



HIPC Data Update 2020

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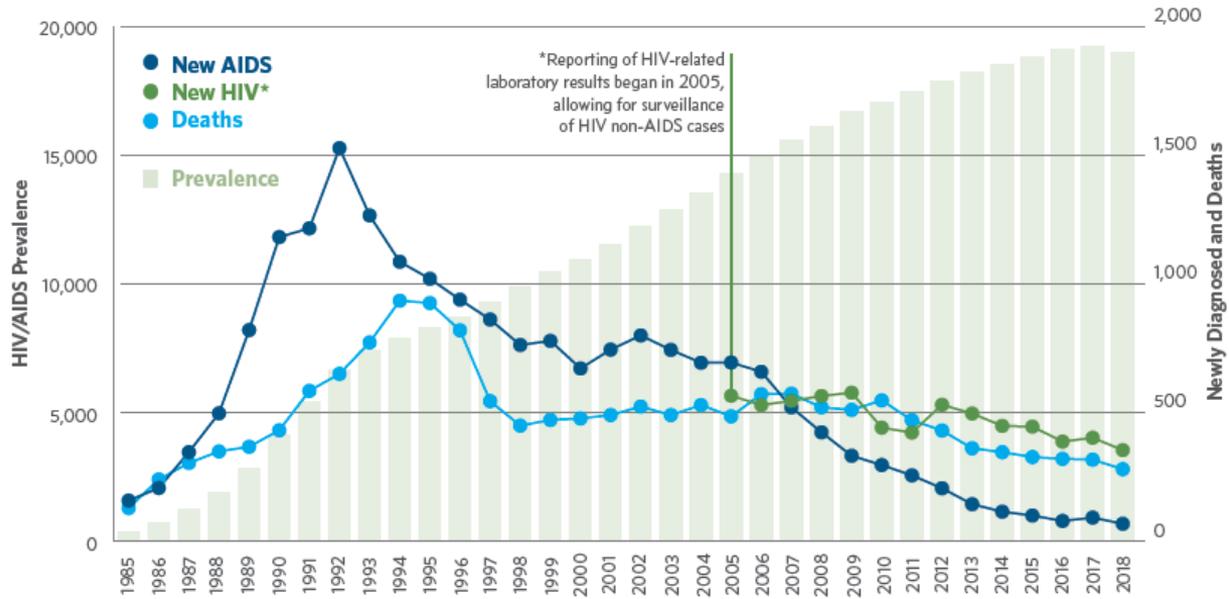


City of
Philadelphia



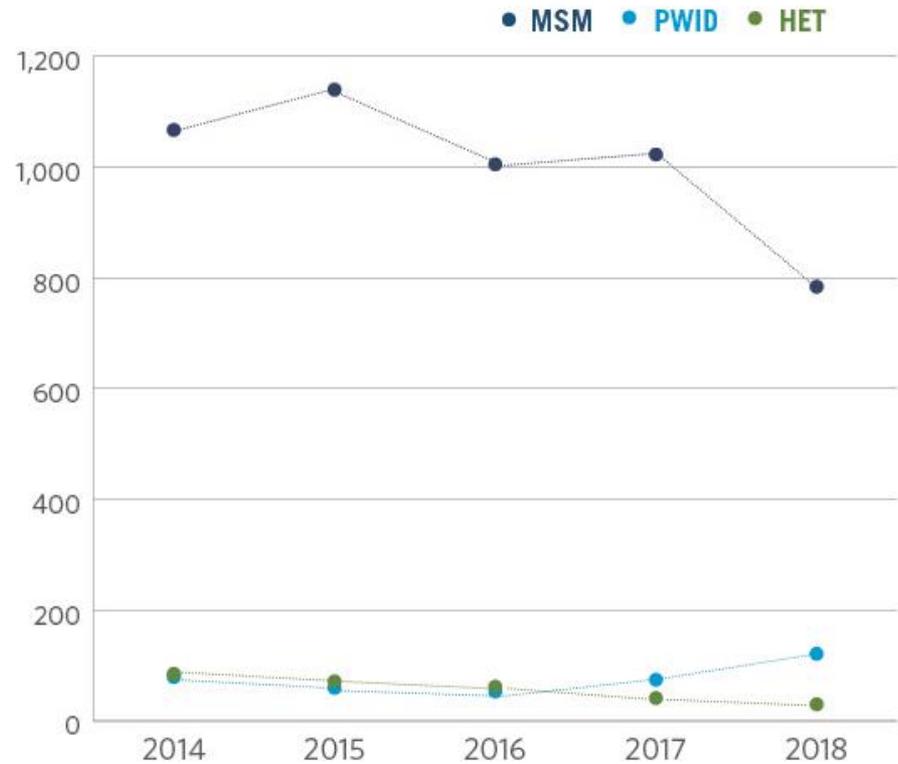
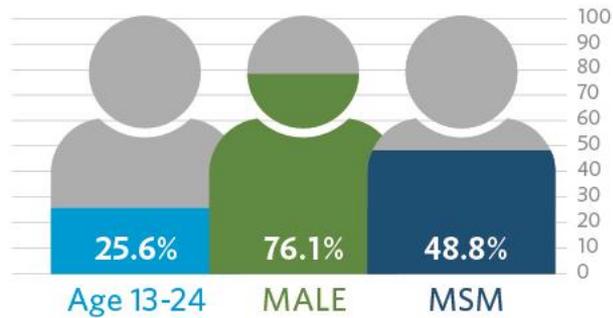
Data Update

FIGURE 5
Philadelphia HIV and AIDS Diagnoses, Deaths,
and People Living with HIV by Year | 1985-2018

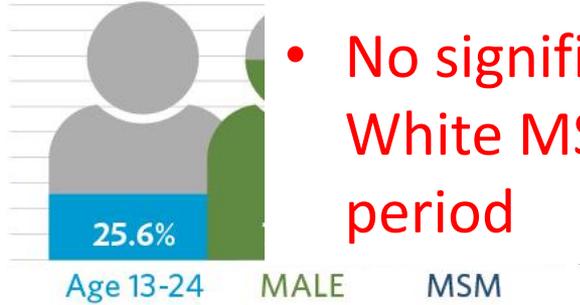


Philadelphia New HIV Diagnoses, 2018

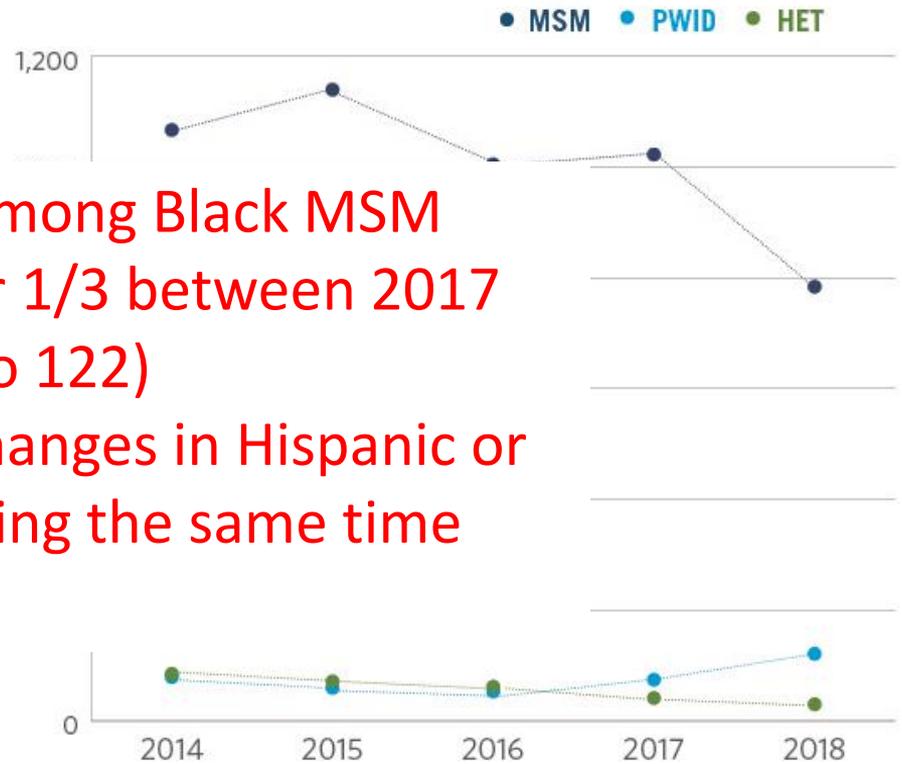
N=424



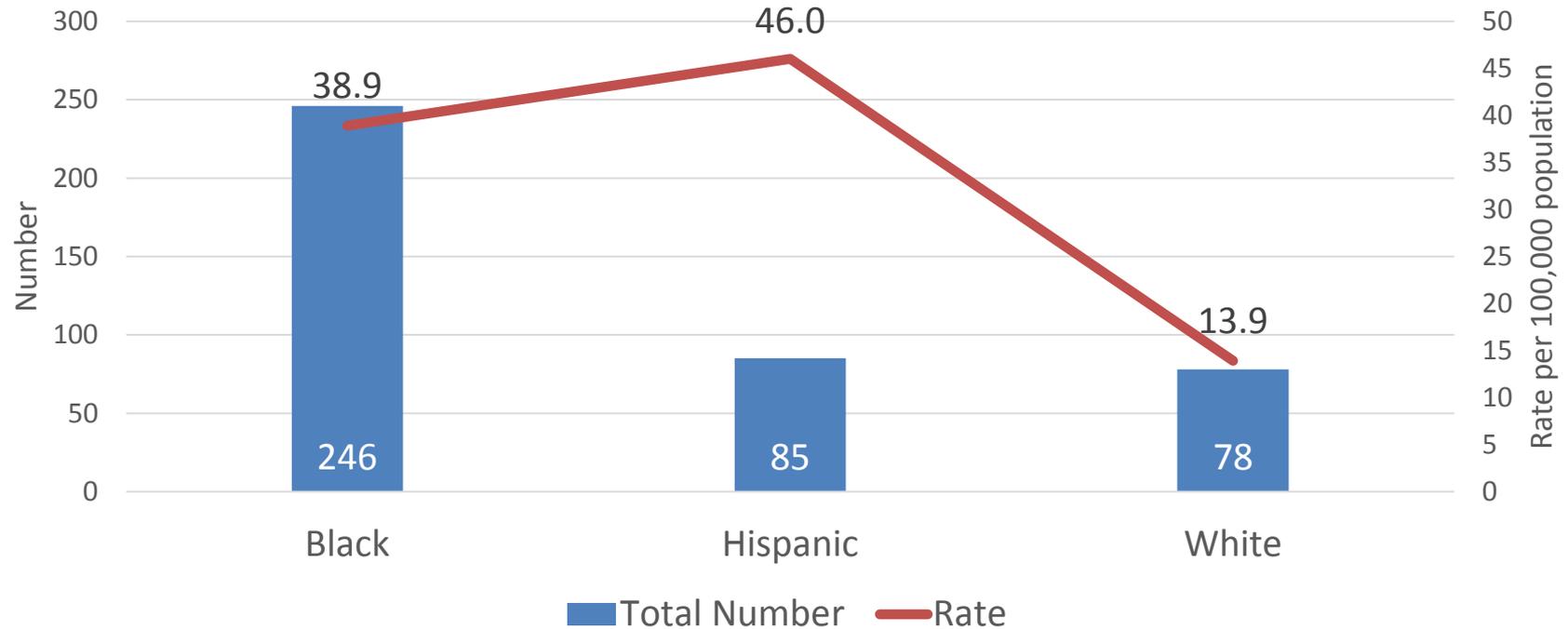
Philadelphia New HIV Diagnoses, 2018



- HIV diagnoses among Black MSM declined by over 1/3 between 2017 and 2018 (188 to 122)
- No significant changes in Hispanic or White MSM during the same time period

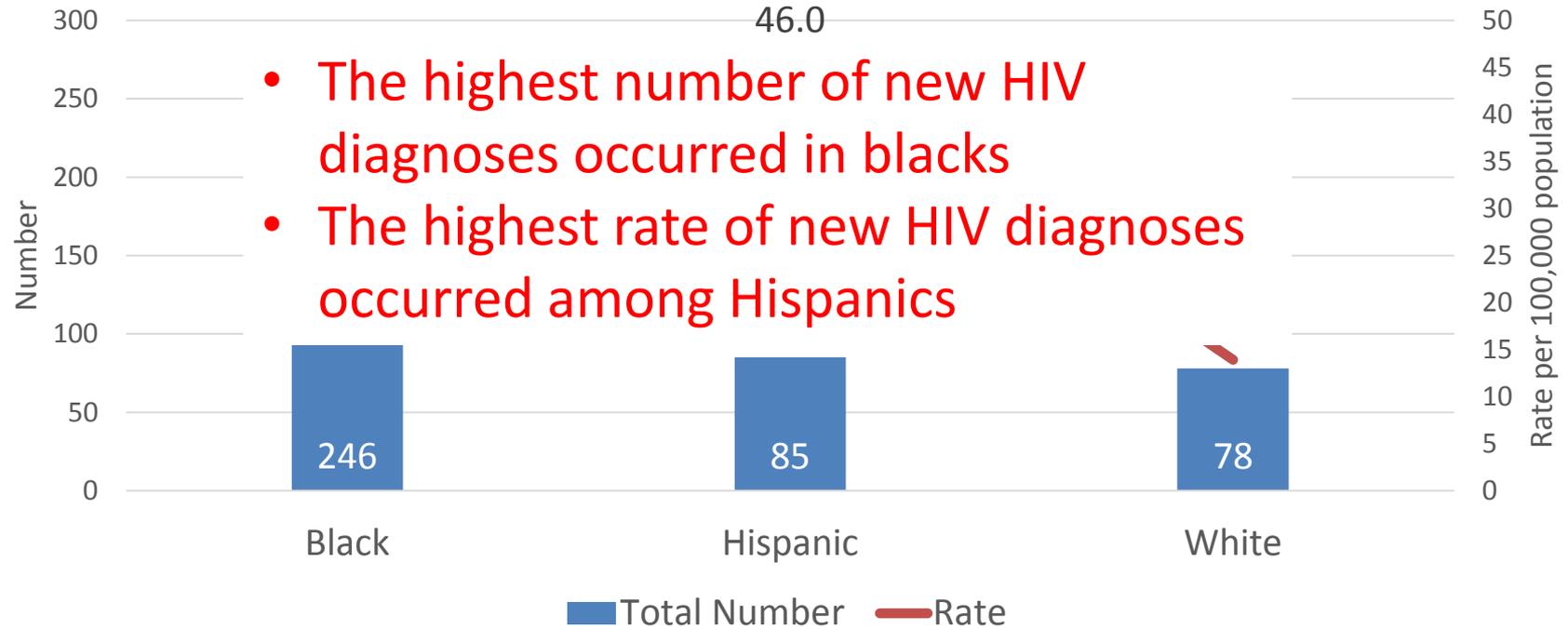


New Diagnosed HIV by Race/Ethnicity, 2018



Source: PDPH/AACO 2019

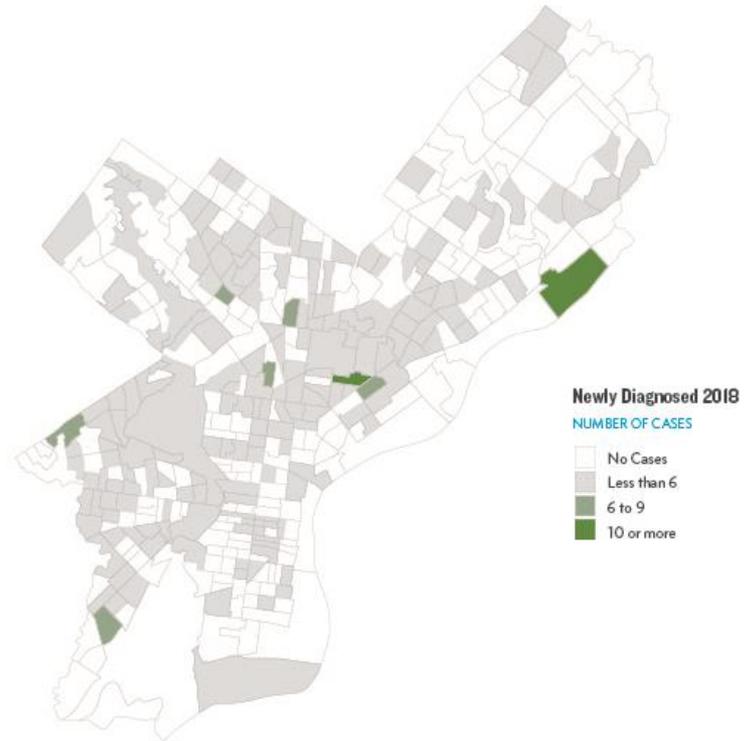
New Diagnosed HIV by Race/Ethnicity, 2018



HIV Diagnoses† by Census Tract, 2018

*Number of cases in this census tract is inflated due to the location of the Philadelphia Department of Prisons

†HIV diagnoses regardless of AIDS status



PWID

115% increase in new HIV diagnoses in PWID between 2016 to 2018 (33 to 71 diagnoses)



HIV Continues to Spread Among People Who Inject Drugs

This issue of CHART provides an update on the ongoing HIV outbreak among people who inject drugs in Philadelphia.

Using Interrupted Time Series Analysis to Measure the Impact of Legalized Syringe Exchange on HIV Diagnoses in Baltimore and Philadelphia

Monica S. Ruiz, PhD, MPH,^a Allison O'Rourke, MPH,^b Sean T. Allen, DrPH, MPH,^c David R. Holtgrave, PhD,^c David Metzger, PhD,^{d,e} Jose Benitez, MSW,^f Kathleen A. Brady, MD,^g C. Patrick Chaulk, MD, MPH,^h and Leana S. Wen, MDⁱ



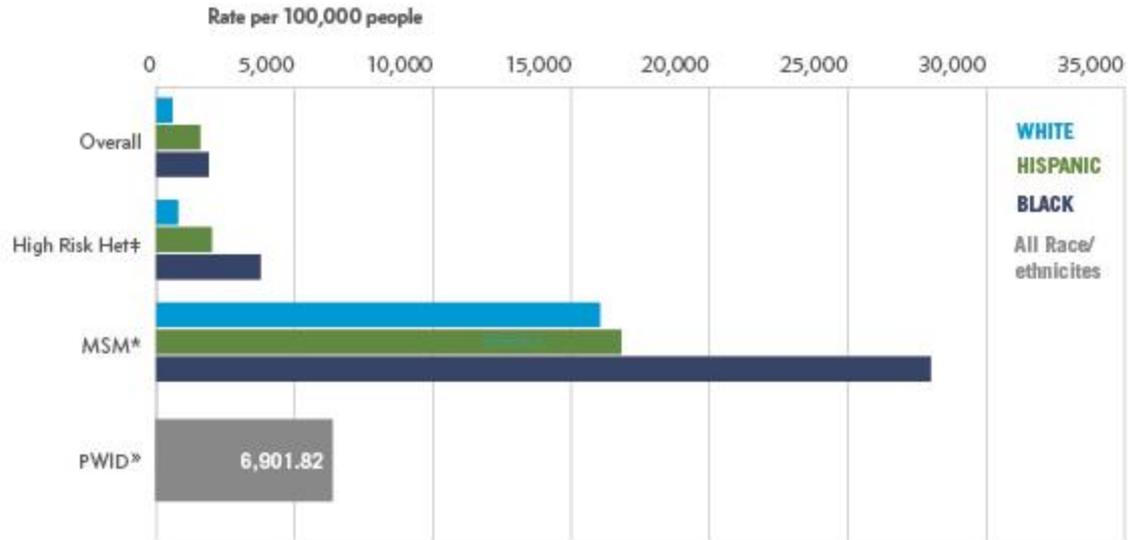
HIV Diagnoses in the EMA

- 638 new HIV diagnoses across the EMA in 2018
 - 2/3 were in Philadelphia
- Concurrent HIV/AIDS (AIDS diagnosis within 3 months of person's HIV diagnosis)
 - Of persons newly diagnosed with HIV
 - 1 in 6 were concurrent in NJ counties
 - 1 in 5 in Philadelphia
 - 1 in 3 in PA counties
 - Males, blacks/AA, Hispanics, age ≥ 30 , and heterosexuals more likely to be diagnosed late

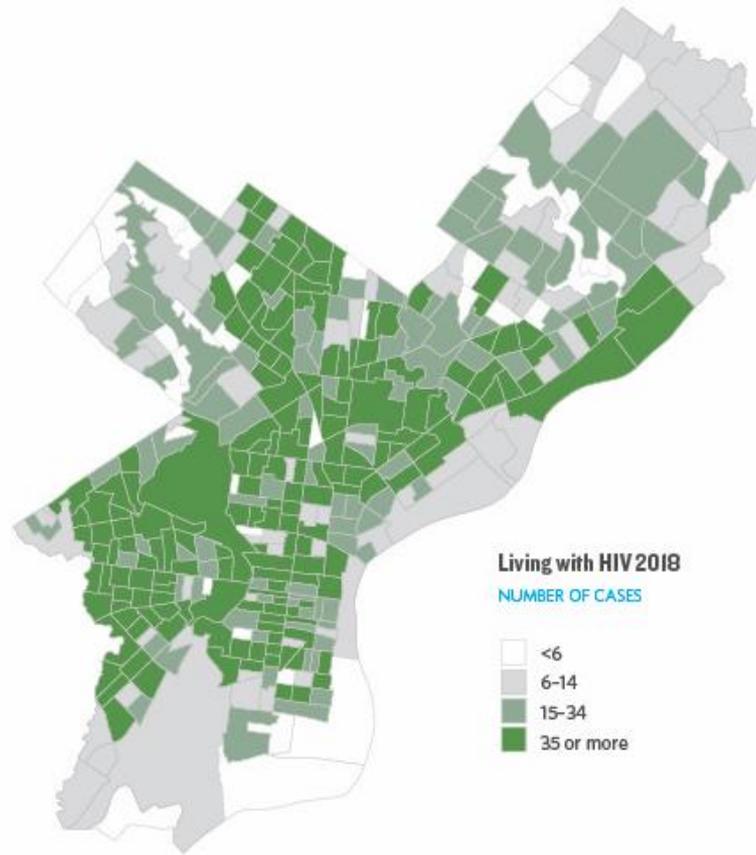
PLWH in Philadelphia, 2018

N=19,011

- Race
 - 63.8% Black/AA
 - 15.5% Hispanic
 - 17.1% White
- Age
 - 52.5% are >50 years old
- Transmission
 - 37.5% MSM
 - 34.5% HET
 - 19.9% PWID
- Gender
 - 304 Trans Female
 - 32 Trans Male



PLWH by Census Tract, 2018

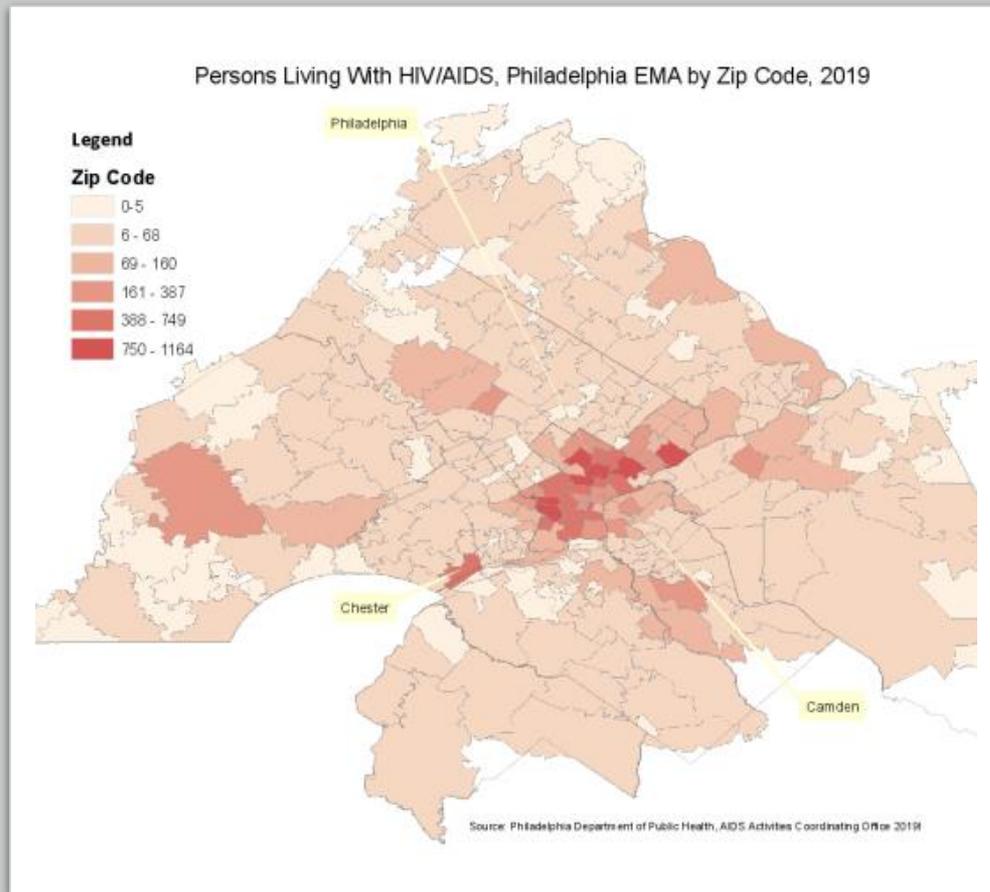


Source: PDPH/AACO 2019

PLWH by Zip Code, Philadelphia EMA, 2018

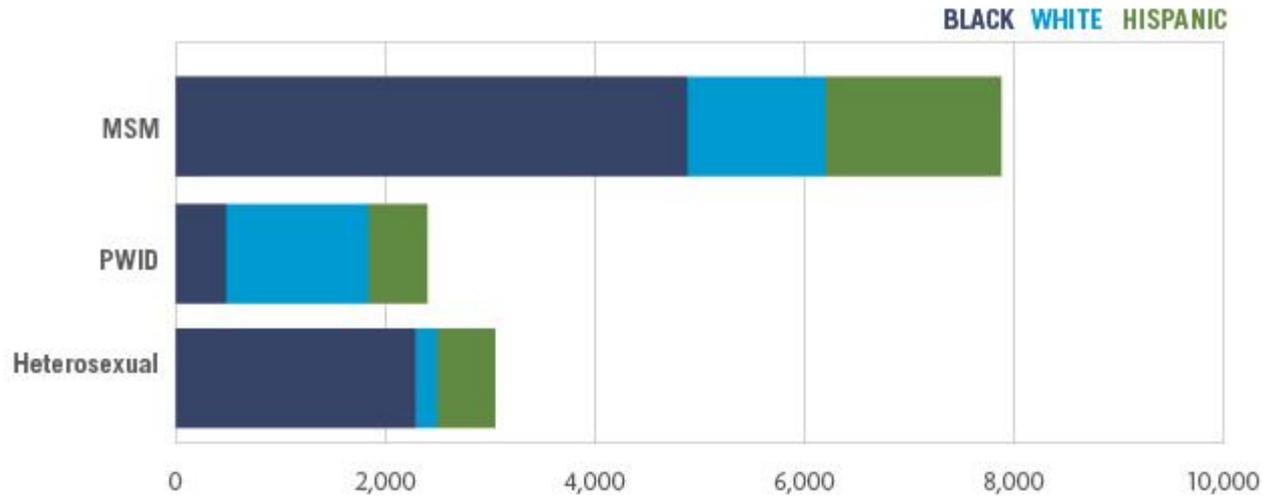
N=26,757

- 71% of PLWH live in Philadelphia
- 2.9% of PLWH live in the City of Camden
- 1.8% of PLWH live in the City of Chester

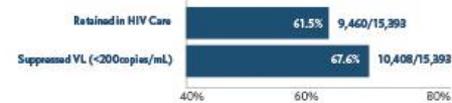
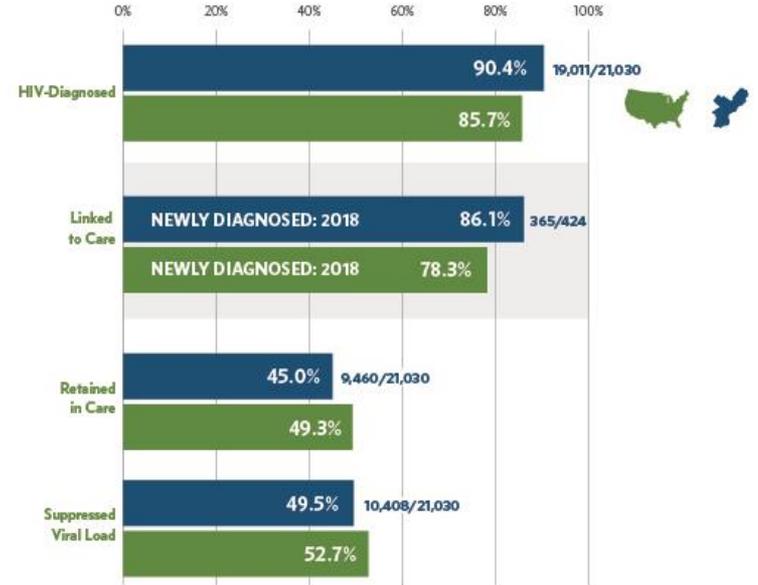


Source: PDPH, AIDS Activities Coordinating Office, 2019

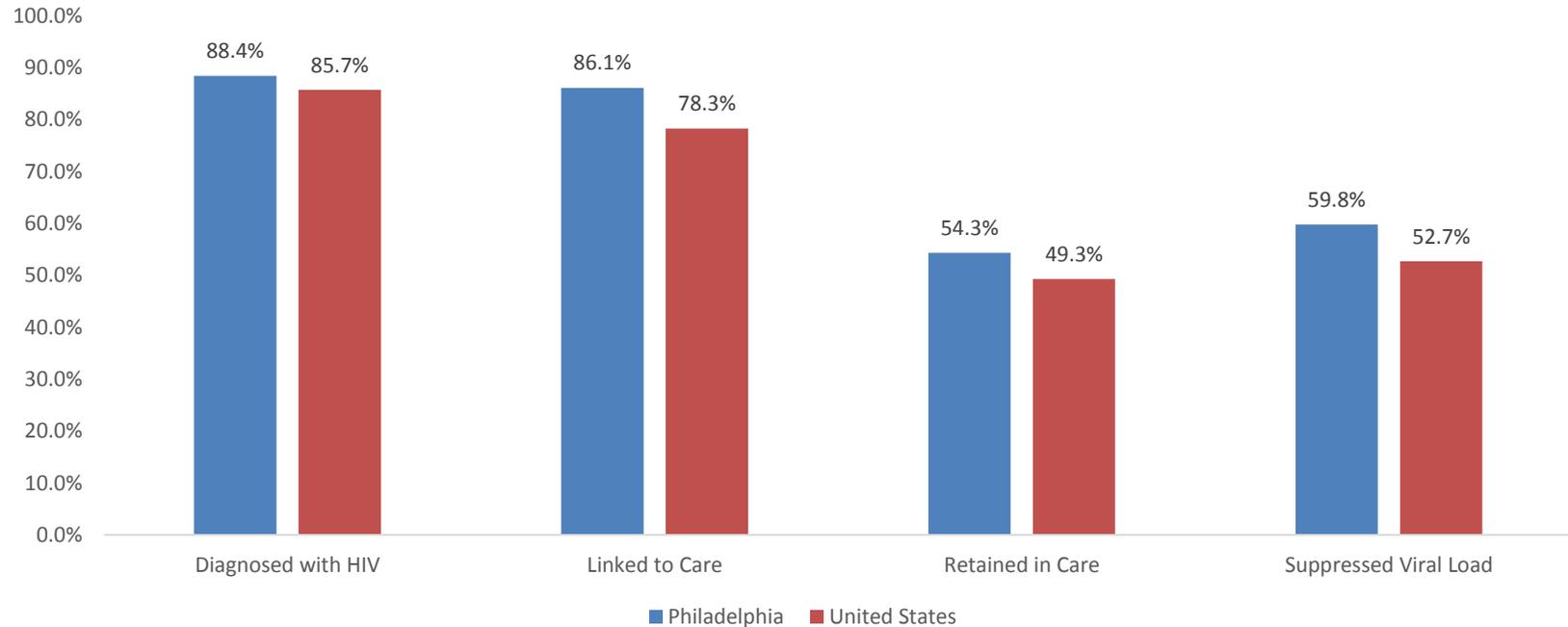
PrEP Indication by Transmission Category and Race/Ethnicity



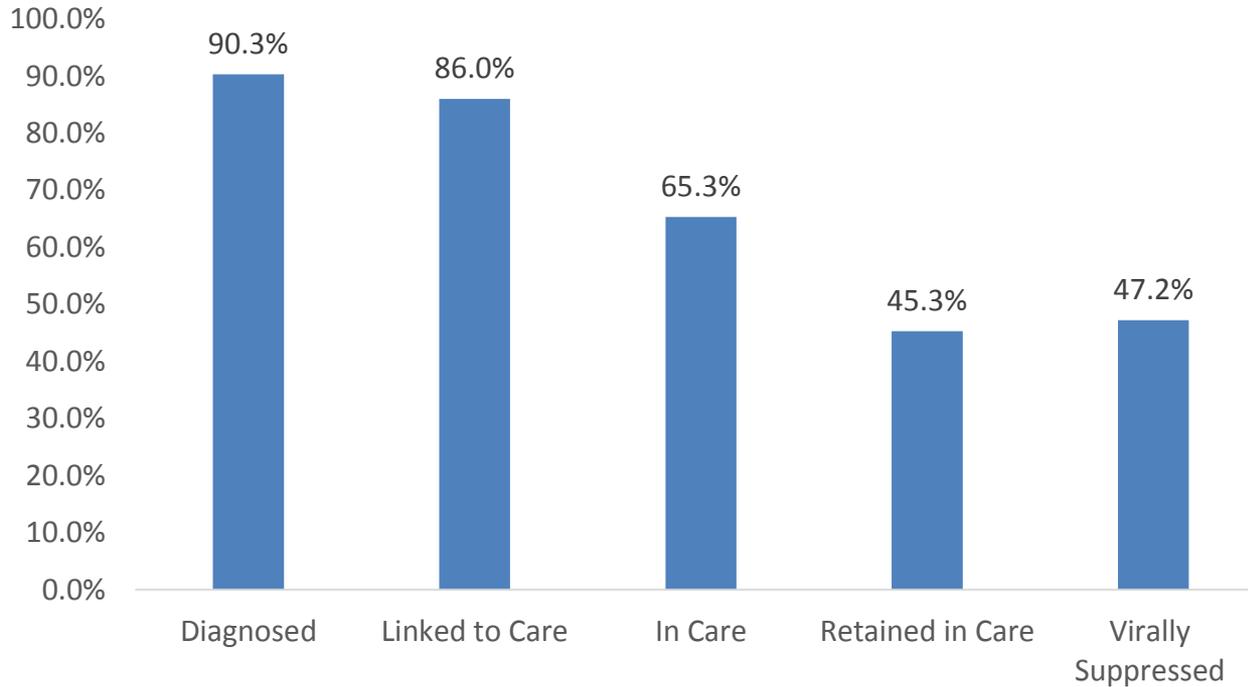
Philadelphia Prevalence-Based Continuum, 2018



Modified HIV Care Continuum Philadelphia vs. the United States 2018



Philadelphia EMA HIV Care Continuum, 2018





Dashboard

Diagnosis

- New HIV Diagnosis Rate
- Proportion diagnosed

Care Continuum Outcomes

- Linked to care in 30 days
- In HIV care
- Viral Suppression

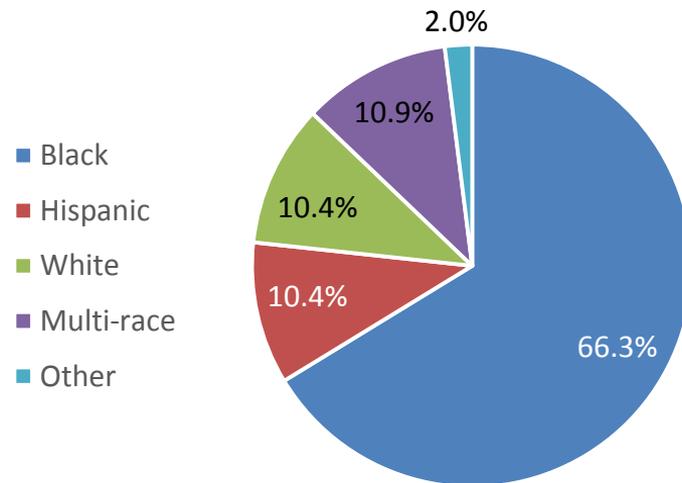
Disparities

- Black PLWDH
- Hispanic PLWDH
- Transgender PLWDH
- PWID PLWDH

Transgender PLWH

- 304 Transgender WLWH
 - 79.6% sexual transmission
 - 18.4% PWID
- 32 Transgender MLWH
 - 90.6% sexual transmission
- NHBS-Trans cycle
 - Data collection began in 8/2019
 - Goal to conduct 200 interviews in trans women
 - 193 interviews completed to date (plus 12 seeds)
 - 47.3% self-reported HIV+

Race of Transgender WLWH





Ending the HIV Epidemic

Ending the HIV Epidemic

Ending
the
HIV
Epidemic

GOAL:

75%
reduction in new
HIV infections
in 5 years
and at least
90%
reduction
in 10 years.



www.hiv.gov

CS302517B

Figure 1: Ending the HIV Epidemic in Philadelphia

Federal Goals:

75% 
in new HIV
infections in 5
years.

90% 
in new HIV
infections in 10
years.



By 2025, 97% of people living with HIV will know their HIV status.

Pillar 1
Diagnose



By 2025, 91% of PLWH, who are in HIV care, will be virally suppressed.

Pillar 2
Treat



By 2025, 50% of people with a PrEP indication will be prescribed PrEP, and 100% of people seeking PEP will be prescribed treatment.

Pillar 3
Prevent



Identify and investigate active HIV transmission clusters and respond to HIV outbreaks.

Pillar 4
Respond



Ensure that the HIV workforce is appropriately trained, supported, and capable of meeting the goals of the Philadelphia EHE plan.

**Workforce
Development**

Philadelphia, 2018

Philadelphia %/(Number) of people, per Surveillance	Status of Care	Accounted for X% of New Transmissions
11.8% (N=2,019)	Don't know they have HIV	40.2%
14.0% (N=2,395)	Know they have HIV but are not in care	35.3%
10.0% (N=1,710)	In care but are not virally suppressed	24.5%
64.2% (N=10,961)	Taking HIV medication and are virally suppressed	0.0%

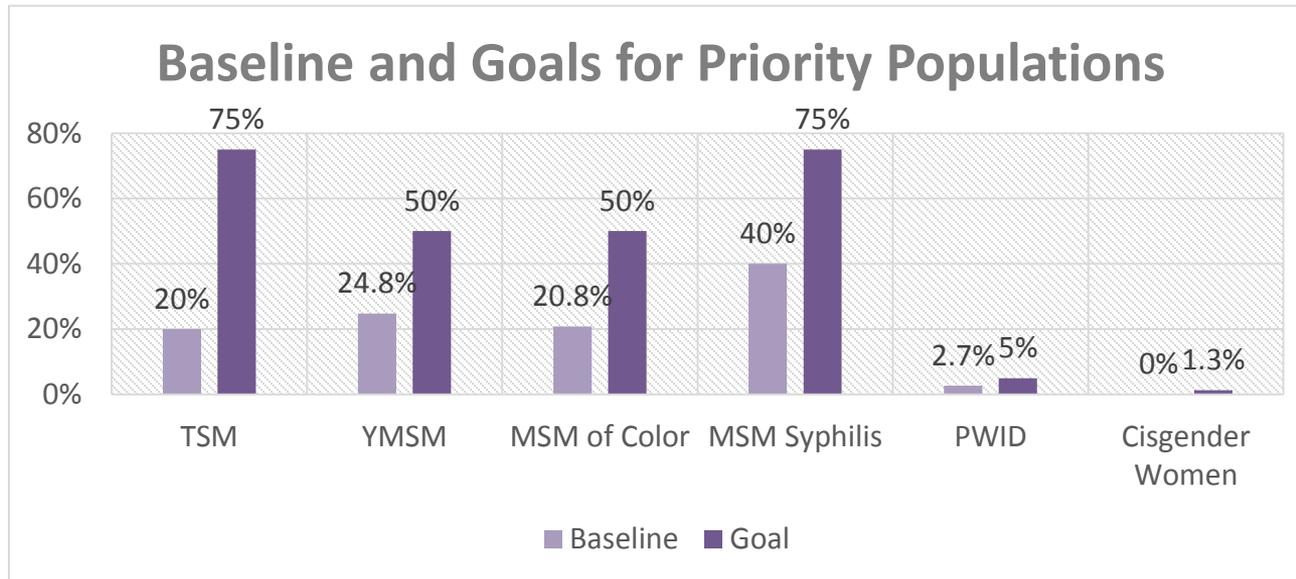
Number and Percent PLWH Needed to Reach the 2025 Goal to End the HIV Epidemic in Philadelphia*

HIV Care Continuum Measure	Number in 2018	Number by 2025	Change Needed to Achieve 2025 EHE Goals
Unaware	2,019	505	↓ 1,514
Diagnosed, not in care	2,395	599	↓ 1,796
In care not virally suppressed	1,710	428	↓ 1,282
Virally suppressed	10,961	15,554	↑ 4,593

At the end of the 5-year EHE initiative, 97% of PLWH will be diagnosed with HIV, 97% retained in HIV medical care, and 91% will be virally suppressed.

*Assumes no change in current HIV prevention efforts other than increases in HIV testing and is based primarily on treatment as prevention activities.
 Source: PDPH, AIDS Activities Coordinating Office, 2019

Goal Setting for PreP



Over the 5-year period, 50% of people with a PrEP indication will be prescribed PrEP, and 100% of people seeking nPEP will be prescribed treatment. Consider breaking this into two goals.



Questions?

Kathleen A. Brady, MD

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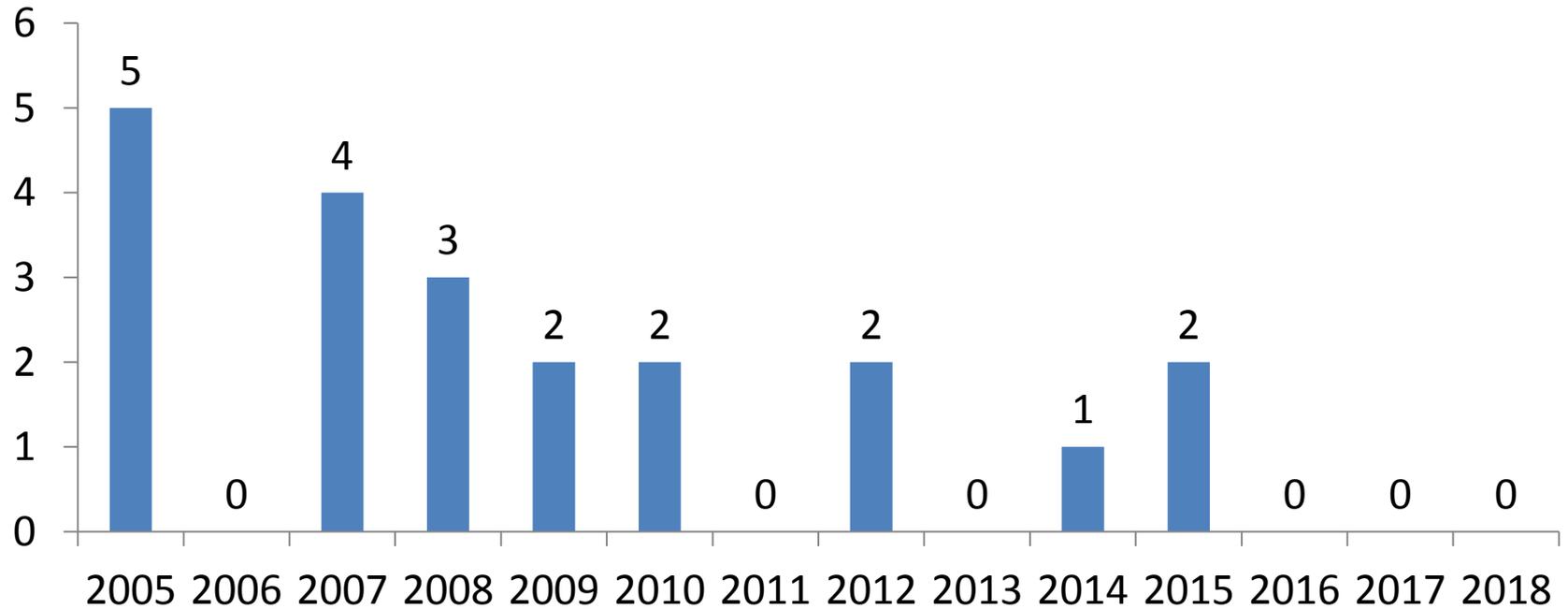
Phone; 215-685-4778



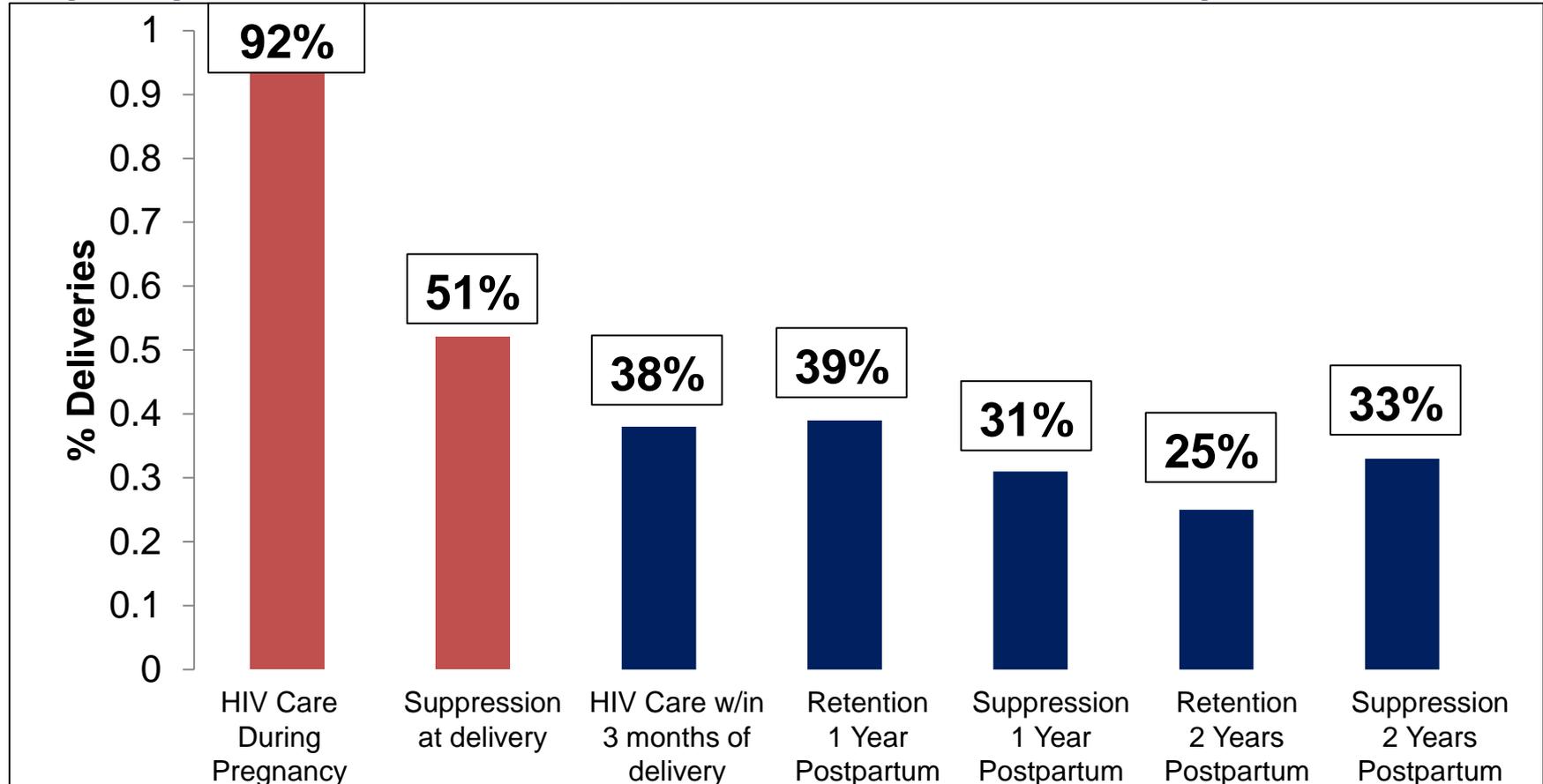


Perinatal HIV Prevention

Philadelphia Perinatal Transmissions, 2005-2018



Despite pediatric successes, mothers with HIV have poor outcomes



Momplaisir, F., et al. *PLOS ONE* (2015), Adams, JW., et al. *Clin Infect Dis* (2015)



The System of Perinatal HIV Prevention in Philadelphia

Surveillance

- PHER/Pediatric HIV Case Surveillance
- eHARS match to vital statistics birth records
- Data to care activities
- FIMR-HIV

Prevention

- Perinatal HIV Prevention Coordination
 - Perinatal Case Management
 - Partner Services
 - FIMR-HIV
- 



FIMR-HIV: The cornerstone of HIV Perinatal Prevention in Philadelphia

Staff:

- One FTE (who also does PHER/HIV Surveillance) to conduct FIMR-HIV case reviews and interviews
- Staff time by Medical Director/Medical Epidemiologist and Perinatal HIV Prevention Coordination Team

Funding Source: Fully funded under 18-1802

When Started: 2010

Activities:

- Priority cases for review identified from HIV surveillance
 - Case Review Team meetings 10 times per year (Review 20-25 cases)
 - Community Action Team meetings twice a year
- 



FIMR-HIV Successes

- Brings all parts of the perinatal prevention system together along with community stakeholders
 - Identifies missed opportunities for prevention of perinatal HIV transmission and near misses
 - Sets and addresses the priorities for perinatal HIV prevention
 - Highly successful in implementing action steps identified to close gaps in prevention of perinatal HIV transmission
- 



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