HIV SURVEILLANCE QUARTERLY REPORT, 2nd Quarter 2020

STI/HIV/Viral Hepatitis Surveillance Program, Published November 2020



HIV diagnoses and AIDS diagnoses occurring January 1, 2020 through June 30, 2020; and people diagnosed with HIV, reported in Colorado, and presumed to be living as of June 30, 2020¹

								New A	AIDS	PLHIVd	c as of	Vira	al	
	New HIV Diagnoses							diagnoses ⁴		6/30/20		Suppres	Suppression ⁵	
	Total		No Concurrent AIDS diagnosis		Concurrent with AIDS diagnosis ²									
													Row	
	No.	%	No.	%	No.	%	Row % ³	No.	%	No.	%	No.	% ⁶	
Total	137	100%	107	100%	30	100%	22%	62	100%	14,892	100%	8,150	55%	
Gender ⁷														
Male	112	82%	85	79%	27	90%	24%	53	85%	12,850	86%	6,900	54%	
Female	22	16%	19	18%	3	10%	14%	9	15%	1,892	13%	1,156	61%	
Transgender Female	3	2%	3	3%	0	0%	0%	0	0%	137	1%	84	61%	
Transgender Male	0	0%	0	0%	0	0%	0%	0	0%	13	0%	10	77%	
Race and Hispanic Origin ⁸														
Asian/Pacific Islander, NH	2	1%	2	2%	0	0%	0%	1	2%	206	1%	125	61%	
Black/African American, NH	21	15%	17	16%	4	13%	19%	7	11%	2,341	16%	1,253	54%	
Hispanic/Latinx (All Races)	44	32%	31	29%	13	43%	30%	24	39%	3,436	23%	2,010	58%	
Indigenous/Native American, NH	3	2%	3	3%	0	0%	0%	3	5%	106	1%	54	51%	
Multiple Race/Unknown, NH	0	0%	0	0%	0	0%	0%	0	0%	339	2%	185	55%	
White, NH	67	49%	54	50%	13	43%	19%	27	44%	8,464	57%	4,523	53%	
Age group (years) ⁹														
Under 13	0	0%	0	0%	0	0%	0%	0	0%	30	0.2%	23	77%	
13-19	5	4%	5	5%	0	0%	0%	0	0%	72	0.5%	54	75%	
20-29	53	39%	42	39%	11	37%	21%	15	24%	1,062	7%	656	62%	
30-39	37	27%	31	29%	6	20%	16%	17	27%	2,541	17%	1,576	62%	
40-49	21	15%	14	13%	7	23%	33%	15	24%	2,933	20%	1,787	61%	
50-59	16	12%	11	10%	5	17%	31%	13	21%	4,480	30%	2,444	55%	
60 and over	5	4%	4	4%	1	3%	20%	2	3%	3,774	25%	1,610	43%	
County of Residence ¹⁰														
Denver TGA ¹¹	93	68%	71	66%	22	73%	24%	43	69%	10,886	73%	5,977	55%	
Non-TGA Urban ¹²	32	23%	27	25%	5	17%	16%	15	24%	2,869	19%	1,580	55%	
Rural	12	9%	9	8%	3	10%	25%	4	6%	1,115	7%	591	53%	
Unknown	0	0%	0	0%	0	0%	0%	0	0%	22	0.1%	2	9%	
Exposure Category														
Male-male sex (MSM)	77	56%	57	53%	20	67%	26%	40	65%	9,382	63%	5,271	56%	
Injection Drug Use (IDU)	7	5%	6	6%	1	3%	14%	3	5%	861	6%	396	46%	
MSM & IDU	11	8%	9	8%	2	7%	18%	7	11%	1,555	10%	827	53%	
Heterosexual contact	17	12%	14	13%	3	10%	18%	6	10%	1,494	10%	894	60%	
Pediatric ¹³	1	1%	1	1%	0	0%	0%	0	0%	153	1%	98	64%	
Transfusion/Hemophiliac	0	0%	0	0%	0	0%	0%	0	0%	33	0.2%	17	52%	
No Identified Risk ¹⁴ /Other	24	18%	20	19%	4	13%	17%	6	10%	1,414	9%	647	46%	

Data Source: enhanced HIV/AIDS Reporting System (eHARS). PLHIV=People living with HIV; dx=diagnosis/diagnosed; N/A=Not applicable. All percents are column percents unless otherwise indicated and may not equal 100% due to rounding. ¹For events reported by June 30, 2020. ²HIV diagnosed concurrently with AIDS (within 30 days of HIV diagnosis). ³Row percent is percent of total HIV diagnoses that were concurrent with AIDS diagnoses. ⁴AIDS=Stage 3, diagnosed with a cd4 count <200 or in the absence of a cd4 count, a cd4 percent <14. Includes concurrent AIDS diagnoses and those that progressed to AIDS. ⁵Includes those labs from the previous 12 months. Suppressed includes a viral load ≤200 cells/mL. ⁶Row percent of PLHIVdx as of 6/30/20. ⁷Sex at birth used when gender identity was unknown. ⁸NH=Non-Hispanic. ⁹For HIV and AIDS diagnoses, age at diagnosis; for PLHIVdx and vI suppression, age as of June 30, 2020. ¹⁰For HIV and AIDS diagnoses, residence at diagnosis; for PLHIVdx and vI suppression, residence as of June 30, 2020. ¹¹Includes Adams, Arapahoe, Broomfield, Denver, Douglas, and Jefferson counties. ¹²Includes Boulder, EI Paso, Larimer, Mesa, Pueblo, and Weld counties. ¹³Pediatric cases are individuals under age 13 years at the time of diagnosis. ¹⁴No Identified Risk will be reduced over a 12 month period after diagnosis as new risks are reported. The Colorado Department of Public Health and Environment acknowledges that social, economic and environmental inequities result in adverse health outcomes and have a greater impact than individual choices. Reducing health disparities through systems change can help improve opportunities for all Coloradans.