



Newly Diagnosed HIV Cases in the Philippines

In January 2010, there were 143 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 a 120% increase compared to the same period last year (n=65 in 2009) [Figure 1]. Of the 143 individuals reported, 58 were detected from voluntary counseling and testing (VCT) as part of ongoing community outreach activities.

Most of the cases (87%) were males. The median age was 28 years (age range: 16-61 years). The 20-24 year (26%) and 25-29 year (24%) age-groups had the most cases. Forty percent (57) of reported cases were from the National Capital Region (NCR).

AIDS Cases

Most (99%) of the cases were still asymptomatic at the time of reporting (Figure 3).

Of the 143 HIV positive cases, two were reported as AIDS. Both were single males who acquired the infection through homosexual contact. There were no reported deaths.

Modes of Transmission

Reported modes of transmission were sexual contact (89) and sharing of needles among injecting drug users (50). Four did not mention mode of transmission.

There were 74 males and 15 females infected through sexual transmission. Age ranged from 18-61 years (median 29 years). Homosexual contact was the predominant type of sexual transmission (Figure 2).

Forty-eight males and two females were injecting drug users infected through sharing of needles. Ages ranged from 16-49 years (median 27 years).

Table 1. Quick Facts

Demographic Data	Jan 2010	Cumulative Data: 1984-2010
Total Reported Cases	143	4,567
Asymptomatic Cases	141	3,733
AIDS Cases	2	834
Males	125	3,357*
Females	18	1,199*
Youth 15-24yo	47	771
Children <15yo	0	52
Reported Deaths due to AIDS	0	318

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

Figure 1. Number of New HIV Cases per Month (2008-2010)

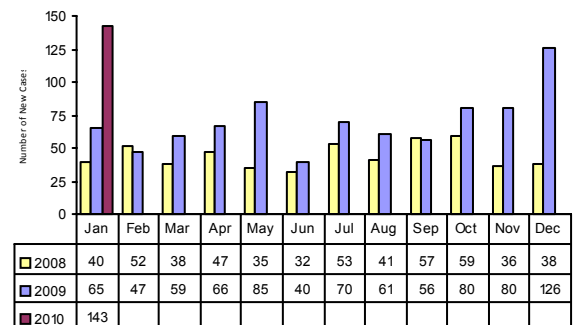


Figure 2. Comparison of the Proportion of Types of Sexual Transmission in 2010, 2009 & Cumulative Data (1984-2010)

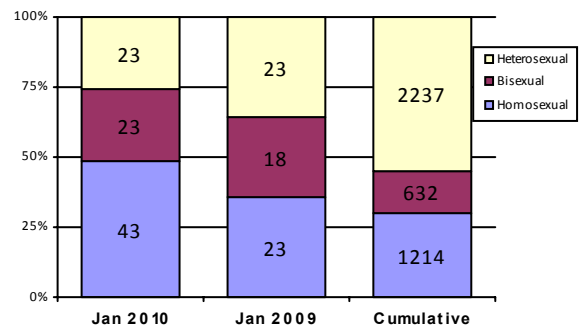
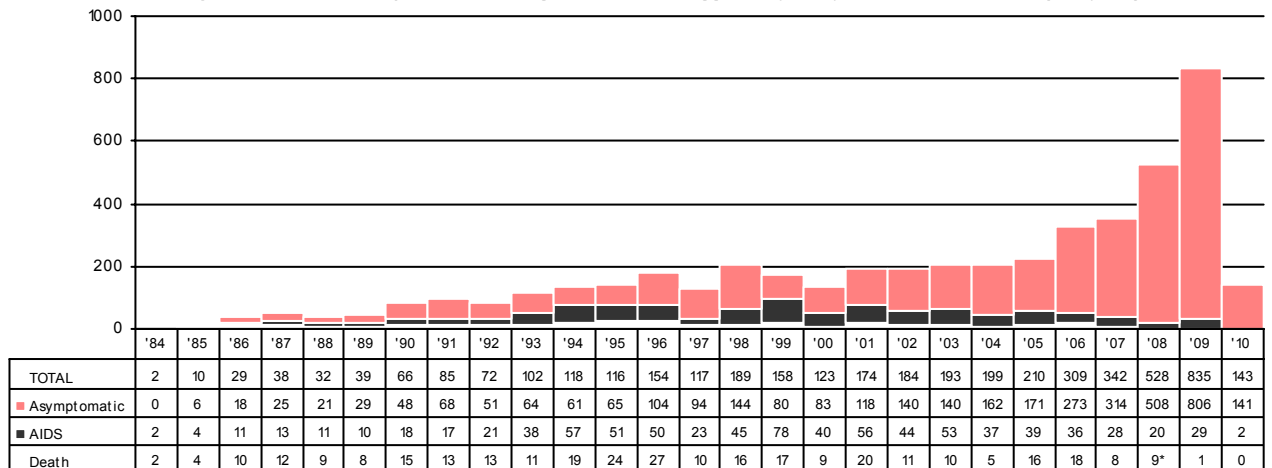


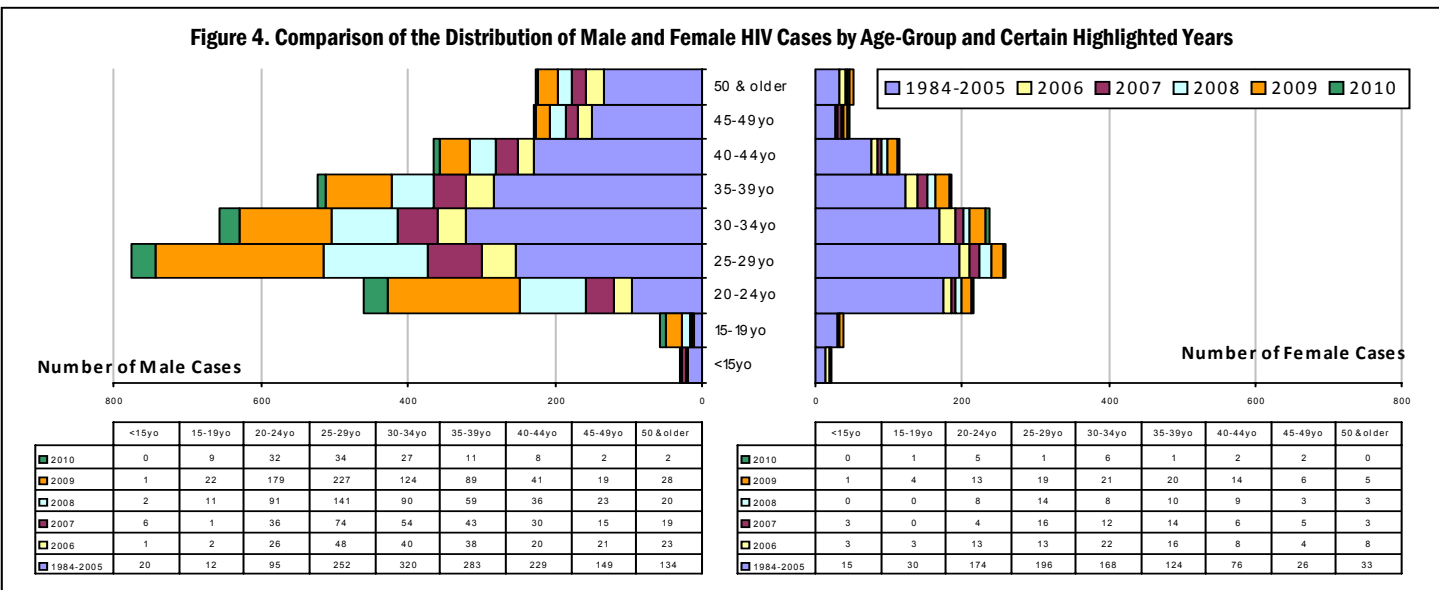
Figure 3. Number of HIV/AIDS Cases Reported in the Philippines by Year, Jan 1984 to Jan 2010 (N=4,567)



*Five initially asymptomatic cases reported in 2008 died due to AIDS in same year.

Cumulative Number of HIV Ab Seropositive Cases (1984-2010)

From January 1984 to January 2010, there were 4,567 HIV Ab seropositive cases reported (Figure 1), of which 3,733 (82%) were asymptomatic and 834 (18%) were AIDS cases. The age groups with the most number of cases were: 25-29 years (22%), 30-34 years (20%), 35-39 years (17%) [Figure 4]. Seventy-one percent (2,643) were males. Sexual contact (89%) was the leading mode of transmission (Table 2).



Of the 834 AIDS cases reported, 71% (590) were males. Median age was 36 years (range 1-72 years). Thirty-eight percent (314) had already died. Sexual intercourse was the most common mode of HIV transmission, accounting for 93% (774) of all AIDS cases. More than half (443) of sexual transmissions was through heterosexual contact, followed by homosexual contact (259) then bisexual contact (72). Other modes of transmission include: mother-to-child transmission (17), blood transfusion (10), injecting drug use (4), and needle prick injuries (2). Three percent (27) of the AIDS cases did not report mode of HIV transmission.

Mode of Transmission (1984-2009)

Of the 4,567 with HIV, 89% (4,083) were infected through sexual contact, 1% (49) through mother-to-child transmission, and 1% (58) through needle sharing among injecting drug users. Other modes of transmission are listed in Table 2. No data is available for 8% (355) of the cases. Cumulative data shows 55% (2,237) were infected through heterosexual contact, 30% (1,214) through homosexual contact, and 15% (632) through bisexual contact.

Proportions of modes of transmission and types of sexual transmission are shown in Figures 5 & 6.

Table 2. Mode of HIV Transmission

Mode of Transmission	Jan 2010 n= 143	Cumulative N=4,567
Sexual Contact	89	4,083
<i>Heterosexual contact</i>	<i>23 (26%)</i>	<i>2,237 (55%)</i>
<i>Homosexual contact</i>	<i>43 (48%)</i>	<i>1,214 (30%)</i>
<i>Bisexual contact</i>	<i>23 (26%)</i>	<i>632 (15%)</i>
Blood/Blood Products	0	19
Injecting Drug Use	50	58
Needle Prick Injury	0	3
Mother-to-Child	0	49
No Data Available	4	355

Figure 5. Proportion of Modes of Transmission by Age-Group, Jan 2010

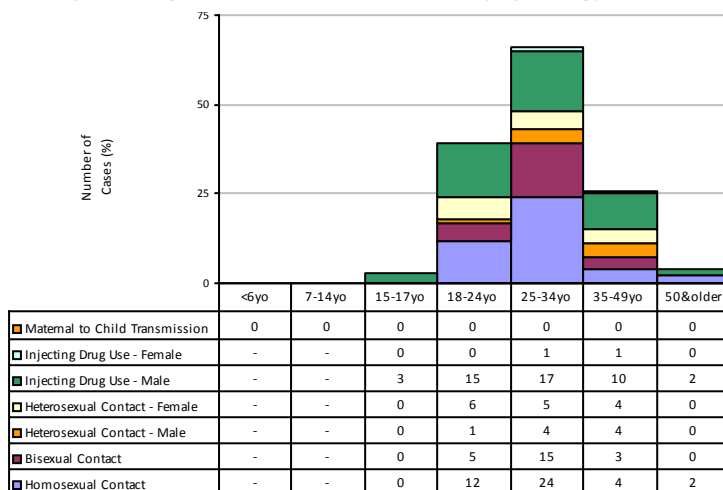
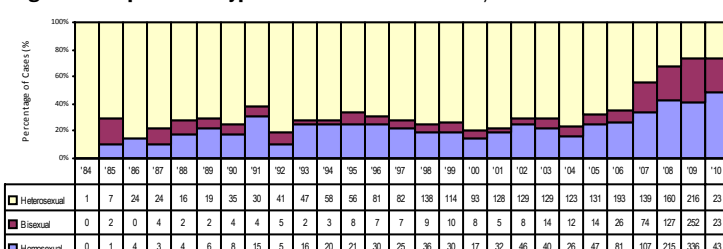


Figure 6. Proportion of Types of Sexual Transmission, Jan 1984–Jan 2010



Overseas Filipino Workers (OFW)

In January 2010, seven of the 143 (5%) reported cases were OFWs (Table 3). Five (71%) were males. The median age was 37 years (age range: 28-41 years). All cases acquired the HIV infection through sexual contact (3 heterosexual, 2 homosexual, and 2 bisexual)[Table 3].

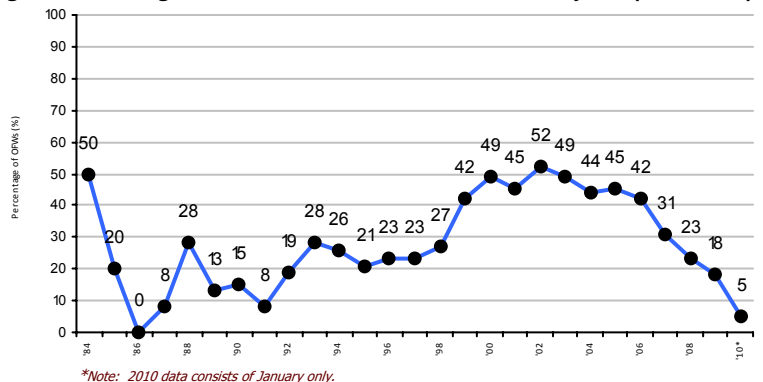
There were 1,355 HIV positive OFWs from 1984 to 2010, comprising 30% of all reported cases, and 5% of cases in 2010 (Figure 7). Seventy-five percent (905) were males. Ages ranged from 20 to 69 years (median 37 years). Twenty-four percent (323) were in the 30-34 year age group. Sexual intercourse (95%) was the predominant mode of transmission (Table 3). Eighty percent (1,090) were asymptomatic while 20% (265) were AIDS cases.

Of the 265 AIDS cases among OFWs, 81% (214) were males. Ages ranged from 20-69 years (median 40 years). Reported mode of transmission was mostly (257 or 97%) sexual contact of all AIDS cases. Other modes of transmission include: blood transfusion (4) and needle prick injury (2). Two did not report mode of transmission.

Table 3. Reported Mode of HIV Transmission Among OFWs

Reported Mode of Transmission	Jan 2010 n=7	Cumulative N=1,355
Sexual Transmission	7	1,293
<i>Heterosexual contact</i>	3 (43%)	932 (72%)
<i>Homosexual contact</i>	2 (29%)	227 (18%)
<i>Bisexual contact</i>	2 (29%)	134 (10%)
Blood/Blood Products	0	10
Injecting Drug Use	0	1
Needle Prick Injury	0	3
No Data Available	0	48

Figure 7. Percentage of OFWs of the Total Number of HIV Cases by Year (1984-2010)



Program Related Information

Of the 143 HIV cases reported in January 2010, 42% of the cases received information on HIV prevention, services available for HIV cases, implications of an HIV positive result from screening and confirmation. Their sources of information were one-on-one counseling, group counseling, pre-departure orientation seminar (PDOS), pamphlets, videos, internet and seminars.

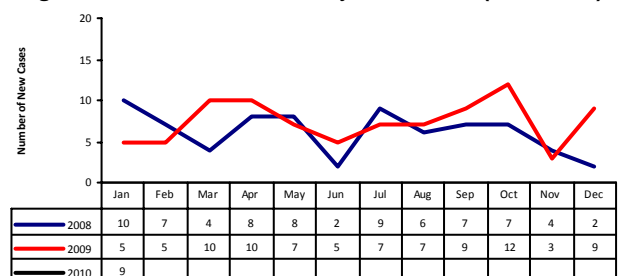
Blood Units Screened for HIV

NOTE: The following information is from the National Voluntary Blood Safety Program (NVBSP) which monitors blood safety of donated blood and the Research Institute for Tropical Medicine (RITM). The number of blood units positive for HIV does not correspond to the number of blood donors positive for HIV. One donor can donate more than one unit of blood. Figures here do not represent the HIV prevalence rate among blood donors, but the number of blood units that were confirmed positive for HIV.

From January to December 2009, 89 blood units were confirmed to be positive by the RITM.

For January 2010, 52 blood units referred for HIV confirmation, nine units were positive for HIV, one unit had indeterminate results, and 42 were negative for HIV (Figure 8).

Figure 8. HIV Positive Blood Units by Month & Year (2008-2010)



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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.