



90-90-90 Targets Update

July 21, 2019 • Mexico City

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Ending the HIV Epidemic in New York City

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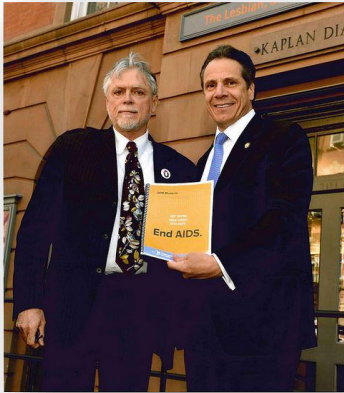
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New York State Blueprint for Ending the Epidemic



- In April 2015, Governor Andrew Cuomo released the New York State Blueprint for Ending the Epidemic, a set of recommendations by community members, government officials, and providers, expanding on his 2014 three-point plan to:
- Identify people with HIV who remain undiagnosed and link them to care;
- Link and retain people diagnosed with HIV in care to maximize virus suppression so they remain healthy and prevent further transmission; and
- Provide access to PrEP for people at high risk for HIV infection.

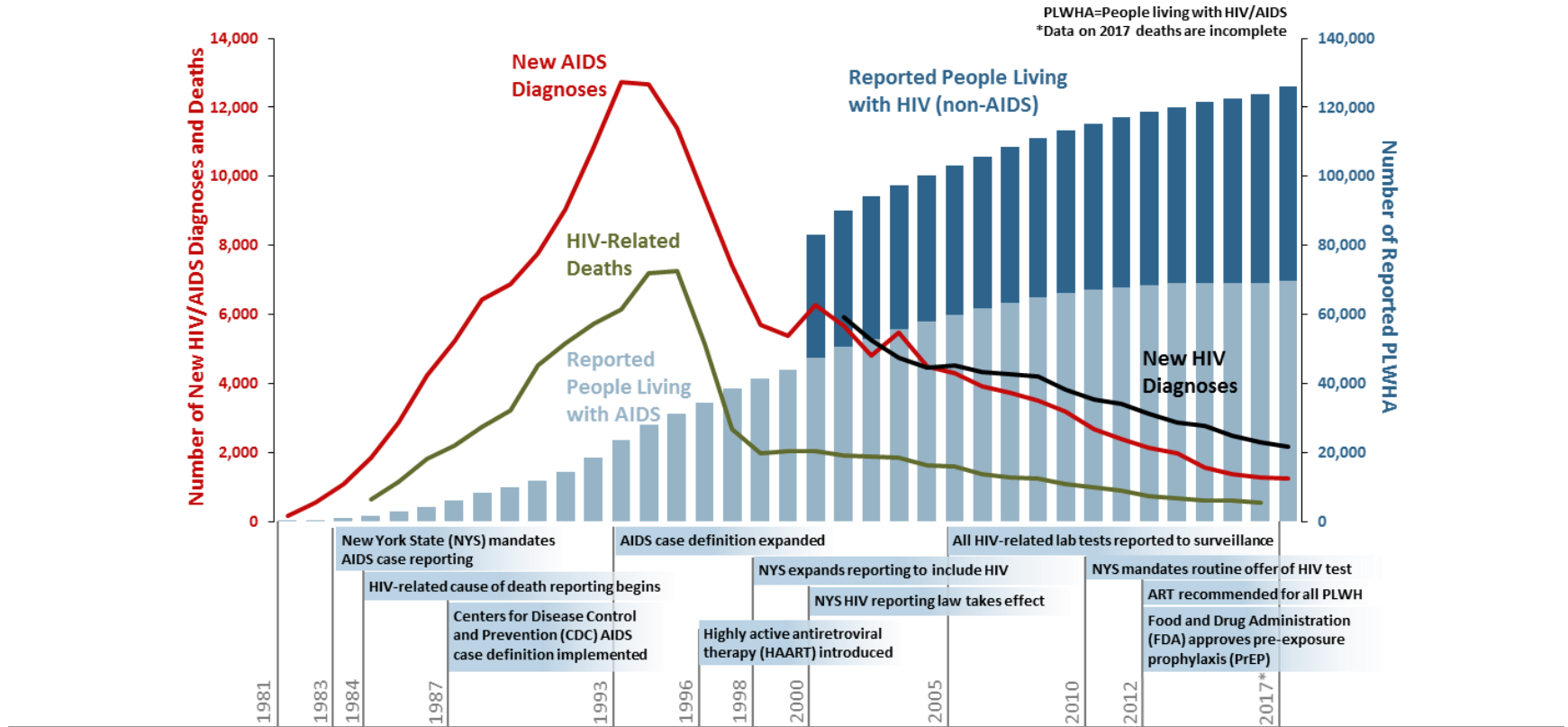
New York City Ending the Epidemic Plan



- At the World AIDS Day 2015 citywide event, Mayor Bill de Blasio announced the New York City Ending the Epidemic Plan, a four-part strategy building upon the New York State Blueprint to:
- Increase access to HIV prevention services, including PrEP and PEP;
- Promote optimal treatment for all New Yorkers with HIV;
- Enhance methods for tracing HIV transmission; and
- Advance sexual health equity for all New Yorkers by promoting access to comprehensive, affirming sexual health care through targeted outreach to priority populations and enhancements to the Health Department's Sexual Health Clinics.

New York City became a Fast Track City in June, 2016.

HISTORY OF THE HIV EPIDEMIC IN NYC

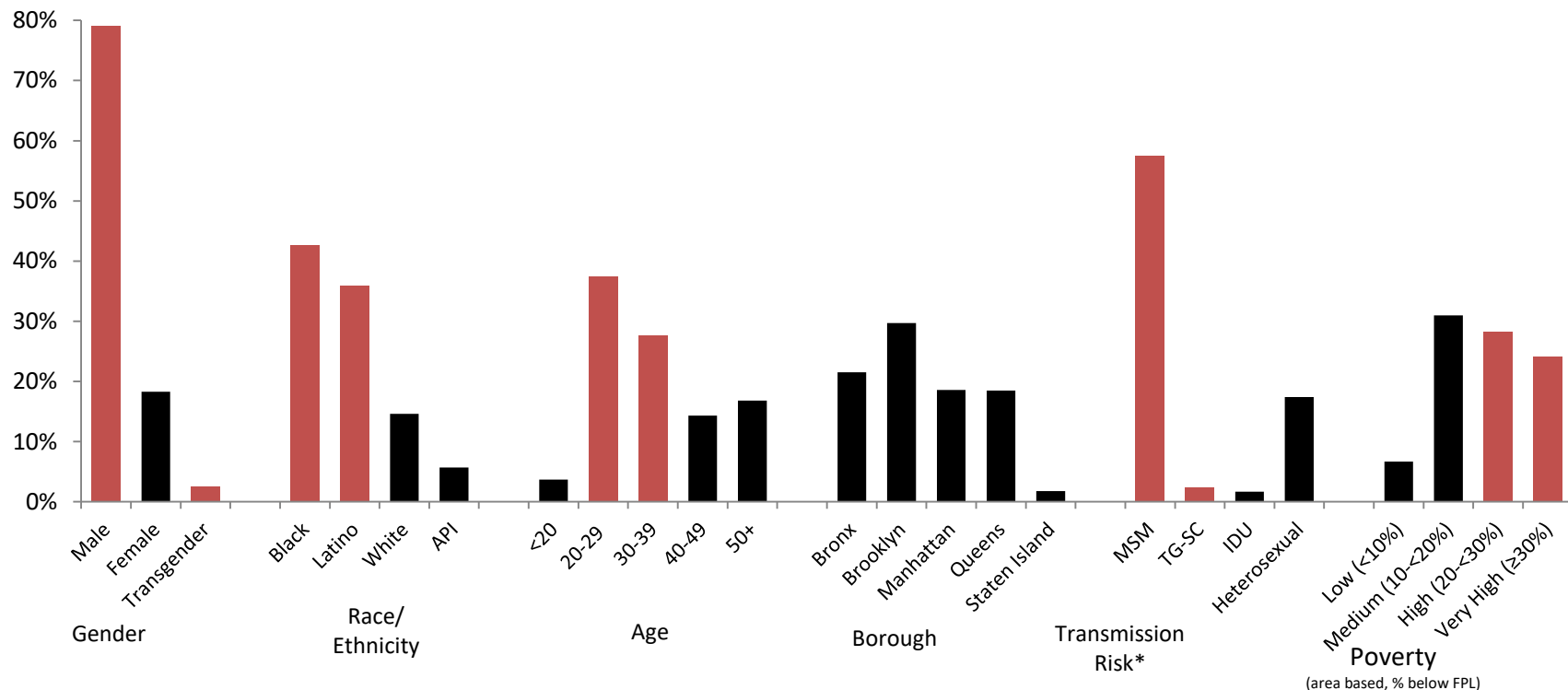


HIV/AIDS in New York City, Basic Statistics, 2017

- **2,157 new HIV diagnoses**
 - 25.3 new HIV diagnoses per 100,000 population
 - 1,779 HIV without AIDS
 - 378 HIV concurrent with AIDS (17.5%)
- **1,239 new AIDS diagnoses**
- **125,884 persons diagnosed, reported, presumed to be living with HIV/AIDS**
- **1,343 deaths among people with HIV/AIDS ¹**
 - Age-adjusted death rate: 7.0 per 1,000 people with HIV/AIDS

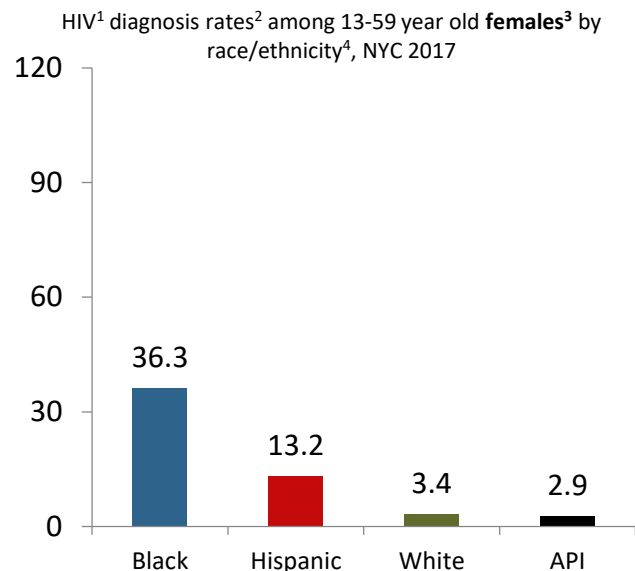
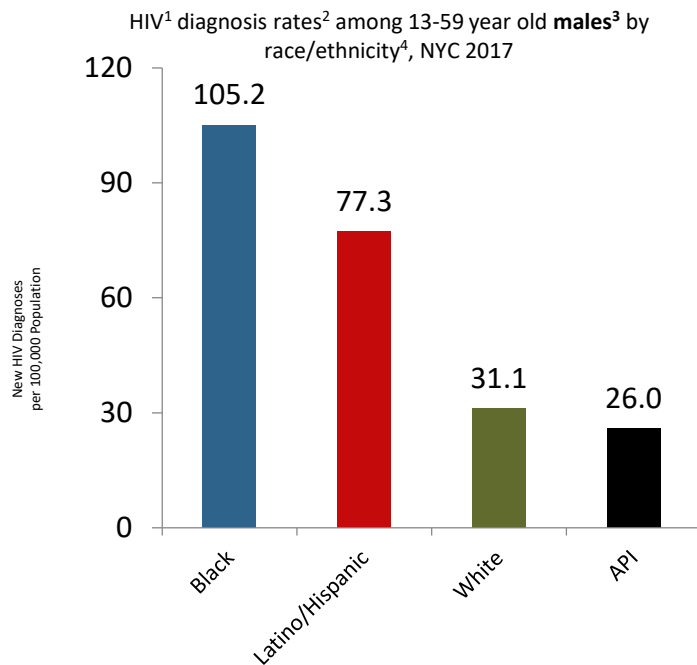
Diagnosis rate calculated using DOHMH 2016 population estimate, modified from US Census Bureau intercensal population estimates, updated September 2017. ¹Death rate age-adjusted to the NYC Census 2010 population. Death data for 2017 are incomplete. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018.

New HIV Diagnoses, NYC, 2017



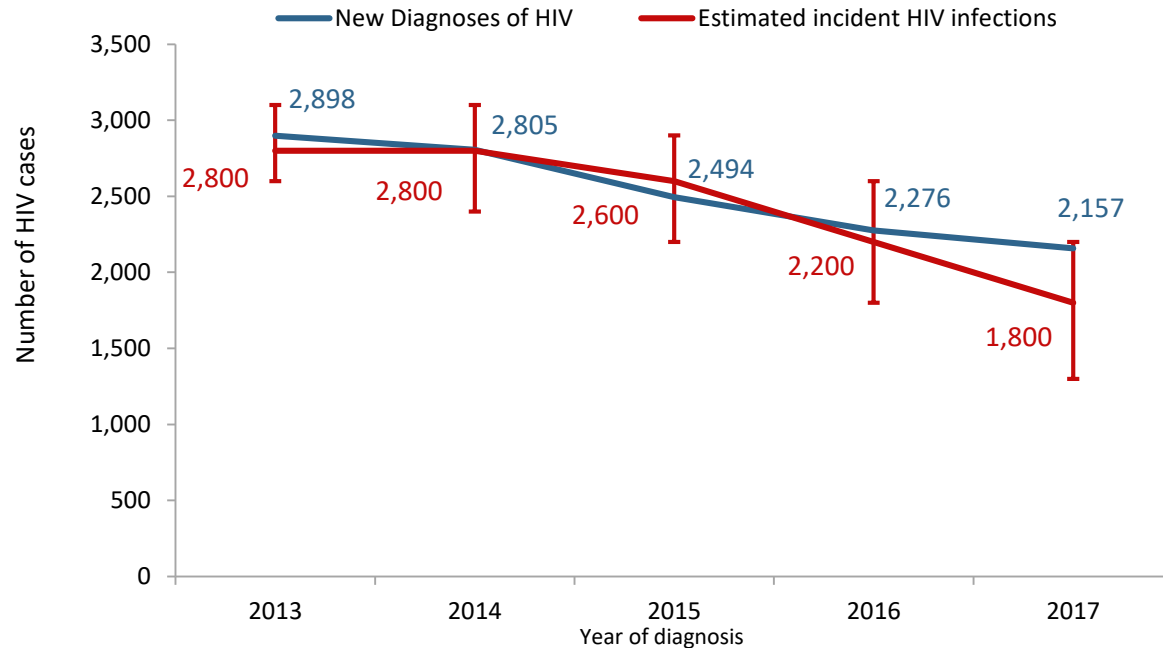
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018. *MSM=Men who have sex with men, TG-SC=Transgender people with sexual contact, IDU=People with injection drug use history

HIV Diagnosis Rates¹ among Men and Women in NYC by Race/Ethnicity², 2017



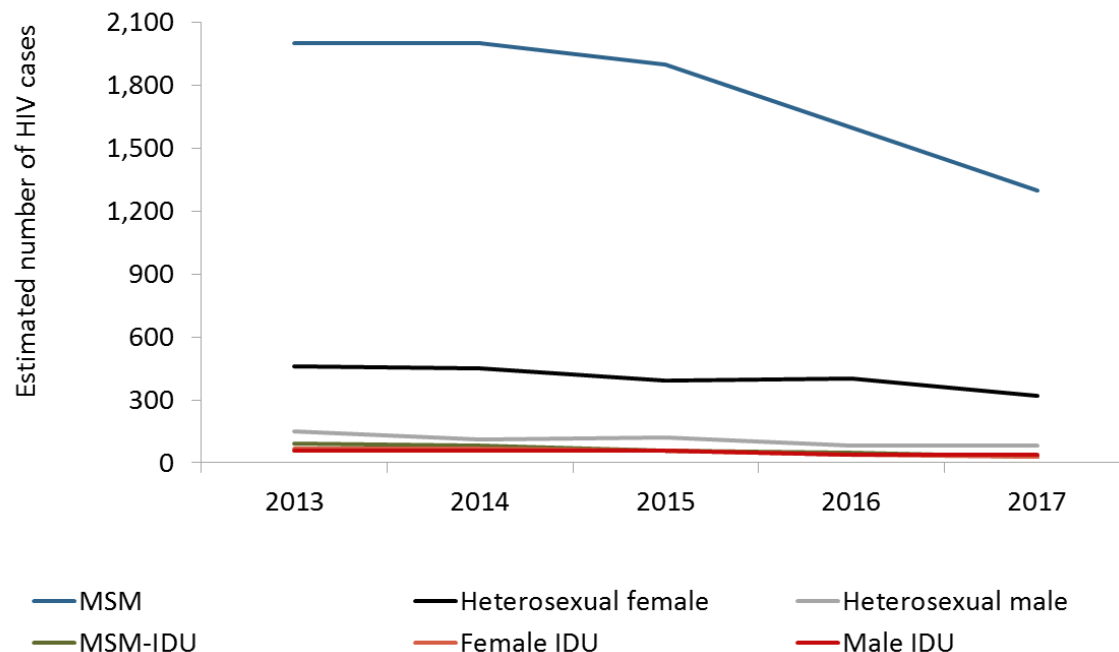
API=Asian/Pacific Islander. ¹Includes diagnoses of HIV without AIDS and HIV concurrent with AIDS. ²Rates calculated using Health Department 2016 population estimates, modified from U.S. Census Bureau intercensal population estimates, updated September 2017. ³Includes transgender men. ⁴Native American and multiracial groups not shown because of small numbers. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018.

New Diagnoses and Incidence Estimates¹ NYC, 2013-2017²



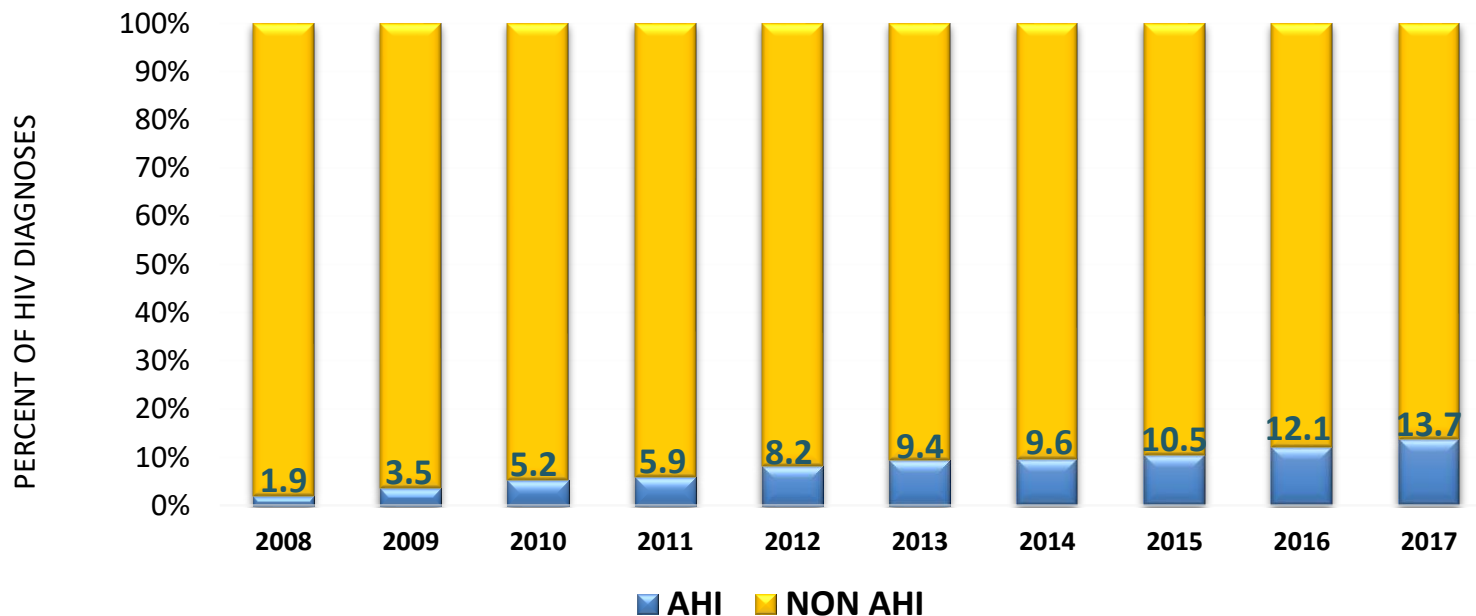
¹Using the method in: Song R, et al. Using CD4 data to estimate HIV incidence, prevalence, and percent of undiagnosed infections in the United States. *J Acquir Immune Defic Syndr* 2017;74(1):3-9. ²2017 incidence estimates are preliminary. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018.

Trends in estimated incident HIV infections¹ by sex at birth and transmission risk, NYC 2013-2017



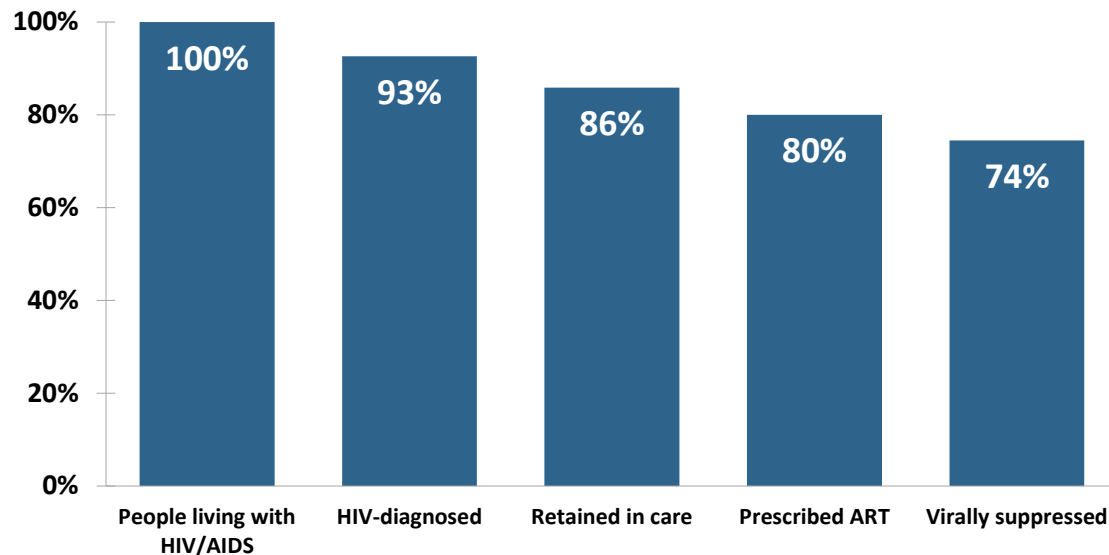
¹Using the method in: Song R, et al., *J Acquir Immune Defic Syndr* 2017;74(1):3-9. ²2017 incidence estimates are preliminary. As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018.

Proportion of new HIV diagnoses determined to be AHI, NYC, 2008-17



As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018.

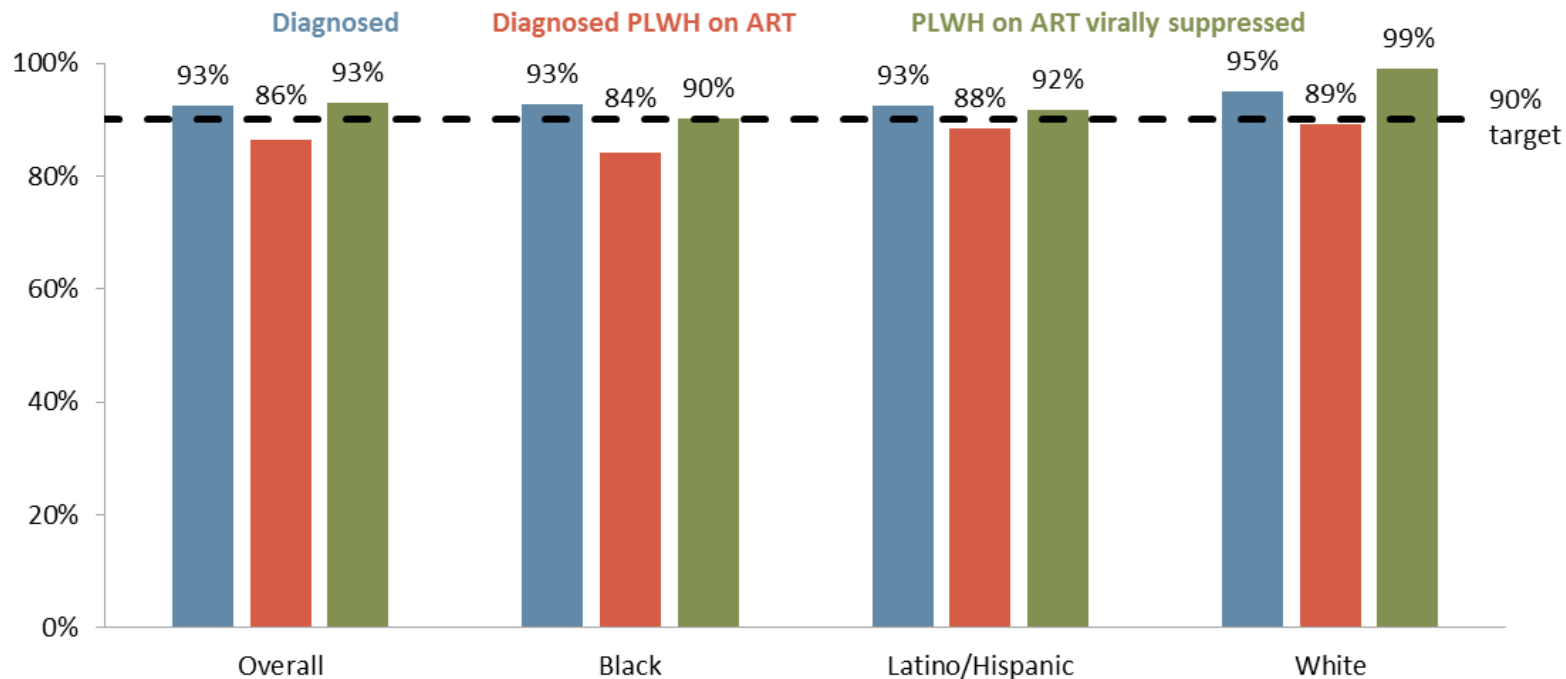
Proportion of PLWH in NYC Engaged in Selected Stages of the HIV Care Continuum, 2017



Of approximately 90,500 PLWHA in NYC in 2017, 74% had a suppressed viral load.

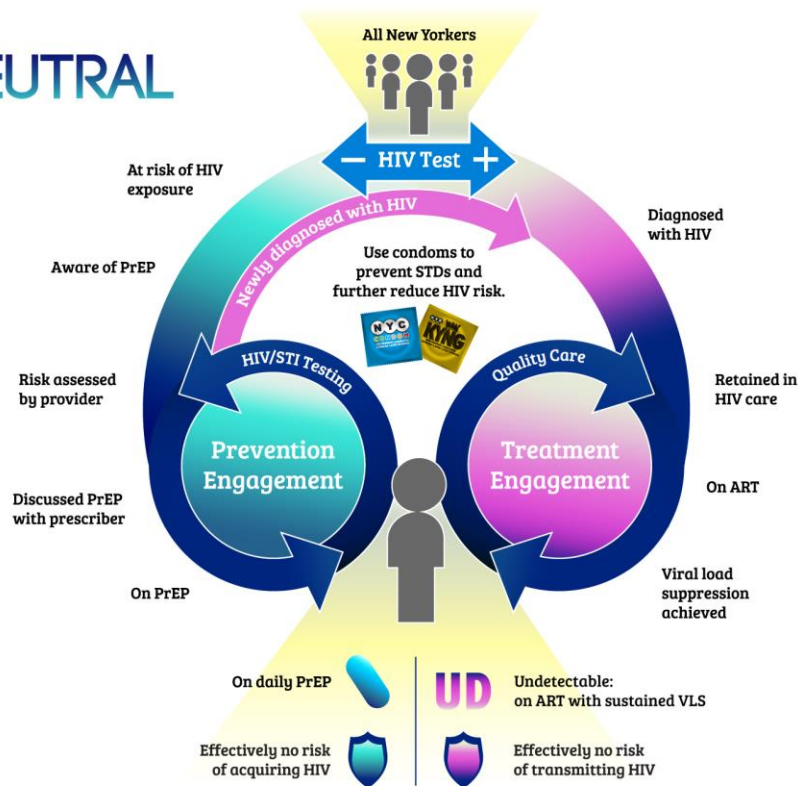
As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018.

UNAIDS 90-90-90 targets for PLWH in NYC, overall and by race/ethnicity, 2017



As reported to the New York City Department of Health and Mental Hygiene by March 31, 2018.

NEW YORK CITY'S HIV STATUS NEUTRAL PREVENTION & TREATMENT CYCLE



People at risk of HIV exposure **taking daily PrEP**
and people with HIV **with sustained viral load
suppression** do not acquire or transmit HIV.

What does this all mean?

- We are diagnosing prevalent HIV infections at a stable rate earlier and more efficiently
 - Proportion of acute infections detected increasing
 - Diagnosis at earlier stage of infection, before people get ill. 17.5 % concurrent AIDS
- Decreasing incidence means that people are not getting HIV
 - U=U continues to work
 - PrEP in MSM is likely driving down transmission
- Areas we are working to improve
 - PrEP in cis Women and TGNC People
 - Latino MSM- ¡Listos! and more!

NYC IS ON TRACK FOR 2020!

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THANK YOU!