

# PERINATAL HIV IN NEW YORK CITY, 2015



HIV Epidemiology and Field Services Program  
New York City Department of Health and Mental Hygiene



Prepared: December 2016

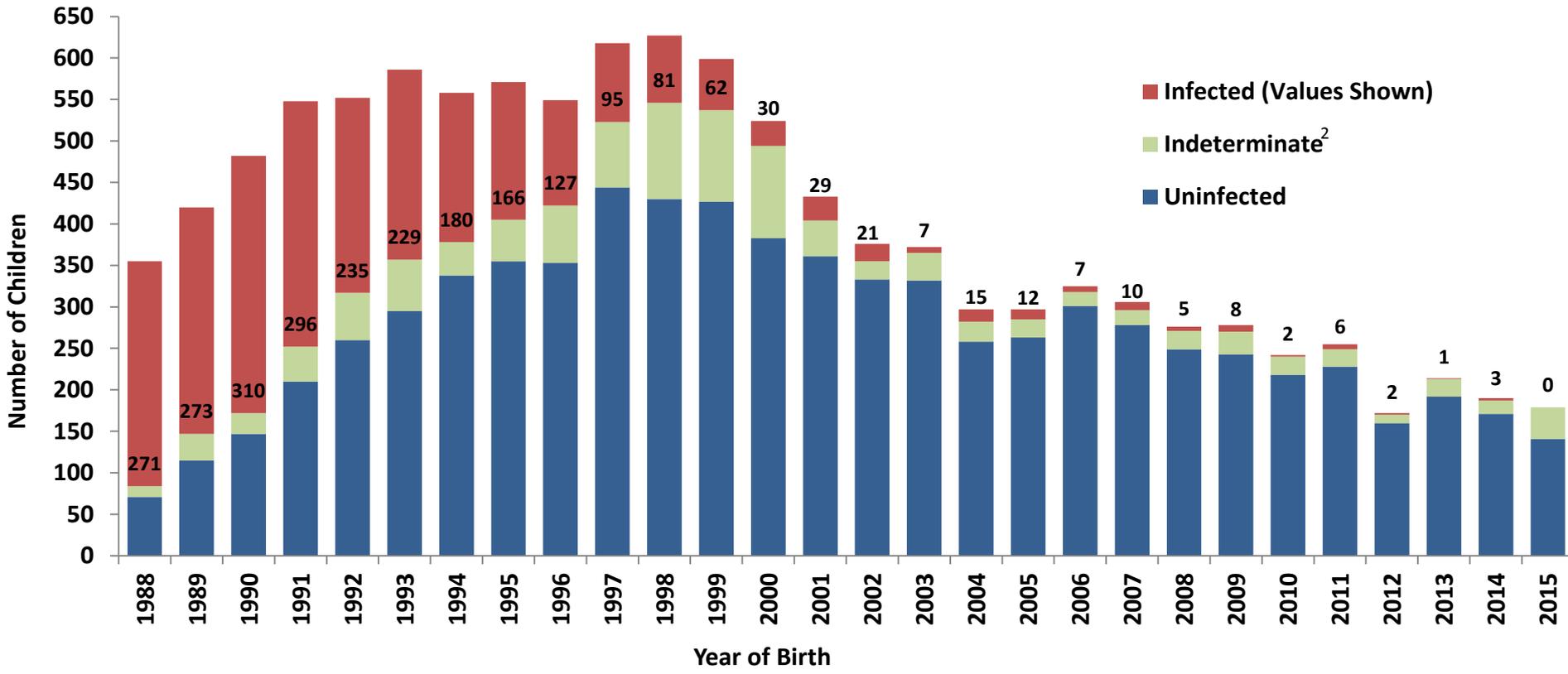
<http://www1.nyc.gov/site/doh/data/data-sets/epi-surveillance-slide-sets.page>

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# CURRENT HIV STATUS OF CHILDREN BORN TO HIV-INFECTED WOMEN AT SELECT NYC MEDICAL FACILITIES<sup>1</sup>, BY YEAR OF BIRTH IN NYC, 1988-2015

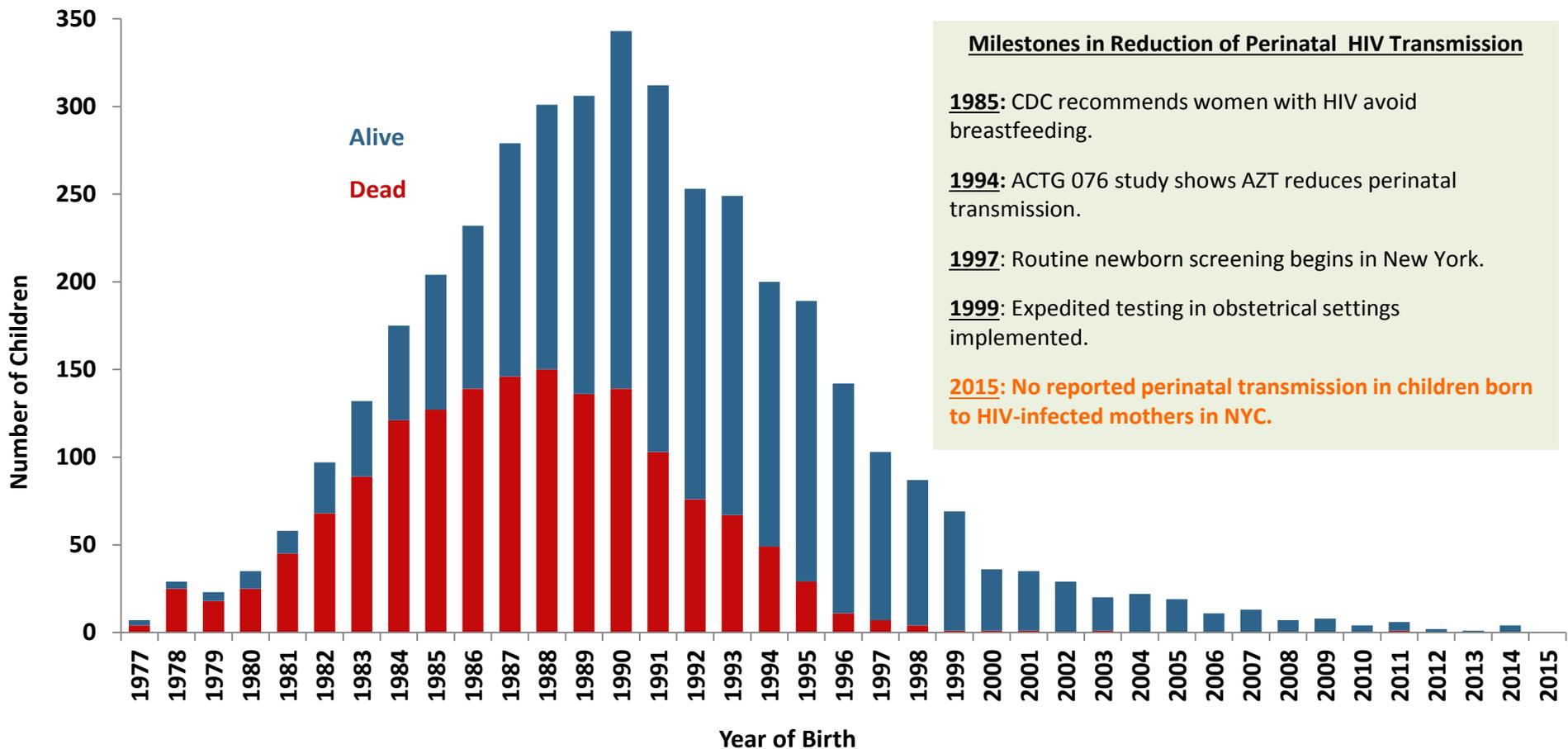


**In 2015, for the first time since the epidemic began, there were no reported mother to child HIV transmissions among children born in NYC, reflecting the success of interventions to prevent perinatal HIV infection.**

<sup>1</sup>Includes data collected at high-volume NYC medical facilities that care for the majority of HIV-exposed and infected children. Children born outside of NYC are not included in this figure.  
<sup>2</sup>Children born to HIV-infected mothers are followed for 2 years after birth to determine HIV status. HIV status is indeterminate if child is lost to follow-up. As reported to the New York City Department of Health and Mental Hygiene by June 30, 2016



# PERINATALLY HIV-INFECTED CHILDREN (N=4,042), BY YEAR OF BIRTH AND VITAL STATUS IN NYC, 1977-2015



## Milestones in Reduction of Perinatal HIV Transmission

**1985:** CDC recommends women with HIV avoid breastfeeding.

**1994:** ACTG 076 study shows AZT reduces perinatal transmission.

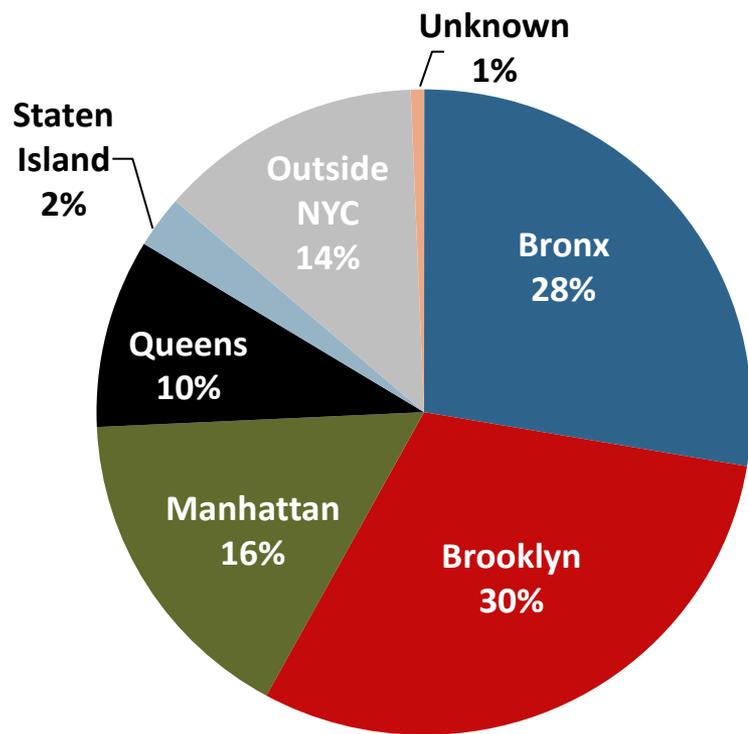
**1997:** Routine newborn screening begins in New York.

**1999:** Expedited testing in obstetrical settings implemented.

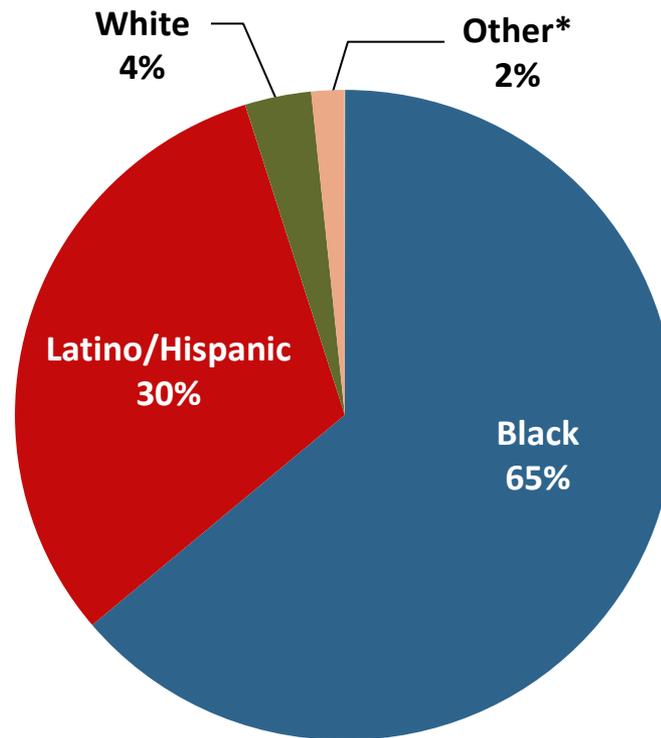
**2015:** No reported perinatal transmission in children born to HIV-infected mothers in NYC.

The number of HIV-infected infants born to HIV-infected mothers in NYC each year decreased dramatically from the peak in 1990. This decline followed the introduction of intensive perinatal prevention programs in NYC. During 2009-2014, there were 24 perinatally-infected infants born in NYC. In 2015, there were no reported infections among children born in NYC.

# DEMOGRAPHICS OF PERINATALLY HIV-INFECTED CHILDREN (N=321), DIAGNOSED IN NYC, 2001-2015



**Borough of Residence  
at Diagnosis**



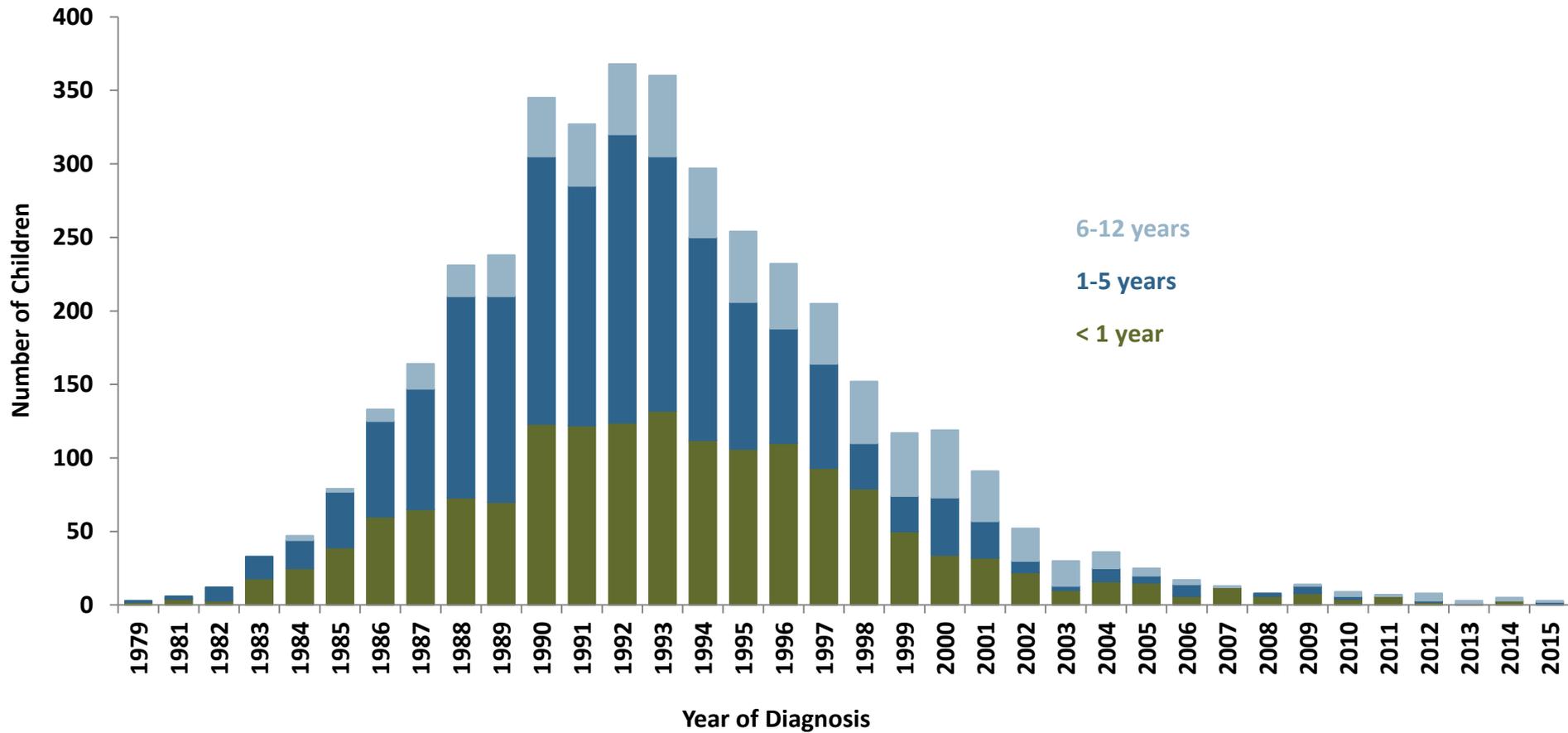
**Race/Ethnicity**

**The majority of perinatally HIV-infected children diagnosed during 2001-2015 resided in Brooklyn or the Bronx; the majority of children were Black or Latino/Hispanic.**

\*Other includes Asian/Pacific Islander, Native American, and multiracial.

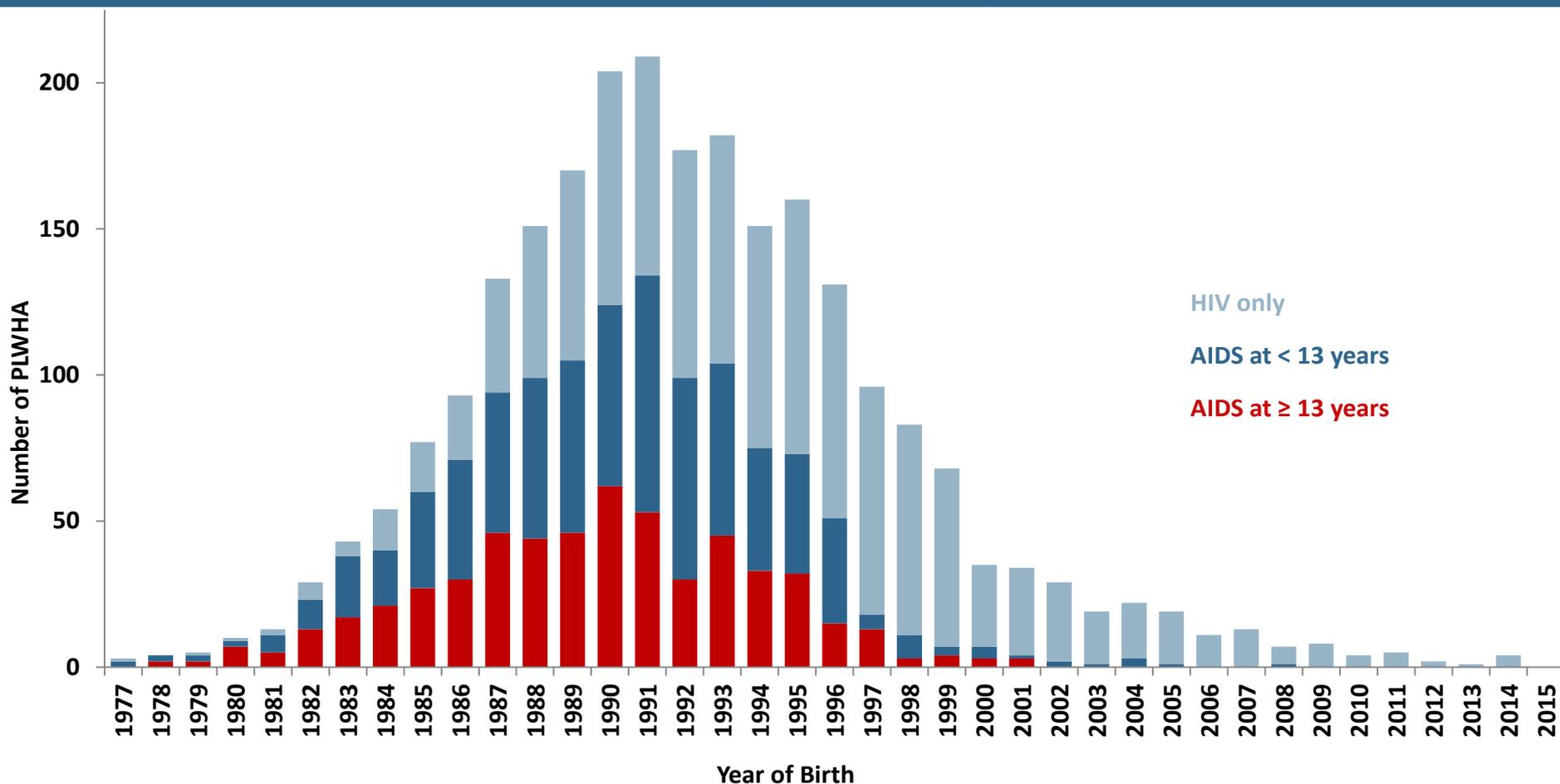
As reported to the New York City Department of Health and Mental Hygiene by June 30, 2016

# AGE AT HIV DIAGNOSIS OF PERINATALLY HIV-INFECTED CHILDREN (N=4,043) BY YEAR OF DIAGNOSIS IN NYC, 1979-2015



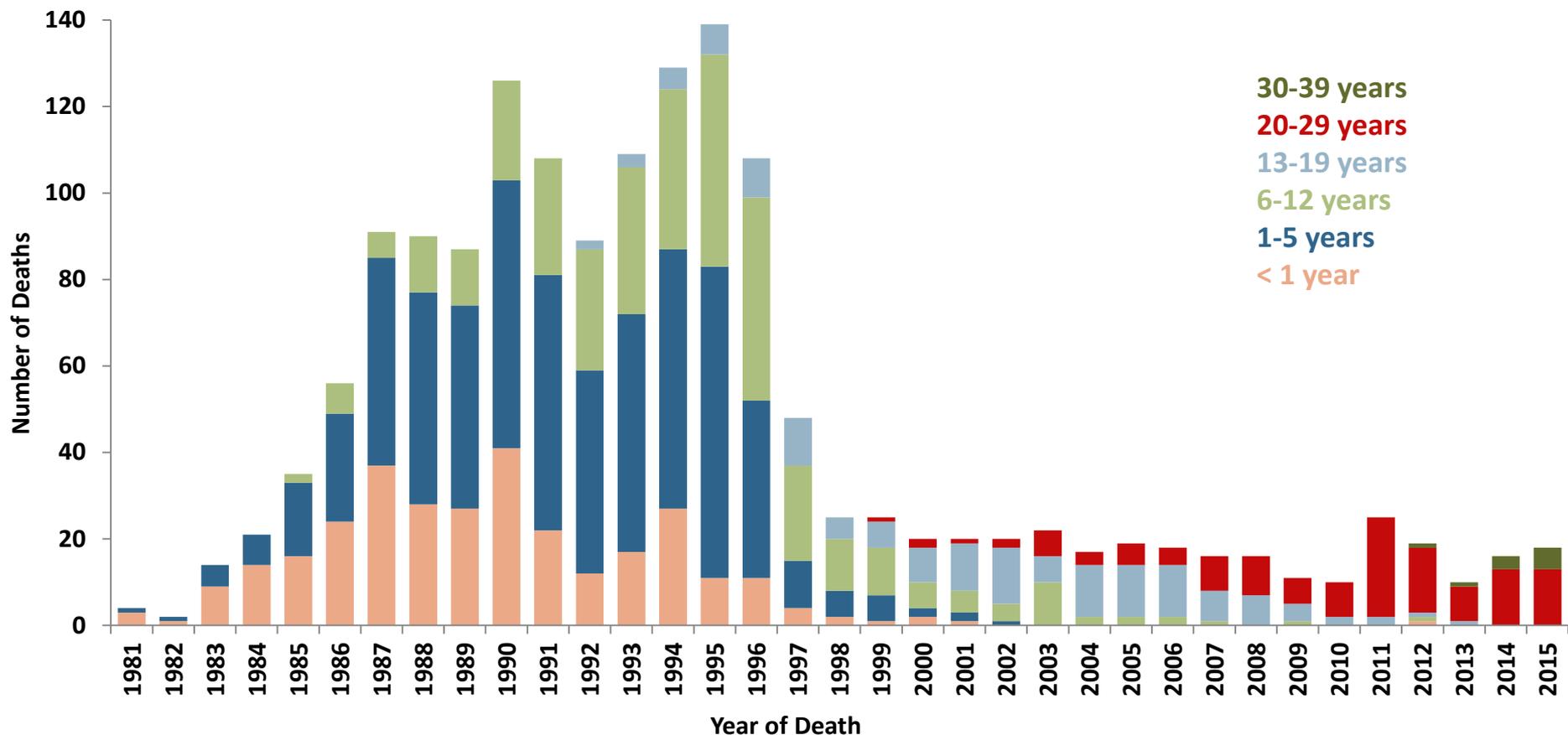
**The number of diagnoses due to perinatal transmission peaked in 1992-93. Declines are due to decreasing numbers of births among HIV-infected women and increasing use of prenatal antiretroviral therapies to prevent transmission.**

# CURRENT CLINICAL STATUS OF PERINATALLY HIV-INFECTED PLWHA BY YEAR OF BIRTH (N=2,459) IN NYC, 1977-2015



**1991 was the peak year of perinatal HIV transmission in NYC. Among PLWHA born in 1991, 36% had not developed AIDS as of 2015. The percentage of people living with HIV only (non-AIDS) has steadily increased since 1991. Only 2 AIDS diagnoses have been reported for children born after 2005 and alive as of 2015.**

# AGE AT DEATH AMONG PERINATALLY HIV-INFECTED PWHA BY YEAR OF DEATH (N=1,583) IN NYC, 1981-2015



The number of deaths among perinatally-infected children peaked in 1995; at that time, the majority of deaths occurred in children under 6 years of age. Since 1995, most deaths have occurred in older age groups. Declines in pediatric deaths can be attributed to declining numbers of newly perinatally-infected children, widespread use of combination antiretroviral therapy, and prophylaxis against opportunistic infections.

# APPENDIX 1:

## DEFINITIONS AND STATISTICAL NOTES

### Perinatal and Pediatric HIV Surveillance

HEFSP collects data on HIV-exposed and -infected infants and children diagnosed with HIV before 13 years of age. Data are used to monitor the prevention of mother-to-child transmission. Perinatal and pediatric surveillance data are informed by a range of other activities and data sources, including longitudinal case follow-up, the New York State Department of Health Comprehensive Newborn Screening Program, and CDC-funded special projects related to pediatric HIV.

### Death data

Data on deaths occurring in NYC are obtained by matches with the NYC Vital Statistics Registry, medical chart reviews, and provider reports via the Provider Report Form, including HIV-positive autopsies by the Office of the Chief Medical Examiner. Data on deaths occurring outside NYC are from matches with the Social Security Death Master File and National Death Index.

# APPENDIX 2:

## DEFINITIONS

### Definitions:

- Perinatal transmission is the designated risk factor for infants who were infected during gestation, birth or postpartum through breastfeeding to an HIV-infected mother.
- Perinatally HIV-infected children include children born in and newly diagnosed in NYC, as well as children born outside of NYC but newly diagnosed and residing in NYC.
- Data presented by “Transmission risk” categories include only individuals with known or identified transmission risk, except when an “unknown” category is presented.
- “PLWHA” refers to persons living with HIV or AIDS during the reporting period and alive at the end of the reporting period.
- “NYC” refers to New York City
- For more definitions and technical notes see:  
<http://www1.nyc.gov/site/doh/data/data-sets/hiv-aids-annual-surveillance-statistics.page>.