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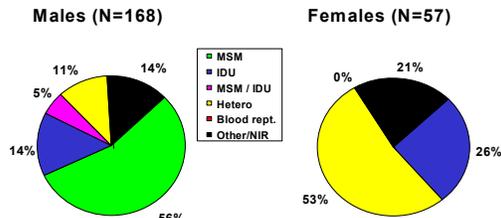
Risk Update Information for Pinellas County (A Comparison from Year 2001 to 2002)

It is time, once again, to revisit the topic of **RISK IDENTIFICATION** when submitting HIV/AIDS case reports to your local health department. One of the many important reasons for reporting HIV/AIDS cases is the need to know how the HIV virus is being transmitted in our local areas so that HIV/AIDS program planners can plan ahead and know what risk groups to target for future educational events and interventions. It is the main focus of the HIV/AIDS program to help **prevent** the spread of the HIV virus so that lives can be saved and local resources can be utilized to help those who already are infected and need financial and patient care assistance. In order to determine why there have been increasing "non-identified risks" in Area 5 (Pinellas and Pasco County), **Mr. Raymond Sanderlin**, the NIR (i.e. Non-Identified Risk) Coordinator, was hired in October 2001 to investigate the NIRs reported in Area 5 and assist in solving those NIRs. In the past year and a half Mr. Sanderlin has contacted many health care providers in the area and has been successful in gaining cooperation in reporting risks—either by the providers including **RISK ASSESSMENT forms** within the patient's chart (which the patient can fill out on one of their visits) or by the provider writing a detailed history of risk information in the patient's chart. In addition, the providers have given him permission to follow-up on patients for interviewing purposes. **The graphs to the right show the difference in NIR rates (in black) for HIV and AIDS cases diagnosed in 2001 to those diagnosed in 2002.** We thank you for your cooperation and assistance and we hope your office will continue to assist Mr. Sanderlin in helping us solve risks so that we know which risk groups we should target with additional prevention messages.

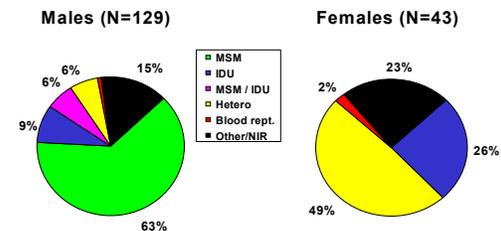
Personnel Changes in HIV/AIDS Surveillance

The Pinellas County HIV/AIDS Surveillance Office received good and bad news within the last few months about personnel changes that would be occurring within our office. The **BAD** news was that we learned we would be losing a very valuable asset to our surveillance program ... someone who has worked very hard in the past three years at making our office much more efficient and organized and has brought much joy and energy to the work environment. The **GOOD** news is that this very same person has been rewarded for all that effort! **Ms. Erica Amato**, who had worked for our program for the past three years, was recently selected and hired as the new HIV/AIDS Program Manager for the Hillsborough County Health Department. She will be a great asset for HIV/AIDS surveillance in the Tampa Bay area and we plan to utilize her resources and expertise in the future. As we said our goodbyes to Erica we were fortunate enough to find another highly qualified and energetic candidate to fill her shoes. We want to take this time to introduce and welcome our newest surveillance staff member, **Ms. Alicia Bahadur**, to the Surveillance office. She will be working part-

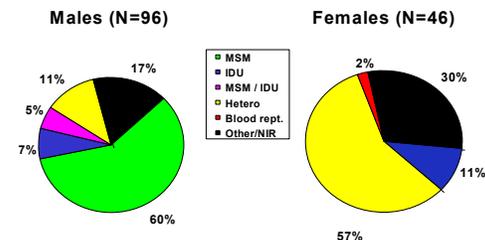
Adult AIDS Cases in Pinellas County
 By Mode of Exposure and Sex, Reported in 2001



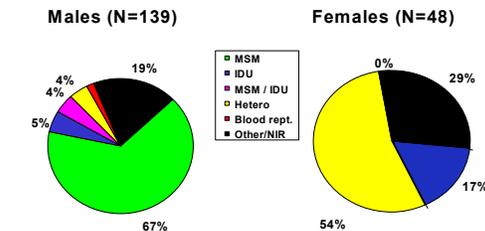
Adult AIDS Cases in Pinellas County
 By Mode of Exposure and Sex, Reported in 2002



Adult HIV Cases in Pinellas County
 By Mode of Exposure and Sex, Reported in 2001



Adult HIV Cases in Pinellas County
 By Mode of Exposure and Sex, Reported in 2002



PINELLAS COUNTY HEALTH DEPARTMENT
 205 DR. M.L. KING NO. ST PETERSBURG, FL 33701 * (727) 824-6900

HIV/AIDS Surveillance Quarterly Statistics Pinellas and Pasco Counties (Area 5) April 2003

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Special points of interest:

- **National HIV Testing Day is on June 27th, 2003. Mark your calendars!**
 In Pinellas County please call 727-824-6902 or 824-6911 to find out locations for free HIV testing.
 In Pasco County free HIV, syphilis and hepatitis C testing will be offered at the **New Port Richey County Health Department**: 1-6PM
- 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. **De Wengrzn, Ray Sanderlin, Alicia Bahadur** 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

All Pinellas County AIDS data is cumulative from 1981 to April 30, 2003
 Source: Pinellas County Health Department, HIV/AIDS Surveillance

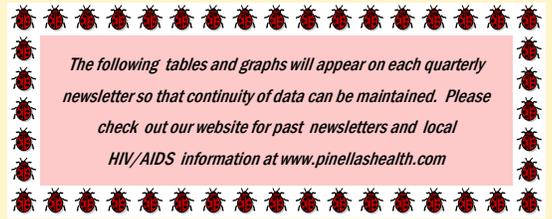


Table 1: AIDS Cases — by RACE

Race	Adults	Pediatric	Total
White	2560 (71%)	12 (50%)	2572 (71%)
Black	892 (25%)	11 (46%)	903 (25%)
Hispanic	159 (4%)	1 (4%)	160 (4%)
Asian/Pacific Is.	13 (0%)	13 (0%)	13 (0%)
Am.Indian/AK. Native	8 (0%)	8 (0%)	8 (0%)
Multi-race	4 (0%)	4 (0%)	4 (0%)
Total	3636 (100%)	24 (100%)	3660 (100%)

Table 2: AIDS Cases — by AGE

Age	Cases (%)	Deaths
0-4	18 (0%)	14 (58%)
5-12	6 (0%)	
13-19	21 (1%)	
20-29	583 (16%)	
30-39	1612 (44%)	2102 (58%)
40-49	993 (27%)	
50+	427 (12%)	
Total	3660 (100%)	2116 (58%)

Table 3: AIDS Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	2115 (68%)		2115 (58%)
Injecting Drug Users	389 (13%)	158 (29%)	547 (15%)
Gay/ Bi Male & IDU	241 (8%)		241 (7%)
Heterosexual Contact	174 (6%)	286 (53%)	460 (13%)
Transfusion Recipients	31 (1%)	25 (5%)	56 (1%)
Coagulation Disorder	14 (0%)		14 (0%)
Risk Not Reported	130 (4%)	73 (13%)	203 (6%)
Total	3094 (100%)	542 (100%)	3636 (100%)

Table 4: AIDS Cases — by Pediatric Risk Categories

Risk Factors (peds)	Males	Females	Total
Mother with HIV	9 (75%)	11 (92%)	20 (84%)
Hemophilia	2 (17%)		2 (8%)
Transfusion	1 (8%)		1 (4%)
Risk Not Reported	0 (0%)	1 (8%)	1 (4%)
Total	12 (100%)	12 (100%)	24 (100%)

Pinellas County HIV Statistics

All Pinellas County HIV data is cumulative from 7/1/97 to April 30, 2003
 Source: Pinellas County Health Department, HIV/AIDS Surveillance



Table 5: HIV Cases — by RACE

Race	Adults	Pediatric	Total
White	500 (55%)	3 (43%)	503 (55%)
Black	338 (37%)	3 (43%)	341 (37%)
Hispanic	47 (4%)	1 (14%)	48 (4%)
Legacy Asian/Pacific Is.	5 (1%)		5 (1%)
Asian	1 (0%)	1 (0%)	1 (0%)
Am.Indian/AK. Native	5 (1%)	5 (1%)	5 (1%)
Multi-race	5 (1%)	5 (1%)	5 (1%)
Unknown	6 (1%)	6 (1%)	6 (1%)
Total	907 (100%)	7 (100%)	914 (100%)

Table 6: HIV Cases — by AGE

Age	Cases (%)	Deaths
0-4	4 (0%)	0 (0%)
5-12	3 (0%)	
13-19	37 (4%)	
20-29	233 (26%)	
30-39	361 (40%)	22 (2%)
40-49	200 (22%)	
50+	76 (8%)	
Total	914 (100%)	22 (2%)

Table 7: HIV Cases — by Adult Risk Categories

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	371 (58%)		371 (41%)
Injecting Drug Users	62 (10%)	57 (21%)	119 (13%)
Gay/ Bi Male & IDU	37 (6%)		37 (4%)
Heterosexual Contact	56 (9%)	121 (45%)	177 (20%)
Transfusion Recipients	3 (0%)	1 (0%)	4 (0%)
Coagulation Disorder	0 (0%)		0 (0%)
Risk Not Reported	109 (17%)	90 (34%)	199 (22%)
Total	638 (100%)	269 (100%)	907 (100%)

Table 8: HIV Cases — by Pediatric Risk Categories

Risk Factors (peds)	Males	Females	Total
Mother with HIV	2 (100%)	2 (40%)	4 (57%)
Risk Not Reported		3 (60%)	3 (43%)
Total	2 (100%)	5 (100%)	7 (100%)

Pasco County AIDS Statistics

All Pasco County AIDS data is cumulative from 1981 to April 30, 2003
 Source: Pinellas County Health Department, HIV/AIDS Surveillance



Table 9: **AIDS Cases — by RACE**

Race	Adults	Pediatric
White	505 (83%)	3
Black	61 (10%)	
Hispanic	40 (7%)	
Other/Unknown	4 (0%)	
Total	610 (100%)	3 (100%)

Table 11: **AIDS Cases — by Adult Risk Categories**

Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	278 (55%)		278 (46%)
Injecting Drug Users	70 (14%)	32 (30%)	102 (17%)
Gay/ Bi Male & IDU	53 (10%)		53 (8%)
Heterosexual Contact	44 (9%)	58 (56%)	102 (17%)
Transfusion Recipients	13 (3%)	3 (3%)	16 (3%)
Coagulation Disorder	3 (1%)		3 (0%)
Risk Not Reported	45 (9%)	11 (11%)	56 (9%)
Total	506 (100%)	104 (100%)	610 (100%)

Table 10: **AIDS Cases — by AGE**

Age	Cases (%)	Deaths
0-12	3 (0%)	
13-19	4 (1%)	
20-29	87 (15%)	
30-39	272 (44%)	
40-49	165 (27%)	
50+	82 (13%)	
Total	613 (100%)	333 (54%)

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 April 30, 2003
 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	107 (72%)
Black	22 (15%)
Hispanic	14 (9%)
Other/Unknown	5 (4%)
Total	148 (100%)

Table 15: **HIV Cases — by Adult Risk Categories**

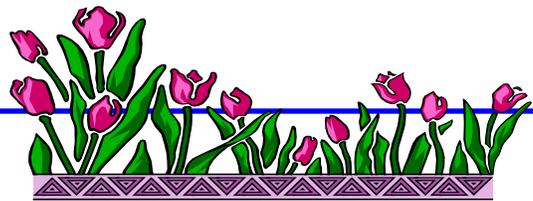
Risk Factors (adults)	Males	Females	Total
Gay/Bisexual Men	48 (46%)		48 (32%)
Injecting Drug Users	12 (12%)	7 (16%)	19 (13%)
Gay/ Bi Male & IDU	7 (7%)		7 (5%)
Heterosexual Contact	10 (10%)	25 (57%)	35 (24%)
Risk Not Reported/Other	27 (25%)	12 (27%)	39 (26%)
Total	104 (100%)	44 (100%)	148 (100%)

Table 14: **HIV Cases — by AGE**

Age	Cases (%)	Deaths
0-19	10 (7%)	
20-29	40 (28%)	
30-39	54 (36%)	
40-49	27 (18%)	
50+	17 (11%)	
Total	148 (100%)	0 (0%)

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

Florida HIV/AIDS Statistics



Source: Florida Department of Health, Bureau of HIV/AIDS
 HIV/AIDS, STD & TB Monthly Surveillance Report, #224
 If additional state data is needed please go to "www.doh.state.fl.us"

Table 24: **Cumulative HIV Case Counts for Florida**

* Note: HIV cases do not include cases that have converted to AIDS (7/1/97-4/30/03)

	HIV	Deaths
Total	29738	661 (2%)
Adult	29459	657 (2%)
Pediatric	279	4 (1%)

Table 25: **Cumulative AIDS Case Counts for Florida**
(through 4/30/03)

	AIDS	Deaths
Total	92014	50211 (55%)
Adult	90555	49393 (55%)
Pediatric	1459	818 (56%)

Table 26: **Cumulative HIV/AIDS Case Counts in Surrounding Counties**

* Note: HIV cases are regardless of AIDS status (as of 4/30/03)

County	HIV	AIDS
Hillsborough	2353	5234
Pinellas	1287	3663
Polk	576	1458
Sarasota	219	888
Manatee	372	861
Pasco	206	592
Hernando	73	191
Highlands	96	162
Hardee	20	66

Table 27: **Cumulative HIV/AIDS Case Counts in the Top 7 Florida Counties**

* Note: HIV cases are regardless of AIDS status (as of 4/30/03)

County	HIV	AIDS
Miami-Dade	11131	26415
Broward	6068	14441
Palm Beach	3331	8769
Orange	2878	5319
Hillsborough	2353	5234
Duval	1998	4607
Pinellas	1287	3663

United States HIV/AIDS Statistics

Adults & Children estimated to be **living** with HIV/AIDS in U.S. in 2002: 980,000
 Estimated number of adults & children **newly** infected with HIV in U.S. during 2002: 45,000

Table 28: **Cumulative HIV/AIDS Case Counts for U.S.**
(as of 4/30/03)

	HIV	AIDS	% AIDS Deaths
Total	205725	871654	56%
Adult	201280	862415	56%
Pediatric	4445	9239	57%

(Source: Florida HIV/AIDS, STD & TB Monthly Surveillance Report, #224)

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 31: **Cumulative AIDS Cases of 10 Leading U.S. States**
(as of 4/30/03)

1. New York 157018 (18%)
2. California 129941 (15%)
3. **Florida 91733 (10%)**
4. Texas 60538 (7%)
5. New Jersey 45696 (5%)
6. Illinois 28941 (3%)
7. Pennsylvania 28737 (3%)
8. Georgia 26463 (3%)
9. Maryland 25753 (3%)
10. Massachusetts 17995 (2%)

(Source: Florida HIV/AIDS, STD & TB Monthly Surveillance Report, #224)

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

Table 29: **Cumulative HIV* Cases of 5 Leading U.S. States**
(as of 4/30/03)

1. New York (12/00) 32216 (15%)
2. **Florida (7/97) 29291 (14%)**
3. New Jersey (1/92) 16201 (8%)
4. Texas (2/94) 15930 (8%)
5. North Carolina (2/90) 11785 (6%)

(Source: Florida HIV/AIDS, STD & TB Monthly Surveillance Report, #224)

* Data only from those states where HIV is reportable & 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 12/31/01)

- | | |
|-------------------------|-------------------------------|
| 1. New York City 126237 | 11. San Juan, PR 16372 |
| 2. Los Angeles 43488 | 12. Baltimore 15792 |
| 3. San Francisco 28438 | 13. Boston 14945 |
| 4. Miami 25357 | 14. Ft. Lauderdale 13594 |
| 5. Washington DC 24844 | 15. Dallas 13119 |
| 6. Chicago 22703 | 16. San Diego 11070 |
| 7. Philadelphia 20369 | 17. Tampa-St Pete 9006 |
| 8. Houston 19898 | 18. Oakland 8347 |
| 9. Newark 17796 | 19. Detroit 8196 |
| 10. Atlanta 17157 | 20. West Palm Beach 8118 |

(Source: Centers for Disease Control, HIV/AIDS Surveillance Report, Vol. 13, No.2)

World HIV/AIDS Statistics

From W.H.O. (www.who.int) & UNAIDS (www.unaids.org):

Reported World AIDS Cases as of 11/01: **2,784,317**

Estimated living World HIV/AIDS Cases as of 2002: **42 million**

Estimated new HIV infections in World in 2002: **5 million**

Estimated World deaths due to HIV/AIDS in 2002: **3.1 million**

Estimated Cumulative number of deaths in World due to HIV/AIDS: **21.8 million**



- <http://www.doh.state.fl.us>
- <http://www.cdc.gov>
- <http://www.who.int>
- <http://www.paho.org/english/aid/aidstd.htm>
- <http://www.iapac.org>
- <http://www.flairs.org/tcrs/aidstline.htm>
- <http://hivinsite.ucsf.edu>
- <http://www.hivatis.org/trtgdlns.html>

- Florida HIV/AIDS statistics
- Centers for Disease Control
- World Health Organization
- PAHO: AIDS site
- Int'l Assoc of Physicians in AIDS care
- Florida AIDS Hotline site
- HIV/AIDS InSite Information
- HIV/AIDS treatment site



HIV/AIDS Surveillance Office
 Pinellas County Health Department
 205 Dr. M.L. King Street North
 Disease Control, Room #3-148
 St Petersburg, FL 33701

“Routine HIV Tests Endorsed by CDC”

Atlanta Journal-Constitution (04.18.03)::M.A.J. McKenna; David Wahlberg

HIV testing should become a routine part of medical care, especially for pregnant women unless they specifically request otherwise, CDC said Thursday. The recommendations to state health departments, which are not legally binding, form part of a new strategy aimed at preventing HIV transmission by people who do not know they are infected. The strategy places HIV on a par with other health problems - such as high cholesterol - for which people are screened once they are suspected to be at risk.

“Each year we continue to see about 40,000 new HIV infections domestically,” said CDC Director Dr. Julie Gerberding. “We have well over 800,000 people living with HIV in our country, but an estimated 200,000 of these people do not know they are infected.... This is an intolerable situation,” she said.

The strategy has four main components:

***Routinely offering HIV tests as part of medical appointments in high HIV-prevalence locations, or when personal background makes it likely patients are at high risk.**

***Making 20-minute rapid HIV tests available in non-medical settings such as jails and homeless shelters. These recently approved tests are mostly used in medical institutions.**

***Tracing the partners of those found to be HIV-infected and offering them testing and training in prevention.**

***Making HIV one of the conditions for which pregnant women are checked, unless they specifically refuse to be tested, and encouraging testing of all new born children.** About 300 children are born with HIV in the United States each year. CDC did not specify whether newborn testing should be mandatory.

Jeff Graham, executive director of the Atlanta-based AIDS Survival Project, said he is concerned that CDC’s HIV testing program downplays counseling, ignores needle exchange programs, and could lead to coercive testing of prisoners and pregnant women. Giving the rapid HIV test with little or no counseling could take away opportunities to explain low-risk behaviors and to refer newly diagnosed people to good treatment programs, Graham said. Marc Isaac, vice president of the Elizabeth Glaser Pediatric AIDS Foundation in New York, applauded the prenatal testing emphasis, but cautioned that women should retain the right to refuse the test for themselves and their infants. **The recommendations can be found at <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5215a1.htm>.**

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:

**BETH GUSTAFSON, MPH
 PINELLAS COUNTY HEALTH DEPARTMENT
 205 DR. M.L. KING STREET NORTH
 ST PETERSBURG, FL 33701
 (727) 824-6903 ; SUNCOM 513-1068
 FAX: (727) 820-4271
 EMAIL: BETH_GUSTAFSON@DOH.STATE.FL.US**

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, Alicia Bahadur, Dolores (De) Wengrzyn or Ray Sanderlin.

