



Health Alert Network

Tri-County Health Department

Serving Adams, Arapahoe and Douglas Counties

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John M. Douglas, Jr., M.D. Executive Director

The pages that follow contain information critical to protecting the health of your patients and the citizens of Colorado.

HAN ADVISORY

Number of pages including cover: 4

Subject: **Advisory - Increase in HIV in Colorado, especially among females and people who inject drugs - August 12, 2019**

Message ID: 8/14/2019 5:00:00 PM

Recipients: HAN Community Members.

From: TRI-COUNTY HEALTH DEPARTMENT

Adams, Arapahoe and Douglas County, Colorado

Recipient Instructions: **Tri-County Health Department is forwarding you the attached HAN. You may have already received this broadcast if you are on the CDPHE distribution list, however, we wanted to ensure you did not miss this important information. No response is required.**

You have received this message based upon the information contained within our Health Alert Network Notification System. If you have a different or additional e-mail or fax address that you would like us to use, or if you have additional questions, call 720-200-1477.

Categories of Health Alert Network Messages:

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Info Service/Public Health Brief: Provides general information that is not necessarily considered to be of an emergent nature.

You may download a copy of this HAN from the TCHD website at
<http://www.tchd.org/259/Health-Alert-Network>

HEALTH ADVISORY | Increase in HIV in Colorado, especially among females and people who inject drugs | August 12, 2019

Health care providers: Please distribute widely in your office

Key points

- Health care providers and persons working on HIV harm reduction should be aware of an increase in newly diagnosed cases of HIV in Colorado.
- From January to June 2019, 236 cases of newly diagnosed with HIV have been reported, with a disproportionate number of cases in females, people who inject drugs (PWID), and people living in the Denver metro area (Adams, Arapahoe, Broomfield, Denver, Douglas, and Jefferson Counties).
- Providers should:
 - Provide HIV testing in accordance with current national recommendations:
www.cdc.gov/hiv/guidelines/testing.html
 - Ensure all patients diagnosed with HIV are tested for Hepatitis C (HCV) and all patients diagnosed with HCV are tested for HIV.
 - Offer pre-exposure prophylaxis (PrEP) services for those at risk for acquiring HIV including females and PWID.

Background information based on data from the Colorado Department of Public Health and Environment

- Provisional 2019 HIV surveillance data shows that 236 cases of newly diagnosed HIV were reported to CDPHE from January to June 2019 compared with 196 cases during the same time period in 2018 – representing a 20% increase. Most (72%) of the 2019 cases were diagnosed among persons living in the six-county Denver metro area (defined as Adams, Arapahoe, Broomfield, Denver, Douglas, and Jefferson Counties), which is also higher than during first two quarters of 2018 (64%).
- Racial/ethnic disparities continue to persist in 2019. Hispanics made up 33% of newly diagnosed HIV cases, and blacks made up 13%, yet those groups comprise 23% and 4% of Colorado's population, respectively.
- HIV cases reported in females has markedly increased in 2019 – 15% of the 2019 cases were females, which was significantly higher than in the same time period in 2018 (9%).
 - Among new HIV diagnoses in females during 2019:
 - 60% are aged 20-39 years.
 - 71% were diagnosed in the Denver metro area.
 - 94% were U.S born.

- 34% are Hispanic, 31% white, 23% black.
 - 20% were pregnant at HIV diagnosis.
 - 23% have a history of drug use, including methamphetamine/heroin/cocaine/opiates.
 - 11% were diagnosed with AIDS within 30 days of the initial HIV diagnosis, indicating a potential missed opportunity for detecting HIV earlier in the disease progression.
- HIV cases reported in people who inject drugs (PWID) increased slightly thus far in 2019 (6%, compared with 4% during the same time period in 2018).
 - Among new HIV diagnoses in PWID during 2019:
 - 85% are male.
 - 62% are aged 30-39.
 - 62% were diagnosed in the Denver metro region (defined as Adams, Arapahoe, Broomfield, Denver, Douglas, and Jefferson Counties).
 - 62% are white, 23% Hispanic, 15% black.
 - 46% were co-infected with HIV and HCV.
 - 15% were diagnosed with AIDS within 30 days of the initial HIV diagnosis, indicating a potential missed opportunity for detecting HIV earlier in the disease progression.

Recommendations / guidance

- Provide HIV testing in accordance with the current national recommendations.
www.cdc.gov/hiv/guidelines/testing.html
- Report all cases of HIV to CDPHE within four days. www.colorado.gov/pacific/cdphe/report-a-disease
- Screen persons at higher risk for HIV at least annually, including: PWID and their sex partners, patients who exchange sex for money or drugs, sex partners of individuals living with HIV, men who have sex with men (MSM), or heterosexual persons having more than one sex partner since their most recent HIV test.
www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm
- Provide HIV testing for all persons seeking treatment for sexually transmitted infections (STIs), regardless of the person's HIV risk factors.
- Ensure that persons diagnosed with HIV are tested for HCV, and persons diagnosed with HCV are tested for HIV.
- Offer pre-exposure prophylaxis (PrEP) for persons at risk for acquiring HIV including females and PWID.
www.cdc.gov/hiv/pdf/risk/prep/cdc-hiv-prep-guidelines-2017.pdf
- Link all patients newly diagnosed with HIV to care for full evaluation, prompt initiation of antiretroviral therapy, and ensure retention in care. Early treatment of HIV is essential to rapidly reduce viral load, improve patient outcomes, and to prevent further transmission.
www.cdc.gov/actagainstaids/campaigns/pic/materials/treatment-and-care.html

Female-specific recommendations

- Provide HIV testing annually for females at higher risk.
- Include HIV screening in the routine panel of prenatal screening tests for all pregnant females. Perform a second HIV test during the third trimester for all women at higher risk for HIV.
- Use of PrEP in females:

- Offer PrEP to adult heterosexually active females who are at higher risk for HIV, including those with sexual partners who are known to be living with HIV or unknown HIV status.
- PrEP can be used by mixed couples/sero-different heterosexual couples in which one sexual partner is living with HIV and the other is HIV-negative, during conception and pregnancy.
- For females who are breastfeeding, evaluate PrEP's benefits and risks, including HIV transmission, breastfeeding health benefits, and potential adverse effects of PrEP on the infant/child.

PWID-specific recommendations

- Offer HIV and HCV testing at least annually to patients who report current or past injection drug use.
 - Refer PWID to syringe service programs. A list of syringe service programs in Colorado is available here: www.colorado.gov/pacific/cdphe/reducing-infections-injection-drug-use
 - Encourage PWID to use sterile equipment for each injection and educate them about safe injection practices and safe disposal of syringes.
 - Offer PrEP for PWID who report sharing injection equipment, especially those with injection partners who are living with HIV.
 - Recommend hepatitis A (HAV) and hepatitis B (HBV) vaccine for patients who report current injection drug use.
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For more information

CDPHE's STI/HIV Website: www.colorado.gov/pacific/cdphe/sti-hiv

CDPHE Disease Intervention Specialist/Linkage to Care: 303-692-6226 or 303-692-2734

CDPHE Disease Reporting Line: 303-692-2700 or 303-370-9395 (after hours)