



Newly Diagnosed HIV Cases in the Philippines

In February 2012, there were 274 new HIV Ab sero-positive individuals confirmed by the STD/AIDS Cooperative Central Laboratory (SACCL) and reported to the HIV and AIDS Registry (Table 1). This was 72% higher compared to the same period last year (n=159 in 2011), and the highest number of cases ever reported in the registry [Figure 1].

Most of the cases (96%) were males. The median age was 28 years (age range:17-57 years). The 20-29 year (59%) age-group had the most number of cases. Forty-six percent (127) of the reported cases were from the National Capital Region (NCR).

Reported mode of transmission were sexual contact (235) and needle sharing among injecting drug users (39) [Table 2, page 3]. Males having sex with other Males (87%) were the predominant type of sexual transmission [Figure 2]. Most (98%) of the cases were still asymptomatic at the time of reporting [Figure 3].

AIDS Cases

Of the 274 HIV positive cases, six were reported as AIDS cases, all were males. The median age is 36 years (age range: 27-42 years). All cases acquired the infection through sexual contact (1 homosexual, and 5 bisexual). Of the AIDS cases, there was one reported death for this month; a 41-year old male.

Overseas Filipino Workers (OFW)

Twenty-four of the 274 (9%) reported cases were OFWs [Figure 11, page 4]. There were 22 males and 2 females. The median age was 30 years (age range: 22-57 years). All cases acquired the infection through sexual contact (7 heterosexual, 7 homosexual, and 10 bisexual).

Table 1. Quick Facts

Demographic Data	February 2012	Jan-Feb 2012	Cumulative Data: 1984-2012
Total Reported Cases	274	486	8,850
Asymptomatic Cases	268	474	7,865
AIDS Cases	6	12	985
Males	263	466	7,356*
Females	11	20	1,483*
Youth 15-24yo	76	133	2,050
Children <15yo	0	1	59
Reported Deaths due to AIDS	1	2	345

*Note: No data available on sex for eleven (11) cases.

Figure 1. Number of New HIV Cases per Month (2010-2012)

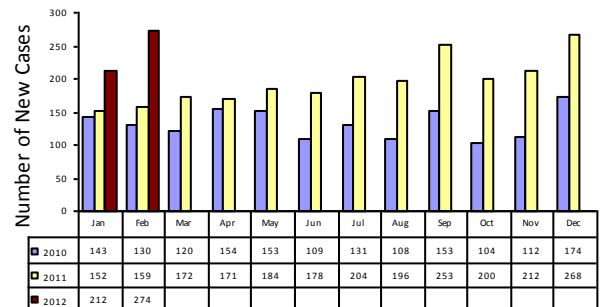


Figure 2. Comparison of the Proportion of Types of Sexual Transmission in 2012, 2011 & Cumulative Data (1984-2012)

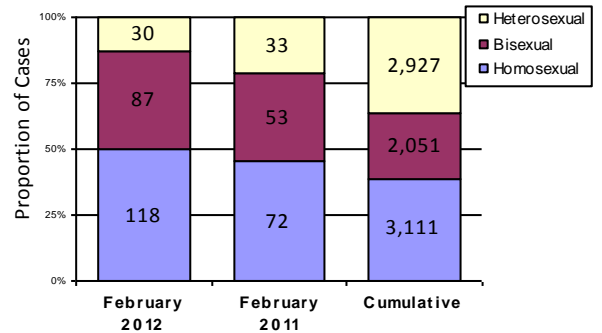
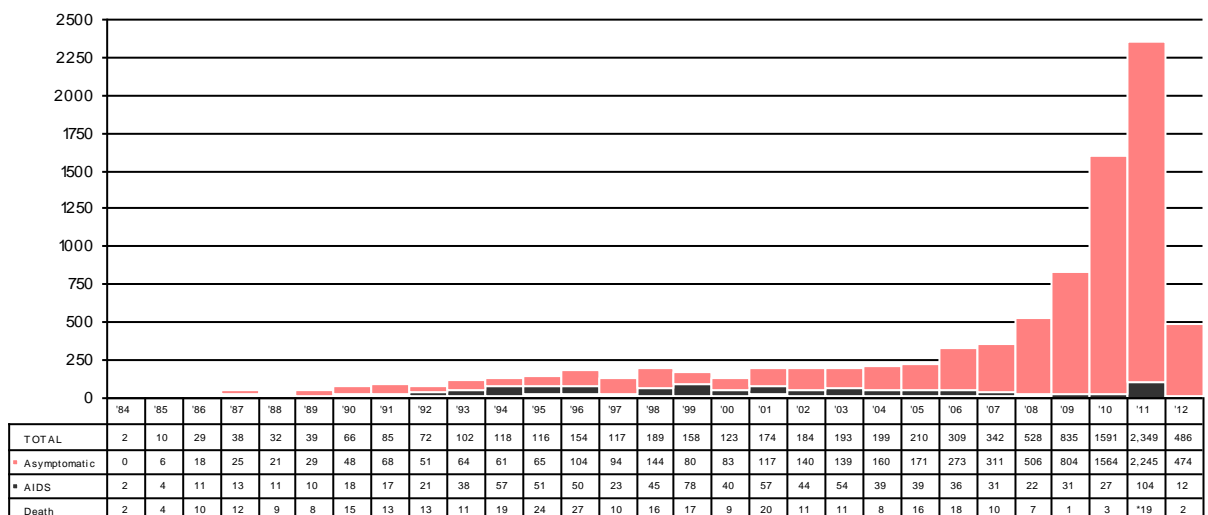


Figure 3. Number of HIV/AIDS Cases Reported in the Philippines by Year, Jan 1984 to February 2012 (N=8,850)



*Nine initially asymptomatic cases reported in 2011, died due to AIDS that same year.

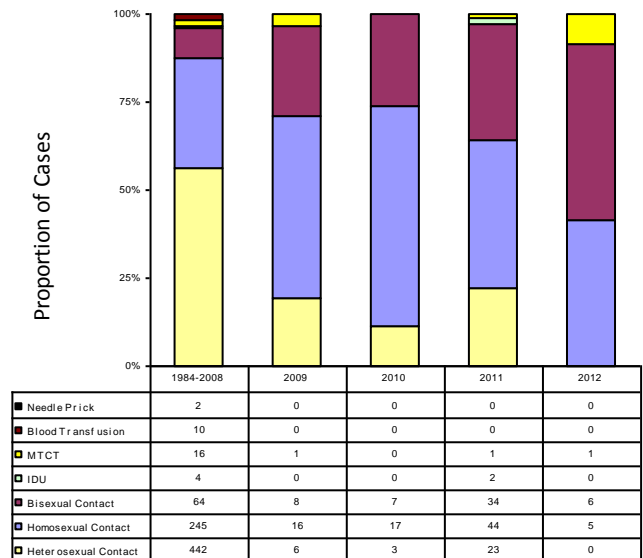
AIDS Cases (1984-2012)

Of the 486 HIV positive cases in 2012, twelve were reported as AIDS cases. All were males. Ages ranged from 7-47 years (median 35 years). 92% (11) acquired the infection through sexual contact [homosexual (5), and bisexual contact (6)]. Other modes of transmission include (1) mother-to-child transmission.

From 1984 to 2012, there were 985 AIDS cases reported, 74% (725) were males. Median age was 35 years (age range: 1-72 years). Of the reported AIDS cases, 345 (35%) had already died at the time of reporting. Sexual contact was the most common mode of HIV transmission, accounting for 93% (920) of all reported AIDS cases. More than half (474) of sexual transmission was through heterosexual contact, followed by homosexual contact (327) then bisexual contact (119).

Other modes of transmission include: mother-to-child transmission (19), blood transfusion (10), injecting drug use (6), and needle prick injuries (2) [Figure 4]. Three percent (28) of the AIDS cases did not report mode of HIV transmission.

Figure 4. Proportion of Modes of Transmission of AIDS Cases by Year, Jan 1984–February 2012



*Note: 28 did not report mode of transmission

Demographic Characteristics (1984-2012)

In 2012, there were a total of 486 cases reported. 96% of the cases reported were males (466). Ages ranged from 7-57 years old (median 28 years). The 20-29 year old age group (60%) had the most number of cases for 2012. For the male age group, the most number of cases were found among the 20-24 years old (25%), 25-29 years old (35%), and 30-34 years old (17%) [Figure 6].

From 1984 to 2012, there were 8,850 HIV Ab sero-positive cases reported (Table 1), of which 7,865 (89%) were asymptomatic and 985 (11%) were AIDS cases. As shown in Figure 6, there is a significant difference in the number of male and female cases reported. Eighty-three percent (7,356) were males. Ages ranged from 1-73 years (median 29 years). The age groups with the most number of cases were: 20-24 years (21%), 25-29 (28%) and 30-34 years (19%) [Figure 6].

Figure 5. Proportion of Sex & Age-Groups in February 2012 & Jan-Feb 2012

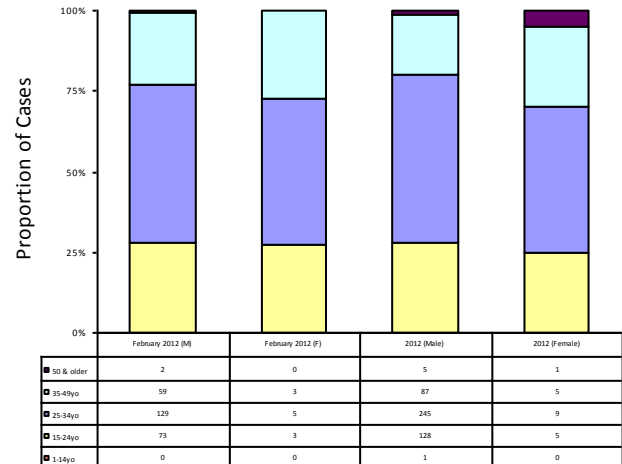
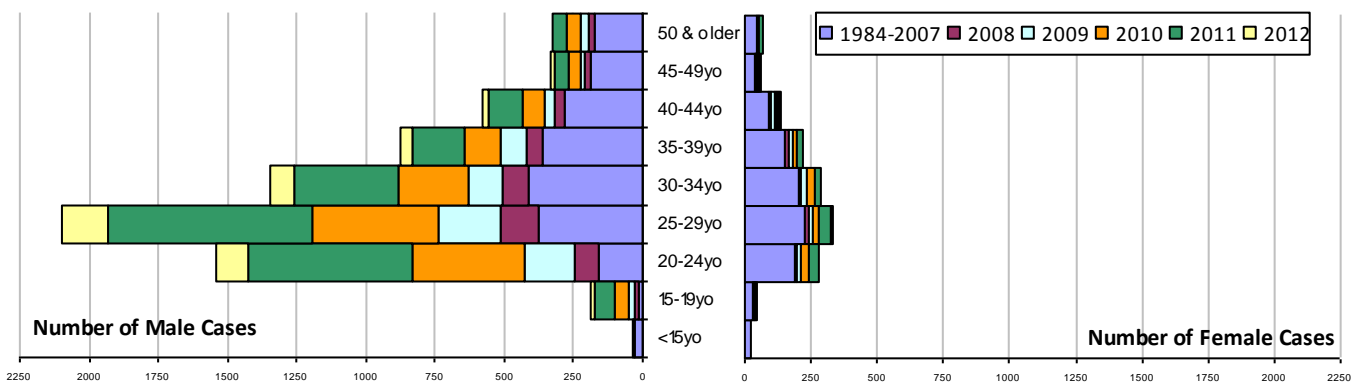


Figure 6. Comparison of the Distribution of Male and Female HIV Cases by Age-Group and Certain Highlighted Years



	<15yo	15-19yo	20-24yo	25-29yo	30-34yo	35-39yo	40-44yo	45-49yo	50 & older
2012	1	11	117	164	81	44	28	15	5
2011	1	76	589	739	378	193	117	51	49
2010	1	50	405	455	256	128	81	42	48
2009	1	22	179	227	124	90	41	18	29
2008	2	11	92	140	90	59	36	23	20
1984-2007	27	15	157	374	414	364	279	185	176

	<15yo	15-19yo	20-24yo	25-29yo	30-34yo	35-39yo	40-44yo	45-49yo	50 & older
2012	0	1	4	7	2	2	3	0	1
2011	2	3	36	44	23	21	10	8	9
2010	2	5	28	21	34	15	9	7	4
2009	1	4	13	19	21	20	14	7	5
2008	0	0	8	14	8	10	9	3	3
1984-2007	21	33	191	225	202	154	90	35	44

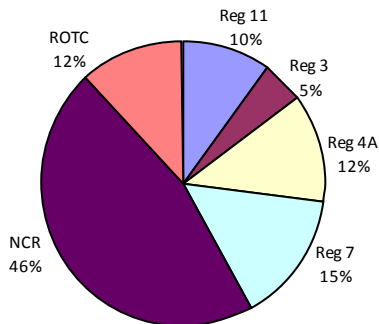
*Note: 74 did not report age, 11 did not report sex, 10 did not report age and sex

Geographic Distribution

Region	% of Cases
I	3%
II	<1%
III	5%
IVA	12%
IVB	1%
V	1%
VI	2%
VII	15%
VIII	0
IX	<1%
X	2%
XI	10%
XII	1%
CAR	1%
CARAGA	1%
ARMM	0
NCR	46%

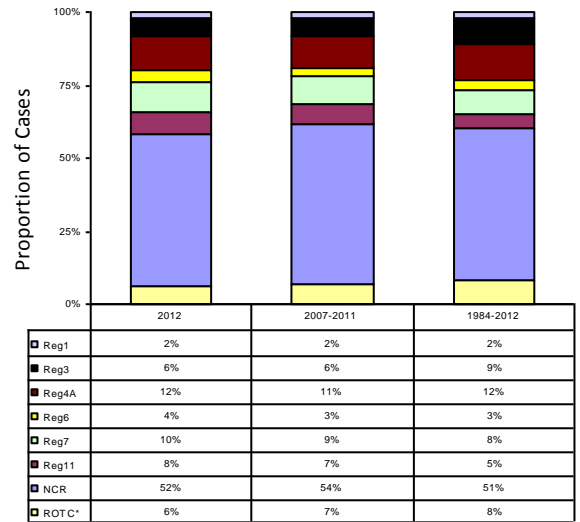
In February 2012, bulk of the new HIV cases came from NCR, Region 7, Region 4A, Region 11, Region 3, and Region 1 [Fig 7]. The three highest reporting regions were NCR, Region 4A, and Region 7.

Figure 7. New HIV Cases by Region, February 2012



*ROTC: Rest of the Country

Fig 8. Comparison of Proportion of HIV Cases by Region & Year



Modes of Transmission (1984-2012)

In 2012, 91% (443) were infected through sexual contact, 9% (42) through needle sharing among injecting drug users, and <1% (1) through mother-to-child transmission (Table 2). There were 426 males and 17 females infected through sexual transmission. The age range of those infected through sexual transmission was 17-57 years old (median 27 years).

Of the 8,850 HIV positive cases reported from 1984 to 2012, 91% (8,089) were infected through sexual contact, 3% (307) through needle sharing among injecting drug users, 1% (56) through mother-to-child transmission and <1% (20) through blood transfusion and needle prick injury <1% (3) [Table 2]. Other modes of transmission are listed in Table 2. No data is available for 4% (375) of the cases.

Table 2. Reported Mode of HIV Transmission

Mode of Transmission	Feb 2012 n=274	Jan-Feb 2012 n=486	Cumulative N=8,850
Sexual Contact	235	443	8,089
Heterosexual contact	30(13%)	51(12%)	2,927(36%)
Homosexual contact	118(50%)	223(50%)	3,111(38%)
Bisexual contact	87(37%)	169(38%)	2,051(25%)
Blood/Blood Products	0	0	20
Injecting Drug Use	39	42	307
Needle Prick Injury	0	0	3
Mother-to-Child	0	1	56
No Data Available	0	0	375

Cumulative data shows 36% (2,927) were infected through heterosexual contact, 38% (3,111) through homosexual contact, and 25% (2,051) through bisexual contact. From 2007 there has been a shift in the predominant trend of sexual transmission from heterosexual contact (21%) to males having sex with other males (79%) [Figure 9].

Figure 9. Proportion of Types of Sexual Transmission, Jan 1984–Feb 2012

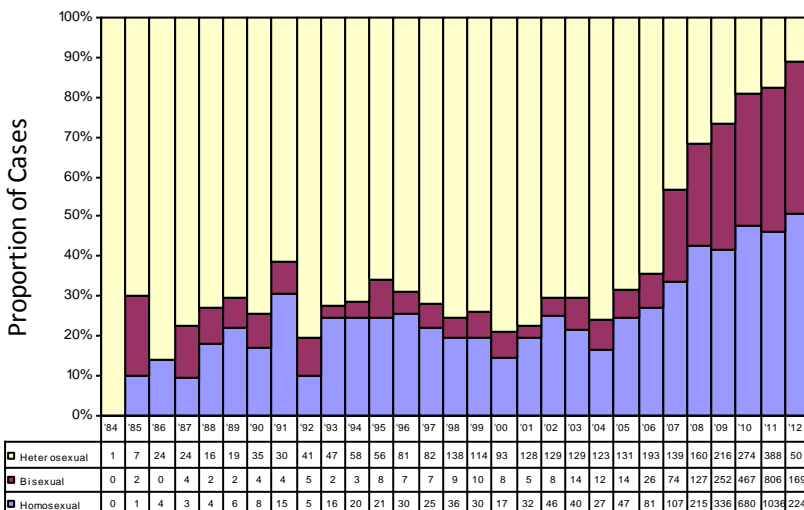
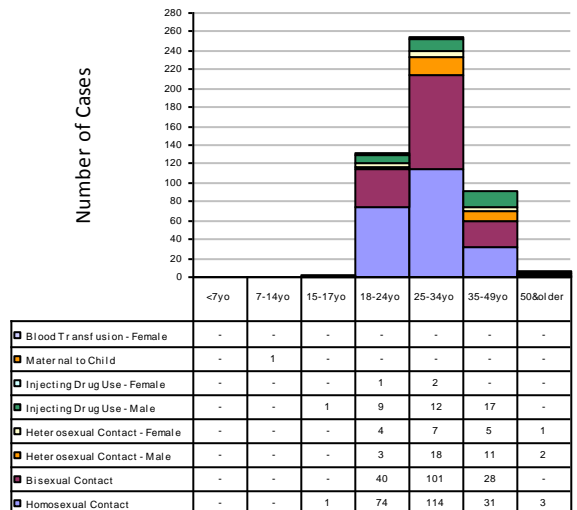


Figure 10. HIV Transmission by Age-Group, 2012 (n=486)



Overseas Filipino Workers (OFW)

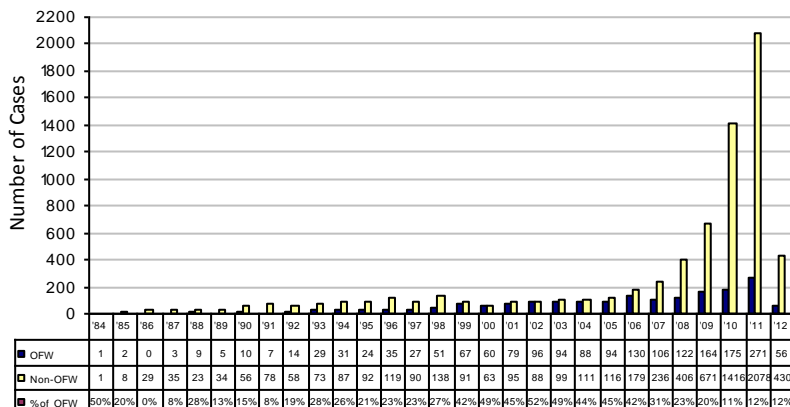
In 2012, there were 56 HIV positive OFWs, comprising 12% of cases reported for the year [Figure 11]. Of these, 52 (93%) were males and 4 (7%) were females; all infected through sexual contact.

There were 1,850 HIV positive OFWs since 1984, comprising 21% of all reported cases [Figure 11]. Seventy-seven percent (1,427) were males. Ages ranged from 18 to 69 years (median 35 years). Sexual contact (97%) was the predominant mode of transmission (Table 3). Eighty-five percent (1,570) were asymptomatic while 15% (280) were AIDS cases.

Table 3. Mode of HIV Transmission Among OFWs

Mode of Transmission	Feb 2012 n=24	Jan-Feb 2012 n=56	Cumulative N=1,850
Sexual Transmission	24	56	1,788
Heterosexual contact	7(29%)	11(20%)	1,114(62%)
Homosexual contact	7(29%)	19(34%)	375(21%)
Bisexual contact	10(42%)	26(46%)	299(17%)
Blood/Blood Products	0	0	10
Injecting Drug Use	0	0	1
Needle Prick Injury	0	0	3
No Data Available	0	0	48

Figure 11. Number of OFWs Compared to Non-OFWs by Year (1984-2012)



Blood Units Confirmed for HIV

In February 2012, 18 blood units were confirmed positive for HIV by RITM. This was 20% higher compared to the same period last year (Table 4). There is no available data yet on the total number of blood units donated.

These are confirmed positive blood units, not blood donors. One donor can donate more than one blood unit. HIV positive blood donors may not be in the HIV & AIDS Registry unless they underwent voluntary counseling and testing as individuals.

Table 4. Number of Confirmed HIV Positive Blood Units

Month	2012	2011
January	17	11
February	18	15
March		14
April		20
May		10
June		32
July		22
August		18
September		10
October		22
November		17
December		18
Total	35	209

PLHIV on Anti-Retroviral Therapy

As of January 2012, there are 2,087* People Living with HIV presently on Anti-Retroviral Therapy (ART). Data for February is not yet available.

Table 5. Number of PLHIV on ART

Month	2012
January	2,087
February	Data not yet available
March	
April	
May	
June	
July	
August	
September	
October	
November	
December	

Treatment Hubs in the Philippines

1. Baguio General Hospital and Medical Center
2. Ilocos Training and Regional Medical Center
3. Cagayan Valley Medical Center
4. Jose B. Lingad Medical Center
5. San Lazaro Hospital
6. Philippine General Hospital
7. Research Institute for Tropical Medicine
8. Makati Medical Center
9. The Medical City
10. Bicol Regional Training and Teaching Hospital
11. Western Visayas Medical Center
12. Corazon Locsin Montelibano Memorial Regional Hospital
13. Vicente Sotto Memorial Medical Center
14. Gov. Celestino Gallares Memorial Hospital
15. Zamboanga City Medical Center
16. Southern Philippines Medical Center

* This is not a cumulative number. It does not include those who already have died, left the country, or decided to stop taking ART.



National Epidemiology Center,
Department of Health, Bldg. 19,
San Lazaro Compound,
Sta. Cruz, Manila 1003 Philippines

Tel: +632 651-7800 local 2926, 2952
Fax: +632 495-0513
Email: HIVepicenter@gmail.com
Website: http://www.doh.gov.ph

Philippine HIV & AIDS Registry Report Editorial Team:

María Lourdes Ann D.J. Zambo
HIV Surveillance Assistant, HIV Unit

Kristelle Ann G. Ronquillo
Asst. HIV Surveillance Officer, HIV Unit

Noel S. Palangyuan, RN, MGM
HIV Surveillance Officer, HIV Unit

Genesis M. J. Sarmonte, MD, PHSAE
Epidemiologist, HIV Unit

Agnes B. Sagarra, MD, PHSAE,
Chief, SRAL, NEC

Enrique A. Tayan, MD, PHSAE, FPSMID
Director IV, NEC

Philippine HIV & AIDS Registry

The Philippine HIV & AIDS Registry is the official record of the total number of laboratory-confirmed HIV positive individuals, AIDS cases and deaths, and HIV positive blood units in the Philippines. All individuals in the registry are confirmed by 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 National Reference Laboratories (NRL) of the Department of Health (DOH).

Mandatory HIV testing is unlawful in the Philippines (RA 8504). The process of reporting to the Registry is as follows: All blood samples from accredited HIV testing facilities that are screened HIV reactive are sent to SACCL (individuals) or RITM (blood units) for confirmation. Confirmed HIV positive individuals and blood units are reported to the DOH-National Epidemiology Center (NEC), and are recorded in the Registry.

The Registry is a passive surveillance system. Except for HIV confirmation by the NRL, all other data submitted to the Registry are secondary and cannot be verified. An example would be an individual's reported place of residence. The Registry is unable to determine if this reported address is where the person got infected, or where the person lived after being infected, or where the person is presently living, or whether the address is valid. This limitation has major implications to data interpretation. Thus, readers are cautioned to carefully weigh the data and consider other sources of information prior to arriving at conclusions.