

# Utah Health Status Update:

## HIV/AIDS

April 2007

Utah Department of Health

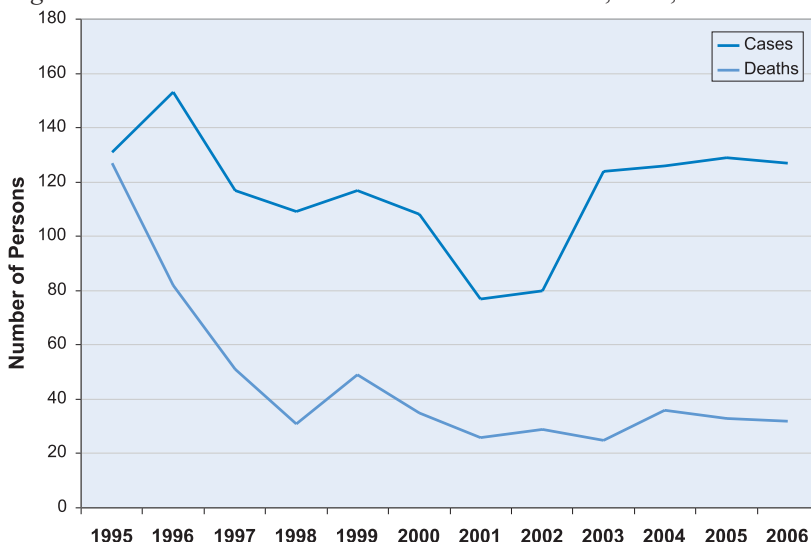
AIDS (acquired immunodeficiency syndrome), which is caused by HIV (human immunodeficiency virus), was first reported in the United States in 1981 and has since become a major worldwide epidemic. The Centers for Disease Control estimate that 40,000 new individuals become infected with HIV each year. In Utah, HIV/AIDS has infected over 3,000 people, and includes over 1,000 deaths. The epidemic has changed significantly over the last 25 years due to prevention efforts successfully targeting high-risk behaviors and effective new treatment regimens that have lengthened the life span of HIV-infected people. This means more people are living with HIV/AIDS and need preventative and treatment services in Utah. This Health Status Update reviews data from the 2006 HIV Surveillance Report and Community Epidemiological Profile that illustrate these changes.

Diagnosed cases of AIDS in Utah peaked in 1990, but have since declined substantially. In 2003, there was a greater number of reported HIV cases than reported AIDS cases for the first time in Utah. However over the last three years, new cases of HIV have remained about the same (Figure 1). The increase may be due, in part, to an increase in the number of males tested at counseling and testing sites, and the introduction of the HIV-rapid test in mid 2003.

- HIV/AIDS deaths have steadily been declining. In Utah, deaths due to HIV/AIDS have dropped from 127 in 1995 to 32 in 2006 (Figure 1).
- The number of people living in Utah with HIV and AIDS continues to increase due to the longer life expectancy for people with HIV/AIDS (Figure 2).
- Of all people living with HIV or AIDS in Utah, 42% are between the ages of 40–49, 25% are between 30–39, and 25% are 50 years or older (data not shown). However many of these individuals may have acquired the infection during their teenage years or early-twenties so prevention efforts need to focus on this age group as well.

### Cases and Deaths from HIV/AIDS

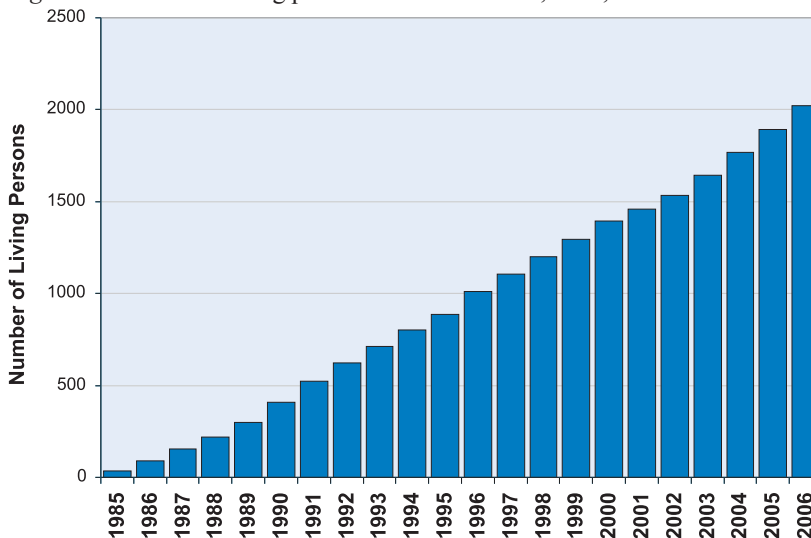
Figure 1. Numbers of cases and deaths from HIV/AIDS, Utah, 1995–2006



Cases of HIV and AIDS were combined in their year of first diagnosis.  
Source: Bureau of Communicable Disease Control, UDOH

### Persons Living With HIV and AIDS

Figure 2. Number of living persons with HIV/AIDS, Utah, 1985–2006



Each bar indicates the number of people who have been reported with HIV/AIDS in that year and are still alive. Data are cumulative and can not be added across years.  
Source: Bureau of Communicable Disease Control, UDOH

- From 1999–2006, the most common transmission risk groups reported among men living with HIV/AIDS were men who have sex with men (MSM) (68% of cases), followed by MSM/injecting drug user (IDU) (17% of cases), and IDU (9% of cases) (Figure 3). The transmission route of MSM/IDU has been increasing over the last five years and is likely due to the increased

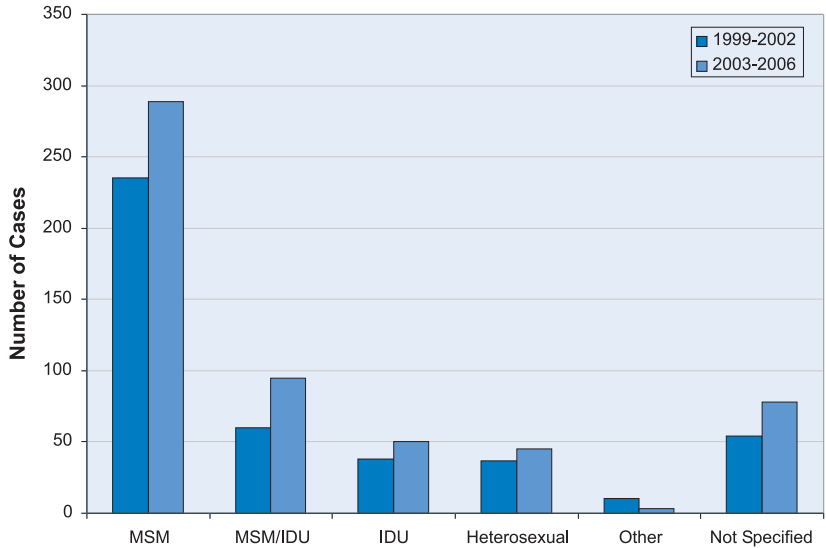
use of crystal methamphetamine in the MSM community.

- From 1999–2006, the most common transmission risk groups reported among women living with HIV/AIDS were heterosexual contact (37% of cases), followed by IDU (25% of cases) (Figure 3).
- During the last eight years, the majority of HIV/AIDS cases in Utah were among White persons (64%), but Black and Hispanic persons were disproportionately affected. Of the reported HIV/AIDS cases, 23% were Hispanic and 11% were Black (Hispanic persons comprise 8% of Utah’s ethnic population, Black persons 1%) (2000 Census) (Figure 4).
- In 2006, 11 HIV-positive women in Utah delivered an infant. Five of the women were partners of an HIV-positive male, three were injecting drug users (IDU), one was a partner of an IDU, and two did not disclose their risk. Three of the women found out they were HIV-positive during their pregnancies (data not shown).
- Of the reported HIV/AIDS cases in 2006, 90% live along the Wasatch Front and 73% live in Salt Lake County. The majority of individuals from rural areas continue to come to Salt Lake City for their medical treatment (data not shown).
- In addition to the HIV/AIDS cases reported in Utah, cumulative data show that over 1,000 individuals who were diagnosed with HIV or AIDS in another state now reside in or receive medical care in Utah (data not shown).

These data illustrate the change in HIV/AIDS from an acute disease with a high mortality rate to a chronic disease. This brings a need for different services and approaches to delivering those services. Prevention activities also need to respond to new trends such as the recent rise of drug use among MSM and the subsequent increase of HIV/AIDS in this risk group.

### HIV/AIDS by Risk Category

Figure 3. Number of HIV/AIDS cases by risk category and 4-year time period, Utah, 1999-2006

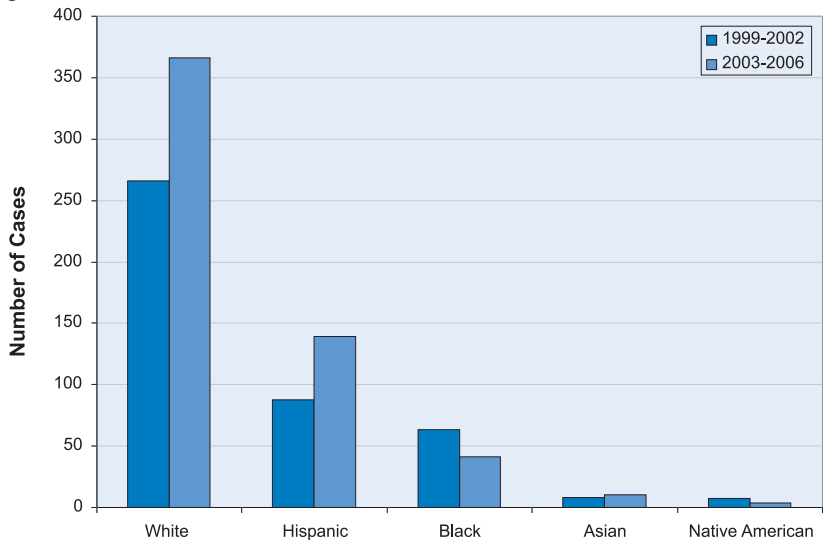


MSM – Men who have sex with men; IDU – Injecting Drug User; Other – includes hemophiliacs, transfusions, and pediatric cases.

Source: Bureau of Communicable Disease Control, UDOH

### HIV/AIDS by Race and Ethnicity

Figure 4. Number of HIV/AIDS cases by race/ethnicity and 4-year time period, Utah, 1999-2006



The category “Hispanic” includes those of Hispanic ethnicity regardless of race. Cases of HIV and AIDS were classified in the year they were first reported.

Source: Bureau of Communicable Disease Control, UDOH

## April 2007 Utah Health Status Update

For additional information about this topic, contact the Bureau of Communicable Disease Control, Utah Department of Health, Box 142105, Salt Lake City, UT 84114-2105, (801) 538-6096, FAX, (801) 538-9913, <http://health.utah.gov/cdc/sp.htm>; or the Office of Public Health Assessment, Utah Department of Health, Box 142101, Salt Lake City, UT 84114-2101, (801) 538-6108, FAX (801) 538-9346, email: [phdata@utah.gov](mailto:phdata@utah.gov)

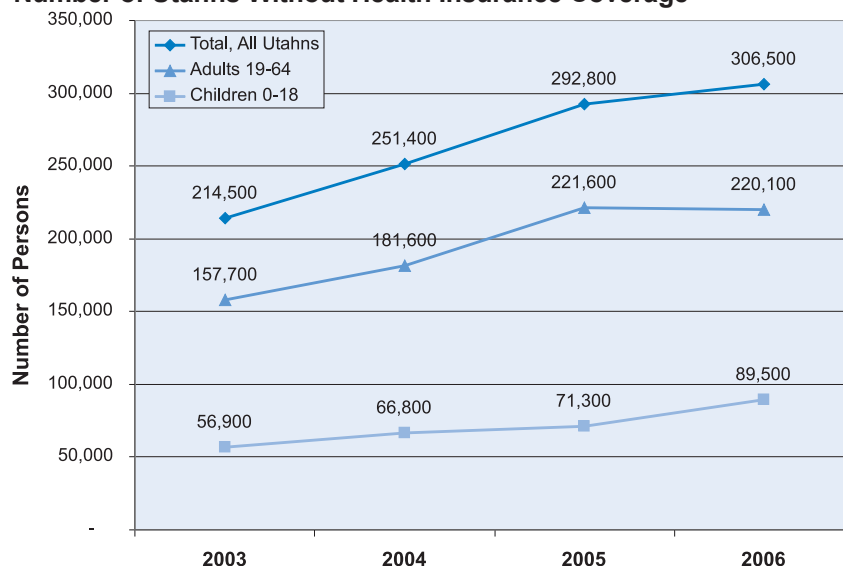
## Breaking News, March 2007

### Health Insurance Coverage in Utah

The number and percentage of Utahns who were uninsured increased from 2005 to 2006, according to new data released by the Utah Department of Health (UDOH), but the overall increase was smaller than in recent years. The UDOH uses the Utah Health Status Survey to track trends in Utah health insurance coverage. The 2006 survey estimated that 306,500 Utahns lacked health insurance coverage during calendar year 2006, an increase of 13,700 from the previous year (2005: 292,800). The increase occurred primarily among children (age 0–18), not adults (age 19–64), on average.

Over the last decade, Utah’s uninsured population grew at an average annual rate of 6.9%, compared with 2.3% for the state’s overall rate of population growth. The increase from 2005 to 2006 was less than in previous years, and did not reach statistical significance. “The increase was not as large, but we’re still going in the wrong direction,” said UDOH Executive Director, Dr. David N. Sundwall.

**Number of Utahns Without Health Insurance Coverage**



## Community Health Indicators Spotlight, March 2007

### Pregnancy-related Violence

The Utah Department of Health’s Violence and Injury Prevention Program (VIPP) projects that 40,000 Utah women are physically abused by an intimate partner each year. Further, VIPP states that on average, 11 Utah women die each year from domestic violence. Data from the Utah Pregnancy Risk Assessment Monitoring System (PRAMS) shows that approximately 8,000 (4.2%) Utah women who delivered a live birth during 2000–2003 reported physical abuse by a husband or partner. This abuse occurred either during the year before they got pregnant with their most recent pregnancy or during their most recent pregnancy. Of those women, 39.2% (approximately 3,000) reported that during any prenatal visit a health care worker asked if someone was hurting them emotionally or physically. Furthermore, 28.9% (approximately 2,200) said that a health care worker discussed physical abuse to women by their husbands or partners with them.

Only 57% of women who reported abuse during pregnancy received prenatal care in their first trimester compared to 80% of women who did not report abuse. Abused women were more likely to report moderate to severe postpartum depression (44% vs. 24%), smoking during the last trimester (22% vs. 6%), and an outpatient visit to the hospital for a pregnancy-related morbidity (51% vs. 35%). In addition, women who reported abuse had a higher prevalence of delivering a low birth-weight infant, and were less likely to obtain a postpartum checkup for themselves. Abused women were as likely to report initiating breastfeeding; however, they were less likely to report breastfeeding at the time the survey was completed (2–6 months postpartum). Forty-one percent of the women who reported abuse also reported that their husband/partner said he did not want her to be pregnant in contrast to 8% of women who did not report abuse.

# Monthly Health Indicators Report

(Data Through February 2007)

<b>Monthly Report of Notifiable Diseases, February 2007</b>	<b>Current Month # Cases</b>	<b>Current Month # Expected Cases (5-yr average)</b>	<b># Cases YTD</b>	<b># Expected YTD (5-yr average)</b>	<b>YTD Standard Morbidity Ratio (obs/exp)</b>
Campylobacteriosis (Campylobacter)	8	10	24	29	0.8
Enterotoxigenic Escherichia coli (E. coli)	4	2	9	4	2.3
Hepatitis A (infectious hepatitis)	0	3	0	5	0.0
Hepatitis B (serum hepatitis)	1	2	1	5	0.2
Influenza <sup>†</sup>	Weekly updates at <a href="http://health.utah.gov/epi/diseases/flu">http://health.utah.gov/epi/diseases/flu</a>				
Measles (Rubeola, Hard Measles)	0	0	0	0	--
Meningococcal Diseases	5	1	6	1	5.0
Norovirus	1	0*	7	0*	--
Pertussis (Whooping Cough)	50	24	99	39	2.6
Salmonellosis (Salmonella)	14	13	34	26	1.3
Shigellosis (Shigella)	3	4	4	8	0.5
Varicella (Chickenpox)	113	73*	251	151*	1.7
Viral Meningitis	2	5	8	12	0.7
<b>Notifiable Diseases Reported Quarterly, 4th Qtr 2006</b>	<b>Current Quarter # Cases</b>	<b>Current Quarter # Expected Cases (5-yr average)</b>	<b># Cases YTD</b>	<b># Expected YTD (5-yr average)</b>	<b>YTD Standard Morbidity Ratio (obs/exp)</b>
HIV	32	19	162	72	2.3
AIDS	7	13	57	51	1.1
Chlamydia	1,322	1,201	5,057	3,777	1.3
Gonorrhea	243	151	871	467	1.9
Tuberculosis	9	7	34	34	1.0
<b>Program Enrollment for the Month of February 2007</b>	<b>Current Month</b>	<b>Previous Month</b>	<b>% Change<sup>s</sup> From Previous Month</b>	<b>1 Year Ago</b>	<b>% Change<sup>s</sup> From 1 Year Ago</b>
Medicaid	162,456	163,867	-0.9%	177,170	-8.3%
PCN (Primary Care Network)	15,602	16,237	-3.9%	16,425	-5.0%
CHIP (Children's Health Ins. Plan)	29,312	31,821	-7.9%	34,064	-14.0%

<b>Medicaid Expenditures (in Millions) for the Month of February 2007</b>	<b>Current Month</b>	<b>Expected/Budgeted for Month</b>	<b>Fiscal YTD</b>	<b>Budgeted Fiscal YTD</b>	<b>Variance - over (under) budget</b>
Capitated Mental Health	\$ 7.3	\$ 8.0	\$ 64.4	\$ 72.3	(\$ 7.9)
Inpatient Hospital	\$ 25.2	\$ 16.0	\$ 119.2	\$ 117.4	\$ 1.8
Outpatient Hospital	\$ 6.2	\$ 6.1	\$ 46.8	\$ 47.1	(\$ 0.3)
Long Term Care	\$ 12.8	\$ 14.5	\$ 113.3	\$ 115.0	(\$ 1.7)
Pharmacy	\$ 10.2	\$ 10.7	\$ 82.1	\$ 88.7	(\$ 6.5)
Physician/Osteo Services	\$ 6.1	\$ 5.5	\$ 38.5	\$ 40.9	(\$ 2.4)
<b>TOTAL HCF MEDICAID</b>	<b>\$ 140.5</b>	<b>\$ 123.4</b>	<b>\$ 908.4</b>	<b>\$ 941.8</b>	<b>(\$ 33.4)</b>
<b>Health Care System Measures</b>	<b>Number of Events</b>	<b>Rate per 100 Population</b>	<b>% Change<sup>s</sup> From Previous Year</b>	<b>Total Charges in Millions</b>	<b>% Change<sup>s</sup> From Previous Year</b>
Overall Hospitalizations (2005)	268,652	10.0%	-1.3%	\$ 3,501.7	+8.6%
Non-maternity Hospitalizations (2005)	161,474	5.8%	-1.6%	\$ 2,914.5	+8.2%
Emergency Department Encounters (2005)	664,523	25.0%	+3.5%	\$ 553.2	+21.2%
Outpatient Surgery (2005)	308,300	11.7%	-0.5%	\$ 947.7	+12.1%
<b>Annual Community Health Measures</b>	<b>Current Data Year</b>	<b>Population at Risk</b>	<b>Number Affected</b>	<b>Percent/Rate</b>	<b>% Change<sup>s</sup> From Previous Year</b>
Overweight and Obesity (Adults 18+)	2006	1,777,802	976,000	54.9%	+1.3%
Cigarette Smoking (Adults 18+)	2006	1,777,802	174,200	9.8%	-15.0%
Influenza Immunization (Adults 65+)	2006	217,313	156,700	72.1%	+3.4%
Health Insurance Coverage (Uninsured)	2006	2,582,371	306,500	11.9%	+2.5%
Motor Vehicle Crash Injury Deaths	2005	2,528,926	292	11.6 / 100,000	-4.5%
Suicide Deaths	2005	2,528,926	344	13.6 / 100,000	-11.1%
Diabetes Prevalence	2005	2,528,926	104,200	4.1%	+8.7%
Coronary Heart Disease Deaths	2005	2,528,926	1,567	62.0 / 100,000	-4.6%
All Cancer Deaths	2005	2,528,926	2,512	99.3 / 100,000	+0.4%
Births to Adolescents (Ages 15-17)	2005	58,374	917	15.7 / 1,000	+5.8%
Early Prenatal Care	2005	51,517	40,587	78.8%	+1.0%
Infant Mortality	2005	51,517	231	4.5 / 1,000	-13.3%
Childhood Immunization (4:3:1:3:3)	2005	50,043	37,100	74.1%	+3.9%

\* Due to limited historical data, the average is based upon 3 years of data for norovirus, varicella, and West Nile virus infections.

† Influenza activity continues to be mild in Utah. Influenza-like illness measures are below baseline. As of March 16, 2007, 157 influenza-associated hospitalizations have been reported to the UDOH. Twenty-one of these hospitalizations were reported during the last week. More information can be found at <http://health.utah.gov/epi/diseases/flu>

§ % Change could be due to random variation.

Note: Active surveillance has ended for West Nile Virus until the 2007 season.