

Hong Kong STD/AIDS Update

- a quarterly surveillance report

Department of Health

Vol.6 No.2 April 2000

Editorial

Forty HIV and 22 AIDS cases were reported in Hong Kong from January to March 2000. The male to female ratio is 4 to 1 in this quarter. The major route of transmission was sexual which constituted 85% with predominant heterosexual transmission (75%). Having a progressing increase in reported HIV infection among injecting drug users (IDU), this quarter saw another new case.

In Hong Kong, the first case of HIV-infected drug user was reported in 1985. As at the end of March 2000, there were 24 HIV cases due to injecting drug use. This corresponded to about 1.7% of the cumulative HIV infections. Nineteen drug users were male and 13 were ethnic Chinese. Six patients had progressed to AIDS and three were known to have died. Although the absolute number is still small, it is the persistent trend of IDU being reported that need attention.

According to the Central Registry of Drug Abuse (CRDA) 1999 report compiled by the Narcotics Division, among the newly reported drug abusers, 18.7% used injection method for administration of heroin in the first six months in 1999. The figure was 52.5% if all the reported cases were counted.

The world has witnessed many examples of rapid spread of HIV among injecting drug users. The importance and linkages of drug abuse and HIV can be illustrated by Mainland China where drug use has increased significantly in Mainland China in recent years. In 1990, there were about 600 counties with reported drug use and some 78,000 registered drug users. In 1998, the number of counties with reported drug use increased to 2033, while the number of registered drug users increased to some 596,000. In conjunction with increasing drug use, HIV infection among IDUs increased dramatically. It was reported that sharing of injection equipment among IDUs is accounting for 70% of all reported HIV infections in China. It is even worrying in the context of increasing cross border travel among Hong Kong residents to Mainland China. According to a methadone clinic survey done in December 1999, 11.4% of clinic attendees admitted past history of injecting illicit drug in Mainland China. There is a potential risk of HIV spread if people share injection equipment or practise other high risk behaviour such as unsafe sex.

The increasing trend of HIV infections due to injecting drug use, coupled with the high human mobility, is definitely a cause for concern. Besides, among all the 24 HIV infected IDU reported cases, only 16.7% were referred from drug treatment and rehabilitation services. It is quite low as compared to other institutions. There should be ample opportunities for HIV blood testing, counseling and health education. It is important to involve more drug agencies as partners on the combat against HIV/AIDS before the HIV takes root in the local drug using population.

<u>Contents</u>	<u>Page</u>
1. Editorial	1
2. Tables & graphs : Quarterly statistics and Trend of HIV/AIDS & STD	2-7
3. Mother to Child Transmission of HIV	8

Editorial Board: Dr. CN Chan, Dr. KM Ho, Ms. EYY Lai, Dr. KH Wong

Reported HIV/AIDS Quarterly Statistics

1st Quarter (January - March) 2000

	This Quarter		Cumulative	
	<u>HIV</u>	<u>AIDS</u>	<u>HIV</u>	<u>AIDS</u>
Sex				
Male	32	21	1170	407
Female	8	1	229	48
Ethnicity/race				
Chinese	34	21	974	350
Non-Chinese	6	1	425	105
<i>Asian</i>	4	1	193	51
<i>White</i>	0	0	171	51
<i>Black</i>	0	0	13	2
<i>Others</i>	2	0	48	1
Age at diagnosis				
Adult	40	22	1368	447
Child (age 13 or less)	0	0	31	8
Exposure category				
Heterosexual	30	18	792	283
Homosexual	3	0	282	91
Bisexual	1	1	73	26
Injecting drug user	1	1	24	7
Blood/blood product infusion	0	0	68	18
Perinatal	0	0	10	4
Undetermined	5	2	150	26
Total	40	22	1399	455

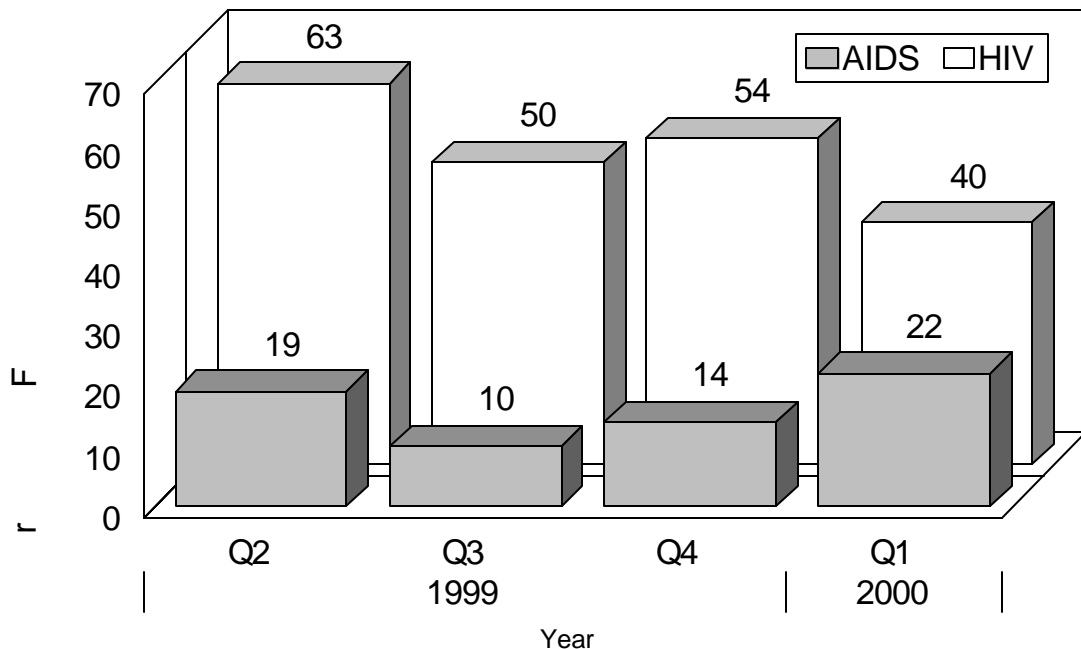
Sexually Transmitted Diseases Reporting at Government Social Hygiene Service

1st Quarter (January - March) 2000

	<u>This Quarter</u>	<u>Same Quarter Last Year</u>
Syphilis		
<i>Primary</i>	69	68
<i>Secondary</i>	12	14
<i>Early latent</i>	58	97
<i>Late latent</i>	75	121
<i>Late (cardiovascular/neuro)</i>	0	0
<i>Congenital (early)</i>	0	0
<i>Congenital (late)</i>	0	0
Total	214	300
Gonorrhoea	884	745
Non-gonococcal urethritis (Male)	1789	1701
Non-specific genital infection (Female)	1573	1500
Genital wart	794	900
Herpes genitalis	296	343
Pediculosis pubis	107	107
Trichomonas	181	183
Genital ulcer	165	124
Chancroid/Lymphogranuloma venereum	1	2
Others	546	841
Total	6550	6746

Hong Kong HIV/AIDS Voluntary Reporting

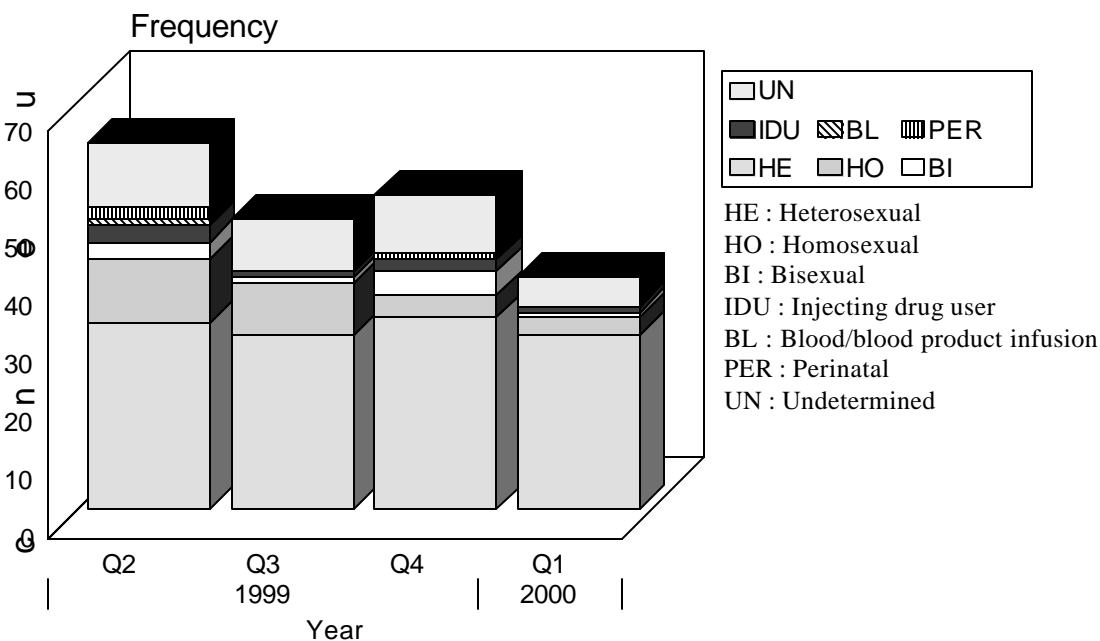
(1st Quarter, 2000) Hong Kong



e

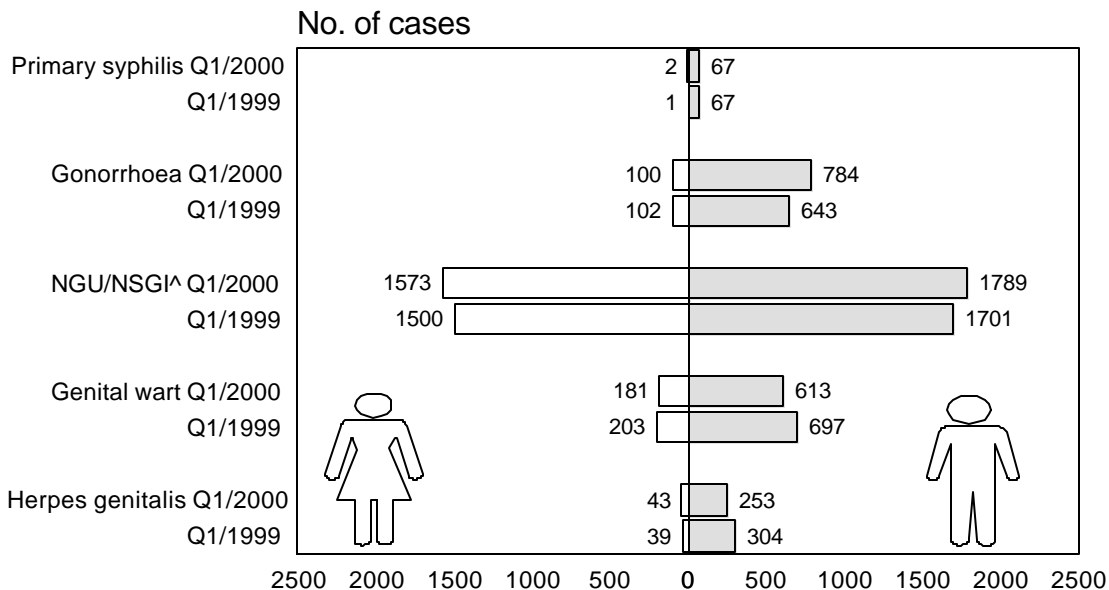
Hong Kong HIV Voluntary Reporting

By Exposure Category (1st Quarter, 2000) Hong Kong



Sexually Transmitted Diseases Reporting at GSHS*

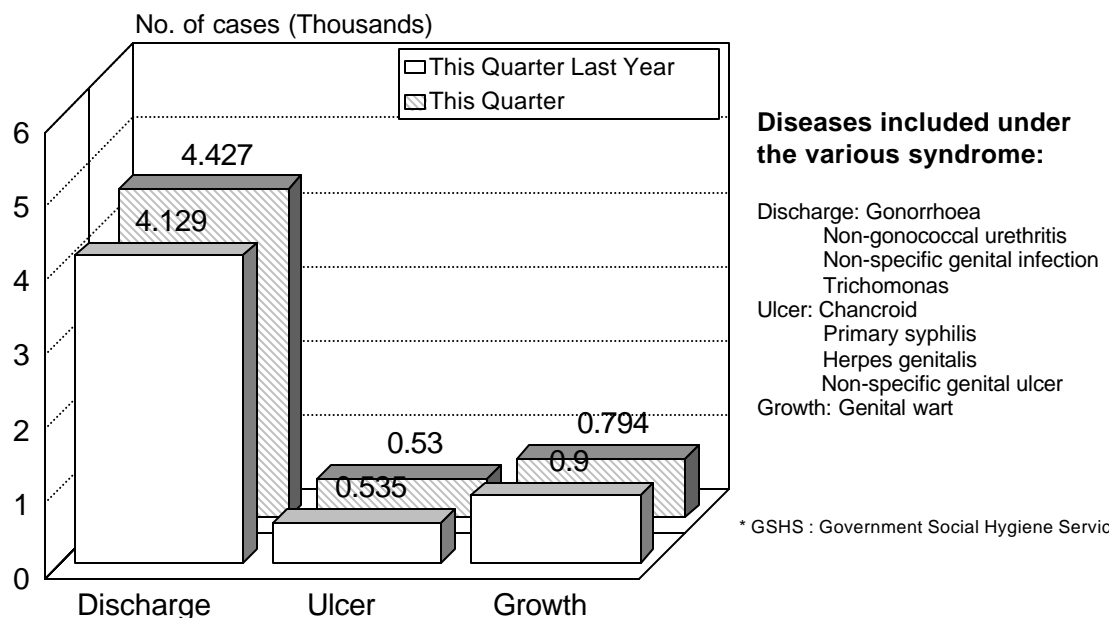
By sex (1st Quarter, 2000) Hong Kong



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

Syndrome Presentations of STD in GSHS*

(1st Quarter, 2000) Hong Kong

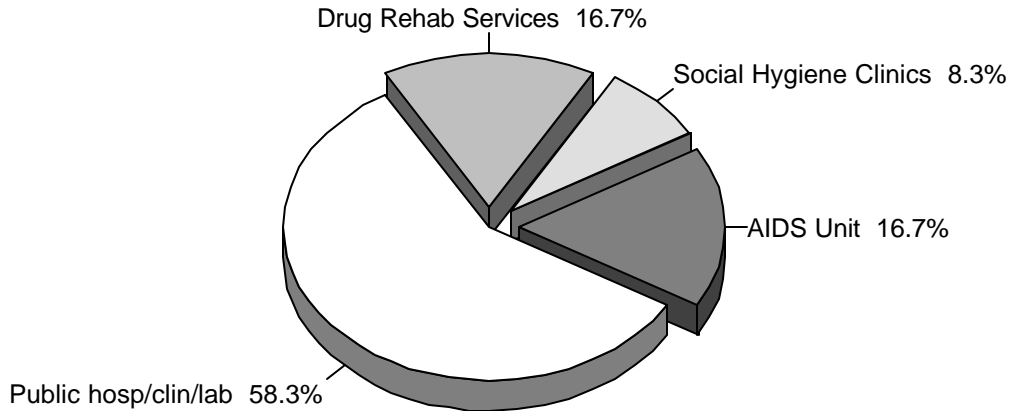


* GSHS : Government Social Hygiene Service

Please note that from this quarter onwards, Monilia vaginitis and Molluscum contagiosum will not be included in this graph representation.

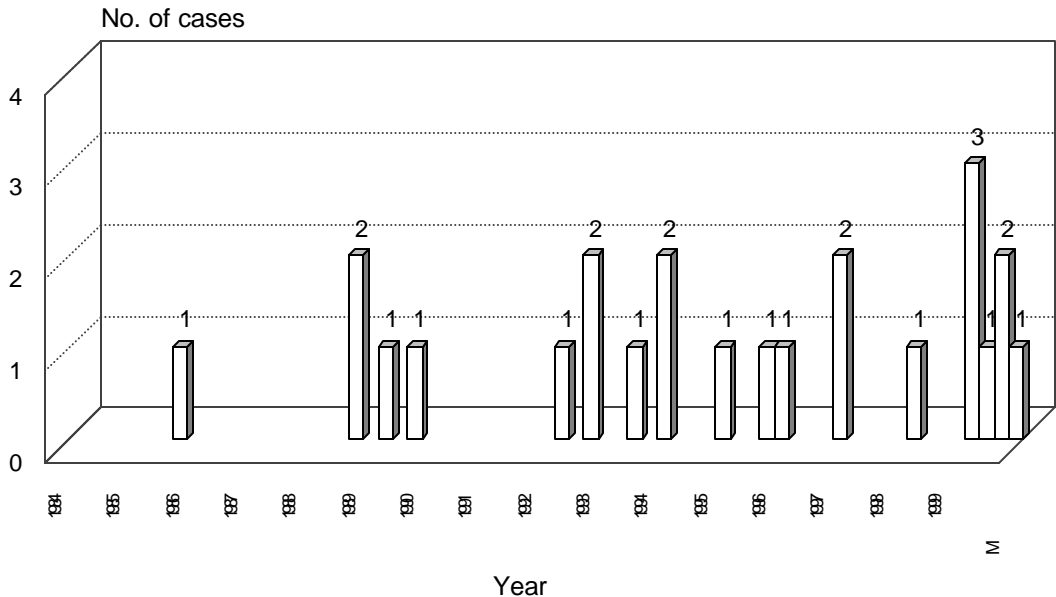
Source of Referral of HIV Infected Injecting Drug Users

1984 - March 2000, Hong Kong (N=24)

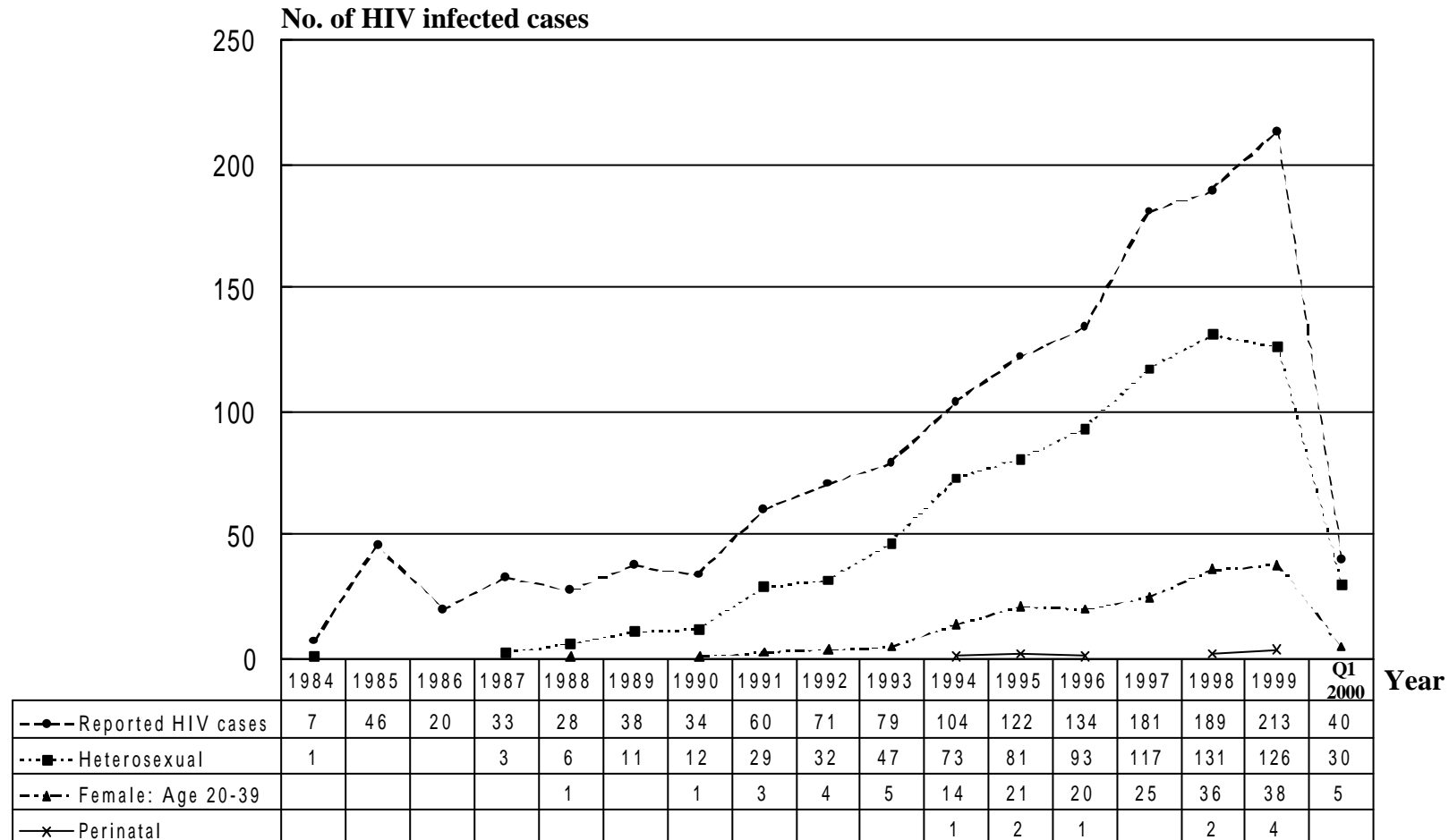


Quarterly HIV Infection through Injecting Drug Use

1984 - March 2000, Hong Kong (N=24)



Trend of Reported HIV Cases through Heterosexual Transmission, MTCT and in Women of Reproductive Age



Mother to Child Transmission of HIV

According to UNAIDS, nearly 3 million children's lives have been claimed in AIDS epidemic, and another 1 million children are living with HIV infection today. Observations from our local surveys and surveillance have alerted us the importance of vertical transmission of HIV and its impact on health of our next generation in Hong Kong. There were a total of 10 children (the number of cases were record high at 4 in 1999) reported to have acquired HIV infection by this route since the establishment of the local voluntary report system. Unlinked anonymous screening of cord blood samples in 1998 and 1999 were stable at 0.033 and 0.032% respectively. A study conducted in Kwong Wah Hospital in 1999 over a period of less than a year involving more than 5,000 pregnant women attending her antenatal clinic showed a disease prevalence of 0.055%.

A retrospective observational survey involving the medical clinic of Special Preventive Program and Queen Elizabeth Hospital recorded that there were 41 pregnancies arising from women with HIV infection with 26 babies born over the past 15 years. Fourteen (53.9%) babies were born from mothers whose HIV status were only known after delivery. Eight out of these 14 babies (57.1%) were confirmed infected by HIV. In fact most of the mothers had their HIV status checked as their babies presented with symptomatic HIV infection. In contrast, for the group of babies whose mothers' HIV status were known before delivery, there were only 2 (out of 12) confirmed positive for HIV infection. It was conceivable as there was good evidence to show that zidovudine therapy, elective Caesarean section, cautious obstetrical care and formula feeding can prevent HIV infection (from 40% to less than 5%). The health of the babies might be undermined as they were not offered the relevant preventive measures short of not knowing the HIV status of their mothers.

Many countries including that of Western world and less affluent country like Malaysia have implemented voluntary universal antenatal HIV screening together with zidovudine prophylactic treatment to prevent mother to child transmission of HIV for some years. In 1999, the UK Health Department made a pledge of an HIV testing uptake of 90% for pregnant women by the end of 2002 by introducing national wide voluntary universal antenatal testing. A local strategy has to be in place in line with the latest scientific development to minimize perinatal HIV transmission.

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

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

Correspondence to : *Special Preventive Programme, Department of Health
c/o Red Ribbon Centre, 2/F Wang Tau Hom Jockey Club Clinic,
200 Junction Road East, Kowloon.
Tel : (852) 2304 6268 Fax : (852) 2338 0534
E-mail: aids@health.gcn.gov.hk*