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90-90-90 Targets Update

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90-90-90 Targets Update

Goals and Progress in the United States: 90-90-90 and Beyond

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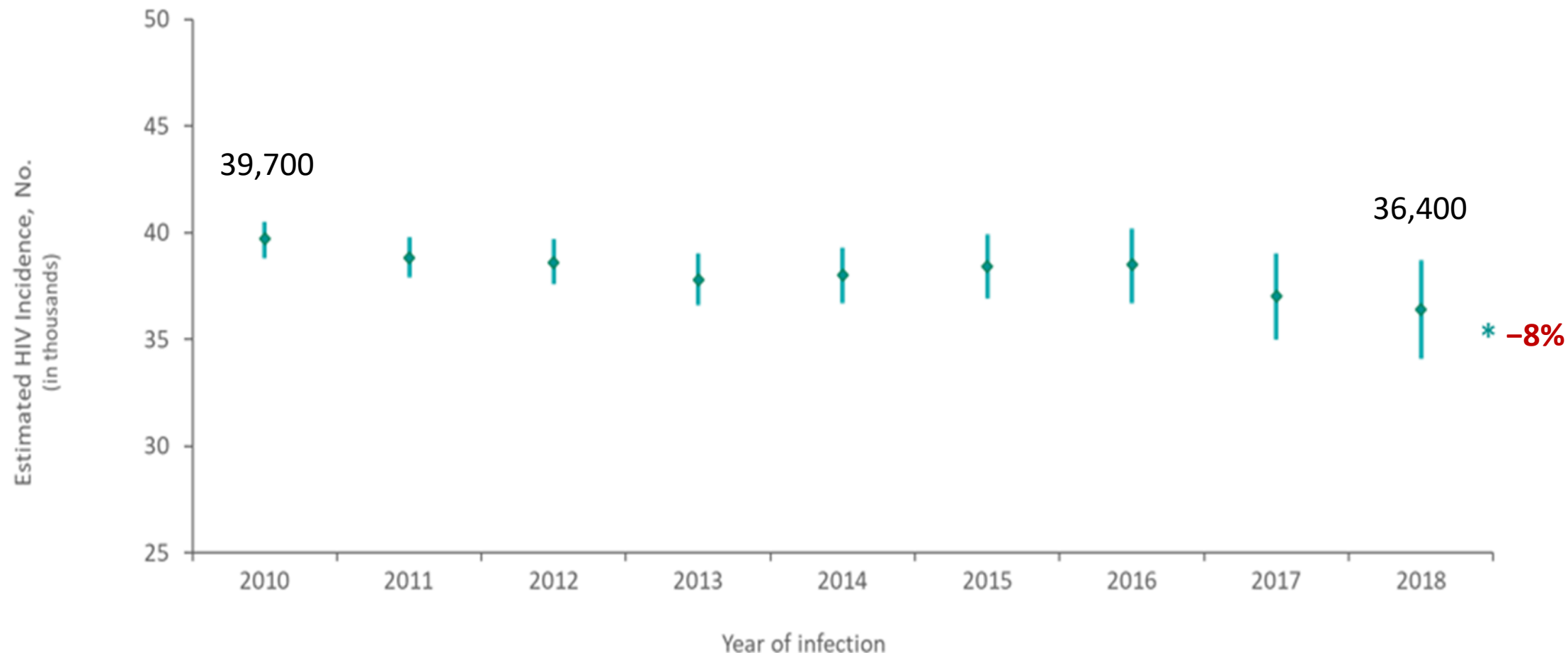
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Estimated HIV Incidence among Persons Aged ≥ 13 Years 2010–2018—United States



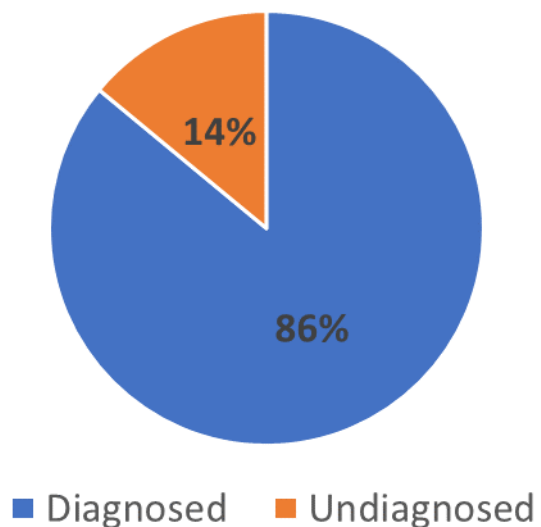
Note. Estimates were derived from a CD4 depletion model using HIV surveillance data. Bars indicate the range of the lower and upper bounds of the 95% confidence intervals for the point estimate.

* Difference from the 2010 estimate was deemed statistically significant ($P < .05$).

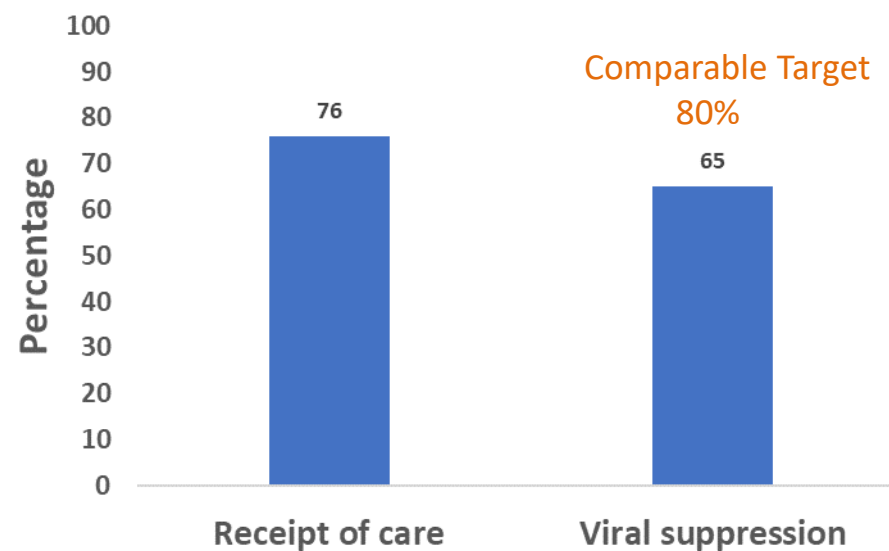
90-90-90 in the United States

Diagnosed Infection, Receipt of Care and Viral Suppression—2018

Persons with HIV



Persons with diagnosed HIV



- Data from 41 States and the District of Columbia
- Receipt of medical care defined as ≥ 1 test (CD4 or VL) in 2018
- Viral suppression defined as < 200 copies/mL on most recent VL test in 2018

Ending the HIV Epidemic: A Plan for America

GOAL

reaching
75%
reduction
in new HIV
infections
by 2025
and at least
90%
reduction
by 2030.



IMPLEMENTATION STRATEGY



Diagnose all people with HIV as early as possible after infection.

Treat the infection rapidly and effectively to achieve sustained viral suppression.



Prevent new HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs).

Respond quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them.



TARGET

95%

Diagnosed

95%

Viral suppression

50%

PrEP coverage

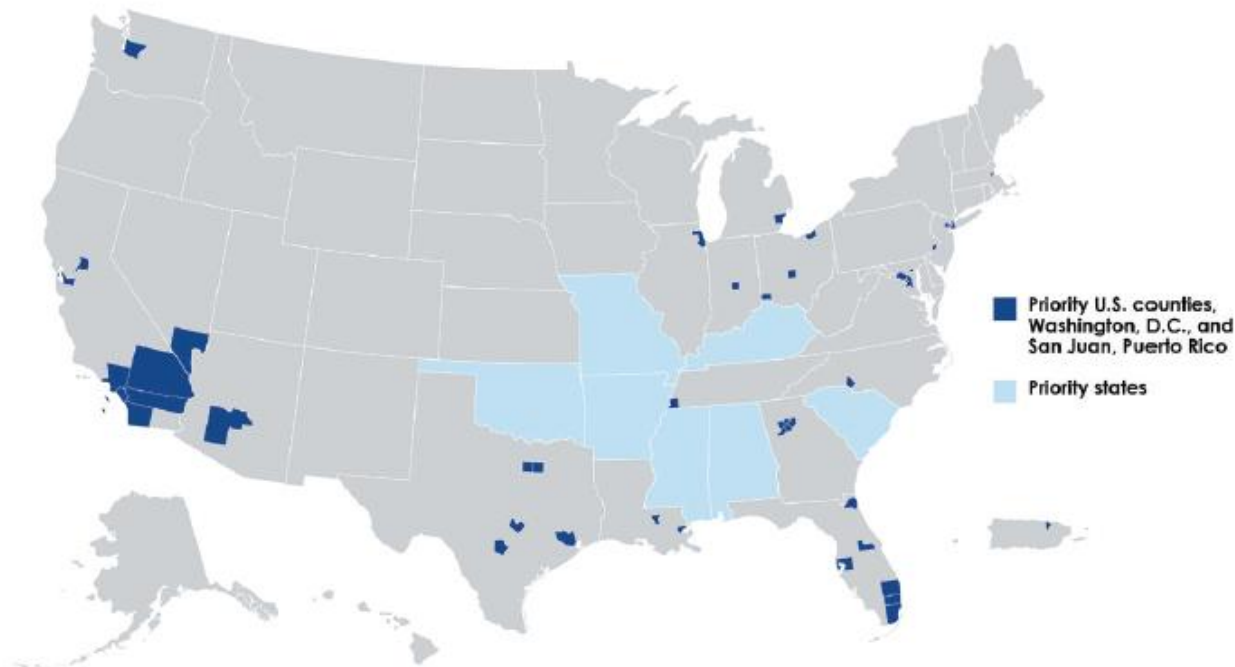
<https://files.hiv.gov/s3fs-public/ending-the-hiv-epidemic-flyer.pdf>

MMWR Morb Mortal Wkly Rep 2019;68:1117–1123.



National Targets, Local Intervention

The Initiative is focusing resources on areas where HIV transmission occurs most frequently.

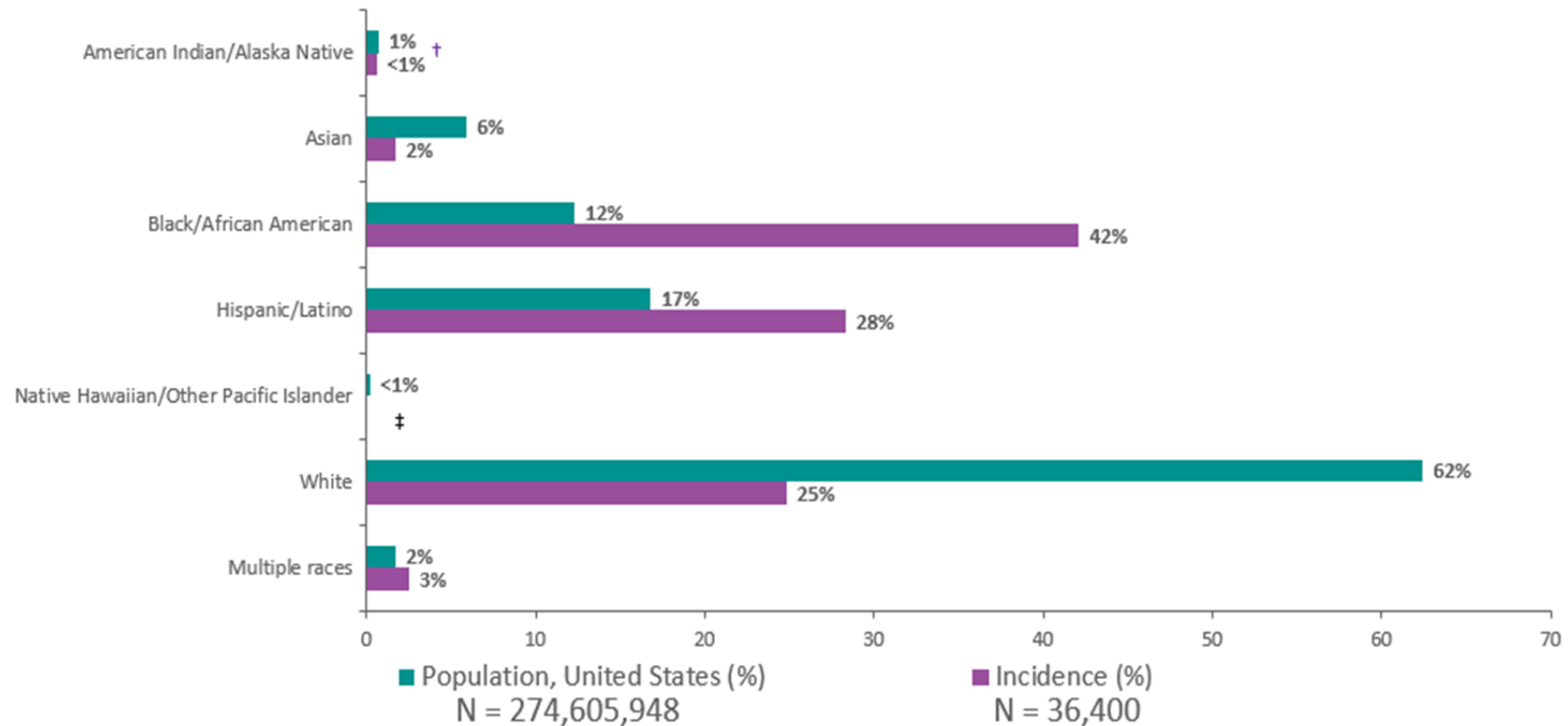


More than 50% of new HIV diagnoses* occurred in only 48 counties, Washington, D.C., and San Juan, Puerto Rico. In addition, 7 states have a substantial rural burden – with over 75 cases and 10% or more of their diagnoses in rural areas.

*2016-2017 data

National Targets, Addressing Disparities

Estimated HIV Incidence and Population among Persons Aged ≥ 13 Years by Race/Ethnicity, 2018—United States



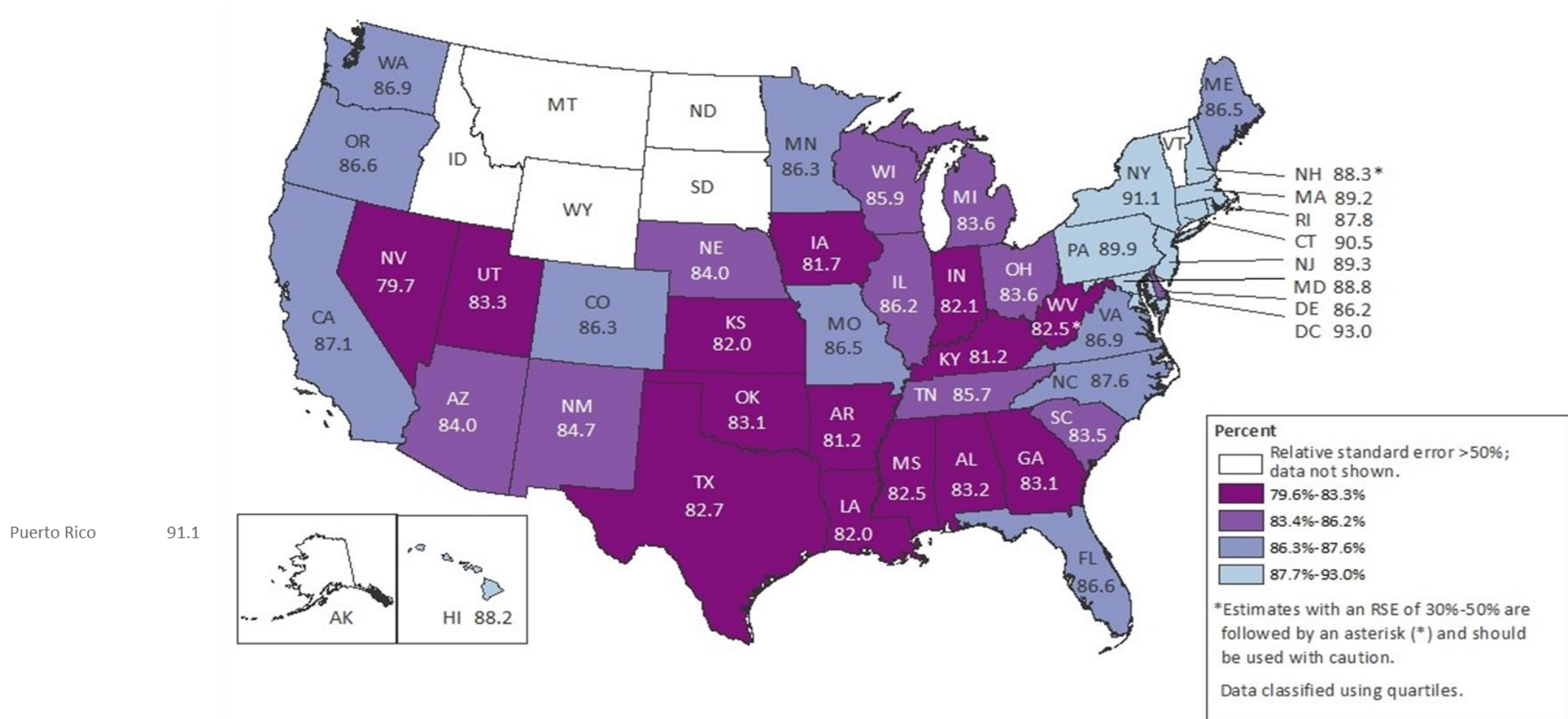
Note. Estimates were derived from a CD4 depletion model using HIV surveillance data. Hispanics/Latinos can be of any race.

[†] Estimate should be used with caution; relative standard error is 30%–50%.

[‡] Incidence estimate is not provided for Native Hawaiians/other Pacific Islanders; relative standard error is >50%.

Diagnosed Infection among Persons Aged ≥13 Years Living with Diagnosed or Undiagnosed HIV Infection, 2018—United States

Total = 86.2% †

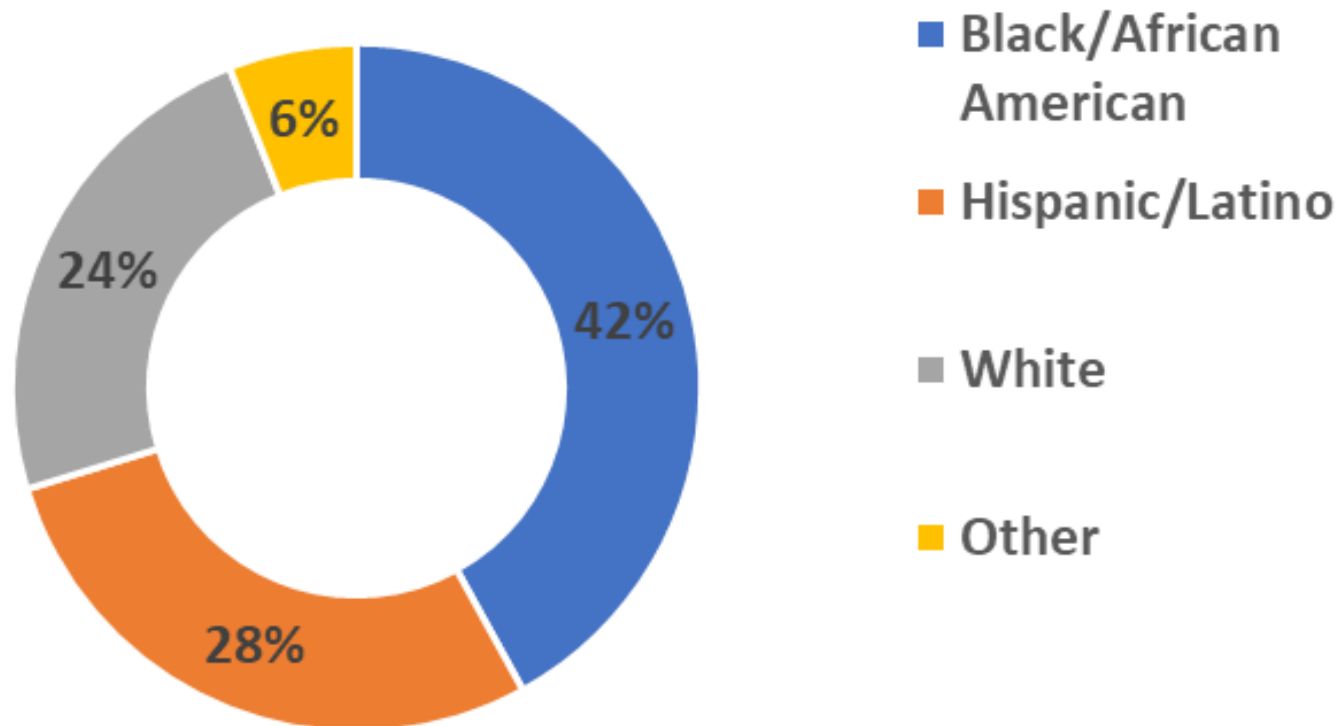


Note. Estimates were derived from a CD4 depletion model using HIV surveillance data. Estimates for the year 2018 are preliminary and based on deaths reported to CDC through December 2019. Estimates for Alabama, Oklahoma, and South Carolina should be interpreted with caution due to incomplete death ascertainment.

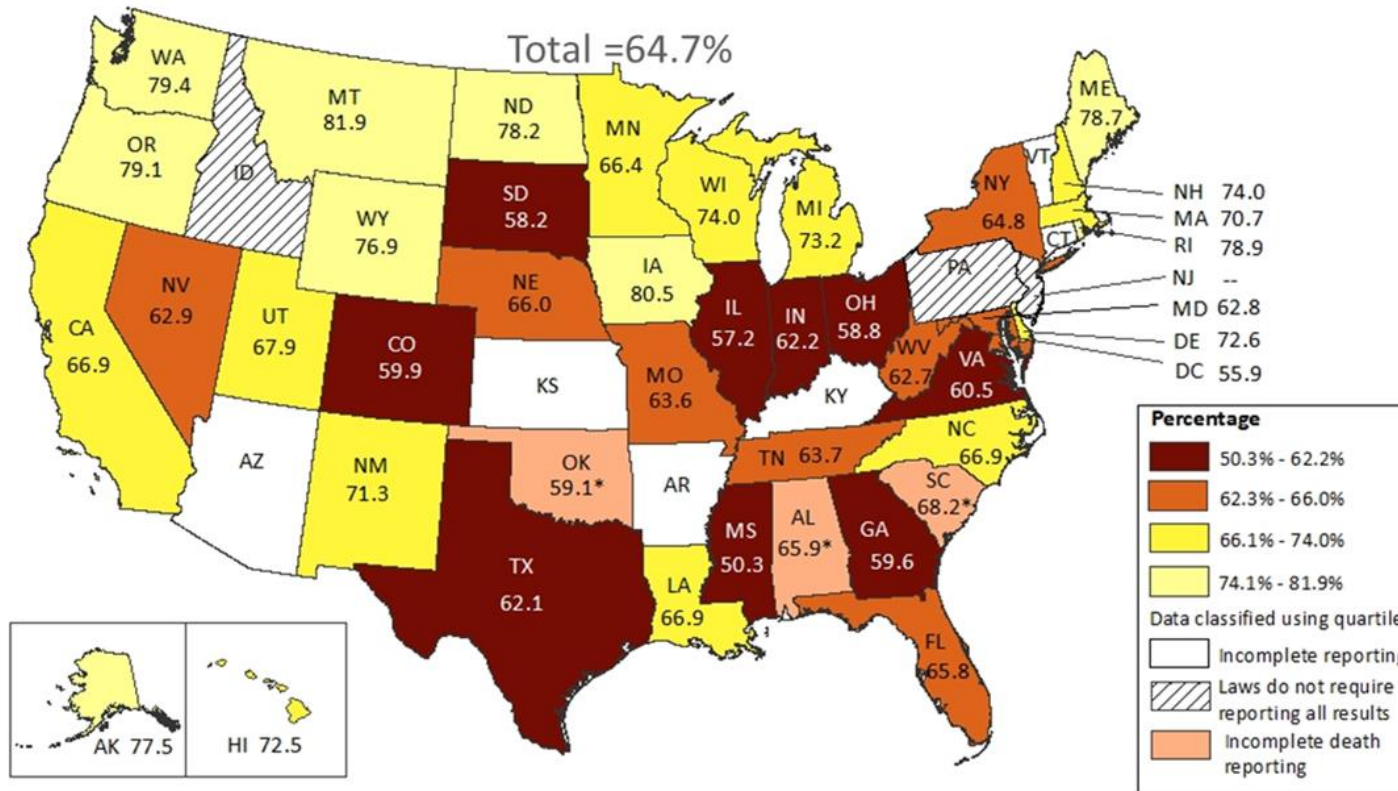
†Total estimate for the United States does not include data for Puerto Rico.

Undiagnosed Infections, United States—2018

N = 161,800



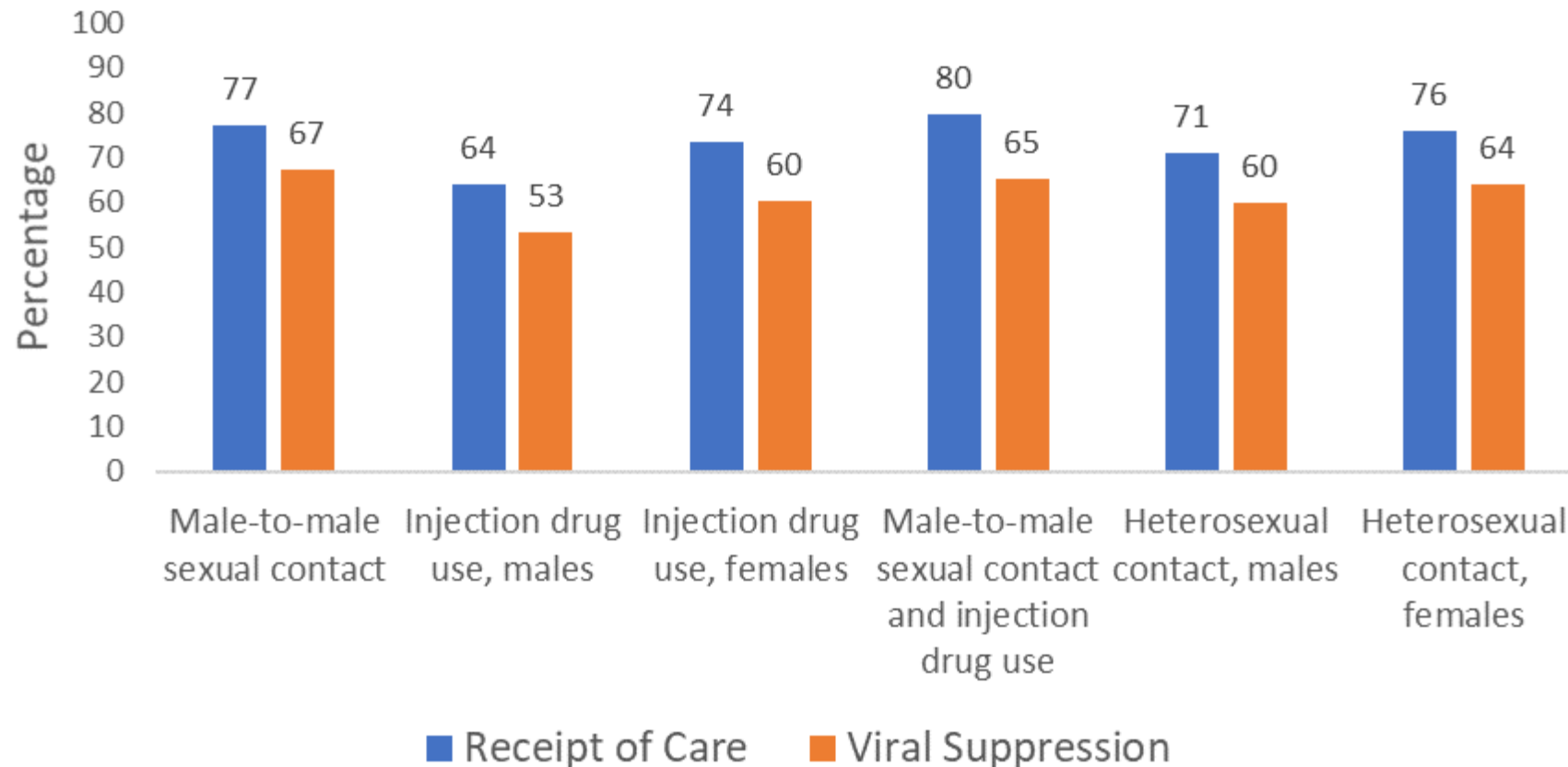
Viral Suppression among Persons Aged ≥ 13 Years Living with Diagnosed HIV Infection, 2018—41 States and the District of Columbia



- 2 jurisdictions met target of $\geq 80\%$ VS among persons with diagnosed HIV
- Among persons in care, VS was 85%
- Among persons in care, in 12 jurisdictions VS was $\geq 90\%$

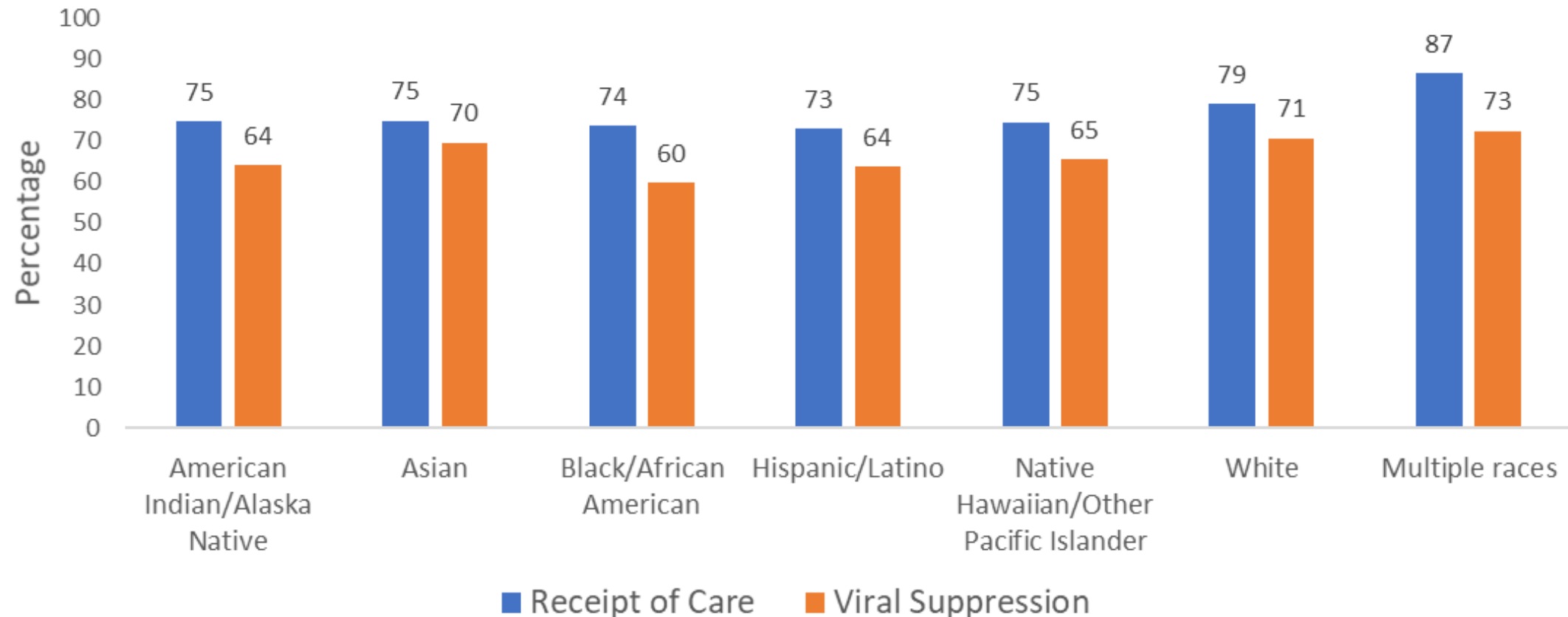
Note. Viral suppression was defined as <200 copies/mL on the most recent VL test in 2018. Residence was based on most recent known address as of year-end 2018. Data for the year 2018 are preliminary and based on death data received by CDC as of December 2019. Due to incomplete reporting of deaths for the year 2018, data for Alabama, Oklahoma, and South Carolina should be interpreted with caution.

Receipt of HIV Medical Care and Viral Suppression among Persons Aged ≥ 13 Years Living with Diagnosed HIV Infection, by Transmission Category, 2018—41 States and the District of Columbia



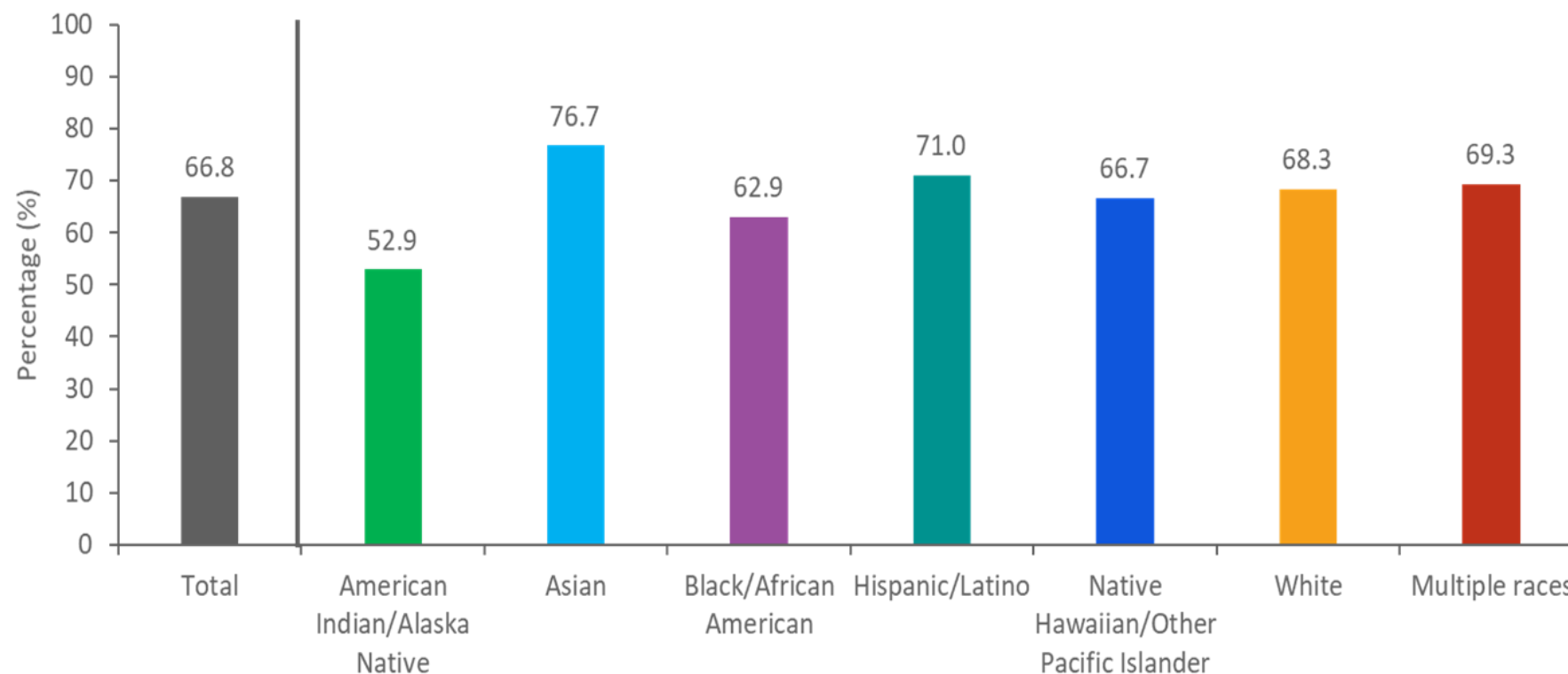
Note. Receipt of medical care was defined as ≥ 1 test (CD4 or VL) in 2018. Viral suppression was defined as < 200 copies/mL on the most recent VL test in 2018. Asian includes Asian/Pacific Islander legacy cases. Hispanics/Latinos can be of any race.

Receipt of HIV Medical Care and Viral Suppression among Persons Aged ≥ 13 Years Living with Diagnosed HIV Infection, by Race/ethnicity, 2018—41 States and the District of Columbia



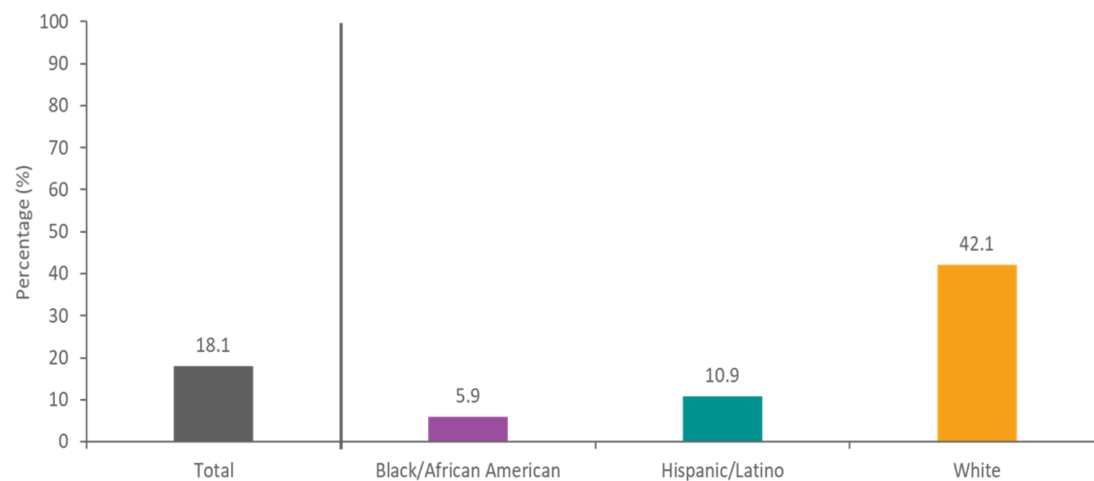
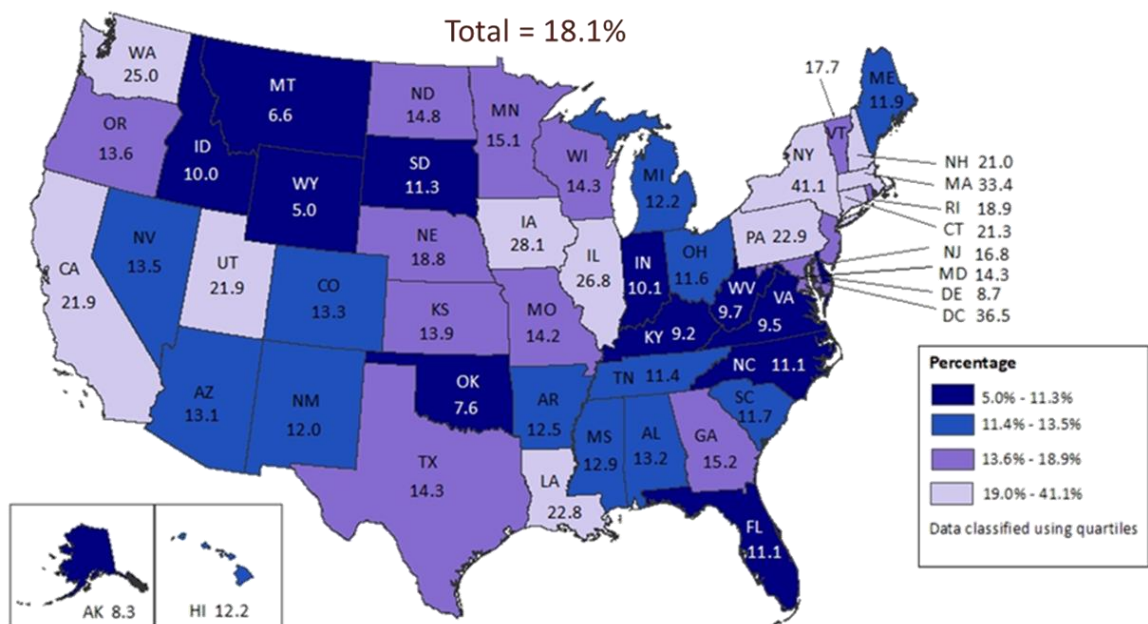
Note. Receipt of medical care was defined as ≥ 1 test (CD4 or VL) in 2018. Viral suppression was defined as < 200 copies/mL on the most recent VL test in 2018. Asian includes Asian/Pacific Islander legacy cases. Hispanics/Latinos can be of any race.

Viral Suppression within 6 Months of HIV Diagnosis among Persons Aged ≥ 13 Years, by Race/Ethnicity—41 States and the District of Columbia



Note. Viral suppression was defined as <200 copies/mL on a VL test within 6 months of HIV diagnosis in 2018.

PrEP Coverage among Persons Aged ≥16 Years, 2018—United States



Abbreviation: PrEP, preexposure prophylaxis.

Note. PrEP coverage, reported as a percentage, was calculated as the number who have been prescribed PrEP divided by the estimated number of persons who had indications for PrEP. Race/ethnicity data were only available for 35% of persons prescribed PrEP in 2018. Number prescribed PrEP and PrEP coverage for race/ethnicity reported in the table were adjusted applying the distribution of records with known race/ethnicity to records with missing race/ethnicity. Different data sources were used in the numerator and denominator to calculate PrEP coverage.

COVID-19

Impact of COVID-19 on HIV Services

- Reduced availability of facility-based testing
- Disruption to data collection for surveillance
- Reduced public health services such as partner services and linking persons who have fallen out of care back to care
- Reduced access to PrEP services

New Directions

- Monitoring testing and care with alternate data
- Testing
 - Self-testing
 - Self sample collection
- Expanding telehealth approaches
- Studies moving to online data collection
- Expanding e-learning

Conclusions

- The United States is on course to reach 90–90–90 goals in the near future
 - some high-burden subnational jurisdictions have already achieved these goals
- To reduce HIV incidence by at least 90% by 2030, the United States will need to
 - rapidly meet the new targets
 - deploy a comprehensive strategy with novel approaches to testing, retaining persons with HIV on treatment, and preventing new infections with preexposure prophylaxis and comprehensive syringe services
 - address disparities in HIV infection and access to services

THANK YOU!

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For more information, contact CDC
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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

