

**Epidemiology Bureau** 

Number of Newly Diagnosed with HIV per day:

2014 2010 2012 9 17



2016

2017

## **NEWLY DIAGNOSED HIV CASES IN THE PHILIPPINES**

2008

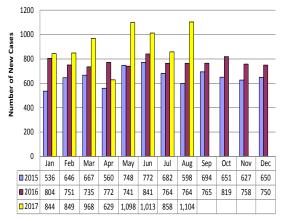
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**Table 1. Quick Facts** 

Demographic Data	Jul-Aug 2017	Jan-Aug 2017	Jan 2012 - Aug 2017	Cumulative Jan1984 - Aug 2017
Total Reported Cases	1,962	7,363	38,621	46,985
Asymptomatic Cases	1,712	6,472	35,047	42,429
AIDS Cases	250	891	3,574	4,556
Male	1,873	6,989	36,900	43,790ª
Female	89	374	1,721	3,184ª
Age Range (Median)	3-66 (27)	1-79 (27)	1-82 (28)	1-82 (28)
Less than 15 y/o	7	28	81	139 <sup>b</sup>
15-24 у/о	610	2,276	11,079	12,996 <sup>b</sup>
25-34 y/o	1,009	3,723	20,301	24,109 <sup>b</sup>
35-49 у/о	301	1,168	6,288	8,408, <sup>b</sup>
50 y/o & above	35	168	872	1,259 <sup>b</sup>
Pregnant Living with HIV	18	58		207
Newly Started on ART	1,573			
Total PLHIV on ART				22,413
Reported Deaths	118	334		2,303

<sup>a</sup>No data available on sex for (11) cases <sup>b</sup>No data available on age for (74) cases

#### Figure 1. Number of New HIV Cases by Month (2015-2017)\*



\*Due to the system enhancement done in 2016, the number of cases for September 2015, March 2016, Jun 2016, and July 2016 were changed upon updating the database.

Figure 2. Percentage of Newly Diagnosed In July to August 2017, there Cases per Region (Jul - Aug 2017) were 1,962 new HIV antibody

sero-positive individuals reported to the HIV/AIDS & ART Registry of the Philippines (HARP) [Table 1]. Eighty-seven percent of those were asymptomatic at the time of reporting.

Most (95%) were male. The median age was 27 years old (age range: 3 to 66 years). More than half of the cases were from the 25-34 year age group while 31% were youth aged 15-24 years.

The regions with the most number of reported cases were: National Capital Region (NCR) with 732 (37%) cases, Region 4A with 344 (18%) cases,

Region NCR 37% **4**A 18% 3 9% 7 7% 6 6% 11 6% 10 3% 2% 1 5 2% 8 2% 12 2% 9 2% CARAGA 1% 2 1%

<1% \*Executive Order No. 38 s. 2017

1%

1%

CAR

4B

ARMM

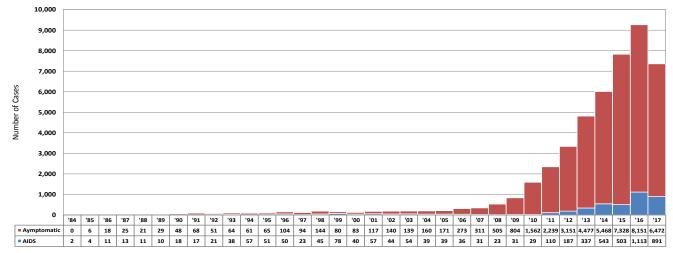
Region 3 with 179 (9%) cases, Region 7 with 144 (7%) cases, Regions 6 with 121 (6%) cases and Region 11 with 116 (6%) cases. An additional 326 cases (17%) came from the rest of the country.

Reported modes of transmission were sexual contact (1,892), needle sharing among injecting drug users (IDU) [35] and motherto-child transmission (7). Eighty-eight percent of infections transmitted through sexual contact were among males who have sex with males (MSM<sup>a</sup>). There were 28 cases that had no data on mode of transmission.

A total of 18 pregnant women were diagnosed with HIV in July to August 2017. Ten cases were from NCR, 4 cases were from Region 4A, 3 cases were from Region 7, and 1 case from Region 3.

<sup>a</sup>male-male sex and sex with both males & females

Figure 3. Number of HIV Cases Reported in the Philippines by Year, January 1984 to August 2017 (N=46,985)\*



## PLHIV on Anti-Retroviral Therapy (ART)

From July to August 2017, there were 1,573 patients who started on ART (1,572 are still alive on ART and 1 died 7 weeks after initiation on ART). The median CD4 of these patients upon enrollment was 169 cells/mm<sup>3</sup>.

A total of 22,413<sup>\*</sup> PLHIV were presently on ART as of August 2017. Most (97%) were males. The median age of patients was 31 years (range: 3 months-79 years). Ninety-five percent were on first line regimen, 4% were on second line regimen, and 1% were on other regimen.

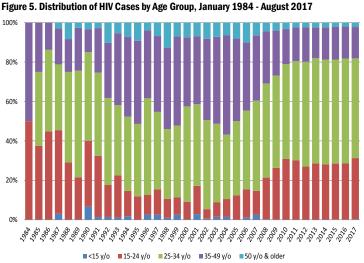
\*Note: This is the total number of adult and pediatric patients currently enrolled and accessing antiretroviral drugs (ARV) in the 50 treatment hubs and satellites. It does not include patients who were previously taking ARV but have died, left the country, have been lost to follow up, or optet not to take ARV anymore. A person is considered lost to follow up if the person has not visited a treatment facility more than 3 months after the expected date of ARV person is considered lost to follow up if the person has not visited a treatment #\*July data used for ITRMC, PMC, and ZONC due to reporting delay.

## HIV/AIDS EPIDEMIC TRENDS IN THE PHILIPPINES (January 1984 - August 2017)

The first AIDS case in the Philippines was reported in 1984. From January 1984 to August 2017, there has been 46,985 HIV Ab sero-positive cases reported to the HARP (Table 1). Ninety percent (42,429) of the total reported cases were asymptomatic at the time of reporting. Ninety-three percent (43,790) were male and 3,184 (7%) were female<sup>\*</sup>. The median age<sup>\*</sup> was 28 years old (age range: 1 year - 82 years). More than half (24,109 or 51%) were from the 25-34 year age group while 12,996 (28%) were youth aged 15-24 years (Figure 5).

Eighty-two percent (38,621) of all the 46,985 diagnosed cases in the Philippines were reported from January 2012 to August 2017 (Table 1). Most (91%) of these cases were still asymptomatic at the time of reporting.

In the early years of the epidemic (1984-1990), 62% (133 of 216 cases) were female. From 1991 to present, males



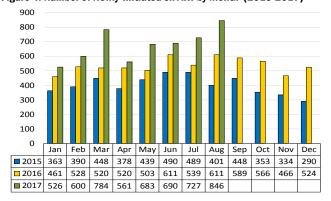
# **Geographical Distribution**

From January 1984 to August 2017, the regions with the most number of reported cases were NCR with 19,555 (42%) cases, Region 4A with 6,751 (14%) cases, Region 7 with 4,309 (9%) cases, Region 3 with 4,084 (9%) cases, and Region 11 with 2,740 (6%) cases. Eighteen percent (8,400) of the cases came from the rest of the country (ROTC) while 1,146 (2%) had no data on region (Table 2).

Of the 3,184 females reported with HIV, 822 (26%) were from NCR, 527 (17%) were from Region 3, 368 (12%) were from Region 7, 325 (10%) were from Region 4A and 838 (26%) were from other regions while 304 (10%) had no data on region.

The regions with the most number of Overseas Filipino Workers (OFW) reported to the HARP were NCR with 1,803 cases, Region 4A with 871 cases, and Region 3 with 565 cases.

Figure 4. Number of Newly-Initiated on ART by Month (2015-2017)



comprised 93% (43,707 out of 46,758) of the total number of HIV/AIDS cases in the Philippines in that time period.

However, the absolute number of cases among females has also been increasing. Cases of HIV transmission from mother-to-child are more likely to increase if female patients are not linked to HIV care. Ninety-three percent (2,945) of all female cases were diagnosed when they were between 15-49 years of age.

The age group with the biggest proportion of cases has become younger: between 2001 to 2005, it was 35-49 years; starting from 2006, the age proportion shifted to 25-34 years (Figure 5). The proportion of HIV positive cases in the 15-24 year age group increased from 25% in 2006-2010 to 29% in 2011-2017.

\*Note: From 1984 — August 2017, 74 did not report AGE, 11 did not report SEX

#### Figure 6. Number of HIV Cases among Females per Year, Jan 1984 - Aug 2017 (N=3,184)

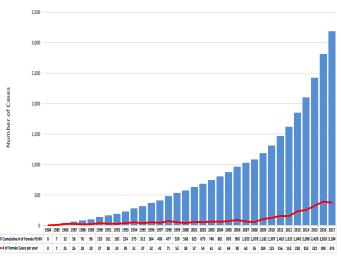


Table 2. Percentage of HIV Cases per Region

Region	Jul - Aug 2017 (N= 1,962)	Jan - Aug 2017 (N=7,363)	Jan 2012 - Aug 2017 (N=38,621) <sup>#</sup>	Cumulative Jan1984 - Aug 2017 (N=46,985) <sup>b</sup>
NCR	732 (37%)	2,656 (36%)	15,846 (41%)	19,555 (42%)
4A	344 (18%)	1,196 (16%)	5,867 (15%)	6,751 (14%)
7	144 (7%)	630 (9%)	3,714 (10%)	4,309 (9%)
3	179 (9%)	756 (10%)	3,396 (9%)	4,084 (9%)
11	116 (6%)	395 (5%)	2,358 (6%)	2,740 (6%)
ROTC	447 (23%)	1,730 (24%)	7,427 (19%)	8,400 (18%)

<sup>a</sup> From January 2012-August 2017, no particular region were reported for 13 cases <sup>b</sup>From January 1984-August 2017, no particular region were reported for 1,146 cases <sup>\*</sup>Due to the regional updates done in 2017 number of cases in July and August wen changed upon updating the database.

#### Table 3. Reported Modes of HIV Transmission

Mode of Transmission	Jul-Aug 2017 (N=1,962)		Jan-Aug 2017 (N=7,363)		Jan 2012-Aug 2017 (N=38,621)		Cumulative Jan 1984-Aug 2017 (N=46,985ª)	
	М	F	М	F	М	F	М	F
Sexual Contact	1,810	82	6,779	355	35,268	1,605	41,594	2,925
Male-Female Sex	152	82	617	355	3,638	1,605	5,194	2,925
Male-Male Sex	1,146	0	4,072	0	19,641	0	22,529	0
Sex with Males & Females	512	0	2,090	0	11,989	0	13,871	0
Blood/Blood Products	0	0	0	0	0	0	5	15
Sharing of Infected Needles	32	3	155	7	1,548	81	1,789	105
Needle Prick Injury	0	0	0	0	0	0	2	1
Mother-to-Child	4	3	17	10	46	33	75	59
No Data Available	27	1	38	2	38	2	325	79
<sup>a</sup> From January 1984—August 2017, 11 did not report sex								

## **Modes of Transmission (MOT)**

From January 1984 to August 2017, MSM was the predominant (36,400 or 83%) mode of transmission among males, followed by male-female sex (5,194 or 12%), and sharing of infected needles (1,789 or 4%) [Table 3]. More than half (19,395 or 53%) of cases among MSM belong to the 25-34 year age group while 10,967 (30%) were youth, 15-24 years old. Among females, male-female sex was the most common transmission (2,925 or 92%) followed by sharing of infected needles (105 or 3%) [Table 3].

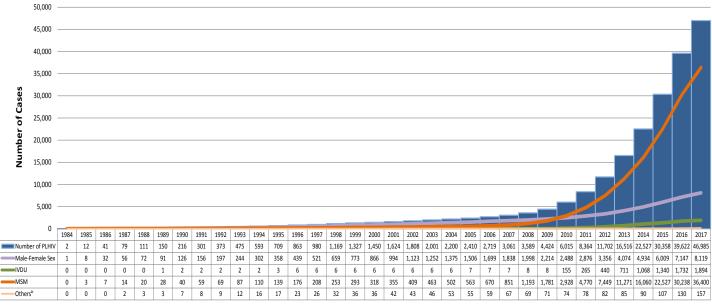
A total of 125 children (less than 10 years old), 8 adolescents (10-19 years old), and 1 adult foreigner (aged 22 years old) were reported to have acquired HIV through mother-to-child transmission.

From 1984 to 2009, the predominant mode of transmission was male-female sex. Beginning 2010, the trend spiked to male-male sex as the predominant MOT and has continually increased since then. In the past five years, from January 2012 to August 2017, 82% (31,630) of new infections through sexual contact were among MSM.

From 1984 to 2009, transmission through sharing of infected needles were at <1% of the total cases reported. The cases among injecting drug users (IDU) spiked in 2010 comprising 9% (147) of the total cases reported that year. However, new cases among people who inject drugs decreased to <6% of the total cases in succeeding years.

In different regions, predominant modes of transmission vary distinctively. Almost half (46%) of the MSM ever reported were from NCR; almost all of the IDU were from Region 7; and 38% of females who engaged in transactional sex were from Region 3.

### Figure 7. Cumulative Number of HIV Transmission by Year, January 1984 - August 2017 (N=46,985)<sup>a</sup>



a No reported Mode of Transmission for (415) cases

<sup>b</sup> Others include the following MOT: needle prick injury, blood/blood products, and mother-to-child transmission
<sup>c</sup> Due to the system enhancement done in 2016 & 2017, the number of cases for September 2015, March 2016, June 2016, July 2016 and June 2017 were changed upon updating the database

## **REPORT ON SPECIAL POPULATIONS**

### Youth (15-24 years old)

From July to August 2017, 610 (31%) cases were among youth aged 15-24 years and 94% of the cases were male. Ninety-eight percent (596) were infected through sexual contact (55 male-female sex, 386 male-male sex, 155 sex with both males & females), 3 (<1%) were infected through sharing of injected needles and there were 11 (2%) who have no data on mode of transmission.

From January 1984 to August 2017, 12,996 (28%) of the reported cases were 15-24 years old. Eighty-five percent (11,079) of all the youth (12,996) were reported from January 2012 to August 2017. From 1984 to 2002, seventy one percent (179) of the cases among the youth were females. However, in 2003, there was an equal number of males and females reported. Since then, the trend shifted to male predominance. Ninety-six percent (12,476) were infected through sexual contact (1,509 male-female sex, 7,078 male-male sex, 3,889 sex with both males & females); 445 were infected through needle sharing among IDU, and 1 was infected through mother-to-child transmission.

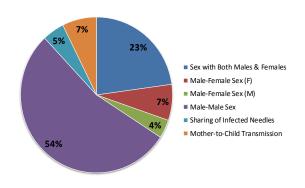
## **REPORT ON SPECIAL POPULATIONS (continuation)**

### Children (<10 years old ) and Adolescents (10-19 years old)

From July to August 2017, a total of 98 adolescents aged 10-19 years were reported to HARP. Almost all (97%) were infected through sexual contact (8 male-female sex, 67 male-male sex, 20 sex with both males & females). Also, there were 7 children aged 10 years and below reported to be HIV positive and all were infected through mother-to-child transmission.

From January 1984 to August 2017, 1,833 (4%) of the reported cases were 19 years old and below. Seven percent (128 out of 1,833) were children and among them 125 were infected through mother-to-child transmission, 1 through blood transfusion and 2 had no specified mode of transmission. Ninety-three percent (1,705 out of 1,833) were adolescents. Among these, 1,553 (91%) were male. Most (94%) of the adolescents were infected through sexual contact (206 male-female sex, 980 male-male sex, 415 sex with both males & females), 85 (5%) were infected through sharing of infected needles, 8 (less than 1%) through mother-to-child transmission, and 11 had no specified mode of transmission (Figure 8).

Figure 8. Modes of Transmission Among Children and Adolescents, January 1984 - August 2017 (N=1,833\*)



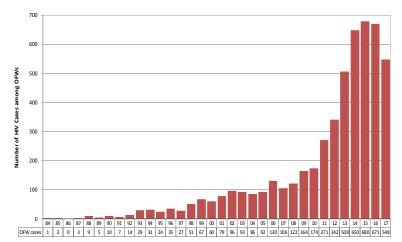
\*Note: No mode of transmission reported for 13 cases

## **Overseas Filipino Workers (OFW)**

One hundred fifty-four (154) OFWs were reported from July to August 2017, comprising 8% of the total newly diagnosed cases. Ninetytwo percent (142) were male. Most (97%) were infected through sexual contact (40 male-female sex, 65 male-male sex, and 45 sex with both males and females) [Figure 10]. The ages of male OFWs ranged from 20-64 years (median: 31 years) and 58% of those belonged to the 25-34 year age group. Among the female OFWs diagnosed from July to August 2017, 58% (7) belong from 25-34 age group while 25% (3) belonged from 35-49 age group. The age ranges from 20-46 years (median: 32 years).

From January 1984 to August 2017, out of the 46,985 cases, 5,187 (11%) were HIV-positive OFWs (Figure 9). Of these, 4,431 (85%) were male. More than half (59%) were MSM (1,705 male-male sex and 1,353 sex with both males & females). The ages of male OFWs ranged from 16 to 80 years (median: 32 years). Among female OFWs, ages ranged from 20 to 73 years (median: 34 years old).

#### Figure 9. Number of Reported OFW diagnosed with HIV, Jan 1984 - Aug 2017 (N=5,187)



## **People who Engage in Transactional Sex**

(Inclusion of transactional sex in the HARP database was initiated in December 2012)

People who engage in transactional sex are those who report that they pay for sex, regularly accept payment for sex, or do both.

From July to August 2017, 10% (195) of the reported cases engaged in transactional sex. Most (97%) were male (Table 4) whose ages ranged from 17 to 60 years (median: 30 years) while five (3%) were female whose age ranges from 21 to 33 years old (median: 23 years).

A total of 4,227 cases reported to HARP from December 2012 to August 2017 were people who engaged in transactional sex. Ninety-six percent (4,048) were male and 4% (179) were female. There were 2,269 (54%) who paid for sex, 1,291 (31%) accepted payment for sex, and 667 (16%) engaged in both.

Figure 10. Modes of Transmission among OFW, Jan 1984 - Aug 2017 (N=5,187)

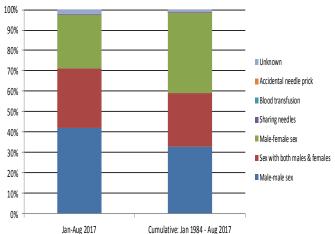


Table 4. HIV Cases Among People who Engage in Transactional Sex

/	Type of Transactional Sex	Jul-Aug 2017 (N=195)	Jan-Aug 2017 (N=705)	Cumulative Dec 2012 - Aug 2017 (N=4,227)
	Accepted payment for sex only:	60 (31%)	229 (32%)	1,291 (31%)
n	Male	56	213	1,191
ł	Female	4	16	100
9	Age Range (Median) in Years	18-48 (27)	16-50 (27)	15-67 (26)
	Paid for sex only:	109 (56%)	365 (52%)	2,269 (54%)
t	Male	109	363	2,254
t	Female	0	2	15
)	Age Range (Median) in Years	17-60 (31)	17-64 (31)	16-79 (31)
)	Engaged in both:	26 (13%)	111 (16%)	667(16%)
	Male	25	100	603
	Female	1	11	64
	Age Range (Median) in Years	20-55 (28)	16-55 (28)	16-59 (28)

## **REPORT ON SPECIAL POPULATIONS (continuation)**

#### Pregnant Women Living with HIV (PWLHIV)

(Inclusion of pregnant women living with HIV in the HARP database was initiated in 2011)

Beginning 2011, pregnant women living with HIV have been included in the HIV/AIDS Registry. The number of reported cases continues to increase yearly (Figure 11).

From July to August 2017, 18 cases of pregnant women with HIV were reported. Ten cases were from NCR, 4 cases from Region 4A, 3 cases from Region 7 and 1 case for Region 3. The median age was 22 years old (age range: 17 to 37 years).

Since 2011, a total of 207 pregnant cases were reported. More than half (117) were from the age group 15-24 years old and 37% (77) were from the age group of 25-34 years old. The regions with highest number of cases are NCR (48%), Region 7 (25%), and Region 4A (9%).

## **DEATHS AMONG PEOPLE WITH HIV**

From July to August 2017, there were 118 reported deaths. Most (93%) were male (Table 5). Two (2%) of the reported deaths belong to less than 15 year age group, 17 (14%) were from 15-24 year age group, 62 (53%) cases were from 25-34 year age group, 29 (25%) cases belong for age groups 35-49 and 8 (7%) cases belong to 50 years and above. Almost all (97%) were infected through sexual contact (58 male-male sex, 37 sex with both males & females, & 20 sex male-female sex), 2 (2%) were infected through mother-to-child transmission and there was one case who has no data on mode of transmission. [Figure 12].

A total of 2,303 deaths were reported from January 1984 to August 2017. Eighty-nine percent (2,048) were male. Of the reported deaths, almost half (1,120 or 49%) belong to 25-34 year age group, 648 (28%) were in 35-49 year age group, 342 (15%) were youth aged 15-24, 171 (7%) were aged 50 years and above, and 19 (<1%) were aged less than 15 years old<sup>a</sup>. Sexual contact (96%) was the common mode of HIV transmission (532 male-female sex, 1,066 male-male sex, 613 both males and females). There were 43 reported deaths among those who were infected through sharing of needles, 18 deaths among those who were infected through mother-to-child transmission, and 9 among those who were infected through blood transfusion (Figure 12)<sup>b</sup>.

<sup>a</sup>Note: No data available on age for (3) cases <sup>b</sup>Note: No data available on mode of transmission for (22) cases

#### Table 5. Demographic data of reported deaths among PHIV

Demographic Data	Jul-Aug 2017	Jan-Aug 2017	Cumulative Jan 1984-Aug 2017
Total Reported Deaths	118*	334	2,303**
Male	110	316	2,048
Female	8	18	255
Less than 15 y/o	2	3	19
15-24 у/о	17	56	342
25-34 y/o	62	176	1,120
35-49 у/о	29	84	648
50 y/o & above	8	15	171

#### Figure 12. Modes of transmission of reported deaths among PHIV\*

	100%							
	90%		17%					
	80%					23%		
S	70%							
Case	60%		32%					
ę	50%					27%		
Number of Cases	40%							
E	30%		500/					
2	20%		50%			46%		
	10%					4070		
	0%							
	0/0		Jul -Aug 2017			Jan 1984-Aug 2017		
-to-Child			2			18		
ransfusion			0		9			
g Drug Use			0		43			
emale Sex			20		532			
both Males & Females			37			613		
ale Sex		58			1,066			
Available			1			22		

\*Note: These are reported deaths from Jul - Aug 2017. Date of death is not necessarily fall in the aforementioned reporting month \*\*No data available on age for (3) cases

HIV/AIDS & ART Registry of the Philippines (HARP) Report HIV/AIDS & ART Registry of the Philippines (HARP) National HIV/AIDS & STI Surveillance and Kaye D. Castañeda, RN The Philippine HIV/AIDS & ART Registry of the Philippines (HARP) is the official record of the Strategic total number of laboratory-confirmed HIV positive individuals, AIDS cases and deaths, and Information Unit HIV Surveillance Officer HIV positive blood units in the Philippines. All individuals in the registry are confirmed by ا میں شکر کی ہے۔ a Isabel G/Artyta, RN, MSPH HIV Surveillande Officer the STD/AIDS Cooperative Central Laboratory (SACCL) at San Lazaro Hospital. While all blood units are confirmed by the Research Institute for Tropical Medicine (RITM). Both are NHSSS Umali, RSW National Reference Laboratories (NRL) of the Department of Health (DOH). Epidemiology Bureau, Department of Health, 2/F Bldg. 19, 唐 Mandatory HIV testing is unlawful in the Philippines (RA 8504). The process of reporting to San Lazaro Compound. Marlene R. Bermein, MD RN, PHSAE the HARP is as follows: All blood samples from accredited HIV testing facilities that are Sta. Cruz, Manila 1003 Philippines HIV Surveillance Database Supervisor veillance Officer screened HIV reactive are sent to SACCL (individuals) or RITM (blood units) for confirmapositive individuals and blood units are reported to the DOHtion. Confirmed HIV Noel S. Palaypayon, RN, MGM-ESP Deputy Manager, HIV Unit Tel: +632 651-7800 local 2926, 2952 Epidemiology Bureau (EB), and are recorded in the HARP. Fax: +632 495-0513 Email: hivepicenter@gmail.com The HARP is a passive surveillance system. Except for HIV confirmation by the NRL, all other Website: http://www.doh.gov.ph J. Samonte, MD, MSc, PHSAE Manager, HIV Unit data submitted to the HARP are secondary and cannot be verified. An example would be an individual's reported place of residence. The HARP is unable to determine if this reported Magas address is where the person got infected, or where the person lived after being infected, or www.facebook.com/hivepicenter \* 🖒 where the person is presently living, or whether the address is valid. This limitation has **gnés B. Segárra, MD, PHSAE** SRAE Division, Epidemiology βureau Agni @hivepicenter major implications to data interpretation. Thus, readers are cautioned to carefully weigh the Chief Autor Marken Autor Asuncion, MD, MHA, CESO IV Director IV, Epidemiology Bureau data and consider other sources of information prior to arriving at conclusions

Mother-to-Blood Trans Injecting Dr Male-Fema Sex with bo

Male-Male

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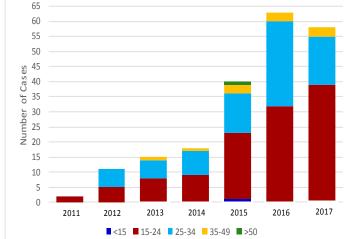


Figure 11. Number of Diagnosed Pregnant Cases Jan 2011 - Aug 2017 (N=207)

## JULY - AUGUST 2017

Regions	Treatment Hub/Satellite Treatment Hub	Address	Contact Information
	Ilocos Training and Regional Medical Center	Parian, San Fernando City, La Union	(072) 607-6418/ (072) 607-9912
1	Mariano Marcos Memorial Hospital and Medical Center	Barangay 6 San Julian, Batac, Ilocos Norte	(077) 600 8000
	Region 1 Medical Center	Dagupan City Hall, AB Fernandez E Ave, Downtown District, Dagupan	(+63)9159063375
	Cagayan Valley Medical Center	Dalan na Pagayaya, Carig Sur, Tuguegarao, Cagayan	(078) 304-1410 / (078) 304-1810
2	Veterans Regional Hospital	Magsaysay, Bayombong, Nueva Vizcaya	(078) 805-3561 loc. 1225
	Bataan General Hospital (Bataan HAVEN)	Manahan St., Tenejero, Balanga City, Bataan	(047) 237-1274
	Dr. Paulino J. Garcia Memorial Research and Medical Center (Sanctuario De Paulino)	Mabini St., Cabanatuan City, Nueva Ecija	(047) 237-1275 loc. 103/ 09998844522 (044)463-8888 loc. 181 / 09177736638/ 09175716869
	Dr. Paulino J. Garcia Memorial Research and Medical Center - Talavera Extension Hospital (Talevera's Hope)	Maestrang Kikay District, Talavera, Nueva Ecija	(044) 806-2276 / 09358124776/ 09984997831
	Jose B. Lingad Memorial Regional Hospital (Bahay LInGAD)	Brgy. San Dolores, San Fernando, Pampanga	(045) 435-6801 / (045) 961-3544 / 0933621502
	James L. Gordon Memorial Hospital (L.E.A.D. Shelter)	#1 Perimeter Rd., New Asinan, Olongapo City	(047) 602-3436/ 09988627015/ 0908312524
3	Premiere Medical Center (TAHANAN sa Premiere)	Maharlika Highway, Daan Sarile, Cabanatuan City, Nueva Ecija	(044) 463-7845/ loc. 2073 / 09322128175 / 09052944300/ 095968173441
	Tarlac Provincial Hospital (TPH Cares)	Tarlac Provincial Hospital Compound, San Vicente, Tarlac City	(045) 491-8970 loc. 247/ 09988627015 / 09098312524
	Ospital ng Lungsod ng San Jose del Monte	Sapang Palay, San Jose Del Monte, Bulacan	09236335634/ 09998840873
	Guiguinto RHU II Reproductive Health and Wellness Center (Gintong Kanlungan)	2nd flr, RHU II, Green Estate Subd., Guiguinto, Bulacan	(044) 760-3450 / 09325478488 / 09260726900
	Maria Aurora Community Hospital	Saturno St. Bargy. 01, Maria Aurora, Aurora	09219112727
	Angeles City HIV Satellite Treatment Hub (Bale Angeleño)	C. Surla St., Balibago, Angeles City	09260726899/ 09325479455
	Batangas Medical Center	Kumintang Ibaba, Batangas City	(043) 723-0165
	Laguna Medical Center	J. De Leon St, Santa Cruz, Laguna	(049) 543-3351 / 09178465901
4A	Dasmariñas City Health Office I (SHC)	Zone 2, Manggubat St., City Health Office I, Dasmariñas, Cavite	(046) 416-0279 / 09177902168
	Antipolo Social Hygiene Clinic	M. Santos St., Brgy. San Roque, Antipolo City	(02) 696-4097
4B	Ospital ng Palawan	220 Malvas St. Puerto Princesa City	(048) 434-6864 / (048) 434-2148
5	Bicol Regional Training and Teaching Hospital	Rizal St., Legazpi City	(052) 483-0017 loc. 4227
	Western Visayas Medical Center	Q. Abeto St., Mandurriao, Iloilo City	(033) 321-1631
6	Dr. Rafael Tumbokon Memorial Hospital—Kalibo, Aklan	Mabini St, Kalibo, Aklan	(036) 268-6299
	Vicente Sotto Memorial Medical Center	B. Rodriguez St., Cebu City	(032) 254-4155 / (032) 253-9891 to 96 loc. 102
7	Cebu Social Hygiene Clinic	General Maxilom Ave., Ext., Carreta, Cebu City	(032) 233-0987 / 09255591663
	Gov. Celestino Gallares Memorial Hospital	M. Parras St., Tagbilaran City	(038) 411-4868
8	Eastern Visayas Regional Medical Center	Magsaysay Boulevard, Tacloban City	(053) 321-3121 / (053) 321-3363
9	Zamboanga City Medical Center	Dr. Evangelista St., Sta. Catalina, Zamboanga City	(062) 991-2934
10	Northern Mindanao Medical Center	Provincial Capitol Compound Cagayan de Oro City	(082) 856-4147
10	Southern Philippines Medical Center	J. P. Laurel St., Bajada, Davao City	(082) 227-2731 loc. 5140 / (082) 321-7061
11	Davao Regional Medical Center	Apokon, Tagum City, Davao del Norte	(084) 400-3347
11			
	Davao Reproductive Health and Wellness Center	Emilio Jacinto St, Poblacion District, Davao City, Davao del Sur	(082) 222-4187
12	South Cotabato Provincial Hospital	Aguinaldo St., Koronadal City, South Cotabato	(083) 228-4571
045	General Santos City Social Hygiene Clinic	City Health Office, Fernandez St., Lagao, General Santos City	(083) 302-8115
CAR	Baguio General Hospital and Medical Center	Gov. Pack Rd., Baguio City	(074) 442-4216 loc. 381 / 09155816480
CARAGA	CARAGA Regional Hospital	Rizal St. National Road, Surigao City	(086) 826-0568 / 09173068186
	Butuan Medical Center	Km 5 Baan, Butuan City	(+63)9173208799
	San Lazaro Hospital	Quiricada St., Sta. Cruz, Manila	(02) 310-3128
	Philippine General Hospital	Taft Ave., Manila	(02) 554-8400 loc. 3249
	Sta. Ana Hospital	New Panaderos Street, Sta. Ana, Manila	(02) 516-6790
	Manila Social Hygiene Clinic	208 Quiricada St., Sta. Cruz, Manila	(02) 711-6942
	Research Institute for Tropical Medicine	Filinvest Corporate City, Alabang, Muntinlupa City	(02) 807-2628 loc. 332
NCR	The Medical City / I-REACT Clinic	Ortigas Ave., Pasig City	(02) 988-1000 loc. 6765
	Pasig City Treatment Hub (PATH)	CHAMP Bldg, Caruncho Ave, Pasig City	(02) 798-2572
	Makati Medical Center	#2 Amorsolo St., Legaspi Village, Makati City	(02) 888-8999 loc. 2134 (CTTM) / 091780143
	St. Luke's Medical Center—Global City	Rizal Drive cor. 32nd & 5th Ave.,Taguig City	(02) 789-7700
	Klinika Bernardo	Ermin Garcia St., Brgy. Pinagkaisahan, Quezon City	9324033412
	Marikina City Satellite Treatment Hub	Shoe Ave., Sto. Niño, Marikina City	(02) 948-8925 / 09175631722
	Corazon Locsin Montelibano Memorial Regional Hospital	2nd flr. OPD bldg. CLMMRH, Cor. Burgos, Lacson St. Bacolod City	(034)707-2280
NIR	Negros Oriental Provincial Hospital	Real St., Dumaguete City, Negros Oriental	(6335) 225-0950/225-0949

## **OTHER FACILITIES PROVIDING HIV TREATMENT**

Regions	Facility	Address	Contact Information
	Bacoor Social Hygiene Clinic	Floraville Subdivision, Panapaan 1, Bacoor City	(+63)9086144183
4A	Ospital ng Biñan	Canlalay Bridge, Biñan, Laguna	(049) 511-4119
	Occidental Mindoro Provincial Hospital	Paluan Road, Maburao, Occidental Mindoro	(043) 711-1116
	Bernardo Social Hygiene Clinic	Ermin Garcia St., Brgy. Pinagkaisahan, Quezon City	(+63)9193635919
	Project 7 Social Hygiene Clinic / Klinika Project 7	39 Bansalangin St., Veterans Village, Project 7, Quezon City	(+63)9178561158
	Batasan Hills Super Health Center (Social Hygiene Clinic)	#1 IBP Road, Batasan Hills, Quezon City	09322959752 / 09232790558
	Klinika Novaliches	Annex Bldg. flr., A.J. Maximo Health Center Compound, Quirino Highway, Novaliches, Quezon City	(+63)9985734877
	Las Piñas Social Hygiene Clinic	Barrio Hall, Alabang-Zapote Road, Almansa, Las Piñas City	(02) 800-6406
NCR	Mandaluyong Social Hygiene Clinic	20 M. Lerma St. cor. Vicencio St, Mandaluyong City	(02) 546-7799
	Muntinlupa Reproductive Health and Wellness Center	2nd Floor, Putatan Health Center, National Rd, Putatan, Muntinlupa City	(02) 834-5997
	Pasay Social Hygiene Clinic	2nd Floor, Lagrosa Health Center, F.B. Harrrison St. Pasay City	(02) 806-3197
	RITM Satellite Clinic - Mandaluyong (Love Yourself Anglo)	Room 5, 3/F, 715-A Anglo Bldg., Shaw Blvd., Mandaluyong City	(+63)9153665683
	Taguig Social Hygiene Clinic	3/F Goldilocks Bldg., Gen. Luna St., Taguig City	(02) 642-1262 / 09267542917
	Valenzuela Social Hygiene Clinic	Valenzuela City Hall, Poblacion II, Malinta, Valenzuela City	(02) 352-6000 loc. 6046

\*as per Department Memorandum No. 2016-0188: Updated List of DOH-Designated Treatment Hubs and Satellite Treatment Hubs