

### Definition/Description:

Human Immunodeficiency Virus (HIV) is a sexually transmitted infection and blood borne pathogen. Transmission may occur through sexual contact with an infected individual, through injection drug use, or through exposure to infected blood, blood products, tissues or organs; as well as through perinatal transmission. Beginning in 1999, HIV became officially reportable by laboratories and health care professionals to the Director of Communicable Disease Control at Manitoba Health.

### Source:

- *Case Event (Numerator) Data:* Communicable Disease Control Unit, Public Health Branch, Manitoba Health (March 2004)
- *Population (Denominator) Data:* Decision Support Services, Health Information Management Branch, Manitoba Health
- *Tabulations:* Population Health and Health Systems Analysis Unit, Quality and Decision Support, Winnipeg Regional Health Authority

### Findings:

#### Newly Detected Cases

Between 1996 and 2003, 483 newly detected cases of HIV were reported among residents of the WHR (Table HIV1), and with the exception of 2003, the number of cases reported annually has ranged from 43 to 66. In 2003, 96 cases were reported - a 60% increase from 2002 and a two-fold increase from 1996 (Table HIV1; Figure HIV1).

#### Age and Gender

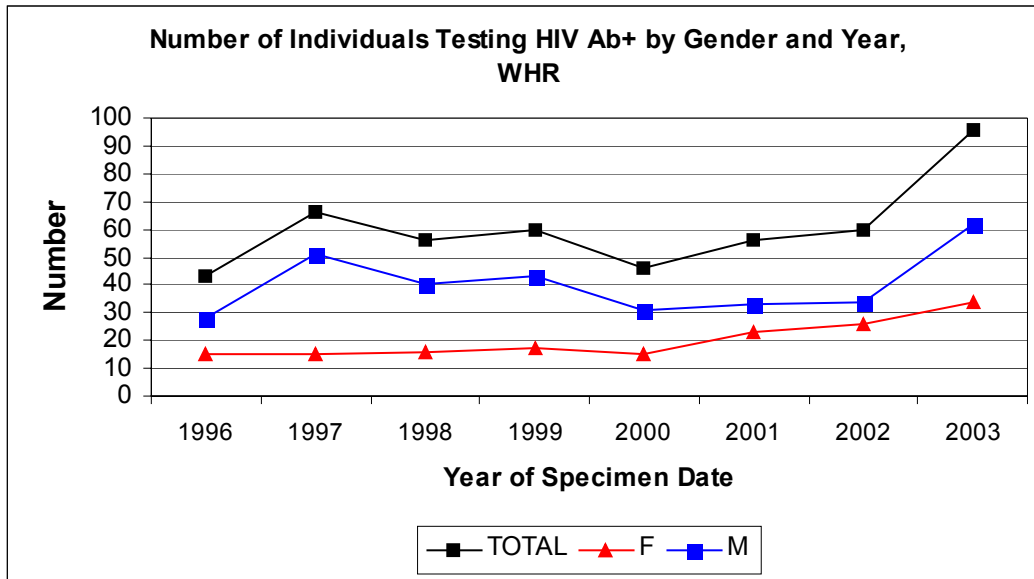
Overall, two-thirds of newly detected cases have been reported among males; however, the number of females testing HIV positive has been increasing since 2001 (Table HIV1; Figure HIV1). In 2003, the number of HIV cases reported among females was more than two times that reported in 1996. For males, the number of cases reported in 2003 increased 82% from 2002 – from 34 to 62 cases (Table HIV1; Figure HIV1). Overall, the majority of males are between the ages of 30 and 49 years; while for females, cases are predominantly aged 20 to 39 years (Figure HIV2).

**Table HIV1**

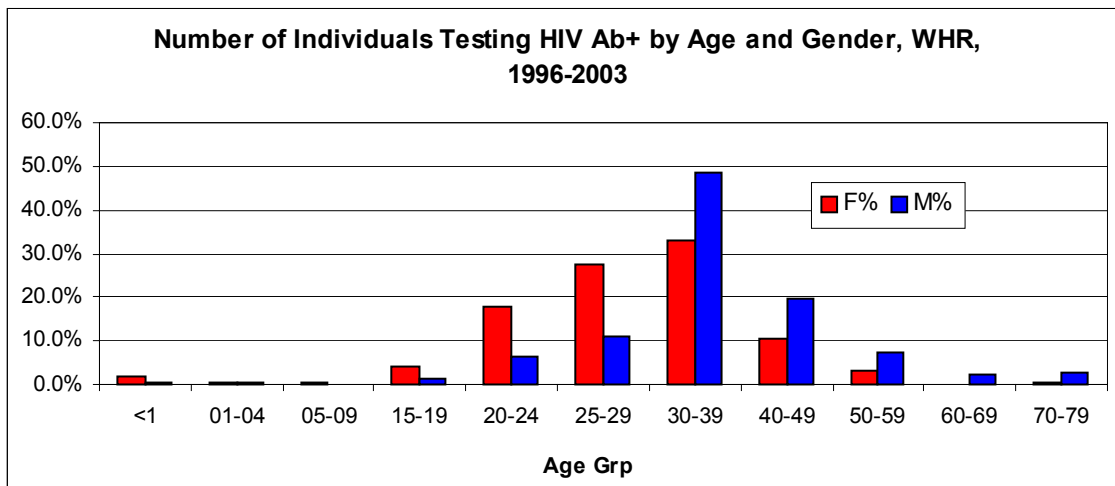
**HIV: Number (%) of Newly Detected Cases (HIV antibody positive) by Year and Gender, WHR, 1996-2003**

SPECIMEN YR	TOTAL	F	F%	M	M%
1996	43	15	9.3%	28	8.7%
1997	66	15	9.3%	51	15.8%
1998	56	16	9.9%	40	12.4%
1999	60	17	10.6%	43	13.4%
2000	46	15	9.3%	31	9.6%
2001	56	23	14.3%	33	10.2%
2002	60	26	16.1%	34	10.6%
2003	96	34	21.1%	62	19.3%
96-03	483	161	100.0%	322	100.0%

**Figure HIV1**



**Figure HIV2**



**Ethnicity**

Beginning in January 1999, HIV was officially added to the provincial list of reportable diseases and the *Notification of HIV Form* was introduced to collect epidemiological information for each newly detected case (e.g., ethnicity, modes of transmission).

Overall, the majority of newly detected clients describe themselves as Aboriginal or Caucasian (Table HIV2). However, among females, 41.7% and 27.8% of cases self-reported their ethnicity as Aboriginal or African/African-American respectively. Among males, the predominant ethnic categories reported were Caucasian (40.9%) and Aboriginal (25.6%) (Table HIV2). Of note, information that describes ethnicity was missing for 15% of cases reported between 1999 and 2003.

Table HIV3 reports the number of newly detected cases of HIV by ethnic category and year. The proportion of cases classified as Caucasian has decreased consistently over time –from 41.7% in 1999 to 21.9% in 2003. Of note, the number of cases self-reporting as African / African-American more than doubled between 2002 and 2003 – from 10 cases to 26 cases.

**Table HIV2**

**HIV: Number (%) of Newly Detected Cases (HIV antibody positive) by Ethnic Category and Gender, WHR, 1999-2003**

<b>Ethnic Category</b>	<b>1999-2003</b>	<b>Female</b>	<b>F%</b>	<b>Male</b>	<b>M%</b>
Null / Missing	50	16	13.9%	34	16.7%
Caucasian	95	12	10.4%	83	40.9%
African / African American	51	32	27.8%	19	9.4%
Aboriginal	100	48	41.7%	52	25.6%
Asian	14	4	3.5%	10	4.9%
Other	8	3	2.6%	5	2.5%
<b>TOTAL</b>	<b>318</b>	<b>115</b>	<b>100.0%</b>	<b>203</b>	<b>100.0%</b>

*Note: Ethnicity available beginning January 1999 with the introduction of the Notification of HIV Form.*

**Table HIV3**

**HIV: Number (%) of Newly Detected Cases (HIV antibody positive) by Ethnic Category and Year, WHR, 1999-2003**

<b>ETHNICITY</b>	<b>1999-2003</b>	<b>1999</b>		<b>2000</b>		<b>2001</b>		<b>2002</b>		<b>2003</b>	
Null / Missing	50	9	15.0%	5	10.9%	9	16.1%	8	13.3%	19	19.8%
Caucasian	95	25	41.7%	15	32.6%	18	32.1%	16	26.7%	21	21.9%
African / African American	51	4	6.7%	4	8.7%	7	12.5%	10	16.7%	26	27.1%
Aboriginal	100	17	28.3%	19	41.3%	21	37.5%	20	33.3%	23	24.0%
Asian	14	2	3.3%	2	4.3%	1	1.8%	5	8.3%	4	4.2%
Other	8	3	5.0%	1	2.2%	0	0.0%	1	1.7%	3	3.1%
<b>TOTAL</b>	<b>318</b>	<b>60</b>	<b>100.0%</b>	<b>46</b>	<b>100.0%</b>	<b>56</b>	<b>100.0%</b>	<b>60</b>	<b>100.0%</b>	<b>96</b>	<b>100.0%</b>

*Note: Ethnicity available beginning January 1999 with the introduction of the Notification of HIV Form.*

*Note: Further information describing the epidemiology of HIV (e.g., risk factors, mode of transmission) in the Winnipeg Health Region is available in **Report on Communicable Diseases and Immunization in the Winnipeg Health Region, 2004** [available fall 2004].*

## Highlights:

- Increasing frequency of HIV in 2003: *60% increase in number of reported cases compared to 2002.*
- Gender: Overall, two-thirds of newly detected cases were reported among males; however, *the number of females testing HIV positive has been increasing since 2001.* In 2003, the number of HIV cases reported among females was *more than two times* that reported in 1996.
- Age: Overall, the majority of *males are between the ages of 30 and 49 years*; while for females, cases are predominantly aged *20 to 39 years*
- Ethnicity: For females, the predominant ethnic categories reported include *Aboriginal* and *African/African-American*; for males, the predominant ethnic categories reported were *Caucasian* (40.9%) and *Aboriginal* (25.6%). Of note, the number of cases (both male and female) self-reporting as African / African-American has more than doubled between 2002 and 2003.

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<sup>i</sup> Additional information describing communicable diseases (including sexually transmitted and blood-borne infections) and immunization in the Winnipeg Health Region is available in **Report on Communicable Diseases and Immunization in the Winnipeg Health Region, 2004** [available fall 2004].