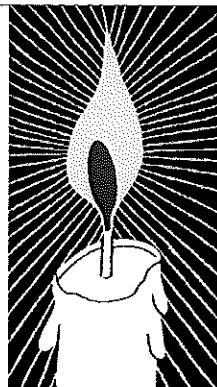


RAP* Time



RURAL CENTER *for*
AIDS/STD PREVENTION

DEPARTMENT OF APPLIED HEALTH SCIENCE

INDIANA UNIVERSITY SCHOOL OF PUBLIC
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*Rural AIDS/STD prevention. rap (rap) v. *Slang*. To talk freely and openly

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Impact of HIV in United States communities of MSM remains staggering

In the U. S., men who have sex with men accounted for an estimated 53% of persons living with diagnosed HIV in 2013 and 67% of new HIV diagnoses in 2014. MSM represent a minority of men in the U.S.

Persons of color and those living in the Southern U. S. comprise a disproportionate share of new infections, new diagnoses, those living with HIV, and deaths among persons living with an HIV diagnosis.

Black MSM represent the most affected subgroup in the U.S., for whom extremely high levels of HIV prevalence and incidence have been recorded. The National HIV/AIDS Strategy places priority on MSM, particularly black MSM and persons living in the South.

This study synthesized published estimates of MSM population size with publically available HIV surveillance data, in order to estimate the prevalence of HIV diagnosis and infection and the rate of new infections and the rate of new diagnoses, at the national, state, MSA, and county levels.

Methodology

The number of MSM living with HIV infection in 2012 (prevalence),

living with an HIV diagnosis in 2012 (diagnosed prevalence), and newly diagnosed with HIV infection in 2013 (new diagnosis), at state, MSA, and county levels, were obtained from data from AIDSvu.org and CDC.

Outcomes of the Study

Major findings include:

- In the U.S. in 2012, an estimated 15% were living with HIV infection (diagnosed and undiagnosed) with 11.1% living with HIV diagnosis.
- Diagnosed HIV prevalence rate among MSM was 57.5 times greater than among other U.S. men.
- States in the South had the highest rates of diagnosed HIV prevalence among MSM with all rates of $\geq 15\%$ located in the South.
- Rates of diagnosed HIV prevalence among MSM living in Louisiana, Mississippi, and South Carolina were all about twice the national rates. The rates of new infections among MSM followed the same pattern.
- All but 4 high-prevalence metropolitan statistical areas (MSAs) are located in the South and 6 southern MSAs have diagnosed HIV prevalence among MSM for

213 of $\geq 25\%$.

- County-level diagnosed HIV prevalence rates among MSM in 2012 shows a similar pattern of the high-prevalence urban areas.
- Several rural counties in the South have diagnosed HIV prevalence rates of $\geq 20\%$ and $\geq 30\%$.
- Georgia is uniquely high in both the rate and case count of MSM living diagnosed HIV.

Implications for Prevention

This analysis found that despite incredible achievements in prevention, HIV diagnosis, and antiretroviral therapies of the 35 years of the epidemic, the impact of HIV in U.S. communities of MSM remains staggering. MSM infections are concentrated in urban-dwelling MSM but rural areas still represent important places of HIV of burden.

SOURCE:

Rosenberg, E., S., et al. (2016). Rates of prevalent HIV infection, prevention diagnoses, and new diagnoses among men who have sex with men in US states, Metropolitan Statistical Areas, and Counties, 2012-2013. *JMIR Public Health and Surveillance*, 2(1): e22.

Condom use did not increase after HSV-2 diagnosis

This study assessed the coping strategies and behavior changes of 28 women recently diagnosed with herpes simplex virus type 2. Women were from a public health STD clinic and the Indianapolis Community Court.

Women employed several coping strategies after HSV-2 diagnosis: 32% reported increase in religious activities; 20% increased substance abuse; and 56% engaged in other coping activities.

80% of the women reported abstaining from sex immediately following the diagnosis, but 76% of women reported engaging in sex again by the six-month interview. Condom and medication use did not increase and HSV-2 support groups were not utilized by the participants. All women reported engaging in at least one coping mechanism after receiving their diagnosis.

A positive diagnosis did not seem to increase condom use for most participants and acyclovir use was low.

SOURCE: Davis, A., et al. (2016). Coping strategies and behavioral changes following a genital herpes diagnosis among an urban sample of underserved Midwestern women. *International Journal of STD & AIDS*, 27, 207-212.

Three-fourths of HIV+ persons had viral suppression in 1 year

HIV prevention efforts are increasingly targeting early HIV diagnosis and quick link to health care and antiretroviral therapy. This study examined trends in time from HIV diagnosis to viral load suppression in King County, WA between 2007-2013.

A total of 1490 (84%) of 1766 newly diagnosed persons achieved viral suppression in a median time of 213 days. Thirty-six percent of all persons diagnosed in 2007 and 77% in 2013 were virally suppressed within 12 months of HIV infection diagnosis.

Differences in time to suppression by calendar year persisted when stratifying by CD4 count at diagnosis. Race was not significantly associated with time to viral suppression.

The study found that the time from HIV infection diagnosis to viral suppression dramatically declined between 2007 and 2013, and more than three-quarters of recently HIV-diagnosed individuals achieved viral suppression within one year of their HIV-infection diagnosis.

SOURCE: Toren, K. G., et al. (2015). Time from HIV diagnosis to viral load suppression: 2007-2013. *Sexually Transmitted Diseases*, 43, 34-40.

Text messages increased HIV testing among women

Young college women in Central Kenya were sent weekly text SMS messages on HIV testing and reproductive health. Women receiving these texts, compared to control group, were 54% more likely to get HIV tested. They also took a median of 12 weeks to get their first HIV test compared to 20 weeks median for control group.

SOURCE: Njuguna, N., et al. (2016). The effect of human immunodeficiency virus prevention and reproductive health text messages on human immunodeficiency virus testing among young women in rural Kenya: A pilot test. *Sexually Transmitted Diseases*, 43, 353-359.

Persons infected with HIV may age faster

With ART, persons infected with HIV may live longer. However, aging models show that HIV seems to cause nearly 5 years of premature aging. This increases the risk of early death by 19 percent.

SOURCE: Gross, A. M., et al. (2016). Methyhlome-wide analysis of chronic HIV reveals five-year increase in biological age and epigenic targeting of HLA. *Molecular Cell*, 62, 157-168.

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RCAP is located within the Department of Applied Health Science, Indiana University School of Public Health-Bloomington. The major focus of RCAP is the promotion of AIDS/STD prevention in the American rural communities, with the goal of reducing HIV/STD incidence. RCAP began operations on March 1, 1994.

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