



## Newly Diagnosed HIV Cases in the Philippines

In August 2013, there were 382 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 is 40% higher compared to the same period last year (n=272 in 2012) [Figure 1].

**Table 2. Percentage of HIV Cases per Region (August 2013)**

Region	% of Cases
I	1%
II	1%
III	6%
IVA	13%
IVB	1%
V	1%
VI	4%
VII	17%
VIII	1%
IX	2%
X	2%
XI	7%
XII	2%
CAR	1%
CARAGA	1%
ARMM	1%
NCR	41%

Most of the cases (96%) were male. The median age was 27 years (age range: 17-71 years). The 20-29 year (60%) age group had the most number of cases.

Reported mode of transmission were sexual contact (341) and needle sharing among injecting drug users (41) [Table 3, page 2]. Males having sex with other males (87%) were the predominant type of sexual transmission [Figure 2]. Most (94%) of the cases were still asymptomatic at the time of reporting [Figure 3].

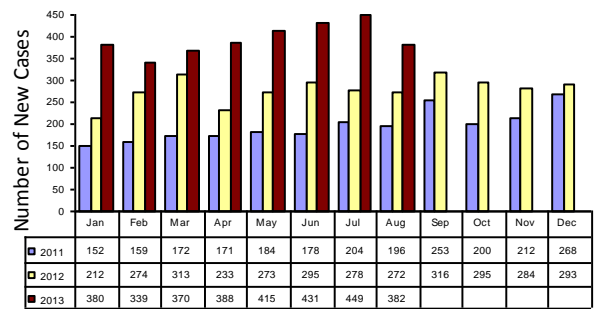
In August 2013, bulk of the new HIV cases came from NCR, Region 3, Region 4A, Region 7, and Region 11 [Table 2]. However, the three highest reporting regions were NCR, 7 and 4A.

**Table 1. Quick Facts**

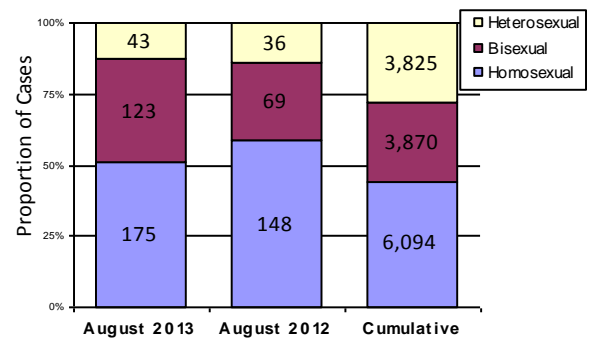
Demographic Data	August 2013	Jan-Aug 2013	Cumulative 1984-2013
Total Reported Cases	382	3,154	14,856
Asymptomatic Cases	361	2,961	13,494
AIDS Cases	21	193	1,362
Males	366	3,011	13,087*
Females	16	143	1,758*
Youth 15-24yo	127	883	3,697
Children <15yo	0	2	64

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

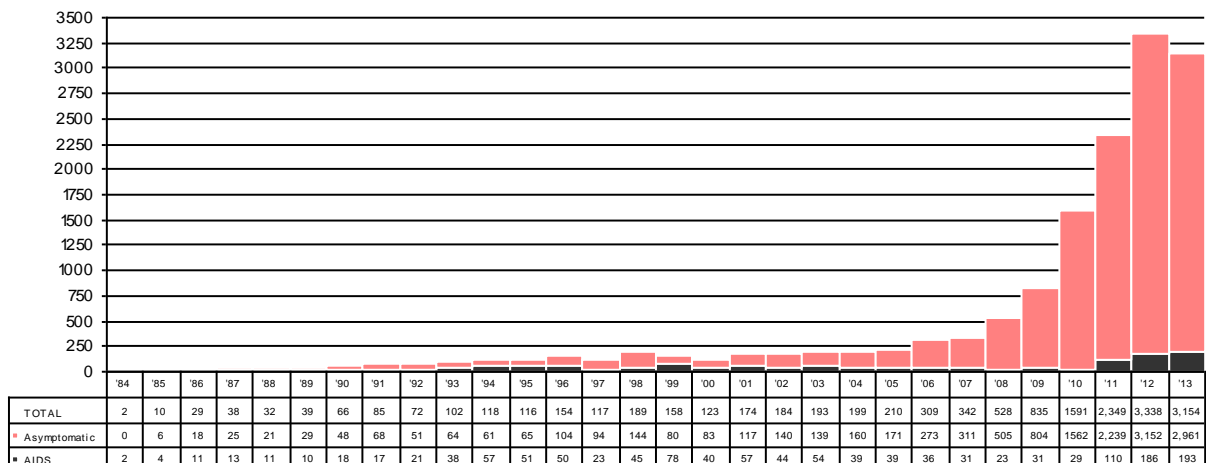
**Figure 1. Number of New HIV Cases per Month (2011-2013)**



**Figure 2. Comparison of the Proportion of Types of Sexual Transmission in 2013, 2012 & Cumulative Data (1984-2013)**



**Figure 3. Number of HIV/AIDS Cases Reported in the Philippines by Year, Jan 1984 to August 2013 (N=14,856)**

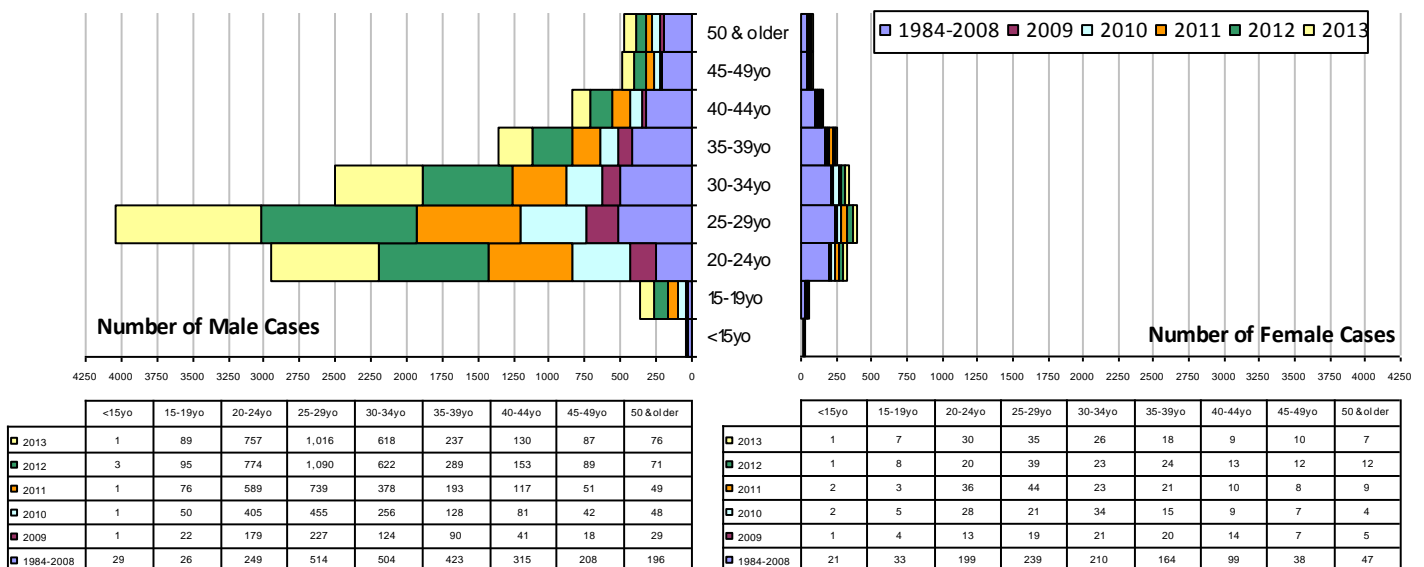


### Demographic Characteristics (1984-2013)

Ninety-five percent of the 3,154 cases in 2013 were male (3,011). Ages ranged from 4 to 79 years old (median 28 years). The 20-29 year old age group had the most (58%) number of cases for 2013. For the male age group, the most number of cases were found among the 20-24 years old (25%), 25-29 years old (34%), and 30-34 years old (21%) [Figure 4].

From 1984 to 2013, there were 14,856 HIV Ab sero-positive cases reported (Table 1), of which 13,494 (91%) were asymptomatic and 1,362 (9%) were AIDS cases. As shown in Figure 4, there is a significant difference in the number of male and female cases reported. Eighty-eight percent (13,087) were male. Ages ranged from 1-81 years (median 28 years). The age groups with the most number of cases were: 20-24 years (22%), 25-29 (30%), and 30-34 years (19%) [Figure 4].

Figure 4. Comparison of the Distribution of Male and Female HIV Cases by Age-Group and Certain Highlighted Years



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

### Modes of Transmission (1984-2013)

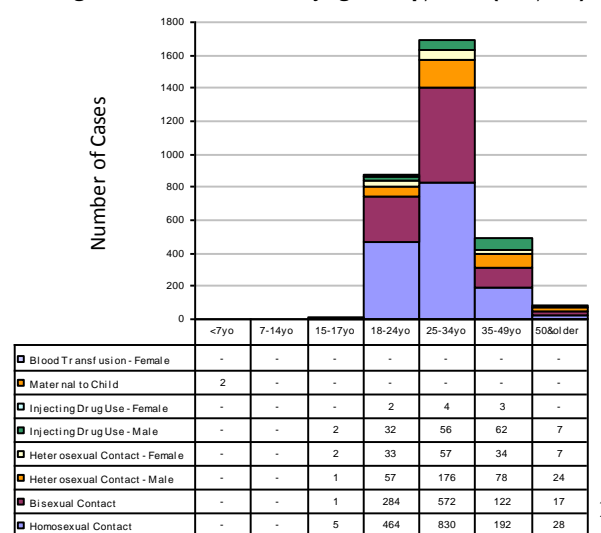
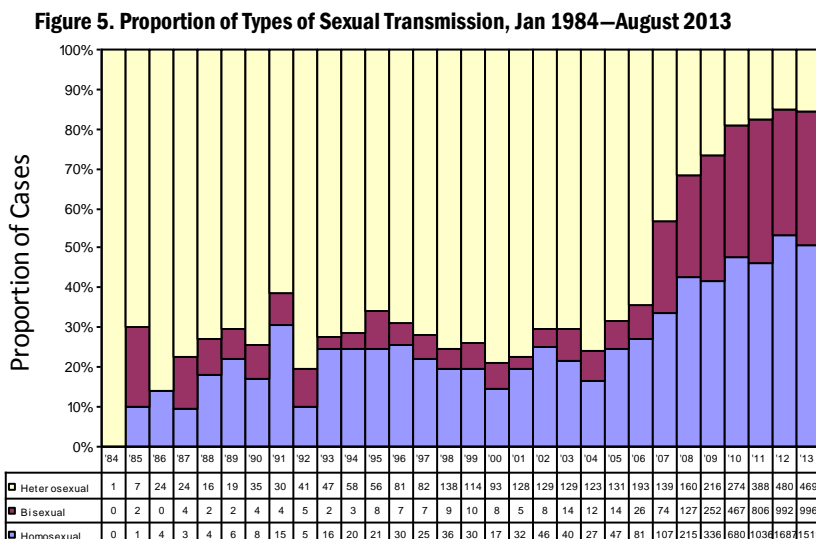
In 2013, ninety-five percent (2,984) were infected through sexual contact, 5% (168) through needle sharing among injecting drug users and <1% (2) through mother to child transmission (Table 3). There were 2,851 male and 133 female infected through sexual transmission. The age range of those infected through sexual transmission was 15-79 years old (median 27 years).

Of the 14,856 HIV positive cases reported from 1984 to 2013, 93% (13,789) were infected through sexual contact, 4% (608) through needle sharing among injecting drug users, <1% (61) through mother-to-child transmission, <1% (20) through blood transfusion and needle prick injury <1% (3) [Table 3]. No data is available for 3% (375) of the cases.

Table 3. Reported Mode of HIV Transmission

Mode of Transmission	August 2013 n=382	Jan-Aug 2013 n=3,154	Cumulative N=14,856
<b>Sexual Contact</b>	<b>341</b>	<b>2,984</b>	<b>13,789</b>
<i>Heterosexual contact</i>	<i>43(13%)</i>	<i>469(16%)</i>	<i>3,825(28%)</i>
<i>Homosexual contact</i>	<i>175(51%)</i>	<i>1,519(51%)</i>	<i>6,094(44%)</i>
<i>Bisexual contact</i>	<i>123(36%)</i>	<i>996(33%)</i>	<i>3,870(28%)</i>
<b>Blood/Blood Products</b>	<b>0</b>	<b>0</b>	<b>20</b>
<b>Injecting Drug Use</b>	<b>41</b>	<b>168</b>	<b>608</b>
<b>Needle Prick Injury</b>	<b>0</b>	<b>0</b>	<b>3</b>
<b>Mother-to-Child</b>	<b>0</b>	<b>2</b>	<b>61</b>
<b>No Data Available</b>	<b>0</b>	<b>0</b>	<b>375</b>

Figure 6. HIV Transmission by Age-Group, 2013 (n=3,154)

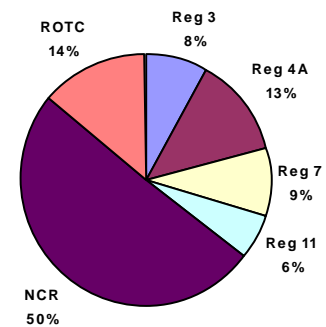


### Geographic Distribution (1984-2013)

Since 1984 to present, there were 14,856 cases reported. Half (6,894) came from the National Capital Region. [Figure 7]. Thirteen percent (1,753) came from region 4A, followed by 9% (1,237) from Region 7, 8% (1,135) from Region 3, 6% (822) from Region 11 and the rest of the country comprises 13% (1,877) of all the cases.

*\*Note: 1,136 cases had no reported data on their address at the time of diagnosis*

Figure 7. HIV Cases by Region, Jan 1984-August



### AIDS Cases (1984-2013)

Of the 3,154 HIV positive cases in 2013, one hundred ninety-three were reported as AIDS cases. Of these, 184 were male and 9 were female. Ages ranged from 17-59 years (median 30 years). Ninety-seven percent (187) acquired the infection through sexual contact (99 homosexual, 42 bisexual and 46 heterosexual) and 3% (6) through injecting drug use.

From 1984 to 2013, there were 1,362 AIDS cases reported. Eighty percent (1,085) were male. Median age is 34 years (age range: 1-81 years). Sexual contact was the most common mode of HIV transmission, accounting for 95% (1,289) of all reported AIDS cases. Almost half (554) of sexual transmission was through heterosexual contact, followed by homosexual contact (528) then bisexual contact (207).

Other modes of transmission include: mother-to-child transmission (20), injecting drug use (13), blood transfusion (10), and needle prick injuries (2). Two percent (28) of the AIDS cases did not report mode of HIV transmission.

### Overseas Filipino Workers (OFW)

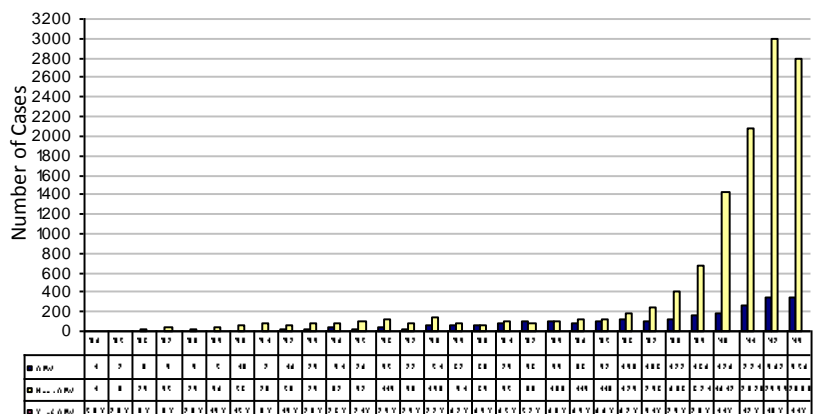
In 2013, there were 354 HIV positive OFWs, comprising 11% of cases reported for the year [Figure 8]. Of these, 322 (91%) were male and 32 (9%) were female. Ninety-nine percent (352) acquired the infection through sexual contact (98 heterosexual, 132 homosexual and 122 bisexual) and 1% (2) through injecting drug use.

There were 2,484 HIV positive OFWs since 1984, comprising 17% of all reported cases [Figure 8]. Eighty percent (1,993) were male. Ages ranged from 18 to 71 years (median 34 years). Sexual contact (97%) was the predominant mode of transmission (Table 4). Eighty-seven percent (2,170) were asymptomatic while 13% (314) were AIDS cases.

Table 4. Mode of HIV Transmission Among OFWs

Mode of Transmission	August 2013 n=45	Jan-August 2013 n=354	Cumulative N=2,484
<b>Sexual Transmission</b>	<b>45</b>	<b>352</b>	<b>2,420</b>
<i>Heterosexual contact</i>	<i>11(24%)</i>	<i>98(28%)</i>	<i>1,304(54%)</i>
<i>Homosexual contact</i>	<i>15(33%)</i>	<i>132(38%)</i>	<i>623(26%)</i>
<i>Bisexual contact</i>	<i>19(42%)</i>	<i>122(35%)</i>	<i>493(20%)</i>
<b>Blood/Blood Products</b>	<b>0</b>	<b>0</b>	<b>10</b>
<b>Injecting Drug Use</b>	<b>0</b>	<b>2</b>	<b>3</b>
<b>Needle Prick Injury</b>	<b>0</b>	<b>0</b>	<b>3</b>
<b>No Data Available</b>	<b>0</b>	<b>0</b>	<b>48</b>

Figure 8. Number of OFWs Compared to Non-OFWs by Year (1984-2013)



### Deaths among People with HIV

From January 1984 to August 2013, there were 827 reported deaths among people with HIV [Table 5]. Seventy seven percent (640) were male. In total, there has been 88 deaths among youth (15-24 years old) and 15 deaths among children (<15 years old).

The annual number of deaths from 1984-2010 ranges from 2 to 36 cases with an average of 14 deaths per year. Beginning 2011, there has been an increase in the number of recorded deaths. There were 69 in 2011, and 177 in 2012. The DOH-NEC established an official reporting form in 2012.

Based on submitted reports, there were a total of 118 deaths from January to August 2013. Ninety four percent (111) were male while 6% (7) were female [Table 5]. The highest number of deaths occurred in the 25-29 (29%) age group [Figure 9]. This was followed by the 30-34 (28%) and the 35-39 (11%) age groups. For the month of August 2013, there were 10 deaths [Table 5].

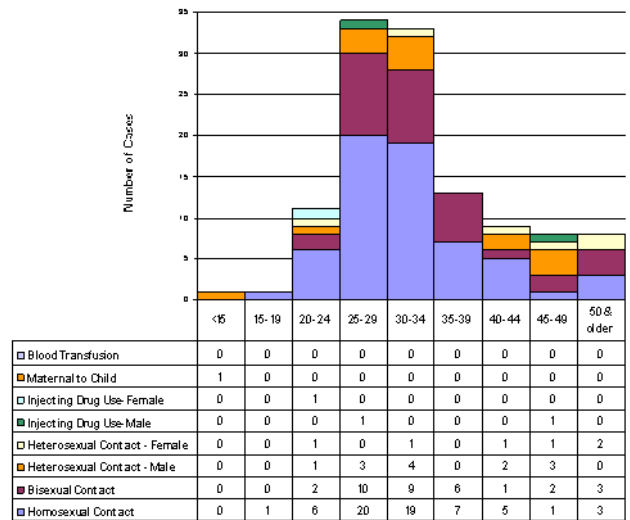
Among the reported deaths in 2013, sexual contact (96%) was the most common mode of HIV transmission (62 homosexual, 33 bisexual, 19 heterosexual). There were three cases who got infected through injecting drug use (3%) and one case from maternal to child transmission (1%) [Figure 9].

Table 5. Demographic data of reported deaths among People with HIV

Demographic Data	August 2013	Jan-Aug 2013	Jan-Dec 2012	Cumulative (1984-2013)
Total Reported Deaths	10	118	177	827
Males	9	111	159	640
Females	1	7	18	187
Youth 15-24yo	0	12	27	88
Children <15yo	0	1	3	15

\*Note: No year of death reported for 44 cases

Figure 9. HIV Transmission by Age-Group of Reported Deaths among People with HIV, Jan-August 2013 (n=118)



### PLHIV on Anti-Retroviral Therapy

As of August 2013, there are 4,645\* People Living with HIV presently on Anti-Retroviral Therapy (ART). These are the combined numbers of adult and pediatric patients currently enrolled and accessing Anti-Retroviral drugs in the 17 treatment hubs listed on the right.

**Treatment Hubs in the Philippines**

1. Ilocos Training and Regional Medical Center
2. Cagayan Valley Medical Center
3. Baguio General Hospital and Medical Center
4. Jose B. Lingad Medical Center
5. James L. Gordon Memorial Hospital
6. Makati Medical Center
7. Philippine General Hospital
8. Research Institute for Tropical Medicine
9. San Lazaro Hospital
10. The Medical City
11. Bicol Regional Training and Teaching Hospital
12. Corazon Locsin Montelibano Memorial Regional Hospital
13. Western Visayas Medical Center
14. Gov. Celestino Gallares Memorial Hospital
15. Vicente Sotto Memorial Medical Center
16. Zamboanga City Medical Center
17. 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.


### Blood Units Confirmed for HIV

As of August 2013, 191 blood units were confirmed positive for HIV by RITM. 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 6. Number of Confirmed HIV Positive Blood Units

Month	2013
January	22
February	21
March	28
April	30
May	22
June	23
July	28
August	17
September	
October	
November	
December	
<b>Total</b>	<b>191</b>



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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.