European Centre for Disease Prevention and Control

An EU agency dedicated to the prevention and control of communicable diseases

- 28 EU Member States, plus EEA (Iceland, Liechtenstein, Norway)
- Surveillance, risk assessment, scientific advice
- Located in Stockholm
Surveillance of HIV/AIDS in Europe

- Joint ECDC/WHO Regional Office for Europe
- 53 countries of Europe and Central Asia
• Who are diagnosed with HIV in Europe?
  • Overview of HIV in the European Region
  • Focus on MSM
  • Focus on migrants

• Who are not diagnosed and what are the consequences?

• Challenges for HIV and public health nursing in the European Region
Rate of new HIV infections by year of diagnosis, in the EU/EEA, 1984–2012

### HIV infections diagnosed in the European Region, 2012

<table>
<thead>
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<th></th>
<th>West</th>
<th>Centre</th>
<th>East</th>
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</thead>
<tbody>
<tr>
<td>Number of HIV diagnoses</td>
<td>&gt; 130 000 in 2012</td>
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<tr>
<td>Diagnoses per 100 000 population</td>
<td>6.6</td>
<td>1.9</td>
<td>22</td>
</tr>
<tr>
<td>Male-to-female ratio</td>
<td>3.1</td>
<td>4.5</td>
<td>1.4</td>
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</tbody>
</table>


No data from Russia and Uzbekistan; countries with no data on age or transmission mode excluded.
HIV infections diagnosed in Europe, 2012
per 100 000 population

HIV infections by transmission mode
WHO European Region East, 2006-2012

Group with most infections diagnosed: Heterosexuals (partners to PWID and others)

Data not reported or not available from Estonia, Russia and Uzbekistan

HIV infections by transmission mode, WHO European Region Centre, 2006-2012

Data from Poland and Turkey not included

HIV infections by transmission mode
EU/EEA, 2004-2012

Group with most infections diagnosed: Men who have sex with men

Men who have sex with men
HIV infections diagnosed among men who have sex with men, 2012

≥ 5 per 100 000
3 to < 5 per 100 000
1 to < 3 per 100 000
< 1 per 100 000
Not included

## Proportion of all new HIV diagnoses among MSM by country, EU/EEA, 2013

<table>
<thead>
<tr>
<th>Proportion</th>
<th>Countries</th>
</tr>
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<tbody>
<tr>
<td>&gt; 50%</td>
<td>Croatia, Czech Republic, Slovakia, Netherlands, Hungary, Cyprus, Slovenia, Germany, Spain, Austria</td>
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<tr>
<td>30-50%</td>
<td>Denmark, United Kingdom, Luxembourg, Ireland, Malta, Norway, Italy, Belgium, Bulgaria, Greece, Sweden, Portugal</td>
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<tr>
<td>&lt;30%</td>
<td>Finland, France, Poland, Lithuania, Romania, Latvia, Estonia, Iceland</td>
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</tbody>
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HIV diagnoses among MSM by year and age group, 15 EU countries, 2003-2012 (n=59 992)

Source: Janiec et al (2013)
Prevention and care must be adapted to the country setting and reality

Proportion of gay male respondents who state that **no** medical staff/health care provider is aware that they are gay.
Migrants
Proportion of new HIV diagnoses in migrants
Among all cases reported, 2013 (preliminary data)

- Cases originating from countries with generalised HIV epidemics
- Cases originating from other countries

31% not born in the country in which they were diagnosed with HIV
HIV infections reported among migrants by region of origin, EU/EEA, 2007-2012

Source: Hernando et al, unpublished data 2014
Route of transmission among migrant HIV cases by region of origin, EU/EEA, 2007-2011

- Half of HIV infections diagnosed in 2012 among heterosexuals board abroad were likely acquired in the UK (Public Health England, 2013)

- Scale up of migrant-sensitive prevention programmes is needed in Europe

Source: ECDC (2014). Burden of infectious disease among migrant populations in the EU/EEA
Availability of ART for undocumented migrants living in Europe, 2012

Who is not diagnosed and what are the consequences?
Late HIV diagnosis by transmission mode
EU/EEA, 2012 (n=16 150)

49% of all cases diagnosed late

Increased morbidity and mortality are associated with late diagnosis

Figure 11: One-year mortality among adults newly diagnosed with HIV by CD4 count at diagnosis: UK, 2010

There were 16 500 new AIDS diagnoses in Europe in 2012

Data from Sweden, Russia and Uzbekistan not included. Data from Ukraine obtained through the Ukrainian Centre for Socially Dangerous Diseases Control

Increased efforts needed from nurses and other health care personnel, together with community organisations to carry out more HIV testing.

Ranges from 8 to 45% among countries in Europe with estimates.
## Proportion of persons living with HIV estimated* to be on ART, 2012

| > 85% | Austria, Belarus, Belgium, Bosnia Herzegovina, Bulgaria, Croatia, Czech Republic, Finland, FYROM, Georgia, Germany, Greece, Hungary, Kosovo, Montenegro, Netherlands, Poland, Portugal, Romania, Serbia, Slovakia, Sweden, United Kingdom |
| < 85% | Azerbaijan, Kyrgyzstan, Moldova, Tajikistan, Ukraine, Uzbekistan |

* Country reported estimates; some countries could not provide estimates and many provided the proportion of diagnosed PLHIV on treatment

Source: ECDC; Dublin Declaration Monitoring 2013
Nursing role critical factor in linkage to care and adherence support for people living with HIV

25 -75 % persons living with HIV in Europe have undetectable viral load

- Pop. living with HIV: 100%
- HIV diagnosed: 80%
- Retained in care: 67%
- On ART: 60%
- Undetectable VL: 51%
HIV Epidemic in Europe

The rate of HIV diagnoses in Europe has not declined and has increased in the Eastern part of the region.

Late diagnosis is a major issue: half of cases are diagnosed CD4<350/mm³.

Heterogeneity exists in HIV epidemics across Europe.

**Western Europe:**
- MSM account for an increasing majority of new diagnoses.
- Migrants account for an important proportion of HIV cases.
  - Evidence of HIV acquisition post-migration.
HIV Epidemic in Europe

Central Europe
- Growing cases among MSM
  - stigma reduction, health care worker training, scaling up gay-friendly services and support to community organisations

Eastern Europe
- Still very high numbers of cases among PWID and growing number among sexual partners of PWID
  - Harm reduction services delivered at scale
  - Partner testing and attention to heterosexual transmission
- Small but increasing numbers of MSM
  - stigma reduction, health care worker training, scaling up gay-friendly services and support to community organisations
Remaining challenges

• **Stigma reduction**
  ✓ Normalising HIV testing, disclosure; ‘layered stigma’; eliminating health care worker-driven stigma

• Continued need to [scale up comprehensive and effective HIV prevention programmes](#)
  ✓ Targeted to populations in which infections are occurring

• Addressing the critical issue of [late diagnosis](#) of HIV infection
  ✓ Increased, routine HIV testing in community and clinical

• Delivering [treatment to all persons in need](#) in the region
  ✓ Eastern part of the region and undocumented migrants
Acknowledgements:

HIV Surveillance Focal Points for the EU/EEA and the WHO Region

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