

A Brief Update on the Los Angeles County HIV and STD Epidemics: Areas of Progress, Concerning Trends and a Call for More Action and Partners



LAC DPH Substance Abuse Prevention and Control
Quarterly Provider Meeting
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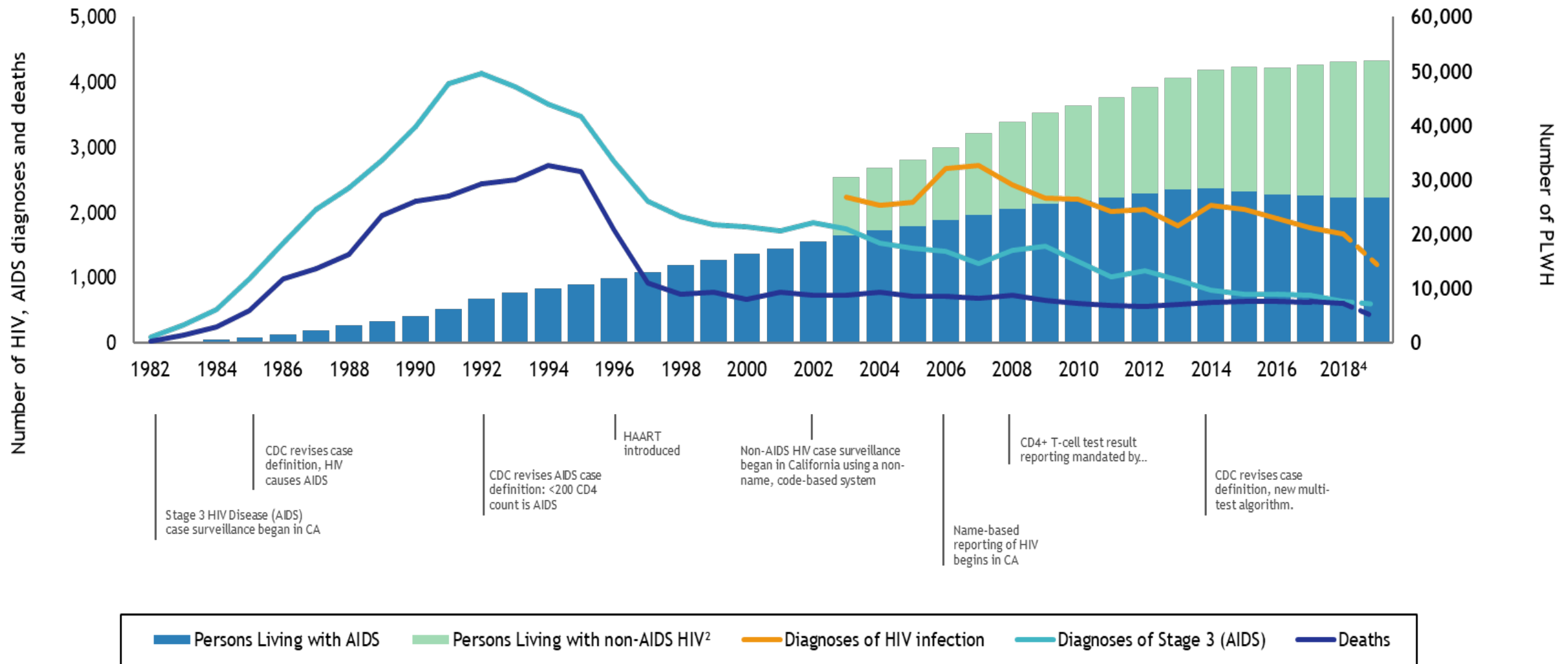


Context

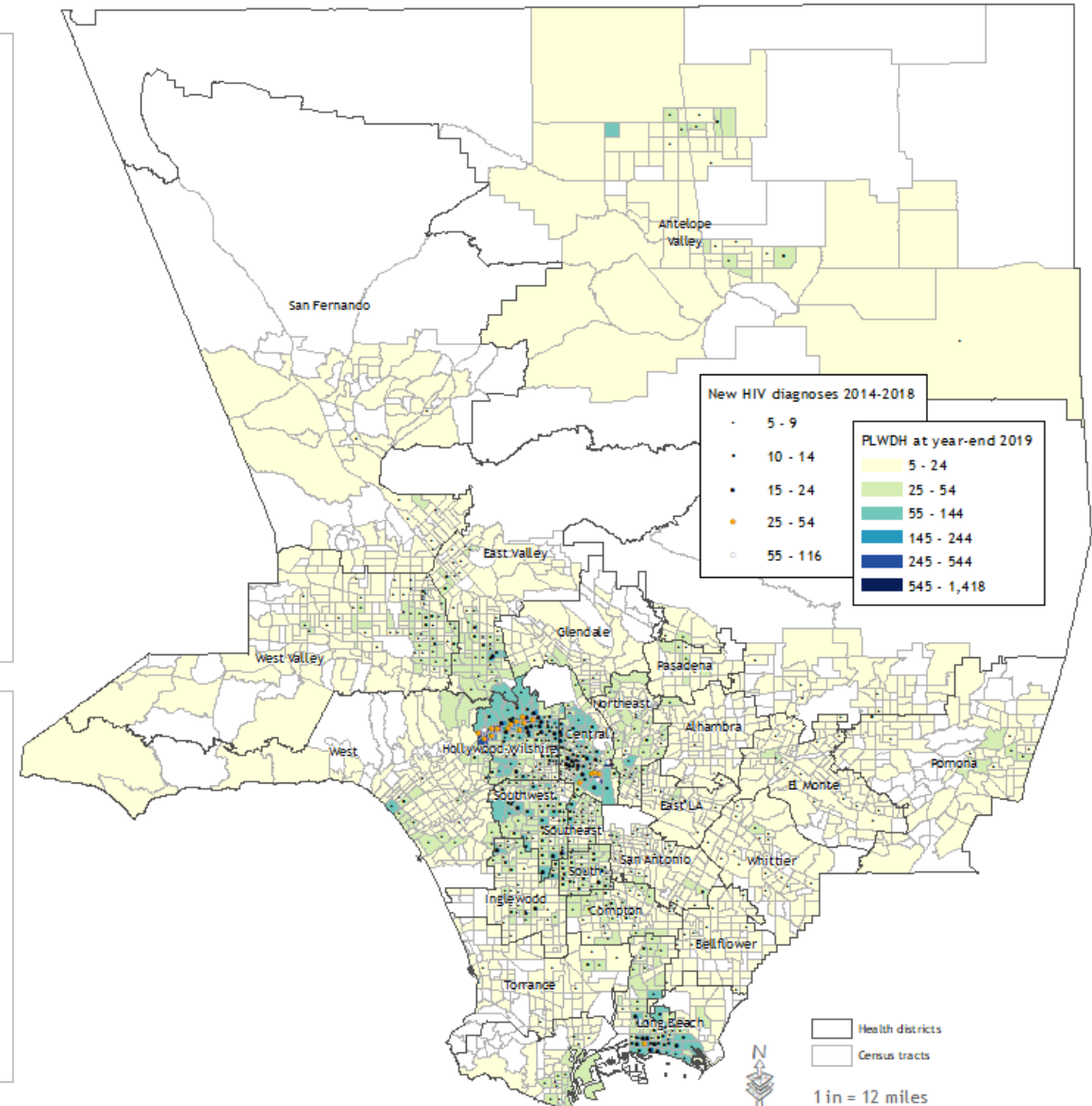
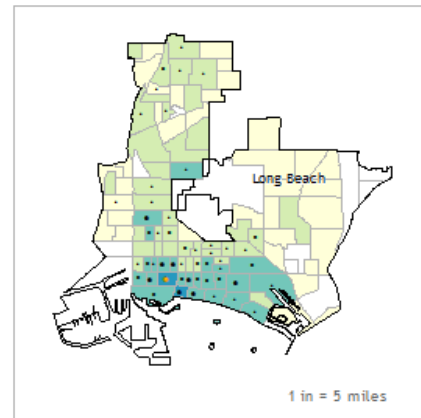
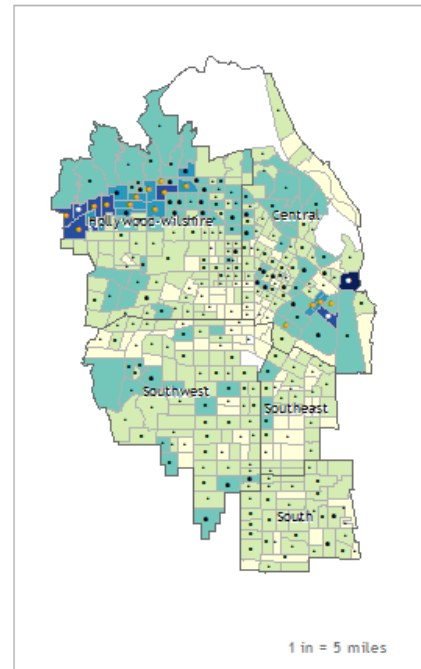
While the COVID-19 vaccines offer hope and, in this dark hour, a little light at the end of the tunnel – the current set of public health crises soberly reminds us that the road to recovery is long and in fact, our resilience and tenacity is needed more than ever. As COVID continues to claim lives and livelihoods, other public health challenges and syndemics persisted or have worsened, including those related to syphilis (and congenital syphilis), HIV, homelessness, and substance use disorders.

-- Excerpt from MJP to DHSP Staff

History of the HIV epidemic in Los Angeles County, 1982-2018

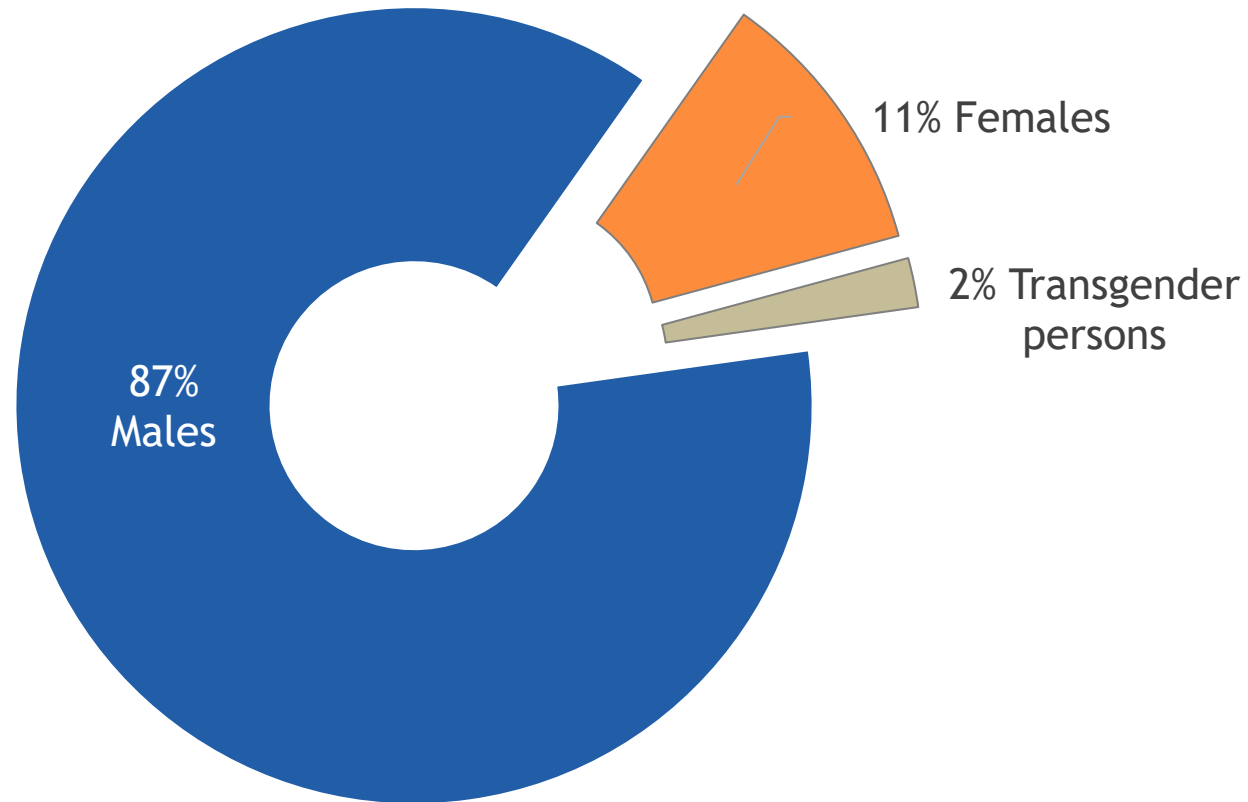


Geographic distribution of persons living with diagnosed HIV and persons newly diagnosed with HIV, 2018-2019



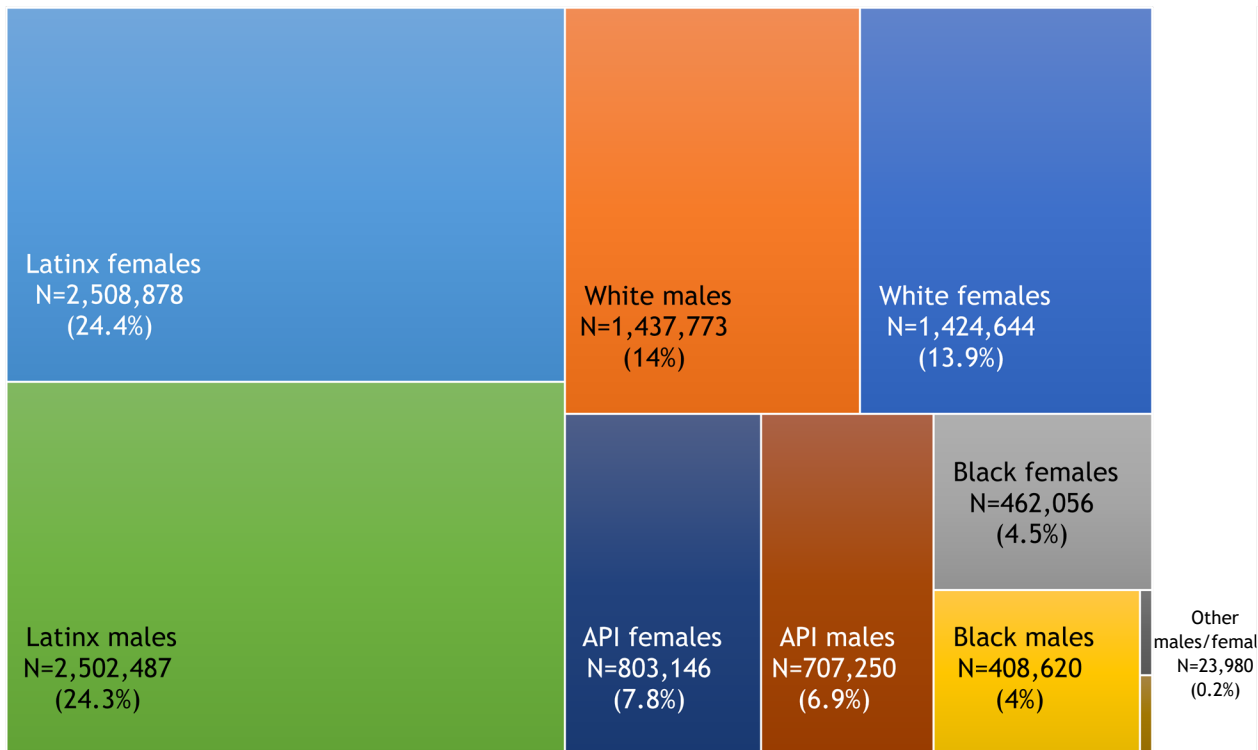
¹Census HIV Surveillance data as of December 31, 2019; U.S. Department of Commerce, 2010 U.S. Census Tract; U.S. Department of Housing and Urban Development, HUD USPS ZIP Code – Census Tract Crosswalk Files, 2nd quarter 2018 was used for HIV diagnoses 2014-2018 and 4th quarter 2019 was used for PLWDH at year-end 2019.

New HIV diagnoses by gender among persons aged ≥ 13 years, LAC 2018



Data in context:
Among the 35 transgender persons newly diagnosed with HIV in 2018, 28 of these were among transgender women.

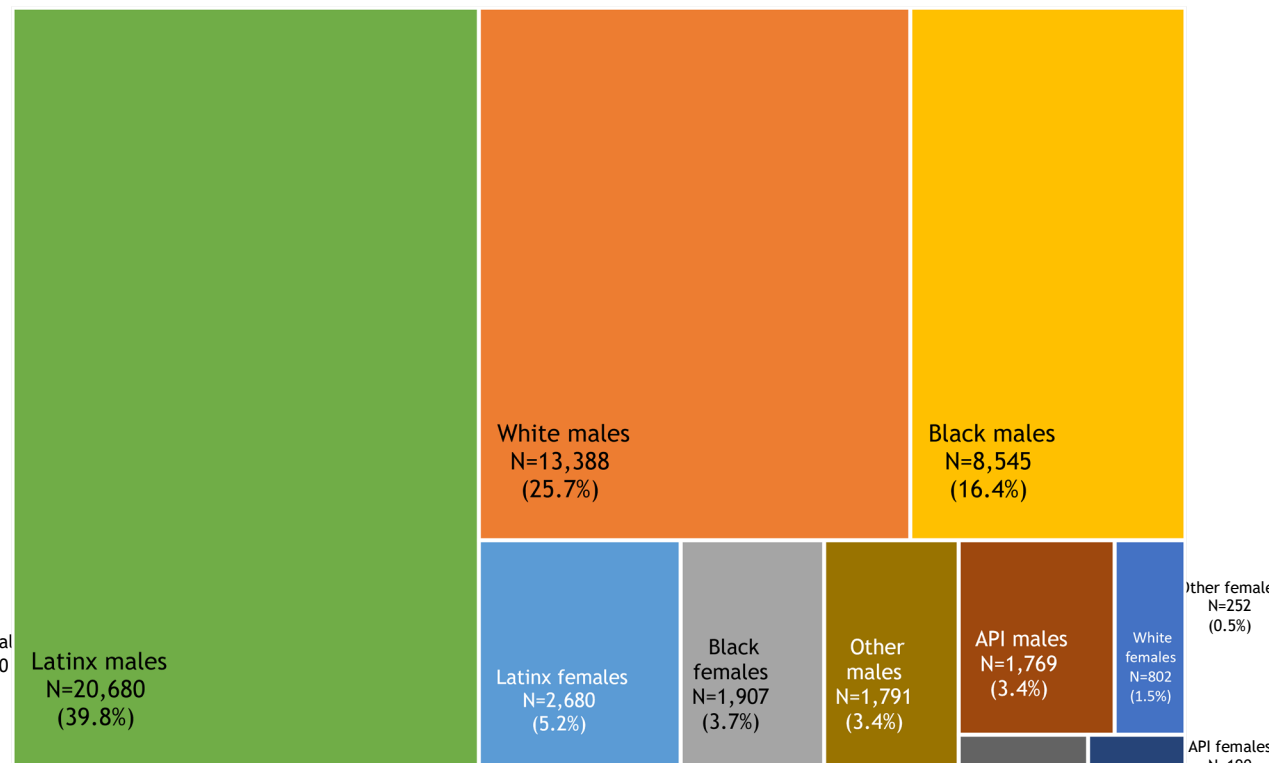
Distribution of sex¹ and race/ethnicity among Los Angeles County (LAC) residents in 2018 (N=10,278,834)²



¹ Population estimates are not currently available for transgender persons.
² Based on the 2018 population estimates provided by LAC internal Services Department and contracted through Hedderson Demographic Services.

~10 million people reside in LAC. The Latinx population represents the largest group, followed by the White population. Black men and women represent 8% of the total LAC population.

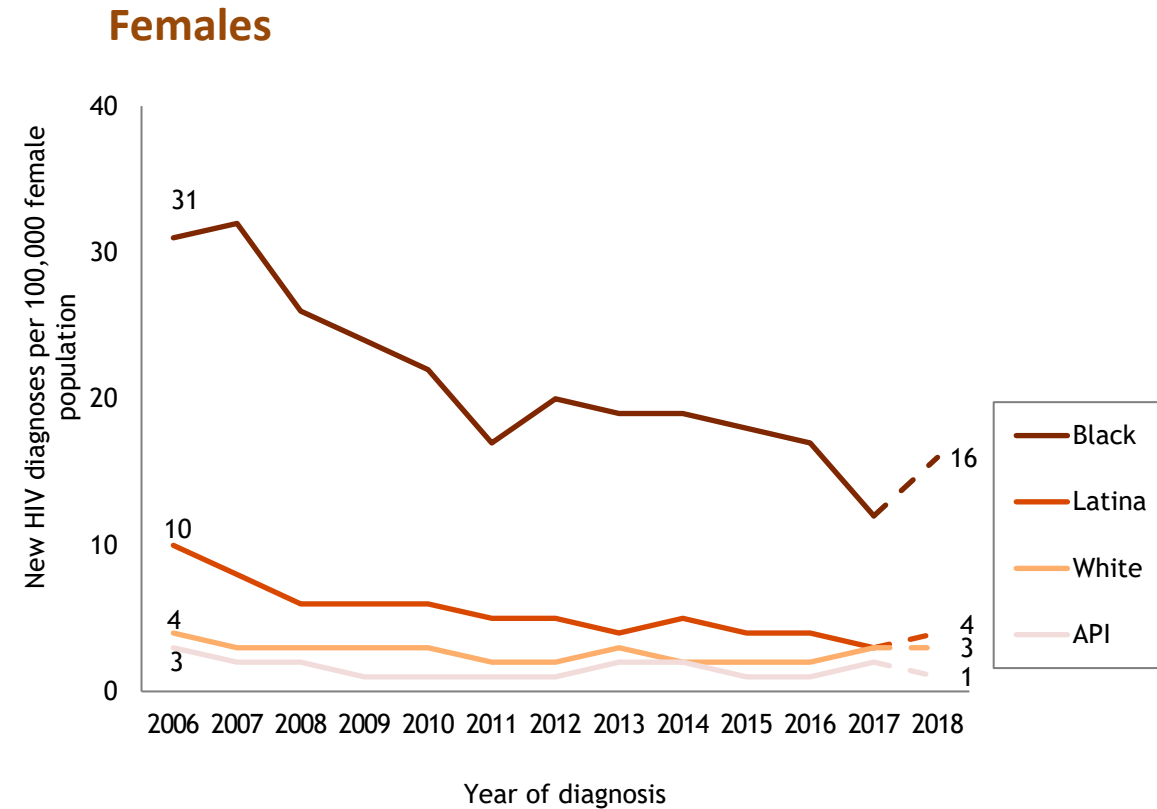
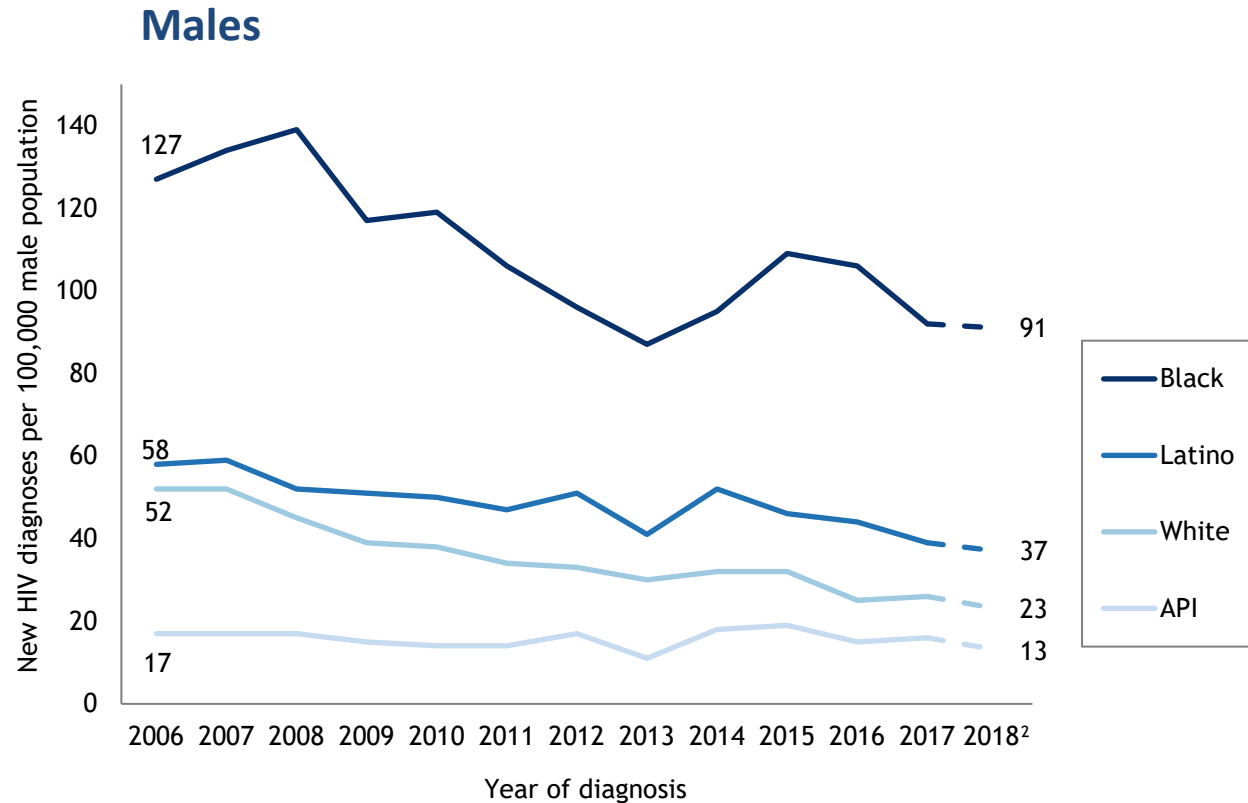
Distribution of sex¹ and race/ethnicity among persons living with diagnosed HIV at year-end 2019, LAC (N=52,004)



¹ Population estimates are not currently available for transgender persons, therefore male and female categories are based on biological sex at birth.

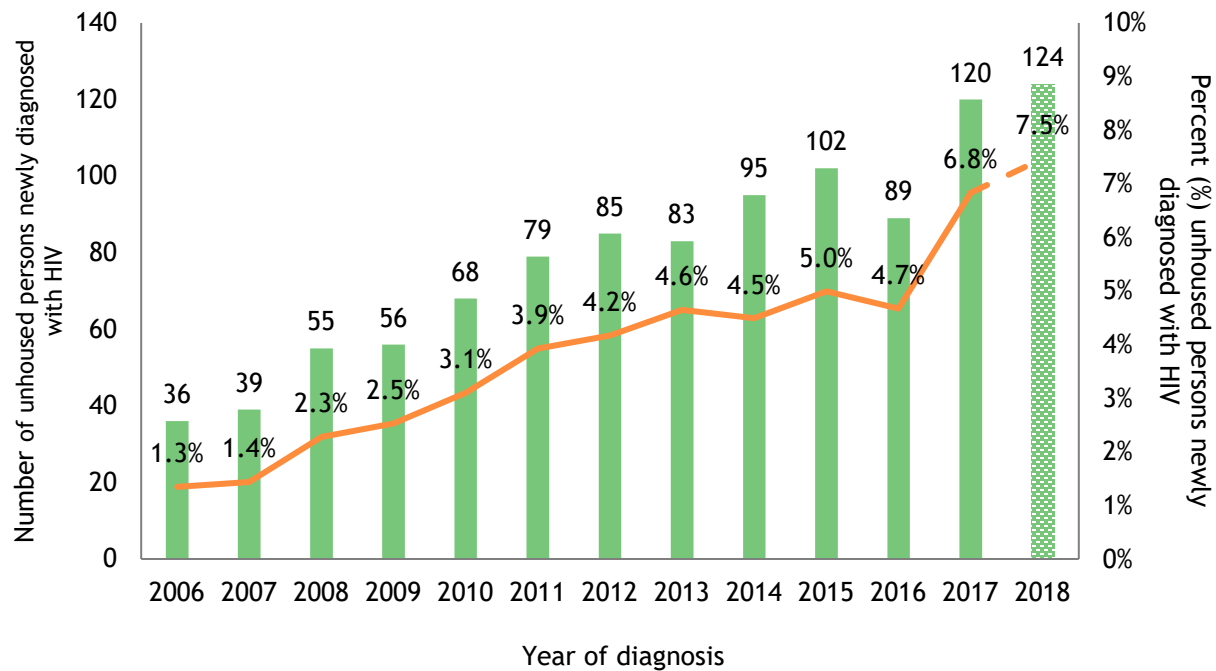
Latinos represent 40% of persons living with diagnosed HIV (PLWDH) followed by White (26%) and Black males (16%). These groups represent >80% of PLWDH in LA County.

HIV diagnoses rates among males and females aged ≥13 years by race/ethnicity, LAC 2006-2018

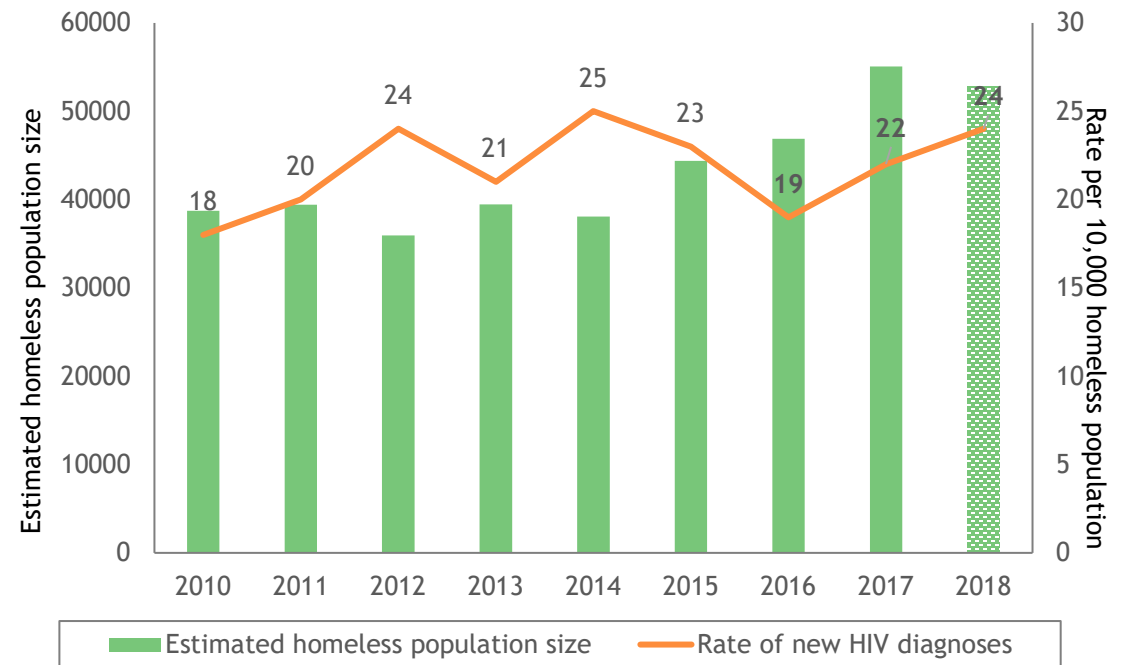


¹American Indians, Alaskan Natives and persons of multiple race/ethnicities were not included in the analysis because of unstable results due to small numbers.

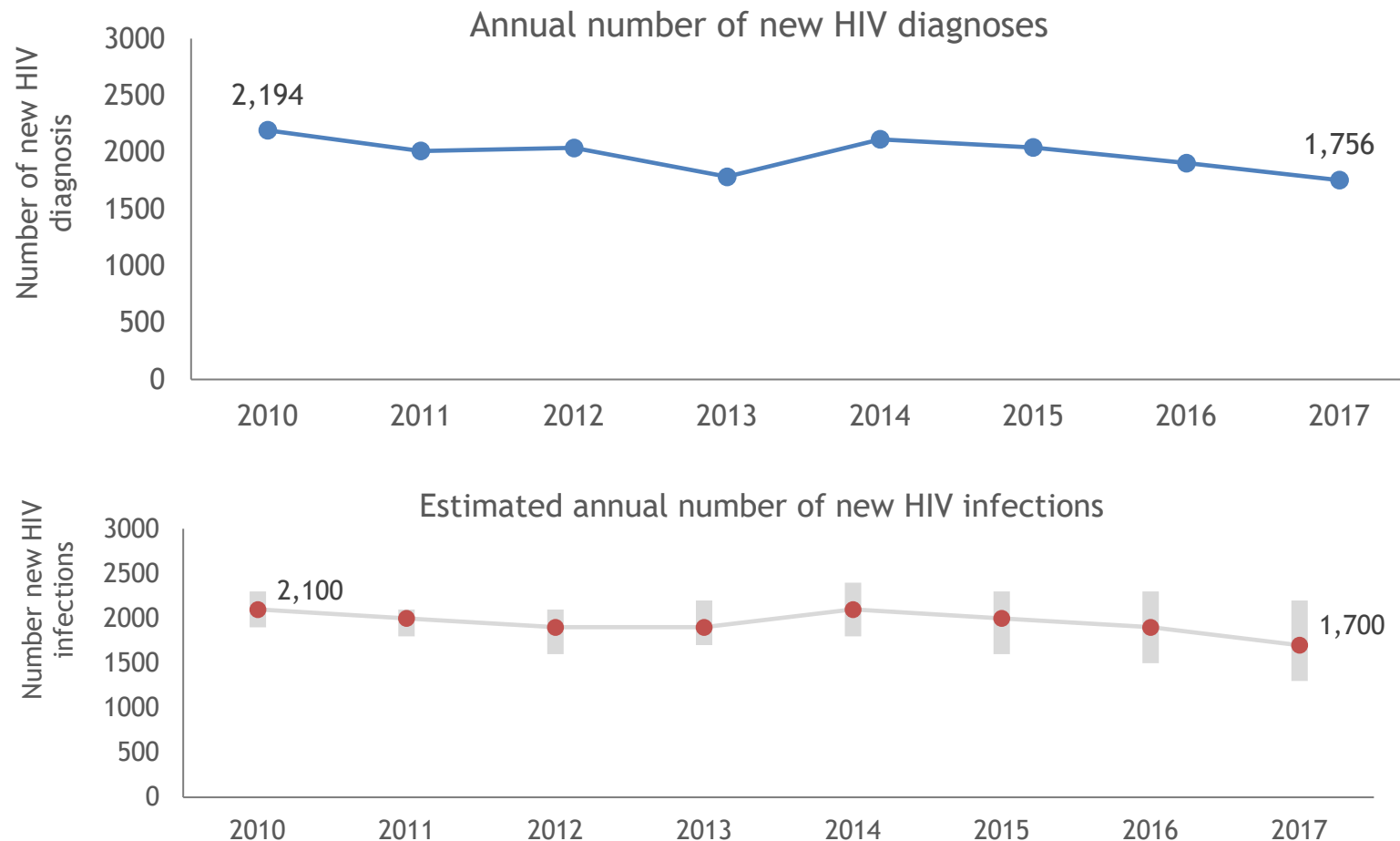
Number and percentage of persons aged ≥ 13 years newly diagnosed with HIV and unhoused at the time of diagnosis



HIV diagnoses rates among persons aged ≥ 13 years experiencing homelessness



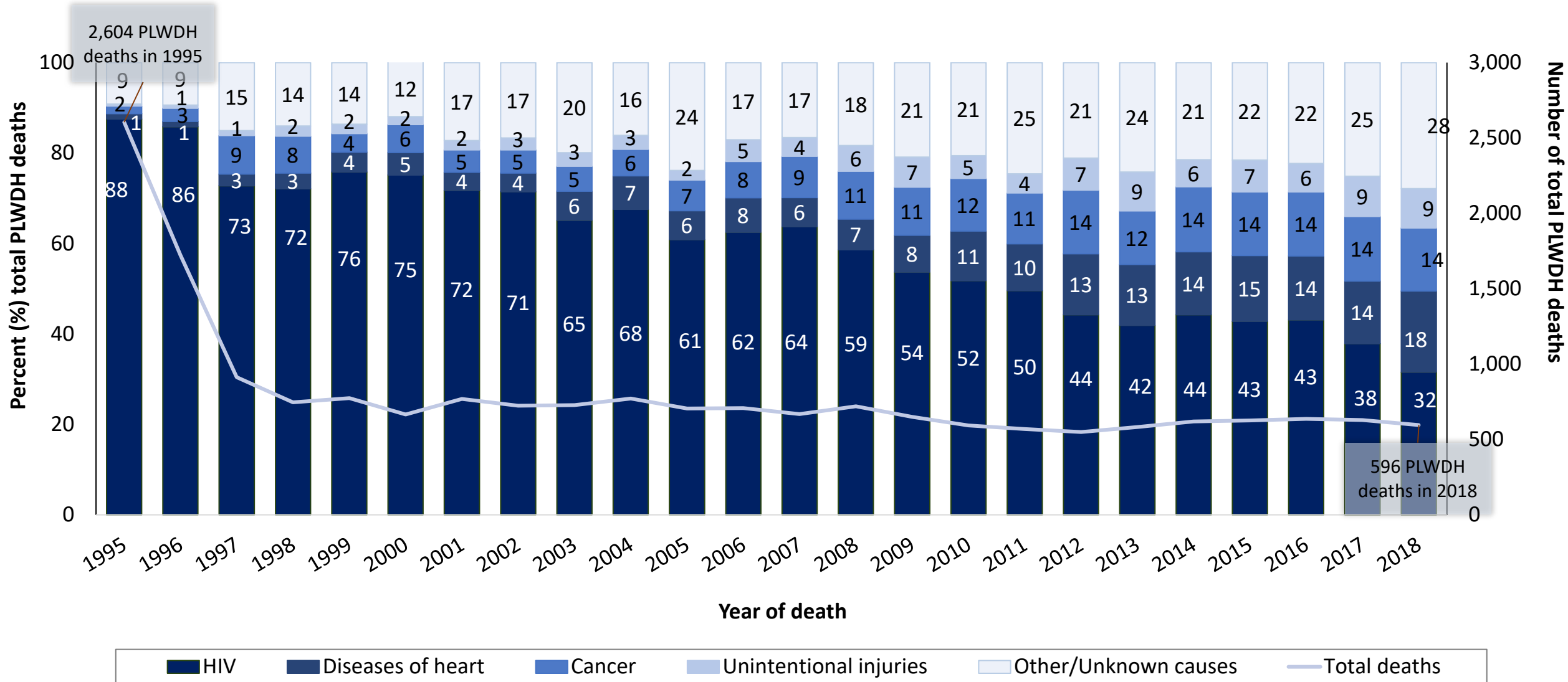
Number of persons newly diagnosed with HIV compared with the estimated number newly infected with HIV among persons aged ≥ 13 years, LAC 2010-2017



Data in context: The annual number of **new HIV diagnoses** is the number of persons who received a HIV diagnosis in a calendar year. It does not provide information on when the infection occurred. This information is used to quantify the need for HIV care.

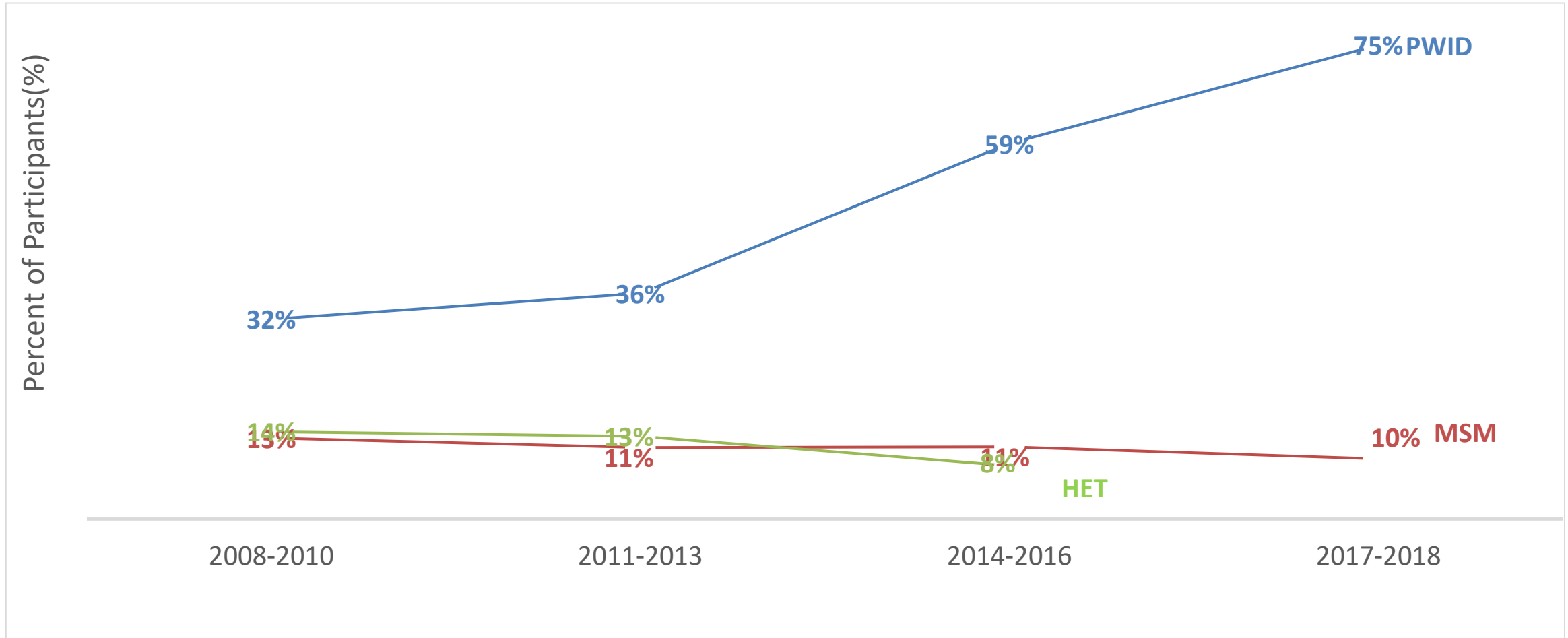
The estimated annual number of **new HIV infections** is the number of persons newly infected with HIV in a calendar year, whether or not they received an HIV diagnosis. This information is used to monitor transmission and impact of HIV prevention services.

Main causes of death among persons aged ≥ 13 years living with diagnosed HIV, LAC 1995-2018¹



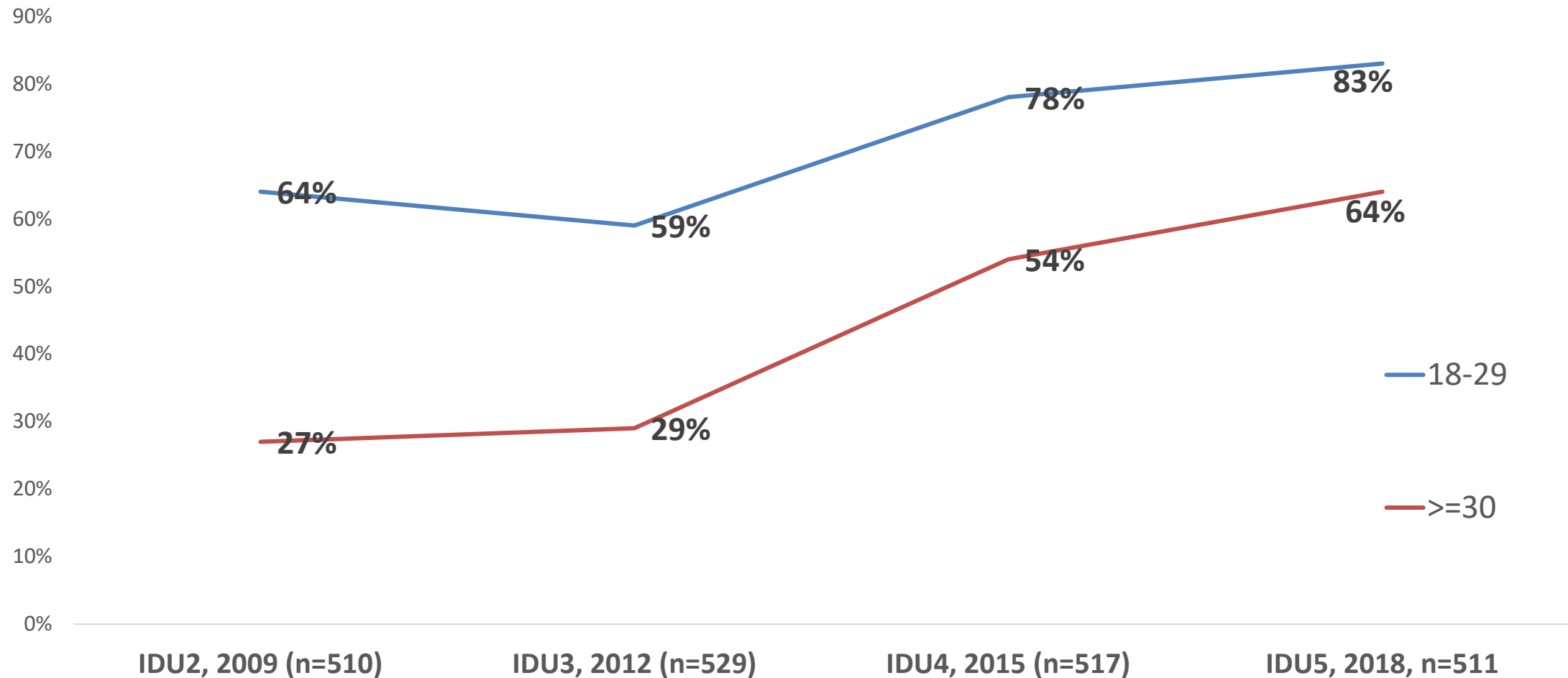
¹Annual percentages may not add to 100% due to rounding error.

Non-Injection Methamphetamine Use among NHBS Participants, Los Angeles County, (2009-2018)

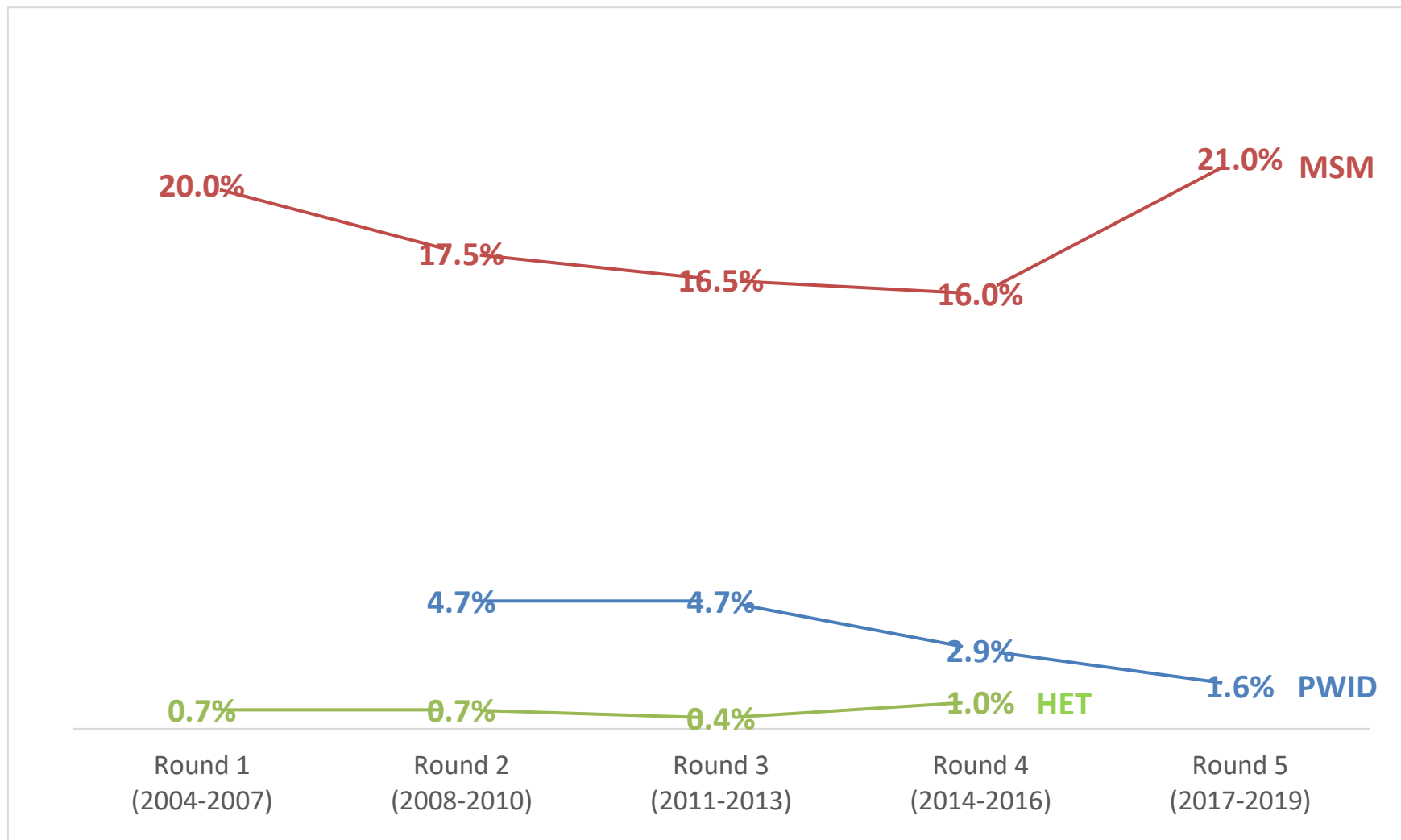


Non-Injection use of methamphetamine **increased significantly** among PWID from 2009-2018 ($p < .0001$)
Comparable increase not observed among MSM and HET

Self-Reported Methamphetamine Injection among PWID by Age Group, 2009-2018



HIV Prevalence by NHBS Target Population (2004-2018)



Note: HIV prevalence was not assessed in IDU Round 1

***Ending the HIV Epidemic: A Plan for America* was announced in 2019 with implementation beginning in 2020**

GOAL:

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

www.hiv.gov



Diagnose all people with HIV as early as possible.

Treat people with HIV rapidly and effectively to reach 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.



Ending the HIV Epidemic in Los Angeles County

By utilizing the right data, right tools & right leadership

The five-year federal initiative, *Ending the HIV Epidemic: A Plan for America*, focuses on four key pillars to end the epidemic: (1) Diagnose people as early as possible, (2) Treat people rapidly and effectively, (3) Prevent new HIV transmissions, and (4) Respond quickly to HIV outbreaks. Through collaboration with key stakeholders and community partners, the Los Angeles County Department of Public Health, Division of HIV & STD Programs, plans to implement activities in Year 1 that enhance the current HIV portfolio, align with the four pillars, improve HIV-related health outcomes, and prevent new transmissions.

57,700
people living with HIV
in LA County

1,700
new transmissions
per year

6,400
are unaware of their
HIV positive status

50,660
Black & Latinx people
who would benefit
from PrEP

72,700
MSM*, transwomen,
ciswomen & injection
drug users would benefit
from PrEP

Diagnose

- Increase routine opt out HIV testing in healthcare & institutional settings
- Increase HIV testing programs in non-healthcare settings including home testing
- Increase client's yearly HIV re-screening



Prevent

- Utilize data to better identify persons with indication for PrEP and link to services
- Expand PrEP service delivery & provider options, including telehealth and pharmacies
- Improve PrEP retention in care through provider and consumer programming
- Expand Syringe Services Programs

Treat

- Expand partner services to facilitate rapid ART and linkage to care
- Increase knowledge of and access to HIV services
- Assess mental health services to identify gaps in care
- Improve client experience by working with clinical staff
- Increase opportunities for telehealth
- Develop programming that provides services related to housing and emergency financial assistance



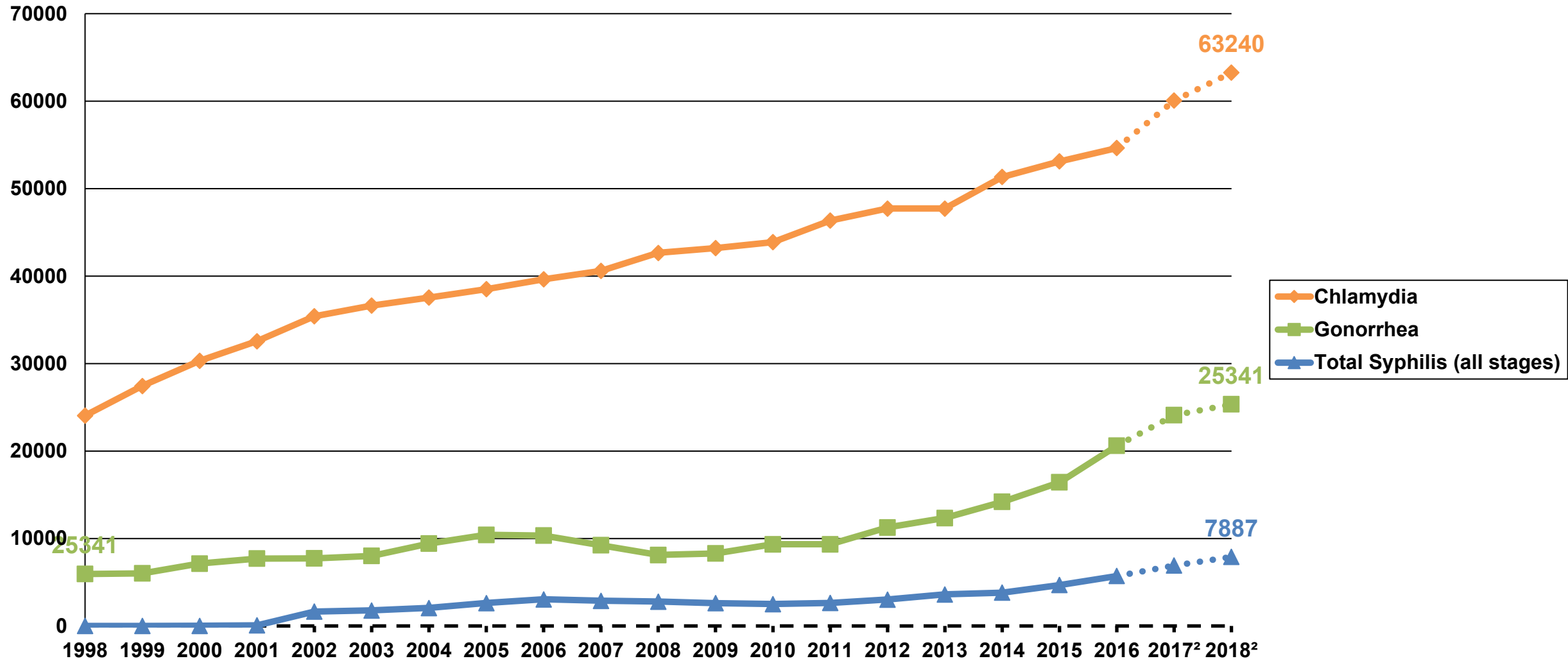
Respond

- Facilitate real-time cluster detection and response through protocol development and trainings
- Implement routine epidemiological analysis of new infections in hot spots and subpopulations
- Monitor and assess clusters identified through recency testing
- Continue to build surveillance infrastructure at the public health department

Key indicators being tracked:

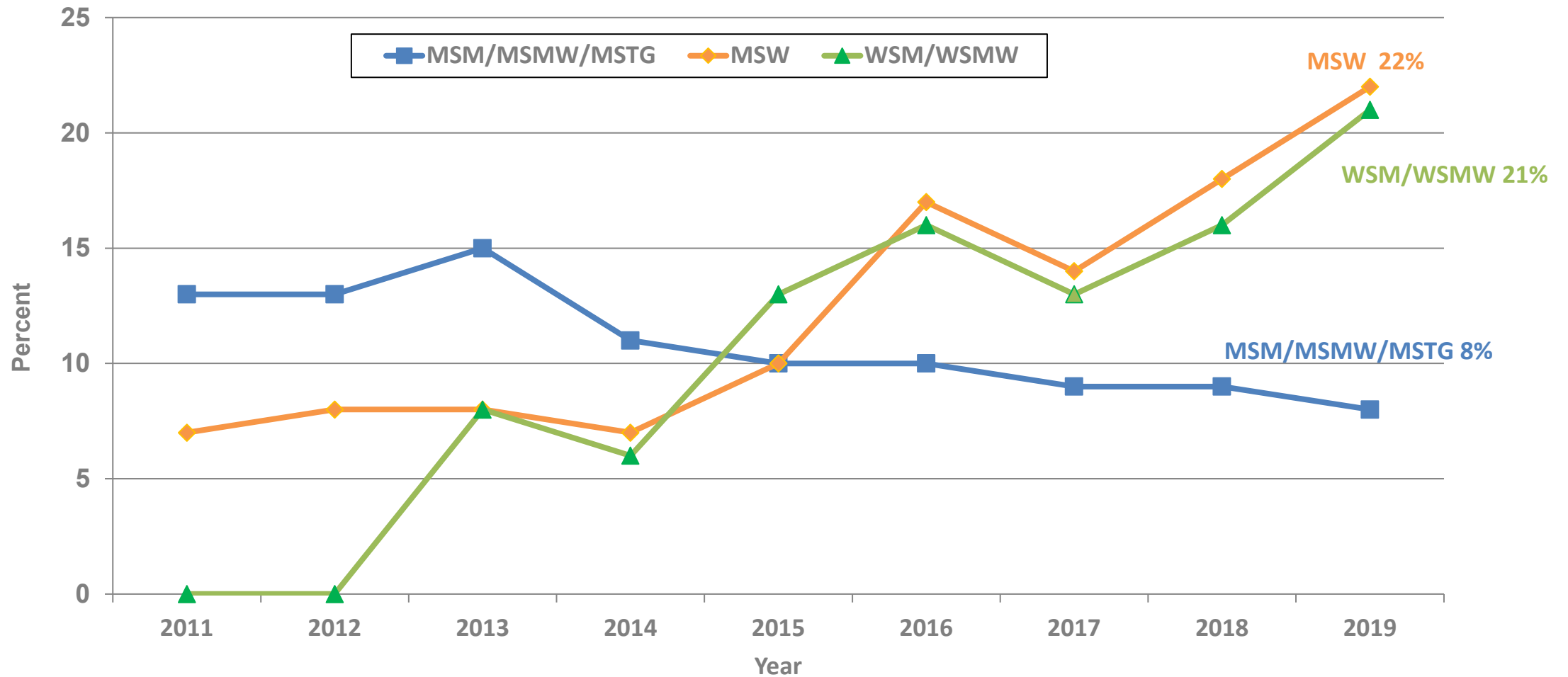
- Annual number of new infections
- Annual number of reported HIV diagnoses
- Estimated percentage of persons living with HIV and aware of HIV-positive status
- Percentage of persons diagnosed with HIV and linked to care within 1 month
- Percentage of persons diagnosed with HIV and virally suppressed
- Percentage of persons in priority populations prescribed PrEP

Number of Reported Cases of Syphilis (all stages), Gonorrhea, and Chlamydia, Los Angeles County, 1998-2018¹



1. Data as of August 18, 2019. Does not include cases reported in the cities of Long Beach and Pasadena; total syphilis includes all cases staged as primary, secondary, early latent, late latent, and unknown duration. Excludes non-cases (e.g. BFP, not current infection, etc.)
 2. 2017 and 2018 data are provisional due to reporting delay.

% Methamphetamine Use among Early Syphilis Cases Receiving Partner Services by MSM, MSMW and Women, Los Angeles County, 2011-2019¹

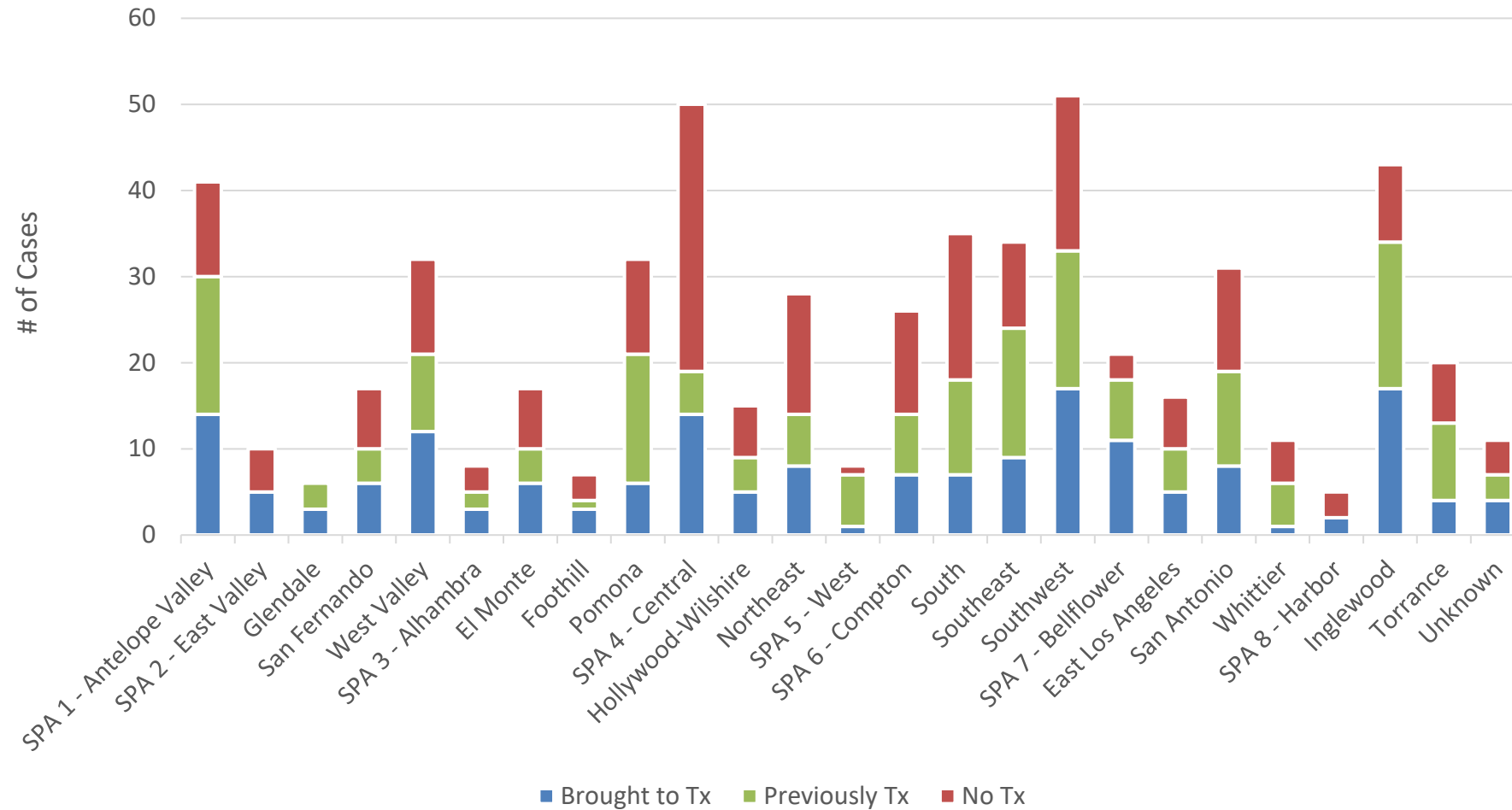


¹ Early Syphilis includes Primary, Secondary and Early Latent Syphilis. Data as of 3/12/2021.

² Of 25,937 Early Syphilis incidents with a qualifying interview, 23,804 (91.8%) responded with yes/no to methamphetamine use during the past 12 months and are included in the analysis. Percent missing ranged from 6.2%-10.3%.

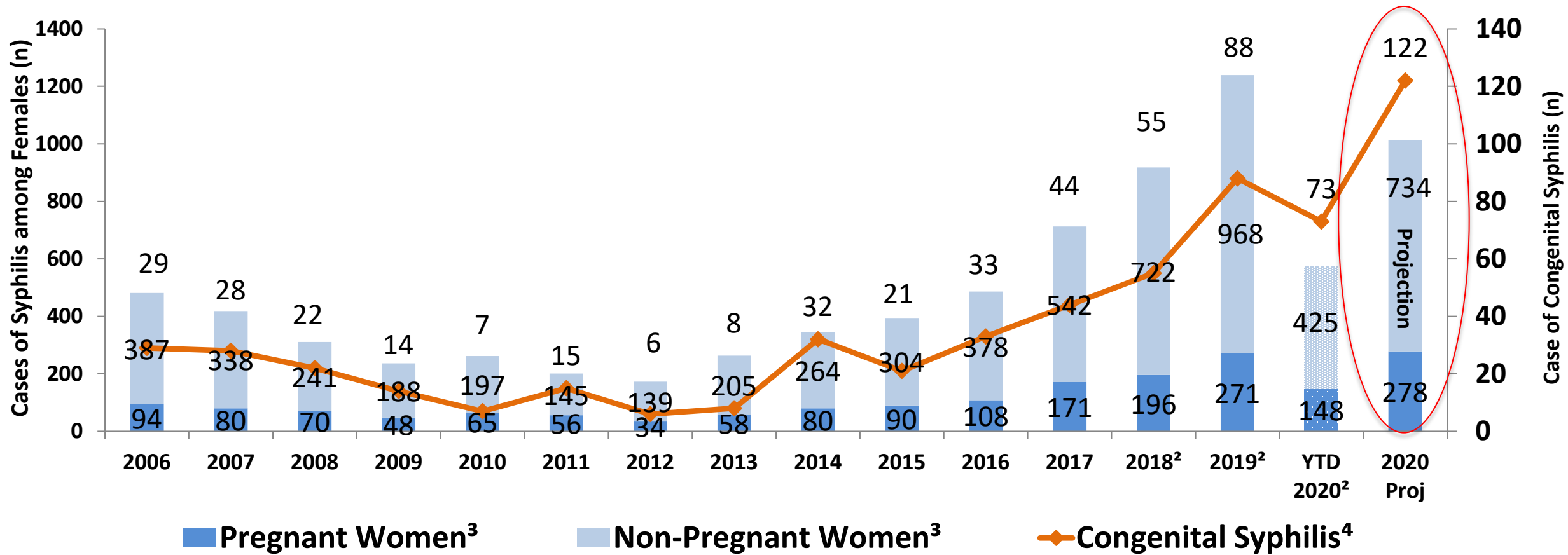
³ Percentage reflects the number of individuals reporting methamphetamine use in the past 12 months among those who answered yes/no to the methamphetamine question in the disease investigation interview. Other listed responses (e.g. Refused, Unknown) are excluded from the denominator.

LAC Female Syphilis Cases by SPA, Health District and Treatment Status¹, 2020 N=573



¹ YTD 2020 data are preliminary and as of 8/30/20. Data exclude Long Beach and Pasadena. Treatment data are based on disposition.

Number of Female Syphilis Cases and Congenital Syphilis Cases, Los Angeles County, 2006-2020¹



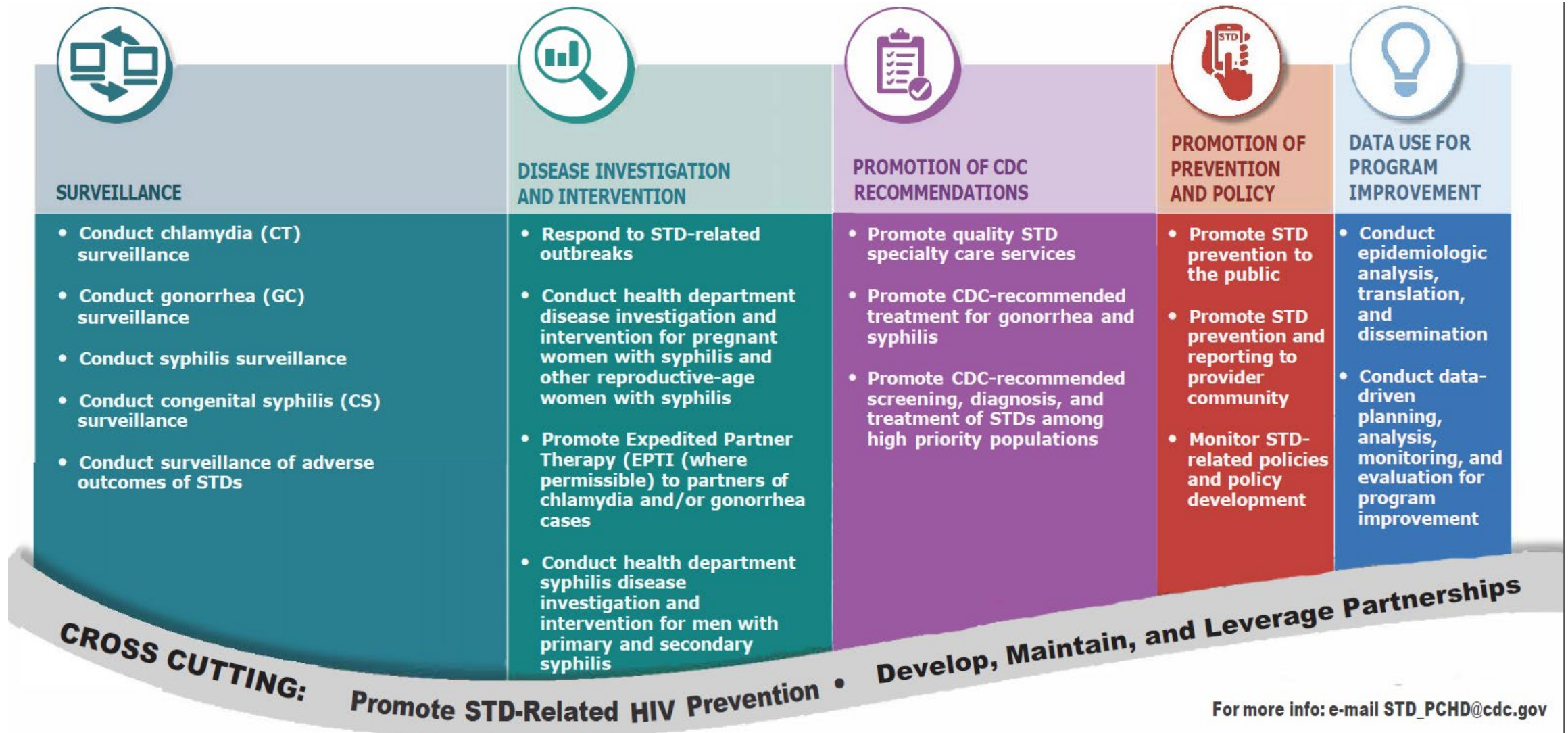
¹ 2006-2019 Data are from STD Casewatch as of 07/05/2020 and excludes cases from Long Beach and Pasadena

² 2018-2019 data are provisional due to reporting delay. 2020 projections are based on provisional data as of 8/30/2020. As of 06/30/20, 367 non-pregnant females, 139 pregnant females and 61 congenital syphilis cases have been reported.

³ Syphilis among females of reproductive age (ages 15-44) including all cases staged as primary, secondary, early non-primary non-secondary (previously early latent) and unknown duration/late (previously late latent)

⁴ Congenital Syphilis includes syphilitic stillbirths

PS19-1901 Strengthening STD Prevention and Control for Health Departments (STD PCHD) 2019-2023



STD Control Strategy for Los Angeles County

Target populations: Young African American and Latina women; MSM and Transgender Persons

Increasing community awareness and healthy decision making

- Health Education
- Condom Access Program
- LA Condom Campaign
- Social marketing
- CHYA

Early identification of cases through screening and testing of at-risk populations

- Public Health STD Clinics
- Partnerships with Title X clinics
- MSM sexual health clinics
- Jail based testing program
- Home Test Kits (GC/CT)
- Medical Provider Detailing

Interrupt disease transmission through treatment of cases and partners

- Public Health STD Clinics
- Partner Services and Case Management
- Expedited Partner Therapy for GC/CT

STD Focused Initiatives

- ✓ Surveillance
 - GISP or Emerging Threat Surveillance
- ✓ Community Mobilization
- ✓ Screening, Diagnosis, and Treatment
- ✓ Medical Consultation, Provider education and technical assistance
 - The STD Hotline
 - CME events
 - Public Health Detailing
 - STD Summit
- ✓ Research and Innovation
- ✓ Data dissemination
 - Dashboards
- ✓ Planning and evaluation
 - Strategic Planning/Recommendations/Best Practices
- ✓ Prevention among priority populations (sometimes termed “high risk”)
 - Condom distribution
 - Partner Services and Disease Investigation
 - Youth Programming
 - School-based initiatives
 - Juvenile Hall programming
 - Correctional Services
- ✓ Policy
- ✓ Promoting quality
- ✓ Integrated STD Surveillance Database Development (IRIS)
- ✓ Contract Management
 - STD Case Finding
 - Community Embedded DIS

Proposed Expanded STD Control Efforts (Current and Envisioned)

- Increased Focus on Congenital syphilis
- Enhanced Syphilis Control among women
- Enhanced Screening and Treatment among Vulnerable Populations
- Social Marketing
- Expanding PDPT
- Health Plan Engagement

The Intersection Between Meth and Both HIV and Syphilis

- **HIV prevalence declining, but not as sharply as we'd like**
- **Syphilis prevalence growing, sharply among some groups**
- **Increased evidence of injection meth use among PWID**
- **Increased evidence of non-injection meth use among PWID**
- **More than 1/5 new MCC enrollees reported meth use in the last 6 months**
- **Growing number of congenital syphilis cases tied to meth use**
- **Three recent perinatal HIV cases tied to meth use**
- **Many of these morbidities also tied to homelessness**

Key Questions for Provider Partners

- **Can you play a role with HIV prevention interventions, including HIV testing, SSPs, PrEP/PEP and linkage to HIV care?**
- **Can you play a role with syphilis and congenital syphilis control efforts?**
- **How we address the syndemics of SUD, homelessness, HIV, STDs and Hepatitis more effectively, particularly as they become more layered and more complex?**

Resources

- DHSP website: <http://publichealth.lacounty.gov/dhsp>
- Syphilis in Women Action Toolkit: <http://publichealth.lacounty.gov/dhsp/SyphilisInWomen-ActionKit.htm>
- PrEP information: www.getPrEPLA.com
- Condom Information: www.lacondom.com
- Home Test Kits: <https://www.dontthinkknow.org/>
- Public Health Centers: <http://publichealth.lacounty.gov/chs/phcenters.htm>
- Pocket Guide to youth-friendly Sexual Health Services: <https://www.pocketguidela.org/>
- DPH Patient Health Education Materials: <http://www.publichealth.lacounty.gov/hea/library/index.htm>
- Planned Parenthood Los Angeles: <https://www.plannedparenthood.org/planned-parenthood-los-angeles>
- Planned Parenthood Pasadena San Gabriel Valley: <https://www.plannedparenthood.org/planned-parenthood-pasadena-san-gabriel-valley>

Gracias

Thank you

