

HIV/AIDS EPIDEMIOLOGY HIGHLIGHT
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CONTINUED HIGH-RISK BEHAVIORS AMONG PERSONS WITH HIV INFECTION
EVIDENCED BY SUBSEQUENT STD INFECTION

Introduction

HIV prevention efforts are directed not only toward the uninfected, to help them avoid behaviors that might expose them to the HIV virus, but also toward those who are currently HIV-infected, to help them avoid transmitting the virus and to avoid the acquisition of additional infections. Acquiring a subsequent STD after HIV infection suggests the continued practice of high-risk behaviors. To learn more about persons with HIV infection who continue to engage in high-risk behaviors, a match between ODH's HIV surveillance data and STD (sexually transmitted disease) surveillance data was conducted. The match was performed by the HIV Surveillance program to maintain confidentiality of HIV information. Information on HIV-infected individuals with a subsequent STD was compared to those without a subsequent STD to determine risk factors for acquiring STD infections. It should be recognized that individuals without a subsequent STD might also be engaging in high-risk behaviors.

Findings

There were 2684 matches among living individuals in the two databases. Of these, 181 had an STD after their HIV diagnosis. Among these 181 individuals, 31 (17%) had more than one reported STD diagnoses subsequent to HIV infection. On average, the subsequent STD diagnosis was 2.7 years after HIV diagnoses. At the time of this analysis, those with a subsequent STD had been infected with HIV for an average of 5.3 years, while those without a subsequent STD had been infected with HIV for an average of 3.9 years.

For HIV positive individuals with and without a subsequent STD, the majority of cases were male. This follows the distribution of persons living with HIV/AIDS in which males account for 81% of reported cases. While females comprised 22% of those without a subsequent STD, they made up 35% of those with a subsequent infection. This higher proportion among females with a subsequent STD may partially be the effect of chlamydia screening among women that is not being conducted among men.

The racial disparity was greater among those with subsequent STDs than among those without. While 49% of those without a subsequent STD were African American and 35% were white, among those with a subsequent STD, 74% were African American and 17% were white. In part, this reflects the disproportionate impact of both HIV and STDs on Ohio's racial minority populations. The prevalence of HIV in African Americans in Ohio is six times the prevalence in whites, and STD incidence rates among African Americans are 12 to 36 times the rates in white Ohioans.

HIV-infected individuals with a subsequent STD were concentrated in younger age groups than those not having a subsequent STD. Nearly 8% of those with a subsequent STD were under age 20 at HIV diagnoses, 84.5% were age 20-39, and 7.8% were age 40 and older, while among those without a subsequent STD, 2.6% were under age 20 at HIV diagnoses, 70% were age 25-44, and 26.5% were age 40 and older.

HIV-Infected Individuals with and without a Subsequent STD

Demographics	Subsequent STD		No Subsequent STD	
	#	%	#	%
Sex				
Male	117	64.6%	1950	77.9%
Female	64	35.4%	550	22.0%
Unknown	0		3	
Race				
White	30	16.6%	880	35.2%
African American	134	74.0%	1228	49.1%
Hispanic	5	2.8%	110	4.4%
Other	0		17	0.7%
Unknown	12	6.6%	268	10.7%
Age at HIV Diagnosis				
10 - 14	3	1.7%	11	0.4%
15 - 19	11	6.1%	54	2.2%
20 - 24	37	20.4%	244	9.7%
25 - 29	46	25.4%	459	18.3%
30 - 34	43	23.8%	543	21.7%
35 - 39	27	14.9%	508	20.3%
40 - 44	10	5.5%	322	12.9%
45 - 54	3	1.7%	276	11.0%
55 - 64	1	0.6%	66	2.6%
65+	0		20	0.8%
Total	181		2503	

Notes:

- (1) Excludes morbidity of individuals who are deceased.
- (2) STDs include chlamydia, gonorrhea, syphilis, NGU, MPC, PID, trichomoniasis,
- (3) Small numbers are unstable and should be interpreted with caution.

Conclusion

This study shows that some individuals with HIV are continuing to engage in high-risk sexual behavior after being diagnosed with HIV infection as evidenced by a subsequent STD. Subsequent STDs acquired after HIV diagnoses were largely concentrated among minorities and persons in younger age groups. Findings from other studies suggest that co-infection with another sexually transmitted infection increases the likelihood of an HIV infected individual transmitting HIV to their sexual partner. The data presented above, along with these research findings, emphasize the importance of effective behavioral counseling and STD screening services for those who are HIV-infected, to maintain their health and to minimize the risk of HIV transmission.

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