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PINELLAS COUNTY HEALTH DEPARTMENT
500 7TH AVENUE SOUTH * ST PETERSBURG, FL 33701 * (727) 824-6900

HIV/AIDS Surveillance Quarterly Statistics

Pinellas and Pasco Counties (Area 5)

July 2001

Jeb Bush * Governor
Robert G. Brooks, MD * Secretary of Health
John P. Heilman, MD, MPH * Pinellas County Health Department Director
Lisa Cohen * Pinellas & Pasco Counties HIV/AIDS Program Coordinator
Beth Gustafson, MPH * Editor of Pinellas County HIV/AIDS Surveillance Newsletter

FLORIDA DEPARTMENT OF HEALTH

A Few Interesting HIV/AIDS Articles

Common Detergent May Prevent HIV Transmission

NEW YORK (Reuters Health) - **Sodium lauryl sulfate (SLS), a detergent found in a wide range of personal care products, could prevent the spread of HIV and other sexually transmitted diseases (STDs) when used vaginally**, according to a new report.

``The consistent and careful use of latex condoms is an effective method to prevent the sexual transmission of HIV-1, but unfortunately, their use is not generalized," Dr. Michel Bergeron from Universite Laval in Quebec, Canada told Reuters Health. ``There is an urgent need to develop vaginal microbicides under the control of women to protect themselves from STDs including HIV."

Bergeron and colleagues tested the microbicidal activity of SLS, which is known to be a strong inactivator of several viruses in the lab, against HIV in cultured cells. Their findings are published in the August issue of Antimicrobial Agents and Chemotherapy.

Pretreating the cells with SLS for 1 hour inhibited their infection with HIV, with the strength of infection-blocking increasing as the concentration of SLS increased, the authors report. However, **SLS did not inactivate the virus in cells already infected with HIV**.

Results of additional experiments indicate that SLS worked by blocking HIV from attaching to and entering the cells. SLS did not appear to affect the health of the cells themselves, the researchers note.

The new findings, along with previous studies, show that in lab tests SLS can inactivate HIV, as well as herpes simplex virus and human papillomavirus--the virus that causes vaginal warts, the authors note. SLS could potentially be used as a vaginal microbicide to prevent the sexual spread of such viruses, and possibly other sexually transmitted infections, Bergeron and colleagues conclude.

``As our gel formulation acts as a double barrier--one, a physical one blocking the sexual transmission of pathogens causing STDs, and two, a chemical one destroying pathogens causing STDs--we expect that it will be effective as soon as applied and remain effective for few hours," Bergeron said.

``As there is, until now, no vaccine against HIV-1, preventive measures are the only tool that can presently reduce the transmission of this (virus)," Bergeron said.

Source: Antimicrobial Agents and Chemotherapy 2001;45:2229-2237.
Link: http://dailynews.yahoo.com/htx/nm/20010823/hl/detergent_1.html
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Long Delay in HIV Tests May Be Fueling AIDS in U.S.

ATLANTA (Reuters) - A large number of Americans infected with the human immunodeficiency virus are waiting often more than a decade before having an HIV test, undermining efforts to control the spread of AIDS, U.S. health experts said on Tuesday.

A staggering **41 percent of all people diagnosed with AIDS in 25 states between 1994 and 1999 only learned they had HIV, the virus that causes AIDS, at the same time or within one year of coming down with AIDS**, according to a study released on Tuesday by the Centers for Disease Control and Prevention.

Researchers said the **stigma and fears associated with HIV testing** as well as **poor access to quality medical care among some high-risk groups** were factors that might explain why so many HIV tests occurred in the late stages of infection.

Without treatment, AIDS, which destroys the immune system and leaves victims vulnerable to an array of deadly infections and cancers, typically develops in about 10 to 11 years after a person has been infected with HIV.

About 450,000 Americans have died of AIDS since the disease first surfaced in 1981.

``Significant numbers of people with HIV are only finding out about their infection when they feel sick," Dr. Ronald Valdiserri, the CDC's deputy director of its HIV, STD (sexually transmitted diseases) and TB prevention programs, said at the 2001 National HIV Prevention Conference in Atlanta.

Valdiserri said the data was troubling because it came amid signs that AIDS was making a big comeback, particularly among young gay and bisexual men and parts of the black community.

The CDC's latest data shows that 16,000 Americans are dying from AIDS each year and 40,000 others are becoming infected with HIV, figures that are largely unchanged from 1998 when the epidemic stabilized after several years of sharp declines.

Recent studies have suggested that the resurgence of AIDS may be linked to an increase in risky sexual behavior by young gay and bisexual men as well as poor blacks.

The CDC, which hopes to cut the number of new annual HIV infections in half within five years, said the findings highlighted the need to adopt innovative testing programs aimed at increasing testing in high-risk groups.

The Atlanta-based agency said health officials should consider setting up mobile HIV testing programs in homeless shelters, gay bars, transgender nightclubs and other areas frequented by those engaging in high-risk sex.

Source: Center for Disease Control
Link: http://dailynews.yahoo.com/htx/nm/20010814/sc/aids_testing_dc_1.html
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New Aggressive Drug-resistant HIV Emerges in Vancouver

Dr. Julio Montaner, chair of AIDS research at St. Paul's Hospital and the University of B.C., said doctors at St. Paul's have documented about a half-dozen cases in the past year of newly infected people whose strain of the virus is resistant to all 3 classes of anti-HIV drugs. It is common for AIDS patients to develop a resistance to some of the drugs they are taking, and 5 to 10 percent of new infections in the United States involve a form of HIV resistant to some types of drugs used in treatment of AIDS (acquired immune deficiency syndrome). But there have been only a handful of reported cases in the world where a person was newly infected with a type of HIV (human immunodeficiency virus) resistant to all 3 drug classes. In most of those cases, it appeared that in becoming drug-resistant, the virus that causes AIDS had mutated in a way that made it less effective and less dangerous ….. To have any hope of tackling drug-resistant HIV in the long-term, Montaner said, drug-resistant patients need to be treated with several new experimental drugs at once to suppress the virus. Such a change in approach requires the cooperation of drug companies and government regulators, Montaner said, to strike a balance between rigorous scientific testing and getting new drugs to desperate patients. "There has to be a recognition that the single most important challenge we're facing today is people that have a drug-resistant virus," Montaner said. "What we're trying to do is ring a bit of an alarm".

For more info please refer to source & link: http://www.promedmail.org

Inside this issue:

Special points of interest:

- *The Pinellas County HIV/AIDS Surveillance Office wants to acknowledge and thank **Ms. Jill Silver** for all her hard work in the past year and we wish her happiness and success in her future endeavors. In addition, we want to take this time to introduce and welcome **Dr. Beale Morgan**, to our staff.*
- *Call the HIV/AIDS surveillance office at **727-824-6903** if you have an HIV or AIDS case to report or if you need specific HIV/AIDS statistical information. **Erica Amato, Dr. Beale Morgan, De Wengrzyn** or myself are here to assist you with reporting and/or statistics you might need! If you're a health care provider in Pasco County and need to report an HIV/AIDS case please call **Michael Wydotis** at **727-869-3900 (x173).***

Pinellas County AIDS Statistics

The following tables and graphs will appear on each quarterly newsletter so that continuity of data can be maintained.

All Pinellas County AIDS data is cumulative from 1981 to August 2, 2001
Source: Pinellas County Health Department, HIV/AIDS Surveillance

Table 1: AIDS Cases — by RACE

Race	Adults	Pediatric	Total
White	2371 (72%)	10 (50%)	2381 (72%)
Black	783 (24%)	9 (45%)	792 (24%)
Hispanic	134 (4%)	1 (5%)	135 (4%)
Asian/Pacific Is.	11 (0%)		11 (0%)
Am.Indian/AK. Native	7 (0%)		7 (0%)
Unknown	0 (0%)		0 (0%)
Total	**3306** (100%)	**20** (100%)	**3326** (100%)

Table 2: AIDS Cases — by AGE

Age	Cases (%)	Deaths
0-12	20 (1%)	14 (70%)
13-19	17 (0%)	
20-29	556 (17%)	
30-39	1490 (45%)	1918 (58%)
40-49	877 (26%)	
50+	366 (11%)	
Total	3326 (100%)	**1932 (58%)**

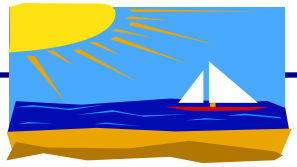
Table 3: AIDS Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	1939 (68%)		1939 (59%)
Injecting Drug Users	356 (12%)	129 (28%)	485 (15%)
Gay/ Bi Male & IDU	198 (7%)		198 (6%)
Heterosexual Contact	150 (5%)	228 (50%)	378 (11%)
Transfusion Recipients	32 (1%)	24 (6%)	56 (2%)
Coagulation Disorder	14 (1%)		14 (0%)
Risk Not Reported	162 (6%)	74 (16%)	236 (7%)
Total	**2851** (100%)	**455**(100%)	**3306** (100%)

Table: 4: AIDS Cases — by Pediatric Risk Categories

Risk Factors (peds)	Males	Females	Total
Mother with HIV	7 (70%)	9 (90%)	16 (80%)
Hemophilia	2 (20%)		2 (10%)
Transfusion	1 (10%)		1 (5%)
Risk Not Reported	0 (0%)	1 (10%)	1 (5%)
Total	**10** (100%)	**10** (100%)	**20** (100%)

Pinellas County HIV Statistics



All Pinellas County HIV data is cumulative from 7/1/97 to August 2, 2001
Source: Pinellas County Health Department, HIV/AIDS Surveillance

Table 5: HIV Cases — by RACE

Race	Adults	Pediatric	Total
White	370 (55%)	3 (75%)	373 (55%)
Black	251 (37%)	1 (25%)	252 (37%)
Hispanic	32 (5%)		32 (5%)
Asian/Pacific Is.	4 (1%)		4 (1%)
Am.Indian/AK. Native	2 (0%)		2 (0%)
Unknown	11 (2%)		11 (2%)
Total	**670** (100%)	**4** (100%)	**674** (100%)

Table 6: HIV Cases — by AGE

Age	Cases (%)	Deaths
0-12	4 (0%)	0 (0%)
13-19	24 (4%)	
20-29	162 (24%)	
30-39	277 (41%)	15 (2%)
40-49	150 (23%)	
50+	57 (8%)	
Total	674 (100%)	**15 (2%)**

Table 7: HIV Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	243 (53%)		243 (37%)
Injecting Drug Users	53 (11%)	47 (23%)	100 (15%)
Gay/ Bi Male & IDU	23 (5%)		23 (3%)
Heterosexual Contact	30 (7%)	58 (28%)	88 (13%)
Transfusion Recipients	3 (1%)	5 (2%)	8 (1%)
Coagulation Disorder	0 (0%)		0 (0%)
Risk Not Reported	109 (23%)	99 (47%)	208 (31%)
Total	**461** (100%)	**209** (100%)	**670** (100%)

Table: 8: HIV Cases — by Pediatric Risk Categories

Risk Factors (peds)	Males	Females	Total
Mother with HIV	1 (100%)	3 (100%)	4 (100%)
Risk Not Reported			
Total	**1** (100%)	**3** (100%)	**4** (100%)

Pasco County AIDS Statistics

All Pasco County AIDS data is cumulative from 1981 to August 2, 2001
Source: Pinellas County Health Department, HIV/AIDS Surveillance

Table 9: AIDS Cases — by RACE

Race	Adults	Pediatric
White	448 (84%)	
Black	52 (10%)	3
Hispanic	33 (6%)	
Other/Unknown	3 (0%)	
Total	**536** (100%)	**3** (100%)

Table 10: AIDS Cases — by AGE

Age	Cases (%)	Deaths
0-12	3 (0%)	
13-19	4 (1%)	
20-29	84 (16%)	
30-39	238 (44%)	
40-49	140 (26%)	
50+	70 (13%)	
Total	539 (100%)	**297 (56%)**

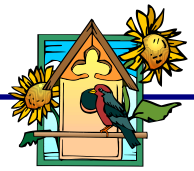
Table 11: AIDS Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	251 (56%)		251 (47%)
Injecting Drug Users	63 (14%)	26 (30%)	89 (16%)
Gay/ Bi Male & IDU	44 (10%)		44 (8%)
Heterosexual Contact	39 (8%)	47 (54%)	86 (16%)
Transfusion Recipients	13 (3%)	3 (3%)	16 (3%)
Coagulation Disorder	3 (1%)		3 (1%)
Risk Not Reported	36 (8%)	11 (13%)	47 (9%)
Total	**449** (100%)	**87** (100%)	**536** (100%)

Table: 12: AIDS Cases — by Pediatric Risk Categories

Risk Factors (peds)	Total
Mother with HIV	3 (100%)
Risk Not Reported	
Total	**3** (100%)

Pasco County HIV Statistics



All Pasco County HIV data is cumulative from 7/1/97 to August 2, 2001
Source: Pinellas County Health Department, HIV/AIDS Surveillance

Due to the fact that some of the cell sizes for Pasco County were <3, some of the data has not been completely stratified.

Table 13: HIV Cases — by RACE (adults only)

Race	Adults
White	85 (74%)
Black	14 (12%)
Hispanic	11 (10%)
Other/Unknown	5 (4%)
Total	**115** (100%)

Table 14: HIV Cases — by AGE

Age	Cases (%)	Deaths
0-19	8 (7%)	
20-29	37 (32%)	
30-39	42 (37%)	
40-49	15 (13%)	
50+	13 (11%)	
Total	115 (100%)	**0** (0%)

Table 15: HIV Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	34 (42%)		34 (29%)
Injecting Drug Users	11 (14%)	7 (21%)	18 (16%)
Gay/ Bi Male & IDU	5 (6%)		5 (4%)
Heterosexual Contact	5 (6%)	19 (55%)	24 (21%)
Risk Not Reported/Other	26 (32%)	8 (24%)	34 (30%)
Total	**81** (100%)	**34** (100%)	**115** (100%)

There have been no HIV pediatric cases reported for Pasco County as of July 1997.

Hillsborough AIDS Statistics

All Hillsborough County AIDS data is cumulative from 1981 to July 31, 2001
Source: Florida Department of Health, Bureau of HIV/AIDS

Table 16: AIDS Cases — by RACE

Race	Adults	Pediatric	Total
White	2498 (53%)	17 (23%)	2515 (53%)
Black	1586 (34%)	43 (58%)	1629 (34%)
Hispanic	601 (13%)	14 (19%)	615 (13%)
Asian/Pacific Is.	7 (0%)		7 (0%)
Am.Indian/AK. Native	5 (0%)		5 (0%)
Unknown	0 (0%)		0 (0%)
Total	**4697** (100%)	**74** (100%)	**4771** (100%)

Table 17: AIDS Cases — by AGE

Age	Cases (%)	Deaths
0-12	74 (1%)	30 (41%)
13-19	27 (1%)	
20-29	880 (18%)	
30-39	2122 (44%)	2623 (56%)
40-49	1161 (24%)	
50-59	362 (8%)	
60+	145 (4%)	
Total	4771 (100%)	**2653 (56%)**

Table 18: AIDS Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	2367 (63%)		2367 (50%)
Injecting Drug Users	535 (14%)	279 (31%)	814 (17%)
Gay/ Bi Male & IDU	297 (8%)		297 (7%)
Heterosexual Contact	321 (8%)	470 (52%)	791 (17%)
Transfusion Recipients	29 (1%)	27 (3%)	56 (1%)
Coagulation Disorder	17 (0%)	1 (0%)	18 (0%)
Risk Not Reported	225 (6%)	129 (14%)	354 (8%)
Total	**3791** (100%)	**906** (100%)	**4697** (100%)

Table 19: AIDS Cases — by Pediatric Risk Categories

Risk Factors (peds)	Males	Females	Total
Mother with HIV	29 (78%)	36 (97%)	65 (88%)
Hemophilia	3 (8%)		3 (4%)
Transfusion	4 (11%)		4 (5%)
Risk Not Reported	1 (3%)	1 (3%)	2 (3%)
Total	**37** (100%)	**37** (100%)	**74** (100%)

You can get Hillsborough and other Florida county data on the Florida Department of Health website:

www.doh.state.fl.us

(once at the site click on "AIDS/HIV")

Hillsborough HIV Statistics

All Hillsborough County HIV data is cumulative from 7/1/97 to July 31, 2001
Source: Florida Department of Health, Bureau of HIV/AIDS

Table 20: HIV Cases — by RACE

Race	Adults	Pediatric	Total
White	502 (36%)	1 (8%)	503 (36%)
Black	699 (51%)	11 (84%)	710 (51%)
Hispanic	167 (12%)	1 (8%)	168 (12%)
Asian/Pacific Is.	3 (0%)		3 (0%)
Am.Indian/AK. Native	1 (0%)		1 (0%)
Unknown	6 (1%)		6 (1%)
Total	**1378** (100%)	**13** (100%)	**1391** (100%)

Table 21: HIV Cases — by AGE

Age	Cases (%)	Deaths
0-12	13 (1%)	0 (0%)
13-19	47 (3%)	
20-29	332 (23%)	
30-39	524 (38%)	50 (4%)
40-49	342 (24%)	
50-59	91 (7%)	
60+	42 (4%)	
Total	1391 (100%)	**50 (4%)**

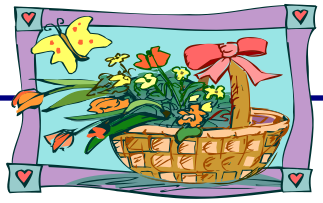
Table 22: HIV Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	392 (46%)		392 (28%)
Injecting Drug Users	66 (8%)	80 (15%)	146 (11%)
Gay/ Bi Male & IDU	37 (4%)		37 (3%)
Heterosexual Contact	88 (10%)	212 (40%)	300 (22%)
Transfusion Recipients	3 (0%)	2 (0%)	5 (0%)
Coagulation Disorder	1 (0%)		1 (0%)
Risk Not Reported	262 (32%)	235 (45%)	497 (36%)
Total	**849** (100%)	**529** (100%)	**1378** (100%)

Table: 23: HIV Cases — by Pediatric Risk Categories

Risk Factors (peds)	Males	Females	Total
Mother with HIV	7 (100%)	5 (83%)	12 (93%)
Risk Not Reported		1 (17%)	1 (7%)
Total	**7** (100%)	**6** (100%)	**13** (100%)

Florida HIV/AIDS Statistics



Source: Florida Department of Health, Bureau of HIV/AIDS
HIV/AIDS, STD & TB Monthly Surveillance Report, #203
If additional state data is needed please go to "www.doh.state.fl.us"

Table 24: Cumulative HIV Case Counts for Florida
(7/1/97-6/30/01)

	HIV	Deaths
Total	21520	433 (2%)
Adult	21320	430 (2%)
Pediatric	200	3 (2%)

Table 25: Cumulative AIDS Case Counts for Florida
(through 6/30/01)

	AIDS	Deaths
Total	83239	45610 (55%)
Adult	81835	44821 (55%)
Pediatric	1404	789 (56%)

Table 26: Cumulative HIV/ AIDS Case Counts in Surrounding Counties
(as of 6/30/01)

County	HIV	AIDS
Hillsborough	1375	4746
Pinellas	**666**	**3310**
Polk	350	1309
Sarasota	128	784
Manatee	183	756
Pasco	**113**	**534**
Hernando	45	179
Highlands	79	156
Hardee	20	66

Table 27: Cumulative HIV/ AIDS Case Counts in the Top 7 Florida Counties
(as of 6/30/01)

County	HIV	AIDS
Dade	6537	24856
Broward	3576	13332
Palm Beach	1717	7963
Orange	1742	4884
Hillsborough	1375	4746
Duval	1001	4162
Pinellas	**666**	**3310**

United States HIV/AIDS Statistics

Adults & Children estimated to be **living** with HIV/AIDS in U.S.: 920,000
Estimated number of adults & children **newly** infected with HIV in U.S. during 2000: 45,000

Table 28: Cumulative HIV/AIDS Case Counts for U.S.
(as of 6/30/01)

	HIV*	AIDS	% AIDS Deaths
Total	145753	793396	58%
Adult	143547	784402	58%
Pediatric	2206	8994	58%

* CDC decided not to include HIV totals for New York.
(Source: Florida HIV/AIDS, STD & TB Monthly Surveillance Report, #203

Beth Gustafson is responsible for compiling and editing the HIV/AIDS Surveillance Statistics for the Pinellas and Pasco County Health Departments on a quarterly basis. For further information regarding statistics, or questions regarding HIV or AIDS reporting, please contact Beth at (727) 824-6903

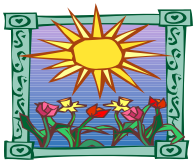


Table 29: Cumulative HIV* Cases of 5 Leading U.S. States
(as of 6/30/01)

1.	**Florida (7/97)**	**21313**	**(15%)**
2.	New Jersey (1/92)	14813	(10%)
3.	North Carolina (2/90)	10593	(7%)
4.	Virginia (7/89)	8463	(6%)
5.	Louisiana (2/93)	7674	(5%)

(Source: Florida HIV/AIDS, STD & TB Monthly Surveillance Report, #203

* Data only from those states where HIV is report-able & includes only persons reported with HIV infection who have not developed AIDS

Table 30: Cumulative AIDS Cases of 20 Leading U.S. Cities
(as of 12/31/00)

1.	New York City	120234	11.	San Juan, PR	15673
2.	Los Angeles	42254	12.	Baltimore	14514
3.	San Francisco	27870	13.	Boston	14317
4.	Miami	24151	14.	Ft Lauderdale	12945
5.	Washington DC	23193	15.	Dallas	12407
6.	Chicago	21658	16.	San Diego	10602
7.	Houston	19116	**17.**	**Tampa-St Pete**	**8433**
8.	Philadelphia	19138	18.	Oakland	8039
9.	Newark	17117	19.	Detroit	7809
10.	Atlanta	15878	20.	West Palm Beach	7679

(Source: Centers for Disease Control, HIV/AIDS Surveillance Report, Vol. 12, No.2)

Table 31: Cumulative AIDS Cases of 10 Leading U.S. States
(as of 12/31/00)

1.	New York	142164
2.	California	119826
3.	**Florida**	**80416**
4.	Texas	53987
5.	New Jersey	42143
6.	Illinois	25009
7.	Puerto Rico	24883
8.	Pennsylvania	24660
9.	Georgia	22837
10.	Maryland	21691

(Source: Centers for Disease Control, HIV/AIDS Surveillance Report, Vol. 12, No. 2)

World HIV/AIDS Statistics

From W.H.O. (www.who.org) & UNAIDS (www.unaids.org):
Reported World AIDS Cases as of **5/00:** **2,201,468**
Estimated living World HIV/AIDS Cases as of **12/00:** **36.1 million**
Estimated new HIV infections in World in 2000: **5.3 million**
Estimated World deaths due to HIV/AIDS in 2000: **3.0 million**
Estimated Cumulative number of deaths in World due to HIV/AIDS: **21.8 million**

Here are some useful Web links/sites for HIV/AIDS information:

http://www.doh.state.fl.us	*Florida HIV/AIDS statistics*
http://www.cdc.gov	*Centers for Disease Control*
http://www.who.int	*World Health Organization*
http://www.paho.org/english/aid/aidstd.htm	*PAHO: AIDS site*
http://www.iapac.org	*Int'l Assoc of Physicians in AIDS care*
http://www.flairs.org/tcrs/aidsline.htm	*Florida AIDS Hotline site*
http://hivinsite.ucsf.edu	*HIV/AIDS InSite Information*
http://www.hivatis.org/trtgdlns.html	*HIV/AIDS treatment site*

FLORIDA DEPARTMENT OF HEALTH

If you need reporting forms, would like to have a brief HIV/AIDS Surveillance In-Service for your staff in your office, or would like to have your HIV/AIDS cases reviewed in your office, please call the above number and speak to Beth Gustafson, Erica Amato, Dr. Beale Morgan or De Wengrzyn.

BETH GUSTAFSON, MPH
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Florida law requires cases of AIDS to be reported by anyone who diagnoses or treats a person with AIDS, with a $500 fine per case for failure to report. NOTE: A person who tests positive for Human Immunodeficiency Virus (HIV) on or after July 1, 1997 is reportable. Confidentiality is guaranteed. Please send your completed HIV/AIDS case report in an envelope marked "CONFIDENTIAL" to:

HIV/AIDS Surveillance Office
Pinellas County Health Department
500 7th Ave South
St Petersburg, FL 33701