HIV SURVEILLANCE QUARTERLY REPORT, 3rd Quarter 2021

STI/HIV/Viral Hepatitis Surveillance Program, Published January 2022



HIV diagnoses and AIDS diagnoses occurring January 1, 2021 through September 30, 2021; and people diagnosed with HIV, reported in Colorado, and presumed to be living as of September 30, 2021

								New A		PLHIVd		Vir	
	New HIV Diagnoses						diagnoses ⁴		09/30/21		Suppression ⁵		
	Total		Non Concurrent AIDS diagnosis		Concurrent with AIDS diagnosis ²								
								Į					Row
	No.	%	No.	%	No.	%	Row % ³	No.	%	No.	%	No.	% ⁶
Total	304	100%	243	100%	61	100%	20%	86	100%	14,758	100%	7,665	52%
Gender ⁷													
Man	248	82%	195	80%	53	87%	21%	73	85%	12,723	86%	6,524	51%
Transgender Man	1	0.3%	1	0.4%	0	0%	0%	0	0%	15	0.1%	9	60%
Transgender Woman	11	4%	10	4%	1	2%	9 %	1	1%	130	1%	71	55%
Woman	44	14%	37	15%	7	11%	16%	12	14%	1,890	13%	1,061	56%
Race and Hispanic Origin ⁸													
Asian/Pacific Islander, NH	7	2%	5	2%	2	3%	29%	2	2%	209	1%	123	59 %
Black/African American, NH	51	17%	43	18%	8	13%	16%	14	16%	2,309	16%	1,144	50%
Hispanic/Latino/a/x (All Races)	96	32%	74	30%	22	36%	23%	25	29%	3,549	24%	1,977	56%
Indigenous/Native American, NH	6	2%	6	2%	0	0%	0%	0	0%	109	1%	51	47%
Multiple Race/Unknown, NH	6	2%	5	2%	1	2%	17%	3	3%	301	2%	150	50%
White, NH	138	45%	110	45%	28	46%	20%	42	49%	8,281	56%	4,220	51%
Age group (years) ⁹													
Under 13	0	0%	0	0%	0	0%	0%	0	0%	19	0.1%	15	79 %
13-24	55	18%	51	21%	4	7 %	7%	6	7%	306	2.1%	192	63%
25-34	122	40%	97	40%	25	41%	20%	29	34%	2,010	14%	1,190	59 %
35-44	65	21%	55	23%	10	16%	15%	19	22%	2,701	18%	1,573	58%
45-54	35	12%	25	10%	10	16%	29%	12	14%	3,268	22%	1,834	56%
55-64	22	7%	12	5%	10	16%	45%	14	16%	4,144	28%	2,016	49 %
65 and over	5	2%	3	1%	2	3%	40%	6	7%	2,310	16%	845	37%
County of Residence ¹⁰													
Denver TGA ¹¹	208	68%	162	67%	46	75 %	22%	64	74%	10,740	73%	5,644	53%
Non-TGA Urban ¹²	73	24%	61	25%	12	20%	16%	17	20%	2,873	19%	1,462	51%
Rural	23	8%	20	8%	3	5%	13%	5	6%	1,107	8%	545	49%
Unknown	0	0%	0	0%	0	0%	0%	0	0%	38	0.3%	14	37%
Exposure Category													
Heterosexual contact	36	12%	29	12%	7	11%	19%	6	7 %	1,506	10%	825	55%
Injection Drug Use (IDU)	13	4 %	8	3%	5	8%	38%	7	8%	820	6%	346	42%
Male-male sex (MSM)	179	59 %	151	62%	28	46%	16%	47	55 %	9,357	63%	5,059	54%
MSM & IDU	19	6%	16	7%	3	5%	16%	5	6%	1,461	10%	740	51%
Pediatric ¹³	0	0%	0	0%	0	0%	0%	1	1%	154	1%	90	58%
Transfusion/Hemophiliac	0	0%	0	0%	0	0%	0%	0	0%	32	0.2%	12	38%
No Identified Risk ¹⁴ /Other	57	19%	39	16%	18	30%	32%	20	23%	1,428	10%	593	42%

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 December 31, 2021. 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 09/30/21. ⁷Sex at birth used when gender identity was unknown. ⁸NH=Non-Hispanic. ⁹For HIV and AIDS diagnoses, age at diagnosis; for PLHIVdx and vl suppression, age as of September 30, 2021. ¹⁰For HIV and AIDS diagnoses, residence at diagnosis; for PLHIVdx and vl suppression, residence as of September 30, 2021. ¹¹Includes Adams, Arapahoe, Broomfield, Denver, Douglas, and Jefferson counties. ¹²Includes Boulder, El 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.