	213	15	4,455	15
MSM and IDU	417	3	325	3	146	3	5	3	1	3	68	3	962	3
Coagulation disorder	5	0	1	0	2	0	0	0	0	0	0	0	8	0
Heterosexual contact	1,842	34	6,439	34	1,558	34	127	34	22	34	422	34	10,410	34
Transfusion received	3	0	4	0	1	0	0	0	0	0	0	0	8	0
All pediatric modes	24	1	119	1	39	1	5	1	0	1	10	1	197	1
Undetermined/other	666	8	1,271	8	436	8	33	8	1	8	95	8	2,502	8

Table 5a below provides a tabulation of all reported cases of HIV disease among <u>males</u> by mode of transmission, race and period of diagnosis. While MSM had the highest proportion of cases of HIV disease between 1980-2020, the number of individuals with IDU risk diminished remarkably over time such that it accounted for only 13% of all reported cases in the most recent time period (2001-2020).

		(non-	Black/A America Hispa	n (non-	Hisp	anic	Asian/	Pacific	Native /	American	Multipl	e races	ALL R	ACES
	number	percent	number	percent	number	percent	number	percent	number	percent	number	percent	number	percent
						1980	-1990							
ALL MODES	4,992	100	3,544	100	1,010	100	22	100	2	100	122	100	9,692	100
Men sex w/men (MSM)	3,748	75	1,752	49	225	22	19	86	2	100	58	48	5,804	60
Injection drug use (IDU)	451	9	1,107	31	613	61	0	0	0	0	33	27	2,204	23
MSM and IDU	332	7	434	12	97	10	1	5	0	0	28	23	892	9
Coagulation disorder	185	4	9	0	6	1	0	0	0	0	0	0	200	2
Heterosexual contact	83	2	114	3	33	3	1	5	0	0	1	1	232	2
Transfusion received	68	1	7	0	3	0	0	0	0	0	0	0	78	1
All pediatric modes	47	1	45	1	22	2	0	0	0	0	1	1	115	1
Undetermined/other	78	2	76	2	11	1	1	5	0	0	1	1	167	2
						1991	-2000							
ALL MODES	5,499	100	8,070	100	1,920	100	48	100	9	100	384	100	15,930	100
Men sex w/men (MSM)	3,620	66	2,775	34	389	20	29	60	6	67	154	40	6,973	44
Injection drug use (IDU)	941	17	3,304	41	1,045	54	2	4	1	11	130	34	5,423	34
MSM and IDU	334	6	687	9	150	8	1	2	0	0	49	13	1,221	8
Coagulation disorder	40	1	2	0	1	0	0	0	0	0	1	0	44	0
Heterosexual contact	358	7	998	12	215	11	8	17	1	11	43	11	1,623	10
Transfusion received	25	0	9	0	2	0	3	6	0	0	0	0	39	0
All pediatric modes	34	1	120	1	51	3	1	2	0	0	2	1	208	1
Undetermined/other	147	3	175	2	67	3	4	8	1	11	5	1	399	3
						2001-	2020*							
ALL MODES	7,112	100	10,405	100	3,407	100	266	100	36	100	861	100	22,087	100
Men sex w/men (MSM)	4,590	65	5,043	48	1,469	43	149	56	21	58	444	52	11,716	53
Injection drug use (IDU)	704	10	1,325	13	764	22	12	5	1	3	128	15	2,934	13
MSM and IDU	417	6	325	3	146	4	5	2	1	3	68	8	962	4
Coagulation disorder	4	0	0	0	2	0	0	0	0	0	0	0	6	0
Heterosexual contact	971	14	3,018	29	755	22	77	29	12	33	181	21	5,014	23
Transfusion received	2	0	0	0	1	0	0	0	0	0	0	0	3	0
All pediatric modes	9	0	59	1	21	1	0	0	0	0	4	0	93	0
Undetermined/other	415	6	635	6	249	7	23	9	1	3	36	4	1,359	6

Table 5a: Number of Cases of HIV Disease for Males by Mode of Transmission and Race/Ethnicity in Pennsylvania, 1980-1990, 1991-2000 and 2001-2020

Table 5b below provides a tabulation of all reported cases of HIV disease among <u>females</u> by mode of transmission, race/ethnicity and period of diagnosis. IDU was the predominant mode of transmission for females in the first period (1980-1990) at 58% but then decreased to 43% in the second period (1991-2000) and, eventually, to 19% in the most recent period (2001-2020). Heterosexual sex became more dominant in the second period (1991-2000) at 49% and increased further to 66% in the most recent period (2001-2020).

	White Hispa		Americ	African an (non- oanic)	Hisp	anic	Asian/	Pacific	Native A	American	Multip	le races	ALL R/	ACES
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
						1980-	·1990							
ALL MODES	485	100	717	100	294	100	3	100	2	100	27	100	1,528	100
Men sex w/men (MSM)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Injection drug use (IDU)	246	51	441	62	170	58	1	33	1	50	21	78	880	58
MSM and IDU	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Coagulation disorder	3	1	1	0	0	0	0	0	0	0	0	0	4	0
Heterosexual contact	152	31	213	30	109	37	1	33	0	0	6	22	481	31
Transfusion received	50	10	11	2	0	0	1	33	0	0	0	0	62	4
All pediatric modes	10	2	25	3	9	3	0	0	1	50	0	0	45	3
Undetermined/other	24	5	26	4	6	2	0	0	0	0	0	0	56	4
						1991-	2000							
ALL MODES	1,193	100	3,472	100	927	100	17	100	4	100	183	100	5,796	100
Men sex w/men (MSM)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Injection drug use (IDU)	552	46	1,505	43	341	37	2	12	1	25	87	48	2,488	43
MSM and IDU	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Coagulation disorder	2	0	0	0	0	0	0	0	0	0	0	0	2	0
Heterosexual contact	525	44	1,718	49	499	54	10	59	2	50	74	40	2,828	49
Transfusion received	16	1	12	0	1	0	2	12	0	0	1	1	32	1
All pediatric modes	20	2	132	4	30	3	1	6	0	0	9	5	192	3
Undetermined/other	78	7	105	3	56	6	2	12	1	25	12	7	254	4
						2001-	2020*							
ALL MODES	1,621	100	4,845	100	1,235	100	67	100	12	100	391	100	8,171	100
Men sex w/men (MSM)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Injection drug use (IDU)	482	30	723	15	227	18	2	3	2	17	85	22	1,521	19
MSM and IDU	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Coagulation disorder	1	0	1	0	0	0	0	0	0	0	0	0	2	0
Heterosexual contact	871	54	3,421	71	803	65	50	75	10	83	241	62	5,396	66
Transfusion received	1	0	4	0	0	0	0	0	0	0	0	0	5	0
All pediatric modes	15	1	60	1	18	1	5	7	0	0	6	2	104	1
Undetermined/other	251	15	636	13	187	15	10	15	0	0	59	15	1,143	14

Table 5b: Number of Cases of HIV Disease for Females by Mode of Transmission and Race/Ethnicity in Pennsylvania, 1980 1990, 1991-2000 and 2001-2020

Table 6 below provides a summary of all reported cases of HIV disease by vital status and county of residence at diagnosis. The majority of persons diagnosed with HIV disease in Pennsylvania were residents of large population centers, such as Philadelphia and Allegheny counties.

-ennsylvania,							
COUNTY	PRESUMED ALIVE	REPORTED DEAD	CUMULATIVE CASES	COUNTY	PRESUMED ALIVE	REPORTED DEAD	CUMULA CASE
PHILADELPHIA	18,262	14,896	33,158	CARBON	76	52	
ALLEGHENY	2,982	2,095	5,077	WAYNE	57	66	
DELAWARE	1,818	1,375	3,193	CLEARFIELD	74	44	
MONTGOMERY	1,220	830	2,050	CRAWFORD	72	46	
DAUPHIN	1,102	765	1,867	HUNTINGDON	62	52	
BERKS	1,033	691	1,724	LAWRENCE	68	43	
LEHIGH	1,071	566	1,637	COLUMBIA	61	34	
LANCASTER	878	610	1,488	BRADFORD	42	33	
BUCKS	864	620	1,484	INDIANA	41	34	
YORK	838	520	1,358	ARMSTRONG	37	33	
CHESTER	567	491	1,058	PERRY	28	26	
NORTHAMPTON	406	297	703	MCKEAN	27	26	
LUZERNE	419	271	690	BEDFORD	31	19	
CUMBERLAND	374	249	623	GREENE	22	28	
ERIE	354	220	574	VENANGO	22	27	
LACKAWANNA	304	196	500	MIFFLIN	20	19	
MONROE	285	198	483	SUSQUEHANNA	21	17	
LYCOMING	208	197	405	TIOGA	20	18	
WESTMORELAND	185	188	373	WARREN	23	11	
LEBANON	156	112	268	WYOMING	19	14	
CENTRE	185	78	263	CLARION	21	8	
BEAVER	130	124	254	SNYDER	20	9	
SCHUYLKILL	137	104	241	MONTOUR	17	11	
CAMBRIA	120	116	236	CLINTON	16	9	
FRANKLIN	138	93	231	JEFFERSON	14	10	
WASHINGTON	111	115	226	JUNIATA	15	9	
UNION	109	63	172	FOREST	14	1	
BLAIR	85	82	167	ELK	8	4	
FAYETTE	100	56	156	FULTON	10	2	
ADAMS	95	54	149	SULLIVAN	8	2	
BUTLER	96	51	147	POTTER	2	6	
NORTHUMBERLAND	75	72	147	CAMERON	0	0	
MERCER	81	62	143				
PIKE	96	43	139				
SOMERSET	89	50	139	STATE TOTAL	35,941	27,263	63

 Table 6: Cumulative Cases of HIV Disease by Vital Status and County of Residence,

 Pennsylvania, 1980-2020

Table 7 below provides a tabulation of all reported cases and rates of HIV disease by county of residence and year of diagnosis (2017 through 2020). In 2019, the rate of new HIV diagnoses for Pennsylvania was 7.7 per 100,000 population. Philadelphia County had the highest rate at 28.0 per 100,000 population in 2019. Note: HIV data from 2019 are more complete and stable; therefore, rate data from 2019 is being displayed for the following graphics.

Table 7: Annual	Diagnoses	and	Rate	of	HIV	Disease	by	County	of	Residence	in
Pennsylvania, 201	6-2019						-	-			

COUNTY	2017	2018	2019	2020*	2019 RATE PER 100,000**	COUNTY	2017	2018	2019	2020*	2019 RATE PER 100,000**
ADAMS	4	2	5	3	4.9	LANCASTER	23	16	24	17	4.4
ALLEGHENY	90	83	74	79	6.1	LAWRENCE	4	4	4	2	4.7
ARMSTRONG	2	0	0	1	0.0	LEBANON	5	6	7	3	4.9
BEAVER	10	9	9	11	5.5	LEHIGH	30	35	29	24	7.9
BEDFORD	0	4	0	1	0.0	LUZERNE	18	26	16	21	5.0
BERKS	35	29	27	13	6.4	LYCOMING	5	4	4	1	3.5
BLAIR	2	1	3	3	2.5	MCKEAN	0	1	1	1	2.5
BRADFORD	4	0	2	2	3.3	MERCER	3	6	4	2	3.7
BUCKS	24	35	25	33	4.0	MIFFLIN	0	0	1	2	2.2
BUTLER	6	2	7	4	3.7	MONROE	7	11	13	6	7.6
CAMBRIA	2	7	5	3	3.8	MONTGOMERY	48	50	43	26	5.2
CAMERON	0	0	0	0	0.0	MONTOUR	1	1	1	0	5.5
CARBON	2	1	1	4	1.6	NORTHAMPTON	18	15	24	3	7.9
CENTRE	5	2	5	4	3.1	NORTHUMBERLAND	5	1	0	2	0.0
CHESTER	16	15	18	14	3.4	PERRY	1	2	0	0	0.0
CLARION	0	1	0	0	0.0	PHILADELPHIA	499	437	444	337	28.0
CLEARFIELD	7	1	4	0	5.0	PIKE	6	1	1	1	1.8
CLINTON	0	1	1	0	2.6	POTTER	0	0	0	0	0.0
COLUMBIA	2	1	0	1	0.0	SCHUYLKILL	3	5	2	6	1.4
CRAWFORD	2	2	2	3	2.4	SNYDER	1	1	0	2	0.0
CUMBERLAND	8	3	9	14	3.6	SOMERSET	1	1	2	2	2.7
DAUPHIN	40	35	24	29	8.6	SULLIVAN	0	0	0	0	0.0
DELAWARE	58	65	68	45	12.0	SUSQUEHANNA	2	2	0	0	0.0
ELK	1	0	1	0	3.3	TIOGA	0	0	0	0	0.0
ERIE	7	16	13	4	4.8	UNION	2	0	0	2	0.0
FAYETTE	4	2	4	5	3.1	VENANGO	2	0	2	0	3.9
FOREST	1	1	0	0	0.0	WARREN	0	1	0	1	0.0
FRANKLIN	7	1	1	3	0.6	WASHINGTON	7	6	4	2	1.9
FULTON	0	1	0	1	0.0	WAYNE	1	0	0	0	0.0
GREENE	0	1	1	0	2.8	WESTMORELAND	6	13	7	0	2.0
HUNTINGDON	1	0	0	0	0.0	WYOMING	4	0	1	2	3.7
INDIANA	4	2	2	2	2.4	YORK	30	34	26	21	5.8
JEFFERSON	1	0	0	0	0.0						
JUNIATA	0	0	0	0	0.0						
LACKAWANNA	7	12	9	11	4.3	STATE TOTAL	1,084	1,014	980	779	7.7

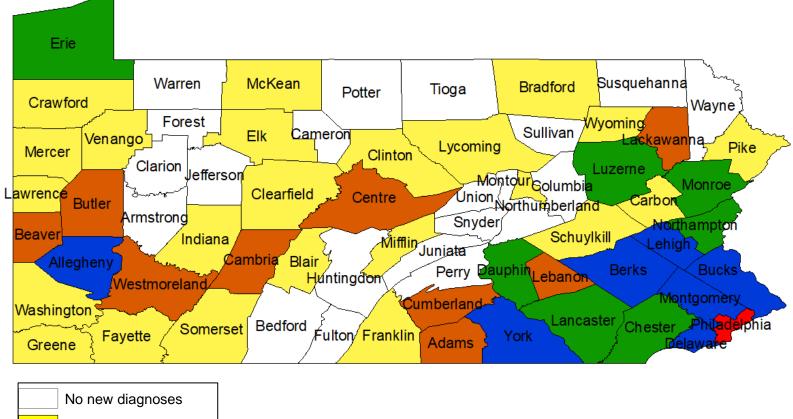
 LACKAWANNA
 7
 12
 9

 *Count may be incomplete due to lags in reporting.

**Rates based on 2018 estimated population.

Figure 3 below displays the number of new diagnoses of HIV disease in 2019 by county of residence at diagnosis. Most of the new cases were diagnosed in southeastern and southcentral counties, as well as Allegheny County in the southwest region of the state.

Figure 3: New Diagnoses of HIV Disease by County in Pennsylvania, 2019



1 to 4 new diagnoses
1 to 4 new diagnoses
5 to 9 new diagnoses
10 to 24 new diagnoses
25 to 99 new diagnoses
>100 new diagnoses

Figure 4 below depicts the rate of new diagnoses of HIV disease in 2019 by county of residence at diagnosis. The overal HIV rate in Pennsylvania in 2019 was 7.7 per 100,000 population. While only 2 out of 48 rural counties saw a rate higher than the state rate, four out of 19 urban counties experienced rates higher than the state. The highest rate was observed in Philadelphia County at 27.8 per 100,000 population.



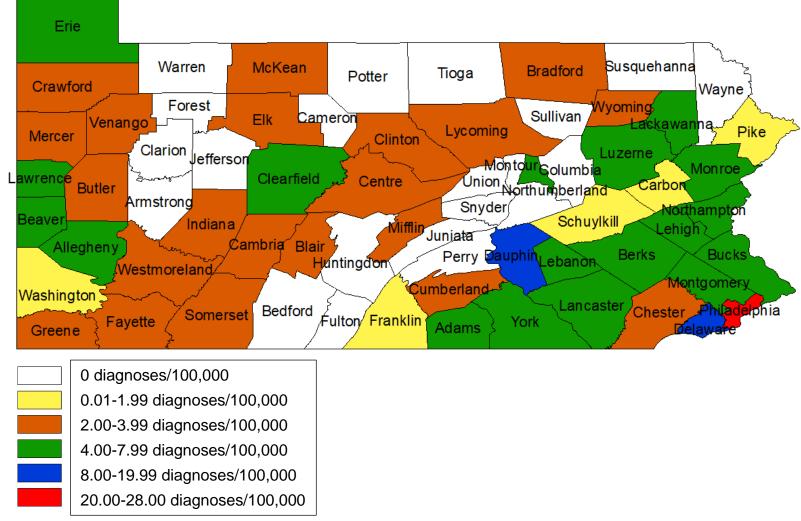


Table 8 provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission and HIV planning area. It also includes an estimate of the number of persons who were presumed to be alive at the end of 2020.

		BEFOR	F 2015	20	15	201	16	20	17	201	8	20	19	202	20	TOTAL	TO DEC 2020	CURRE LIVING I 202	DEC 31,
		-		-	-	-	-	-		Number I	-			-	-	,		Number	Percent
	TOTAL CASES	57,038	100	1,175		1,134	100	1,084	100		100	980	100	779	100				100
				_,				_,		_,									
	MALE	42,904	75	915	78	878	77	849	78	792	78	753	77	618	79	47,709	75	26,167	73
SEX	FEMALE	14.134	25	260	22	256	23	235	22	222	22	227	23	161	21	15,495	25	9.774	27
0E/(,																	
	WHITE	19,095	33	328	28	330	29	311	29	301	30	294	30	243	31	20,902	33	10,837	30
	BLACK/AFRICAN AMERICAN	28,016	49	630	54	544	48	551	51	467	46	467	48	378	49	31,053	49	17,462	49
	HISPANIC	7,740	14	160	14	206	18	182	17	197	19	179	18	129	17	8,793	14	5,817	16
	ASIAN/PACIFIC	320	1	21	2	22	2	14	1	24	2	14	1	. 8	1	423	1	347	1
	NATIVE AMERICAN	50	0	2	0	5	0	2	0	1	0	1	0	4	1	65	0	50	0
RACE/ETHNICITY	MULTIPLE RACES	1,817	3	34	3	27	2	24	2	24	2	25	3	17	2	1,968	3	1,428	4
	< 13	727	1	6	1	3	0	1	0	1	0	0	0	2	0	740		534	1
	13 – 19	1,787	3	59	5	52	5	64	6	44	4	52	5	37	5	2,095	3	1,725	
	20 – 29	13,735	24	424			37	387	36	376	37	362	37	297	38	16,006	25	10,883	30
	30 – 39	19,973	35	256		279	25	285	26	274	27	259	26	198	25	21,524	34	11,375	
	40 – 49	13,667	24	192	16	165	15	158	15	127	13	140	14	108	14	14,557	23	7,583	21
AGE (YEARS)	Over 49	7,149	13	238	20	210	19	189	17	192	19	167	17	137	18	8,282	13	3,841	11
	MEN SEX W/MEN (MSM)	21,265	37	635			55	560	52		48	518	53		52	,		,	40
	INJECTION DRUG USE (IDU)	14,983	26	68	-	60	5	79	7	104	10	106	11		6	15,450	24	-,	17
	MSM AND IDU	2,904	5	27	2	25	2	24	2	33	3	31	3	31	4	3,075		1,428	4
	COAGULATION DISORDER	258	0	0	0	0	0	0	0	0	0	0	0	0	0	258	-	53	-
	HETEROSEXUAL CONTACT	14,013	25	335	29	395	35	262	24	231	23	207	21	131	17	15,574	25		30
	TRANSFUSION	219	0	0	0	0	0	0	0	0	0	0	0	0	0	219	-	28	-
MODE OF	ALL PEDIATRIC MODES	739	1	7	1	4	0	2	0	3	0	0	0	2	0	757		548	2
TRANSMISSION	UNDETERMINED/OTHER	2,657	5	103	9	27	2	157	14	158	16	118	12	158	20	3,378	5	2,379	7
	AIDS Activities Coordinating Office	37,315	65	695			56	645	60		59	598	61		58			/ -	63
	AIDSNET	4,392	8	79		102	9	95	9	96	9	96	10		7	4,916		3,008	
	Northeast United Way of the Wyoming Valley	1,312	2	43		27	2	38		41	4	27	3	35	4	1,523		916	3
	Northcentral District AIDS Region	1,172	2	24		36	3	25	2	11	1	13	1	. 14	2	1,295		763	2
	Family Health Council of Southcentral Pennsylvania	5,720	10	132		169	15	121			10	100	10	÷.	12	- /		- ,	11
REGIONAL	Southwest Pennsylvania - Jewish Healthcare Foundation	6,005	11	169		147	13	132	12	126	12	115	12		14	6,803		- ,	
SUBRECIPIENT	Northwest Pennsylvania Rural AIDS Alliance	1,122	2	33	3	20	2	28	3	33	3	31	3	13	2	1,280	2	778	2

Table 8: Characteristics of HIV Disease by Time Interval of Diagnosis and HIV Planning Area in Pennsylvania, 2015-2020

Table 9 below provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission and county of residence for the AIDS Activity Office planning area. It includes an estimate of the number of persons who were presumed to be alive at the end of 2020.

Table 9: Characteristics of HIV Disease by Time Interval of Diagnosis for AIDS Activities Coordinating Office, 2015-2020

r		Duon		awarc	, 01103		mgon	iery, an		laacipiii								1	
		BEFOR		-	15	201	-	201	-	201		-	19	2020	-	TOTAL 31, 2	2020	DEC	TLY LIVING 31, 2020
		Number	Percent	Number	Percent	Number	Percent		Percent	Number		Number	Percent	Number F	Percent	Number	Percent	Number	Percent
	TOTAL CASES	37,315	100	695	100	633	100	645	100	602	100	598	100	455	100	40,943	100	22,731	100
	MALE	27,870	75	540	78	475	75	510	79	460	76	453	76	344	76	30,652	75	16,351	72
SEX	FEMALE	9,445	25	155	22	158	25	135	21	142	24	145	24	111	24	10,291	25	6,380	28
	WHITE	9.221	25	106	15	112	18	120	19	136	23	121	20	91	20	9.907	24	4.909	22
	BLACK/AFRICAN AMERICAN	22,625	61	472	68	386	-	-	64	329	-		61		60	- ,	61	,	60
	HISPANIC	4,272	11	90		112			14	113					17		12	,	14
	ASIAN/PACIFIC	235	11	12	-	112	-	95	14	113	-	92	15	73	1/	295	12	239	14
	NATIVE AMERICAN	40	1	2		12	1	2	0	14		1	2	2	1	52		43	1
RACE/ETHNICITY	MULTIPLE RACES	922	2	13	2	7	1	11	2		1	12	2	7	2	981	2	680	3
		522				/	1	11				. 12		,		501		000	5
	< 13	477	1	2	0	0	0	0	0	0	C	0 0	0	1	0	480	1	355	2
	13 – 19	1,212	3	37	5	35	6	48	7	27	4	42	7	24	5	1,425	3	1,188	5
	20 – 29	9,063	24	247	36	243	38	238	37	225	37	222	37	167	37	10,405	25	7,035	31
	30 – 39	12,836	34	156	22	145	23	174	27	165	27	156	26	124	27	13,756	34	7,100	31
	40 – 49	8,915	24	109	16	88	14	89	14	77	13	8 82	14	63	14	9,423	23	4,718	21
AGE (YEARS)	Over 49	4,812	13	144	21	122	19	96	15	108	18	96	16	76	17	5,454	13	2,335	10
						-													
	MEN SEX W/MEN (MSM)	13,239	35	377		342			52				-		51	15,112	37	,	39
	INJECTION DRUG USE (IDU)	10,363	28	35		36	-	49	8	74					7	10,674	26		18
	MSM AND IDU	1,884	5	12	2	10	2	9	1	17	3	8 14	2	10	2	1,956	5		
	COAGULATION DISORDER	65	0	0	0	0	0	0	0	0	0	0 0	0	0	0	65	0		-
	HETEROSEXUAL CONTACT	10,197	27	246	35	225	36	104	16	90	15	5 79	13	57	13		27	,	33
	TRANSFUSION	99	0	0	0	0	0	0	0	0	0	0 0	0	0	0	99	0	10	0
	ALL PEDIATRIC	479	1	2	0	1	0	1	0	2	0	0 0	0	1	0	486	1	359	2
MODE OF TRANSMISSION	UNDETERMINED/OTHER	989	3	23	3	19	3	146	23	143	24	113	19	120	26	1,553	4	1,095	5
	BUCKS	1,315	4	25	4	27	4	24	4	35	6	25	4	33	7	1,484	4	864	4
	CHESTER	957	3	14	2	24		16	2	15		18		14	3	1,058	3	567	2
	DELAWARE	2,809	5 8	72	10	76		-	9	65			-		10	3,193	8		2
	MONTGOMERY	1,813	5	36		34		48	7	50		43	7	26	10	2,050	5	1,220	5
COUNTY	PHILADELPHIA	30,421	82	548		-	-	-	77	437		_	, 74		74	33,158	81	,	80

AIDS Activities Coordinating Office

Bucks, Delaware, Chester, Montgomery, and Philadelphia counties

Table 10 below provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission and county of residence for the AIDSNET HIV planning area. In addition, it includes an estimate of the number of persons who were presumed to be alive at the end of 2020.

Table 10: Characteristics of HIV Disease by Time Interval of Diagnosis for AIDSNET in Pennsylvania, 2015-2020

		Derks	s, Can	JON, LE	enign, i	VIONIO	e, nor	inampi	on, a	nd Sch	uyikii	i coun	lies						
		BEFOR		-	15		016	201	-	201	-	20 ⁻		202		31, 2	TO DEC 2020	LIVING 20	20
		Number	Percent	Number	Percent	Number	Percent	Number F	Percent	Number F	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
	TOTAL CASES	4,392	100	79	100	102	100	95	100	96	100	96	100	56	100	4,916	100	3,008	100
	MALE	3,006	68	59	75	73	72	68	72	76	79	76	79	41	73	3,399	69	2,005	67
SEX	FEMALE	1,386	32	20	25	29	28	27	28	20	21	20	21	15	27	1.517	31	1.003	33
		,														,			
	WHITE	1,649	38	38	48	35	34	26	27	28	29	30	31	22	39	1,828	37	963	32
	BLACK/AFRICAN AMERICAN	783	18	18	23	31	30	27	28	26	27	19	20	14	25	918	19	603	20
	HISPANIC	1,748	40	20	25	31	30	40	42	40	42	45	47	19	34	1,943	40	1,265	42
	ASIAN/PACIFIC	13	0	0	0	1	. 1	1	1	0	0	1	1	1	2	17	0	13	0
	NATIVE AMERICAN	2	0	0	0	1	. 1	0	0	0	0	0	0	0	0	3	0	3	0
RACE/ETHNICITY	MULTIPLE RACES	197	4	3	4	3	3	1	1	2	2	1	1	0	0	207	4	161	5
	< 13	67	2	0	0	0	0	0	0	1	1	0	0	0	0	68	1	48	2
	13 – 19	115	3	3	4	. 1	1	2	2	3	3	1	1	3	5	128	3	98	3
	20 – 29	1,012	23	17	22	33	32	30	32	30	31	36	38	23	41	1,181	24	813	27
	30 – 39	1,590	36	16	20	27	26	26	27	27	28	20	21	13	23	1,719	35	955	32
	40 – 49	1,086	25	20	25	17	17	11	12	14	15	17	18	6	11	1,171	24	699	23
AGE (YEARS)	Over 49	522	12	23	29	24	24	26	27	21	22	22	23	11	20	649	13	395	13
		1												Ĩ					
	MEN SEX W/MEN (MSM)	1,153	26	39	49	44	43	45	47	40	42	51	53	26	46	1,398	28	899	30
	INJECTION DRUG USE (IDU)	1,363	31	1	1	3	3	1	1	4	4	3	3	2	4	1,377	28	624	21
	MSM AND IDU	180	4	4	5	1	1	1	1	1	1	2	2	1	2	190	4	104	3
	COAGULATION DISORDER	37	1	0	0	0	0	0	0	0	0	0	0	0	0	37	1	9	0
	HETEROSEXUAL CONTACT	1,079	25	19	24	53	52	45	47	44	46	37	39	16	29	1,293	26	941	31
	TRANSFUSION	17	0	0	0	0	0	0	0	0	0	0	0	0	0	17	0	3	0
	ALL PEDIATRIC	72	2	0	0	0	0	0	0	1	1	0	0	0	0	73	1	52	2
MODE OF TRANSMISSIO	NUNDETERMINED/OTHER	491	11	16	20	1	. 1	3	3	6	6	3	3	11	20	531	11	376	13
	BERKS	1,553	35	29	37	38	37	35	37	29	30	27	28	13	23	1,724	35	1,033	34
	CARBON	114	3	1	1	. 5	5	2	2	1	1	1	1	4	7	128	3	76	3
	LEHIGH	1,451	33	27	34	41	40	30	32	35	36	29	30	24	43	1,637	33	1,071	36
	MONROE	428	10	10	13	8	8	7	7	11	11	13	14	6	11	483	10	285	9
	NORTHAMPTON	629	14	9	11	. 5	5	18	19	15	16	24	25	3	5	703	14	406	13
COUNTY	SCHUYLKILL	217	5	3	4	5	5	3	3	5	5	2	2	6	11	241	5	137	5

AIDSNET Berks, Carbon, Lehigh, Monroe, Northampton, and Schuvlkill counties

Table 11 below provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission and county of residence for the Northeast United Way of the Wyoming Valley HIV planning area. It also includes an estimate of the number of persons who were presumed to be alive at the end of 2020.

Table 11: Characteristics of HIV Disease by Time Interval of Diagnosis for Northeast United Way of the Wyoming Valley in Pennsylvania, 2015-2020

		BEFOR	E 2015	20 ⁻	15	20	16	20	17	20	18	20	19	20		TOTAL T 31, 20	20	LIVING 20	ENTLY DEC 31, 20
			Percent	Number				Number								Number	Percent		Percent
	TOTAL CASES	1,312	100	43	100	27	100	38	100	41	100	27	100	35	100	1,523	100	916	100
	MALE	1,006		34	79		89	29	76	-	71	18	67	-	83	1,169	77	673	73
SEX	FEMALE	306	23	9	21	3	11	9	24	12	29	9	33	6	17	354	23	243	27
	WHITE	800		22	51		48		50		54	11	41		57	907	60	494	54
	BLACK/AFRICAN AMERICAN	261	20	5	12		15		26		20	8	30	10	29		20	198	22
	HISPANIC	184	14	15	35	8	30	9	24	8	20	7	26	2	6	233	15	171	19
	ASIAN/PACIFIC	3	0	0	0	0	0	0	0	1	2	0	0	1	3	5	0	5	1
	NATIVE AMERICAN	3	0	0	0	0	0	0	0	0	0	0	0	1	3	4	0	2	0
RACE/ETHNICITY	MULTIPLE RACES	61	5	1	2	2	7	0	0	2	5	1	4	1	3	68	4	46	5
	< 13	22	2	0	0	0	0	0	0	0	0	0	0	0	0	22	1	15	2
	13 – 19	30	2	1	2	0	0	3	8	-	5	0	0	0	0	36	2	31	3
	20 – 29	267	20	14	33		26	13	34	17	41	17	63	19	54	354	23	250	27
	30 – 39	449	34	12	28		30	10	26	11	27	6	22	9	26		33	296	32
	40 – 49	380	29	5	12		22		18		10	4	15	3	9	409	27	228	25
AGE (YEARS)	Over 49	164	13	11	26	6	22	5	13	7	17	0	0	4	11	197	13	96	10
	MEN SEX W/MEN (MSM)	450		22	51		56	18	47	15	37	10	37	15	43	545	36	341	37
	INJECTION DRUG USE (IDU)	347	26	5	12	2	7	2	5	2	5	1	4	3	9	362	24	153	17
	MSM AND IDU	75	6	0	0	1	4	2	5	5	12	1	4	3	9	87	6	48	5
	COAGULATION DISORDER	12	1	0	0	0	0	0	0	0	0	0	0	0	0	12	1	1	0
	HETEROSEXUAL CONTACT	271	21	14	33	9	33	14	37	19	46	15	56	11	31	353	23	274	30
	TRANSFUSION	5	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0	1	0
	ALL PEDIATRIC	24	2	0	0	0	0	0	0	0	0	0	0	0	0	24	2	17	2
MODE OF TRANSMISSION	UNDETERMINED/OTHER	128	10	2	5	0	0	2	5	0	0	0	0	3	9	135	9	81	9
	LACKAWANNA	438		11	26		44	7	18		29	9	33		31	500	33	304	33
	LUZERNE	568	43	27	63	14	52	18	47	-	63	16	59	21	60	690	45	419	46
	PIKE	128		1	2	1	4	6	16	1	2	1	4	1	3	139	9	96	10
	SUSQUEHANNA	33		1	2	0	0	2	5	2	5	0	0	0	0	38	2	21	2
	WAYNE	119		3	7	0	0	1	3	0	0	0	0	0	0	123	8	57	6
COUNTY	WYOMING	26	2	0	0	0	0	4	11	0	0	1	4	2	6	33	2	19	2

NORTHEAST UNITED WAY OF THE WYOMING VALLEY

Lackawanna, Luzerne, Pike, Susquehanna, Wayne, and Wyoming counties

Table 12 below provides a summary of the number of new diagnoses of HIV disease by sex, race, age at diagnosis, mode of transmission and county of residence for the North Central District AIDS Region HIV planning area. It also includes an estimate of the number of persons who were presumed to be alive at the end of 2020.

Table 12: Characteristics of HIV Disease by Time Interval of Diagnosis for Northcentral District AIDS Region in Pennsylvania, 2015–2020

NORTH CENTRAL DISTRICT AIDS REGION

Bradford, Centre, Clinton, Columbia, Lycoming, Montour, Northumberland, Potter, Snyder, Sullivan, Tioga, and Union counties

		BEFOR	E 2015	201:	5	201	6	20	017	20	18	201	9	20	20	TOTAL T 31, 2	020	CURRE LIVING D 202	DEC 31, 20
				Number															
	TOTAL CASES	1,172	100	24	100	36	100	25	100	11	100	13	100	14	100	1,295	100	763	100
	MALE	892	76	22	92	33	92	20	80	7	64	12	92	14	100	1,000	77	589	77
SEX	FEMALE	280		2	8	3	8	5	20	4	36	1	8	0	0	295		174	
					-	-	-	-				-	-		-		-		-
	WHITE	584		14	58	23	64	16	64	7	64	10	77	-	64	663	51	362	
	BLACK/AFRICAN AMERICAN	386		4	17	7	19	4	16	1	9	2	15	3	21	407	_	248	
	HISPANIC	151	13	4	17	5	14	3	12	2	18	1	8	2	14	168		108	
	ASIAN/PACIFIC	7	1	1	4	1	3	1	4	0	0	0	0	0	0	10	1	10	1
	NATIVE AMERICAN	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	. (
RACE/ETHNICITY	MULTIPLE RACES	44	4	1	4	0	0	1	4	1	9	0	0	0	0	47	4	35	5
	< 13	15	1	1	4	0	0	0	0	0	0	0	0	0	0	16	1	12	
	< 13 13 – 19	29		1	4	1	2	1	0	0	0	1	0	0	0	34		30	
	20 – 29	29		2	25	18	50	1	28	0	55	1	46	0	57	-	-	224	
	<u>20 – 29</u> 30 – 39	437		7	23	10	25	/	32	2	18	0	31		14				
	<u> 30 – 39</u> 40 – 49	281	24	/	13	9	25	0	32	2	18	4	15		14	294		163	
		138		3	21	3	8 14	3	24	1	9	2	15	1	/				
AGE (YEARS)	Over 49	138	12	5	21	5	14	6	24	2	18	0	0	3	21	159	12	85	11
	MEN SEX W/MEN (MSM)	390	33	13	54	21	58	12	48	5	45	9	69	10	71	460	36	283	37
	INJECTION DRUG USE (IDU)	375	32	1	4	3	8	1	4	3	27	0	0	1	7	384	30	177	23
	MSM AND IDU	93	8	1	4	2	6	2	8	0	0	0	0	1	7	99	8	52	
	COAGULATION DISORDER	15	1	0	0	0	0	0	0	0	0	0	0	0	0	15	1	3	(
	HETEROSEXUAL CONTACT	182	16	3	13	9	25	10	40	3	27	4	31	1	7	212	16	154	- 20
	TRANSFUSION	7	1	0	0	0	0	0	0	0	0	0	0	0	0	7	1	2	. (
	ALL PEDIATRIC	15	1	2	8	0	0	0	0	0	0	0	0	0	0	17	1	13	
MODE OF TRANSMISSION	UNDETERMINED/OTHER	95		4	17	1	3	0	0	0	0	0	0	1	7	101	8	79	
								-											
	BRADFORD	61		0	0	6	17	4	16	0	0	2	15		14	75		42	
	CENTRE	227		9	38	11	31	5	20	2	18	5	38	4	29			185	
	CLINTON	22		0	0	1	3	0	0	1	9	1	8	0	0	25	2	16	
	COLUMBIA	84	7	2	8	5	14	2	8	1	9	0	0	1	7	95	7	61	. 8
	LYCOMING	380	32	6	25	5	14	5	20	4	36	4	31	1	7	405	31	208	27
	MONTOUR	23	2	1	4	1	3	1	4	1	9	1	8	0	0	28	2	17	2
	NORTHUMBERLAND	133	11	3	13	3	8	5	20	1	9	0	0	2	14	147	11	75	10
	POTTER	8	1	0	0	0	0	0	0	0	0	0	0	0	0	8	1	2	. (
	SNYDER	23	2	0	0	2	6	1	4	1	9	0	0	2	14	29	2	20	
	SULLIVAN	9	1	0	0	1	3	- 0	0	- 0	0	0	0	0	0	10		8	
	TIOGA	37	3	1	4	0	0	0	0	0	0	0	0	0	0	38		20	
COUNTY	UNION	165		2	۰ ۵	1	2	2	0	0	0	0	0	2	14				

Table 13 below provides a summary of the number of new diagnoses of HIV disease in Pennsylvania by sex, race, age at diagnosis, mode of transmission and county of residence for the Family Health Council of South Central Pennsylvania HIV planning area. It includes an estimate of the number of persons who were presumed to be alive at the end of 2020. **Table 13: Characteristics of HIV Disease by Time Interval of Diagnosis Family Health Council of Southcentral Pennsylvania, 2015–2020** FAMILY HEALTH COUNCIL OF SOUTHCENTRAL PENNSYLVANIA

		BEFOR	E 2015	2015		20	16	201	17	20	18	20	19	202			TO DEC 2020	CURRE LIVING I 202	DEC 31,
				Number Pe	rcent													Number	Percent
	TOTAL CASES	5,720	100	132	100	169	100	121	100	105	100	100	100	97	100	6,444	100	3,832	100
	MALE	4,209	74	102	77	133	79	89	74	85	81	77	77	84	87	4,779	74	2,760	72
SEX	FEMALE	1,511	26	30	23	36	21	32	26	20	19	23	23	13	13	1,665	26	1,072	28
	WHITE	2,832	50	59	45	79	47	52	43	39	37	52	52	44	45	3,157	49	1,792	47
	BLACK/AFRICAN AMERICAN	1,495	26	42	32	42	25	35	29	35	33	11	11	24	25	1,684	26	974	- 25
	HISPANIC	1,089	19	18	14	37	22	26	21	26	25	28	28	25	26	1,249	19	804	21
	ASIAN/PACIFIC	19	0	6	5	3	2	4	3	0	0	4	4	0	0	36	1	32	1
	NATIVE AMERICAN	3	0	0	0	0	0	0	0	0	0	0	0	1	1	4	0	1	0
RACE/ETHNICITY	MULTIPLE RACES	282	5	7	5	8	5	4	3	5	5	5	5	3	3	314	5	229	6
	< 13	94	2	3	2	2	1	1	1	0	0	0	0	0	0	100	2	63	2
	13 – 19	191	3	5	4	9	5	3	2	4	4	2	2	6	6	220	3	173	5
	20 – 29	1,282	22	44	33	52	31	44	36	43	41	32	32	30	31	1,527	24	1,050	27
	30 – 39	2,148	38	26	20	47	28	31	26	25	24	22	22	27	28	2,326	36	1,298	34
	40 – 49	1,325	23	28	21	32	19	20	17	18	17	21	21	16	16	1,460	23	827	22
AGE (YEARS)	Over 49	680	12	26	20	27	16	22	18	15	14	23	23	18	19	811	13	421	. 11
	MEN SEX W/MEN (MSM)	2,089	37	60	45	89	53	57	47	58	55	55	55	51	53	2,459	38	1,530	40
	INJECTION DRUG USE (IDU)	1,496	26	18	14	13	8	8	7	7	7	9	9	9	9	1,560	24	683	18
	MSM AND IDU	289	5	5	4	4	2	2	2	2	2	1	1	5	5	308	5	140	4
	COAGULATION DISORDER	52	1	0	0	0	0	0	0	0	0	0	0	0	0	52	1	10	0
	HETEROSEXUAL CONTACT	1,199	21	27	20	59	35	49	40	35	33	34	34	18	19	1,421	22	1,027	27
	TRANSFUSION	34		0	0	0	0	0	0	0	0	0	0	0	0	54	1	4	0
	ALL PEDIATRIC	96	2	3	2	2	1	1	1	0	0	0	0	0	0	102	2	65	2
MODE OF TRANSMISSION	UNDETERMINED/OTHER	465	8	19	14	2	1	4	3	3	3	1	1	14	14	508	8	373	10
	ADAMS	126	2	2	2	7	4	4	3	2	2	5	5	3	3	149	2	95	2
	BEDFORD	38	1	5	4	2	1	0	0	4	4	0	0	1	1	50	1	31	1
	BLAIR	148	3	5	4	5	3	2	2	1	1	3	3	3	3	167	3	85	2
	CUMBERLAND	572	10	6	5	11	7	8	7	3	3	9	9	14	14	623	10	374	10
	DAUPHIN	1,656	29	35	27	48	28	40	33	35	33	24	24	29	30	1,867	29	1,102	29
	FRANKLIN	211	4	3	2	5	3	7	6	1	1	1	1	3	3	231	4	138	4
	FULTON	10	0	0	0	0	0	0	0	1	1	0	0	1	1	12	0	10	0
	HUNTINGDON	110	2	2	2	1	1	1	1	0	0	0	0	0	0	114	2	62	2
	JUNIATA	24	0	0	0	0	0	0	0	0	0	0	0	0	0	24	0	15	0
	LANCASTER	1,334	23	37	28	37	22	23	19	16	15	24	24	17	18	1,488	23	878	23
	LEBANON	232	4	6	5	9	5	5	4	6	6	7	7	3	3	268	4	156	4
	MIFFLIN	35	1	1	1	0	0	0	0	0	0	1	1	2	2	39	1	20	1
	PERRY	49	1	2	2	0	0	1	1	2	2	0	0	0	0	54	1	28	1
COUNTY	YORK	1,175	21	28	21	44	26	30	25	34	32	26	26	21	22	1,358	21	838	22

Adams, Bedford, Blair, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lancaster, Lebanon, Mifflin, Perry, and York counties

Table 14 below provides a summary of the number of new diagnoses of HIV disease in Pennsylvania by sex, race, age at diagnosis, mode of transmission and county of residence for the Southwest Pennsylvania Jewish Healthcare Foundation HIV planning area. It includes an estimate of the number of persons who were presumed to be alive at the end of 2020. Table 14: Characteristics of HIV Disease by Time Interval of Diagnosis for Southwest Pennsylvania Jewish Healthcare Foundation Foundation, 2015–2020

<i>F</i>	Allegneny, Armstrong, Bea	aver, Di	lier, Ca	mona, r	ayelle	, Gree	ne, mu	liana, s	Somer	sei, vva	ashing	ion, an	u wes	sinore				1	
					_														TLY LIVING
			RE 2015	201	-	20		==	17	20		20 ⁻		=•	20		2020		31, 2020
		Number	Percent	Number														Number	Percent
	TOTAL CASES	6,005	100	169	100	147	100	132	100	126	100	115	100	109	100	6,803	100	3,913	100
	MALE	5 027	84	134	70	124	84	108	02	111	88	00	83	94		5,694	04	3,196	02
		5,027	-	35	79		84 16		82 18		12	96	83 17	94			84 16	-	
SEX	FEMALE	978	16	35	21	23	16	24	18	15	12	19	17	15	14	1,109	16	717	18
	WHITE	3,320	55	70	41	56	38	65	49	53	42	55	48	49	45	3,668	54	1.892	49
	BLACK/AFRICAN AMERICAN	2,195		81	41	68	38 46		49	55		50	48	53		,			48
		2,195		16	48	11	40	53	40	50	44	50	43	55	49	2,556		1,570	40
	HISPANIC			9	5	11	/	8	6	5	5	4	3	1	1	-	-		
		35	1	2	1	5	3	0	0	/	6	0	0	1	1	50	1	42	1
		1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
RACE/ETHNICITY	MULTIPLE RACES	268	4	/	4	/	5	6	5	4	3	6	5	5	5	303	4	238	6
	40	26				-	0	0				0						26	
	< 13	36 174		0	0	0	0	0	0	0	0	0	0	1	1	37		26 173	
	13 – 19		-	0	5	6	4	5	4	8	6	4	3	4	4	209	-	-	4
	20 - 29	1,541	26	80	47		44	-		44		43	37		-				32
	30 – 39	2,135	36	34	20		27			38	30	38	33	20	-				
	40 - 49	1,418		22			10		-	9	/	13	11	18		,			20
AGE (YEARS)	Over 49	701	12	25	15	22	15	30	23	27	21	17	15	22	20	844	12	415	11
-						100													
	MEN SEX W/MEN (MSM)	3,469		105	62	103	70		63	80	63	71	62	63	58	,			
	INJECTION DRUG USE (IDU)	808		8	5	3	2	12	9	8	6	6	5	2	2	847		-	
	MSM AND IDU	309		5	3	6	4	4	3	6	5	10	9	11			-	158	
	COAGULATION DISORDER	63		0	0	0	0	0	0	0	0	0	0	0	0	63		13	
	HETEROSEXUAL CONTACT	866		18	11	32	22	32	24	27	21	28	24	25	23			761	19
	TRANSFUSION	47		0	0	0	0	0	0	0	0	0	0	0	0	47		8	0
MODE OF		37		0	0	0	0	0	0	0	0	0	0	1	1	38		27	
TRANSMISSION	UNDETERMINED/OTHER	406	7	33	20	3	2	1	1	5	4	0	0	7	6	455	7	302	8
		4 404	75	420		124						74	64	70	70	5.077	75	2.002	76
	ALLEGHENY	4,491	75	139	82	121	82	90	68	83	66	74	64	79	72	-	75	,	
	ARMSTRONG	64		0	0	3	2	2	2	0	0	0	0	1	1	70		37	
	BEAVER	210		3	2	2	1	10	8	9	7	9	8	11	10			130	
	BUTLER	120		7	4	1	1	6	5	2	2	7	6	4	4	147		96	
	CAMBRIA	211		5	3	3	2	2	2	7	6	5	4	3	3	236	-	120	-
	FAYETTE	132		3	2	6	4	4	3	2	2	4	3	5	5	156		100	-
	GREENE	47		1	1	0	0	0	0	1	1	1	1	0	0	50		22	
	INDIANA	63		1	1	1	1	4	3	2	2	2	2	2	2	75		41	
	SOMERSET	128		2	1	3	2	1	1	1	1	2	2	2	2	139		89	
	WASHINGTON	202		1	1	4	3	7	5	6	5	4	3	2	2	226		111	
COUNTY	WESTMORELAND	337	6	7	4	3	2	6	5	13	10	7	6	0	0	373	5	185	5

SOUTHWEST PENNSYLVANIA – JEWISH HEALTHCARE FOUNDATION Alleghenv Armstrong Beaver Butler Cambria Eavette Greene Indiana Somerset Washington and Westmoreland counties

DOH 2020 ANNUAL HIV SURVEILLANCE SUMMARY REPORT

Table 15 below provides a summary of the number of new diagnoses of HIV disease in Pennsylvania by sex, race, age at diagnosis, mode of transmission and county of residence for the Northwest Pennsylvania Rural AIDS Alliance HIV planning area. In addition, it includes an estimate of the number of persons who were presumed to be alive at the end of 2020. Table 15: Characteristics of HIV Disease by Time Interval of Diagnosis Northwest Pennsylvania Rural AIDS Alliance, 2015–2020

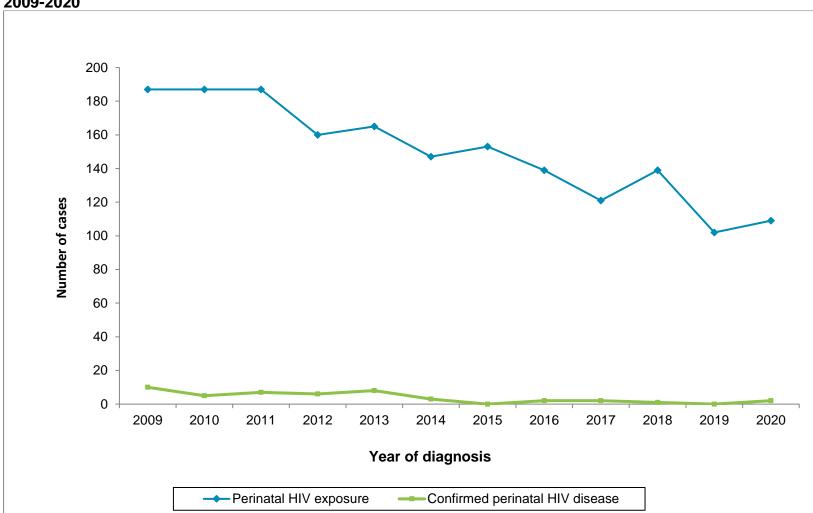
NORTHWEST PENNSYLVANIA RURAL AIDS ALLIANCE

Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, Lawrence, McKean, Mercer, Venango, and Warren counties

		BEFOR	E 2015	20	15	20	16	20	17	201	18	20	19	20	20	TOTAL 31, 2	TO DEC 2020	LIVING 20	ENTLY DEC 31, 020
													Percent						
	TOTAL CASES	1,122	100	33	100	20	100	28	100	33	100	31	100	13	100	1,280	100	778	3 100
	MALE	894	80	24	73	16	80	25	89	24	73	21	68	12	92	1,016	79	593	3 76
SEX	FEMALE	228		9	27	4	20		11	9	27		32	1	8	264	21	185	
			-	-			-	-		-		-		_	-	-			
	WHITE	689		19		12			-	16	48	_		8	62		60	425	
	BLACK/AFRICAN AMERICAN	271		8	24	6	30	11		12	36	14	45	3	23		25	215	_
	HISPANIC	110	10	4	12	2	10	3	11	2	6	2	6	1	8	124	10	92	. 12
	ASIAN/PACIFIC	8	1	0	0	0	0	0	0	2	6	0	0	0	0	10	1	6	1
	NATIVE AMERICAN	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	. 0
RACE/ETHNICITY	MULTIPLE RACES	43	4	2	6	0	0	1	4	1	3	0	0	1	8	48	4	39	5
	< 13	16	1	0	0	1	5	0	0	0	0	0	0	0	0	17	1	15	2
	13 – 19	36		3	9	0	0	2	7	0	0	2	6	0	0	43	3	32	
	20 – 29	298		16	48	7	35	9	32	11	33	6	19	6	46	-	28	247	
	30 – 39	378		5	15	4	20	11	-	6	18	-	42	3	23		33	229	-
	40 - 49	262		5	15	4	20	2	7	4	12	1	3	1	8	279	22	161	21
AGE (YEARS)	Over 49	132		4	12	4	20	4	14	12	36	9	29	3	23	168	13	94	12
														-				-	
	MEN SEX W/MEN (MSM)	475		19	58	9	45	9	32	11	33		45	8	62		-	309	-
	INJECTION DRUG USE (IDU)	231		0	0	0	0	6	21	6	18	3	10	0	0	246	19	124	
	MSM AND IDU	74		0	0	1	5	4	14	2	6	3	10	0	0	84		50	6
	COAGULATION DISORDER	14		0	0	0	0	0	0	0	0	0	0	0	0	14		1	. 0
	HETEROSEXUAL CONTACT	219		8	24	8	40	8	29	13	39	-	32	3	23		21	206	
	TRANSFUSION	10		0	0	0	0	0	0	0	0	0	0	0	0	10		0	, U
MODE OF		16		0	0	1	5	0	0	0	0	0	0	0	0	17		15	
TRANSMISSION	UNDETERMINED/OTHER	83	/	6	18	1	5	1	4	1	3	1	3	2	15	95	/	73	9
	CAMERON	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	CLARION	27	2	1	3	0	0	0	0	1	3	0	0	0	0	29	2	21	. 3
	CLEARFIELD	102	9	3	9	1	5	7	25	1	3	4	13	0	0	118	9	74	10
	CRAWFORD	104	9	1	3	4	20	2	7	2	6	2	6	3	23	118	9	72	9
	ELK	9	1	1	3	0	0	1	4	0	0	1	3	0	0	12	1	8	1
	ERIE	508	45	13	39	13	65	7	25	16	48	13	42	4	31	574	45	354	46
	FOREST	13	1	0	0	0	0	1	4	1	3	0	0	0	0	15	1	14	2
	JEFFERSON	22		1	3	0	0	1	4	0	0	0	0	0	0	24	2	14	
	LAWRENCE	92		5	15	0	0	4	14	4	12	4	13	2	15		9	68	
	MCKEAN	49		0	0	1	5	0	0	1	3	1	3	1	8	53	4	27	
	MERCER	122		6	18	0	0	3	11	6	18	4	13	2	15		11	81	
	VENANGO	43		1	3	1	5	2		0	0	2	6	0	0	49	4	22	
COUNTY	WARREN	31		1	3	1	0	0	,	1	2	0	0	1	0 2	34	2	23	

DOH 2020 ANNUAL HIV SURVEILLANCE SUMMARY REPORT

Figure 5 below depicts the trend in confirmed cases of perinatal HIV disease and the number of children who were perinatally exposed to HIV from 2009 through 2019. There has been a persistent decline in the number of children born to HIV-positive women since 2009. Perinatal HIV disease (i.e., cases diagnosed before age 13) has been nearly eliminated in Pennsylvania, but two infants were born with confirmed perinatal HIV disease in 2020.





Citations

- Centers for Disease Control and Prevention. Revised Surveillance Case Definition for HIV Infection United States, 2014. https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6303a1.htm
- 2. Pennsylvania Revised HIV Reporting Regulations <u>https://www.pacodeandbulletin.gov/Display/pabull?file=/secure/pabulletin/data/vol50/50-44/1487.html</u>.
- 3. Pennsylvania Disease Reporting Regulations. http://www.pacodeandbulletin.gov/secure/pabulletin/data/vol32/32-4/32-4.pdf
- Centers for Disease Control and Prevention. eHARS v4.10 Technical Reference Guide. Atlanta, Georgia: Centers for Disease Control and Prevention; 2018.
- 5. Centers for Disease Control and Prevention and Council of State and Territorial Epidemiologists. *Technical Guidance for HIV/AIDS Surveillance Programs, Volume I: Policies and Procedures*. Atlanta, Georgia: Centers for Disease Control and Prevention; 2005.
- 6. Centers for Disease Control and Prevention and Council of State and Territorial Epidemiologists. *Technical Guidance for HIV/AIDS Surveillance Programs, Volume II: Data Collection Resources and Reporting*. Atlanta, Georgia: Centers for Disease Control and Prevention; 2005.