# Australian HIV Surveillance Report

National Centre in HIV Epidemiology and Clinical Research

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## **Epidemiology of HIV/AIDS in New Zealand**

Notification of all cases of AIDS in New Zealand has been a statutory requirement since August 1984. HIV infection is not notifiable, but information on people found to be infected with HIV is provided by the two laboratories that perform confirmatory tests for HIV antibodies.

#### AIDS in New Zealand

The first case of AIDS in New Zealand was notified in 1984. By the end of 1994, 473 people had been reported, giving a cumulative incidence rate of 14.1 per 100,000. The comparable Australian rate to the end 1994 was 32.1 per 100,000 population. The annual number of males and females notified by the end of 1994, by year of diagnosis, are shown in Figure 1.1 (except for 10 people for whom no date of diagnosis was available).

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## **ANNOUNCEMENTS**

## **Ž** National meetings

Australasian Epidemiological Association Annual Conference will be held in conjunction with the Public Health Association of Australia 27th annual conference in Cairns, Queensland, on 24 - 27 September 1995. Telephone: (070) 503 650, Facsimile: (070) 311 440, email: rstreatfield@peg.apc.org

The 7th Annual Conference of the Australasian Society for HIV Medicine will be held in Coolum, Queensland, on 16 - 19 November 1995.
Telephone: (07) 253 1661, facsimile: (07) 253 1388.

## **Ž** International meetings

Asian-Pacific Congress on the Management of HIV Infection, Bangkok, Thailand, that was to be held on 19 - 23 June 1995 has been cancelled. The new date will be in February/March 1996. Telephone: (44) (0) 625 618 507 Facsimile: (44) (0) 625 616 563.

Third International Conference on AIDS in Asia and the Pacific and the Fifth National AIDS Seminar in Thailand will be held in Chiang Mai, Thailand, on 17 - 21 September 1995. Telephone: (66) (2) 939 2239, Facsimile: (66) (2) 939 2122, email: oithri@chulkn.chula.ac.th

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In the past, over 90% of people have been notified within a year of diagnosis, so the total diagnoses recorded before 1994 are unlikely to change appreciably. Notification is believed to be relatively complete. A study linking those on the AIDS register with requests for zidovudine found that 94% of zidovudine users who had progressed to AIDS had been notified, with no significant decrease in the proportion over time (Paul and Dickson 1993).

As seen in Figure 1.1, since 1989 there has been first a levelling off and subsequently a drop in the annual incidence of AIDS. The most likely explanation is that there has been a decline in the number of new HIV infections among gay men during the mid 1980's. Such a decline could have occurred because of changes in sexual behaviour and because of relative saturation with HIV infection of the highest risk groups. It is unlikely that the drop in the number of new cases of AIDS could be explained solely by treatments delaying the progression of HIV infection to AIDS, as no interventions have been shown to have had a sustained effect.

Of the 473 people with AIDS notified by the end of 1994, 454 (96%) were male and 19 (4%) female. At the time of diagnosis 69% were aged between 30 and 49 years, with 1.3% under 20 years and 2.3% 60 years or older. The sex and age distribution of people with AIDS in New Zealand is very similar to that found in Australia.

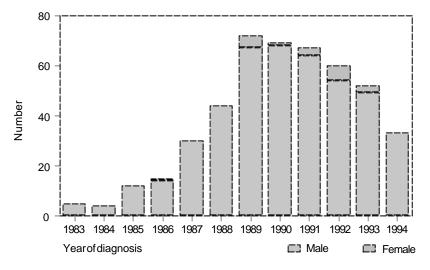


Figure 1.1

Number of AIDS notifications in New Zealand by sex and year of diagnosis

There is considerable mobility of people with AIDS between New Zealand and Australia. An investigation of dual notification showed 11% of the people notified with AIDS in New Zealand by the end of 1990 were also on the Australian AIDS register (Kaldor *et al* 1993).

Ethnic group was reported as European/Pakeha for 82.5%, as Maori for 11%, as Pacific Island for 2.5%, as another ethnic group for 2.5%, and was unknown for 1.5%. To date no ethnic group has been disproportionately affected. The great majority of cases are from the North Island. The Northern Regional Health Authority, which is comprised mainly of Auckland, has a cumulative incidence of AIDS of 26.0 per 100,000 which is higher than any Australian state except New South Wales.

The risk categories of people notified as having AIDS are shown in Table 1.1. Men who were reported to have had sex with other men were by far the largest group, accounting for 84% of people with AIDS. A similar proportion has been found in Australia. Overall 6.2% of the people with AIDS in New Zealand were reported to be infected heterosexually, compared to 3.9% in Australia to the end 1994. However, as the overall rate in Australia is higher than in New Zealand, the cumulative incidence rates for heterosexually transmitted cases of AIDS are similar (0.9 and 1.2 per 100,000 for New Zealand and Australia, respectively).

Table 1.1 Number of people notified with AIDS and HIV infection in New Zealand, to 31 December 1994, by sex and exposure category.

EXPOSURE CATEGORY		AIDS		Н	IIV Infection	n
	Male	Female	Total	Male	Female	Total
Male homosexual/bisexual						
contact	399	-	399	571	_	571
Male homosexual/bisexual						
contact and ID use	9	-	9	10	-	10
ID use (female and						
heterosexual male)	8	3	11	24	7	31
Haemophilia	6	0	6	28	0	28
Blood transfusion <sup>1</sup>	1	1	2	2	5	12
Heterosexual contact	15	14	29	25	46	71
Mother with/at risk for HIV infection	0	1	1	1	1	2
Other/undetermined <sup>1</sup>	16	0	16	243	17	272
TOTAL <sup>1</sup>	454	19	473	904	76	997

<sup>1.</sup> Totals includes people whose sex was not reported

A detailed analysis of survival of adult Auckland residents diagnosed with AIDS between 1983 and 1989 has been performed (Dickson *et al* 1993 (b)). Median survival was longer for those diagnosed in 1988 than in earlier years, but shortened again for those diagnosed in 1989. A likely explanation for the shortening is that the introduction of prophylactic treatments against certain opportunistic infections resulted in AIDS was being diagnosed later in the course of HIV disease.

#### **HIV** infection

By the end of 1994, 997 people tested in New Zealand had been found to be infected with HIV. The number and sex of people found to be infected each year is shown in Figure 1.2, and the sex and exposure categories in Table 1.1.

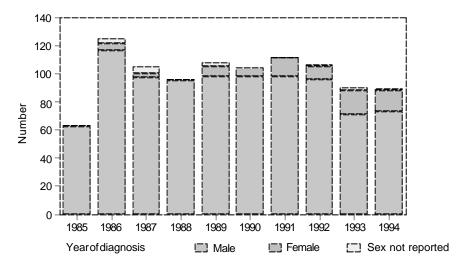


Figure 1.2 Number of diagnoses of HIV infection by sex and year

That more women were found to be infected in 1993 than previously may reflect the publicity that surrounded the case of an African man alleged to have infected several women with HIV in New Zealand. This case highlighted the risk to women and may have prompted more extensive testing.

The most common factor identified among both men and women believed to have acquired HIV heterosexually was having had sex with a person in, or from, a part of the world where heterosexual transmission was common.

The ratio of the number of people found to have been infected with HIV to the

number who have developed AIDS is lower in New Zealand than in Australia. There are several possible explanations for this difference which are being studied at present.

#### Sentinel surveillance

Prevalence studies using unlinked anonymous testing have been conducted in sentinel populations to monitor the spread of HIV into the heterosexual and injecting drug using populations, as well as to monitor the prevalence among men who have sex with men.

The first such study was conducted in sexually transmissible disease (STD) clinics. The results of an anonymous unlinked seroprevalence study performed in Auckland and Christchurch STD clinics in 1991 and 1992 showed that the seroprevalence rate among men who described themselves as homosexual or bisexual was 44 per 1000, among those reported as heterosexual 1.3 per 1000 (a third of the infected men in this group reported homosexual activity at some time in the past), and among females it was 1.1 per 1000 (Dickson *et al* 1993(a)). None of the infected women were reported to be of European, Maori or Pacific Island origin. Among people who had ever injected drugs, 2 of 208 heterosexual men, and none of 151 women were found to be infected.

A national study to determine the prevalence of HIV infection among injecting drug users using the needle and syringe exchange scheme was performed in 1992. Voluntarily supplied saliva samples were tested for antibodies to HIV. Of the 591 samples tested, only three were found to contain antibodies, giving a prevalence rate of 5 per 1000. (Dickson *et al* 1994)

Repeat sentinel surveillance studies are planned, with the possible inclusion of other sentinel groups.

#### Conclusion

In New Zealand as in Australia (Crofts *et al* 1994) the epidemic of HIV infection and AIDS has predominantly affected gay men, and few people have been infected through injecting drug use. The number of men and women believed to have been infected with HIV heterosexually is relatively low. In spite of a drop in the number of cases of AIDS in recent years, similar numbers of people have been found to be infected with HIV each year.

There remains the possibility of extensive spread in the future among injecting drug users, given the high prevalence of hepatitis C among this group (Robinson, Reynolds and Robinson 1995). The potential for heterosexual spread is being investigated in studies of sexual behaviour and condom use (Paul *et al* 1995, Dickson *et al* 1993(c)).

#### **Acknowledgments**

The AIDS Epidemiology Group is supported by the Public Health Commission. We are very grateful to the clinicians who have notified cases of AIDS and responded to our requests for further information.

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# Assessment of reported exposure to HIV for HIV infection newly diagnosed in Australia in 1994

Information on patterns of HIV transmission in Australia, like elsewhere, is based primarily on patients' self-reported behaviours and for this reason is subject to bias (Erickson *et al* 1990, Potterat *et al* 1987). In 1991, an assessment of self-report of exposure to HIV was carried out by four State and Territory health authorities (McDonald *et al* 1994) and in 1994 a revised follow-up protocol was implemented nationally. We report the results of applying this protocol for cases of HIV infection newly diagnosed in Australia in 1994.

Cases of HIV infection included in the assessment of self-report of exposure to HIV were those cases notified to State or Territory health authorities as newly diagnosed in 1994, for which patients initially attributed HIV exposure to a source other than male homosexual or bisexual contact and mother-to-child transmission. The State or Territory health authority forwarded the exposure assessment questionnaire to the doctor involved in the patient's HIV diagnosis, and often to the doctor involved in patient management following diagnosis, and requested that the questionnaire be completed using information available in the patient's medical record or by further discussion with the patient. The questionnaire sought specific information on history of exposure to HIV through either receipt of HIV-infected blood, injecting drug use, heterosexual contact or other sources. Doctors were also asked to indicate if they were generally satisfied with their patient's report of exposure to HIV.

During 1994, 972 cases of HIV infection were newly diagnosed in Australia and exposure to HIV was initially attributed to sources other than male homosexual or bisexual contact and mother-to-child transmission for 304 (31%). Of these 304 cases included in the assessment, most (72%) were male and approximately 50% were diagnosed in New South Wales (Table 2.1). Overall, 44% of these 304 cases attributed their exposure to HIV to heterosexual contact but for 41%, exposure to HIV was not reported. Males represented 85% of cases for which exposure to HIV was not reported (Table 2.2).

By 31 March 1995, 128 questionnaires had been returned to the National Centre in HIV Epidemiology and Clinical Research (NCHECR), giving a response rate of 42% (Table 2.1). The lowest response rate was recorded for cases for which exposure to HIV was initially attributed to receipt of HIV-infected blood (response rate 11%) and cases for which exposure to HIV was not reported (response rate 30%).

Report of exposure to HIV was revised for 38 (30%) cases on the basis of the returned questionnaire (Table 2.2). For 14 and 3 cases originally reported as unknown exposure, the report was revised to heterosexual contact or receipt of HIV-infected

Table 2.1
Number of cases of HIV infection included in the assessment of patient self-report of exposure to HIV in 1994 and number of cases for which the exposure assessment questionnaire was returned to the NCHECR by 31 March 1995, by sex and State/Territory of HIV diagnosis.

STATE/	Numb	er of HIV dia	gnoses	Numb	er of returne	d questi	onnaires
TERRITORY	Male	Female	Total	Male	Female	Total	Response rate (%)
ACT	2	3	5	2	3	5	100
NSW <sup>1</sup>	121	30	157	22	10	32	20
NT	4	0	4	3	0	3	75
QLD	35	11	46	12	5	17	37
SA	5	3	8	5	3	8	100
TAS	0	1	1	0	1	1	100
VIC	41	17	58	34	16	50	86
W A	11	14	25	4	8	12	48
TOTAL <sup>1</sup>	219	79	304	82	46	128	42

1. Totals include 6 people whose sex was not reported

blood. Exposure category of the sexual partner was revised for 7 cases attributed to heterosexual contact, and for 2 cases, exposure to HIV was revised from a specified exposure to an other or unknown exposure. For 12 cases the revised report of exposure was male homosexual contact and these cases were excluded from further analysis.

Testing for HIV antibody among the 116 men and women remaining in the assessment was carried out, in approximately equal proportions, for investigation of possible HIV-related symptoms, perceived risk for HIV infection (such as heterosexual contact with a person with known HIV infection, heterosexual contact overseas or diagnosis of a sexually transmissible disease) or through screening programmes associated with immigration, insurance, blood donation or pregnancy. A significantly higher proportion of men compared to women were tested for HIV antibody because of symptoms (28/39 vs 11/39, p < 0.01), or in screening programmes (24/36 vs 14/36, p = 0.05). An approximately equal proportion of men and women were tested for HIV antibody because of reported risk for HIV infection.

Of 14 cases of HIV infection attributed to injecting drug use on the returned questionnaire, two were described as unreliable as sources of exposure history and one did not return following diagnosis. Of the 11 remaining cases, 5 reported injecting drugs in the month prior to diagnosis, 8 reported a history of ever sharing

injecting equipment and 2 had attended a drug treatment service. A history of heterosexual contact in Australia was reported by 8 cases (Table 1.3).

Table 2.2

Number of cases of HIV infection included in the assessment of patient self-report of exposure to HIV in 1994 and number of cases for which the exposure assessment questionnaire was returned to the NCHECR by 31 March 1995, by HIV exposure category and source of report of HIV exposure category.

EXPOSURE CATEGORY	HIV exposure i to the heal	Exposure to HIV	
	Number of HIV diagnoses	Number of returned questionnaires	reported on the returned questionnaire <sup>1</sup>
Injecting drug use	39	17	14
Heterosexual	19	10	9
Not further specified	20	7	5
Heterosexual contact:  Partner at risk of, or with	134	73	83
known HIV infection	64	41	52
Not further specified	70	32	31
Medically acquired HIV	9	1	4
Other/undetermined	122	37	15
TOTAL	304	128	116

<sup>1.</sup> For 38 cases, the originally reported exposure category was revised to a new category (see text for detail)

Evidence of exposure to HIV in a country where HIV is transmitted primarily by heterosexual contact was provided for 10 cases in females and 14 cases in males. Approximately two thirds of these cases were in people who originated from countries in sub-Saharan Africa and one third originated from South East Asia. For 90% of these cases exposure to HIV was reported as heterosexual contact and for 10% it was attributed to medical treatment in the specified country. More than 85% of these cases arrived in Australia in 1990 or later.

Evidence of exposure to HIV through heterosexual contact with a person from a country where HIV is transmitted primarily by heterosexual contact was provided for 11 cases in males and 5 cases in females. The majority of cases were attributed to heterosexual contact with a person from sub-Saharan Africa. Four women attributed

Table 2.3
Number of cases of HIV infection newly diagnosed in Australia in 1994 for which HIV exposure was attributed to sources other than male homosexual contact and mother-to-child transmission and number of doctors generally satisfied with report of HIV exposure, by sex and exposure documented on the questionnaire.

EXPOSURE CATEGORY		re document ned questio			generally s eported exp	
	Male	Female	Total	Male	Female	Total
Injecting drug use	6	5	11	6	5	11
Heterosexual	4	4	8	4	4	8
Not further specified	2	1	3	2	1	3
Heterosexual contact:	41	38	79	31	37	68
Sex with ID user	1	0	1	1	0	1
Sex with bisexual male	-	4	4	-	3	3
Fromspecifiedcountry	14	10	24	13	10	23
Sex with person from						
specified country	11	9	20	8	9	17
Sex with person with						
medicallyacquiredHIV	1	0	1	1	0	1
SexwithHIV-infected						
person, exposure						
notspecified	1	6	7	1	6	7
Not further specified	13	9	22	7	9	16
Haemophilia/coagulation						
disorder	0	0	0	-	-	-
Receipt of blood						
components/tissue	1	1	2	1	1	2
Other exposure	1	1	2	1	1	2 2
Not known	4	0	4			
Under investigation	17	1	18			
TOTAL	70	46	116			

exposure to HIV to heterosexual contact in Australia with a person from one of these countries. For 28% of cases attributed to heterosexual contact, no sexual partner at risk of HIV infection or with known HIV infection could be identified.

Two cases of HIV infection attributed to receipt of HIV-infected blood over the period 1981 - 1985 were newly diagnosed in 1994 and two cases attributed to sources other than sexual contact, receipt of blood components or injecting drug use were documented. One of these cases was attributed to an occupational exposure in a health care worker and has been reported elsewhere (Baird 1994). Exposure to HIV

for the second case was attributed to medical treatment in a developing country. Eighteen cases remain under investigation.

The doctor was generally satisfied with the report of exposure to HIV for cases attributed to injecting drug use, origin in a specified country and receipt of HIV infected blood (Table 1.3). Of cases attributed to heterosexual contact in Australia, the doctor was not satisfied with the report of exposure to HIV in 27% of cases for which no sexual partner at risk of HIV infection could be identified.

Based on the exposure assessment questionnaire, documentation of exposure to HIV for 128 cases of HIV infection newly diagnosed in 1994 has resulted in clarification of source of exposure to HIV in the majority of cases and no evidence of novel sources of exposure to HIV has been presented. Of concern is the high proportion (58%) of cases for which no exposure assessment questionnaire was returned. It is essential that doctors, laboratories and health authorities work together to continue to improve the quality of information on HIV exposure in Australia.

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# CHARACTERISTICS OF CASES OF AIDS AND HIV INFECTION IN AUSTRALIA, $1986\,-\,1994$

Table 3.1
Characteristics of cases of newly diagnosed HIV infection, 1986 – 1994, by year.
Number of cases, mean age, and percent of total cases for each year by sex, State/
Territory of diagnosis and exposure category.

Description	1986	1987	1988	1989	1990	1991	1992	1993	1994
Total cases	2628	2773	1713	1609	1404	1417	1205	1050	984
Males (%) <sup>1</sup>	95.6	96.1	94.7	94.7	92.6	94.3	92.0	92.7	91.7
Mean age									
Males Females	31 32	33 33	33 31	33 28	32 30	33 32	35 34	34 31	34 31
State/Territory (%)									
ACT	1.2	8.0	0.6	0.7	1.0	0.6	1.2	0.6	1.6
NSW	72.7	75.1	68.1	59.2	56.0	57.7	56.0	53.4	47.6
N T QLD	0.2	0.5	0.2	0.4	0.6	0.4	0.5	0.8	0.7
SA	5.8 2.1	5.1 2.4	7.1 2.9	10.2 4.5	10.6 4.6	11.1 3.2	13.2 2.8	13.5 5.3	18.6 3.6
TAS	0.1	0.2	0.1	0.8	0.6	0.4	0.8	0.4	0.2
VIC	13.6	12.8	16.9	20.3	21.7	21.8	21.3	21.7	22.4
WA	4.3	3.1	4.1	3.9	4.9	4.8	4.2	4.3	5.3
Exposure category (%) <sup>2</sup>									
Male homosexual/									
bisexual contact	84.2	85.9	83.4	80.7	79.5	78.6	74.9	76.4	73.5
Male homosexual/									
bisexual contact and		0.0	0.0	0.4	0.0	0.7	0.5	0.0	<b>5</b> 0
ID use	2.7	3.2	2.0	3.1	3.0	2.7	3.5	3.6	5.0
ID use (female and heterosexual male)		4.0	7.4	0.7	۰. ۲			4.0	4.4
Heterosexual contact	5.0 2.0	4.8 3.2	7.4 5.0	6.7 7.2	6.5 9.4	5.5 11.1	5.5 14.1	4.6 14.3	4.1 15.3
Haemophilia/	2.0	3.2	5.0	1.2	9.4	11.1	14.1	14.3	15.5
coagulation disorder	4.1	1.6	0.7	0.3	0.1	0.3	0.2	0.0	0.1
Receipt of blood	".'	1.0	0.7	0.5	0.1	0.5	0.2	0.0	0.1
components/tissue	2.0	1.3	1.5	1.6	1.4	1.2	1.4	0.8	0.9
Mother with/at risk for		0	0	0				0.0	0.0
HIV infection	0.0	0.0	0.0	0.4	0.1	0.6	0.4	0.3	1.1
Other/undetermined	50.6	40.4	24.1	26.1	30.8	28.3	16.1	14.3	12.3

<sup>1.</sup> Proportion of males among cases whose sex was reported.

<sup>2.</sup> The 'Other/undetermined' category was excluded from the calculation of the percentage of cases attributed to each exposure category.

Table 3.2 Characteristics of newly diagnosed AIDS cases 1986 – 1994 by year. Number of cases, mean age, and percent of total cases for each year by sex, State/Territory of diagnosis, exposure category and AIDS-defining condition.

Description	1986	1987	1988	1989	1990	1991	1992	1993	1994
Total cases	231	382	533	610	663	796	772	782	787
Males (%)	97.0	96.1	97.0	97.5	97.1	96.5	95.3	94.8	96.2
Mean age		00	07	07	07	07	00	00	00
Males Females	38 52	36 40	37 30	37 34	37 36	37 36	38 39	38 37	38 32
State/Territory (%)									
ACT NSW	0.9 69.2	0.8 65.5	1.5 59.7	1.5 58.2	1.5 62.5	1.0 55.2	1.0 54.3	1.1 56.4	1.3 58.4
NT QLD	0.0 5.6	0.0 6.5	0.0 7.3	0.1 8.0	0.3 8.7	0.6 10.4	0.6 11.5	0.6 11.3	0.4 10.8
SA	2.2	2.4	4.1	4.8	3.8	4.8	4.3	5.8	5.2
TAS VIC	0.0 16.9	0.5 20.9	0.2 22.5	1.0 21.5	0.6 18.7	0.4 23.0	1.2 22.0	0.2 21.4	0.6 20.5
WA	5.2	3.4	4.7	4.9	3.9	4.6	5.1	3.2	2.8
Exposure category (%) Male homosexual/									
bisexual contact Male homosexual/	87.0	86.9	88.9	86.2	85.8	80.8	79.5	77.8	80.1
bisexual contact and ID use	4.7	2.4	2.8	3.3	2.4	3.6	4.7	6.8	4.4
ID use (female and heterosexual male) Heterosexual contact	0.9	0.5	2.1	2.3	2.4	3.6	1.9	3.2	2.5
Haemophilia/ coagulation disorder	0.0	1.6 1.8	1.7 1.3	1.5 2.1	2.9 1.8	4.8 1.4	6.4 1.7	6.5 1.3	5.6 0.8
Receipt of blood components/tissue	5.6	5.2	1.3	1.6	1.7	2.4	1.9	1.1	1.3
Mother with/at risk for									
HIV infection Other/undetermined	0.0 0.9	0.0 1.6	0.2 1.7	0.2 2.8	0.4 2.6	0.4 3.0	0.4 3.5	0.0 3.3	0.3 5.0
AIDS-definingcond'n(%)									
Pneumocystis carinii pneumonia (PCP) Kaposi's sarcoma (KS)	37.2	41.4	39.6	34.9	28.5	30.7	26.6	22.0	21.7
Kaposi's sarcoma (KS) - skin PCP and other (not KS)	15.2 9.5	17.5 8.1	15.0 6.8	13.9 5.3	10.7 8.6	11.7 6.0	12.2 6.2	11.1 3.8	10.3 2.6
HIV encephalopathy Other	0.0 38.1	1.1 31.9	2.2 36.4	4.1 41.8	4.4 47.8	2.5 49.1	2.3 52.7	3.5 59.6	4.7 60.7

# THE NATIONAL AIDS REGISTRY

Table 4.1 Cases of AIDS and deaths following AIDS by sex and State/Territory in which diagnosis of AIDS was made, cumulative to 31 December 1994, and for two previous yearly intervals.

## Cases

STATE/ TERRITORY	1 Jan 93 Male	3 – 31 Dec 93 Female	1 Jan 9 Male	94 – 31 Dec 94 Female	C Male	umulative Female	to 31 D Total	ec 94 %
ACT	9	0	9	1	64	3	67	1.2
NSW	425	14	445	13	3259	112	3381	58.9
NT	5	0	3	0	23	0	23	0.4
QLD	80	7	83	2	521	23	546	9.5
SA	42	3	39	2	235	14	249	4.3
TAS	2	0	5	0	31	2	33	0.6
VIC	154	11	152	8	1155	37	1198	20.9
W A	24	1	21	1	229	11	240	4.2
TOTAL <sup>†</sup>	741	36	757	27	5517	202	5737	100.0

#### **Deaths**

ACT NSW	2 339	0 11	10 336	0 13	46 2247	2 74	48 2327	1.2 58.0
NT	8	0	3	0	17	0	17	0.4
QLD	74	4	62	4	355	17	374	9.3
SA	27	5	31	3	148	10	158	3.9
TAS	5	0	3	1	21	2	23	0.6
VIC	157	3	148	7	879	19	904	22.5
W A	20	0	22	3	157	6	163	4.1
TOTAL <sup>†</sup>	632	23	615	31	3870	130	4014	100.0

<sup>†.</sup> Total columns of Tables 4.1 - 4.6 and 9.1 include 18 cases and 14 AIDS deaths in people whose sex was reported as transsexual.

Table 4.2 Incidence of AIDS per million current population by sex and State/Territory of diagnosis, from 1 January 1981 to 31 December 1994, and for two yearly intervals prior to 31 December 1994<sup>1</sup>.

STATE/	1 Jan 93	- 31 Dec 93	1 Jan 94	- 31 Dec 94	Cumula	tive to 31 [	Dec 94
TERRITORY	Male	Female	Male	Female	Male	Female	Total
ACT	60.0	0.0	59.4	6.7	422.7	20.1	222.7
NSW	142.5	4.6	148.0	4.3	1083.6	36.8	558.7
NT	56.9	0.0	33.9	0.0	259.9	0.0	134.4
QLD	51.2	4.5	51.8	1.3	325.1	14.4	170.8
SA	57.8	4.1	53.4	2.7	322.1	18.9	169.4
TAS	8.6	0.0	21.3	0.0	132.4	8.4	69.9
VIC	69.6	4.9	68.6	3.5	521.1	16.4	267.6
W A	28.5	1.2	24.6	1.2	267.8	13.0	141.0
TOTAL	84.2	4.1	85.4	3.0	620.8	22.6	321.5

<sup>1.</sup> Population estimates by sex, State/Territory and calendar period from *Australian Demographic Statistics* (Australian Bureau of Statistics).

Table 4.3
Cases of AIDS and deaths following AIDS by sex and age group, cumulative to 31
December 1994, and for two previous yearly intervals.

## Cases1

AGE GROUP (years)	1 Jan 93 Male	- 31 Dec 93 Female	1 Jan 94 Male	– 31 Dec 94 Female	Cun Male	nulative to Female		94 %
0 - 12	1	0	1	2	25	9	34	0.6
13 – 19	0	0	1	0	19	3	22	0.4
20 - 29	114	5	106	8	986	52	1049	18.3
30 - 39	321	21	350	10	2314	61	2379	41.4
40 - 49	214	8	224	5	1566	32	1600	27.9
50 - 59	69	1	54	1	467	19	487	8.5
60 +	22	1	21	1	140	26	166	2.9
TOTAL	741	36	757	27	5517	202	5737	100.0

# Deaths<sup>2</sup>

0 - 12	6	1	2	1	22	6	28	0.7
13 - 19	1	0	1	1	15	3	18	0.5
20 - 29	103	5	82	5	677	26	712	17.7
30 - 39	262	8	246	10	1571	32	1606	40.0
40 - 49	178	5	208	10	1112	25	1139	28.4
50 - 59	63	1	56	0	357	16	373	9.3
60 +	19	3	20	4	116	22	138	3.4
TOTAL	632	23	615	31	3870	130	4014	100.0

- 1. Cases are classified by age at diagnosis.
- 2. Deaths are classified by age at death.

Table 4.4 Cases of AIDS by sex and exposure category, cumulative to 31 December 1994, and for two previous yearly intervals of diagnosis.

# Adults/adolescents (13 years and older at diagnosis of AIDS)

EXPOSURE CATEGORY	1 Ja 31 De	n 93 –	1 Ja 31 De	n 94 –	Cur	nulative	to 31 De	ec 94
EXPOSURE CATEGORY		Female		Female	Male	Female	Total	%
Male homosexual/bisexual								
contact	610	-	630	-	4740	-	4740	82.6
Male homosexual/bisexual								
contact and ID use	53	-	35	-	228	-	228	4.0
ID use (female and								
heterosexual male)	17	8	15	5	86	48	134	2.3
Heterosexual contact:	27	22	28	16	141	83	224	3.9
Sex with ID user	1	1	1	1	2	4	6	
Sex with bisexual male	-	6	-	2	-	21	21	
Fromspecifiedcountry	2	1	4	3	14	12	26	
Sex with person from								
specified country	3	1	5	2	16	8	24	
Sex with person with								
medicallyacquiredHIV	0	1	2	1	3	5	8	
SexwithHIV-infected								
person, exposure								
notspecified	7	3	4	3	24	13	37	
Not further specified	14	9	12	4	72	20	102	
Haemophilia/coagulation								
disorder	9	1	6	0	78	1	79	1.4
Receipt of blood								
components/tissue	3	5	8	2	74	52	126	2.2
Other/undetermined <sup>†</sup>	21	0	34	2	145	9	172	3.0
Total Adults/Adolescents †	740	36	756	25	5492	193	5703	99.4

# Children (under 13 years at diagnosis of AIDS)

Mother with/at risk for HIV infection Haemophilia/coagulation	0	0	1	1	8	6	14	0.2
disorder Receipt of blood	0	0	0	0	5	0	5	0.1
components/tissue	1	0	0	1	12	3	15	0.3
Total Children	1	0	1	2	25	9	34	0.6

TOTAL	741	36	757	27	5517	202	5737	100.0
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Table 4.5
Deaths following AIDS by sex and exposure category, cumulative to 31 December 1994, and for two previous yearly intervals.

# Adults/adolescents (13 years and older at diagnosis of AIDS)

EXPOSURE CATEGORY		an 93 – ec 93		ın 94 – ec 94	Cumulative to 31 Dec 94				
EXPOSURE CATEGORY	-	Female		Female	Male	Female	Total	%	
Male homosexual/bisexual									
contact	538	-	510	-	3371	-	3371	84.0	
Male homosexual/bisexual									
contact and ID use	36	-	38	-	150	-	150	2.7	
ID use (female and									
heterosexual male)	12	7	4	4	44	27	71	1.8	
Heterosexual contact:	21	10	24	19	79	47	126	3.1	
Sex with ID user	0	1	0	0	0	2	2		
Sex with bisexual male	-	6	-	6	-	17	17		
Fromspecifiedcountry	0	1	1	1	4	5	9		
Sex with person from									
specified country	2	1	1	1	8	5	13		
Sex with person with									
medicallyacquiredHIV	1	0	1	1	2	3	5		
SexwithHIV-infected									
person, exposure									
notspecified	6	1	10	5	20	8	28		
Not further specified	12	0	11	5	45	7	52		
Haemophilia/coagulation									
disorder	5	0	10	1	56	1	57	1.4	
Receipt of blood									
components/tissue	5	4	5	5	59	44	103	2.6	
Other/undetermined <sup>†</sup>	9	1	22	1	89	5	108	2.7	
Total Adults/Adolescents †	626	22	613	30	3848	124	3986	99.3	

# Children (under 13 years at diagnosis of AIDS)

Mother with/at risk for HIV infection Haemophilia/coagulation disorder	3	1	2	0	5 5	4	9 5	0.2
Receipt of blood components/tissue	2	0	0	1	12	2	14	0.4
Total Children	6	1	2	1	22	6	28	0.7

TOTAL	632	23	615	31	3870	130	4014	100.0
IOIAL	032	23	015	31	3070	130	4014	100.0

Table 4.6
Cases of AIDS by AIDS-defining condition and sex, cumulative to 31 December 1994, and for two previous yearly intervals.

AIDS DEFINING	1 Ja 31 De	n 93 –		n 94 – ec 94	Cun	nulative 1	to 31 De	ec 94
CONDITION		Female		Female	Male	Female	Total	%
Pneumocystis carinii pneumonia (PCP)	164	7	162	10	1713	47	1766	30.8
Kaposi's sarcoma (KS) -	104	,	102	10	1713	47	1700	30.6
skin	89	0	81	0	734	3	738	12.9
KS and PCP only	7	0	6	0	56	0	56	1.0
KS and other (not PCP)	14	0	11	0	94	0	94	1.6
PCP and other (not KS)	26	2	19	1	288	14	305	5.3
Candidiasis-oesophageal	83	5	108	3	456	20	477	8.3
Toxoplasmosis-cerebral	31	0	27	0	209	8	219	3.8
Cryptococcosis-meningeal	31	0	36	0	217	4	223	3.9
Lymphoma-non-Hodgkin	30	2	31	1	205	10	215	3.7
Mycobacterium-avium	59	5	36	4	246	17	263	4.6
Herpessimplexvirus	16	2	14	1	134	13	147	2.6
HIV encephalopathy	26	1	37	1	179	5	185	3.2
Cytomegalovirus	44	2	36	1	224	3	227	4.0
HIV wasting disease	43	4	56	0	221	22	244	4.3
Cryptosporidiosis-gut	18	0	26	1	123	4	127	2.2
Mycobacterium-								
tuberculosis (TB)	6	1	5	0	36	4	40	0.7
Other single diagnoses <sup>1</sup>	11	0	18	2	87	7	94	1.6
Othermultiplediagnoses	43	5	48	2	295	21	317	5.5
TOTAL	741	36	757	27	5517	202	5737	100.0

<sup>1.</sup> Following implementation of the Australian AIDS case definition in January 1993, AIDS was diagnosed on the basis of recurrent pneumonia for 18 cases, pulmonary tuberculosis for 6 cases, and cervical cancer for 1 case.

Table 4.7 Survival following the diagnosis of AIDS by one-year period of diagnosis.

Calendar Period of Diagnosis	Cases	Deaths to 31 Dec 94 <sup>1</sup>	Alive at	Lost to Follow Up <sup>3</sup>	Other <sup>4</sup>	% Su 1 yr	rvival 2 yrs
Or Diagnosis	Ousco	01 000 04	1 0411 04	толон ор	Othic:		
1984	54	52	0	1	1	25.1	7.7
1985	127	124	0	1	2	44.5	22.2
1986	231	218	2	7	4	34.4	15.2
1987	382	368	6	1	7	57.3	29.4
1988	533	486	2	9	36	67.2	29.5
1989	610	549	18	4	39	61.0	30.1
1990	663	551	19	7	86	63.1	32.5
1991	796	627	31	7	131	59.4	30.2
1992	772	519	59	7	187	-	-
1993	782	375	157	0	250	-	-
1994	787	145	642	0	0	-	-
TOTAL	5737	4014	936	44	743	-	-

- Deaths occurring prior to 1 January 1995.
   Last medical contact on or after 1 January 1994.
- 3. Reported as having permanently left Australia with no subsequent report of status.4. Last medical contact prior to 1 January 1994.

Table 4.8: Cases of AIDS by month of diagnosis, 1985 to 1994.

YEAR	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
1985	10	10	7	8	21	10	12	4	15	10	10	10	127
1986	14	15	14	14	19	19	17	24	24	32	26	13	231
1987	29	27	33	20	43	34	28	26	38	30	45	29	382
1988	42	43	24	35	34	45	56	50	44	52	59	49	533
1989	62	47	41	31	47	55	48	57	56	63	50	53	610
1990	62	46	57	50	45	52	59	59	65	69	49	50	663
1991	65	66	65	70	60	61	54	66	85	77	67	60	796
1992	55	67	65	61	75	64	71	73	59	63	62	57	772
1993	67	66	64	65	48	63	71	78	67	71	61	61	782
1994	69	63	74	73	55	67	50	75	85	85	46	45	787

Table 4.9: Deaths following the diagnosis of AIDS by month of death, 1985 to 1994.

YEAR	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
1985	5	2	2	7	11	5	4	5	5	5	6	7	64
1986	11	7	8	6	13	10	17	8	15	17	16	16	144
1987	13	15	18	29	23	15	17	13	17	9	15	18	202
1988	12	18	15	21	18	20	19	19	14	20	24	22	222
1989	20	24	29	33	26	41	33	41	29	41	42	39	398
1990	55	32	49	35	43	43	48	47	47	40	33	41	513
1991	45	38	42	52	59	52	54	48	38	49	43	54	574
1992	49	47	58	51	54	49	40	51	44	36	46	45	570
1993	51	38	60	63	70	43	50	52	48	56	64	63	658
1994	57	55	58	67	58	66	67	52	51	47	41	32	651

Table 4.10: Deaths following the diagnosis of AIDS by month of diagnosis, 1985 to 1994.

YEAR	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
1985	10	10	7	8	20	9	11	4	15	10	10	10	124
1986	14	15	13	12	18	17	17	22	21	31	25	13	218
1987	28	27	32	19	43	31	28	24	38	28	41	29	368
1988	39	39	23	33	34	43	46	41	41	50	50	47	486
1989	57	41	37	30	38	50	44	51	52	56	48	45	549
1990	52	40	54	46	37	39	46	47	53	54	42	40	550
1991	57	59	52	59	51	39	44	51	57	62	50	46	627
1992	39	42	47	47	54	42	55	51	39	39	36	29	520
1993	36	41	28	35	28	27	29	38	34	34	27	18	375
1994	17	16	22	25	13	17	9	9	7	7	2	1	145

## THE NATIONAL HIV DATABASE

Table 5.1 Number of new diagnoses of HIV infection by sex¹ and State/Territory, cumulative to 31 December 1994, and for two previous yearly intervals.

STATE/	1 Jan 93	- 31 Dec 93	1 Jan 94	- 31 Dec 94	Cumulative to 31 Dec 94					
TERRITORY	Male	Female	Male	Female	Male	Female	Total	Rate <sup>2</sup>		
ACT	5	1	14	3	153	13	166	55.2		
NSW <sup>3</sup>	511	34	424	34	9632	524	12209	201.8		
NT	9	0	7	0	78	4	82	47.9		
QLD <sup>4</sup>	131	9	171	11	1467	85	1557	48.7		
SA	53	3	32	4	528	43	571	38.8		
TAS	4	0	1	1	69	4	73	15.5		
VIC <sup>5</sup>	206	21	202	17	3172	153	3375	75.4		
W A	42	4	41	11	691	57	749	44.0		
TOTAL <sup>6</sup>	961	72	892	81	15790	883	18782	105.3		

- 1. Twenty people (8 NSW, 4 QLD, 7 VIC and 1 WA) whose sex was reported as transsexual are included in the total columns of Tables 5.1 5.6.
- 2. Rate per one hundred thousand current population. Population estimates by sex, State/Territory and calendar interval from *Australian Demographic Statistics*(Australian Bureau of Statistics).
- 3. Cumulative total for NSW includes 2045 people whose sex was not reported.
- 4. Cumulative total for QLD includes 1 person whose sex was not reported.
- 5. Cumulative total for VIC includes 43 people whose sex was not reported.
- 6. Cumulative total for Australia includes 2089 people whose sex was not reported.

Table 5.2 Number of new diagnoses of HIV infection for which exposure category was reported, by sex and exposure category, cumulative to 31 December 1994 and for two previous yearly intervals.

		an 93 –		an 94 –	Cumulative to 31 Dec 94				
EXPOSURE CATEGORY		Dec 93		ec 94		_			
	Male	Female	Male	Female	Male	Female	Total	%	
Male homosexual/bisexual									
contact	688	-	633	-	9741	-	9741	80.8	
Male homosexual/bisexual									
contact and ID use	32	-	43	-	357	-	357	3.0	
ID use	33	6	26	9	448	148	618	5.1	
Heterosexual	14	4	10	6	108	53	164		
Not further specified	19	2	16	3	340	95	454		
Heterosexual contact:	80	49	80	52	527	333	863	7.1	
Sex with ID user	4	8	2	5	13	23	26		
Sex with bisexual male	-	5	-	4	-	21	21		
Fromspecifiedcountry	7	2	12	8	36	20	56		
Sex with person from									
specified country	15	7	10	9	44	24	68		
Sex with person with									
medicallyacquired HIV	1	1	1	1	4	5	9		
SexwithHIV-infected									
person, exposure									
notspecified	4	5	6	4	25	21	46		
Not further specified	49	21	49	21	405	219	627		
Haemophilia/coagulation									
disorder	0	0	1	0	191	2	193	1.6	
Receipt of blood/tissue	5	1	6	2	104	65	169	1.4	
Health care setting <sup>1</sup>	0	0	1	3	1	8	9	0.1	
Total Adults/ Adolescents 2	838	56	790	66	11369	556	11950	99.1	

# Children (under 13 years at diagnosis of HIV infection)

Mother with/at risk for HIV infection Haemophilia/coagulation disorder Receipt of blood/tissue	0 0 1	3 0 0	5 0 0	5 0 0	20 51 12	16 0 5	36 51 18	0.3 0.4 0.2
Total Children	1	3	5	5	83	21	105	0.9
Sub-total	839	59	795	71	11452	577	12055	100.0
Other/undetermined <sup>3</sup>	122	13	97	10	4338	306	6727	
TOTAL	961	72	892	81	15790	883	18782	

- $1. \quad \text{The category ``Health care setting'' includes 4 cases of occupationally acquired HIV infection and 4}$ cases of transmission in surgical rooms.
  Total column includes cases for which sex was not reported.
- 3. The 'Other/undetermined' category includes 6710 adults/adolescents and 26 children. Twenty people whose sex was reported as transsexual are included in the 'Other/undetermined' category. The 'Other/undetermined' category was excluded from the calculation of the percentage of cases attributed to each exposure category.

Table 5.3 Number of new diagnoses of HIV infection by sex and age group, cumulative to 31 December 1994, and for two previous yearly intervals.

AGE GROUP	1 Jan 93	- 31 Dec 93	1 Jan 94	- 31 Dec 94	Cui	mulative t	o 31 Dec	94
(YEARS)	Male	Female	Male	Female	Male	Female	Total	%
0 - 2	0	0	4	5	33	14	48	0.3
3 - 12	1	4	1	0	72	10	83	0.4
0 - 12	1	4	5	5	105	24	131	0.7
13 - 19	12	3	18	4	351	44	402	2.1
20 - 29	332	31	282	38	5126	348	5587	29.8
30 - 39	372	21	333	19	5088	195	5392	28.7
40 - 49	155	5	140	7	2254	67	2363	12.6
50 - 59	58	4	62	3	677	30	713	3.8
60 +	18	2	31	2	208	38	247	1.3
Unknown	13	2	21	3	1981	137	3947	21.0
TOTAL <sup>1</sup>	961	72	892	81	15790	883	18782	100.0

<sup>1.</sup> See footnotes Table 5.1.

Table 5.4
Number of new diagnoses of HIV infection for which HIV seroconversion illness was diagnosed or the date of a prior negative HIV antibody test was within one year of diagnosis of infection, by sex and State/Territory, cumulative to 31 December 1994, and for two previous calendar intervals.

STATE/	1 Jan 94-30 Jun 94		1 Jul 94	-31 Dec 94	1 Jan 94 – 31 Dec 94			
TERRITORY	Male	Female	Male	Female	Male	Female	Total	
ACT	0	1	1	0	1	1	2	
NSW <sup>1</sup>	60	3	51	3	111	6	118	
NT	0	0	1	0	1	0	1	
QLD	12	2	4	0	16	2	18	
SA	2	0	2	0	4	0	4	
TAS	0	0	1	0	1	0	1	
VIC	28	3	27	1	55	4	59	
W A	-	-	-	-	-	-	-	
TOTAL <sup>1</sup>	102	9	87	4	189	13	203	

<sup>1.</sup> Total column for Tables 5.4 – 5.6 includes 1 person whose sex was not reported.

Table 5.5

Number of new diagnoses of HIV infection for which HIV seroconversion illness was diagnosed or the date of a prior negative HIV antibody test was within one year of diagnosis of infection, by sex and exposure category, cumulative to 31 December 1994, and for two previous calendar intervals.

EXPOSURE CATEGORY		an 94 – Jun 94 Female		Jul 94 – Dec 94 Female	1 Ja Male	n 94 – 31 D Female	ec 94 Total
Malehomosexual/bisexual							
contact	77	-	73	-	150	-	150
Malehomosexual/bisexual							
contact and ID use	7	-	6	-	13	-	13
ID use (female and							
heterosexualmale)	4	2	1	0	5	2	7
Heterosexual contact	10	5	4	3	14	8	22
Health care setting	1	0	0	0	1	0	1
Other/undetermined	3	2	3	1	6	3	10
TOTAL <sup>1</sup>	102	9	87	4	189	13	203

<sup>1.</sup> See footnote Table 5.4.

Table 5.6
Number of new diagnoses of HIV infection for which HIV seroconversion illness was diagnosed or the date of a prior negative HIV antibody test was within one year of diagnosis of infection, by sex and age group, cumulative to 31 December 1994, and for two previous calendar intervals.

AGE GROUP	1 Jan 94 – 30 Jun 94		1 Jul 94	-31 Dec 94	1 Jan 94-31 Dec 94			
(YEARS)	Male	Female	Male	Female	Male	Female	Total	
13 – 19	3	0	1	1	4	1	5	
20 – 29	48	7	44	2	92	9	101	
30 – 39	37	1	28	0	65	1	66	
40 – 49	8	1	8	0	16	1	18	
50 – 59	5	0	5	1	10	1	11	
60 +	1	0	0	0	1	0	1	
Not known	0	0	1	0	1	0	1	
TOTAL <sup>1</sup>	102	9	87	4	189	13	203	

1. See footnote Table 5.4.

# SENTINEL SURVEILLANCE OF HIV INFECTION IN SEXUALLY TRANSMISSIBLE DISEASE CLINICS

Table 6.1 Number of people seen, number of people tested for HIV antibody and number of people newly diagnosed with HIV infection by sex and STD clinic<sup>1</sup>, during the quarter 1 October 1994 to 31 December 1994.

STD CLINIC	Seen a	at Clinic Female		ted for ntibody Female	1	ly diagnos HIV infect Female	tion
	waie	remale	waie	remale	wate	remale	Total
Sydney Sexual Health Centre, NSW	1698	1026	798	456	6	0	6
Parramatta Sexual Health Clinic, NSW	395	363	220	167	1	0	1
Clinic 34, Darwin, NT	237	136	126	71	3	0	3
Clinic 275, Adelaide, SA	1061	682	770	475	0	0	0
Melbourne Sexual Health Centre, VIC	1736	1213	1403	1051	5	0	5
TOTAL	5127	3420	3317	2220	15	0	15

<sup>1.</sup> Data not available for Brisbane Sexual Health Clinic, QLD

Table 6.2 Number of people seen¹ who had a previous negative HIV antibody test, percent retested for HIV antibody, and number (percent) newly diagnosed with HIV infection, by sex and exposure category, during the quarter 1 October 1994 to 31 December 1994.

EXPOSURE CATEGORY	1	us negative tibody test Female	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	tested for antibody Female	wit	wly diag	nfectio	n
	waie	remale	waie	remaie	wate	Femal	e i ota	%
Homosexual/bisexual								
contact	611	-	71.4	-	4	-	4	0.9
Homosexual/bisexual								
contact and ID use	69	-	65.2	-	1	-	1	2.2
ID use (female and								
heterosexualmale)	206	127	65.0	53.5	0	0	0	0.0
Heterosexual contact	1775	1214	58.5	56.4	0	0	0	0.0
outside Australia²	276	138	55.1	<i>51.4</i>	0	0	0	0.0
within Australia only	1499	1076	59.1	57.1	0	0	0	0.0
Sex worker	-	416	-	76.9	-	0	0	0.0
Sex worker and ID use	-	34	-	73.5	-	0	0	0.0
Other/undetermined	81	89	87.6	87.6	0	0	0	0.0
TOTAL	2742	1880	62.9	62.6	5	0	5	0.2

- 1. At clinics other than Clinic 34, Darwin, NT.
- 2. Within 3 months for Clinic 275 and one year for other clinics.

Table 6.3
Number of people seen¹ with *no previous HIV antibody test*, percent tested for HIV antibody for the first time, and number (percent) newly diagnosed with HIV infection, by sex and exposure category, during the quarter 1 October 1994 to 31 December 1994.

EXPOSURE CATEGORY		revious tibody test Female		ested for antibody Female	with	ı ÁIV ir	gnosed nfection e Total	1
Homosexual/bisexual								
contact	236	-	78.4	-	3	-	3	1.6
Homosexual/bisexual								
contact and ID use	19	-	73.7	-	0	-	0	0.0
ID use (female and								
heterosexualmale)	62	20	93.5	75.0	0	0	0	0.0
Heterosexual contact	1464	1113	72.9	66.3	1	0	1	0.06
outside Australia²	131	73	72.5	50.7	1	0	1	0.8
within Australia only	1333	1040	72.9	67.4	0	0	0	0.0
Sex worker	-	63	-	93.7	-	0	0	0.0
Sex worker and ID use	-	6	-	100.0	-	0	0	0.0
Other/undetermined	255	195	55.7	63.6	3	0	3	1.1
TOTAL	2036	1397	72.1	67.4	7	0	7	0.3

- 1. At clinics other than Clinic 34, Darwin, NT.
- 2. Within 3 months for Clinic 275 and one year for other clinics.

Table 6.4 Number of people seen<sup>1</sup>, number of people tested for HIV antibody and number of people newly diagnosed with HIV infection, by sex and age group, during the quarter 1 October 1994 to 31 December 1994.

AGE GROUP	Seen a	t Clinic		ted for intibody	ı	Newly diagnos with HIV infect	
(YEARS)	Male	Female	Male	Female	Male	Female	Total
13 - 19	79	144	54	89	0	0	0
20 - 29	2021	1784	1356	1175	4	0	4
30 - 39	1667	830	1063	565	6	0	6
40 - 49	663	326	417	211	0	0	0
50 - 59	245	96	158	59	2	0	2
60 +	131	41	93	20	0	0	0
Unknown	84	63	50	30	0	0	0
TOTAL	4890	3284	3191	2149	12	0	12

1. At clinics other than Clinic 34, Darwin, NT.

Table 6.5 Number of people diagnosed with specific STD¹, other than HIV, by sex, exposure category and whether or not they were tested for HIV antibody² during the quarter 1 October 1994 to 31 December 1994.

EXPOSURE CATEGORY	1	sted for antibody Female		ested for antibody Female
Homosexual/bisexual contact	14	-	14	-
Homosexual/bisexual contact and ID use	4	-	0	-
ID use (female and heterosexual male) Heterosexual contact	7 30	2 26	1 24	1 11
outside Australia <sup>2</sup> within Australia only	9 21	2 2 24	6	0 11
Sex worker Sex worker and ID use	-	7	-	4
Other/undetermined	2	0	3	ő
TOTAL	57	36	42	16

<sup>1.</sup> Specific STD are gonorrhoea, syphilis and chlamydia.

<sup>2.</sup> Includes people who may have been previously tested for HIV antibody and excludes people previously known to have HIV infection.

## SENTINEL SURVEILLANCE FOR SEXUALLY TRANSMISSIBLE DISEASES

Table 7.1

Number of diagnoses of gonorrhoea in sentinel sexual health centres¹ during the quarter 1 October 1994 to 31 December 1994, by sex , exposure category and HIV antibody status.

CHARACTERISTICS OF CASES	1 C Male	Oct 94 – 31 D Female	ec 94 Total	
EXPOSURE CATEGORY <sup>2</sup>				
Homosexual/bisexual contact Homosexual/bisexual contact	19	0	19	
and ID use ID use (female and	2	0	2	
heterosexualmale)	0	0	0	
Heterosexual contact <sup>3</sup>	12	3	15	
outside Australia	5	0	5	
within Australia only	7	3	10	
Sex worker	1	4	5	
Sex worker and ID use	0	1	1	
HIV ANTIBODY STATUS				
Positive	0	0	0	
Negative	27	8	35	
Unknown	7	0	7	
Total⁴	34	8	42	

- Participating clinics: Clinic 275, Adelaide, SA; Clinic 34, Darwin, NT; Gold Coast Sexual Health Clinic, QLD; Kirketon Road Centre, Sydney, NSW; Melbourne Sexual Health Centre, Melbourne, VIC; Parramatta Sexual Health Clinic, Parramatta, NSW; Port Kembla Sexual Health Clinic, Port Kembla, NSW; Sydney Sexual Health Centre, Sydney, NSW; The Livingstone Road Clinic, Sydney, NSW; The Gilmore Clinic, Canberra, ACT; Nowra Sexual Health Clinic, Nowra, NSW.
- $2. \quad \text{For most clinics, the exposure categories represent those for the preceding 12 month period.} \\$
- 3. No other category specified.
- 4. Total number of males and females diagnosed with specific STD by exposure category and separately for HIV antibody status.

Table 7.2 Number of diagnoses of early syphilis¹ in sentinel sexual health centres during the quarter 1 October 1994 to 31 December 1994, by sex, exposure category and HIV antibody status.

CHARACTERISTICS OF CASES	1 C Male	Oct 94 – 31 D Female	ec 94 Total	
EXPOSURE CATEGORY <sup>2</sup>				
Homosexual/bisexual contact	2	0	2	
Homosexual/bisexual contact				
and ID use	0	0	0	
ID use (female and				
heterosexual male)	0	0	0	
Heterosexual contact	1	6	7	
outside Australia	0	0	0	
within Australia only	1	6	7	
Sex worker	0	1	1	
Sex worker and ID use	0	0	0	
HIV ANTIBODY STATUS				
Positive	0	0	0	
Negative	2	3	5	
Unknown	1	4	5	
Total	3	7	10	

 $<sup>1. \ \ \, \</sup>text{Early syphilis includes cases diagnosed as primary, secondary or early latent infection only}.$ 

<sup>2.</sup> See footnotes Table 7.1.

# HIV ANTIBODY TESTING IN BLOOD TRANSFUSION SERVICES AND PUBLIC HEALTH LABORATORIES.

Table 8.1 Number of new diagnoses of HIV infection in blood donors by State/Territory, cumulative to 31 December 1994, and for two previous yearly intervals.

STATE/ TERRITORY	1 Jan 93 – 31 Dec 93	1 Jan 94 – 31 Dec 94	1 May 85 to 31 Dec 94
ACT	0	0	1
NSW	1	1	32
NT	0	1	1
QLD	1	2	17
SA	1	0	3
TAS	0	0	0
VIC	2	0	12
W A	0	0	6
TOTAL	5	4	72

Table 8.2 Number of HIV antibody tests conducted in Blood Transfusion Services by State/ Territory and calendar interval.

STATE/ TERRITORY	1 Jan 93 – 30 Sep 93	1 Oct 93 - 31 Dec 93	1 Jan 93 to 31 Dec 93
ACT	11852	3438	15290
NSW	219865	73781	293646
NT	6816	2295	9111
QLD	136516	48353	184869
SA	72587	23168	95755
TAS	19071	6122	25193
VIC	191208	62245	253453
W A	58444	20150	78594
TOTAL	716359	239552	955911

STATE/ TERRITORY	1 Jan 94 – 30 Sep 94	1 Oct 94 - 31 Dec 94	1 Jan 94 to 31 Dec 94
ACT	11578	3960	15538
NSW	213532	66339	279871
NT	6948	916	7864
QLD	131656	45481	177137
SA	72528	22732	95260
TAS	18308	5707	24015
VIC	174148	58947	233095
W A	56712	18624	75336
TOTAL	685410	222706	908116

STATE/ TERRITORY	WEEKS	YEAR	Blood Transfusion Service
NSW	29-52, 1	1994,1995	Young District Hospital

Table 8.3 Number of HIV antibody tests conducted in Public Health Laboratories by State/ Territory and calendar interval.

STATE/ TERRITORY	1 Jan 93 – 30 Sep 93	1 Oct 93 - 31 Dec 93	1 Jan 93 to 31 Dec 93
ACT	8676	2189	10865
NSW	270759	75240	345999
NT	7509	2499	10008
QLD	113206	33925	147131
SA	62678	19907	82585
TAS	9639	3287	12926
VIC	123668	39347	163015
W A	53503	17528	71031
TOTAL	649638	193922	843560

STATE/ TERRITORY	1 Jan 94 – 30 Sep 94	1 Oct 94 - 31 Dec 94	1 Jan 94 to 31 Dec 94
ACT	7503	4195	11698
NSW	256221	72300	328521
NT	8099	3434	11533
QLD	90615	34759	125374
SA	53829	8619	62448
TAS	10575	3402	13977
VIC	108705	23677	132382
W A	57045	11860	68905
TOTAL	592592	162246	754838

# Public Health Laboratories for which counts were partially unavailable:

STATE/ TERRITORY	WEEKS	YEAR	Public Health Laboratory
NSW	43-52, 1-40 36-52, 1 41-52, 1	1993,1994 1994,1995 1994,1995 1995	Westmead Hospital St Vincent's Hospital Hanly Moir Pathology Hampton and Associates
QLD	9-52,1 33-52.1	1994,1995 1994.1995	Townsville Hospital Cairns Base Hospital
SA	33-52,1 33-52,1 49-52,1 1	1994,1995 1994,1995 1994,1995 1995	Clinpath Laboratories Gribbles Pathology Institute of Medical and Veterinary Science Queen Elizabeth Hospital
VIC WA	45-52, 1 45-52,1 48-52,1	1994,1995 1994,1995 1994,1995	Consultant Diagnostic Services Western Diagnostic Pathology State Health Laboratory

# REPORT FROM WHO WESTERN PACIFIC REGION

Dr RM Sarda, Medical Officer, WHO Regional Office, Manila.

Table 9.1 AIDS and HIV in the WHO Western Pacific Region by country; based on reports available at 31 December 1994.

COUNTRY/	СПМ	ULATIVE A	IDS CASES Children		AIDS	Cumulative Diagnoses
AREA	Male	Female	<13 Years	Total	Rate <sup>1</sup>	HIV
American Samoa	0	0	0	0	0	0
Australia	5517	202	34	5737	32.2	18782
Brunei	4	0	0	4	1.4	182
Cambodia	0	0	0	1	0.1	633
China <sup>2</sup>	41	2	0	43	0	1550
CookIslands	0	0	0	0	0	0
Fed. S. Micronesia	2	0	0	2	1.8	2
Fiji	4	3	1	7	0.9	21
French Polynesia	25	5	1	42	19.4	138
Guam	23	1	0	24	16.9	64
Hong Kong	108	7	3	115	1.9	490
Japan	769	41	0	810	0.7	3481
Kiribati	0	0	0	0	0	2
Laos	11	1	0	14	0.3	80
Macao	7	1	0	8	1.9	88
Malaysia	101	14	4	115	0.6	10048
Marshall Islands	4	2	0	6	11.4	8
Nauru	0	0	0	0	0	0
New Caledonia	33	4	1	37	19.9	111
New Zealand	432	19	4	451	12.7	953
Niue	0	0	0	0	0	0
N. Mariana Islands	0	0	0	6	10.4	10
Palau	1	0	0	1	5.8	1
Papua New Guinea	45	42	3	87	2.1	236
Philippines	104	62	5	166	0.3	557
Rep. of Korea	20	5	0	25	0.1	386
Samoa	1	0	0	1	0.6	1
Singapore	83	6	1	89	3	252
Solomon Islands	0	0	0	0	0	0
Tokelau	0	0	0	0	0	0
Tonga	5	0	0	5	5.1	6
Tuvalu	0	0	0	0	0	0
Vanuatu	0	0	0	0	0	0
Vietnam	197	18	0	215	0.3	1809
Wallis and Futuna	1	0	0	1	7.1	2
TOTAL <sup>†</sup>	7538	435	57	8012	0.5	39893

<sup>1.</sup> AIDS cases per 100,000 total current population.

<sup>2.</sup> For Taiwan 45 AIDS cases in males, 3 in females and 300 diagnosis of HIV infection were reported to 31 December 1994.

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## Australian HIV Surveillance Report

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#### NOTES

The National AIDS Registry is maintained by NCHECR on behalf of the National HIV Surveillance Committee, which consists of representatives from NCHECR, and the Health Departments of each State and Territory and the Commonwealth of Australia. The Registry is based on reports from doctors who diagnose AIDS, made to the Health Department in the State/Territory of diagnosis. Date of birth and a name code (first two letters of first and last name) are used to minimise duplicate registration, while maintaining confidentiality.

The National HIV Database is maintained by NCHECR on behalf of the National HIV Surveillance Committee. It is based on reports of new diagnoses of HIV infection from HIV Reference Laboratories (ACT, NSW, TAS, VIC), or from a combination of Reference Laboratory and diagnosing doctors (NT, QLD, SA, WA). In order to avoid counting the same case more than once, only diagnoses which are determined to be new by the diagnosing laboratory or doctor are reported for the purposes of national surveillance. Sentinel surveillance is carried out by six STD Clinics in five Australian cities, which send quarterly reports on HIV antibody testing to NCHECR.

Tabulations from the National AIDS Registry, the National HIV Database and Sentinel HIV Surveillance in STD clinics are based on data available three months after the end of the reporting interval indicated, to allow for reporting delay and to incorporate newly available information.

**HIV antibody testing** is carried out at Public Health Laboratories and Blood Transfusion Services, and summary information on testing is sent on a four–weekly basis to the National HIV Reference Laboratory, which produces quarterly tabulations for publication in the Australian HIV Surveillance Report.

**Abbreviations:** HIV is the human immunodeficiency virus, and unless otherwise specified, refers to HIV–1 only. AIDS is the acquired immunodeficiency syndrome, ID stands for injecting drug, and STD for sexually transmissible disease. Specified countries are those of sub–Saharan Africa and the Caribbean, where transmission of HIV is believed to be predominantly heterosexual. The Australian States and Territories are: Australian Capital Territory (ACT), New South Wales (NSW), Northern Territory (NT), Queensland (QLD), South Australia (SA), Tasmania (TAS), Victoria (VIC) and Western Australia (WA). NCHECR is the National Centre in HIV Epidemiology and Clinical Research.

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