

**NEW MEXICO HIV/AIDS
ANNUAL SURVEILLANCE REPORT : 2008**



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*Cover photos of Gila National Forest and White Sands
National Monument courtesy of Heidi Purcell*

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At the end of 2008, a total of 5,814 persons had been reported with human immunodeficiency virus (HIV) and/or acquired immunodeficiency syndrome (AIDS) in New Mexico. Of these cases, 1,458 were diagnosed with HIV and 4,356 were diagnosed with AIDS; 1,356 were known to still be living with HIV and 2,319 were known to still be living with AIDS. With fewer than 200 cases reported each year since 1999, New Mexico continues to be a low morbidity state for HIV/AIDS. During 2008, 153 new HIV/AIDS cases were documented, reflecting an incidence rate of 7.4 per 100,000 population. This rate has remained constant from 2007, during which 152 cases were diagnosed.

Overall trends showed that HIV/AIDS continued to be distributed disproportionately across New Mexico's population. Males continued to bear the greater burden of new diagnoses compared to females (88% vs. 12%). Hispanics were more likely to be newly diagnosed than any other racial/ethnic group and in 2008 accounted for 48% of all new HIV/AIDS cases. The most frequent age group among new diagnoses was persons between the ages of 20-29 years; the mean age at HIV diagnosis was 37 years. Men who have sex with men (MSM) remained the most heavily impacted risk group, followed by injection drug users, including those who are MSM. Third most common was high-risk heterosexuals, defined as persons who had heterosexual sex with an injection drug user, a bisexual male, a person with a documented HIV/AIDS infection, a person who has hemophilia, or a person who has had a transfusion or transplant. Twenty-seven percent of newly diagnosed persons had "no identified risk" (NIR); however, 78% of NIR women and 64% of NIR men confirmed heterosexual contact, but did not provide risk information about their partners.

Greater proportions of American Indian/Alaska Native and African American persons living with HIV/AIDS were female (22% and 19%, respectively) than whites (11%) and Hispanics (11%). The two predominant modes of exposure for females were high-risk heterosexual sex (52%) and injection drug use (26%). Following this pattern, American Indian/Alaska Natives and African Americans had greater proportions of cases with high-risk heterosexual contact as their primary mode of exposure than other racial/ethnic groups (14% and 16%, respectively). Mean ages at HIV and AIDS diagnoses did not differ substantially by sex, race or mode of exposure.

Regional trends showed the following:

- Forty-six percent of all new diagnoses occurred in Bernalillo County; the majority of these cases were Hispanic (50%) and the most common age group was persons 30-39 years (31%).
- Northwestern New Mexico continued to report the largest proportion of new cases among American Indian/Alaska Natives (38%), while the northeastern and southwestern parts of the state reported the largest proportions of Hispanic cases (comprising 59% of new diagnoses in each region).

- Incidence continued to be the lowest in southeastern New Mexico. The rates of new diagnoses decreased in Bernalillo County and the northeast, remained relatively stable in the northwest, and increased in southeastern and southwestern New Mexico. The number of new cases diagnosed in the southwest increased 39% from 2007 to 2008.

A new table has been added to the 2008 Annual Report, describing the occurrence of concurrent diagnoses in NM, which is defined as individuals who progressed to AIDS less than one year after initial HIV diagnosis. Forty-three percent of all individuals diagnosed with HIV between 1998 and 2007 received a concurrent diagnosis of AIDS within one year. Twelve percent received an AIDS diagnosis more than one year following their initial diagnosis of HIV, and the remaining 45% had not progressed to AIDS by the end of 2008. A smaller proportion of women received concurrent diagnoses than men (35% versus 45%). The proportion of Hispanics with concurrent diagnoses was higher than that of Whites, African Americans, and American Indian/Alaska Natives (the number of Asians and those identifying as multi-race were too small for accurate comparison). The proportion of adults receiving concurrent diagnoses also increased with age at HIV diagnosis.

More than one-third (38%) of all living HIV/AIDS cases reported in New Mexico were diagnosed out of state. Cases that have been diagnosed out of state, but who received HIV/AIDS services in New Mexico are reportable to the New Mexico Department of Health. Out-of-state cases have been predominantly White males between the ages of 30-39 years, and were typically diagnosed in California, Texas, Colorado, or Arizona. Guidelines for national reporting to the Centers for Disease Control and Prevention (CDC) require that only cases diagnosed within New Mexico are counted. To support local planning and needs assessment for HIV/AIDS prevention, case management, and care, data on both New Mexico and out-of-state cases are presented together in this report.

The New Mexico Department of Health (NMDOH) HIV & Hepatitis Epidemiology Program provides epidemiologic data and reports both for national reporting purposes, and to support the activities of prevention and care planning groups using data for New Mexico and each geographic region within the state. Data for regions in New Mexico are based upon cases of HIV/AIDS whose residence at diagnosis was within New Mexico. Cases that were diagnosed in New Mexico may presently be living elsewhere. Out-of-state data are based upon HIV/AIDS cases previously diagnosed outside New Mexico who have received HIV care and support services in the state. The inclusion of these cases is important for accurate assessment of the overall burden of HIV/AIDS and, subsequently, access to HIV/AIDS prevention and care services.

To monitor the epidemic in New Mexico, it is ideal to measure over time the number of persons who become newly infected. Laboratory methods for identifying newly infected persons (i.e., incident cases) are currently in use in a limited number of states, not including New Mexico. For the purposes of this report, incident cases of HIV/AIDS are defined as reports of newly diagnosed cases of HIV or AIDS; the actual date of infection for an individual is unknown and thus can not be used to define an incident case. Further, disease status of cases may be HIV or AIDS. Newly diagnosed cases may or may not have progressed to AIDS within the calendar year. Prevalent cases are those known to still be living, either in New Mexico or elsewhere. Cumulative cases are the total cases, both living and dead, reported to the HIV & Hepatitis Epidemiology Program since AIDS and HIV became reportable conditions in New Mexico: 1981 and 1998, respectively. Current disease status at the end of 2008 is used to classify cumulative case data.

Staff from the HIV & Hepatitis Epidemiology Program are available to assist with interpretation of these data as well as to provide additional analyses. With your assistance, surveillance data will continue to guide HIV prevention strategies and resource allocation for care services in New Mexico. For questions or comments, please call (505) 476-1643 or email heidi.purcell@state.nm.us

When using these data to make planning decisions, it is important to consider their overall strengths and limitations. Although the purpose of the Annual Report is to provide comprehensive analyses of HIV/AIDS in New Mexico, some issues must be taken into consideration before the data are interpreted.

Surveillance for HIV/AIDS in New Mexico is population-based. The HIV & Hepatitis Epidemiology Program maintains an active surveillance system that combines the receipt of laboratory and provider reports with regular medical record reviews. Since the surveillance system does not systematically collect information or track migration in and out of New Mexico, data for cases diagnosed in New Mexico or out of state may not be exact. However, the methods used are consistent over time and are based upon guidelines set forth by CDC.

Surveillance is based on data about persons who have either tested confidentially for HIV since 1998 or have been diagnosed with AIDS since 1981. Reporting of HIV infections to the Department of Health began in 1998. Because there is no retroactive reporting prior to 1998, HIV infections in persons who tested prior to 1998 may have been missed. Therefore, HIV data prior to 1998 will not be representative. Persons who have tested anonymously, tested elsewhere outside of New Mexico, or who have not been tested are not reported. Thus HIV data do not directly reflect disease transmission but rather testing behavior, treatment outcomes, and access to medical care or services that follow HIV infection.

In 1993, CDC expanded the AIDS case definition for adults and adolescents aged 13 years or older. This expansion caused an abrupt increase of cases in 1993. The decline in cases since 1996 is related to the availability of highly active anti-retroviral therapy (HAART). HAART has increased the time of progression to AIDS, decreased AIDS-related deaths, and improved survival among persons with AIDS. Lastly, case reporting depends on diagnoses of AIDS either in a medical setting or at death and therefore reflects a person's interaction with the medical system.

Despite these limitations, HIV/AIDS surveillance data are considered to be more than 85% complete [CDC. HIV/AIDS Surveillance Report, 2003 (Vol. 15). US Department of Health and Human Services, CDC; 2004:1-46]. For this reason, the epidemiologic data are one of the major sources to inform both HIV prevention and HIV care planning.

CORE HIV/AIDS SURVEILLANCE DATA

All HIV and AIDS cases diagnosed or treated in New Mexico are reportable to the NMDOH HIV & Hepatitis Epidemiology Program. Initially established in 1981 to track newly diagnosed AIDS cases, the surveillance system was expanded in 1998 to include HIV reporting. Standardized case report forms are used to collect sociodemographic information, mode of exposures, laboratory and clinical information, vital status, and referrals for treatment or services. To allow for reporting delays, 2008 data are considered complete at the end of June 2009. All case information has been entered into the HIV/AIDS Reporting System (HARS), a standardized database developed by CDC. In July 2008, legacy information from HARS was converted to the Enhanced HIV/AIDS Reporting System (eHARS) and all subsequent case information is now entered in eHARS. Since testing behavior and access to services can influence reporting, surveillance data may underestimate the number of persons recently infected with HIV.

Due to the dynamic nature of HIV data, readers may notice discrepancies in the statistics reported in the annual reports from year to year. This is the result of a variety of factors including regular data cleaning, the national interstate de-duplication process (also known as the Routine Interstate De-duplication Report, or RIDR), and most recently, the conversion from HARS to eHARS and the resulting higher level of data scrutiny and quality adjustments.

VITAL STATISTICS DATA

The NMDOH Bureau of Vital Records and Health Statistics collects information on all births and deaths that occur in New Mexico. The HIV & Hepatitis Epidemiology Program ascertains vital status on reported cases by matching to death certificates. The data can also be used to determine the number of deaths related to HIV/AIDS. However, deaths resulting from HIV/AIDS or whose underlying cause was HIV/AIDS may be underreported on a death certificate.

POPULATION DATA

The Bureau of Business and Economic Research (BBER), located at the University of New Mexico, conducts economic and demographic research and analysis related to New Mexico. Analysis by BBER indicates that the U.S. Bureau of the Census underestimates New Mexico's population during intercensal years. New Mexico population data presented here represent revised estimates from BBER (<http://www.unm.edu/~bber>).

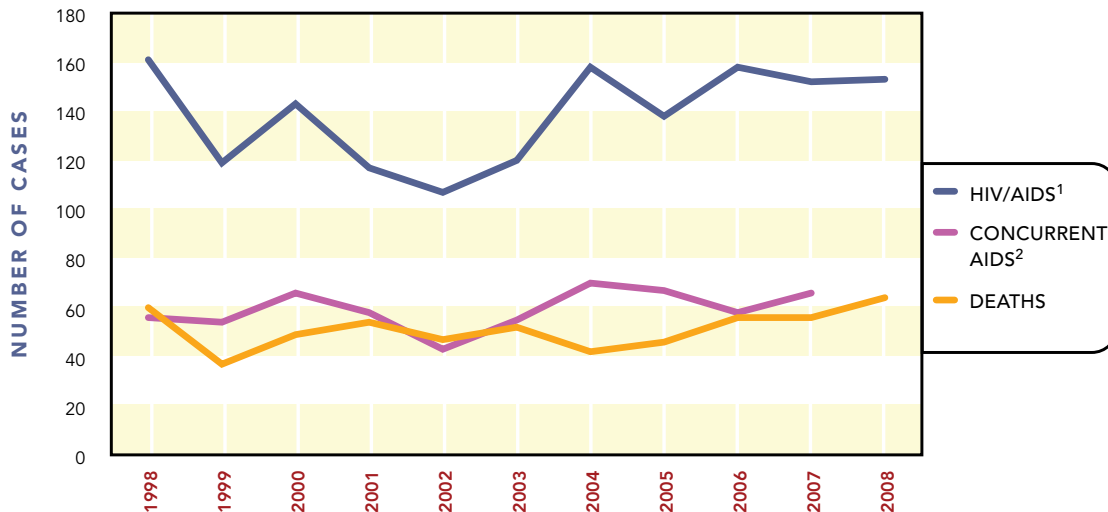
TABLES & FIGURES

HIV/AIDS IN NEW MEXICO

TABLE 1: SUMMARY OF ALL HIV AND AIDS CASES, NEW MEXICO, 1981-2008

	INCIDENT CASES, 2008			PREVALENT CASES, 1981-2008			CUMULATIVE CASES, 1981-2008				
	HIV/AIDS Number	Rate ¹	% of total	HIV Number	% of total	AIDS Number	% of total	HIV Number	% of total	AIDS Number	% of total
SEX											
Male	134	13.3	88%	1147	85%	2082	90%	1240	85%	3973	91%
Female	19	1.8	12%	209	15%	237	10%	218	15%	383	9%
RACE/ETHNICITY²											
White	48	5.4	31%	630	46%	1160	50%	681	47%	2313	53%
Hispanic	74	8.3	48%	508	37%	827	36%	540	37%	1494	34%
AI/AN	19	9.3	12%	103	8%	162	7%	111	8%	279	6%
African American	11	26.7	7%	103	8%	148	6%	113	8%	241	6%
Asian/PI	0	0.0	0%	10	1%	17	1%	11	1%	23	1%
Multi-race	1	-	1%	2	< 1%	5	< 1%	2	< 1%	6	< 1%
AGE AT DIAGNOSIS³											
< 13	1	0.3	1%	6	< 1%	11	< 1%	8	1%	17	< 1%
13-19	3	1.3	2%	57	4%	14	1%	58	4%	18	< 1%
20-29	44	16.1	29%	478	35%	381	16%	504	35%	728	17%
30-39	41	16.1	27%	472	35%	1014	44%	503	34%	1952	45%
40-49	42	13.0	27%	253	19%	681	29%	275	19%	1199	28%
50+	22	3.5	14%	90	7%	218	9%	110	8%	442	10%
MODE OF EXPOSURE⁴											
MSM	80	-	52%	784	58%	1444	62%	823	56%	2748	63%
IDU	9	-	6%	120	9%	233	10%	147	10%	439	10%
MSM/IDU	8	-	5%	113	8%	292	13%	124	9%	543	12%
Heterosexual	14	-	9%	150	11%	196	8%	155	11%	286	7%
Other	0	-	0%	2	< 1%	14	1%	3	< 1%	54	1%
NIR	42	-	27%	183	13%	122	5%	200	14%	259	6%
Pediatric	0	-	0%	4	< 1%	18	1%	6	< 1%	27	1%
TOTAL⁵	153	7.4	100%	1356	100%	2319	100%	1458	100%	4356	100%

FIGURE 1: TREND IN INCIDENT HIV/AIDS CASES AND MORTALITY, NEW MEXICO, 1998-2008



¹Includes persons with a diagnosis of HIV or AIDS, and excludes cases that were previously identified with HIV.

²Includes persons who were concurrently diagnosed with HIV infection and AIDS.

FOOTNOTES FOR ALL TABLES AND FIGURES

¹ Rates per 100,000 persons are based on 2005 population estimates from the Bureau of Business and Economic Research, University of New Mexico.

² Race/ethnicity categories: White, Hispanic, American Indian/Alaska Native (AI/AN), African American, Asian/Pacific Islander (Asian/PI).

³ Age at first positive test for HIV or age at diagnosis of AIDS.

⁴ Mode of exposure categories: Men who have sex with men (MSM), injection drug users (IDU), men who have sex with men and inject drugs (MSM/IDU), high-risk heterosexuals (Heterosexual), hemophiliacs, transfusion/transplant recipients, and healthcare workers (Other), no identified risk (NIR), and perinatal or < 13 years at time of infection (Pediatric).

⁵ Due to rounding, percentages may not total to 100%.

⁶ Excludes 3 cases that reported multi-race.

⁷ Excludes 7 cases that reported multi-race.

⁸ Concurrent diagnosis is defined as progression to AIDS within 12 months of HIV diagnosis.

⁹ Concurrent status cannot be determined for 2008 cases because 12 months has not passed since HIV diagnosis.

FIGURE 2: TREND IN INCIDENT HIV/AIDS CASES BY SEX, NEW MEXICO, 1998-2008

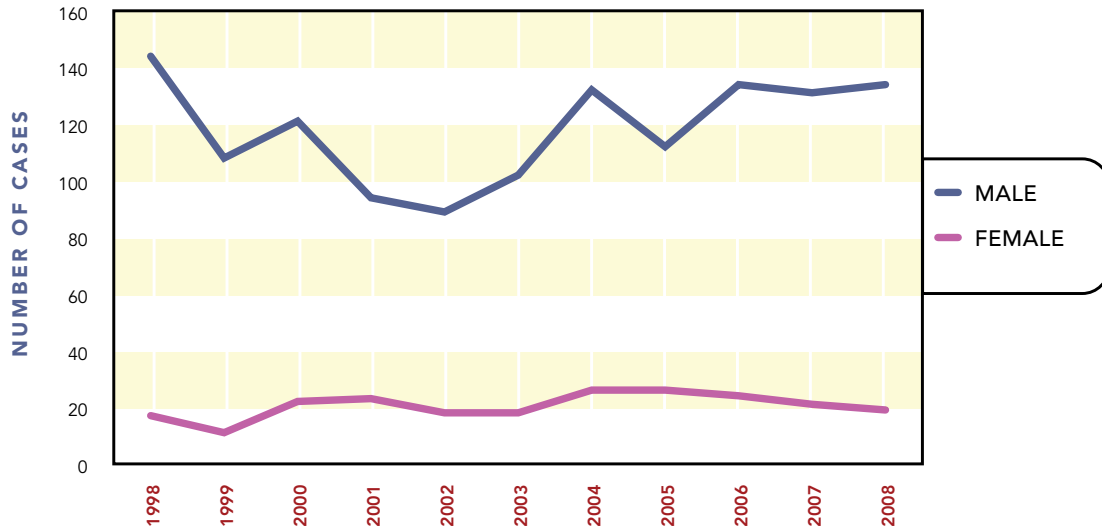


FIGURE 3: TREND IN INCIDENT HIV/AIDS CASES BY RACE/ETHNICITY⁶, NEW MEXICO, 1998-2008

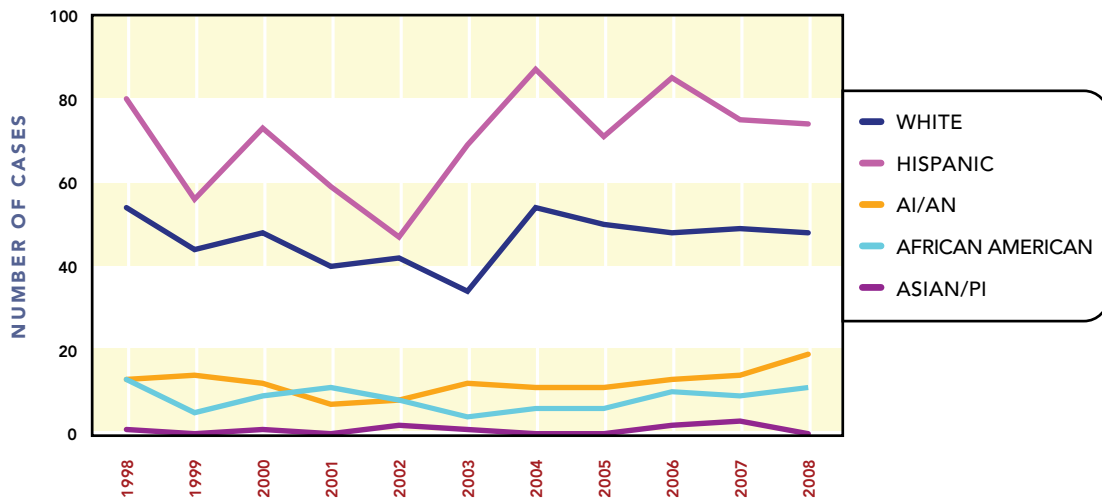


FIGURE 4: TREND IN INCIDENT HIV/AIDS CASES BY AGE AT DIAGNOSIS, NEW MEXICO, 1998-2008

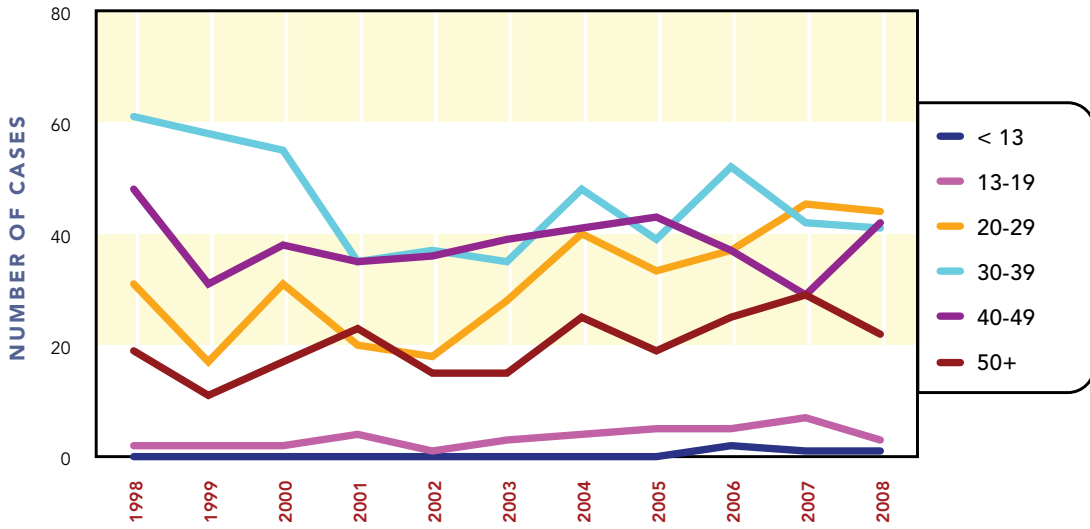


FIGURE 5: TREND IN INCIDENT HIV/AIDS CASES BY MODE OF EXPOSURE, NEW MEXICO, 1998-2008

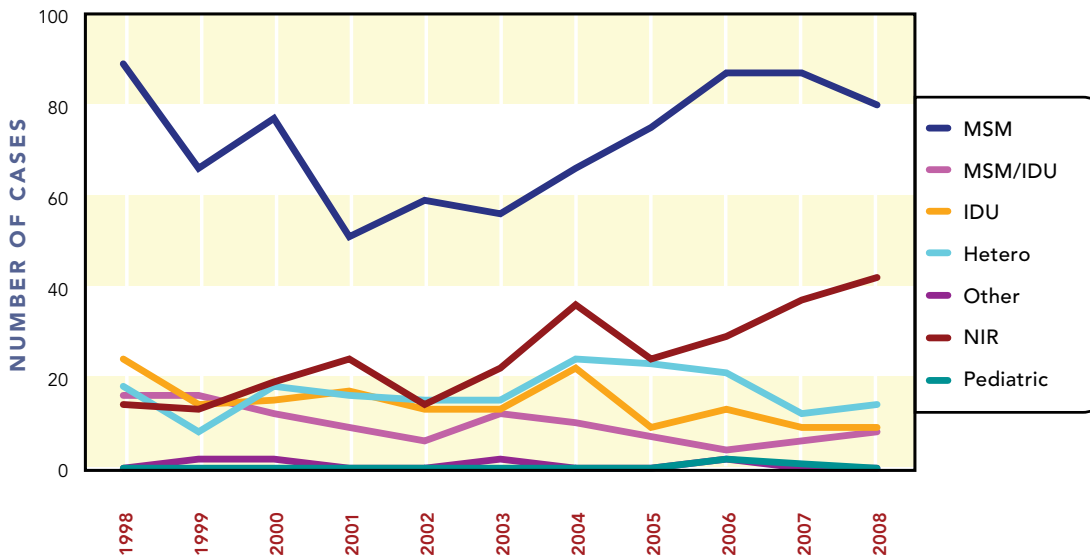


TABLE 2: PREVALENT HIV/AIDS CASES BY RACE/ETHNICITY⁷ AND SEX, NEW MEXICO, 1981-2008

	WHITE	HISPANIC	AI/AN	AFRICAN AMERICAN	ASIAN/PI	TOTAL
Male	1599	1191	207	203	23	3223
Female	191	144	58	48	4	445
TOTAL	1790	1335	265	251	27	3668

TABLE 3: PREVALENT HIV/AIDS CASES BY RACE/ETHNICITY⁷ AND MODE OF EXPOSURE, NEW MEXICO, 1981-2008

	WHITE	HISPANIC	AI/AN	AFRICAN AMERICAN	ASIAN/PI	TOTAL
MSM	1177	779	142	111	16	2225
IDU	160	131	24	34	2	351
MSM/IDU	228	121	29	25	1	404
Heterosexual	125	140	38	41	2	346
Other	6	7	3	0	0	16
NIR	88	148	28	35	5	304
Pediatric	6	9	1	5	1	22
TOTAL	1790	1335	265	251	27	3668

TABLE 4: PREVALENT HIV/AIDS CASES BY SEX AND MODE OF EXPOSURE, NEW MEXICO, 1981-2008

	MALE	FEMALE	TOTAL
MSM	2228	0	2228
IDU	237	116	353
MSM/IDU	405	0	405
Heterosexual	114	232	346
Other	8	8	16
NIR	225	80	305
Pediatric	12	10	22
TOTAL	3229	446	3675

TABLE 5: PREVALENT HIV/AIDS CASES BY SEX AND AGE AT DIAGNOSIS, NEW MEXICO, 1981-2008

YEARS	MALE	FEMALE	TOTAL
< 13	9	8	17
13-19	47	24	71
20-29	739	120	859
30-39	1342	144	1486
40-49	828	106	934
50+	264	44	308
TOTAL	3229	446	3675

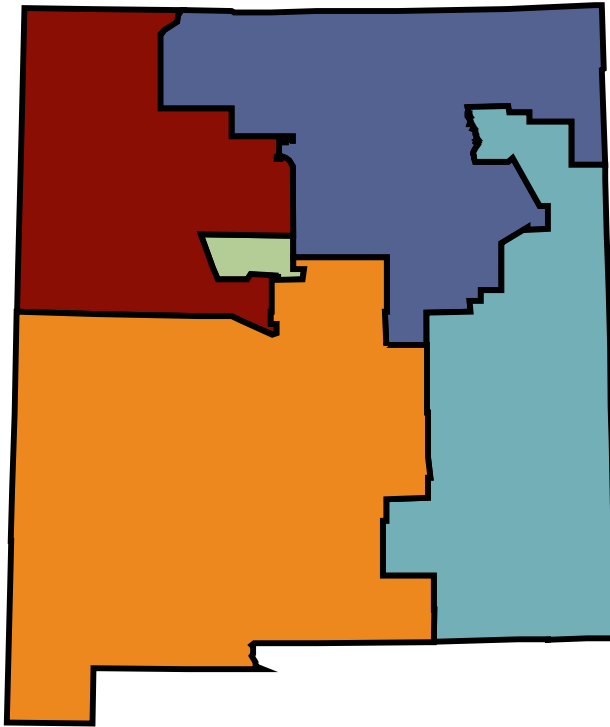
TABLE 6: PREVALENT HIV/AIDS CASES BY MODE OF EXPOSURE AND AGE AT DIAGNOSIS, NEW MEXICO, 1981-2008

YEARS	MSM	IDU	MSM/IDU	HETEROSEXUAL	OTHER	NIR	PEDIATRIC	TOTAL
< 13	0	0	0	0	0	2	15	17
13-19	29	0	6	12	1	17	6	71
20-29	508	83	102	84	2	79	1	859
30-39	943	137	189	114	4	99	0	1486
40-49	567	110	91	90	3	73	0	934
50+	181	23	17	46	6	35	0	308
TOTAL	2228	353	405	346	16	305	22	3675

TABLE 7: PREVALENT HIV/AIDS CASES BY RACE/ETHNICITY⁷ AND AGE AT DIAGNOSIS, NEW MEXICO, 1981-2008

YEARS	WHITE	HISPANIC	AI/AN	AFRICAN AMERICAN	ASIAN/PI	TOTAL
< 13	6	5	1	5	0	17
13-19	23	33	7	7	1	71
20-29	359	360	71	59	5	854
30-39	728	531	109	102	15	1485
40-49	499	316	55	58	6	934
50+	175	90	22	20	0	307
TOTAL	1790	1335	265	251	27	3668

FIGURE 6: HEALTH REGIONS IN NEW MEXICO



Counties are divided into regions as follows:

Northwest: San Juan, McKinley, Sandoval, Cibola and Valencia

Northeast: Rio Arriba, Taos, Colfax, Union, Los Alamos, Santa Fe, Mora, San Miguel and Guadalupe

Bernalillo County

Southeast: Harding, Quay, DeBaca, Curry, Roosevelt, Chaves, Eddy and Lea

Southwest: Torrance, Catron, Socorro, Lincoln, Grant, Sierra, Hidalgo, Luna, Doña Ana and Otero

TABLE 8: SUMMARY OF HIV/AIDS CASES IN NORTHWESTERN NEW MEXICO, 1981-2008

	INCIDENT CASES, 2008			PREVALENT CASES, 1981-2008			CUMULATIVE CASES, 1981-2008				
SEX	HIV/AIDS Number	Rate	% of total	HIV Number	% of total	AIDS Number	% of total	HIV Number	% of total	AIDS Number	% of total
Male	24	11.2	92%	111	84%	127	83%	116	84%	271	87%
Female	2	0.9	8%	21	16%	26	17%	22	16%	40	13%
RACE/ETHNICITY											
White	4	2.5	15%	36	27%	56	37%	38	28%	128	41%
Hispanic	8	6.6	31%	47	36%	44	29%	49	36%	87	28%
AI/AN	10	6.9	38%	38	29%	47	31%	39	28%	83	27%
African American	3	57.6	12%	10	8%	6	4%	11	8%	11	4%
Asian/PI	0	0.0	0%	0	0%	0	0%	0	0%	1	< 1%
Multi-race	1	-	4%	1	1%	0	0%	1	1%	1	< 1%
AGE AT DIAGNOSIS											
< 13	1	1.2	4%	1	1%	0	0%	1	1%	1	< 1%
13-19	1	1.7	4%	3	2%	0	0%	3	2%	2	1%
20-29	9	15.4	35%	44	33%	24	16%	48	35%	50	16%
30-39	7	13.0	27%	45	34%	65	42%	45	33%	135	43%
40-49	6	8.6	23%	29	22%	50	33%	31	22%	85	27%
50+	2	1.7	8%	10	8%	14	9%	10	7%	38	12%
MODE OF EXPOSURE											
MSM	12	-	46%	56	42%	75	49%	56	41%	158	51%
IDU	2	-	8%	15	11%	26	17%	17	12%	50	16%
MSM/IDU	1	-	4%	13	10%	14	9%	15	11%	28	9%
Heterosexual	1	-	4%	15	11%	22	14%	16	12%	32	10%
Other	0	-	0%	0	0%	2	1%	0	0%	11	4%
NIR	10	-	38%	33	25%	14	9%	34	25%	30	10%
Pediatric	0	-	0%	0	0%	0	0%	0	0%	2	1%
TOTAL	26	5.9	100%	132	100%	153	100%	138	100%	311	100%

HIV/AIDS DIAGNOSED IN NEW MEXICO

TABLE 9: SUMMARY OF HIV/AIDS CASES IN NORTHEASTERN NEW MEXICO, 1981-2008

	INCIDENT CASES, 2008			PREVALENT CASES, 1981-2008			CUMULATIVE CASES, 1981-2008				
	HIV/AIDS Number	Rate	% of total	HIV Number	% of total	AIDS Number	% of total	HIV Number	% of total	AIDS Number	% of total
SEX											
Male	16	10.7	94%	137	86%	275	92%	153	87%	580	93%
Female	1	0.7	6%	22	14%	25	8%	23	13%	42	7%
RACE/ETHNICITY											
White	6	5.0	35%	84	53%	154	51%	95	54%	362	58%
Hispanic	10	6.1	59%	63	40%	127	42%	68	39%	229	37%
AI/AN	0	0.0	0%	8	5%	8	3%	9	5%	16	3%
African American	1	45.0	6%	4	3%	10	3%	4	2%	13	2%
Asian/PI	0	0.0	0%	0	0%	1	< 1%	0	0%	2	< 1%
Multi-race	0	-	0%	0	0%	0	0%	0	0%	0	0%
AGE AT DIAGNOSIS											
< 13	0	0.0	0%	0	0%	0	0%	1	1%	0	0%
13-19	0	0.0	0%	6	4%	1	< 1%	6	3%	2	< 1%
20-29	5	15.4	29%	51	32%	29	10%	55	31%	66	11%
30-39	3	7.9	18%	54	34%	141	47%	61	35%	278	45%
40-49	5	9.7	29%	37	23%	95	32%	40	23%	196	32%
50+	4	3.8	24%	11	7%	34	11%	13	7%	80	13%
MODE OF EXPOSURE											
MSM	14	-	82%	104	65%	212	71%	112	64%	462	74%
IDU	0	-	0%	11	7%	20	7%	15	9%	31	5%
MSM/IDU	0	-	0%	16	10%	34	11%	17	10%	62	10%
Heterosexual	2	-	12%	18	11%	19	6%	18	10%	30	5%
Other	0	-	0%	1	1%	2	1%	2	1%	7	1%
NIR	1	-	6%	9	6%	12	4%	11	6%	28	5%
Pediatric	0	-	0%	0	0%	1	< 1%	1	1%	2	< 1%
TOTAL	17	5.6	100%	159	100%	300	100%	176	100%	622	100%

TABLE 10: SUMMARY OF HIV/AIDS CASES IN BERNALILLO COUNTY, NEW MEXICO, 1981-2008

	INCIDENT CASES, 2008			PREVALENT CASES, 1981-2008			CUMULATIVE CASES, 1981-2008				
SEX	HIV/AIDS Number	Rate	% of total	HIV Number	% of total	AIDS Number	% of total	HIV Number	% of total	AIDS Number	% of total
Male	59	18.7	84%	369	87%	554	90%	405	88%	1250	92%
Female	11	3.3	16%	53	13%	60	10%	56	12%	108	8%
RACE/ETHNICITY											
White	25	8.3	36%	183	43%	258	42%	202	44%	646	48%
Hispanic	35	12.5	50%	187	44%	290	47%	204	44%	570	42%
AI/AN	5	16.5	7%	20	5%	25	4%	20	4%	61	4%
African American	5	27.9	7%	29	7%	36	6%	31	7%	74	5%
Asian/PI	0	0.0	0%	3	1%	4	1%	4	1%	6	< 1%
Multi-race	0	-	0%	0	0%	1	< 1%	0	0%	1	< 1%
AGE AT DIAGNOSIS											
< 13	0	0.0	0%	0	0%	2	< 1%	1	< 1%	3	< 1%
13-19	1	1.6	1%	17	4%	4	1%	17	4%	5	< 1%
20-29	16	18.8	23%	144	34%	100	16%	152	33%	236	17%
30-39	22	25.6	31%	146	35%	244	40%	156	34%	582	43%
40-49	21	19.9	30%	84	20%	198	32%	93	20%	381	28%
50+	10	4.9	14%	31	7%	66	11%	42	9%	151	11%
MODE OF EXPOSURE											
MSM	37	-	53%	281	67%	399	65%	296	64%	884	65%
IDU	3	-	4%	28	7%	46	7%	41	9%	111	8%
MSM/IDU	6	-	9%	30	7%	58	9%	33	7%	155	11%
Heterosexual	6	-	9%	43	10%	61	10%	44	10%	91	7%
Other	0	-	0%	0	0%	4	1%	0	0%	14	1%
NIR	18	-	26%	40	9%	41	7%	46	10%	97	7%
Pediatric	0	-	0%	0	0%	5	1%	1	< 1%	6	< 1%
TOTAL	70	10.9	100%	422	100%	614	100%	461	100%	1358	100%

HIV/AIDS DIAGNOSED IN NEW MEXICO

TABLE 11: SUMMARY OF HIV/AIDS CASES IN SOUTHEASTERN NEW MEXICO, 1981-2008

	INCIDENT CASES, 2008			PREVALENT CASES, 1981-2008			CUMULATIVE CASES, 1981-2008				
	HIV/AIDS Number	Rate	% of total	HIV Number	% of total	AIDS Number	% of total	HIV Number	% of total	AIDS Number	% of total
SEX											
Male	6	4.8	75%	29	63%	67	85%	35	66%	152	84%
Female	2	1.5	25%	17	37%	12	15%	18	34%	28	16%
RACE/ETHNICITY											
White	4	3.0	50%	21	46%	33	42%	26	49%	85	47%
Hispanic	2	1.9	25%	17	37%	33	42%	18	34%	74	41%
AI/AN	0	0.0	0%	0	0%	1	1%	0	0%	2	1%
African American	2	23.1	25%	7	15%	10	13%	8	15%	16	9%
Asian/PI	0	0.0	0%	0	0%	1	1%	0	0%	2	1%
Multi-race	0	-	0%	1	2%	1	1%	1	2%	1	1%
AGE AT DIAGNOSIS											
< 13	0	0.0	0%	1	2%	0	0%	1	2%	0	0%
13-19	0	0.0	0%	2	4%	1	1%	2	4%	1	1%
20-29	4	11.2	50%	18	39%	12	15%	19	36%	31	17%
30-39	0	0.0	0%	15	33%	36	46%	16	30%	76	42%
40-49	2	5.2	25%	6	13%	25	32%	9	17%	54	30%
50+	2	2.6	25%	4	9%	5	6%	6	11%	18	10%
MODE OF EXPOSURE											
MSM	3	-	38%	18	39%	35	44%	20	38%	80	44%
IDU	2	-	25%	9	20%	14	18%	10	19%	37	21%
MSM/IDU	0	-	0%	3	7%	12	15%	4	8%	22	12%
Heterosexual	0	-	0%	8	17%	10	13%	8	15%	17	9%
Other	0	-	0%	1	2%	1	1%	1	2%	6	3%
NIR	3	-	38%	6	13%	6	8%	9	17%	17	9%
Pediatric	0	-	0%	1	2%	1	1%	1	2%	1	1%
TOTAL	8	3.1	100%	46	100%	79	100%	53	100%	180	100%

TABLE 12: SUMMARY OF HIV AND AIDS CASES DIAGNOSED IN SOUTHWESTERN NEW MEXICO, 1981-2008

	INCIDENT CASES, 2008			PREVALENT CASES, 1981-2008			CUMULATIVE CASES, 1981-2008				
	HIV/AIDS Number	Rate	% of total	HIV Number	% of total	AIDS Number	% of total	HIV Number	% of total	AIDS Number	% of total
SEX											
Male	29	14.1	91%	135	76%	175	88%	140	75%	308	89%
Female	3	1.4	9%	43	24%	25	13%	46	25%	39	11%
RACE/ETHNICITY											
White	9	5.1	28%	60	34%	75	38%	64	34%	139	40%
Hispanic	19	8.7	59%	101	57%	113	57%	103	55%	188	54%
AI/AN	4	36.3	13%	4	2%	4	2%	5	3%	4	1%
African American	0	0.0	0%	12	7%	6	3%	13	7%	14	4%
Asian/PI	0	0.0	0%	1	1%	2	1%	1	1%	2	1%
Multi-race	0	-	0%	0	0%	0	0%	0	0%	0	0%
AGE AT DIAGNOSIS											
< 13	0	0.0	0%	1	1%	5	3%	1	1%	5	1%
13-19	1	2.1	3%	16	9%	2	1%	16	9%	2	1%
20-29	10	16.2	31%	69	39%	33	17%	71	38%	51	15%
30-39	9	18.7	28%	54	30%	86	43%	56	30%	158	46%
40-49	8	14.0	25%	27	15%	47	24%	27	15%	79	23%
50+	4	3.1	13%	11	6%	27	14%	15	8%	52	15%
MODE OF EXPOSURE											
MSM	14	-	44%	64	36%	109	55%	66	35%	187	54%
IDU	2	-	6%	17	10%	26	13%	19	10%	49	14%
MSM/IDU	1	-	3%	6	3%	22	11%	6	3%	32	9%
Heterosexual	5	-	16%	25	14%	20	10%	26	14%	32	9%
Other	0	-	0%	0	0%	1	1%	0	0%	5	1%
NIR	10	-	31%	66	37%	16	8%	69	37%	35	10%
Pediatric	0	-	0%	0	0%	6	3%	0	0%	7	2%
TOTAL	32	7.7	100%	178	100%	200	100%	186	100%	347	100%

FIGURE 7: PREVALENT HIV/AIDS CASES BY REGION, NEW MEXICO, 1981-2008

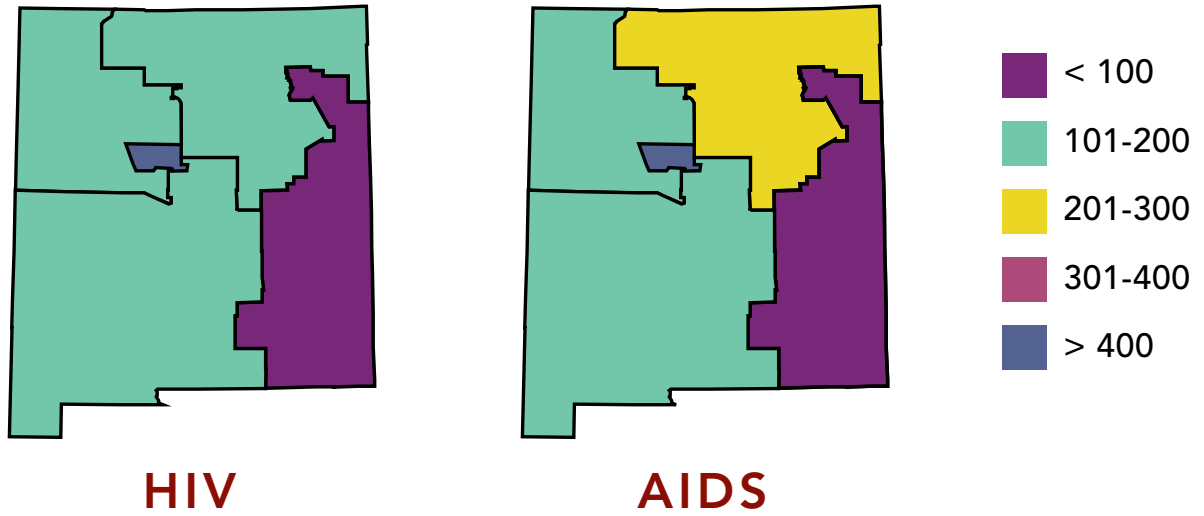


FIGURE 8: CUMULATIVE HIV/AIDS CASES BY REGION, NEW MEXICO, 1981-2008

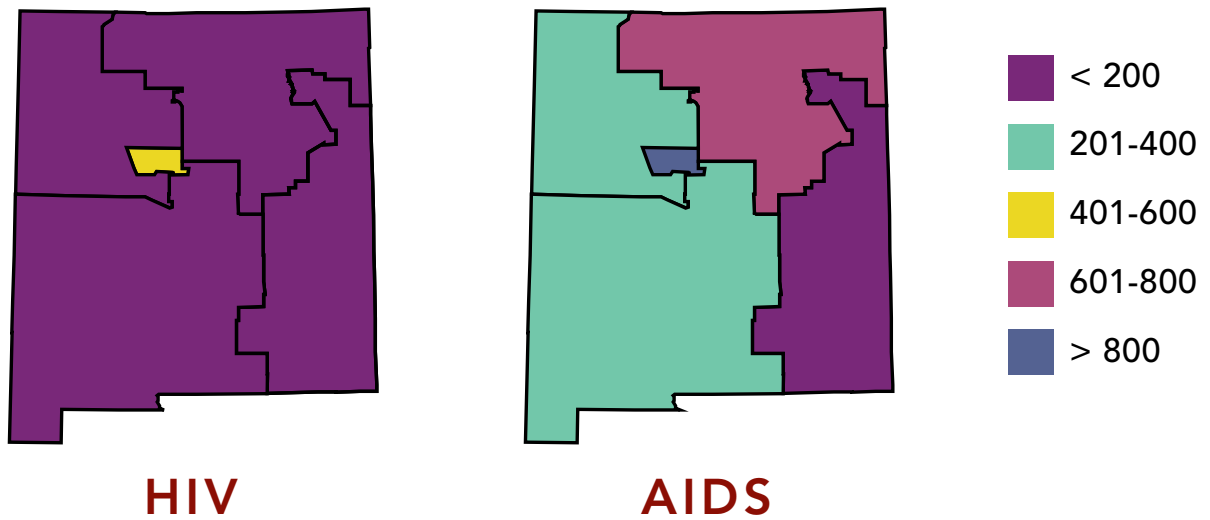


TABLE 13: SUMMARY OF CASES THAT RECEIVED AN AIDS DIAGNOSIS CONCURRENT⁸ AND NON-CONCURRENT TO INITIAL DIAGNOSIS OF HIV INFECTION, NEW MEXICO, 1998-2007⁹

	TOTAL HIV DIAGNOSES IN NM		RECEIVED AIDS DIAGNOSIS < 1 YEAR AFTER HIV DIAGNOSIS		RECEIVED AIDS DIAGNOSIS ≥ 1 YEAR AFTER HIV DIAGNOSIS	
	Number	% of total	Number	% of HIV diagnoses	Number	% of HIV diagnoses
SEX						
Male	1167	85%	525	45%	138	12%
Female	206	15%	72	35%	27	13%
RACE/ETHNICITY						
White	463	34%	189	41%	54	12%
Hispanic	702	51%	332	47%	72	10%
AI/AN	115	8%	44	38%	24	21%
African American	81	6%	25	31%	15	19%
Asian/PI	10	1%	5	50%	0	0%
Multi-race	2	< 1%	2	100%	0	0%
AGE AT HIV DIAGNOSIS						
< 13	3	< 1%	2	67%	0	0%
13-19	35	3%	2	6%	0	0%
20-29	298	22%	68	23%	25	8%
30-39	462	34%	211	46%	70	15%
40-49	377	27%	191	51%	54	14%
50+	198	14%	123	62%	16	8%
REGION AT DIAGNOSIS						
1, Northwest	213	16%	87	41%	36	17%
2, Northeast	196	14%	93	47%	20	10%
3, Bernalillo County	619	45%	275	44%	65	11%
4, Southeast	90	7%	44	49%	11	12%
5, Southwest	255	19%	98	38%	33	13%
MODE OF EXPOSURE						
MSM	713	52%	317	44%	86	12%
IDU	149	11%	62	42%	23	15%
MSM/IDU	98	7%	45	46%	20	20%
Heterosexual	170	12%	72	42%	27	16%
Other	8	1%	7	88%	0	0%
NIR	232	17%	92	40%	9	4%
Pediatric	3	< 1%	2	67%	0	0%
YEAR OF HIV DIAGNOSIS						
1998	161	12%	57	35%	40	25%
1999	119	9%	55	46%	23	19%
2000	143	10%	68	48%	20	14%
2001	117	9%	56	48%	24	21%
2002	107	8%	47	44%	18	17%
2003	120	9%	57	48%	15	13%
2004	158	12%	74	47%	12	8%
2005	138	10%	58	42%	5	4%
2006	158	12%	62	39%	7	4%
2007	152	11%	63	41%	1	1%
TOTAL	1373	100%	597	43%	165	12%

FIGURE 9: PROPORTIONS OF OUT-OF-STATE AND NEW MEXICO PREVALENT HIV/AIDS CASES BY SEX, NEW MEXICO, 1981-2008

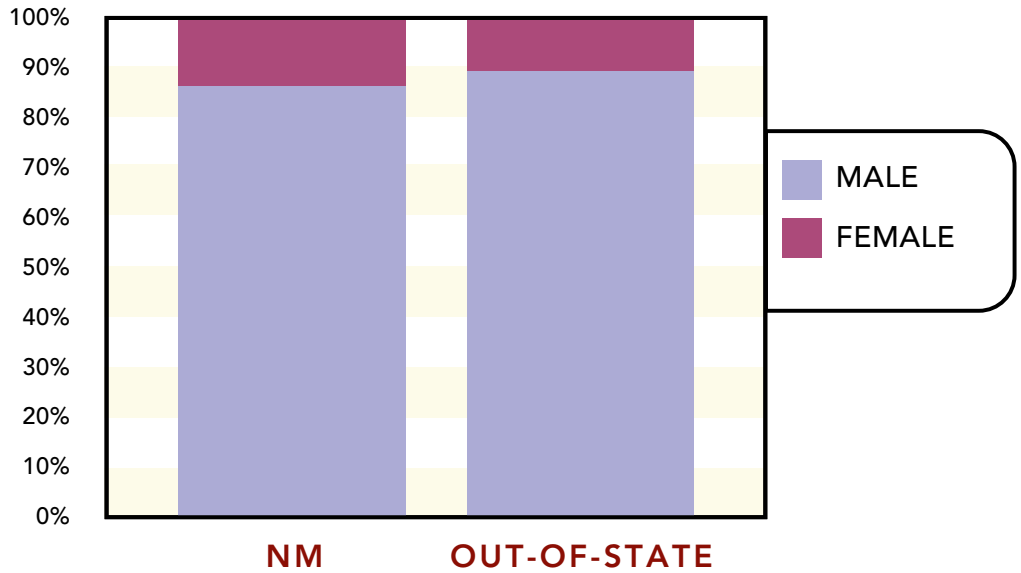


FIGURE 10: PROPORTIONS OF OUT-OF-STATE AND NEW MEXICO PREVALENT HIV/AIDS CASES BY RACE/ETHNICITY⁶, NEW MEXICO, 1981-2008

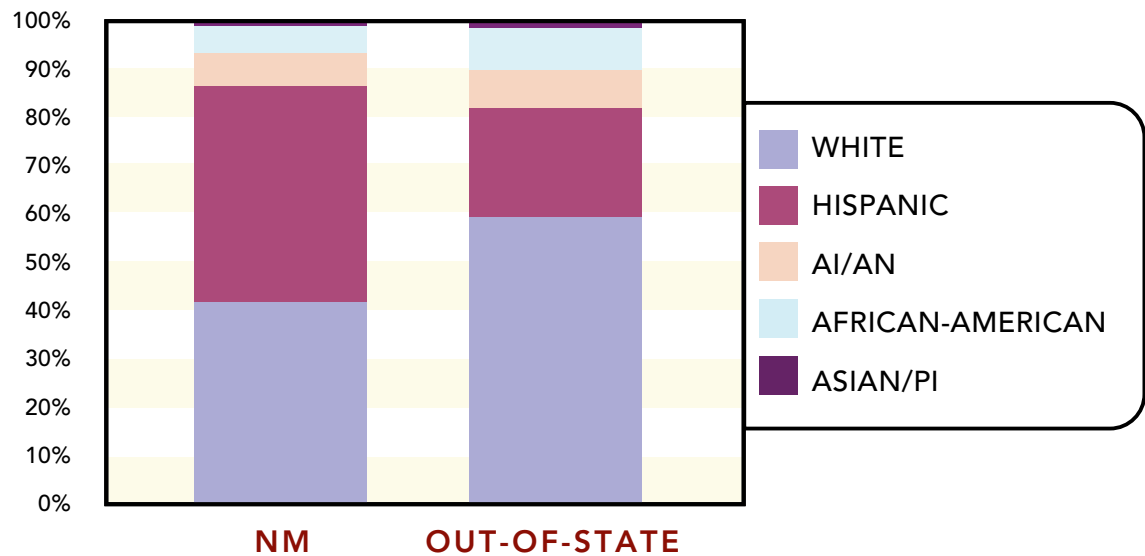


FIGURE 11: PROPORTIONS OF OUT-OF-STATE AND NEW MEXICO PREVALENT HIV/AIDS CASES BY AGE AT DIAGNOSIS⁷, NEW MEXICO, 1981-2008

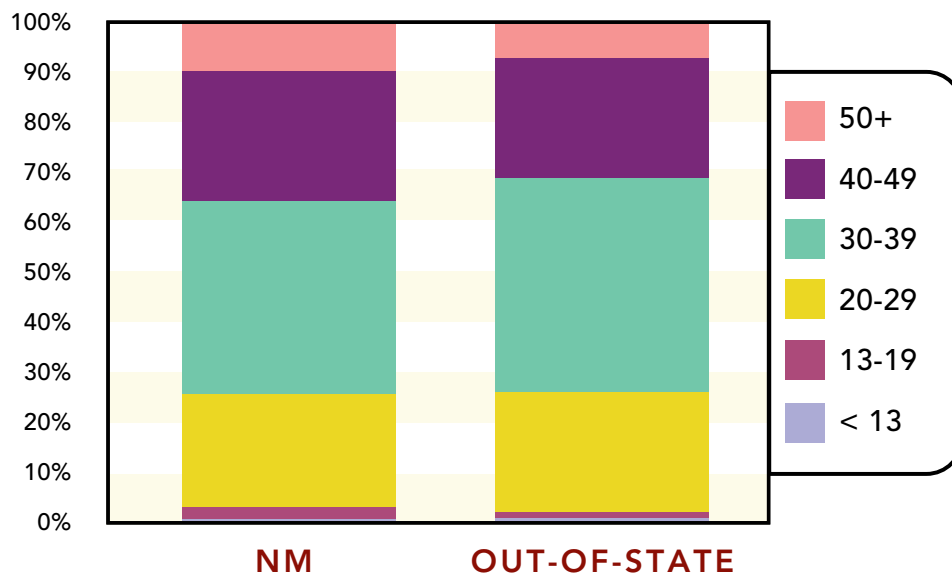
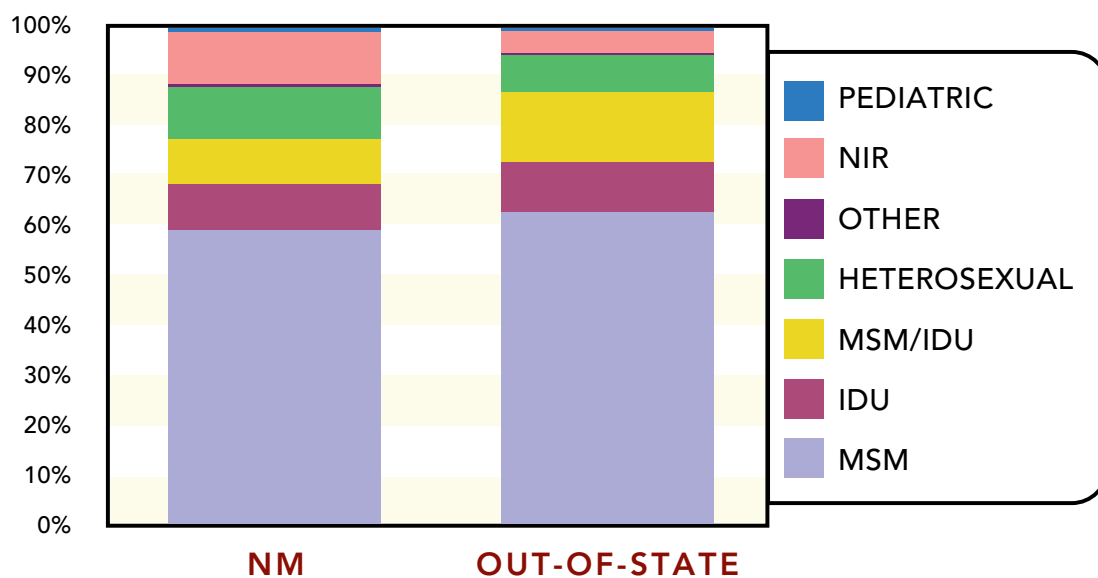


FIGURE 12: PROPORTIONS OF OUT-OF-STATE AND NEW MEXICO PREVALENT HIV/AIDS CASES BY MODE OF EXPOSURE, NEW MEXICO, 1981-2008



AIDS (Acquired immune deficiency syndrome) Clinical diagnosis with AIDS is defined by a confirmed HIV positive test along with either 1) a CD4 positive lymphocyte count < 200; 2) a CD4 positive lymphocyte count < 14% of total lymphocytes; or 3) any of 26 opportunistic infections indicative of AIDS.

CDC U.S. Centers for Disease Control and Prevention

CDC/DHAP CDC's Division of HIV/AIDS Prevention

eHARS (Enhanced HIV/AIDS Reporting System) A modernized version of HARS that uses web-based technology for expanded, document-based data collection.

HARS (HIV/AIDS Reporting System) A standardized database developed by CDC for national reporting of HIV/AIDS.

Heterosexual (Heterosexual risk) Adults or adolescents \geq 13 years who have a history of sexual contact with bi-sexual males, injection drug users, persons with hemophilia, HIV-infected transfusion recipient, or other HIV-infected persons, with unknown risk.

HIV (Human immunodeficiency virus) Diagnosis with HIV infection is defined by either 1) a confirmed positive result on a screening test for HIV antibody (e.g., reactive enzyme immunoassay), followed by a positive result on a confirmatory test for HIV antibody (e.g., Western blot or immunofluorescence antibody test); or 2) a positive result or a detectable quantity on a virologic test (e.g., polymerase chain reaction, neutralization assay, or culture).

IDU (Injection drug user) Adults or adolescents \geq 13 years who have a history of injecting illicit or nonprescription drugs.

MSM (Men who have sex with men) Adults or adolescents \geq 13 years who have a history of sexual contact with men or with both men and women.

NIR (No identified risk) Adults or adolescents \geq 13 years who have no reported history of exposure to HIV, as defined by CDC. NIR cases can be under investigation, have incomplete histories because they have died, have refused to divulge their history, or were lost to follow up. Cases under investigation may take up to a year to resolve.

NMDOH New Mexico Department of Health

Other (Other risk) Adults or adolescents \geq 13 years who have a history of hemophilia or coagulation disorder, receipt of blood transfusion, blood components or tissue.

Pediatric (Pediatric risk) Children < 13 years who have a history of hemophilia or coagulation disorder, receipt of blood transfusion, blood components or tissue, or had a mother with injection drug use, heterosexual risk for HIV, or otherwise known to be HIV positive.

HIV & Hepatitis Epidemiology Program, (505) 476-3563

Conducts state-wide surveillance and analysis of HIV/AIDS, hepatitis B and hepatitis C data.

www.nmhealth.org/ERD/HealthData/hiv_aids.shtml

HIV Prevention Program, (505) 476-3612

Supports community planning, HIV prevention and HIV testing activities across the state, including training, capacity building, funding and oversight.

www.health.state.nm.us/idb/HIV.shtml

HIV Services Program, (505) 476-3628

Supports a statewide array of providers in the Health Management Alliance (HMA) network that provide case management, medical care and support services for people with HIV/AIDS.

New Mexico HIV, STD and Hepatitis Resource Guide

www.nmhivguide.org

New Mexico HIV Prevention Community Planning and Action Group (CPAG)

This group is co-chaired by representatives from NMDOH, the community, and persons living with HIV/AIDS. The CPAG collaborates with NMDOH to develop a statewide Comprehensive HIV Prevention Plan.

www.nmcpag.org

HIV/AIDS Health Management Alliance (HMA)

The HMA is a non-profit health care system consisting of six partner organizations that offer comprehensive services including medical and case management, support, and prevention for HIV.

New Mexico AIDS Services

Based in Albuquerque and serves northwestern New Mexico.

(888) 882-2437

www.nmas.net

University of New Mexico Health Sciences Center, Truman Street Clinic

Based in Albuquerque and serves northwestern New Mexico in collaboration with New Mexico AIDS Services.

(505) 272-1312

First Nations Community Health Source

Based in Albuquerque and serves the American Indian/Alaska Native community.

(505) 262-2481

www.fnch.org

Southwest CARE Center

Based in Santa Fe and serves northeastern New Mexico.

(888) 320-8200

www.southwestcare.org

Alianza of New Mexico

Based in Roswell and serves southeastern New Mexico.

(800) 957-1995

www.alianzanm.org

La Clinica de Familia

Based in Doña Ana County and serves southwestern New Mexico.

(575) 526-1105

www.lcdfnm.org

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HIV  **HEPATITIS**
EPIDEMIOLOGY PROGRAM
NEW MEXICO DEPARTMENT OF HEALTH

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www.nmhealth.org/ERD/HealthData/hiv_aids.shtml