

National Centre in HIV Epidemiology and Clinical Research Australian HIV Surveillance Report

Vol 20 No 1 January 2004

HIV notifications in New South Wales, 1999 to 2003

In 2002 and 2003, New South Wales experienced the largest increase in HIV notifications since the epidemic was effectively brought under control in the late 1980s (Figure 1.1). This paper provides an overview of HIV surveillance mechanisms in New South Wales, and summarizes trends in HIV notifications from 1999 to September 2003. The coordinated health promotion activities implemented in response to the increase are also described.

Figure 1.1 Number of notifications of newly diagnosed HIV infection in New South Wales, 1 January 1999 – 30 September 2003 and number of cases with evidence of newly acquired HIV infection, by quarter/year



HIV surveillance in New South Wales

In New South Wales, HIV surveillance is conducted under the Public Health Act 1991. The background and development of the New South Wales HIV surveillance system is described elsewhere (Delpech and Todd 2002) and summarized diagrammatically in Figure 1.2. People with newly diagnosed HIV infection who are resident in New South Wales at the time of diagnosis are entered onto the database (whether or not the person had been notified previously in another health jurisdiction).

The National Centre in HIV Epidemiology and Clinical Research is funded by the Commonwealth Department of Health and Ageing and is affiliated with the Faculty of Medicine, The University of New South Wales. Its work is overseen by the Australian National Council on HIV, AIDS, Hepatitis C (Hepatides) and Sexual Health (ANCHAHS).

Announcements

National meetings

The **Australasian Sexual Health Conference 2004** – *Behind the Mask* – will be held in Adelaide, SA, on 31 March – 3 April 2004. Further information may be obtained from Dart Associates, PO Box 781. Lane Cove NSW 2066.

Telephone: 61 2 9418 9396

Facsimile: 61 2 9418 9398

E-mail: dartconv@mpx.com.au

The **4th Australasian Hepatitis C Conference** will be held at the National Convention Centre, Canberra, on 31 August – 3 September 2004. Further information may be obtained from 4th Australasian Hepatitis C Conference,

Locked Mail Bag 5057, Darlinghurst NSW 1300.

Telephone: +61 2 9368 2714

Facsimile: +61 2 9380 9528

E-mail: conferenceinfo@ashm.org.au

Website: www.ashm.org.au/conference2004

The **16th Annual Conference of Australasian Society for HIV Medicine** will be held at the National Convention Centre, Canberra, on 2 – 4 September 2004. Further information may be obtained from ASHM Conference 2004,

Locked Mail Bag 5057, Darlinghurst NSW 1300 Australia.

Telephone: 61 2 9368 2714

Facsimile: 61 2 9380 9528

E-mail: conferenceinfo@ashm.org.au

Website: www.ashm.org.au/conference2004

International meeting

The **XV International AIDS Conference** will be held in Bangkok, Thailand, on 11 – 16 July 2004. Further information may be obtained through the Conference Secretariat, International AIDS Society HQ,

Berzeliusvag 8, Karolinska Institute, SE-171 77 Stockholm, Sweden.

Telephone: +46 8 508 846 40

Facsimile: +46 8 508 846 64

E-mail: info@aids2004.org

A case of newly diagnosed HIV infection is entered onto the database at the time of initial notification (theoretically, a week or two after laboratory confirmation of the diagnosis). For administrative purposes, the information on a notified case is considered complete eight to twelve weeks following initial notification. In this period, the notifying doctor is contacted by mail and requested to complete an HIV notification form. Following receipt of the completed form, any duplicate notifications recorded on the database are identified and removed. Any information not reported on the HIV notification form is followed up with the notifying doctor and added to the database when it becomes available.

While infrequent, a case of HIV infection may be notified some time after diagnosis. Since the database is not static, these notifications are added as they are received. Consequently, the number of notifications covering the same time period but reported in later publications may change.



Figure 1.2 Summary of HIV surveillance in New South Wales

HIV notifications to 30 September 2003

From 1981 to 30 September 2003, 13,190 notifications of HIV infection were received by the New South Wales Health Department. The number of new HIV notifications showed a steady decline from 1987 to a low of 342 notifications in 2001. In 2002, 392 cases were notified, an increase of 15% over the previous year. The increase continued in 2003 with 322 cases notified by 30 September 2003, an increase of 13% and 24% over the same period of 2002 and 2001, respectively (Figure 1.1).

Newly acquired HIV infection is defined as a new diagnosis of HIV infection with a reported negative or indeterminate HIV antibody test result or an HIV seroconversion illness in the previous twelve months. Notifications of newly acquired HIV infection remained stable between 1999 and mid 2002. In the latter half of 2002, the number of notifications of newly acquired HIV infection began to increase. In the period 1 January to 30 September 2003, newly acquired infection comprised 35% (N=114) of all notifications, compared with 32% (N=124) in 2002, 29% (N=98) in 2001, 25% (N=87) in 2000 and 25% (N=94) in 1999 (Figure 1.1).

The majority (63%) of New South Wales HIV notifications for the period 1999 to September 2003 were for people resident in inner eastern and inner western Sydney. Those areas also demonstrate the most noticeable increase in cases over the last two to three years (Figure 1.3). (Note: rural area data is not presented due to the small numbers).

Figure 1.3 HIV notifications in New South Wales, 1 January 1999 – 30 September 2003, by Sydney Metropolitan Health Area



Notifications of HIV infection were predominantly among males (90% for the period January 1999 to September 2003) as were notifications of newly acquired infection (96% for the period January 1999 to September 2003). Male homosexual/bisexual contact remains the predominant exposure category (65% of notifications of HIV infection and 83% of notifications of newly acquired infection) in the period January 1999 to 30 September 2003 (Figure 1.4).

Figure 1.4 Number of HIV notifications in New South Wales, 1 January 1999 – 30 September 2003, by exposure category



The 30 - 39 year age group was the most common age group among HIV notifications, with a steady rise in the number of notifications in this age group since 2001 (Figure 1.5).





Health Promotion Response

The response to the increase in HIV notifications in New South Wales has consisted of three complementary dimensions:

- 1. Data analysis and review
- 2. Program development and implementation
- 3. Evaluation

Data analysis and review

The initial response to the increase in notifications focused on analyzing HIV notification data in the context of the broader body of knowledge regarding HIV epidemiology in New South Wales. In July 2003, NSW Health convened a Surveillance Forum to enable researchers, epidemiologists and community organisations to discuss case reporting and sentinel surveillance data, social and behavioural research, data on testing and treatment patterns, and data on sexually transmissible infections among gay men. The Forum concluded that the increase in HIV notifications may be due to an increase in HIV transmission. Increased HIV transmission among homosexually active men may be attributed to the concurrent occurrence of an increasing prevalence of unprotected anal intercourse and the uptake of perceived 'risk reduction' strategies, a decline in the use of antiretroviral treatment associated with an increase in community viral load, and an increase in the number of diagnoses of sexually transmissible infections.

Program development and implementation

NSW Health established an HIV Prevention Interagency, consisting of those organisations funded to undertake HIV prevention work with gay men in inner Sydney. Agencies participating in the Interagency include the AIDS Council of New South Wales (ACON), People Living with HIV/AIDS (NSW), the metropolitan Area Health Services and the Australasian Society for HIV Medicine (ASHM).

The first priority of the Interagency was to reduce HIV infections among gay men. Strategies currently being implemented include: a high profile social marketing campaign to promote safer sex and to improve gay men's knowledge of the pattern of HIV infection in New South Wales and the increased risk of HIV transmission; development of resources and forums supporting general practitioners and HIV clinicians in HIV prevention activities in clinical settings; and the allocation of resources for increasing awareness, testing and treatment of sexually transmissible infections among gay and homosexually active men in inner Sydney (Health Promotion Interagency 2003).

Evaluation

NSW Health has also undertaken an extensive review of the current priorities, programs and infrastructure for HIV health promotion. The review, conducted by independent consultants, has identified that the health promotion program is working effectively but needs further focusing in some areas of HIV prevention. These findings will inform the development of priorities for HIV policy, funding and service provision for the period 2004 – 2006.

Discussion

The number of new HIV notifications in New South Wales has increased in 2002 and 2003 from the lowest annual number in 2001. The increase in HIV notifications in New South Wales is consistent with increases in the number of new HIV notifications in gay communities around Australia and overseas.

Notifications of newly acquired infection have also risen since 2001. The contribution to the increase of improved laboratory methods for identification of newly acquired infection has not been explored here.

The response in the increases in HIV notifications has included a review of existing surveillance mechanisms, and the rapid development and implementation of coordinated health promotion activities. Ongoing evaluation of these activities will be used to refine medium and long-term priorities for HIV prevention in New South Wales.

Reported by

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References

Delpech V and Todd K. Monitoring newly diagnosed HIV infection in New South Wales. National Centre in HIV Epidemiology and Clinical Research. *Australian HIV Surveillance Report* 2002; 18(4): 1 - 4

HIV Prevention Interagency. HIV Prevention Among Inner City Gay Men: Health Promotion Action Plan. Unpublished, 2003. NSW Health.

National AIDS Registry

 Table 1.1
 Cases of AIDS and deaths following AIDS by sex and State/Territory in which diagnosis of AIDS was made, cumulative to 30 September 2003, and for two previous yearly intervals

	1 Oct 01 – 30 Sep 02		1 Oct 02 – 3	80 Sep 03	Cumulative to 30 Sep 03				
State/Territory	Male	Female	Male F	emale	Male	Female	Total [†]	%	
ACT	2	0	2	1	92	10	102	1.1	
NSW	81	2	79	2	4 984	213	5 211	57.0	
NT	1	0	1	1	39	1	40	0.4	
QLD	39	3	15	2	936	56	994	10.9	
SA	13	3	4	1	378	30	408	4.5	
TAS	0	1	1	0	47	4	51	0.5	
VIC	41	5	31	3	1 802	88	1 900	20.8	
WA	14	2	10	1	402	33	437	4.8	
Total	191	16	143	11	8 680	435	9 143	100.0	

Cases

Deaths

	1 Oct 01	– 30 Sep 02	1 Oct 02 –	30 Sep 03	Cu	mulative	to 30 Sep	03
State/Territory	Male	Female	Male I	emale	Male	Female	Total [†]	%
ACT	0	1	0	1	71	6	77	1.2
NSW	39	0	35	4	3 417	126	3 552	56.2
NT	0	0	1	0	26	0	26	0.4
QLD	11	0	9	2	614	38	654	10.4
SA	5	2	8	2	255	20	275	4.4
TAS	0	0	1	0	31	2	33	0.5
VIC	12	3	14	0	1 339	57	1 404	22.2
WA	3	2	3	1	275	22	298	4.7
Total	70	8	71	10	6 028	271	6 319	100.0

t

Totals include 28 AIDS cases and 20 deaths following AIDS in people whose sex was reported as transgender.

	1 (Oct 01 – 30 Sej	02	1 (1 Oct 02 – 30 Sep 03				
State/Territory	Male	Female	Total	Male	Female	Total			
ACT	12.6	0.0	6.2	12.5	6.1	9.3			
NSW	24.6	0.6	12.7	23.8	0.6	12.3			
NT	9.6	0.0	5.0	9.6	10.6	10.1			
QLD	21.2	1.6	11.4	8.0	1.1	4.5			
SA	17.3	3.9	10.5	5.3	1.3	3.3			
TAS	0.0	4.2	2.1	4.3	0.0	2.1			
VIC	17.2	2.0	9.5	12.8	1.2	6.9			
WA	14.6	2.1	8.3	10.3	1.0	5.6			
Total	19.6	1.6	10.6	14.5	1.1	7.8			

Table 1.2 Incidence of AIDS per million current population¹ by sex and State/Territory of diagnosis for the two most recent yearly intervals

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

1

Table 1.3Cases of AIDS and deaths following AIDS by sex and age group, cumulative to
30 September 2003, and for two previous yearly intervals

	1 Oct 01 – 30 Sep 02 Male Female		1 Oct 02 – 3	80 Sep 03	Cumulative to 30 Sep 03				
Age group (years)			Male F	emale	Male	Female	Total [†]	%	
0–2	0	1	0	0	9	9	18	0.2	
2–12	0	1	0	0	20	10	30	0.3	
0–12	0	2	0	0	29	19	48	0.5	
13–19	0	0	0	0	27	4	31	0.3	
20–29	12	2	13	2	1 387	108	1 508	16.5	
30–39	68	6	46	6	3 611	163	3 784	41.4	
40–49	79	3	44	2	2 462	71	2 535	27.7	
50–59	24	3	30	1	874	36	913	10.0	
60+	8	0	10	0	290	34	324	3.5	
Total	191	16	143	11	8 680	435	9 143	100.0	

Cases¹

Deaths²

	1 Oct 01	– 30 Sep 02	1 Oct 02 –	30 Sep 03	Cu	mulative	to 30 Sep	03
Age group (years)	Male	Female	Male	Female	Male	Female	Total [†]	%
0–2	0	1	0	0	5	6	11	0.2
2–12	0	0	0	0	17	6	23	0.4
0–12	0	1	0	0	22	12	34	0.5
13–19	0	0	0	0	14	3	17	0.3
20–29	2	1	1	1	683	47	741	11.7
30–39	20	2	20	5	2 401	98	2 506	39.7
40–49	29	1	31	4	1 930	48	1 980	31.3
50–59	14	3	13	0	733	31	764	12.1
60+	5	0	6	0	245	32	277	4.4
Total	70	8	71	10	6 028	271	6 319	100.0

1 Cases are classified by age at diagnosis.

2 Deaths are classified by age at death.

1() - Oct 01	- 30 Sep 02	1 Oct 02 –	30 Sep 03	Cu	mulative	to 30 Sep	03
Exposure category	Male	Female	Male F	emale	Male	Female	Total	%
Male homosexual/								
bisexual contact	146	-	100	-	7 184	-	7 184	81.6
Male homosexual/bisexual								
contact and injecting drug use	7	-	11	-	403	-	403	4.6
Injecting drug use	9	1	4	2	193	93	286	3.2
Heterosexual	5	1	3	1	124	70	194	
Not further specified	4	0	1	1	69	23	92	
Heterosexual contact	20	10	22	9	382	235	617	7.0
Sex with injecting drug user	0	1	1	1	8	25	33	
Sex with bisexual male	_	2	-	0	-	43	43	
From a high prevalence countr	y 3	2	3	2	72	52	124	
Sex with person from a high								
prevalence country	3	0	3	4	59	19	78	
Sex with person with medically	V							
acquired HIV	0	0	0	0	2	10	12	
Sex with HIV infected person,	_							
exposure not specified	5	2	0	1	35	31	66	
Not further specified	9	3	15	1	206	55	261	
Haemophilia/coagulation disorde	er 2	0	0	0	118	3	121	1.4
Receipt of blood/tissue	0	1	0	0	78	65	143	1.6
Health care setting	0	0	0	0	1	3	4	0.1
Total Adults/Adolescents	184	12	137	11	8 359	399	8 758	99.5
Children (under 13 years at Al	DS diag	gnosis)						
Mother with/at risk for HIV infecti	ion 0	2	0	0	13	16	29	0.3
Haemophilia/coagulation disord	er O	0	0	0	5	0	5	0.1
Receipt of blood/tissue	0	0	0	0	11	3	14	0.1
Total children	0	2	0	0	29	19	48	0.5
Sub-total	184	14	137	11	8 388	418	8 806	100.0
Other/undetermined ¹	7	2	6	0	292	17	337	
Total	191	16	143	11	8 680	435	9 1 4 3	

Table 1.4Cases of AIDS by sex and exposure category, cumulative to 30 September 2003,
and for two previous yearly intervals

1

The 'Other/undetermined' exposure category includes 28 AIDS cases in people whose sex was reported as transgender. The category was excluded from the calculation of the percentage of cases attributed to each exposure category.

1 Oct 01 – 30 Sep 02 1 Oct 02 – 30 Sep 03						imulative	to 30 Sep	03
Exposure category	Male	Female	Male	Female	Male	Female	Total	%
Male homosexual/								
bisexual contact	55	-	51	-	5 102	-	5 102	83.5
Male homosexual/bisexual								
contact and injecting drug use	5	-	5	-	280	-	280	4.6
Injecting drug use	4	0	4	3	117	55	172	2.8
Heterosexual	1	0	1	1	79	44	123	
Not further specified	3	0	3	2	38	11	49	
Heterosexual contact	4	6	7	6	165	131	296	4.8
Sex with injecting drug user	0	0	0	1	4	12	16	
Sex with bisexual male	-	0	-	2	-	31	31	
From a high prevalence country	2	2	0	0	17	16	33	
Sex with person from a high								
prevalence country	0	0	1	1	19	11	30	
Sex with person with medically								
acquired HIV	0	0	0	0	2	7	9	
Sex with HIV infected person,								
exposure not specified	0	1	1	0	23	17	40	
Not further specified	2	3	5	2	100	37	137	
Haemophilia/coagulation disorder	1	0	0	0	93	3	96	1.6
Receipt of blood/tissue	0	1	0	0	68	56	124	2.0
Health care setting	0	0	0	0	1	2	3	0.1
Total Adults/Adolescents	69	7	67	9	5 826	247	6 073	99.4
Children (under 13 years at dea	th fol	lowing AIDS)					
Mother with/at risk for HIV infection	1 O	1	0	0	8	10	18	0.3
Haemophilia/coagulation disorder	0	0	0	0	3	0	3	0.1
Receipt of blood/tissue	0	0	0	0	11	2	13	0.2
Total children	0	1	0	0	22	12	34	0.6
Sub-total	69	8	67	9	5 848	259	6 107	100.0
Other/undetermined ¹	1	0	4	1	180	12	212	
Total	70	8	71	10	6 028	271	6 319	

Table 1.5 Deaths following AIDS by sex and exposure category, cumulative to 30 September 2003, and for two previous yearly intervals

1

The 'Other/undetermined' exposure category includes 20 deaths following AIDS in people whose sex was reported as transgender. The category was excluded from the calculation of the percentage of cases attributed to each exposure category.

The National HIV Database

Table 2.1 Number of new diagnoses of HIV infection by sex¹ and State/Territory, cumulative to 30 September 2003, and for two previous yearly intervals

	1 Oct 01 – 30 Sep 02		1 Oct 02 -	- 30 Sep 03	Cı	Cumulative to 30 Sep 03				
State/Territory	Male	Female	Male	Female	Male	Female	Total	Rate ²		
ACT	6	1	4	1	243	29	272	83.1		
NSW ³	343	25	400	37	12 260	718	13 240	196.7		
NT	5	4	3	1	119	15	134	67.4		
QLD	103	10	127	19	2 351	203	2 562	67.5		
SA	32	8	34	2	783	78	861	55.4		
TAS	4	2	0	0	85	7	92	19.4		
VIC ⁴	190	26	197	16	4 542	285	4 869	98.3		
WA	25	13	37	14	1 048	158	1 213	61.8		
Total⁵	708	89	802	90	21 431	1 493	23 243 ⁶	116.3		

1 Fifty nine people (26 NSW, 8 QLD, 18 VIC and 7 WA) whose sex was reported as transgender are included in the total columns of Tables 2.1 – 2.3

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 236 people whose sex was not reported.

4 Cumulative total for VIC includes 24 people whose sex was not reported.

5 Cumulative total for Australia includes 260 people whose sex was not reported.

6 Estimated number of new diagnoses of HIV infection, adjusted for multiple reports, was 20 420 (range 19 950 to 20 900). Reference: Law MG, McDonald AM and Kaldor JM. Estimation of cumulative HIV incidence in Australia, based on national case reporting. Aust NZ J Public Health 1996; 20: 215 - 217

	ct 01 -	- 30 Sep 02	1 Oct 02 -	- 30 Sep 03	Cu	mulative	to 30 Sep	03
Exposure category	Male	Female	Male	Female	Male	Female	Total'	%
Male homosexual/								
bisexual contact	529	-	580	-	15 015	-	15 015	77.2
Male homosexual/bisexual								
contact and injecting drug use	24	-	40	-	808	-	808	4.2
Injecting drug use	19	1	24	7	640	197	844	4.3
Heterosexual	14	1	12	6	257	145	403	
Not further specified	5	0	12	1	383	52	441	
Heterosexual contact	68	80	83	75	1 169	987	2 162	11.1
Sex with injecting drug user	3	6	3	3	33	96	129	
Sex with bisexual male	-	7	-	10	-	133	133	
From a high prevalence country	22	33	20	26	245	275	523	
Sex with person from a high								
prevalence country	13	11	22	9	208	109	317	
Sex with person with medically								
acquired HIV	0	0	0	0	5	17	22	
Sex with HIV infected person,								
exposure not specified	2	11	7	15	67	147	215	
Not further specified	28	12	31	12	611	210	823	
Haemophilia/coagulation disorder	• 1	0	0	0	220	4	224	1.1
Receipt of blood/tissue	0	0	0	0	106	102	208	1.1
Health care setting ²	0	1	0	0	3	9	12	0.1
Total Adults/Adolescents ¹	641	82	727	82	17 961	1 299	19 273	99.2
Children (under 13 vears at HIV	diaqı	nosis)						
Mother with/at risk for HIV infection	n ³ 0	, ,	1	٥	40	31	71	0.4
Hapmonbilia/coagulation disorder	· 0	0	0	0	0 + 66	0	66	0.4
Receipt of blood/tissue	0	0	0	0	12	0 g	21	0.5
	0	0		0	10	0	450	0.1
Total children	0	3	1	0	119	39	158	0.8
Sub-total	641	85	728	82	18 080	1 338	19 431	100.0

Table 2.2Number of new diagnoses of HIV infection for which exposure category was reported,
by sex and exposure category, cumulative to 30 September 2003, and for two
previous yearly intervals

1 Total column includes people whose sex was not reported.

67

708

2 'Health care setting' includes 6 cases of occupationally acquired HIV infection and 4 cases of HIV transmission in surgical rooms.

3 A total of 309 children were notified as having been born to women with HIV infection, cumulative to 30 September 2003.

4

89

4 The 'Other/undetermined' exposure category includes 3 793 adults/adolescents and 19 children. Fifty nine people whose sex was reported as transgender were 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.

74

802

8

90

3 351

21 431

3 812

155

1 493 23 2435

5 See footnote Table 2.1

Other/undetermined⁴

Total¹

Age group	up 1 Oct 01 – 30 Sep 02		1 Oct 02 -	30 Sep 03	Cı	umulative	to 30 Sep	03
(years)	Male	Female	Male	Female	Male	Female	Total ¹	%
0–2	0	1	0	0	43	20	64	0.3
3–12	0	2	1	0	91	22	113	0.5
0–12	0	3	1	0	134	42	177	0.8
13–19	8	5	4	4	433	95	537	2.3
20–29	178	28	162	24	7 094	601	7 819	33.6
30–39	304	39	330	40	8 009	438	8 554	36.8
40–49	139	7	174	10	3 812	155	4 011	17.2
50–59	61	4	101	6	1 345	61	1 417	6.1
60+	18	3	29	6	436	69	507	2.2
Not reported	0	0	1	0	168	32	221	1.0
Total ¹	708	89	802	90	21 431	1 493	23 243	100.0

Table 2.3 Number of new diagnoses of HIV infection by sex and age group, cumulative to 30 September 2003, and for two previous yearly intervals

1

See footnotes Table 2.2

Table 2.4Number of new diagnoses of HIV infection in the year 1 October 2002 to
30 September 2003 for which an HIV seroconversion illness was diagnosed or
the date of a prior negative test was within one year of diagnosis of HIV infection,
by sex and State/Territory and for two six month intervals of HIV diagnosis

	1 Oct 02 -	31 Mar 03	1 Apr 03 –	30 Sep 03	1 00	ct 02 – 30	Sep 03
State/Territory	Male	Female	Male F	emale	Male	Female	Total ³
ACT	0	0	0	0	0	0	0
NSW ¹	84	2	68	2	152	4	158
NT	0	0	0	0	0	0	0
QLD	23	3	11	1	34	4	38
SA	1	0	11	0	12	0	12
TAS	0	0	0	0	0	0	0
VIC	33	1	34	2	67	3	70
WA ²	3	1	7	0	10	1	12
Total ³	144	7	131	5	275	12	290

1	Total includes one person whose sex was reported as transgender and one person whose sex was not reported.
2	Total includes one person whose sex was reported as transgender.
3	Total includes two people whose sex was reported as transgender and one person whose sex was not reported.

Table 2.5Number of new diagnoses of HIV infection in the year 1 October 2002 to 30September 2003 for which an HIV seroconversion illness was diagnosed or the date
of a prior negative test was within one year of diagnosis of HIV infection, by sex and
exposure category and for two six month intervals of HIV diagnosis

	1 Oct 02 -	31 Mar 03	1 Apr 03 –	30 Sep 03	1 Oct 0	2 – 30 S	ep 03
Exposure category	Male F	Female	Male Fe	emale	Male Fe	emale	Total ¹
Male homosexual/bisexual contact	127	-	117	-	244	_	244
Male homosexual/bisexual contact and injecting drug use	6	_	6	_	12	_	12
Injecting drug use (female and heterosexual male)	2	0	3	2	5	2	7
Heterosexual contact ¹	6	7	3	3	9	10	20
Health care setting	0	0	0	0	0	0	0
Other/undetermined ²	3	0	2	0	5	0	7
Total ³	144	7	131	5	275	12	290

1 Total includes one person whose sex was not reported.

2 Total includes two people whose sex was reported as transgender.

3 Total includes two people whose sex was reported as transgender and one person whose sex was not reported.

Table 2.6Number of new diagnoses of HIV infection in the year 1 October 2002 to
30 September 2003 for which an HIV seroconversion illness was diagnosed or
the date of a prior negative test was within one year of diagnosis of HIV infection,
by sex and age group and for two six month intervals of HIV diagnosis

Age Group	1 Oct 02	1 Oct 02 – 31 Mar 03		1 Apr 03 – 30 Sep 03		1 Oct 02 – 30 Sep 03		
(years)	Male	Female	Male Fe	emale	Male F	emale	Total ³	
13–19	1	0	2	0	3	0	3	
20–29 ¹	38	1	32	1	70	2	73	
30-39 ²	67	4	56	4	123	8	133	
40-49	29	2	26	0	55	2	57	
50–59	7	0	13	0	20	0	20	
60+	2	0	2	0	4	0	4	
Total ³	144	7	131	5	275	12	290	

1	Total includes one person whose sex was reported as transgender.
2	Total includes one person whose sex was reported as transgender and one person whose sex was not reported.
3	Total includes two people whose sex was reported as transgender and one person whose sex was not reported.

Sentinel surveillance of HIV infection in sexual health clinics

Table 3.1Number of people seen, number of people tested for HIV antibody and number of
people newly diagnosed with HIV infection, by sex and sexual health clinic, during
the quarter 1 July to 30 September 2003

	Tested f Seen at Clinic HIV antib		ted for antibody	for Newly diagnose body with HIV infectio			
Sexual health clinic	Male	Female	Male	Female	Male	Female	Total
Sydney Sexual Health Centre, NSW	756	560	271	169	1	0	1
Livingstone Road Sexual Health Centre, Marrickville, NSW	679	670	352	241	0	0	0
Brisbane Sexual Health Clinic, QLD	1 055	928	408	283	0	0	0
Gold Coast Sexual Health Clinic, QLD	440	566	146	236	0	0	0
Clinic 275, Adelaide, SA	1 250	746	937	488	0	0	0
Melbourne Sexual Health Centre, VIC	2 359	2 227	767	610	4	0	4
Total	6 539	5 697	2 881	2 027	5	0	5

 Table 3.2
 Number of people seen 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 July to 30 September 2003

	Previous negative HIV antibody test		% retested for HIV antibody		N	Newly diagnosed with HIV infection			
Exposure category	Male	Female	Male	Female	Male	Female	Total	%	
Male homosexual/									
bisexual contact	983	-	59.4	-	3	-	3	0.5	
Male homosexual/bisexual									
contact and injecting drug use	77	-	62.3	-	2	-	2	4.2	
Injecting drug use									
(female and heterosexual male)	139	105	51.8	46.7	0	0	0	0.0	
Heterosexual contact	1 911	1 707	42.8	35.2	0	0	0	0.0	
outside Australia	263	223	52.9	50.7	0	0	0	0.0	
within Australia only	1 648	1 484	41.2	32.9	0	0	0	0.0	
Sex worker	-	670	-	50.4	-	0	0	0.0	
Sex worker and injecting									
drug use	-	70	-	60.0	-	0	0	0.0	
Other/undetermined	60	75	36.7	40.0	0	0	0	0.0	
Total	3 170	2 627	48.7	40.4	5	0	5	0.3	

Table 3.3Number of people seen 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 July to 30 September 2003

	No previous HIV antibody test		% tes HIV a	% tested for HIV antibody		Newly diagnosed with HIV infection		
Exposure category	Male	Female	Male	Female	Male	Female	Total	%
Male homosexual/								
bisexual contact	456	-	54.8	-	0	-	0	0.0
Male homosexual/bisexual								
contact and injecting drug use	21	-	61.9	-	0	-	0	0.0
Injecting drug use								
(female and heterosexual male) 73	47	82.2	44.7	0	0	0	0.0
Heterosexual contact	2 364	2 657	41.0	31.1	0	0	0	0.0
outside Australia	346	351	63.0	53.8	0	0	0	0.0
within Australia only	2 018	2 306	37.2	27.6	0	0	0	0.0
Sex worker	-	111	-	61.3	-	0	0	0.0
Sex worker and injecting								
drug use	-	20	-	50.0	-	0	0	0.0
Other/undetermined	235	214	19.6	19.6	0	0	0	0.0
Total	3 149	3 049	42.5	31.7	0	0	0	0.0

Table 3.4Number of people seen, 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 July to 30 September 2003

	Seen at Clinic		Tested for HIV antibody		Newly diagnosed with HIV infection		
Age group (years)	Male	Female	Male	Female	Male	Female	Total
13–19	216	593	109	187	0	0	0
20–29	2 626	2 913	1 259	1 077	4	0	4
30–39	2 043	1 434	887	504	1	0	1
40–49	1 019	565	372	202	0	0	0
50-59	444	149	183	54	0	0	0
60+	191	43	71	3	0	0	0
Total	6 539	5 697	2 881	2 027	5	0	5

The HIV Epidemic in Australia

A cumulative profile to 30 September 2003



Estimated number of new diagnoses of HIV infection, adjusted for multiple reports, was 20,420 (range 19,950 - 20,900)



National Centre in HIV Epidemiology and Clinical Research Australian HIV Surveillance Update

Vol 20 No 1 January 2004

Diagnoses in the third quarter

1 July - 30 September 2003

- a total of 208 diagnoses of HIV infection, 36 diagnoses of AIDS and 21 deaths following AIDS were reported, by 31 December 2003, to have occurred in the third quarter of 2003
- following adjustment for reporting delay, the estimated numbers of AIDS diagnoses and deaths following AIDS occurring in the third quarter of 2003 were 88 and 34
- in comparison, 197 diagnoses of HIV infection, 52 diagnoses of AIDS and 23 deaths following AIDS were reported by 31 December 2003, to have occurred in the third quarter of 2002

New HIV infection

During the third quarter of 2003, 57 cases were reported as having newly acquired HIV infection identified by a negative test within the 12 months prior to diagnosis or the diagnosis of HIV seroconversion illness. A history of male homosexual contact, with or without a history of injecting drug use, was reported in 51 (89.5%) cases.

Diagnoses in the year to 30 September 2003

- 899 diagnoses of HIV infection
- 155 diagnoses of AIDS
- 81 deaths following AIDS were reported by 31 December 2003

HIV diagnoses

People diagnosed with HIV infection in the year to 30 September 2003 had an average age of 37 years and 0.9% was in the age group 13 – 19 years

- 89.2% were male, 10.0% were female, and sex was not reported or was reported as transgender in 0.5% and 0.2% of cases, respectively
- of 728 cases of HIV infection, newly diagnosed in males in the year to 30 September 2003 for which exposure to HIV was recorded, a history of male homosexual contact, with or without a history of injecting drug use, was reported in 85.2%.

Total diagnoses to 30 September 2003

- 23,243 diagnoses of HIV infection
- 20,420 diagnoses of HIV infection following adjustment for multiple reporting
- 9,143 diagnoses of AIDS
- 6,319 deaths following AIDS were reported by 31 December 2003

HIV testing in sexual health clinics

Six sexual health clinics in Adelaide, Brisbane, Gold Coast, Melbourne and Sydney tested 4,908 people in the quarter 1 July – 30 September 2003 who were not previously known to have HIV infection

- of 2,304 people reported as having been tested for the first time, 0 (0.0%) were found to have HIV infection
- of 2,604 people reported as having been retested following a previous negative test, 5 (0.3%) were found to have HIV infection
- of 632 men who reported a history of homosexual contact, with or without a history of injecting drug use, who were retested following a previous negative test, 5 (0.8%) were newly diagnosed with HIV infection

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Australian HIV Surveillance Report

National Centre in HIV Epidemiology and Clinical Research

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Desktop publishing	Peta Thurling. Design [Tel 02 48 211136]

ISSN 1035-221X

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 sexual health 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 sexual health 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.

Abbreviations: HIV is the human immunodeficiency virus, and unless otherwise specified, refers to HIV-1 only. AIDS is the acquired immunodeficiency syndrome and STI stands for sexually transmissible infection. High prevalence countries are those of sub-Saharan Africa, the Caribbean and specific countries in South East Asia (Cambodia, Myanmar and Thailand), where HIV prevalence is above 1% and transmission 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.

All data in this report are provisional and subject to future revision.

The Australian HIV Surveillance Report is produced by the National Centre in HIV Epidemiology and Clinical Research on a quarterly basis, issued in January, April, July and October. Subscription is free, and can be obtained by writing to the Editor or by calling the Epidemiology Section of the NCHECR:

Australian HIV Surveillance Report National Centre in HIV Epidemiology and Clinical Research 376 Victoria Street Darlinghurst NSW 2010 Australia Tel: (02) 9385 0900 Fax: (02) 9385 0920 International prefix: (612) Email: recept@nchecr.unsw.edu.au Internet: www.med.unsw.edu.au/nchecr

State/Territory publications of surveillance data, available through the Internet, are listed below:

NSW Public Health Bulletin	www.health.nsw.gov.au/public-health/phb/phb.html
The Northern Territory Disease Control Bulletin	www.nt.gov.au/health/cdc/aids_std/report/index.shtml
Sexually Transmitted Diseases in South Australia	www.stdservices.on.net/publications
Victorian Infectious Diseases Bulletin	www.dhs.vic.gov.au/phd/vidb/
Disease WAtch	www.public.health.wa.gov.au/

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