



Newly Diagnosed HIV Cases in the Philippines

In April 2014, there were 393 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).

Table 2. Percentage of HIV Cases per Region (April 2014)

Region	% of Cases
I	2%
II	1%
III	8%
IVA	13%
IVB	0
V	<1%
VI	4%
VII	15%
VIII	1%
IX	3%
X	3%
XI	6%
XII	4%
CAR	1%
CARAGA	1%
ARMM	1%
NCR	40%

Most of the cases (96%) were male. The median age was 28 years (age range: 18-80 years). The 20-29 year (59%) age group had the most number of cases.

Reported modes of transmission were sexual contact (361) and needle sharing among injecting drug users (32) [Table 3, page 2]. Males having sex with other males (84%) was the predominant type of sexual transmission [Figure 2]. Most (93%) of the cases were still asymptomatic at the time of reporting [Figure 3].

In April 2014, 82% of the new HIV cases came from NCR, Region 7, Region 4A, Region 3 and Region 11 [Table 2].

Table 1. Quick Facts

Demographic Data	April 2014	Jan-Apr 2014	Cumulative 1984-2014
Total Reported Cases	393	1,825	18,341
Asymptomatic Cases	365	1,651	16,661
AIDS Cases	28	174	1,680
Males	376	1,752	16,412*
Females	17	73	1,918*
Youth 15-24yo	104	508	4,697
Children <15yo	0	1	66

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

Figure 1. Number of New HIV Cases per Month (2012-2014)

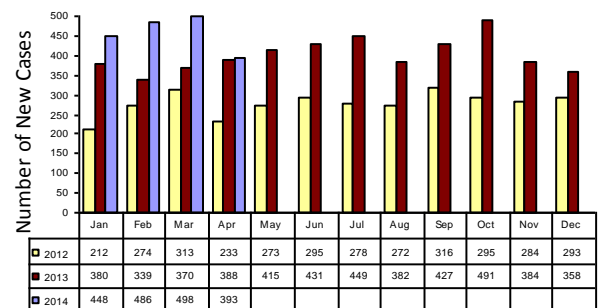


Figure 2. Comparison of the Proportion of Types of Sexual Transmission in 2014, 2013 & Cumulative Data (1984-2014)

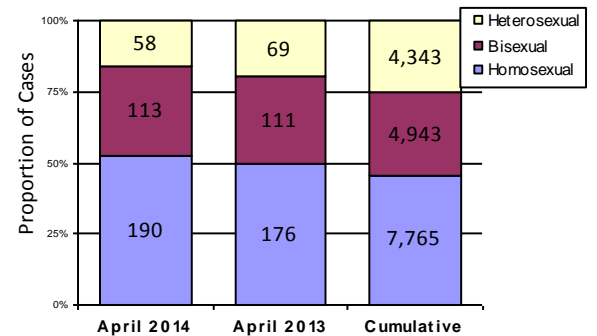
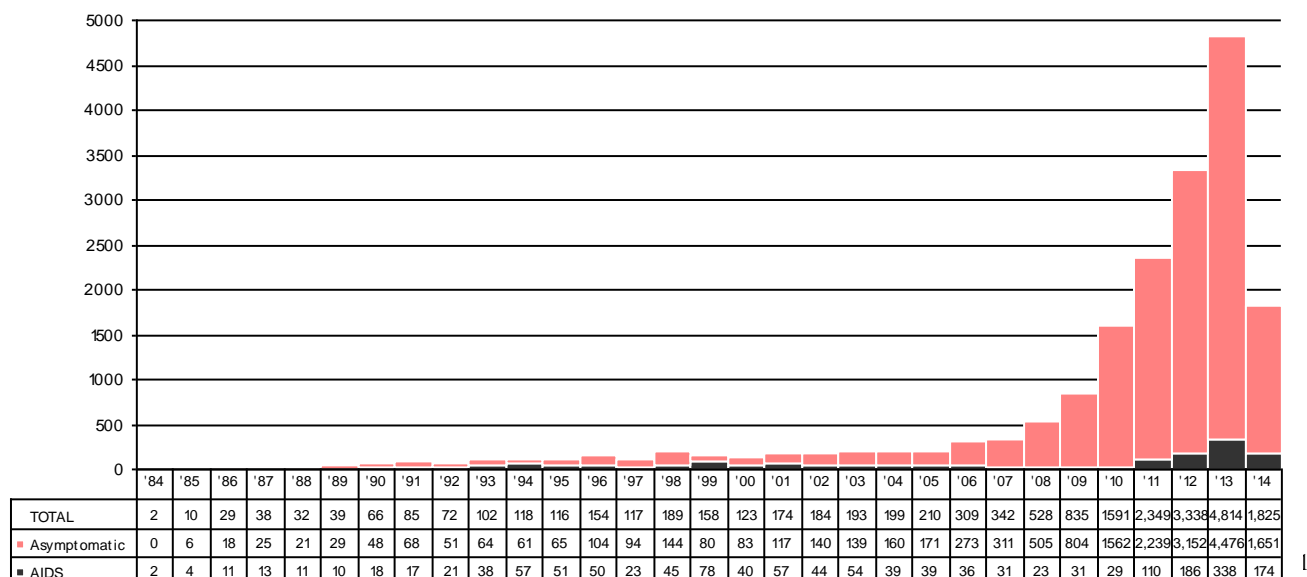


Figure 3. Number of HIV/AIDS Cases Reported in the Philippines by Year, January 1984 to April 2014 (N=18,341)

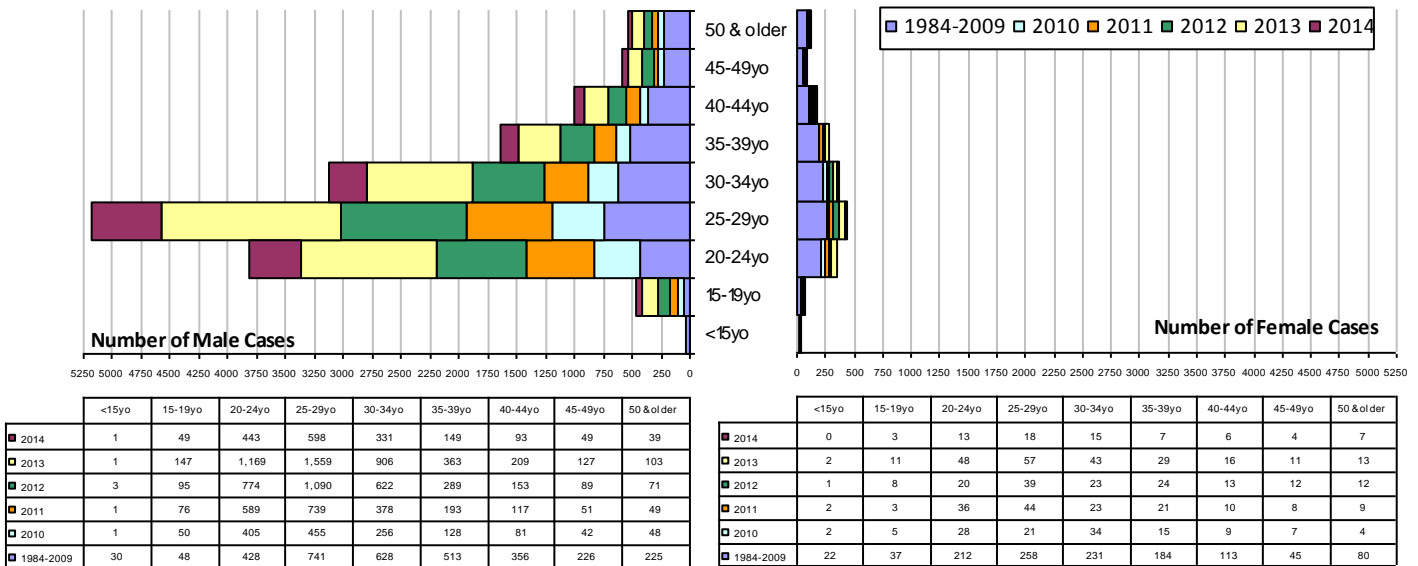


Demographic Characteristics (1984-2014)

Ninety-six percent of the 1,825 cases in 2014 were male (1,752). Ages ranged from 1 to 80 years old (median 28 years). The 20-29 year age group had the most (59%) number of cases for 2014. 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 (19%) [Figure 4].

From 1984 to 2014, there were 18,341 HIV Ab sero-positive cases reported (Table 1), of which 16,661 (91%) were asymptomatic and 1,680 (9%) were AIDS cases. As shown in Figure 4, there is a significant difference in the number of male and female cases reported. Ninety percent (16,412) were male. Ages ranged from 1-81 years (median 28 years). The age groups with the most number of cases were: 20-24 years (23%), 25-29 (31%), 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 (1984-2014)

In 2014, ninety-three percent (1,706) were infected through sexual contact, 7% (118) through needle sharing among injecting drug users and 1 infected through mother to child transmission (Table 3). There were 1,638 males and 68 females infected through sexual transmission. The age range of those infected through sexual transmission was 17-80 years old (median 28 years).

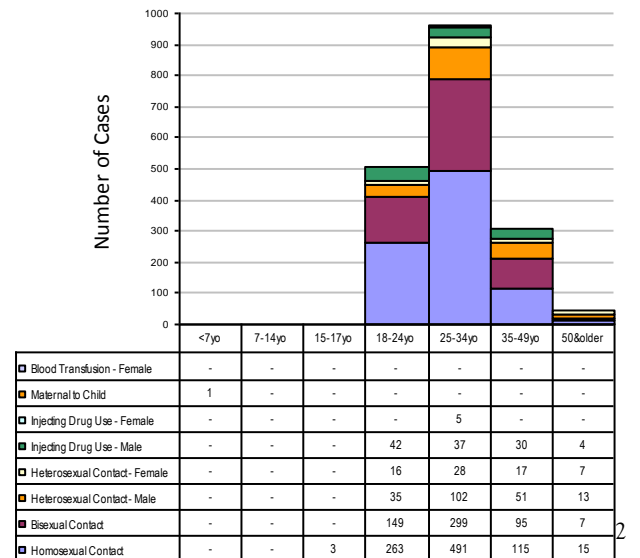
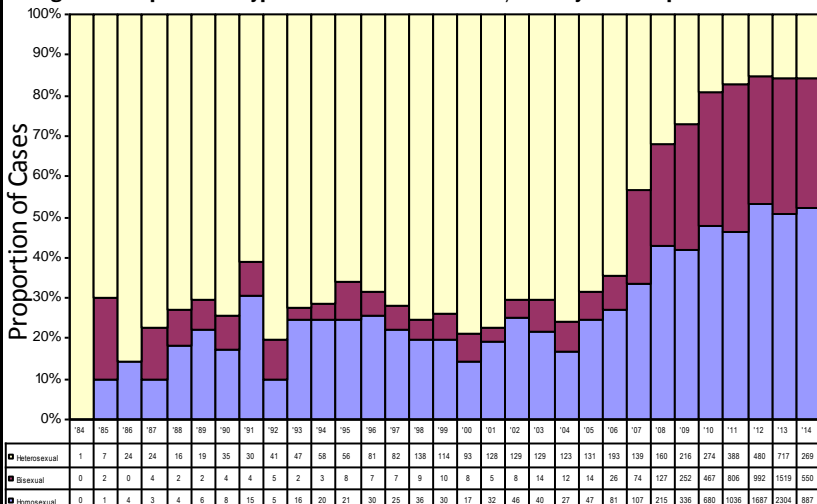
Of the 18,341 HIV positive cases reported from 1984 to 2014, 93% (17,051) were infected through sexual contact, 5% (829) through needle sharing among injecting drug users, <1% (63) through mother-to-child transmission, <1% (20) through blood transfusion and needle prick injury <1% (3) [Table 3]. No data is available for 2% (375) of the cases.

Table 3. Reported Modes of HIV Transmission

Mode of Transmission	April 2014 n=393	Jan-Apr 2014 n=1,825	Cumulative N=18,341
Sexual Contact	361	1,706	17,051
<i>Heterosexual contact</i>	<i>58(16%)</i>	<i>269(16%)</i>	<i>4,343(25%)</i>
<i>Homosexual contact</i>	<i>190(53%)</i>	<i>887(52%)</i>	<i>7,765(46%)</i>
<i>Bisexual contact</i>	<i>113(31%)</i>	<i>550(32%)</i>	<i>4,943(29%)</i>
Blood/Blood Products	0	0	20
Injecting Drug Use	32	118	829
Needle Prick Injury	0	0	3
Mother-to-Child	0	1	63
No Data Available	0	0	375

Figure 6. HIV Transmission by Age-Group, 2014 (n=1,825)

Figure 5. Proportion of Types of Sexual Transmission, January 1984–April 2014

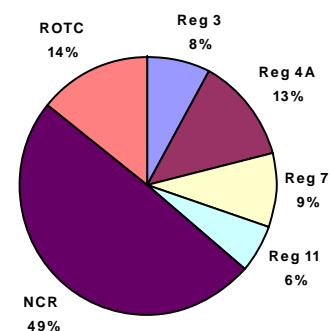


Geographic Distribution (1984-2014)

Since 1984 to present, there were 18,340 cases reported. Almost half (8,401) came from the National Capital Region. [Figure 7]. Thirteen percent (2,245) came from region 4A, followed by 9% (1,607) from Region 7, 8% (1,427) from Region 3, 6% (1,037) from Region 11 and the rest of the country comprises 14% (2,487) of all the cases.

**Note: 1,136 or 6% of the cases had no reported data on their address at the time of diagnosis*

Figure 7. Percentage of HIV Cases by Region, January 1984- April 2014



AIDS Cases (1984-2014)

Of the 1,825 HIV positive cases in 2014, one hundred seventy-four were reported as AIDS cases. Ninety eight percent (170) were male and 2% (4) were female. Ages ranged from 18-63 years (median 30 years). One hundred seventy-one acquired the infection through sexual contact (89 homosexual, 63 bisexual and 19 heterosexual) and 3 acquired through injecting drug use.

From 1984 to 2014, there were 1,680 AIDS cases reported. Eighty-three percent (1,391) were male and 17% (289) were female. Median age is 33 years (age range: 1-81 years). Sexual contact was the most common mode of HIV transmission, accounting for 95% (1,603) of all reported AIDS cases. Forty-three percent (689) of sexual transmission was through homosexual contact, followed by heterosexual contact (595) then bisexual contact (319).

Overseas Filipino Workers (1984-2014)

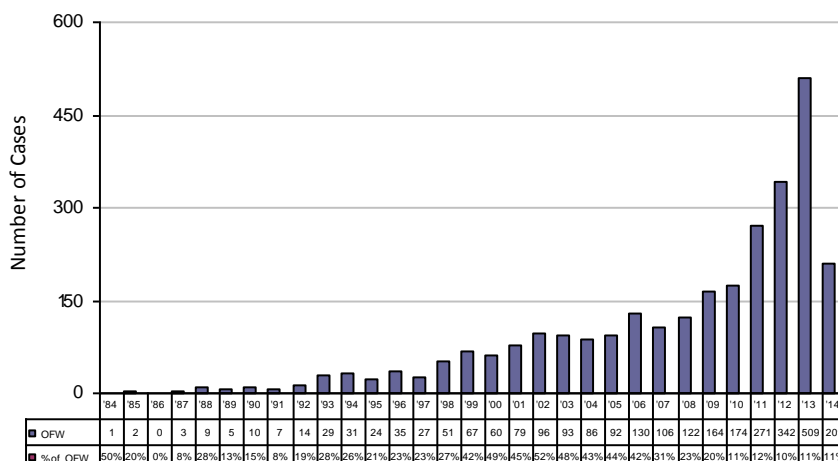
In 2014, there were 209 HIV positive OFWs, comprising 11% of cases reported for the year [Figure 8]. Of these, 185 (89%) were male and 24 (11%) were female. All acquired the infection through sexual contact (77 heterosexual, 82 homosexual and 50 bisexual).

There were 2,847 HIV positive OFWs since 1984, comprising 16% of all reported cases [Figure 8]. Eighty-one percent (2,307) were males. Ages ranged from 18 to 80 years (median 34 years). Sexual contact (98%) was the predominant mode of transmission (Table 4). Eighty-eight percent (2,506) were asymptomatic while 12% (341) were AIDS cases.

Table 4. Mode of HIV Transmission Among OFWs

Mode of Transmission	April 2014 n=47	Jan-Apr 2014 n=209	Cumulative N=2,847
Sexual Transmission	47	209	2,782
<i>Heterosexual contact</i>	<i>16(34%)</i>	<i>77(37%)</i>	<i>1,432(51%)</i>
<i>Homosexual contact</i>	<i>22(47%)</i>	<i>82(39%)</i>	<i>764(27%)</i>
<i>Bisexual contact</i>	<i>9(19%)</i>	<i>50(24%)</i>	<i>586(21%)</i>
Blood/Blood Products	0	0	10
Injecting Drug Use	0	0	4
Needle Prick Injury	0	0	3
No Data Available	0	0	48

Figure 8. Number of OFWs and the Proportion of OFWs among the Total HIV Cases by Year



Deaths among People with HIV

From January 1984 to April 2014, there were 981 reported deaths among people with HIV [Table 5]. Eighty-one percent (794) were male. In total, there has been 116 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 a median of 14 deaths per year. Beginning 2011, there has been an increase in the number of recorded deaths. There were 68 in 2011, and 176 in 2012. The DOH-NEC established an official reporting form in 2012.

From January to April 2014, there were a total of 44 deaths. Ninety-eight percent (43) were male [Table 5]. The highest number of deaths occurred in the 25-29 (41%) age group [Figure 9]. This was followed by the 20-24 (16%) and the 30-34 (14%) and 35-39 (14%) age groups. For the month of April 2014, there were 7 deaths* [Table 5].

Among the reported deaths in 2014, sexual contact (91%) was the most common mode of HIV transmission (24 homosexual, 11 bisexual, 5 heterosexual). There were 4 cases who got infected through injecting drug use (9%) [Figure 9].

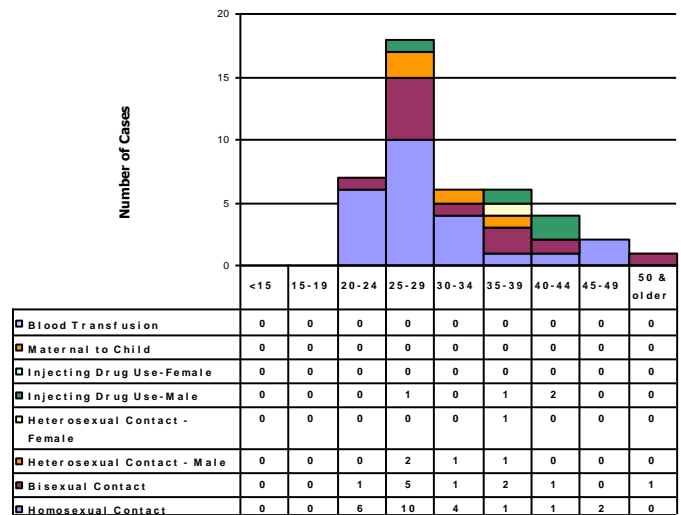
*This include deaths that fall under the reporting month only.

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

Demographic Data	Apr 2014	Jan-Apr 2014	Cumulative* (1984-2014)
Total Reported Deaths	7	44	981
Males	6	43	794
Females	1	1	187
Youth 15-24yo	2	7	116
Children <15yo	0	0	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-Apr 2014 (n=44)



PLHIV on Anti-Retroviral Therapy (ART)

As of April 2014, there were 6,437* People Living with HIV presently on Anti Retroviral Therapy. These are the combined numbers of adult and pediatric patients currently enrolled and accessing Anti-Retroviral drugs in the 18 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
18.	Northern Mindanao Medical Center

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

Blood Units Confirmed for HIV

As of April 2014, 148 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	2014
January	40
February	29
March	45
April	34
May	
June	
July	
August	
September	
October	
November	
December	
Total	148



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: HIVpicenter@gmail.com
Website: http://www.doh.gov.ph

Philippine HIV & AIDS Registry Report Editorial Team:

Patricia Isabel G. Amila, RN, MSPH
Asst. HIV Surveillance Officer, HIV Unit

Krizelle Anne G. Bonquillo, MSW
Asst. HIV Surveillance Officer, HIV Unit

Ngeli S. Patawaran, RN, MGM-ESP
HIV Surveillance Officer, HIV Unit

Aches B. Sagara, MD, PHSAE
Chief, SRAE, NEC

Enrique A. Tanyag, MD, PHSAE, FPSMID, CESO III
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.