

# HIV/AIDS Semi-Annual Report June 2008

Kentucky Cabinet for Health and Family Services  
Department for Public Health  
HIV/AIDS Branch



**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR PUBLIC HEALTH**

**Steven L. Beshear**  
Governor

275 East Main Street, HS1GWA  
Frankfort, KY 40621  
(502) 564-3970  
Fax: (502) 564-9377  
[www.chfs.ky.gov](http://www.chfs.ky.gov)

**Janie Miller**  
Secretary

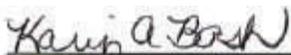
Dear Reader:

Enclosed you will find the June 2008 issue of the HIV/AIDS Semi-Annual Report for Kentucky. As of June 30, 2008, there have been 4,890 AIDS cases reported in Kentucky, of which 2,915 are presumed to be currently living with AIDS.

There have been a total of 1,234 HIV infections diagnosed and reported between January 1, 2005 and June 30, 2008. The HIV/AIDS Surveillance Program is continuing to evaluate HIV cases previously reported under the old code-based identification system. Therefore, estimates of those living with HIV infection in Kentucky are not available. At this time, data presented on HIV infections is limited to a small section near the end of the report. Over time, we will continue to increase the amount of HIV data in the report. Please carefully read the information about the data source and technical notes on pages 2 and 3 for further information about interpreting the data presented.

The data presented in this report are available on our website at <http://chfs.ky.gov/dph/epi/HIVAIDS/surveillance.htm>. Only the December edition of the Semi-Annual Report will now be available in hard copy. However, you can receive e-mail updates when new HIV/AIDS statistical reports are released online. For a subscription to receive these e-mail updates, please send a blank e-mail to the following address: [subscribe-dph-semiannualreport@listserv.ky.gov](mailto:subscribe-dph-semiannualreport@listserv.ky.gov).

Sincerely,

  
\_\_\_\_\_  
Karin Bosh, Ph.D.  
HIV/AIDS Epidemiologist

## HIV/AIDS Semi-Annual Report Production:

Kentucky HIV/AIDS Branch  
Division of Epidemiology and Health Planning  
Department for Public Health  
Cabinet for Health and Family Services

**Address:** Kentucky Department for Public Health  
HIV/AIDS Branch  
275 East Main Street, HS2E-C  
Frankfort, KY 40621

**Phone:** (502) 564-6539 or (800) 420-7431  
(866) 510-0008 (Case Reporting only)  
(866) 510-0005 (KADAP Clients only)

**Fax:** (502) 564-9865

**Website:** <http://chfs.ky.gov/dph/epi/hivaids.htm>

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### HIV/AIDS Program Staff

Branch Manager: Sigga Jagne  
Administrative Assistant: Kay Loftus

#### For more information:

#### Email Address

- ◆ **HIV/AIDS Services Grant Management**—David E. Clark DavidE.Clark@ky.gov
- ◆ **Care Coordinator Program**—Vicki Johnson Vicki.Johnson@ky.gov
- ◆ **Kentucky AIDS Drug Assistance Program (KADAP)**—Trista Chapman Trista.Chapman@ky.gov
- ◆ **HIV/AIDS Health Insurance Continuation Program**—Merinda Brown Merinda.Brown@ky.gov
- ◆ **HIV/AIDS Case Reporting**—Medina Tipton Medina.Tipton@ky.gov
- ◆ **HIV/AIDS Statistics**—Julie Nakayima Peace.Nakayima@ky.gov
- ◆ **HIV Prevention Grant Management**—Stephen Ulrich Stephen.Ulrich@ky.gov
- ◆ **HIV Prevention Initiatives**
  - ◆ **MSM Initiative**—Tommy Collins Tommy.Collins@ky.gov
  - ◆ **Minority Initiative**—Beverly Mitchell Beverly.Mitchell@ky.gov
  - ◆ **Injection Drug Users Initiative**—Michael Hambrick Michael.Hambrick@ky.gov
- ◆ **Kentucky HIV/AIDS Planning and Advisory Council**—Kambe Lattimore Kambe.Lattimore@ky.gov
- ◆ **HIV/AIDS Continuing Professional Education Program**—Greg Lee Greg.Lee@ky.gov
- ◆ **For media inquiries, please call (502) 564-6786 for assistance**

## Data Source

The HIV/AIDS Semi-Annual Report presents data regarding AIDS cases diagnosed and reported to the Kentucky Department for Public Health HIV/AIDS Surveillance Program through June 30, 2008. In this edition, data regarding HIV cases diagnosed and reported between January 1, 2005 and June 30, 2008 will be presented. The data only include those persons who have been confidentially tested and reported to the HIV/AIDS Surveillance Program. No adjustments are made to the data presented to account for undiagnosed, anonymously tested, or unreported cases.

## HIV/AIDS Reporting Requirements

According to state regulation 902 KAR 2:020, Section 7, health professionals licensed under KRS chapters 311 through 314, health facilities licensed under KRS chapter 216B, and laboratories licensed under KRS chapter 333 are required to report HIV and AIDS cases to the Kentucky Department for Public Health or the Louisville Metro Department for Public Health and Wellness within five business days of diagnosis.

Cases residing in the Kentucky counties of Bullitt, Henry, Jefferson, Oldham, Shelby, Spencer, and Trimble counties are reported to the Surveillance Nurse Consultant at the Louisville Metro Department for Public Health and Wellness at 502-574-6574. All other cases are reported to the Kentucky Department for Public Health HIV/AIDS Surveillance Program at 866-510-0008. Case information from both sites is combined at the Kentucky Department for Public Health to produce this report. Additional case reporting information can be found on the Kentucky HIV/AIDS Branch website: <http://chfs.ky.gov/dph/epi/HIVAIDS/surveillance.htm>.

## Key Terminology

Date of Report: The date HIV infection or AIDS diagnosis is reported to the Kentucky HIV/AIDS Surveillance Program.

Date of Diagnosis: The date HIV infection or AIDS is diagnosed.

HIV (Human Immunodeficiency Virus): A retrovirus that infects the helper T cells of the immune system, resulting in immunodeficiency. HIV is diagnosed by a positive confirmatory antibody test or positive/detectable viral detection test.

AIDS (Acquired Immunodeficiency Syndrome): Advanced stage of HIV infection characterized by severe immune deficiency. Diagnosed by the presence of at least one of 26 opportunistic illnesses or a CD4 laboratory test less than 200 cells/ml of blood or 14% of the total white blood cells (lymphocytes).

Transmission Category: Classification used to summarize the risk factor most likely responsible for disease transmission. Each case is only included in a single transmission category.

- ◆ **Men Who Have Sex With Men (MSM)**: Men who report having sexual contact with other men.
- ◆ **Injection Drug Use (IDU)**: Individuals that report injecting nonprescription drugs.
- ◆ **MSM/IDU**: Men who report having sex with other men and also inject nonprescription drugs.
- ◆ **High-Risk Heterosexual Contact (HRH)**: A person reporting heterosexual relations with an injection drug user, a bisexual male (females only), a person with hemophilia/coagulation disorder, or a person with documented HIV infection.
- ◆ **Hemophilia**: Individuals receiving clotting factor for hemophilia/coagulation disorder.
- ◆ **Blood Transfusion/Organ Transplant**: Individuals who received blood transfusions or organ transplants. Individuals with a transfusion date listed after March 1985 are considered cases of public health importance and are followed to verify the mode of transmission.
- ◆ **Perinatal**: Individuals born to a mother with HIV or a mother with an exposure history listed in the transmission category hierarchy.
- ◆ **Undetermined/No Identified Risk (NIR)**: Individuals reporting no exposure history to HIV through any of the modes listed in the transmission category hierarchy.

## Technical Notes

1. Reporting Delays- Delays exist between the time HIV infection is diagnosed and the time the infection is reported to the HIV/AIDS Surveillance Program. As a result of reporting delays, case numbers for the most recent years of diagnosis may not be complete and therefore the data from 2007 and 2008 are considered provisional and will not be presented in the analysis of trends. The data presented in this report have not been adjusted for reporting delay.
2. Place of Residence- Data are presented based on the residence at the time HIV infection was diagnosed. Therefore, no data are available to determine the number of people who are currently living with HIV infection in Kentucky, but were originally diagnosed in another state. Data presented on living cases reflect those originally diagnosed in Kentucky that are still presumed to be living, regardless of their current residence.
3. Vital Status- Cases are presumed to be alive unless the HIV/AIDS Surveillance Program has received notification of death. Current vital status information for cases is ascertained through routine site visits with major reporting sites, reports of death from providers, reports of death from other states' surveillance programs, and routine matches with Kentucky death certificates.
4. Transmission Category- Despite possible existence of multiple methods through which HIV was transmitted, cases are assigned a single most likely transmission category based on a hierarchy developed by the Centers for Disease Control and Prevention (CDC). See the "Key Terminology" list on page 2 for a description of the transmission categories. A limitation of the dataset is the large number of cases reported with an undetermined transmission category. Currently, surveillance data is collected through hard copy case reports, telephone reports and chart reviews, which sometimes results in missing information. Enhanced surveillance activities have been implemented to attempt to resolve case reports with missing risk factor information.
5. Routine Interstate Duplicate Review (RIDR)- Case duplication between states can occur and has become more of an issue due to the mobility of our society. To help respond to potential duplication problems, the CDC initiated the Interstate Duplication Evaluation Project (IDEP), now called Routine Interstate Duplicate Review (RIDR), in 2004. RIDR compares patient records throughout the nation in order to identify duplicate cases. The states with duplicate cases contact one another to compare patient profiles in order to determine the state to which the case belongs, based on residence during the earliest date of diagnosis. Because of this process, the cumulative number of cases within Kentucky may change, but the process has increased the accuracy of Kentucky's data by reducing the chance that a case has been counted more than once nationally.
6. Small Numbers- Data release limitations are set to ensure that the information cannot be used to inadvertently identify an individual. When the population size for the smallest unit of analysis presented is less than 1,000 and the cell size is less than or equal to five, the specific number will not be released. Information on any geographic region lower than the county level will not be released. Rates will not be released when the numerator is less than 10 cases because of the low reliability of rates based on a small number of cases.
7. Difference between HIV Infection, HIV without AIDS, and concurrent diagnosis of HIV with AIDS- HIV infection includes all individuals diagnosed with the HIV virus regardless of the stage of disease progression. The data are presented based on the date of the first diagnosis reported to the HIV/AIDS Surveillance Program. HIV without AIDS includes individuals that were not diagnosed with AIDS during the same calendar month as the initial HIV diagnosis. Concurrent diagnosis with AIDS includes those newly diagnosed with HIV and AIDS during the same calendar month. See "Key Terminology" on page 2 for a description of how HIV and AIDS are diagnosed.

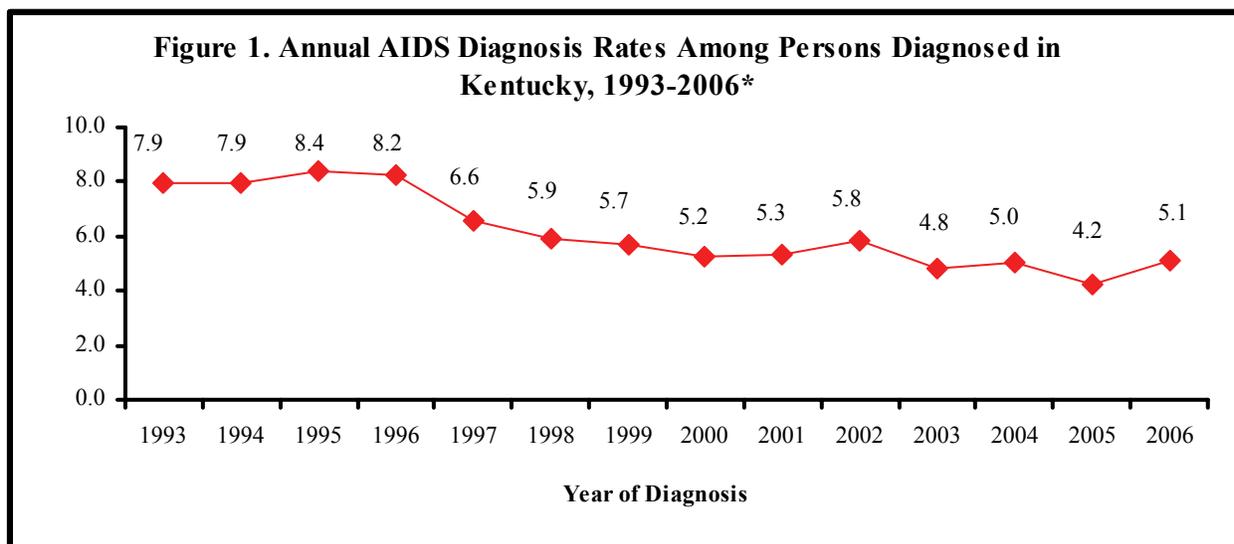
## AIDS Cases in Kentucky

As of June 30, 2008, there have been a total of 4,890 AIDS cases reported in Kentucky to the Department for Public Health’s HIV/AIDS Surveillance Program since 1982. Of these reported cases, 2,915 are still presumed to be living. In 2007, there were 237 new AIDS cases diagnosed. As of June 30, 2008, 96 new AIDS cases have been diagnosed and reported to the Kentucky HIV/AIDS Surveillance Program for 2008 (Table 1). The annual AIDS diagnosis rate among persons in Kentucky shows a trend by year of diagnosis (Figure 1). The annual AIDS diagnosis rate has remained fairly steady from 2000 to 2006, with slight fluctuations in 2002 and 2005.

**Table 1. AIDS Cases by Year of Diagnosis**

Year	Year of Diagnosis
1993	303
1994	306
1995	327
1996	323
1997	259
1998	236
1999	229
2000	211
2001	216
2002	239
2003	198
2004	209
2005	177
2006	216
2007	237
2008*	96

\*Data reported through June 30, 2008



\*Data are current as of June 30, 2008. However, data for 2007 and 2008 are considered provisional due to reporting delays and are not presented in trend analysis.

## Annual AIDS Diagnosis Rate per 100,000<sup>(1)</sup> A Comparison of Kentucky to Other States, 2006

Table 4. Annual AIDS Diagnosis Rate by State

Rank	Area of Residence	Rate	Rank	Area of Residence	Rate
1	District of Columbia	146.7	26	Oregon	7.6
2	Maryland	29.0	27	Hawaii	7.2
3	New York	28.5	28	Colorado	6.8
4	Florida	27.3	29	Ohio	6.7
5	Louisiana	19.2	30	Nebraska	6.7
6	Georgia	17.1	31	Michigan	6.7
7	South Carolina	16.3	32	Washington	6.1
8	Pennsylvania	15.2	33	Oklahoma	5.7
9	North Carolina	13.9	34	Alaska	5.7
10	Delaware	13.6	35	Indiana	5.5
11	Texas	12.8	36	Maine	5.1
12	Mississippi	12.5	<b>37</b>	<b>Kentucky</b>	<b>4.9</b>
13	New Jersey	12.2	38	New Mexico	4.8
14	Connecticut	12.0	39	Kansas	4.3
15	Nevada	11.8	40	New Hampshire	4.2
16	Tennessee	11.3	41	Minnesota	4.1
17	California	10.9	42	Wisconsin	3.9
18	Illinois	10.8	43	West Virginia	3.7
19	Rhode Island	10.4	44	Vermont	2.9
20	Alabama	10.0	45	Iowa	2.9
21	Arkansas	9.0	46	South Dakota	2.3
22	Arizona	8.7	47	Utah	2.2
23	Massachusetts	8.3	48	Idaho	1.8
24	Missouri	8.0	49	Wyoming	1.6
25	Virginia	7.9	50	North Dakota	0.9
			51	Montana	0.7

(1) U.S. rates from Centers for Disease Control and Prevention. *HIV/AIDS Surveillance Report: HIV Infection and AIDS in the United States, 2006:18*

<b>United States AIDS Diagnosis Rate:</b>	<b>12.7</b>
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## Cumulative AIDS Statistics: Kentucky vs. The United States

**Table 2. Kentucky AIDS Cases Cumulative through June 30, 2008**

Characteristics	Total Cases	% of AIDS cases <sup>(1)</sup>
<b>SEX</b>		
Male (adult/adolescent)	4,100	84%
Female (adult/adolescent)	756	15%
Child (<13 yrs)	34	1%
<b>TOTAL</b>	<b>4,890</b>	<b>100%</b>
<b>AGE AT DIAGNOSIS</b>		
<13	34	1%
13-24	274	6%
25-44	3,567	73%
45-64	968	20%
65+	47	1%
<b>TOTAL</b>	<b>4,890</b>	<b>100%</b>
<b>RACE/ETHNICITY</b>		
White, Not Hispanic	3,173	65%
Black, Not Hispanic	1,535	31%
Hispanic	156	3%
Other/Unknown	26	1%
<b>TOTAL</b>	<b>4,890</b>	<b>100%</b>
<b>TRANSMISSION CATEGORY</b>		
MSM <sup>(2)</sup>	2,679	55%
IDU <sup>(3)</sup>	654	13%
MSM/IDU	279	6%
Heterosexual	756	15%
Perinatal	29	1%
Other/Undetermined <sup>(4)</sup>	493	10%
<b>TOTAL</b>	<b>4,890</b>	<b>101%</b>

(1) Percentages may not always total 100% due to rounding

(2) MSM=Men Having Sex With Men

(3) IDU=Injection Drug Use

(4) Includes hemophilia, blood transfusion, and risk not reported or not identified.

Kentucky's distribution of AIDS cases by age at diagnosis (Table 2) closely parallels that of the U.S. distribution (Table 3). However, compared to U.S. data, the percentage of cases who are white is greater in Kentucky. This could be due to the greater percentage of white persons in Kentucky's general population compared to the U.S. population. The percentages of AIDS cases among IDUs and Hispanics are lower than the national percentage.

**Table 3. Estimated United States AIDS Cases Cumulative through 2006<sup>(5)</sup>**

Characteristics	Total Cases <sup>(6)</sup>	% of AIDS cases <sup>(1)</sup>
<b>SEX</b>		
Male (adult/adolescent)	783,786	80%
Female (adult/adolescent)	189,566	19%
Child (<13 yrs)	9,144	1%
<b>TOTAL<sup>†</sup></b>	<b>982,496</b>	<b>100%</b>
<b>AGE AT DIAGNOSIS</b>		
<13	9,156	1%
13-24	42,929	4%
25-44	698,733	71%
45-64	216,607	22%
65+	15,074	2%
<b>TOTAL<sup>†</sup></b>	<b>982,499</b>	<b>100%</b>
<b>RACE/ETHNICITY</b>		
White, Not Hispanic	394,024	40%
Black, Not Hispanic	409,982	42%
Hispanic	161,505	17%
Other	11,296	1%
<b>TOTAL<sup>†</sup></b>	<b>976,807</b>	<b>100%</b>
<b>TRANSMISSION CATEGORY</b>		
MSM <sup>(2)</sup>	465,965	47%
IDU <sup>(3)</sup>	244,889	25%
MSM/IDU	68,516	7%
Heterosexual	173,493	18%
Perinatal	8,508	1%
Other/Undetermined	21,125	2%
<b>TOTAL<sup>†</sup></b>	<b>982,496</b>	<b>100%</b>

(5) U.S. cases from Centers for Disease Control and Prevention. *HIV/AIDS Surveillance Report: HIV Infection and AIDS in the United States*, 2006: 18.

(6) These numbers do not represent actual cases, rather they are point estimates which have been adjusted for reporting delay and for redistribution of cases originally reported with unknown risk.

† Totals among subpopulations may be different because values were calculated independently.

In addition, a greater percentage of Kentucky AIDS cases report their primary mode of exposure to be men having sex with men (MSM) (55%) as compared to U.S. AIDS cases (47%). The percentage with Other/Undetermined risk factors (10%) is higher than the national percentage (2%).

**Table 5. Cumulative and Living AIDS Cases By Area Development District (ADD) and County at Time of Diagnosis**

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS	ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>Barren River</b>	<b>171</b>	<b>88</b>	<b>Buffalo Trace</b>	<b>34</b>	<b>21</b>
Allen	11	7	Bracken	4	3
Barren	23	8	Fleming	5	3
Butler	1	1	Lewis	10	6
Edmonson	3	3	Mason	15	9
Hart	6	4	Robertson	0	0
Logan	19	11			
Metcalf	4	2	<b>Cumberland Valley</b>	<b>97</b>	<b>61</b>
Monroe	9	5	Bell	13	10
Simpson	8	4	Clay	19	16
Warren	87	43	Harlan	11	6
			Jackson	4	1
<b>Big Sandy</b>	<b>41</b>	<b>24</b>	Knox	7	4
Floyd	13	10	Laurel	21	13
Johnson	6	2	Rockcastle	4	2
Magoffin	2	1	Whitley	18	9
Martin	3	3			
Pike	17	8	<b>FIVCO</b>	<b>85</b>	<b>52</b>
			Boyd	52	36
<b>Blue grass</b>	<b>936</b>	<b>605</b>	Carter	11	6
Anderson	9	3	Elliott	3	2
Bourbon	11	6	Greenup	13	6
Boyle	18	15	Lawrence	6	2
Clark	20	14			
Estill	4	2	<b>Gateway</b>	<b>51</b>	<b>40</b>
Fayette	661	422	Bath	4	3
Franklin	50	30	Menifee	2	1
Garrard	6	5	Montgomery	15	15
Harrison	8	5	Morgan	20	12
Jessamine	25	16	Rowan	10	9
Lincoln	10	6			
Madison	41	26	<b>Green River</b>	<b>162</b>	<b>101</b>
Mercer	16	10	Daviess	82	51
Nicholas	1	1	Hancock	4	3
Powell	7	5	Henderson	42	30
Scott	28	22	McLean	3	1
Woodford	21	17	Ohio	10	6
			Union	16	8
			Webster	5	2

<sup>(1)</sup> Total cases both living and deceased

Note: Residence at diagnosis missing for 4 cases

Continued on page 8

**Table 5. Cumulative and Living AIDS Cases By Area Development District (ADD) and County at Time of Diagnosis continued**

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>Kentucky River</b>	<b>46</b>	<b>31</b>
Breathitt	4	4
Knott	1	0
Lee	6	5
Leslie	3	1
Letcher	16	10
Owsley	2	2
Perry	10	7
Wolfe	4	2

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>KIPDA/North Central</b>	<b>2274</b>	<b>1302</b>
Bullitt	15	9
Henry	11	5
Jefferson	2076	1184
Oldham	134	79
Shelby	28	18
Spencer	4	2
Trimble	6	5

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>Lake Cumberland</b>	<b>67</b>	<b>42</b>
Adair	3	2
Casey	2	0
Clinton	4	3
Cumberland	3	3
Green	3	1
McCreary	3	3
Pulaski	31	17
Russell	6	4
Taylor	6	4
Wayne	6	5

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>Lincoln Trail</b>	<b>141</b>	<b>91</b>
Breckinridge	9	5
Grayson	11	7
Hardin	80	52
Larue	1	0
Marion	8	6
Meade	15	13
Nelson	14	6
Washington	3	2

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>Northern Kentucky</b>	<b>403</b>	<b>235</b>
Boone	58	37
Campbell	81	46
Carroll	7	5
Gallatin	2	1
Grant	15	8
Kenton	233	131
Owen	3	3
Pendleton	4	4

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>Pennyrile</b>	<b>193</b>	<b>106</b>
Caldwell	13	8
Christian	72	44
Crittenden	4	4
Hopkins	30	10
Livingston	10	5
Lyon	16	7
Muhlenberg	22	9
Todd	18	12
Trigg	8	7

ADD/County	Total AIDS Cases <sup>(1)</sup>	Living with AIDS
<b>Purchase</b>	<b>185</b>	<b>112</b>
Ballard	7	5
Calloway	22	13
Carlisle	2	1
Fulton	6	4
Graves	22	11
Hickman	3	2
Marshall	13	9
McCracken	110	67

<sup>(1)</sup> Total cases both living and deceased

Note: Residence at diagnosis missing for 4 cases

**Table 6. AIDS Cases and Diagnosis Rates by Year of Diagnosis and Area Development District (ADD) of Residence at Time of Diagnosis**

DISTRICT	CASES & RATES <sup>(1)</sup>	1982-2002	2003	2004	2005	2006	2007	2008 <sup>(2)</sup>	TOTAL CASES <sup>(3)</sup>	%
1. Purchase	Cases	135	12	9	4	11	12	2	185	4%
	Rate per 100,000		6.2			5.6				
2. Pennyriple	Cases	159	8	6	6	5	6	3	193	4%
	Rate per 100,000									
3. Green River	Cases	127	8	8	2	5	9	3	162	3%
	Rate per 100,000									
4. Barren River	Cases	125	5	11	8	9	7	6	171	3%
	Rate per 100,000			4.2						
5. Lincoln Trail	Cases	106	5	6	6	5	8	5	141	3%
	Rate per 100,000									
6. KIPDA/ North Central	Cases	1755	92	90	82	94	117	44	2274	47%
	Rate per 100,000		10.3	10.0	9.1	10.3				
7. Northern Kentucky	Cases	310	16	25	15	19	10	8	403	8%
	Rate per 100,000		3.9	6.1	3.6	4.5				
8. Buffalo Trace	Cases	25	1	1	5	0	1	1	34	1%
	Rate per 100,000									
9. Gateway	Cases	38	4	0	2	2	4	1	51	1%
	Rate per 100,000									
10. FIVCO	Cases	63	3	3	2	6	7	1	85	2%
	Rate per 100,000									
11. Big Sandy	Cases	33	3	1	1	0	3	0	41	1%
	Rate per 100,000									
12. Kentucky River	Cases	34	2	0	0	4	5	1	46	1%
	Rate per 100,000									
13. Cumberland Valley	Cases	76	3	4	5	3	5	1	97	2%
	Rate per 100,000									
14. Lake Cumberland	Cases	48	4	2	2	6	2	3	67	1%
	Rate per 100,000									
15. Bluegrass	Cases	722	31	43	37	45	41	17	936	19%
	Rate per 100,000		4.4	6.0	5.1	6.1				
<b>TOTAL CASES</b>		<b>3,756</b>	<b>197</b>	<b>209</b>	<b>177</b>	<b>214</b>	<b>237</b>	<b>96</b>	<b>4,886</b>	<b>100%</b>

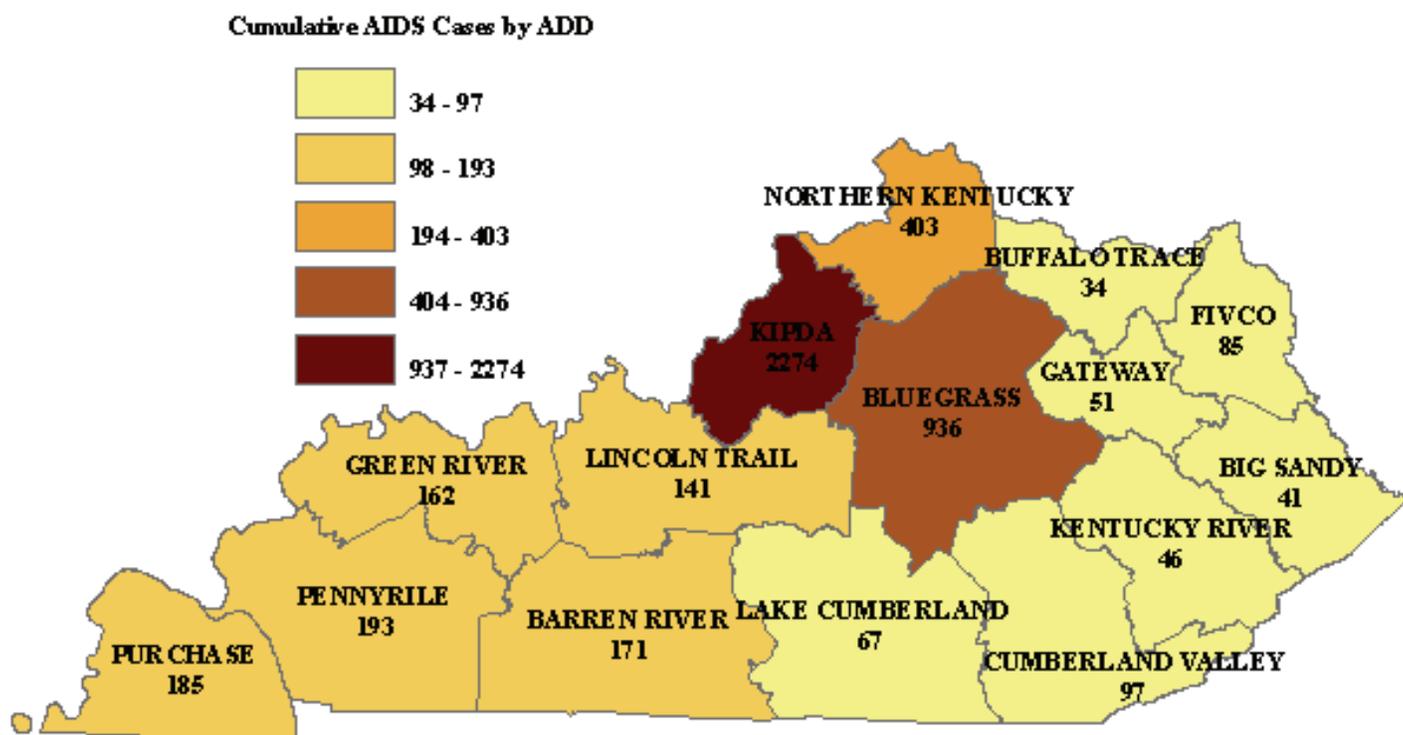
(1) Rates are only listed for years of diagnosis 2003 - 2006. Data for 2007 and 2008 are provisional due to reporting delay and are subject to change. Due to the small numbers of AIDS cases reported in some ADDs, please interpret the corresponding rates with caution. Rates are not published when cell size is less than 10.

(2) Data reported through June 30, 2008.

(3) Total AIDS Cases both Living and Deceased; Total AIDS cases reported are 4,890—4 AIDS cases with unknown residential information.

## Cumulative AIDS Statistics by Area Development District (ADD)

Figure 2. Cumulative AIDS Cases by Area Development District (ADD) of Residence at Time of Diagnosis through June 30, 2008



The largest number of AIDS cases (n=2,274, 47%) were residing in the KIPDA ADD, which includes the city of Louisville, at the time of diagnosis (Figure 2). The Bluegrass ADD, which includes the city of Lexington, has the second largest number of AIDS cases (n=936, 19%) diagnosed in Kentucky, followed by the Northern Kentucky ADD with the third largest number of AIDS cases (n=403, 8%) diagnosed in Kentucky.

For the three ADDs with the highest number of AIDS cases reported, the diagnosis rates increased from 2005 to 2006. In the KIPDA ADD the diagnosis rate increased from 9.1 per 100,000 to 10.3 per 100,000, in the Bluegrass ADD the diagnosis rate increased from 5.1 per 100,000 to 6.1 per 100,000, and in the Northern Kentucky ADD the diagnosis rate increased from 3.6 per 100,00 to 4.5 per 100,000 (Table 6).

## Adult/Adolescent AIDS Cases

**Table 7. Adult/Adolescent<sup>(1)</sup> AIDS Cases by Year of Diagnosis**

Characteristics	1982-02	%	2003	%	2004	%	2005	%	2006	%	2007	%	2008 <sup>(2)</sup>	%	Total
<b><u>SEX</u></b>															
Male	3215	86%	150	76%	166	80%	140	80%	168	78%	183	77%	78	81%	4100
Female	512	14%	47	24%	41	20%	36	20%	48	22%	54	23%	18	19%	756
<b>TOTAL<sup>(3)</sup></b>	<b>3727</b>	<b>100%</b>	<b>197</b>	<b>100%</b>	<b>207</b>	<b>100%</b>	<b>176</b>	<b>100%</b>	<b>216</b>	<b>100%</b>	<b>237</b>	<b>100%</b>	<b>96</b>	<b>100%</b>	<b>4856</b>
<b><u>AGE AT DIAGNOSIS</u></b>															
13-19	28	1%	1	1%	1	0%	1	1%	0	0%	1	0%	2	2%	34
20-29	691	19%	39	20%	32	15%	23	13%	34	16%	36	15%	21	22%	876
30-39	1710	46%	59	30%	74	36%	64	36%	62	29%	82	35%	26	27%	2077
40-49	935	25%	70	36%	79	38%	64	36%	75	35%	81	34%	30	31%	1334
>49	363	10%	28	14%	21	10%	24	14%	45	21%	37	16%	17	18%	535
<b>TOTAL<sup>(3)</sup></b>	<b>3727</b>	<b>100%</b>	<b>197</b>	<b>100%</b>	<b>207</b>	<b>100%</b>	<b>176</b>	<b>100%</b>	<b>216</b>	<b>100%</b>	<b>237</b>	<b>100%</b>	<b>96</b>	<b>100%</b>	<b>4856</b>
<b><u>RACE/ETHNICITY</u></b>															
White, Not Hispanic	2534	68%	111	56%	123	59%	99	56%	114	53%	123	52%	55	57%	3159
Black, Not Hispanic	1099	29%	74	38%	69	33%	61	35%	86	40%	92	39%	34	35%	1515
Hispanic	81	2%	8	4%	14	7%	14	8%	14	6%	21	9%	4	4%	156
Other/Unknown	13	0%	4	2%	1	0%	2	1%	2	1%	1	0%	3	3%	26
<b>TOTAL<sup>(3)</sup></b>	<b>3727</b>	<b>100%</b>	<b>197</b>	<b>100%</b>	<b>207</b>	<b>100%</b>	<b>176</b>	<b>100%</b>	<b>216</b>	<b>100%</b>	<b>237</b>	<b>100%</b>	<b>96</b>	<b>100%</b>	<b>4856</b>
<b><u>TRANSMISSION CATEGORY</u></b>															
MSM <sup>(4)</sup>	2146	58%	92	47%	103	50%	89	51%	98	45%	100	42%	51	53%	2679
IDU <sup>(5)</sup>	510	14%	35	18%	34	16%	16	9%	24	11%	29	12%	6	6%	654
MSM and IDU	233	6%	11	6%	18	9%	4	2%	7	3%	5	2%	1	1%	279
Hemophilia/Blood Disorder	83	2%	0	0%	1	0%	0	0%	0	0%	0	0%	0	0%	84
Heterosexual <sup>(6)</sup>	523	14%	43	22%	36	17%	50	28%	48	22%	43	18%	13	14%	756
Transfusion/Transplant	36	1%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	36
Undetermined <sup>(7)</sup>	196	5%	16	8%	15	7%	17	10%	39	18%	60	25%	25	26%	368
<b>TOTAL<sup>(3)</sup></b>	<b>3727</b>	<b>100%</b>	<b>197</b>	<b>100%</b>	<b>207</b>	<b>100%</b>	<b>176</b>	<b>100%</b>	<b>216</b>	<b>100%</b>	<b>237</b>	<b>100%</b>	<b>96</b>	<b>100%</b>	<b>4856</b>

(1) Cases are classified as Adult/Adolescent if they are 13 years of age or older at time of diagnosis.

(2) Data reported through June 30, 2008.

(3) Percentages may not total 100% due to rounding.

(4) MSM = Men Having Sex With Men

(5) IDU = Injection Drug Use

## Adult/Adolescent AIDS Cases

**Table 8. Cumulative Adult/Adolescent<sup>(1)</sup> AIDS Cases By Transmission Category, Race/Ethnicity, and Sex through June 30, 2008**

	Transmission Category	White, Not Hispanic		Black, Not Hispanic		Hispanic		Other/Unknown		TOTAL	
		No.	%	No.	%	No.	%	No.	%	No.	% <sup>(2)</sup>
<b>MALE</b>	MSM <sup>(3)</sup>	2075	74%	545	47%	50	41%	9	53%	2679	65%
	IDU <sup>(4)</sup>	190	7%	237	21%	28	23%	6	35%	461	11%
	MSM and IDU	181	6%	93	8%	5	4%	0	0%	279	7%
	Hemophilia/Coagulation Disorder	74	3%	8	1%	0	0%	0	0%	82	2%
	Heterosexual <sup>(5)</sup>	140	5%	145	13%	15	12%	2	12%	302	7%
	Transfusion/Transplant	18	1%	4	0%	0	0%	0	0%	22	1%
	Undetermined <sup>(6)</sup>	135	5%	116	10%	24	20%	0	0%	275	7%
<b>TOTAL</b>	<b>2813</b>	<b>100%</b>	<b>1148</b>	<b>100%</b>	<b>122</b>	<b>100%</b>	<b>17</b>	<b>100%</b>	<b>4100</b>	<b>100%</b>	
<b>FEMALE</b>	IDU <sup>(4)</sup>	86	25%	96	26%	8	24%	3	33%	193	26%
	Hemophilia/Coagulation Disorder	2	1%	0	0%	0	0%	0	0%	2	0%
	Heterosexual <sup>(5)</sup>	207	60%	220	60%	21	62%	6	67%	454	60%
	Transfusion/Transplant	11	3%	3	1%	0	0%	0	0%	14	2%
	Undetermined <sup>(6)</sup>	40	12%	48	13%	5	15%	0	0%	93	12%
<b>TOTAL</b>	<b>346</b>	<b>100%</b>	<b>367</b>	<b>100%</b>	<b>34</b>	<b>100%</b>	<b>9</b>	<b>100%</b>	<b>756</b>	<b>100%</b>	

(1) Cases are classified as Adult/Adolescent if they are 13 years of age or older at time of diagnosis.

(2) Percentages may not total to 100 due to rounding.

(3) MSM = Men Having Sex With Men

(4) IDU = Injection Drug Use

(5) "Heterosexual" includes persons who have had heterosexual contact with a person with HIV or at risk for HIV.

(6) "Undetermined" refers to persons whose mode of exposure to HIV is unknown. This includes persons who are under investigation, dead, lost to investigation, refused interview, and persons whose mode of exposure remain undetermined after investigation.

Among males, higher numbers of cases with no risk factors identified were reported among Hispanics (20%) and Blacks (10%) in comparison to Whites (5%). Similar trends exist among females though to a smaller extent. Among Hispanic females, 15% were reported with no risk factors identified compared to 13% of Black females and 12% percent of White females. The existence of large percentages of cases without known modes of transmission poses a barrier to provision of an effective response to the epidemic within the group in question, because risk factor information forms the basis for program planning and guides resource allocation.

## Pediatric AIDS Cases

**Table 9. Cumulative Pediatric<sup>(1)</sup> AIDS Cases By Risk and Race/Ethnicity through June 30, 2008**

Transmission Category	White, Not Hispanic		Black, Not Hispanic		Other/Unknown		TOTAL	
	No.	%	No.	%	No.	%	No.	% <sup>(2)</sup>
Hemophilia/Coagulation Disorder	3	21%	1	5%	0	0%	4	12%
Perinatal	10	71%	19	95%	0	0%	29	85%
Transfusion	1	7%	0	0%	0	0%	1	3%
<b>TOTAL</b>	<b>14</b>	<b>100%</b>	<b>20</b>	<b>100%</b>	<b>0</b>	<b>0%</b>	<b>34</b>	<b>100%</b>

(1) Cases are classified as Pediatric if they are less than 13 years of age at time of diagnosis.

(2) Percentages may not total to 100 due to rounding.

**Table 10. Pediatric<sup>(1)</sup> AIDS Cases by Year of Diagnosis**

Transmission Category	1982-02	%	2003	%	2004	%	2005	%	2006	%	2007	%	2008 <sup>(2)</sup>	%	Total	% <sup>(3)</sup>
Hemophilia/Coagulation Disorder	4	13%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	4	12%
Perinatal	25	83%	1	100%	2	100%	1	100%	0	0%	0	0%	0	0%	29	85%
Transfusion/Transplant	1	3%	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%	1	3%
<b>Total</b>	<b>30</b>	<b>100%</b>	<b>1</b>	<b>100%</b>	<b>2</b>	<b>100%</b>	<b>1</b>	<b>100%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>NA</b>	<b>0</b>	<b>NA</b>	<b>34</b>	<b>100%</b>

(1) Cases are classified as Pediatric if they are less than 13 years of age at time of diagnosis.

(2) Data reported through June 30, 2008

(3) Percentages may not total 100 due to rounding.

Overall, there have been 34 pediatric AIDS cases reported to the Kentucky HIV/AIDS surveillance program (Table 9 and Table 10) since reporting began. Thirty of these cases (88%) were diagnosed prior to 2003. The majority of pediatric cases were reported due to perinatal transmission (n= 29, 85%), 4 were reported with their primary mode of exposure due to hemophilia or coagulation disorders, and 1 was reportedly due to transfusion or transplantation (Table 10). Since 1989 there have been no pediatric cases diagnosed which reported hemophilia or coagulation disorders as the mode of exposure. The only pediatric case to report transfusion or transplantation as the risk factor was diagnosed in 1988. No pediatric cases have been reported to the HIV/AIDS surveillance program since 2005.

## Cumulative AIDS Cases

**Table 11. Cumulative<sup>(1)</sup> AIDS Cases By Age at Diagnosis, Race/Ethnicity, and Sex through June 30, 2008**

	Age Group	White, Not Hispanic		Black, Not Hispanic		Hispanic		Other/Unknown		TOTAL	
		No.	%	No.	%	No.	%	No.	%	No.	% <sup>(2)</sup>
<b>MALE</b>	<13	7	≤1%	14	1%	0	0%	0	0%	21	1%
	13-19	17	1%	8	1%	2	2%	0	0%	27	1%
	20-29	467	17%	206	18%	36	30%	2	12%	711	17%
	30-39	1233	44%	469	40%	59	48%	6	35%	1767	43%
	40-49	782	28%	341	29%	16	13%	9	53%	1148	28%
	>49	314	11%	124	11%	9	7%	0	0%	447	11%
	<b>TOTAL<sup>(2)</sup></b>	<b>2820</b>	<b>100%</b>	<b>1162</b>	<b>100%</b>	<b>122</b>	<b>100%</b>	<b>17</b>	<b>100%</b>	<b>4121</b>	<b>100%</b>
<b>FEMALE</b>	<13	7	2%	6	2%	0	0%	0	0%	13	2%
	13-19	4	1%	2	1%	1	3%	0	0%	7	1%
	20-29	74	21%	71	19%	16	47%	4	44%	165	21%
	30-39	141	40%	159	43%	8	24%	2	22%	310	40%
	40-49	81	23%	96	26%	6	18%	3	33%	186	24%
	>49	46	13%	39	10%	3	9%	0	0%	88	11%
	<b>TOTAL<sup>(2)</sup></b>	<b>353</b>	<b>100%</b>	<b>373</b>	<b>100%</b>	<b>34</b>	<b>100%</b>	<b>9</b>	<b>100%</b>	<b>769</b>	<b>100%</b>

(1) Includes both Adult/Adolescent and Pediatric AIDS cases.

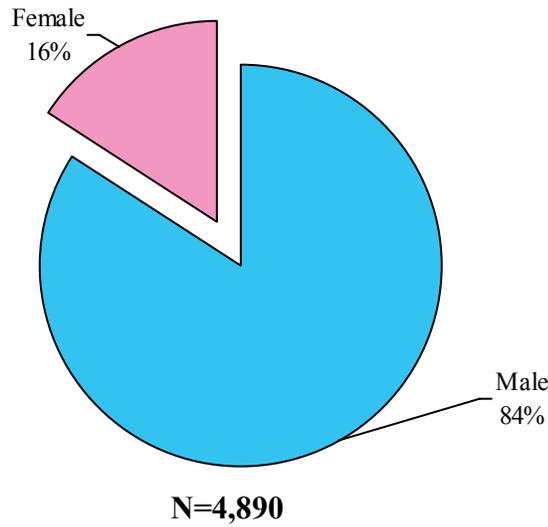
(2) Percentages may not total 100 due to rounding.

Among all male AIDS cases, the highest percentage were diagnosed in their 30's (43%). A higher percentage of Hispanic males were diagnosed in their 20's (30%) compared to Black males (18%) and White males (17%).

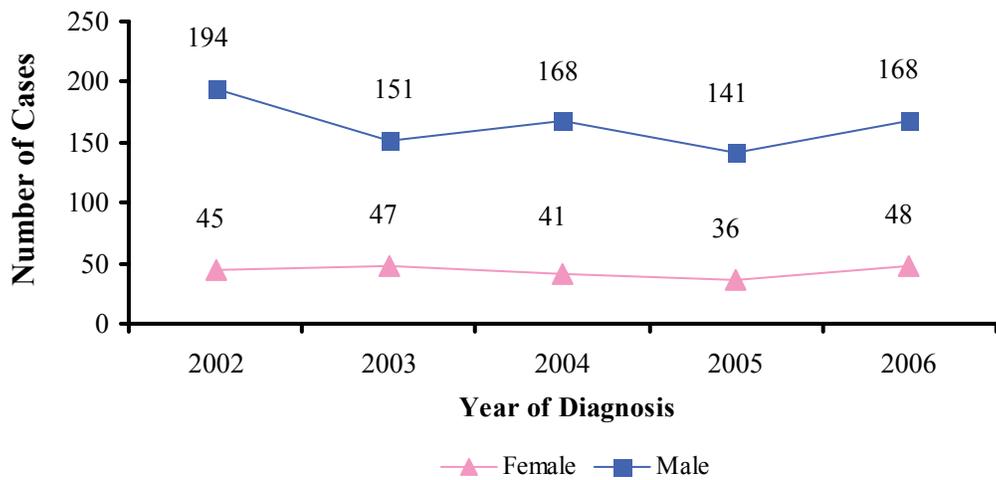
The highest percentage of all female AIDS cases were also diagnosed in their 30's (40%). A far higher percentage of Hispanic females were diagnosed in their 20's (47%) compared to White females (21%) and Black females (19%).

## AIDS Cases in Kentucky by Sex

**Figure 3. Percentage of Cumulative Kentucky AIDS Cases by Sex as of June 30, 2008**

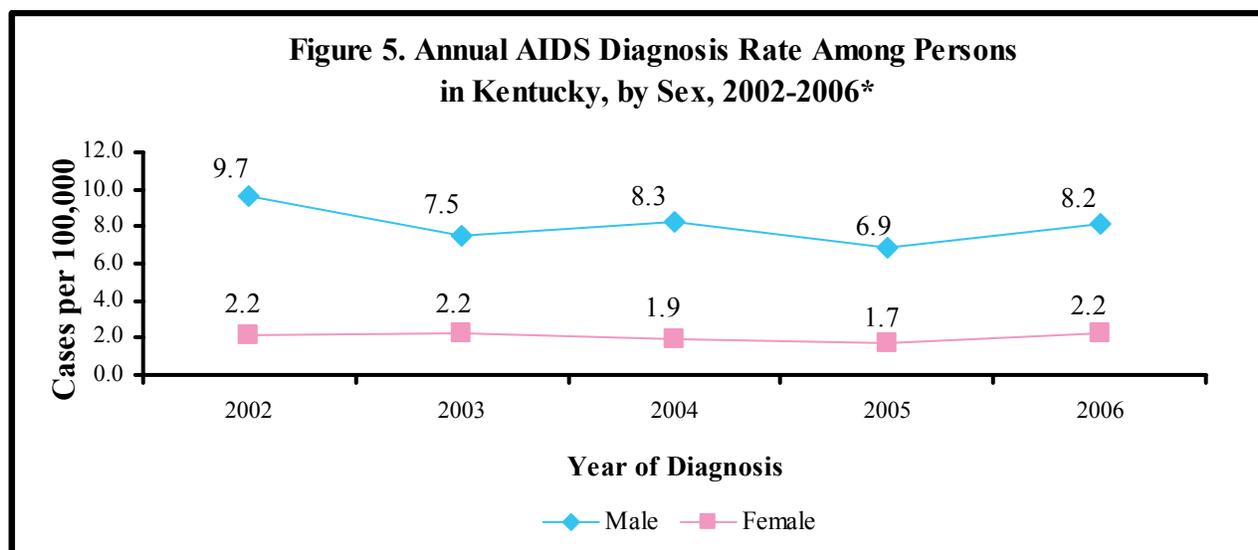


**Figure 4. Kentucky AIDS Cases by Sex and Year of Diagnosis, 2002-2006\***



\*Data for 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis; all data are subject to change due to reporting delays.

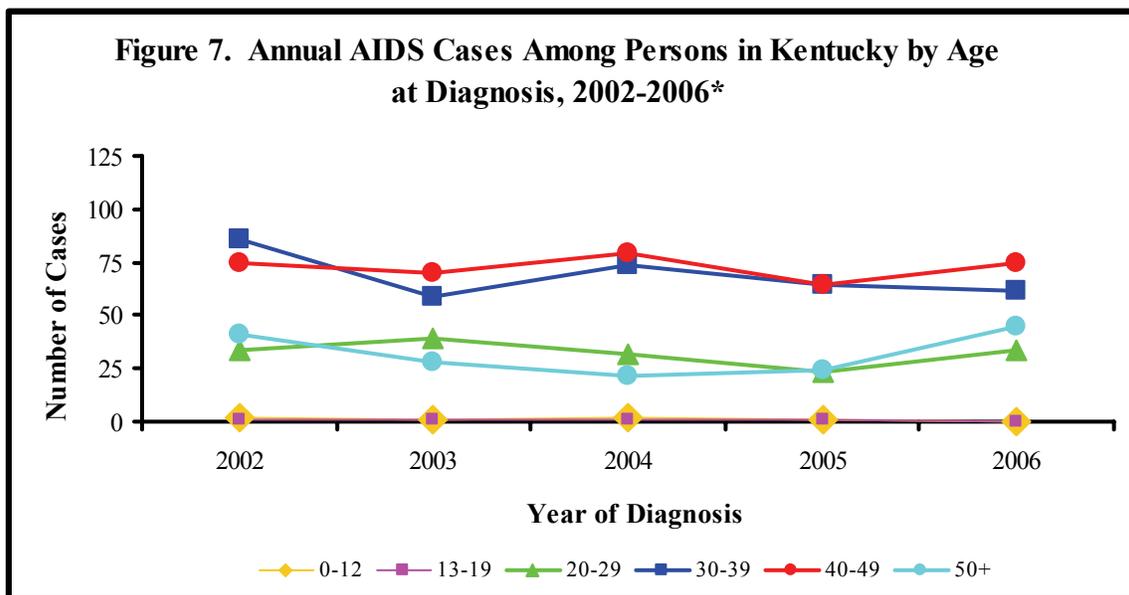
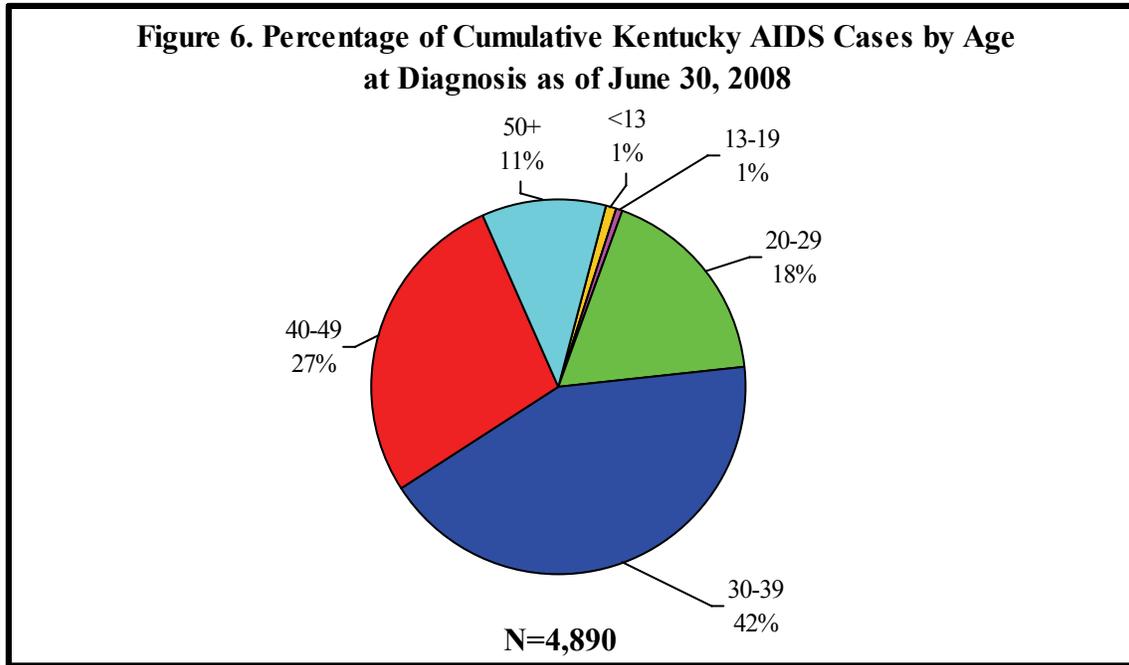
## AIDS Diagnosis Rates in Kentucky by Sex



\*Data for 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis; all data are subject to change due to reporting delays.

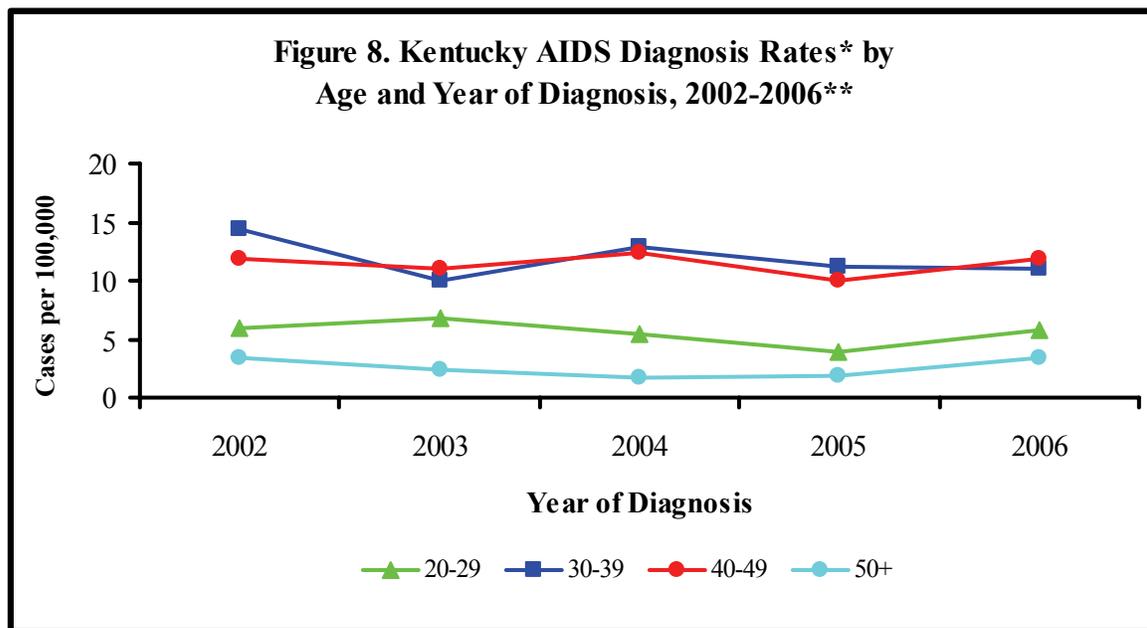
Males represent the majority (84%) of total AIDS cases reported in Kentucky (Figure 3). On average from 2002 to 2006, the AIDS diagnosis rate among males has been approximately four times higher than for females (Figure 5). The number of male AIDS cases diagnosed and the yearly diagnosis rate has fluctuated from 2002 to 2006 (Figure 4 and Figure 5). The female AIDS diagnosis rate has remained fairly steady from 2002 to 2006, with a slight decrease seen in 2004 and 2005. These trends will continue to be monitored as data become available.

## AIDS Cases in Kentucky by Age at Diagnosis



\*Data for 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis; all data are subject to change due to reporting delays.

## AIDS Cases in Kentucky by Age at Diagnosis



\*Due to the small numbers of AIDS cases reported, rates are not presented for age groups 0-12 and 13-19 years old.

\*\*Data for 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis; all data are subject to change due to reporting delays.

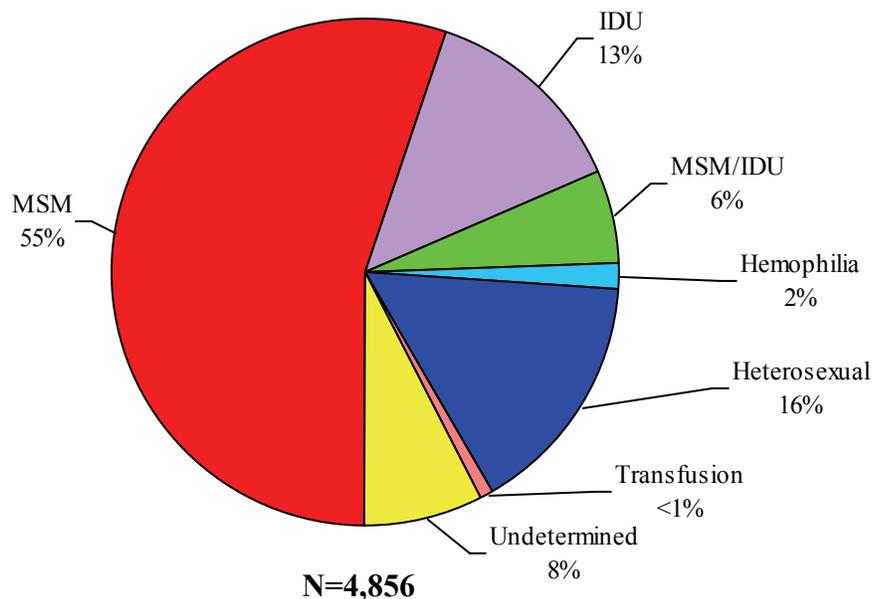
Cumulatively, the largest percentage of AIDS cases were diagnosed in their 30's (42%), followed by those in their 40's (27%) (Figure 6). The number of AIDS cases diagnosed in those less than 20 years of age has remained low from 2002 to 2006 (Figure 7). The AIDS diagnosis rate has been highest among those in their 30's and 40's from 2002 to 2006 (Figure 8). There was a slight increase in the diagnosis rates for all age categories from 2005 to 2006, except among those 30 to 39 years of age. The mean age for diagnosed AIDS cases has remained approximately 39 to 40 years old from 2002 to 2006 (Table 12). The highest age at diagnosis between 2002 and 2006 was 73 years of age, which occurred in 2006.

**Table 12. Age at Reported AIDS Diagnosis, Kentucky 2002-2006**

Year	Highest Age	Lowest Age	Mean Age
2002	68	1	39.7
2003	70	6	38.6
2004	69	<1	38.3
2005	67	10	39.6
2006	73	20	40.8

## AIDS Cases in Kentucky by Transmission Category

**Figure 9. Percentage of Cumulative Kentucky Adult/Adolescent AIDS Cases by Transmission Category through June 30, 2008**



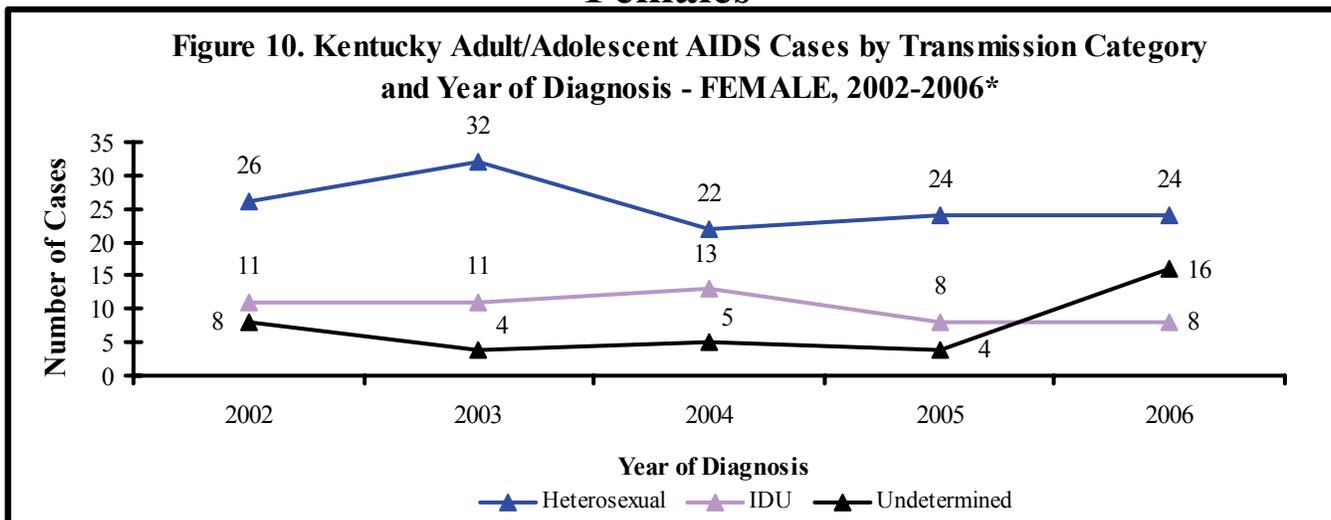
**Table 13. Cumulative Kentucky Adult/Adolescent AIDS Cases by Transmission Category**

Transmission Category	N
MSM	2679
IDU	654
MSM/IDU	279
Hemophilia	84
Heterosexual	756
Transfusion	36
Undetermined	368
<b>Total</b>	<b>4856</b>

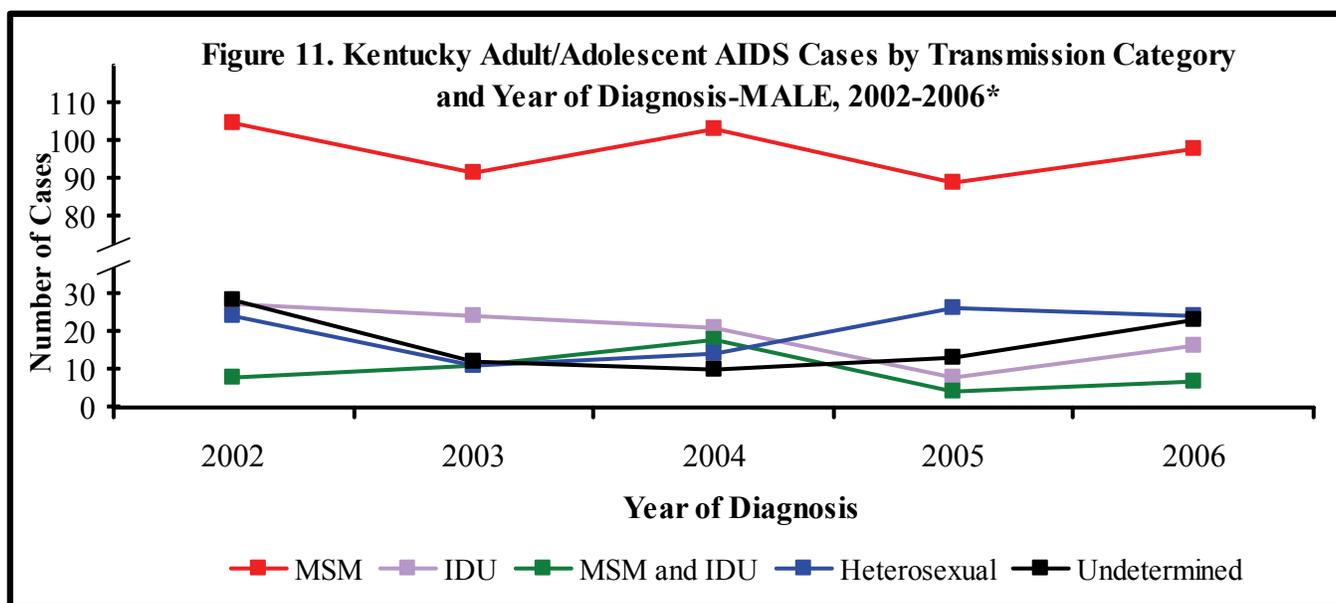
In Kentucky, 55% of cumulative adult/adolescent AIDS cases identified their primary transmission category as men who have sex with men (MSM), as shown in Figure 9. Thirteen percent of adult/adolescent AIDS cases reported their primary transmission category as injection drug use (IDU), and 16% reported heterosexual contact. Six percent of Kentucky adult/adolescent AIDS cases reported both MSM and IDU as the primary transmission category. Cumulative adult/adolescent AIDS case numbers for each mode of exposure are displayed in Table 13.

## AIDS Cases in Kentucky by Transmission Category and Sex

### Females



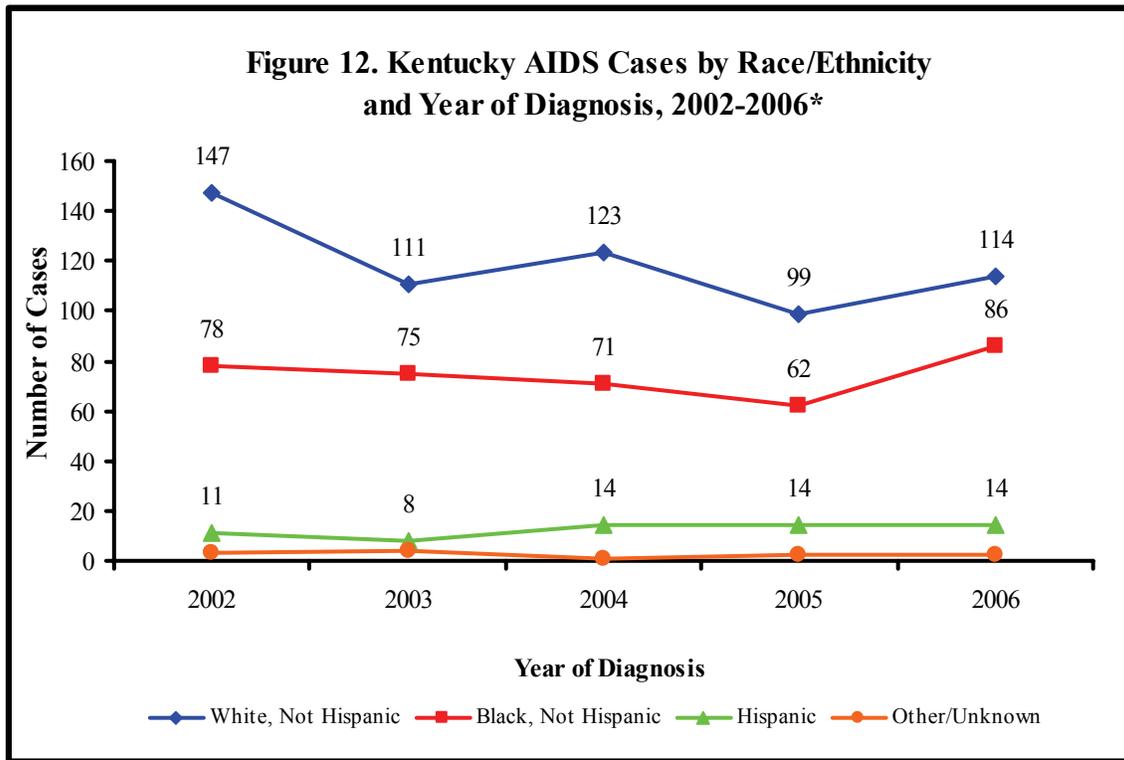
### Males



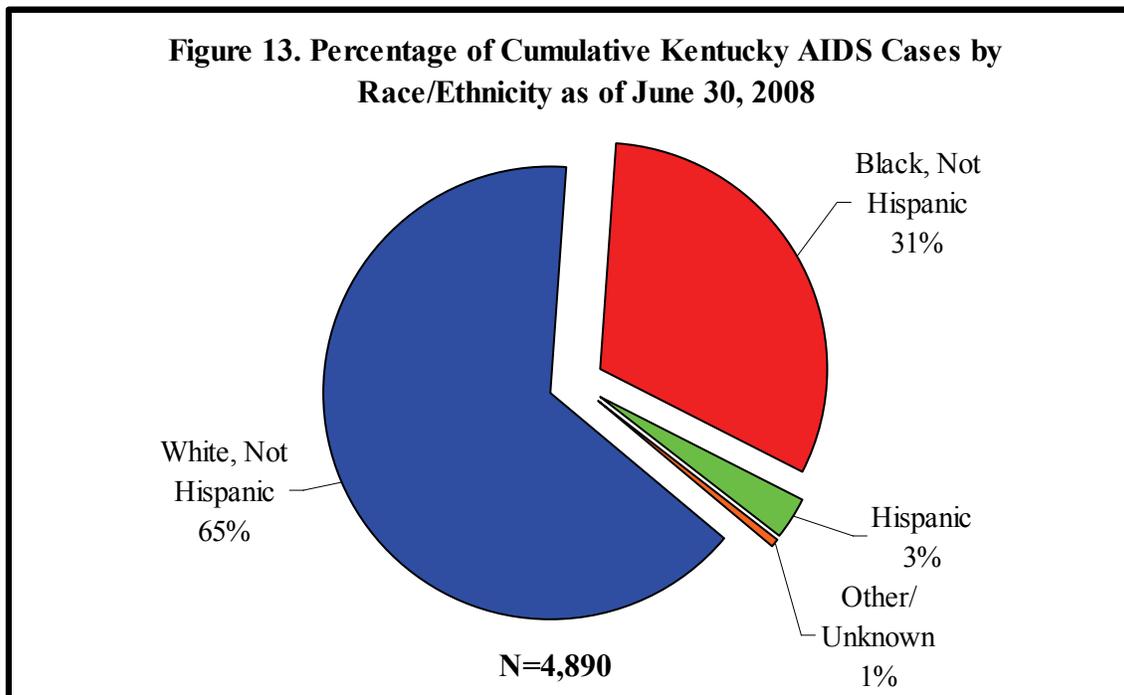
\*Data for 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis; all data are subject to change due to reporting delays.

Figure 10 and Figure 11 show female and male Kentucky adult/adolescent AIDS cases by transmission category and year of diagnosis. The number of cases among females reporting heterosexual contact as the mode of transmission decreased from 2003 to 2004, and remained fairly steady from 2004 to 2006 (Figure 10). Also, the number of female cases reporting IDU as their primary mode of transmission decreased from 2004 to 2005. In Figure 11 for adult/adolescent males, please note the break in the y-axis for the number of cases diagnosed due to space limitations. Among males, MSM account for the largest number of cases diagnosed each year from 2002 to 2006. The number of males reporting IDU as their primary mode of transmission decreased from 2002 to 2005, and then increased in 2006. The number of cases among males attributed to heterosexual contact increased from 2003 to 2005. Among both females and males the number of cases with an undetermined transmission category increased in 2006.

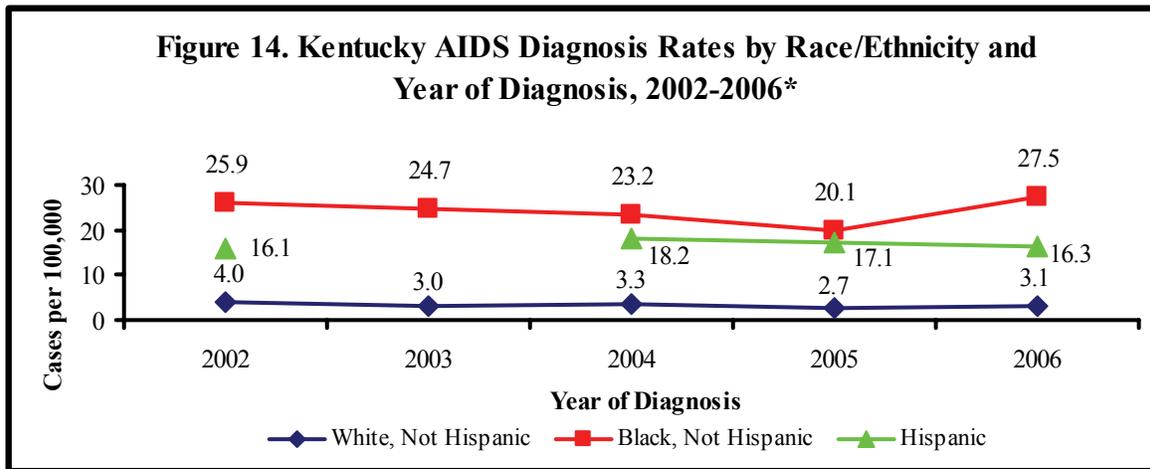
## AIDS Cases in Kentucky by Race/Ethnicity



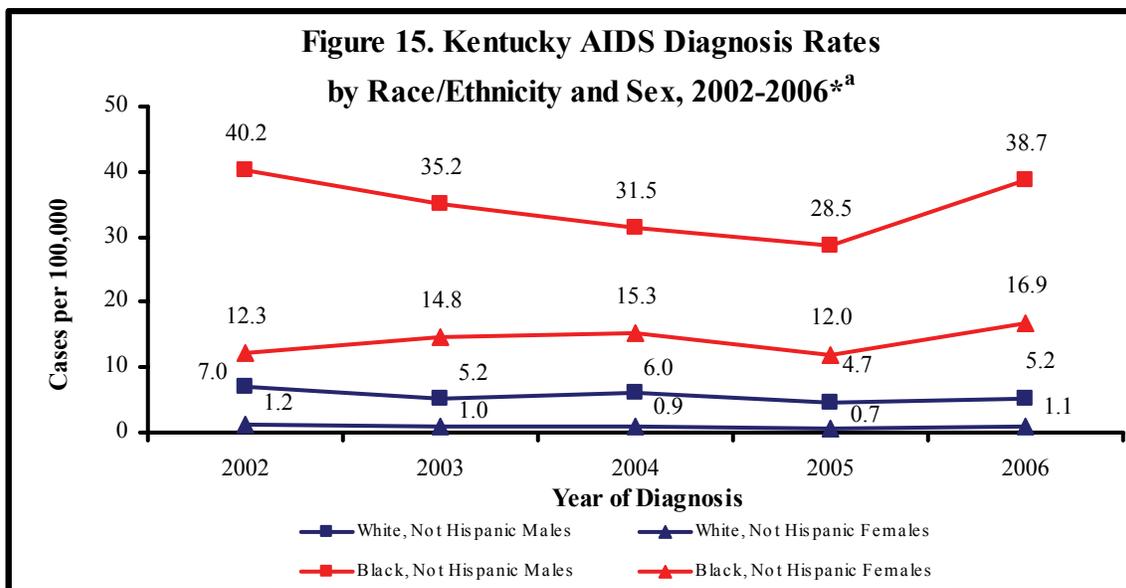
\*Data for 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis; all data are subject to change due to reporting delays.



## AIDS Diagnosis in Kentucky by Race/Ethnicity



\*Data in 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis.  
 Note: The diagnosis rate for Hispanics in 2003 is not presented because the number of cases diagnosed was less than 10.



\*Data in 2007 and 2008 are provisional due to reporting delays and are not used in trend analysis.  
<sup>a</sup> Rates for Hispanic cases by sex are not presented due to the small number of cases reported.

On average from 2002-2006, the AIDS diagnosis rate for Blacks was approximately eight times higher than for Whites, and five times higher for Hispanics than for Whites in Kentucky (Figure 14). The diagnosis rate among Black males steadily decreased between 2002 and 2005. However, the rate among Black males increased from 28.5 per 100,000 in 2005 to 38.7 per 100,000 in 2006 (Figure 15). The diagnosis rate among White males between 2002 and 2006 remained fairly stable. The diagnosis rate among Black females was stable between 2002 and 2005 but increased by 4.9% in 2006. Rates among white females have remained stable with the lowest rate of .7 per 100,000 occurring in 2005 (Figure 15).

## AIDS Mortality Rates in Kentucky

**Table 14. Kentucky AIDS Deaths 2005 - All Ages**

	White, Not Hispanic			Black, Not Hispanic			Hispanic			Total		
	Deaths	Rate*	Rank	Deaths	Rate*	Rank	Deaths	Rate*	Rank	Deaths	Rate*	Rank
Male	28	1.6	25th	21	13.9	10th	0			49	2.4	22nd
Female	7	0.4	30th	4	2.5	20th	1	2.9	15th**	12	0.6	30th
<b>Total</b>	<b>35</b>	<b>0.9</b>	<b>29th</b>	<b>25</b>	<b>8.1</b>	<b>14th</b>	<b>1</b>	<b>1.2</b>	<b>17th</b>	<b>61</b>	<b>1.5</b>	<b>24th</b>

**Table 15. Kentucky AIDS Deaths 2005 - Age Group 25-44**

	White, Not Hispanic			Black, Not Hispanic			Hispanic			Total		
	Deaths	Rate*	Rank	Deaths	Rate*	Rank	Deaths	Rate*	Rank	Deaths	Rate*	Rank
Male	14	2.7	8th	8	18.3	5th	0			22	3.8	8th
Female	5	1.0	12th	2	4.4	8th	1	8.4	2nd**	8	1.4	12th
<b>Total</b>	<b>19</b>	<b>1.7</b>	<b>11th</b>	<b>10</b>	<b>11.2</b>	<b>5th</b>	<b>1</b>	<b>3.2</b>	<b>7th</b>	<b>30</b>	<b>2.6</b>	<b>10th</b>

Data Source: Office of Vital Statistics, Kentucky Department for Public Health/Cabinet for Health & Family Services

\* Rate per 100,000 population

\*\*Tied with two other causes of death

**Table 16. Kentucky AIDS Cases<sup>(1)</sup>  
Living and Deceased as of June 30, 2008**

Diagnosis Year	Total Cases	Living	Deceased	Mortality <sup>(1)</sup>
1982	3	0	3	100%
1983	7	0	7	100%
1984	15	0	15	100%
1985	31	1	30	97%
1986	36	1	35	97%
1987	65	5	60	92%
1988	121	6	115	95%
1989	161	17	144	89%
1990	175	24	151	86%
1991	215	33	182	85%
1992	279	59	220	79%
1993	303	89	214	71%
1994	306	126	180	59%
1995	327	187	140	43%
1996	323	216	107	33%
1997	259	188	71	27%
1998	236	169	67	28%
1999	229	181	48	21%
2000	211	164	47	22%
2001	216	183	33	15%
2002	239	200	39	16%
2003	198	178	20	10%
2004	209	199	10	5%
2005	177	161	16	9%
2006	216	207	9	4%
2007	237	227	10	4%
2008	96	94	2	2%
<b>TOTAL*</b>	<b>4890</b>	<b>2915</b>	<b>1975</b>	<b>40%</b>

(1) The percentage of AIDS cases diagnosed in a year which are now deceased based on information received through June 30, 2008.

In 2005, AIDS was the 24<sup>th</sup> leading cause of death for all Kentuckians (Table 14). AIDS was the 14<sup>th</sup> leading cause of death among blacks, 17<sup>th</sup> among Hispanics, and 29<sup>th</sup> among whites in Kentucky. For black males of any age in Kentucky, AIDS ranked as the 10<sup>th</sup> leading cause of death.

In 2005, among Kentuckians ages 25-44, AIDS was the 10<sup>th</sup> leading cause of death (Table 15). Among those ages 25-44, AIDS ranked as the 5<sup>th</sup> leading cause of death for black males, 8<sup>th</sup> among white males, 8<sup>th</sup> among black females, and 12<sup>th</sup> among white females. Among Hispanic females ages 25-44, AIDS tied as the 2<sup>nd</sup> leading cause of death with two other causes. In 2005, for blacks age 25-44 years, the AIDS death rate was approximately six times higher than the white AIDS death rate in this age group.

Overall, 40% of those reported with AIDS have died since the beginning of the epidemic in Kentucky (Table 16).

## AIDS Case Fatality Rates

**Table 17. Kentucky AIDS Case Fatality Rate Five Years  
Following AIDS Diagnosis**

Diagnosis Year	Total Cases	Status 5 Years Following AIDS Diagnosis		Case Fatality Rate <sup>(1)</sup>
		Living	Deceased	
1982	3	0	3	100%
1983	7	1	6	86%
1984	15	1	14	93%
1985	31	3	28	90%
1986	36	4	32	89%
1987	65	10	55	85%
1988	121	12	109	90%
1989	161	33	128	80%
1990	175	30	145	83%
1991	215	47	168	78%
1992	279	78	201	72%
1993	303	116	187	62%
1994	306	156	150	49%
1995	327	213	114	35%
1996	323	249	74	23%
1997	259	206	53	20%
1998	236	177	59	25%
1999	229	187	42	18%
2000	211	164	47	22%
2001	216	183	33	15%
2002	239	201	38	16%
<b>TOTAL</b>	<b>3757</b>	<b>2071</b>	<b>1686</b>	<b>45%</b>

Table 17 examines the proportion of individuals that died within five years of their AIDS diagnosis (i.e., case fatality rate). For example, of the 211 individuals that were diagnosed with AIDS in 2000, 47 (22%) died within five years of their diagnosis. Table 17 shows a decline in case fatality rates over time. This is likely due to an increased understanding of the virus, which has resulted in new medical monitoring techniques and improved treatment strategies, such as antiretroviral therapy.

## HIV Infections Diagnosed in Kentucky

### Notes to the Reader:

- Only cases first diagnosed in the first full year of confidential name-based HIV reporting (2005) or later are included in this section
- Trend data will not be presented at this time due to the limited number of years available for analysis.
- As with AIDS data, reporting delays also exist for the HIV data, especially in the most recent years.
- The data presented in this section on HIV Infections should **not** be compared directly to the cumulative AIDS data presented in the previous section because unlike the cumulative AIDS data, the HIV data only extends over a period of three years.

**Table 18. Kentucky HIV Diagnoses, 2005-2008\***

Year of Diagnosis	Total HIV Diagnoses	Without AIDS		Concurrent with AIDS Diagnosis	
	N	N	%	N	%
<b>2005</b>	339	256	76%	83	24%
<b>2006</b>	354	267	75%	87	25%
<b>2007</b>	403	307	76%	96	24%
<b>2008*</b>	138	101	73%	37	27%
<b>Total</b>	<b>1234</b>	<b>931</b>	<b>75%</b>	<b>303</b>	<b>25%</b>

\*Data reported through June 30, 2008

Between 2005 and June 30, 2008 there have been a total of 1,234 HIV infections reported in Kentucky (Table 18). Of these cases, 25% were concurrently diagnosed with AIDS during the same calendar month as the initial HIV diagnosis. The number of new HIV infections diagnosed between 2005 and 2007 and the proportion of concurrent diagnoses has remained fairly steady.

Table 19 (page 27) examines the distribution of HIV infections among individuals diagnosed between January 1, 2005 and June 30, 2008 by sex, age at diagnosis, race/ethnicity, transmission category, and stage of disease progression at time of diagnosis. Among those diagnosed with HIV infection between January 1, 2005 and June 30 2008, 80% were male. There were no differences in the distribution by sex between HIV without AIDS cases and cases concurrently diagnosed with HIV and AIDS. Eighty-two percent of all HIV infections diagnosed in this time period were among individuals 20-49 years of age. There were differences in the distribution of age at diagnosis between HIV without AIDS cases and cases concurrently diagnosed. For example, although individuals diagnosed between 40-49 years of age made up 25% of the cases diagnosed with HIV without AIDS, this age group represented 38% of all cases concurrently diagnosed with AIDS. In comparison, individuals diagnosed between 20-29 years of age represented 28% of the HIV without AIDS diagnoses, but only represented 14% of all cases concurrently diagnosed with AIDS. Whites represented 55% of all diagnosed HIV infections. There are a large number of cases with an undetermined transmission category, which makes it difficult to interpret the distribution of cases and poses a barrier to timely and effective targeting of the individuals who are most vulnerable to HIV/AIDS through program planning and appropriate allocation of resources.

## HIV Diagnoses in Kentucky by Selected Characteristics, 2005-2008\*

**Table 19. Kentucky HIV Diagnoses by Sex, Age at Diagnosis, Race/Ethnicity, and Transmission Category, 2005-2008\***

Characteristics	Total HIV Diagnoses		Without AIDS		Concurrent with AIDS Diagnosis	
	N	% <sup>(1)</sup>	N	% <sup>(1)</sup>	N	% <sup>(1)</sup>
<b>SEX</b>						
Male	986	80%	745	80%	241	80%
Female	248	20%	186	20%	62	20%
<b>AGE AT DIAGNOSIS</b>						
<13	9	1%	8	1%	1	0%
13-19	58	5%	57	6%	1	0%
20-29	307	25%	264	28%	43	14%
30-39	359	29%	269	29%	90	30%
40-49	350	28%	234	25%	116	38%
>49	151	12%	99	11%	52	17%
<b>RACE/ETHNICITY</b>						
White, Not Hispanic	680	55%	517	56%	163	54%
Black, Not Hispanic	450	36%	345	37%	105	35%
Hispanic	78	6%	46	5%	32	11%
Other	19	2%	17	2%	2	1%
Unknown	7	1%	6	1%	1	0%
<b>TRANSMISSION CATEGORY</b>						
MSM <sup>(2)</sup>	574	47%	450	48%	124	41%
IDU <sup>(3)</sup>	84	7%	56	6%	28	9%
MSM and IDU	28	2%	22	2%	6	2%
Heterosexual <sup>(4)</sup>	203	16%	144	15%	59	19%
Perinatal	7	1%	6	1%	1	0%
Undetermined <sup>(5)</sup>	338	27%	253	27%	85	28%
<b>TOTAL</b>	<b>1234</b>	<b>100%</b>	<b>931</b>	<b>100%</b>	<b>303</b>	<b>100%</b>

\*Data reported through June 30, 2008

(1) Percentages may not total to 100 due to rounding.

(2) MSM = Men Having Sex With Men

(3) IDU = Injection Drug Use

(4) "Heterosexual" includes persons who have had heterosexual contact with a person with HIV or at risk for HIV.

(5) "Undetermined" refers to persons whose mode of exposure to HIV is unknown. This includes persons who are under investigation, dead, lost to investigation, refused interview, and persons whose mode of exposure remain undetermined after investigation.

## HIV Diagnoses in Kentucky by Selected Characteristics, 2005-2008\*

Table 20. Kentucky HIV Diagnoses by Sex, Age at Diagnosis, and Race/Ethnicity, 2005-2008\*

	Age Group	White, Not Hispanic		Black, Not Hispanic		Hispanic		Other		Unknown		Total	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
MALE	<13	2	0%	3	1%	0	0%	0	0%	0	0%	5	1%
	13-19	11	2%	30	9%	1	2%	2	15%	1	14%	45	5%
	20-29	125	22%	90	27%	20	33%	3	23%	0	0%	238	24%
	30-39	179	31%	78	24%	28	46%	4	31%	3	43%	292	30%
	40-49	191	33%	82	25%	7	11%	4	31%	2	29%	286	29%
	>49	67	12%	47	14%	5	8%	0	0%	1	14%	120	12%
	<b>Total</b>	<b>575</b>	<b>100%</b>	<b>330</b>	<b>100%</b>	<b>61</b>	<b>100%</b>	<b>13</b>	<b>100%</b>	<b>7</b>	<b>100%</b>	<b>986</b>	<b>100%</b>
FEMALE	<13	1	1%	2	2%	0	0%	1	17%	0	N/A	4	2%
	13-19	7	7%	3	3%	1	6%	2	33%	0	N/A	13	5%
	20-29	26	25%	33	28%	9	53%	1	17%	0	N/A	69	28%
	30-39	30	29%	32	27%	4	24%	1	17%	0	N/A	67	27%
	40-49	27	26%	34	28%	2	12%	1	17%	0	N/A	64	26%
	>49	14	13%	16	13%	1	6%	0	0%	0	N/A	31	13%
	<b>Total</b>	<b>105</b>	<b>100%</b>	<b>120</b>	<b>100%</b>	<b>17</b>	<b>100%</b>	<b>6</b>	<b>100%</b>	<b>0</b>	<b>N/A</b>	<b>248</b>	<b>100%</b>

\*Data reported through June 30, 2008

Table 20 examines the distribution of HIV infections among individuals diagnosed between 2005 and June 30, 2008 within race/ethnicity categories by sex and age at diagnosis. Caution should be taken when interpreting the data for the Other and Unknown race/ethnicity categories as the number of cases is small which causes amplification in the percentages. HIV cases reported among Hispanics tend to be younger at diagnosis compared to other races. For example, a greater percentage Hispanic males were diagnosed in their 20's (33%) compared to White males (22%) and Black males (27%). Among Hispanic females, 53% were diagnosed in their 20's compared to 25% of White females and 28% of Black females.

## HIV Infections by Area Development District (ADD)

Figure 16. HIV Diagnoses by Area Development District (ADD) of Residence at Time of Diagnosis, 2005-June 2008

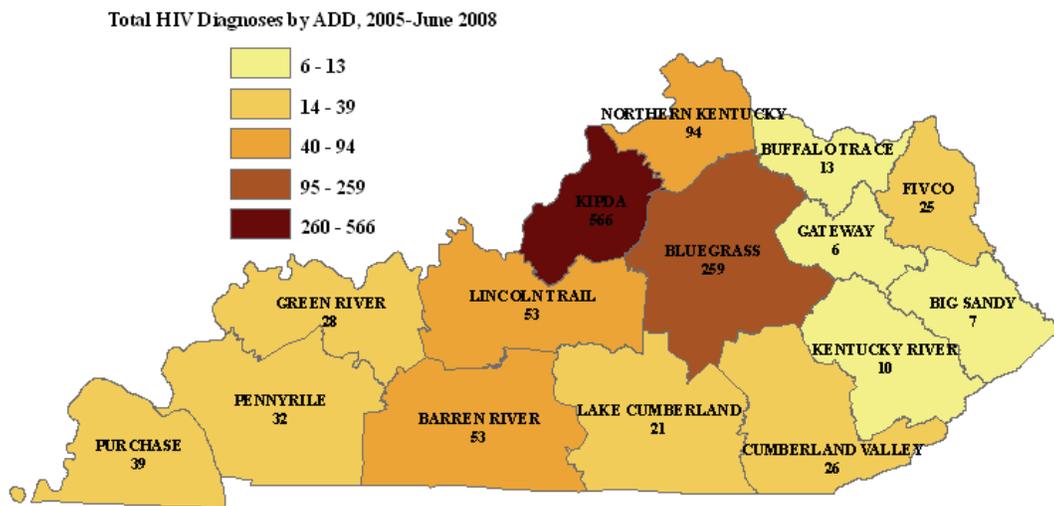


Figure 16 examines the total number of HIV infections diagnosed between 2005 and June 30, 2008 by ADD. The labels on the map represent the total number of HIV infections, regardless of disease progression status in each ADD. The largest number of cases (n=556, 45%) diagnosed in this period were residing in the KIPDA ADD, which includes the city of Louisville. The second largest number of cases (n=259, 21%) were residents of the Bluegrass ADD at the time of diagnosis. The smallest number of HIV infections diagnosed and reported during this period occurred in the ADD's located in eastern Kentucky.

Figure 17. Percent of HIV Infections Reporting Concurrent Diagnoses with AIDS by Area Development District (ADD) of Residence at Time of Diagnosis, 2005-June 2008

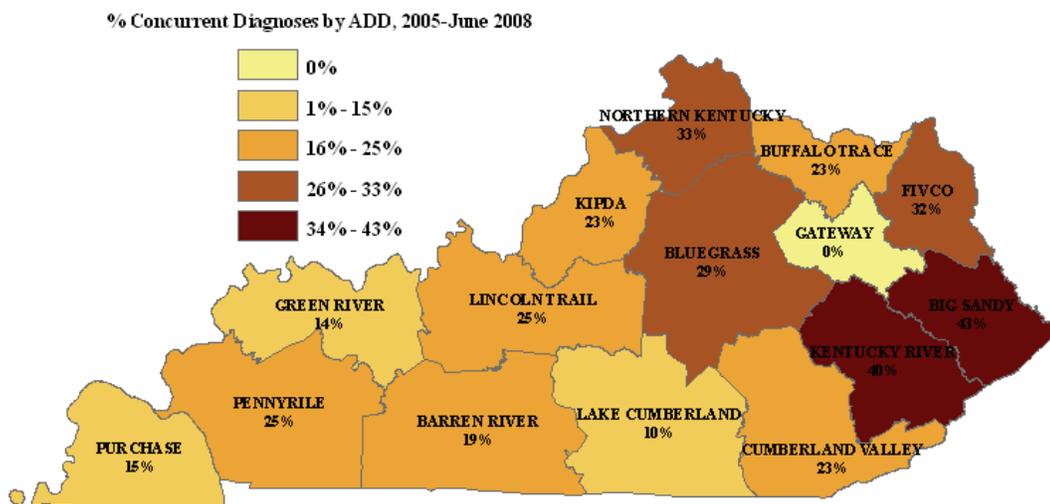


Figure 17 examines the variation by ADD in the proportion of cases within each ADD diagnosed concurrently with HIV and AIDS from 2005 to June 30, 2008. The proportion of HIV infections diagnosed concurrently with AIDS ranged from 0% to 43% among the ADDs. The greatest proportion of HIV infections diagnosed concurrently with AIDS (43%) occurred in the Big Sandy ADD in eastern Kentucky. However, there were only a total of seven HIV infections diagnosed in this ADD. The ADDs in northern Kentucky also had comparatively higher percentages of concurrent diagnoses.

# HIV Counseling and Testing Sites

## Ora-Sure

The Ora-Sure test determines if HIV antibodies are present in oral mucosal transudate (OMT) that has been collected from the lower cheek and gum. *This is NOT a saliva test since the specimen collected is not saliva.* In order to collect a sample, a nylon pad is placed between the lower gum and cheek for two to five minutes. The pad is salt laden which sets up a concentration gradient causing fluids to be absorbed from cells in the linings of the cheeks and gums. Results are generally available in three to five days. If your agency is interested in becoming an Ora-Sure site, please contact Tom Collins at (502) 564-6539.

## State Sponsored Ora-Sure Testing Sites\*

All state sponsored testing sites offer **free** confidential or anonymous HIV testing. Testing hours and locations may vary. **Please contact the center to verify whether an appointment is needed or if walk-ins are acceptable.**

AIDS Volunteers of Lexington (AVOL)  
263 North Limestone  
Lexington, KY 40507  
(859) 225-3000

Area Health Education Center-Covington  
1030 Old State Road  
Park Hills, KY 41011  
(859) 442-1191

Area Health Education Center-Lexington  
Black & Williams Neighborhood Center  
498 Georgetown Street  
Lexington, KY 40508  
(859) 281-6086

Area Health Education Center-Louisville  
Park Duvalle Community Health Center  
3015 Wilson Avenue  
Louisville, KY 40211  
(502) 774-4401 ext 1260  
(502) 776-5785

Barren River District Health Department  
1109 State Street  
Bowling Green, KY 42102  
(270) 781-8039

Bluegrass Farm Worker Clinic (BFWC)  
126 Cisco Road  
Lexington, KY 40504  
(859) 259-0717

Daviess County Health Department  
1600 Breckenridge  
Owensboro, KY 42302  
(270) 686-7744

Heartland CARES  
619 North 30th St  
Paducah, KY 42001  
(270) 444-8183

Kentucky Department for Public Health  
275 East Main Street  
Frankfort, Kentucky 40621  
(502) 564-6539 or (800) 420-7431

Lexington-Fayette County Health Department  
650 Newtown Pike  
Lexington, KY 40508  
(859) 288-2437

Louisville Metro Public Health and Wellness  
850 Barrett Avenue, Suite 301  
Louisville, KY 40204  
(502) 574-5600

\*Please note that this list only includes those testing sites that are funded by the Kentucky Department for Public Health to administer Ora-Sure testing and **IS NOT** an all inclusive list of testing centers in the Commonwealth of Kentucky.

# HIV Counseling and Testing Sites

## State Sponsored Ora-Sure Testing Sites\* continued

All state sponsored testing sites, offer **free** anonymous or confidential HIV testing. Testing hours and locations may vary. **Please contact the center to verify whether an appointment is needed or if walk-ins are acceptable.**

Matthew 25  
411 Letcher Street  
Henderson, KY 42420  
(270) 826-0200

Northern Kentucky District Health Department  
2388 Grandview Drive, Building A  
Fort Mitchell, KY 41017  
(859) 578-7660

Owensboro Task Force  
224 South Ewing Road  
Owensboro, KY 42301  
(270) 683-6018

Purchase District Health Department  
320 North 7th Street  
Mayfield, KY 42066  
(270) 247-1490

Volunteers of America—Louisville  
850 Barrett Avenue, Suite 302  
Louisville, KY 40204  
(502) 574-5373

Western Kentucky Univ. Health Services  
1906 College Heights Boulevard #8400  
Bowling Green, KY 42101-1041  
(270) 745-5033 or (270) 745-5653

WINGS Clinic  
550 South Jackson Street  
Louisville, KY 40292  
(502) 561-8844

\*Please note that this list only includes those testing sites that are funded by the Kentucky Department for Public Health to administer Ora-Sure testing and **IS NOT** an all inclusive list of testing centers in the Commonwealth of Kentucky.

# HIV Counseling and Testing Sites

## Ora-Quick

Ora-Quick tests are a type of screening performed on oral mucosal transudate (OMT) in which results are ready in 20 minutes. The oral fluid based rapid test received FDA approval on March 26, 2004. Several agencies working in association with the state HIV Prevention grant are currently using rapid testing. Other agencies are being encouraged to begin using rapid testing. If your agency is interested in becoming an Ora-Quick site, please contact Tom Collins at (502) 564-6539.

## State Sponsored Ora-Quick Testing Sites\*

All state sponsored testing sites, offer **free** anonymous or confidential HIV testing. Testing hours and locations may vary. **Please contact the center to verify whether an appointment is needed or if walk-ins are acceptable.**

Area Health Education Center-Louisville  
Park Duvalle Comm. Health Center  
3015 Wilson Avenue  
Louisville, KY 40211  
(502) 774-4401 ext 1260 or (502) 776-5785

Area Health Education Center-Covington  
1030 Old State Road  
Park Hills, KY 41011  
(859) 442-1191

Area Health Education Center-Lexington  
Black & Williams Neighborhood Center  
498 Georgetown Street  
Lexington, KY 40508  
(859) 281-6086

AIDS Volunteers of Lexington (AVOL)  
263 North Limestone  
Lexington, KY 40507  
(859) 225-3000

Bluegrass Farm Worker Clinic  
126 Cisco Road  
Lexington, KY 40504  
(859) 259-0717

Heartland CARES  
619 North 30th St  
Paducah, KY 42001  
(270) 444-8183

Kentucky Department for Public Health  
275 East Main Street  
Frankfort, Kentucky 40621  
(502) 564-6539 or (800) 420-7431

Lexington-Fayette County Health Department  
650 Newtown Pike  
Lexington, KY 40508  
(859) 288-2437

Louisville Metro Public Health and Wellness  
850 Barrett Avenue, Suite 301  
Louisville, KY 40204  
(502) 574-5600

Matthew 25  
411 Letcher Street  
Henderson, KY 42420  
(270) 826-0200

Northern Kentucky District Health Dept.  
2388 Grandview Drive, Building A  
Fort Mitchell, KY 41017  
(859) 578-7660

Planned Parenthood—Louisville  
1025 S. Second Street  
Louisville, KY 40203  
(502) 584-2473

Planned Parenthood of the Bluegrass  
508 West 2nd Street  
Lexington, KY 40508  
(859) 252-8494

Volunteers of America—Louisville  
850 Barrett Avenue, Suite 302  
Louisville, KY 40204  
(502) 574-5373

\*Please note that this list only includes those testing sites that are funded by the Kentucky Department for Public Health to administer Ora-Quick testing and **IS NOT** an all inclusive list of testing centers in the Commonwealth of Kentucky.