

Hong Kong STD/AIDS Update

- a quarterly surveillance report

Department of Health

Vol.5 No.3 July 1999

Editorial

Compared with the cases reported in last quarter, newly reported HIV patients have considerably shot up to 63 during the second quarter. The figure is the highest recorded since the surveillance system was established in 1984.

Cumulatively, the total number of reported HIV infection has reached 1255. Eighty-four percent are males, and 69% are ethnic Chinese. Eighty-two percent of all have acquired the infection through sexual contact, with two thirds of them through heterosexual transmission.

In this quarter, three injecting drug users were diagnosed to have HIV infection. Altogether, there were 20 cases which corresponds to about 1.6% of the local cumulative HIV infection. The figure is the highest recorded in a single quarter since the establishment of the surveillance system.

In this quarter, two mother-to-child infections were diagnosed. This is not surprising in view of the increasing importance of heterosexual transmission of HIV in Hong Kong. Female infections have been increasingly important and we have to be on the alert and prepare for more prenatal HIV infection in the coming future.

Of note, 4 new HIV cases were detected by the Hong Kong Red Cross Blood Transfusion Services (HKRCBTS). The figure is the highest recorded ever since 1985 when HKRCBTS started to employ HIV antibody screening for blood donors.

Another worrying phenomenon is the unlinked anonymous screening (UAS) results in the methadone clinic. The number of HIV positive samples among methadone attendees had increased to 6 out of 2838 specimens collected in 1998, giving a rate of 0.21%. This is definitely the highest rate that has ever been recorded among local drug abusers and is higher than the generally estimated less than 1 in 1000 in general population. The existing low HIV prevalence in local drug users should not be a reason for complacency. The world has witnessed many examples of rapid spread of HIV among injecting drug users. The figure reminds us the importance of enhancing efforts of public health surveillance and control. Both government and non-governmental organisations working in the field of drug abuse are encouraged to do more health education in a proactive manner.

Contents

1. Editorial
2. Tables & graphs : Quarterly statistics and Trend of HIV/AIDS & STD
3. Genital Chlamydia Trachomatis Infections

Page

- 1
- 2-7
- 8

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Reported HIV/AIDS Quarterly Statistics

2nd Quarter (April - June) 1999

	This Quarter		Cumulative	
	<u>HIV</u>	<u>AIDS</u>	<u>HIV</u>	<u>AIDS</u>
Sex				
Male	54	17	1057	364
Female	9	2	198	45
Ethnicity/race				
Chinese	49	14	871	310
Non-Chinese	14	5	384	99
<i>Asian</i>	7	2	161	46
<i>White</i>	4	3	167	51
<i>Black</i>	0	0	13	2
<i>Others</i>	3	0	43	0
Age at diagnosis				
Adult	61	19	1225	401
Child (age 13 or less)	2	0	30	8
Exposure category				
Heterosexual	32	12	697	246
Homosexual	11	3	264	89
Bisexual	3	0	67	24
Injecting drug user	3	1	20	6
Blood/blood product infusion	1	2	68	18
Perinatal	2	0	9	4
Undetermined	11	1	130	22
Total	63	19	1255	409

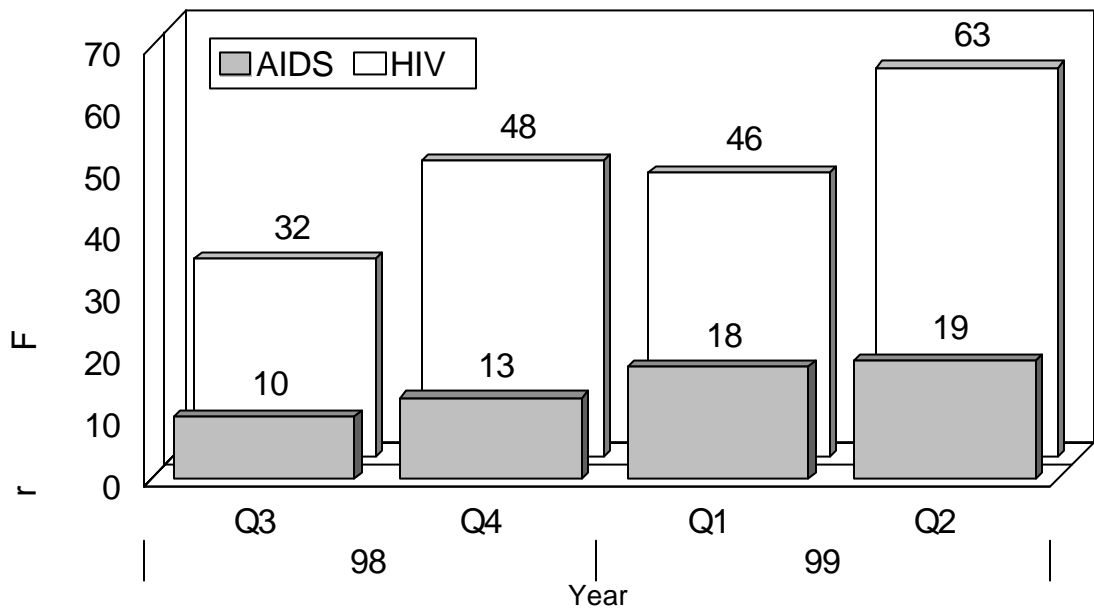
Sexually Transmitted Diseases Reporting at Government Social Hygiene Service

2nd Quarter (April - June) 1999

	<u>This Quarter</u>	<u>Same Quarter Last Year</u>
Syphilis		
<i>Primary</i>	84	58
<i>Secondary</i>	20	18
<i>Early latent</i>	91	86
<i>Late latent</i>	128	88
<i>Late (cardiovascular/neuro)</i>	1	0
<i>Congenital (early)</i>	0	0
<i>Congenital (late)</i>	1	0
Total	325	250
 Gonorrhoea	 778	 708
Non-gonococcal urethritis (Male)	2001	1639
Non-specific genital infection (Female)	1733	1281
Genital wart	1117	840
Herpes genitalis	295	292
Pediculosis pubis/Scabies	202	221
Trichomonas/Monilia vaginitis	891	805
Molluscum contagiosum	84	62
Genital ulcer	128	157
Chancroid/Lymphogranuloma venereum	0	3
Others	22	11
 Total	 7576	 6269

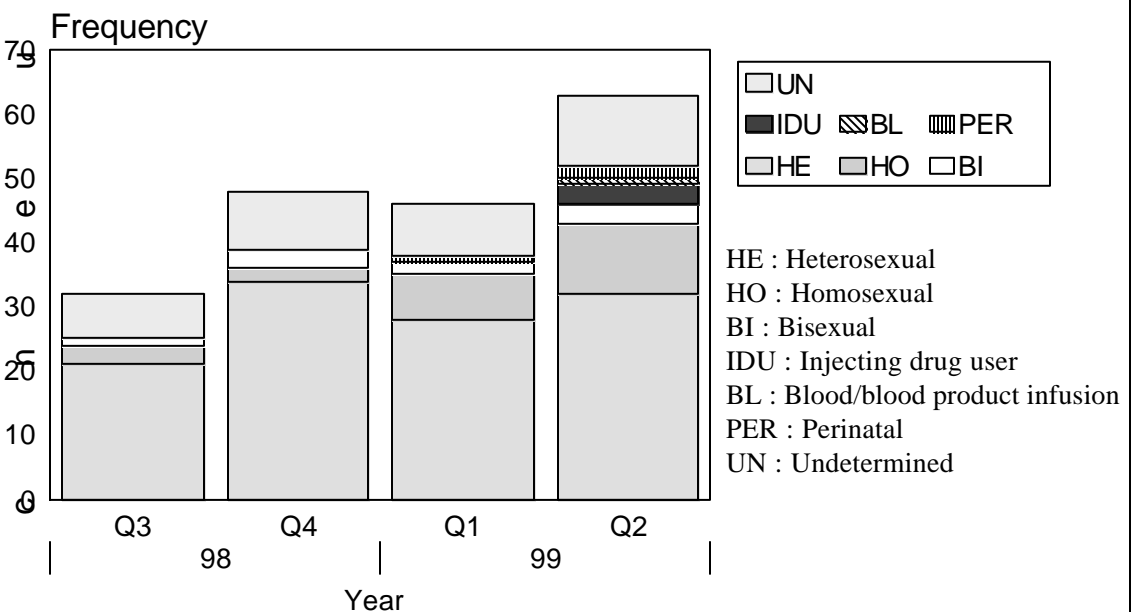
Hong Kong HIV/AIDS Voluntary Reporting

(2nd Quarter, 1999) Hong Kong



Hong Kong HIV Voluntary Reporting

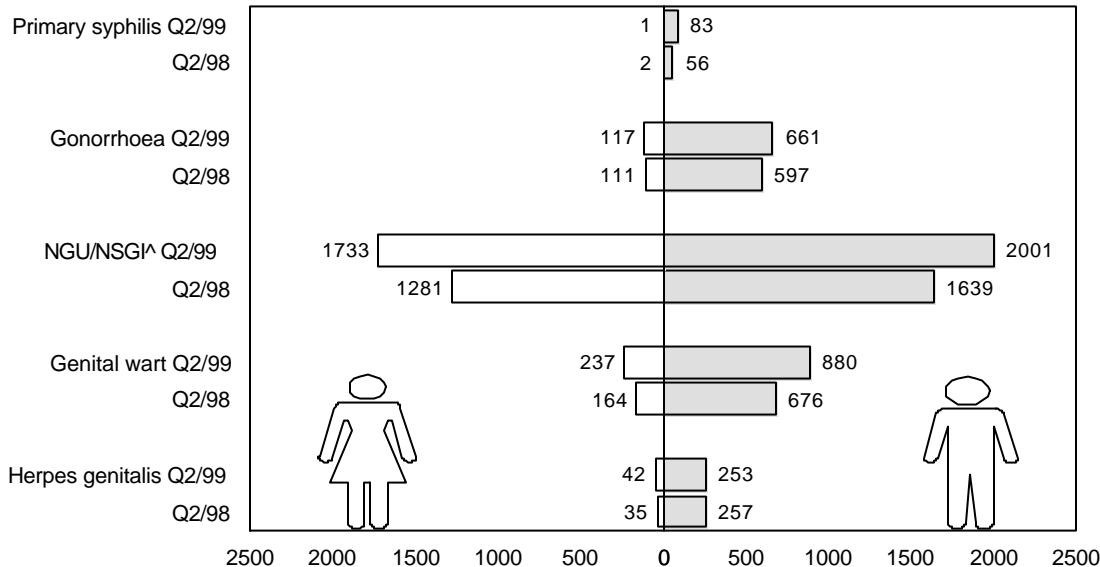
By Exposure Category (2nd Quarter, 1999) Hong Kong



Sexually Transmitted Diseases Reporting at GSHS*

By sex (2nd Quarter, 1999) Hong Kong

No. of cases

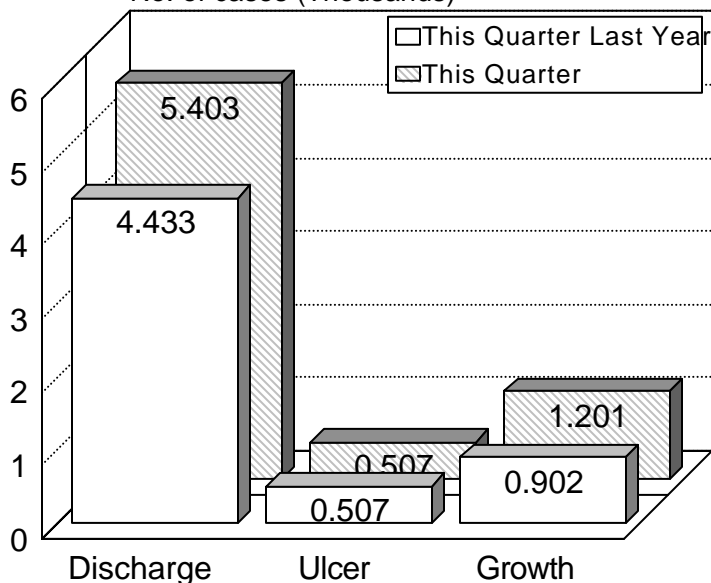


* GSHS : Government Social Hygiene Service ^ NGU/NSGI : Non-gonococcal urethritis/Non-specific genital infection

Syndrome Presentations of STD in GSHS*

(2nd Quarter, 1999) Hong Kong

No. of cases (Thousands)

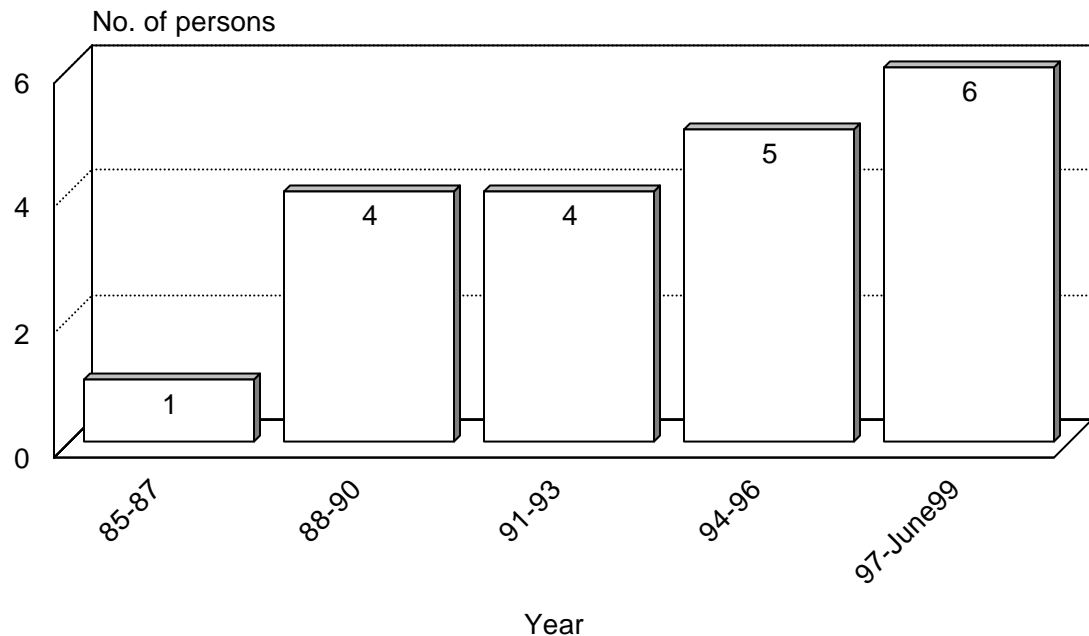


Diseases included under the various syndrome:

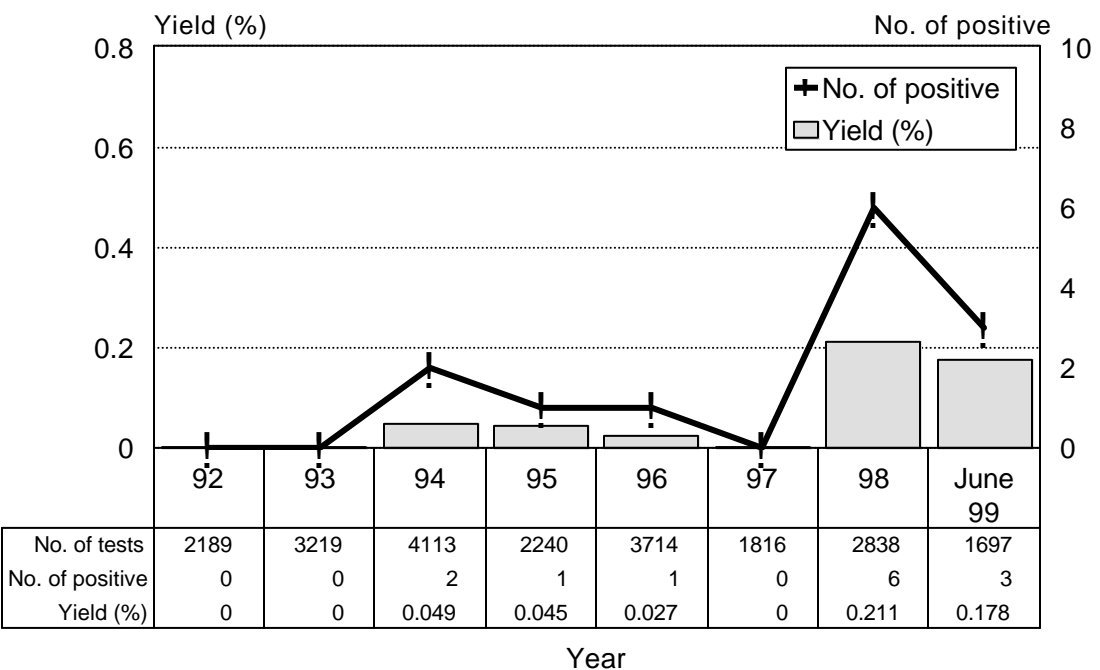
- Discharge: Gonorrhoea
Non-gonococcal urethritis
Non-specific genital infection
Trichomonas/Monilia vaginitis
- Ulcer: Chancroid
Primary syphilis
Herpes genitalis
Non-specific genital ulcer
- Growth: Genital wart
Molluscum contagiosum

* GSHS : Government Social Hygiene Service

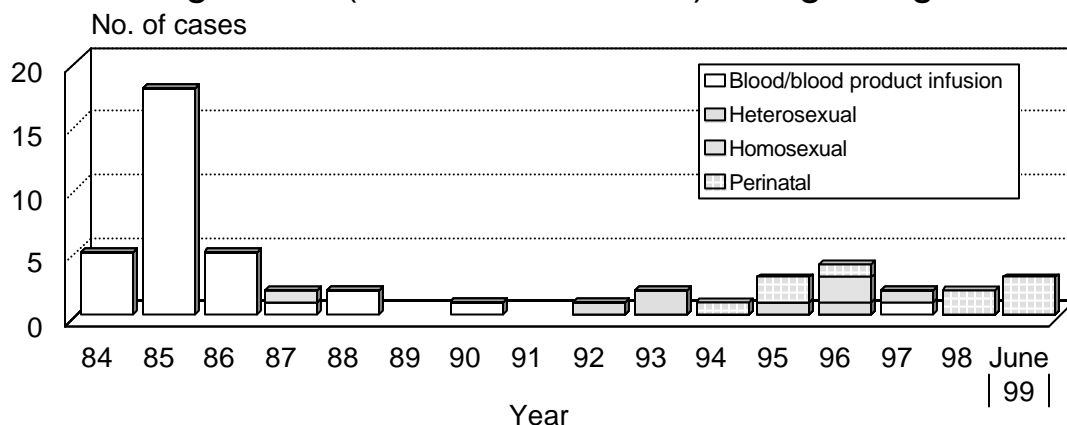
Reported HIV Infection through Injecting Drug Use (1985 - June 1999) Hong Kong



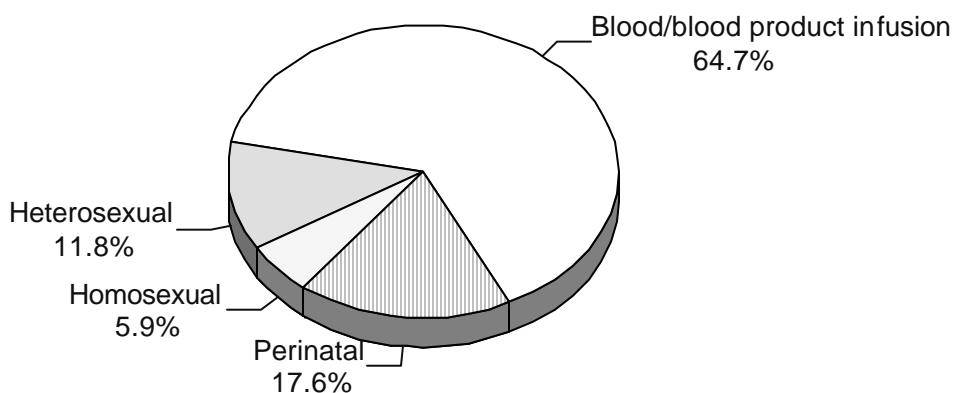
Unlinked Anonymous Screening at Methadone Clinic (1992 - June 1999) Hong Kong



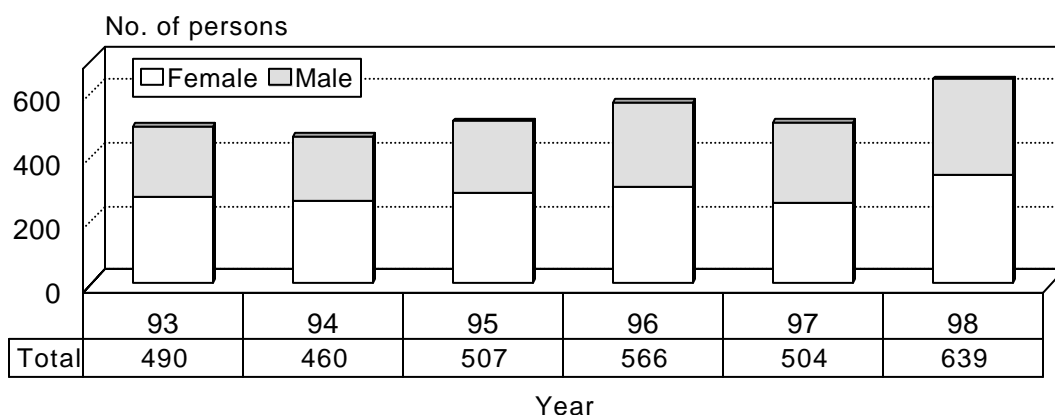
Annual Route of transmission of HIV Infection in Youth Age≤19 (1984 - June 1999) Hong Kong



Cumulative Route of transmission of HIV Infection in Youth Age≤19 (1984 - June 1999) Hong Kong



Top Five Major STDs* seen at Govt Social Hygiene Clinics STDs in Teenager (1993 - 1998) Hong Kong



* Top Five Major STDs : Syphilis, Gonorrhoea, Herpes genitalia, genital wart, NSG/NGU

Listen, Learn, Live!

The 1999 World AIDS Campaign - Listen, Learn, Live! - Focuses on communication with children and young people. Our children and young people continue to be infected and at risk of HIV. Worldwide, over half of all people who become infected with HIV are under the age of 25. Every minute, six young people under 25 are infected with HIV. Last year alone, over 3 million children and young people were infected with HIV.

Youth is identified as one of the vulnerable groups for focused prevention in the AIDS Strategies for Hong Kong 1999-2001. As reflected from a number of youth sexuality studies in Hong Kong, the sexual ideology, attitude and practices of young people nowadays are much more open, liberal and permissive than the past.

High-risk sexual behaviours are common that enhance the vulnerability of youth to HIV infection. There is a trend that the young people are getting sexually active at an earlier age especially among marginalised youth. Multiple sexual partners are more common among the youth in Hong Kong as compared with the past. Unprotected vaginal sex is the common sexual practice among those youth who have sexual experience before. Besides, more youth have engaged in commercial sex than before.

The incidence of STD is a useful surrogate marker of high-risk behaviour. In the past five years, 2.9 - 3.6% of all reported cases in the government social hygiene clinic was at or below the age of 19. The top five major STDs include syphilis, gonorrhoea, herpes genitalia, genital wart and NSGI/NGU.

There has also been a significant number of adolescent drug addicts, as indicated in the Government Central Registry of Drug Abuse. Of the 3367 new cases registered in 1998, 42.2% was under the age of 21. The types of drugs abused for 1183 were reported. Of these, 39% abused heroin. Among all the newly reported cases, one fifth (19.4%) was injecting drug users. Among the patients first attending methadone clinics, there is an increasing trend of newly registered cases aged below 19. In 1990, only 6.6% was aged under 19 whereas in 1997, the figure rose to 32.5%.

HIV infection in the young people has been less common than adult population. At the end of June 1999, there are fifty-one HIV infected persons aged at or below 19 at the time of reporting. Thirty-three got infected through infusion of contaminated blood or blood products. Nine of them were through perinatal transmission. Nine acquired the infection through sexual contact (6 heterosexual and 3 homosexual contact). Seventeen had developed AIDS and 14 was male and 3 was female. None of them acquired HIV infection through needle sharing. The epidemiological data showed relatively few HIV infections in the adolescents which is in contrast to the prevalence of high risk sexual and drug taking behaviours.

One reason for the discrepancy is that HIV has not yet taken root in the adolescent community. The existing low HIV prevalence in young people should, however, not be a reason for complacency. Counselling, support services, targeted programmes voluntary HIV antibody testing in the setting of youth should be strengthened.

Hong Kong STD/AIDS Update can be viewed via the Internet at :

<http://www.info.gov.hk/aids>.

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