

Nevada State Health Division
HIV/AIDS Surveillance Program
Office of Public Health Informatics and Epidemiology
Bureau of Health Statistics, Planning, Epidemiology and Response

Brian Sandoval, Governor

Michael J. Willden, Director Department of Health and Human Services



Richard Whitley, M.S., Administrator

Tracey D. Green, MD, State Health Officer Nevada Health Division

## **ACKNOWLEDGMENTS**

### Written, compiled, and edited by:

### Aliya Buttar, MPH

HIV/AIDS Epidemiology Capacity Coordinator

#### **Mylynn Dumlao**

Centers for Disease Control and Prevention (CDC) Public Health Associate

### Sandi Noffsinger, MPH

HIV/AIDS/STD/Hepatitis Surveillance and Control Manager

#### James Jordan, MS

Biostatistician

#### Julia Peek, MHA

Office of Public Health Informatics and Epidemiology Manager

### A Special Thanks to:

Ihsan Azzam, MD, MPH

State Epidemiologist

Jay Kvam, MSPH

State Biostatistician

#### **Chad Westom**

Bureau Chief, Bureau of Health Statistics, Planning, Epidemiology and Response

#### Tracey D. Green, MD

State Health Officer, Nevada State Health Division

#### Richard Whitley, MS

Administrator, Nevada State Health Division

Northern and Southern Nevada HIV/AIDS Community Planning Groups

Carson City Health and Human Services, Southern Nevada Health District, and Washoe County Health District HIV/AIDS Surveillance Programs

# **TABLE OF CONTENTS**

Preface	
List of Tables and Figures	p. i
Definitions	p. iii
Abbreviations	p. v
List of Tables and Figures  Definitions Abbreviations  Executive Summary	p. vi
Profile Update	
Overview of HIV/AIDS in Nevada	p. 1
Geographic Area	p. 3
Sex at Birth	p. 4
Race/Ethnicity	p. 8
Age	p. 12
Facility of Diagnosis	p. 16
Late Diagnoses (an AIDS diagnosis within one year of an HIV diagnosis)	
Deaths and Survival after an AIDS Diagnosis	p. 19
Geographic Maps of HIV/AIDS	p. 21
Summary Data Tables	p. 27

# **TABLES AND FIGURES**

Figure 1 Persons Living with HIV/AIDS, New HIV Infections, New AIDS Cases, and Deaths in Nevada, 1982-2011	p. 1
Table 1  Persons Living with HIV/AIDS, New HIV Infections, New AIDS Diagnoses, and Deaths in Nevada, 1982-2011	p. 1
Figure 2   Total Population, New HIV Infections, and persons living with HIV/AIDS in Nevada by County, 2011	p. 3
Figure 3   Annual Rate of New HIV Infections in Nevada by County, 2007-2011	p. 3
Figure 4  Persons Living with HIV/AIDS in Nevada by County, 2007-2011	p. 3
Figure 5   Annual Rate of New HIV Infections and AIDS Diagnoses in Nevada by Sex, 2007-2011	p. 4
Figure 6   Annual Rate of New HIV Infections in Nevada by Sex and Race/Ethnicity, 2011	p. 4
Figure 7  Annual Rate of New HIV Infections in Nevada by Sex and Age, 2011	p. 4
Table 2   New HIV Infections in Nevada by Sex and Transmission Category, 2007-2011	p. 5
Figure 8   Annual Rate of Persons Living with HIV/AIDS and AIDS (not HIV) in Nevada by Sex, 2007-2011	p. 6
Figure 9  Annual Rate of Persons Living with HIV/AIDS in Nevada by Sex and Race/Ethnicity, 2011	р. 6
Figure 10   Annual Rate of Persons Living with HIV/AIDS in Nevada by Sex and Age, 2011	p. 7
Table 3   Persons Living with HIV/AIDS in Nevada by Sex and Transmission Category, 2007-2011	p. 7
Figure 11 Annual Rate of New HIV Infections in Nevada by Race/Ethnicity, 2007 – 2011	p. 8
Figure 12   Annual Rate of New HIV Infections among Males in Nevada by Race/Ethnicity, 2007 – 2011	p. 8
Figure 13   Annual Rate of New HIV Infections among Females in Nevada by Race/Ethnicity, 2007 – 2011	p. 8
Figure 14 Rates of New HIV Infections by Age at Diagnosis and Race/Ethnicity, 2011	p. 9
Table 4  New HIV Infections in Nevada by Race/Ethnicity and Transmission Category, 2011	p. 9
Figure 15   Annual Rate of Persons Living with HIV/AIDS in Nevada by Race/Ethnicity, 2007 – 2011	p. 10
Figure 16   Annual Rate of Males Living with HIV/AIDS in Nevada by Race/Ethnicity, 2007 – 2011	p. 10
Figure 17   Annual Rate of Females Living with HIV/AIDS in Nevada by Race/Ethnicity, 2007 – 2011	p. 10
Figure 18   Rate of Persons Living with HIV/AIDS by Age at End of Year and Race/Ethnicity, 2011	p. 11
Table 5   Persons Living with HIV/AIDS in Nevada by Race/Ethnicity and Transmission Category, 2011	p. 11
Figure 19   Annual Rate of New HIV Infections in Nevada by Age at Diagnosis, 2007 – 2011	p. 12
Figure 20   Annual Rate of New HIV Infections among Males in Nevada by Age at Diagnosis, 2007 – 2011	p. 12
Figure 21   Annual Rate of New HIV Infections among Females in Nevada by Age at Diagnosis, 2006 – 2010	p. 12
Table 6  New HIV Infections by Age at Diagnosis and Transmission Category, 2011	p. 13
Figure 22 Annual Rate of Persons Living with HIV/AIDS by Age at End of Year, 2007-2011	p. 14

### **DEFINITIONS**

#### All other counties

The category all other counties includes all counties in Nevada outside of Clark and Washoe Counties, which are Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

#### Age at diagnosis

Age at diagnosis is the age of the individual at the time he/she was diagnosed with HIV and/or AIDS.

#### Age at end of year

Age at end of year is calculated based on a person's date of birth, and is the person's age at the end of the report year. If the date of birth is incomplete or unknown, age at end of year cannot be calculated.

#### **Cumulative deaths**

The total number of deaths from the beginning of the epidemic through the end of the report year

#### Deaths among persons living with HIV/AIDS

Deaths among persons living with HIV/AIDS may or may not have been due to HIV or AIDS. Deaths are counted for those persons whose current residence was Nevada at the end of the report year; therefore, cases that have died out of state may not be reflected in this data.

#### **eHARS**

Enhanced HIV/AIDS Reporting System; a document based data management system for tracking surveillance of HIV/AIDS

#### **HIV/AIDS** surveillance

The systematic collection, analysis, interpretation, dissemination, and evaluation of population-based information about persons with a diagnosis of HIV infection and persons with a diagnosis of AIDS

#### Morbidity

The occurrence of an illness, disease, or injury

#### **New HIV infections**

The category new HIV infections includes persons newly diagnosed with HIV infection in Nevada (both living and deceased) and excludes persons who were diagnosed in another state but who currently live in Nevada. This category also includes persons who were newly diagnosed with HIV and AIDS in the same year. Thus, the categories new HIV infections and new AIDS diagnoses will duplicate case counts for the same report year and cannot be combined.

In addition, the category new HIV infections is based on diagnoses of HIV infection and does not include every person who was infected with HIV. Many people do not get tested for HIV and cannot be included in surveillance statistics. Furthermore, a recent diagnosis may not reflect a new infection; an individual may be diagnosed with HIV many years after he/she was first infected.

#### **New AIDS diagnoses**

The category New AIDS Diagnoses includes persons newly diagnosed with AIDS in Nevada (both living and deceased) and excludes persons who were diagnosed in another state but who currently live in Nevada. This category also includes persons who were newly diagnosed with AIDS and HIV in the same year. Thus, the categories new AIDS diagnoses and new HIV infections will duplicate case counts for the same report year and cannot be combined.

The criteria for an AIDS diagnosis are: (1) a confirmed HIV infection and (2) either an AIDS-defining opportunistic infection or a CD4+ T-lymphocyte count of less than 200 cells/µL or percentage of less than 14.

#### Persons living with HIV (not AIDS)

This category includes persons currently living with HIV (not AIDS) in Nevada based on the most current address in eHARS. These persons may or may not have been diagnosed with HIV in Nevada.

#### **Persons living with AIDS**

This category includes persons currently living with AIDS in Nevada based on the most current address in eHARS. These persons may or may not have been diagnosed with HIV or AIDS in Nevada.

#### Persons living with HIV/AIDS

This category includes the total number of persons currently living with HIV and/or AIDS in Nevada based on the most current address in eHARS. These persons may or may not have been diagnosed with HIV or AIDS in Nevada. The categories persons living with HIV (not AIDS) and persons living with AIDS are mutually exclusive and can be combined to calculate the total number of persons living with HIV/AIDS.

#### Race/Ethnicity

The collection of race/ethnicity data in HIV/AIDS surveillance follows the guidelines set forth by the Office of Management and Budget (OMB) in 1997.

**Ethnicity:** There are two ethnicity categories: Hispanic/Latino and not Hispanic/Latino. All persons who identified as Hispanic/Latino are classified as Hispanic/Latino regardless of their racial identification.

Race: There are four race categories: White, Black/ African American, Asian/Native Hawaiian/Pacific Islander (API), and American Indian/Alaska Native (AI/AN). The categories Asian, Native Hawaiian, and Pacific Islander were combined into the single category API due to their small population size in Nevada. Persons categorized by race were not Hispanic/Latino.

#### **Rate**

The rapidity at which a health event occurs as indicated by the number of cases per number of people during a specific time period; In this report, rates were calculated for the 12-month period per 100,000 population using population estimates from the Nevada State Demographer's Office.

#### **Transmission Category**

The risk behavior associated with HIV transmission. A single person may have multiple exposures, so a hierarchy is used to select the risk factor that was most likely to cause HIV transmission. However, male-to-male sexual contact and injection drug use are equally likely to cause transmission, so males who report both of these behaviors are classified into a combined category. The primary transmission categories that have been identified are:

Male-to-male sexual contact (MSM): includes males with reported sexual contact with another male.

**Injection drug use (IDU):** includes persons who took non-prescribed drugs by injection, intravenously, intramuscularly or subcutaneously.

Male-to-male sexual contact and injection drug use (MSM+IDU): includes males who reported both male-to-male sexual contact and injection drug use.

**Heterosexual contact:** includes persons who had heterosexual contact with an HIV-infected person, an injection drug user, or a person who has received blood products. For females only, history of heterosexual sex with a bisexual male constitutes a transmission category of heterosexual contact.

**Perinatal transmission:** includes infants who were infected during gestation, birth, or postpartum through breastfeeding to an HIV-infected mother.

**Transfusion/Hemophilia:** includes hemophilia and receipt of transfusions or transplants.

No Identified Risk/ No Risk Reported (NIR/NRR): Persons who have no risk information reported by the provider or no risk factor was identified during an expanded investigation.

# **ABBREVIATIONS**

AIDS acquired immunodeficiency syndrome

AI/AN American Indian/Alaskan Native

API Asian/Hawaiian/Pacific Islander

CDC Centers for Disease Control and Prevention

eHARS enhanced HIV/AIDS Reporting System

HIV human immunodeficiency virus

EPI epidemiology

IDU injection drug use or injection drug user

MSM male-to-male sexual contact or men who have sex with men

MSM+IDU male-to-male sexual contact and injection drug use or men who have sex with men and use injection drugs

NIR no identified risk

NRR no reported risk

SB senate bill

## **EXECUTIVE SUMMARY**

At the end of 2011, a total of 8,511 persons were known to be living with HIV/AIDS in Nevada, over half (52%) of whom have been diagnosed with AIDS. During this same year, there were 378 new HIV infections, 216 new AIDS diagnoses, and 119 deaths among persons living with HIV/AIDS. However, since the start of the epidemic, the number of new HIV Infections, new AIDS cases, and deaths among persons living with HIV/AIDS has been steadily declining. Fewer people are becoming infected and people are living longer once they do become infected. Although many advances have been made in HIV/AIDS prevention and care, geographic, sex, age, and racial/ethnic disparities still exist within our state.

Of all the counties in Nevada, Clark County continues to have the highest morbidity of HIV/AIDS. In 2011, Clark County had the highest rate of new HIV infections (18.0 per 100,000 population) and rate of persons living with HIV/AIDS (374.7 per 100,000 population). In Washoe County, which is the next most populous county in Nevada, the rate of new HIV infections was 6.6 per 100,000 population and the rate of persons living with HIV/AIDS was 208.5 per 100,000 population. Due to their small population size, the remaining counties in the state are grouped into the category "all other counties." In 2011, the rate of new HIV infections in the all other counties region was only 0.9 cases per 100,000 population and the rate of persons living with HIV/AIDS was 119.4 per 100,000 population.

Males continue to be disproportionately affected by HIV/AIDS in Nevada. In 2011, 86% of newly diagnosed HIV infections were among males and 83% of persons living with HIV/AIDS were male. Furthermore, 71% of all newly infected persons had a transmission category of male-to-male sexual contact. Among males, Blacks and Hispanics had the highest rates of new infection (75.8 and 37.6 per 100,000 population respectively).

Large racial/ethnic disparities exist within our state, especially among Blacks/African Americans. In 2011, the rate of new HIV infections among Blacks was 6.8 times that of Whites (54.2 vs. 8.0 per 100,000 population). This disparity is even greater for Black females, whose rate of new HIV infections was nearly 14 times higher than that of White females (34.5 per 100,000 vs. 2.5 per 100,000 population). In addition, the rate of new HIV infections among Black youth was more than 10 times higher than that of White youth (84.7 vs. 8.2 per 100,000 population).

With regard to age, from 2007 to 2011 there has been a steady increase in the rate of new HIV infections among youth (13 to 24 years) and young adults (25 to 34 years), while other age groups have experienced substantial declines during this same time period. The rate among 13 to 24 year olds increased from 14.6 per 100,000 population in 2007 to 20.7 per 100,00 population in 2011. The rate among 25 to 34 year olds increased from 29.5 per 100,000 population in 2011.

New to this report are sections on facility of HIV and AIDS diagnosis, late HIV diagnoses, and survival after an AIDS diagnosis. These sections were developed in response to requests from individuals and agencies involved with HIV care and prevention, and it is hoped that they will help inform programming and policy.

Data on new HIV infections and new AIDS diagnoses presented in this report are from analyses of an August 2012 extract of the Nevada enhanced HIV/AIDS Reporting System (eHARS), and data on persons living with HIV/AIDS are from a February 2012 extract of the eHARS.

# **OVERVIEW OF HIV/AIDS IN NEVADA**

### **Historical Trends**

Figure 1 | Persons Living with HIV/AIDS, New HIV Infections, New AIDS Diagnoses, and Deaths in Nevada, 1982-2011

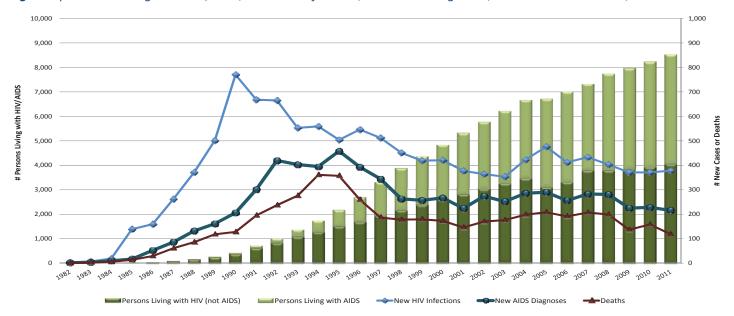


Table 1 | Persons Living with HIV/AIDS, New HIV Infections, New AIDS Diagnoses, and Deaths in Nevada, 1982-2011

	New HIV In	fections	New AIDS D	iagnoses	Persons Liv HIV (not	_	Persons Liv AID	_	Persons Liv HIV/A		Deaths	Cumulative Deaths
Year	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	N
1982	3	0.3	2	0.2	0	0.0	0	0.0	0	0.0	1	1
1983	7	0.8	4	0.4	1	0.1	0	0.0	1	0.1	3	4
1984	19	2.1	10	1.1	3	0.3	0	0.0	3	0.4	6	10
1985	139	14.5	17	1.8	7	0.7	2	0.2	10	1.0	14	24
1986	159	16.0	52	5.2	39	3.9	5	0.5	48	4.8	29	53
1987	262	25.3	86	8.3	85	8.2	8	0.8	101	9.8	61	114
1988	371	33.8	132	12.0	146	13.3	20	1.8	179	16.4	86	200
1989	501	43.1	161	13.9	237	20.4	38	3.3	295	25.4	118	318
1990	770	62.3	206	16.7	372	30.1	68	5.5	470	38.0	128	446
1991	668	50.7	301	22.8	616	46.7	104	7.9	767	58.1	195	641
1992	665	48.5	420	30.6	828	60.4	186	13.6	1,074	78.3	237	878
1993	553	38.6	403	28.1	1,080	75.4	302	21.1	1,457	101.8	276	1,154
1994	559	36.6	395	25.9	1,273	83.4	470	30.8	1,826	119.7	361	1,515
1995	504	31.3	458	28.4	1,505	93.4	671	41.6	2,269	140.8	357	1,872
1996		32.2	393	23.2	1,682	99.2	1,008	59.4	2,789		260	
	546								,	164.4		2,132
1997 1998	512 451	28.6 24.1	344 263	19.2 14.1	1,924 2,158	107.5 115.3	1,379 1,712	77.0 91.5	3,410 3,985	190.5 213.0	186 178	2,318 2,496
1999	419	21.5	257	13.2	2,138	122.4	1,712	101.3	4,476	230.0	178	2,490
2000	421	20.9	267	13.2	2,598	128.8	2,232	110.6	4,959	245.8	173	2,848
2001	377	17.7	224	10.5	2,812	132.2	2,493	117.2	5,437	255.7	146	2,994
2002	364	16.5	274	12.5	3,033	137.8	2,724	123.8	5,895	267.9	170	3,164
2003	353	15.4	252	11.0	3,245	141.7	2,962	129.3	6,349	277.1	176	3,340
2004	423	17.6	286	11.9	3,458	143.8	3,194	132.9	6,796	282.7	198	3,538
2005	476	19.0	290	11.6	3,104	123.7	3,594	143.2	6,822	271.8	208	3,746
2006	412	15.1	256	9.4	3,303	121.2	3,693	135.5	6,996	256.8	191	3,937
2007	433	15.9	283	10.4	3,779	139.0	3,537	130.1	7,316	269.1	207	4,144
2008	403	14.7	281	10.3	3,780	138.0	3,943	144.0	7,723	282.0	199	4,343
2009	371	13.7	225	8.3	3,838	141.6	4,108	151.5	7,946	293.1	137	4,480
2010	371	13.6	228	8.4	3,920	143.9	4,290	157.4	8,210	301.3	158	4,638
2011	378	14.1	216	8.0	4,043	150.5	4,468	166.3	8,511	316.8	119	4,757

<sup>\*</sup>The number of persons living with HIV/AIDS equals the number of persons living with HIV (not AIDS) plus the number of persons living with AIDS.

### Overview of HIV/AIDS in Nevada

**Figure 1:** In 1982, the first HIV infection in Nevada was diagnosed. Since then, the number of persons living with HIV/ AIDS has steadily increased while the number of new HIV infections, new AIDS diagnoses, and deaths has decreased. Fewer people are becoming infected, and people are living longer once they do become infected.

**Table 1:** Between 2007 to 2011, the number of persons newly diagnosed with HIV infection decreased 13%, from 433 to 378. The rate of new HIV infections also decreased, from 15.9 per 100,000 population in 2007 to 14.1 per 100,000 population in 2011.

As with new HIV infections, the number of new AIDS diagnoses has also decreased during this time period, from 283 in 2007 to 216 in 2011. In addition, the rate of new AIDS diagnoses has also decreased from 10.4 per 100,000 population in 2007 to 8.0 per 100,000 population in 2011.

In 2011, there were 4,043 persons living with HIV (not AIDS), 4,468 persons living with AIDS, and a total of 8,511 persons living with HIV/AIDS. Of the 8,511 persons living with HIV/AIDS at the end of 2011, 29% were diagnosed with HIV infection outside of Nevada. The number of persons living with HIV (not AIDS) increased 7% from 2007 to 2011, and the number of persons living with AIDS increased 26% from 2007 to 2011. The total number of persons living with HIV/AIDS in Nevada increased 16% from 7,316 in 2007 to 8,511 in 2011.

Since the beginning of the epidemic, 4,757 persons known to be living with HIV/AIDS in Nevada have died. In 2011 alone, there were 119 persons living with HIV/AIDS who died. In this report, cause of death is not specified; some of these deaths may have been due to HIV/AIDS related causes, while others may have been due to unrelated causes. Overall, the number of deaths among persons living with HIV/AIDS has been declining.

# **HIV/AIDS BY GEOGRAPHIC AREA**

Figure 2 | Total Population, New HIV Infections, and Persons

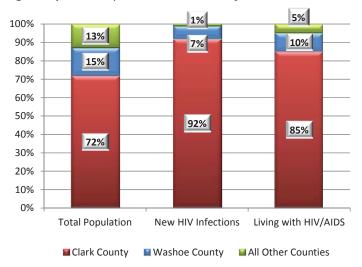


Figure 3 | Annual Rate of New HIV Infections in Nevada by County, 2007-2011

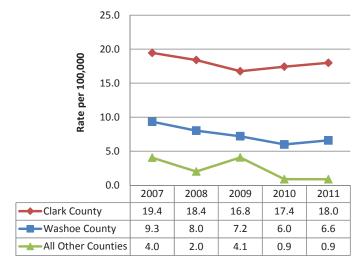


Figure 4 | Annual Rate of Persons Living with HIV/AIDS in Nevada by County, 2007—2011

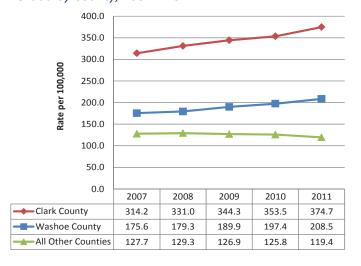


Figure 2: At the end of 2011, there were 2,686,135 persons living in Nevada. Nevada's population was concentrated in Clark County with the next most populous county being Washoe County. The remaining counties in the state will be grouped together and referred to as all other counties. In 2011, 13% of Nevada's population resided in all other counties.

Clark County accounts for a disproportionate amount of new HIV infections and persons living with HIV/ AIDS. In 2011, 92% of new HIV infections and 85% of persons living with HIV/AIDS were in Clark County, although only 72% of the total state population resided in Clark County.

Figure 3: In 2011, the rate of new infections in Clark County (18.0 per 100,000 population) was 2.7 times greater than that of Washoe County (6.6 per 100,000 population) and 20 times greater than that of all other counties (0.9 per 100,000 population). From 2007 to 2011, all regions have experienced a decline in their rate of new HIV infection.

Figure 4: Clark County has the highest rates of people living with HIV/AIDS, and in 2011 the rate in Clark County (374.7 per 100,000 persons) was 1.8 times higher than the rate in Washoe County (208.5 per 100,000 population) and 3.1 times higher than the rate in all other counties (119.4 per 100,000 population). From 2007 to 2011, in Clark and Washoe Counties the rate of persons living with HIV/AIDS increased, while in the all other counties region the rate decreased. This increase in Clark and Washoe Counties suggests that HIV-positive individuals are living longer. The decrease in all other counties may be due to the decrease in new infections as well as fewer persons diagnosed with HIV outside of Nevada moving to this region.

# **HIV/AIDS AND SEX AT BIRTH**

### **New HIV Infections and AIDS Diagnoses**

Figure 5 | Annual Rate of New HIV Infections and New AIDS Diagnoses in Nevada by Sex, 2007 – 2011

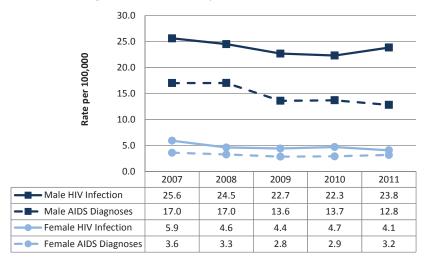
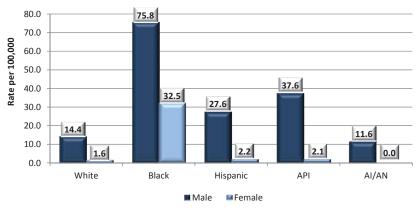


Figure 6 | Annual Rate of New HIV Infections in Nevada by Sex and Race/Ethnicity, 2011\*



<sup>\*</sup>There were 4 persons who identified as multi-racial in 2011. Data for these persons were not included in this figure.

Figure 7 | Annual Rate of New HIV Infections in Nevada by Sex and Age, 2011

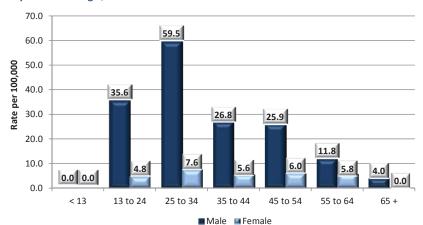


Figure 5: In 2011, the rate of new HIV infections among men (23.8 per 100,000 population) was almost six times that of women (4.1 per 100,000 population). Since 2007, the rate of new infections among men has decreased, while the rate among females has remained relatively stable.

The rate of new AIDS diagnoses among men is also significantly higher than that of women (12.8 vs. 3.2 per 100,000 population). However, the rate of new AIDS diagnoses among men has decreased over the last five years, while the rate among women has remained relatively stable.

Figure 6: In 2011, rates of new HIV infections were highest among Blacks. The rate of new HIV infections among Black males (75.8 per 100,000 population) was 5.3 times higher than that of White males (14.4 per 100,000 population), and the rate of new HIV infections among Black females (32.5 per 100,000 population) was 20.3 times higher than that of White females (1.6 per 100,000 population). Hispanic and Asian/Hawaiian/Pacific Islander (API) males also experienced disparately high rates of new HIV infection (27.6 and 37.6 per 100,000 population respectively).

Figure 7: In 2011, among men, the highest rates of new HIV infections were among persons 25 to 34 years old (59.5 per 100,000 population), 13 to 24 years old (35.6 per 100,000 population), and 35 to 44 years old (26.8 per 100,000 population)

Among women, rates of new HIV infections were highest among persons 25 to 34 years old (7.6 per 100,000 population), 55 to 64 years old (5.8 per 100,000 population), and 35 to 44 years old (5.6 per 100,000 population).

Table 2| New HIV Infections in Nevada by Sex and Transmission Category, 2007-2011

Transmission Category	200	7	200	8	200	9	201	LO	201	1
Transmission Category	N	%	N	%	N	%	N	%	N	%
Males										
MSM	281	79%	271	79%	266	85%	259	84%	270	83%
IDU	16	5%	27	8%	15	5%	15	5%	13	4%
MSM+IDU	17	5%	18	5%	17	5%	16	5%	17	5%
Heterosexual contact	27	8%	19	6%	7	2%	5	2%	10	3%
Perinatal exposure	1	0%	0	0%	0	0%	0	0%	1	0%
Transfusion/Hemophilia	0	0%	1	0%	0	0%	0	0%	0	0%
NIR/NRR	12	3%	5	1%	7	2%	13	4%	13	4%
Subtotal	354	100%	341	100%	312	100%	308	100%	324	100%
Females										
IDU	4	5%	4	6%	6	10%	4	6%	5	9%
Heterosexual contact	73	92%	55	89%	51	86%	50	79%	29	54%
Perinatal exposure	0	0%	0	0%	0	0%	1	2%	2	4%
Transfusion/Hemophilia	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	2	3%	3	5%	2	3%	8	13%	18	33%
Subtotal	79	100%	62	100%	59	100%	63	100%	54	100%
Total	433	100%	403	100%	371	100%	371	100%	378	100%

**Table 2:** From 2007 to 2011, male-to-male sexual contact (MSM) was the transmission category for over three-quarters of new HIV infections among males. Over the past five years, the percentage of newly infected males with a transmission category of MSM increased four percentage points. During this same time period, the percentage of males with a transmission category of injection drug use (IDU) and combined MSM and IDU has remained relatively stable.

Among females, heterosexual contact has been the most common transmission category. Although the percentage of females with this risk has decreased from 2007 to 2011, this is most likely due to more stringent risk ascertainment standards and not an actual decrease in heterosexual contact. Many of the cases that would have been assigned a risk of heterosexual contact did not meet the new risk ascertainment standards and thus were assigned no identified risk/no risk reported (NIR/NRR).

Since 2007, there have been few or no newly infected persons with a transmission category of perinatal exposure, which is most likely the result of SB 266. SB 266 was signed into law in 2007 and requires that HIV testing be provided to all pregnant women as part of routine prenatal care. This has resulted in more women being aware of their HIV status and providers appropriately treating HIV-positive pregnant women, thus decreasing HIV transmission. Persons in Table 2 who have a risk of perinatal exposure were born before 2007 and diagnosed several years after their birth. Their cases do not suggest poor implementation of SB 266.

### **Persons Living with HIV/AIDS**

Figure 8 | Annual Rate of Persons Living with HIV/AIDS, HIV (not AIDS), and AIDS in Nevada by Sex, 2007 – 2011

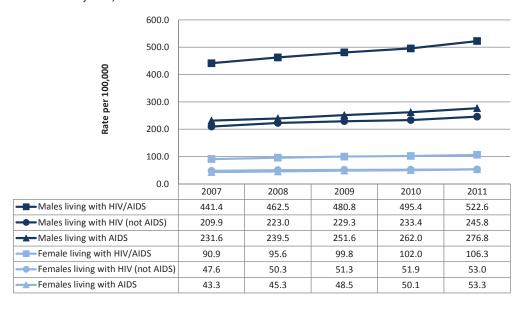
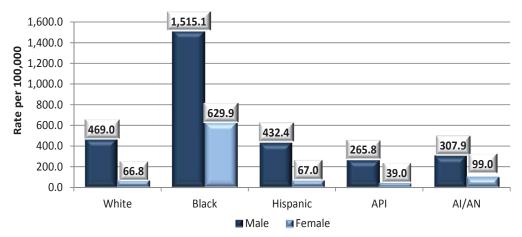


Figure 8: For both males and females, the rate of persons living HIV/AIDS has steadily increased. In 2011, the rate of males living with HIV/AIDS (522.6 per 100,000) was almost five times that of females (106.3 per 100,000). The rate of persons living with AIDS has also been increasing for both males and females. In 2011, the rate of males living with AIDS (276.7 per 100,000) was 5.2 times that of females (53.3 per 100,000).

Figure 9 | Annual Rate of Persons Living with HIV/AIDS in Nevada by Sex and Race/Ethnicity, 2011\*



\*There were 55 persons living with HIV/AIDS at the end of 2011 who identified as multi-racial. Data for these persons were not included in this figure.

Figure 9: For both males and females, the highest rate of persons living with HIV/AIDS was among Blacks. The rate among Black males was over 3 times that of White males (1,514.0 vs. 469.0 per 100,000 population), and the rate among Black females was over 9 times that of White females (629.9 vs. 66.8 per 100,000 population).

The rate of persons living with HIV/AIDS was lowest among API. API males had a rate of 265.8 per 100,000 population, and API females had a rate of 39.0 per 100,000 population.

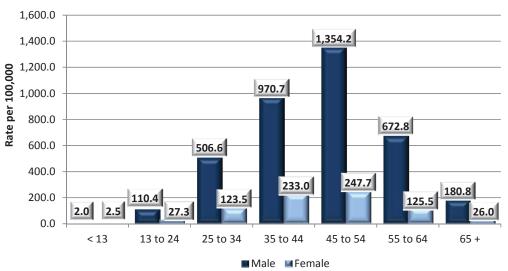


Figure 10 | Annual Rate of Persons Living with HIV/AIDS in Nevada by Sex and Age, 2011

Figure 10: Among males, 45 to 54 year olds followed by 35 to 44 year olds had the highest rates of persons living with HIV/AIDS in Nevada (1,354.2 and 970.7 per 100,000 population respectively).

Rates among females were similar to those of males. Females 45 to 54 years old had the highest rate of persons living with HIV/AIDS in Nevada (247.7 per 100,000 population) followed by females 35 to 44 years old (233.0 per 100,000 population).

**Table 3** | Persons Living with HIV/AIDS in Nevada by Sex and Transmission Category, 2007-2011

Transmission Category	200	7	200	)8	200	9	201	LO	201	1
Transmission Category	N	%	N	%	N	%	N	%	N	%
Males										
MSM	4,364	72%	4,649	72%	4,879	74%	5,092	74%	5,328	75%
IDU	499	8%	515	8%	489	7%	499	7%	499	7%
MSM+IDU	491	8%	496	8%	507	8%	510	7%	530	7%
Heterosexual contact	230	4%	247	4%	246	4%	255	4%	261	4%
Perinatal exposure	28	0%	29	0%	27	0%	26	0%	30	0%
Transfusion/Hemophilia	8	0%	9	0%	7	0%	7	0%	7	0%
NIR/NRR	482	8%	489	8%	458	7%	450	7%	445	6%
Subtotal	6,102	100%	6,434	100%	6,613	100%	6,839	100%	7,100	100%
Females										
IDU	251	21%	259	20%	259	19%	255	19%	253	18%
Heterosexual contact	674	56%	742	58%	799	60%	839	61%	867	61%
Perinatal exposure	27	2%	27	2%	26	2%	31	2%	33	2%
Transfusion/Hemophilia	5	0%	5	0%	4	0%	4	0%	4	0%
NIR/NRR	257	21%	256	20%	245	18%	242	18%	254	18%
Subtotal	1,214	100%	1,289	100%	1,333	100%	1,371	100%	1,411	100%
Total	7,316	100%	7,723	100%	7,946	100%	8,210	100%	8,511	100%

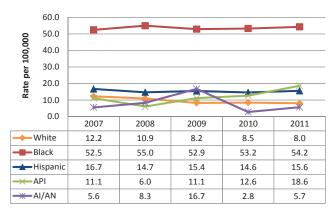
**Table 3:** In 2011, 75% of males living with HIV/AIDS had a transmission category of MSM. Since 2007, this has been the transmission category for 72% or more of males. In 2011, 7% of males living with HIV/AIDS had a transmission category of IDU, and 7% of males had a transmission category of combined MSM and IDU. The percentage of cases with a transmission category of IDU or combined MSM and IDU has remained relatively stable since 2007.

From 2007 to 2011, heterosexual contact has been the most common transmission category for females living with HIV/ AIDS, accounting for over half of all cases. IDU was the transmission category for 18% of females, and very few females had a transmission category of perinatal exposure or transfusion/hemophilia.

# **HIV/AIDS AND RACE/ETHNICITY**

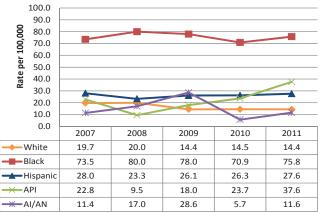
### **New HIV Infections**

Figure 11 | Annual Rate of New HIV Infections in Nevada by Race/Ethnicity, 2007 – 2011\*



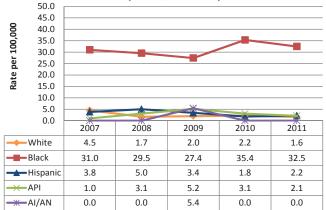
<sup>\*</sup>The number of persons who identified as multi-racial was 0 in 2007; 4 in 2008; 5 in 2009; 6 in 2010; and 4 in 2011. Data for these persons were not included in this figure.

**Figure 12** Annual Rate of New HIV Infections among Males in Nevada by Race/Ethnicity, 2007 – 2011\*



<sup>\*</sup>The number of males who identified as multi-racial was 0 in 2007; 3 in 2008; 5 in 2009; 4 in 2010; and 3 in 2011. Data for these persons were not included in this figure.

Figure 13 | Annual Rate of New HIV Infections among Females in Nevada by Race/Ethnicity, 2007—2011\*



<sup>\*</sup>The number of females who identified as multi-racial was 0 in 2007; 1 in 2008; 0 in 2009; 2 in 2010; and 1 in 2011. Data for these persons were not included in this figure.

Figure 11: Large racial/ethnic disparities exist in Nevada. In 2011, the highest rate of new HIV infections was among Blacks (54.2 per 100,000 population) and was almost seven times higher than the rate among Whites (8.0 per 100,000 population). The second highest rate was among Asian/Pacific Islanders (API) (18.6 per 100,000 population) followed by Hispanics (15.6 per 100,000 population).

From 2007 to 2011 the rate of new HIV infections increased among both Blacks and APIs, while the rate among Hispanics and Whites decreased. Due to the small number of new infections, the rate among American Indians/ Alaska Natives (AI/AN) has been unstable over the past five years.

Figure 12: Among males, the highest rates of new infections were among Blacks (75.8 per 100,000 population) and APIs (37.6 per 100,000 population). From 2007 to 2011, API males experienced a large increase in their rate of new infections, from 22.8 to 37.6 per 100,000 population. During this same time period, there was a substantial decrease in the rate of new infections among Whites, while the rate among Hispanics and AI/AN remained relatively stable.

Figure 13: For all race/ethnicity groups, the rate of new infections among females has been much lower than that of males. However, the rate of new infections among Black females is alarmingly high. In 2011 the rate among Black females (32.5 per 100,000 population) was 20.3 times higher than that of White females (1.6 per 100,000 population). Furthermore, the rate among Black women has not experienced a sustained decrease from 2007 to 2011. During this same time period, the rate among Hispanic and White females has decreased, while rates among API and AI/AN females fluctuated greatly due to the small number of new infections in these populations.

140.0 120.0 Rate per 100,000 100.0 80.0 60.0 40.0 20.0 0.0 White Black API Hispanic **■**<13 0.0 0.0 0.0 0.0 ■ 13 to 24 8.2 19.3 ≥25 to 34 21.2 118.4 32.4 66.7 ■35 to 44 10.6 21.2 14.7 ≥ 45 to 54 12.9 54.0 17.1 3.9 ■ 55 to 64 4.8 59.5 11.2 4.9 № 65+ 4.2

Figure 14 Rates of New HIV Infections by Age at Diagnosis and Race/Ethnicity, 2011\*

Figure 14: For all race/ethnicity groups, the highest rate of new infections was among 25 to 34 year olds. Except for Whites, the second highest rate for all race/ethnicity groups was among 13 to 24 year olds. Among Whites, the second highest rate was among 35 to 44 year olds. Overall, rates among older age groups were lower, except for among Blacks aged 55 to 64 years old.

Multi-Race/Other\* White **Black Hispanic API Transmission Category** % % % Males **MSM** 97 84% 58 79% 83 83% 28 90% 80% IDU 4 3% 2 3% 6% 3% 0 0% 6 1 MSM+IDU 7 6% 5% 4 4% 1 3% 1 20% 2 6 2 Heterosexual contact 2% 8% 2% 0 0% 0 0% Perinatal exposure 0 0% 1% 0 0% 0 0% 0 0% 1 NIR/NRR 5 4% 2 3% 5 5% 1 3% 0 0% **Subtotal** 115 100% 100% 100 100% 31 5 100% 73 100% **Females** IDU 0% 5 38% n 0 0% 0 0% 0 0% 5 38% 71% 50% 100% Heterosexual contact 17 55% 5 1 1 2 0% 0% Perinatal exposure 0 0% 6% 0 0% 0 0 3 2 NIR/NRR 23% 12 39% 29% 1 50% 0 0%

Table 4 | New HIV Infections in Nevada by Race/Ethnicity and Transmission Category, 2011

13

128

100%

100%

Subtotal

**Total** 

100%

100%

7

107

100%

100%

2

33

100%

100%

1

100%

100%

31

104

Table 4: For all race/ethnicity groups, male-to-male sexual contact (MSM) was the transmission category for the majority of new HIV infections. The percentage of males with a transmission category of heterosexual contact was highest among multi-racial (33%) and Black males (8%).

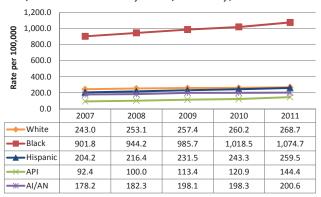
Among females, the most common transmission category for all race/ethnicity groups was heterosexual contact. White females were the only group who reported IDU as a transmission risk.

<sup>\*</sup>Data for persons who identified as multi-racial and American Indian/Alaska Native (AI/AN) were not included in this figure. AI/AN were not included due to the small number of new infections in this population.

<sup>\*</sup>Multi-race/other includes persons who identified as multi-race, other race, or American Indian/Alaska Native (AI/AN). These were combined due the small number of new infections in these populations.

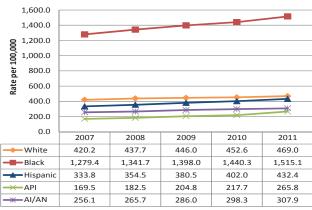
## **Persons Living with HIV/AIDS**

Figure 15 | Annual Rate of Persons Living with HIV/AIDS in Nevada by Race/Ethnicity, 2007 - 2011\*



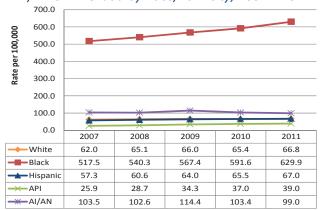
<sup>\*</sup>Data for persons who identified as multi-racial were not included in this figure. The number of persons who identified as multi-racial was 20 in 2007; 24 in 2008; 32 in 2009; 46 in 2010; and 55 in 2011.

Figure 16 | Annual Rate of Males Living with HIV/AIDS in Nevada by Race/Ethnicity, 2007 - 2011\*



<sup>\*</sup>Data for males who identified as multi-racial were not included in this figure. The number of males who identified as multi-racial was 19 in 2007; 17 in 2008; 20 in 2009; 28 in 2010; and 39 in 2011.

Figure 17 | Annual Rate of Females Living with HIV/AIDS in Nevada by Race/Ethnicity, 2007 – 2011\*



<sup>\*</sup>Data for females who identified as multi-racial were not included in this figure. The number of females who identified as multi-racial was 1 in 2007: 4 in 2008: 4 in 2009: 6 in 2010: and 7 in 2011.

Figure 15: As with new HIV infections, in 2011 the highest rate of persons living with HIV/AIDS was among Blacks (1,074.7 per 100,000 population). The second highest rate was among Whites (268.7 per 100,000 population), followed by Hispanics (259.5 per 100,000 population). From 2007 to 2011, the rate of persons living with HIV/ AIDS has increased among all race/ethnicity groups.

Figure 16: Among males, from 2007 to 2011, there were increases in the rate of persons living with HIV/AIDS among all race/ethnicity groups. In 2011, Black males, had the highest rate of persons living with HIV/AIDS (1,506.5 per 100,000 population), while API males had the lowest rate (229.4 per 100,000 population)

Figure 17: For all race/ethnicity groups, the rate of persons living with HIV/AIDS is much lower among females compared to males. In addition, all race/ethnicity groups except for AI/AN have experienced an increase in the rate of persons living with HIV/AIDS from 2007 to 2011. The rates among Black females is much higher compared to all other race/ethnicity groups, and has increased substantially from 2007 to 2011.

3,000.0 3,000.0 2,500.0 2,000.0 1,500.0 1,000.0 500.0 0.0 API AI/AN White Black Hispanic **<**13 0.9 12.3 2.2 0.0 0.0 ■ 13 to 24 33.1 338.9 55.6 62.7 31.1 198.9 217.4 ≥25 to 34 1,357.5 314.6 223.6 ■ 35 to 44 511.0 2,168.6 545.6 293.4 323.0 ¥45 to 54 722.4 704.6 270.3 480.1 2,561.2 ■ 55 to 64 304.8 1,644.5 326.4 133.6 **≦**65+ 82.2 274.1 167.8 33.2 86.1

Figure 18 | Rate of Persons Living with HIV/AIDS by Age at End of Year and Race/Ethnicity, 2011\*

**Figure 18:** Age trends were fairly similar across all race/ethnicity groups. Among all race/ethnicity groups, rates were much lower among younger age groups and older age groups, with rates highest among persons 25 to 34 years old and 45 to 54 years old. The lowest rates were among persons less than 13, which may be due to the sharp decline in new infections in this age group (Figure 19).

**Table 5**| Persons Living with HIV/AIDS in Nevada by Race/Ethnicity and Transmission Category, 2011

Transmission Catagony	Whit	e	Blacl	k	Hispa	nic	API		AI/A	N	Multi-l	Race
Transmission Category	n	%	n	%	n	%	n	%	n	%	n	%
Males												
MSM	2,846	76%	987	68%	1,228	78%	197	90%	38	72%	32	67%
IDU	258	7%	156	11%	74	5%	2	1%	5	9%	4	8%
MSM+IDU	347	9%	80	5%	79	5%	10	5%	7	13%	7	15%
Heterosexual contact	81	2%	102	7%	70	4%	5	2%	1	2%	2	4%
Perinatal exposure	8	0%	16	1%	6	0%	0	0%	0	0%	0	0%
Transfusion/Hemophilia	7	0%	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	207	6%	119	8%	109	7%	5	2%	2	4%	3	6%
Subtotal	3,754	100%	1,460	100%	1,566	100%	219	100%	53	100%	48	100%
Females												
IDU	144	27%	80	13%	22	10%	2	5%	4	22%	1	14%
Heterosexual contact	281	53%	385	64%	156	72%	30	81%	10	56%	5	71%
Perinatal exposure	10	2%	18	3%	5	2%	0	0%	0	0%	0	0%
Transfusion/Hemophilia	3	1%	0	0%	0	0%	1	3%	0	0%	0	0%
NIR/NRR	92	17%	118	20%	35	16%	4	11%	4	22%	1	14%
Subtotal	530	100%	601	100%	218	100%	37	100%	18	100%	7	100%
Total	4,284	100%	2,061	100%	1,784	100%	256	100%	71	100%	55	100%

**Table 5:** Among all race/ethnicity groups, MSM was the transmission category for over half of males living with HIV/ AIDS at the end of 2011. However, this percentage was lower among multi-racial (67%), Black (68%), and AI/AN (72%) males. These same race/ethnicity groups had the highest percentage of males with a transmission category of IDU. The percentage of males with a transmission category of combined MSM and IDU was highest among multi-racial persons (15%) and AI/AN (13%).

Among females, the most common transmission category was heterosexual contact for all race/ethnicity groups. IDU varied across race/ethnicity groups, with the highest percentage among White females (27%) and AI/AN females (22%).

<sup>\*</sup>Data were not included for multi-racial persons in this figure. There were 45 multi-racial persons living with HIV/AIDS at the end of 2011.

# **HIV/AIDS AND AGE**

#### **New HIV Infections**

Figure 19 | Annual Rate of New HIV Infections in Nevada by Age at Diagnosis, 2007 - 2011

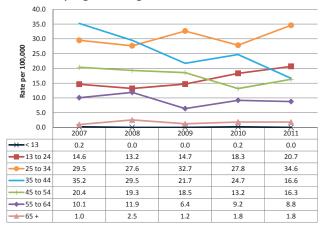


Figure 20 | Annual Rate of New HIV Infections among Males in Nevada by Age at Diagnosis, 2007 – 2011

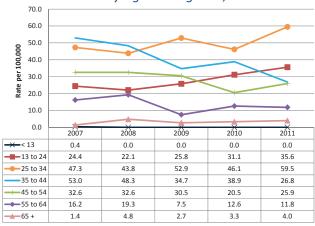


Figure 21 | Annual Rate of New HIV Infections among Females in Nevada by Age at Diagnosis, 2007 – 2011



Figure 19: From 2007 to 2011, the rate of new HIV infections decreased among several age groups. The largest decrease was among persons 35 to 44 year olds; the rate in this age group decreased from 35.2 per 100,000 in 2007 to 16.6 per 100,000 population in 2011. There was also a decrease among 45 to 54 year olds and 55 to 64 year olds.

The largest increase from 2007 to 2011 was among youth 13 to 24 years old, whose rate increased from 14.6 per 100,000 population in 2007 to 20.7 per 100,000 population in 2011. There were also increases among persons 25 to 34 years old and 65 years and older.

Figure 20: Among males, in 2011, the highest rates of new HIV infection were among persons 25 to 34 years old (59.5 per 100,000 population), followed by persons 13 to 24 years old (35.6 per 100,000 population). All other age groups have experienced a decline in the rate of new infections, with the largest decline among males 35 to 44 years old (from 53.0 per 100,000 population in 2007 to 26.8 per 100,000 population in 2011). In light of these declines, the increasing rates of new infections among males 13 to 24 years old and 25 to 34 year olds are especially alarming.

Figure 21: Among females, 25 to 34 year olds had the highest rate of new infections in 2011 (7.6 per 100,000 population), but this rate has been decreasing since 2007. Females 45 to 54 years old had the second highest rate of new infections (6.0 per 100,000 population). The rate of new infections has been decreasing for all age groups, except for among females 13 to 24 years old and 55 to 64 years old.

Table 6| New HIV Infections by Age at Diagnosis and Transmission Category, 2011

Transmission Category	13 to	24	25 to	34	35 to	44	45 to	54	55 to	64	65-	F .
Transmission Category	n	%	n	%	n	%	n	%	n	%	n	%
Males												
MSM	72	91%	100	84%	43	83%	37	74%	14	78%	4	67%
IDU	0	0%	3	3%	4	8%	5	10%	0	0%	1	17%
MSM+IDU	6	8%	10	8%	0	0%	1	2%	0	0%	0	0%
Heterosexual contact	0	0%	4	3%	2	4%	2	4%	2	11%	0	0%
Perinatal exposure	1	1%	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	0	0%	2	2%	3	6%	5	10%	2	11%	1	17%
Subtotal	79	100%	119	100%	52	100%	50	100%	18	100%	6	100%
Females												
IDU	0	0%	0	0%	1	10%	3	27%	1	11%	0	0%
Heterosexual contact	6	60%	7	50%	4	40%	8	73%	4	44%	0	0%
Perinatal exposure	2	20%	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	2	20%	7	50%	5	50%	0	0%	4	44%	0	0%
Subtotal	10	100%	14	100%	10	100%	11	100%	9	100%	0	0%
Total	89	100%	133	100%	62	100%	61	100%	27	100%	6	100%

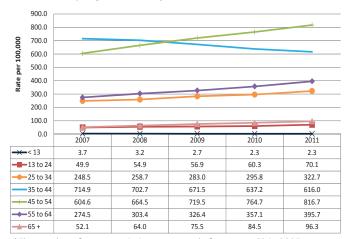
Table 6: For both males and females, there were very few differences in transmission categories across age groups.

Among males, male-to-male sexual contact (MSM) was the transmission category for the majority of newly infected persons across all age groups. This percentage was much lower among males 55 to 64 years old (78%) and 65 years and older (67%). The percentage of males with a transmission category of Injection drug use (IDU) was highest among males 45 to 54 years old (12%) and males 55 to 64 years old (15%), while the percentage of males with a transmission category of combined MSM and IDU was highest among males 25 to 34 years old (7%) and 35 to 44 years old (5%).

Among females, heterosexual contact was the transmission category for the majority of newly infected persons across all age groups. IDU was low among all age groups, with 45 to 54 year old females having the highest percentage of persons with this transmission category (13%).

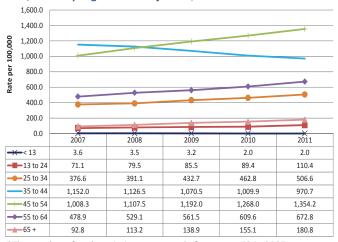
### **Persons Living with HIV/AIDS**

Figure 22 | Annual Rate of Persons Living with HIV/AIDS by Age at End of Year, 2007-2011\*



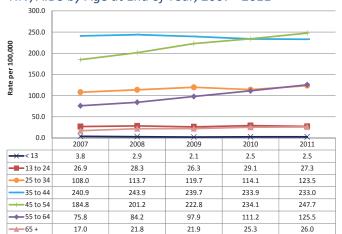
<sup>\*</sup>The number of persons missing age at end of year was 62 in 2007, 62 in 2008, 61 in 2009, 59 in 2010, and 58 in 2011.

Figure 23 | Annual Rate of Males Living with HIV/AIDS by Age at End of Year, 2007 - 2011\*



<sup>\*</sup>The number of males missing age at end of year was 53 in 2007, 53 in 2008, 52 in 2009, 51 in 2010, and 50 in 2011.

Figure 24 | Annual Rate of Females Living with HIV/AIDS by Age at End of Year, 2007-2011\*



<sup>\*</sup>The number of females missing age at end of year was 9 in 2007, 9 in 2008, 9 in 2009, 8 in 2010, and 8 in 2011.

The following figures report age at end of year. For additional information about how age at end of year is determined, refer to page iii.

Figure 22: From 2007 to 2011, all age groups experienced an increase in the rate of persons living with HIV/AIDS except for persons less than 13 years old and persons 35 to 44 years old. For both age groups, these declines were most likely due to the large decreases in the number of new infections. There were large increases in the rates of persons living with HIV/AIDS among persons 45 years and older, which may be due to people living longer once they become infected.

Figure 23: Among males living with HIV/AIDS, there was an increase in rates for all age groups except persons less than 13 years old and 35 to 44 years old. This was most likely due to the sharp decline in new infections in these two age groups. In 2011, the highest rates of persons living with HIV/AIDS were among males 45 to 54 years old (1,354.2 per 100,000 population) followed by males 35 to 44 years old (970.7 per 100,000 population).

Figure 24: Overall trends among females mirrored those of males, in particular, the decline in the rate of persons less than 13 years old and 35 to 44 years old living with HIV/AIDS. The highest rates of females living with HIV/AIDS were among persons 45 to 54 years old (247.7 per 100,000 population) and persons 35 to 44 years old (233.0 per 100,000 population).

Table 7| Persons Living with HIV/AIDS by Age at End of Year and Transmission Category, 2011

Transmission Category	<13		13 to	24	25 to	34	35 to	44	45 to	54	55 to	64	65+	
Transmission Category	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Males														
MSM	0	0%	196	80%	839	83%	1,485	79%	1,883	72%	688	67%	201	74%
IDU	0	0%	3	1%	18	2%	88	5%	233	9%	132	13%	22	8%
MSM+IDU	0	0%	9	4%	72	7%	132	7%	232	9%	75	7%	9	3%
Heterosexual contact	0	0%	4	2%	35	3%	65	3%	105	4%	41	4%	11	4%
Perinatal exposure	4	80%	25	10%	1	0%	0	0%	0	0%	0	0%	0	0%
Transfusion/Hemophilia	0	0%	0	0%	0	0%	1	0%	3	0%	2	0%	1	0%
NIR/NRR	1	20%	8	3%	48	5%	109	6%	154	6%	87	8%	28	10%
Subtotal	5	100%	245	100%	1,013	100%	1,880	100%	2,610	100%	1,025	100%	272	100%
Females														
IDU	0	0%	1	2%	18	8%	70	17%	106	24%	49	25%	6	13%
Heterosexual contact	0	0%	23	40%	154	68%	270	65%	264	59%	118	60%	37	79%
Perinatal exposure	5	83%	26	46%	2	1%	0	0%	0	0%	0	0%	0	0%
Transfusion/Hemophilia	0	0%	0	0%	1	0%	0	0%	3	1%	0	0%	0	0%
NIR/NRR	1	17%	7	12%	53	23%	78	19%	78	17%	29	15%	4	9%
Subtotal	6	100%	57	100%	228	100%	418	100%	451	100%	196	100%	47	100%
Total	11	100%	302	200%	1,241	300%	2,298	400%	3,061	500%	1,221	100%	319	100%

**Table 7:** For both males and females, there were very few differences in transmission categories across age groups. For both males and females, there was a higher proportion of persons with a transmission category of perinatal exposure among persons less than 13 years of age and persons 13 to 24 years old, which is to be expected for these age groups.

Among males, MSM was the transmission category for the majority of persons living with HIV/AIDS across all age groups. The percentage of males with a transmission category of Injection drug use (IDU) was highest among males 55 to 64 years old (13%), while the percentage of males with a transmission category of combined MSM and IDU was highest among 45 to 54 year olds (9%).

Among females, heterosexual contact was the transmission category for the majority of persons living with HIV/AIDS across all age groups. IDU was much higher among older age groups, with the highest proportion among females 55 to 64 (25%) and 45 to 54 years old (72%).

### **FACILITY OF DIAGNOSIS**

Table 8 | Facility of HIV Diagnosis, 2011

	Neva	da	Clark Co	ounty	Washoe	County	All Other C	ounties*
	N	%	n	%	n	%	n	%
Facility of Diagnosis								
HIV Counseling and Testing Site	164	43%	160	46%	4	15%	0	0%
Private Physician's Office	85	22%	79	23%	6	22%	0	0%
Inpatient Facility/Hospital	67	18%	59	17%	7	26%	1	33%
Outpatient Facility (unspecified)	16	4%	14	4%	2	7%	0	0%
Adult HIV Clinic	13	3%	6	2%	6	22%	1	33%
Correctional Facility	9	2%	8	2%	0	0%	1	33%
STD Clinic	6	2%	6	2%	0	0%	0	0%
Blood Bank or Plasma Center	6	2%	5	1%	1	4%	0	0%
Emergency Room	3	1%	3	1%	0	0%	0	0%
Facility/Other/Unknown	9	2%	8	2%	1	4%	0	0%
Total	378	100%	348	100%	27	100%	3	100%

Table 8: The majority of people who were diagnosed with HIV in 2011 were diagnosed at an HIV counseling and testing site (43%). HIV counseling and testing sites are located at community centers serving populations at high risk for HIV, and testing is conducted by local health department staff. This high proportion indicates the importance of these efforts in identifying individuals who are HIV-positive.

Eighteen percent of persons were diagnosed at an inpatient facility/hospital, meaning they were admitted to a medical facility. This suggests they were fairly ill at the time of diagnosis and could have tested earlier.

Table 91 Facility of AIDS Diganosis, 2011

	Neva	da	Clark Co	ounty	Washoe	County	All Other Counties*		
	N	%	n	%	n	%	n	%	
Facility of Diagnosis									
HIV Counseling and Testing Site	61	28%	61	31%	0	0%	0	0%	
Private Physician's Office	40	19%	37	19%	2	13%	1	20%	
Inpatient Facility/Hospital	60	28%	51	26%	9	60%	0	0%	
Outpatient Facility/Other	6	3%	6	3%	0	0%	0	0%	
Adult HIV Clinic	34	16%	28	14%	3	20%	3	60%	
Correctional Facility	3	1%	2	1%	0	0%	1	20%	
STD Clinic	2	1%	2	1%	0	0%	0	0%	
Blood Bank or Plasma Center	0	0%	0	0%	0	0%	0	0%	
Emergency Room	1	0%	1	1%	0	0%	0	0%	
Facility/Other/Unknown	9	4%	8	4%	1	7%	0	0%	
Total	216	100%	196	100%	15	100%	5	100%	

Table 9: The majority of people who were diagnosed with AIDS in 2011 were diagnosed at an HIV counseling and testing site (28%) or an inpatient facility/hospital (28%), which raises several concerns.

HIV counseling and testing sites do not provide routine HIV care, suggesting that individuals diagnosed with AIDS at this type of facility were diagnosed with HIV at a later stage of the disease or have fallen out of care. Seventy-two percent (n=44) of individuals diagnosed at an HIV Counseling and Testing Site were diagnosed with AIDS within three months of their HIV diagnosis. Based on lab data from eHARS, it appears that the remaining individuals had not been obtaining regular care after their HIV diagnosis. However, undetectable viral loads and CD4 counts greater than 500 cells/µL of blood do not have to be reported, so some of these individuals may have been receiving regular medical care.

Being diagnosed with AIDS at an inpatient facility/hospital also suggests that the individual was either diagnosed with HIV late during the course of the infection or were not receiving routine care and became very ill. Seventy-three percent (n=44) of individuals diagnosed at an inpatient facility/hospital were diagnosed with AIDS within three months of their HIV diagnosis. Of the remaining individuals (n=16), 56% (n=9) had not been obtaining regular care after their HIV diagnosis based on lab data from eHARS.

# **LATE DIAGNOSES**

**Table 10**| Late Diagnoses (an AIDS diagnosis within one year of an HIV diagnosis) among Persons Diagnosed with HIV Infection in Nevada, 2006 vs. 2010\*

			2006					2010			Difference in proportion diagnosed
	<12 mo	nths	≥ 12 mc	onths	Total	<12 mc	onths	≥ 12 mg	onths	Total	< 12
	n	%	n	%	N	n	%	n	%	N	months*
Residence at Diagnosis											
Clark County	126	36%	223	64%	349	120	36%	215	64%	335	0%
Washoe County	10	29%	24	71%	34	7	28%	18	72%	25	-1%
All Other Counties	6	40%	9	60%	15	2	67%	1	33%	3	27%
Total	142	36%	256	64%	398	129	36%	234	64%	363	0%
Sex at Birth											
Male	125	36%	219	64%	344	108	36%	196	64%	304	0%
Female	17	31%	37	69%	54	21	36%	38	64%	59	5%
Total	142	36%	256	64%	398	129	36%	234	64%	363	0%
Race/Ethnicity											
White, non-Hispanic	65	35%	123	65%	188	45	34%	89	66%	134	-1%
Black, non-Hispanic	22	27%	61	73%	83	26	26%	74	74%	100	-1%
Hispanic	47	45%	57	55%	104	45	45%	54	55%	99	0%
Asian/Hawaiian/Pacific Islander	5	33%	10	67%	15	10	43%	13	57%	23	10%
American Indian/Alaska Native	0	0%	1	100%	1	0	0%	1	100%	1	0%
Multi-race/other/unknown	3	43%	4	57%	7	3	50%	3	50%	6	7%
Total	142	36%	256	64%	398	129	36%	234	64%	363	0%
Age at Diagnosis											
< 13	0	0%	0	0%	0	0	N/A	0	N/A	0	N/A
13 to 24	9	17%	43	83%	52	13	16%	67	84%	80	-1%
25 to 34	38	33%	77	67%	115	26	24%	82	76%	108	-9%
35 to 44	61	43%	82	57%	143	43	47%	49	53%	92	4%
45 to 54	21	38%	34	62%	55	26	52%	24	48%	50	14%
55 to 64	11	39%	17	61%	28	15	56%	12	44%	27	17%
65 +	2	40%	3	60%	5	6	100%	0	0%	6	60%
Total	142	36%	256	64%	398	129	36%	234	64%	363	0%
Transmission Category											
Male											
MSM	99	38%	163	62%	262	91	35%	166	65%	257	-3%
IDU	7	37%	12	63%	19	3	21%	11	79%	14	-16%
MSM+IDU	4	21%	15	79%		6	38%	10	63%	16	17%
Heterosexual contact	3	33%	6	67%	9	2	50%	2	50%	4	17%
Perinatal exposure	0	N/A	0	N/A	0	0	N/A	0	N/A	0	N/A
Transfusion/Hemophilia	0	N/A	1	N/A	1	0	N/A	0	N/A	0	N/A
NIR/NRR	12	35%	22	65%		6	46%	7	54%	13	11%
Subtotal	125	36%	219	64%	344	108	36%	196	64%	304	0%
Female	1										
IDU	3	27%	8	73%	11	1	25%	3	75%	4	-2%
Heterosexual contact	5	25%	15	75%	20	18	38%	29	62%		13%
Perinatal exposure		N/A	0	N/A	0	0	N/A	0	N/A		N/A
Transfusion/Hemophilia		N/A	0	N/A	0	0	N/A	0	N/A	0	N/A
NIR/NRR	9	39%	14	61%		2	25%	6	75%	8	-14%
Subtotal	17	31%	37	69%	54	21	36%	38	64%	59	5%
Total	142	36%	256	64%			36%	234	64%		0%

Only persons who were informed of their HIV infection were included in this table.

<sup>\*</sup>Difference in proportion was calculated as the proportion of persons in 2006 with a diagnosis of AIDS within 12 months of their HIV diagnosis subtracted from the proportion of persons in 2010 with a diagnosis of AIDS within 12 months of their HIV diagnosis.

**Table 10:** Having a diagnosis of HIV and AIDS within a 12 month period is commonly considered to be a marker for a late HIV diagnosis and late HIV testing. However, recent research suggests that using this measurement alone may misclassify individuals as late testers. Thus, when reviewing these data it is important to consider the full range of factors that could cause a short time interval from HIV to AIDS diagnosis.

In this analysis, only individuals who were diagnosed with HIV in Nevada and informed of their HIV status were included. Based on CD4 lab data from eHARS (AIDS is typically diagnosed when an HIV-positive individual's CD4 count is less than 200 cells/ $\mu$ L of blood or CD4 percent is less than 14), AIDS diagnosis information was complete for a majority of these individuals. In 2010, 85% of persons had a CD4 lab within 12 months of their HIV diagnosis, and in 2006, 81% of persons had a CD4 lab within 12 months of their HIV diagnosis. However, CD4 counts greater than 500 cells/ $\mu$ L of blood do not have to be reported, so some lab results may have been missing.

In 2010, of the 363 individuals who were newly diagnosed with HIV and had been informed of their status, 36% were diagnosed with AIDS within 12 months of their HIV Diagnosis. From 2006 to 2010, there was no change in the proportion of late diagnoses.

The all other counties region had the highest proportion of persons with a late diagnosis (67%), and this proportion has increased by 27 percentage points since 2006. In 2010, Washoe County had the lowest proportion of late diagnoses (28%), and this proportion decreased by one percentage point from 2006 to 2010.

In 2010, there were no sex differences in the proportion of late diagnoses. From 2006 to 2010, the proportion of late diagnoses remained the same among males and increased five percentage points among females.

In terms of race/ethnicity, the highest proportion of late diagnoses occurred among persons who identified as multi/race/other/unknown (50%), Hispanic (45%), and Asian/Hawaiian/Pacific Islander (API) (43%). In addition, the proportion of late diagnoses among API increased by 10 percentage points from 2006 to 2010.

With regard to age, the proportion of late diagnoses was much higher in older age groups, and as age increased the proportion of late diagnoses increased. All age groups experienced an increase in the proportion of late diagnoses, except for 13 to 24 year olds and 25 to 34 year olds.

Among males, individuals with a transmission category of heterosexual contact had the highest proportion of late diagnoses (50%). This proportion also increased 17%, from 33% in 2006 to 50% in 2010. Males who had a transmission category of injection drug use (IDU) had the lowest proportion of late diagnoses (21%), and there was a 16 percentage point decrease in this proportion from 2006 to 2010.

Among females, individuals with a transmission category of heterosexual contact also had the highest proportion of late diagnoses (38%), and this proportion increased 13 percentage points, from 25% in 2006 to 38% in 2010.

<sup>&</sup>lt;sup>1</sup>Schwarcz, S.K., Hsu, L., Chin, C.S., Richards, T.A., Frank, H., Wenzel, C., & Dilley, J. (2011). Do people who develop AIDS within 12 months of HIV diagnosis delay HIV testing? *Public Health Reports*, 126(4), 552-9.

# **DEATHS AND SURVIVAL AFTER AN AIDS DIAGNOSIS**

Table 11 | Deaths among Persons Living with HIV/AIDS in Nevada, 2011

		Total			Male			Female	
	N	%	Rate*	n	%	Rate*	n	%	Rate*
County at Diagnosis									
Clark County	103	87%	5.3	83	86%	8.5	20	87%	2.1
Washoe County	11	9%	2.7	10	10%	4.8	1	4%	0.5
All Other Counties**	5	4%	1.5	3	3%	1.7	2	9%	1.2
Race/Ethnicity									
White, non-Hispanic	51	43%	3.2	42	44%	5.2	9	39%	1.7
Black, non-Hispanic	41	34%	21.4	32	33%	33.2	9	39%	10.0
Hispanic	21	18%	3.1	18	19%	5.0	3	13%	1.2
Asian/Hawaiian/Pacific Islander	5	4%	2.8	3	3%	3.6	2	9%	2.6
American Indian/Alaska Native	0	0%	0.0	0	0%	0.0	0	0%	0.0
Multi-race/Other	1	1%	N/A	1	1%	N/A	0	0%	N/A
Age at End of Year									
< 13	0	0%	0.0	0	0%	0.0	0	0%	0.0
13 to 24	1	1%	0.2	1	1%	0.5	0	0%	0.0
25 to 34	6	5%	1.6	5	5%	2.5	1	4%	0.5
35 to 44	31	26%	8.3	25	26%	12.9	6	26%	3.3
45 to 54	38	32%	10.1	33	34%	17.1	5	22%	2.7
55 to 64	28	24%	9.1	22	23%	14.4	6	26%	3.8
65 +	15	13%	4.5	10	10%	6.6	5	22%	2.8
Transmission Category									
MSM	71	60%	N/A	71	74%	N/A	0	0%	N/A
IDU	17	14%	N/A	11	11%	N/A	6	26%	N/A
MSM+IDU	4	3%	N/A	4	4%	N/A	0	0%	N/A
Heterosexual contact	14	12%	N/A	3	3%	N/A	11	48%	N/A
Perinatal exposure	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	13	11%	N/A	7	7%	N/A	6	26%	N/A
Total	119	100%	4.4	96	100%	7.1	23	100%	1.7

**Table 11:** Death information was obtained from eHARS, and several measures are taken to ensure the quality of this data. Annually, cases in eHARS are matched to the state electronic death registry, the national Social Security Death Index, and the National Death Index. This helps to ensure that death information is accurate and current. In this report, death rates were calculated as the number of deaths of persons living with HIV/AIDS in Nevada per 100,000 persons. Cause of death is not specified; some of these deaths may have been due to HIV/AIDS related causes, while others may have been due to unrelated causes.

Since the beginning of the epidemic, 4,757 persons known to be living with HIV/AIDS in Nevada have died (Table 1). However, the number of deaths of persons living with HIV/AIDS has been steadily declining. From 2007 to 2011, the number of persons living with HIV/AIDS who died decreased from 207 to 119 (Table 1).

In 2011, the death rate of persons living with HIV/AIDS in Nevada was 4.4 per 100,000 persons. This rate was highest in Clark County (5.3 per 100,000 population) and lowest in the all other counties region (1.5 per 100,000 population). Among all race/ethnicity groups, Blacks had the highest death rate (21.4 per 100,000 persons). Of all age groups, 45 to 54 year olds had the highest death rate (10.1 per 100,00 population). Among males, persons with a transmission category of male-to-male sexual contact (MSM) accounted for the greatest proportion of deaths (74%), while among females, persons with a transmission category of heterosexual accounted for the greatest proportion of deaths (48%).

**Table 10**| Survival for more than 12, 24, and 36 months after a diagnosis of AIDS in Nevada during 2004-2008 by selected characteristics\*

		Dropor	tion Sur	vived
	Number of		months	
	Persons	(111)	IIIOIILIIS	•1
		>12	>24	>36
Residence at AIDS Diagnosis				
Clark County	1,079	86%	83%	81%
Washoe County	129	84%	82%	81%
All Other counties*	36	86%	83%	83%
Total	1,244	86%	83%	81%
Sex at Birth				
Male	1,020	86%	83%	81%
Female	224	86%	82%	80%
Total	1,244	86%	83%	81%
Race/Ethnicity	Í			
White, non-Hispanic	542	85%	82%	80%
Black, non-Hispanic	326	87%	85%	81%
Hispanic	304	89%	87%	86%
Asian/Hawaiian/Pacific Islander	46	72%	72%	72%
American Indian/Alaska Native	10	70%	70%	60%
Multi-race/Other	16	81%	75%	75%
Total	1,244	86%	83%	81%
Age at AIDS Diagnosis	1,277	0070	03/0	01/0
< 13	1	100%	100%	100%
13 to 24	73	97%	96%	95%
25 to 34	269	89%	87%	85%
35 to 44	482	87%	84%	83%
45 to 54	302	84%	81%	78%
55 to 64	100	76%	72%	66%
65 +	17	59%	47%	47%
Total	1,244	86%	83%	81%
Transmission Category				02/0
Male				
MSM	755	86%	84%	82%
IDU	77	81%	78%	75%
MSM+IDU	54	83%	80%	78%
Heterosexual Contact	50	94%	94%	94%
Perinatal Exposure	3	100%	100%	100%
Hemophilia/Blood Transfusion	1	100%	100%	100%
NIR/NRR	80	85%	80%	78%
Subtotal	1,020	86%	83%	81%
Female				
IDU	47	91%	85%	81%
Heterosexual Contact	143	86%	83%	82%
Perinatal Exposure	2	100%	100%	100%
Hemophilia/Blood Transfusion	1	100%	100%	100%
NIR/NRR	31	74%	71%	71%
Subtotal	224	86%	82%	80%
Year of AIDS Diagnosis				
2004	255	86%	83%	81%
2005	256	87%	83%	80%
2006	226	86%	84%	82%
2007	252	87%	84%	82%
2008	255	84%	83%	80%
Total	1,244	86%	83%	81%

**Table 12:** In this analysis of survival after an AIDS diagnosis, only persons who were diagnosed with AIDS in Nevada in 2004-2008 and had a current Nevada residence as of August 2012 were included.

Overall, 86% of persons living with AIDS in Nevada survived more than 12 months after their AIDS diagnosis. The proportion surviving more than 36 months was 81%, only 5% less than the proportion surviving more than 12 months.

From 2004 to 2008, there was little change in survival for more than 12, 24, and 36 months.

Between Clark, Washoe, and all other counties, differences in the proportion surviving were very small. The all other counties region had the greatest proportion of persons surviving 36 months or more (83%).

In Nevada as a whole, the proportion of males surviving more than twelve months was the same as that of females. Sex differences were small with regard to survival for more than 24 months and more than 36 months.

American Indians/Alaska Natives had the lowest proportion of persons surviving more than 12 months after an AIDS diagnosis (70%), followed by Asian/Hawaiian/Pacific Islanders (72%). Hispanics had the highest proportion (89%) followed by Blacks (87%).

As age increased, the proportion of persons surviving more than 12 months decreased. Persons 55 to 64 years old and persons 65 had the lowest proportions of persons surviving more than 12 months (76% and 59% respectively).

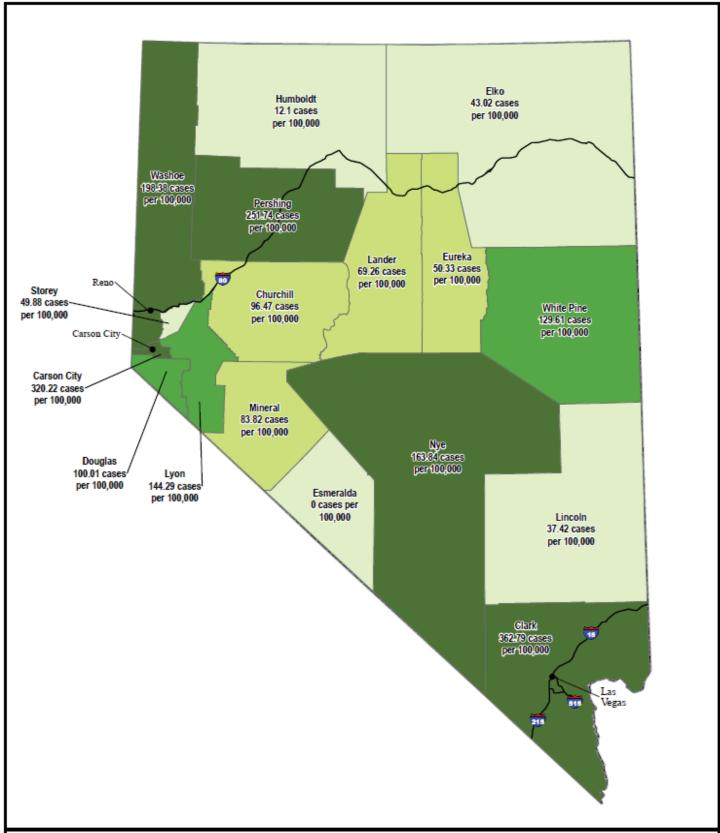
Among males, persons with a transmission category of injection drug use (IDU) had the lowest proportion of persons surviving more than 12 months (81%).

Among females, persons with a transmission category of IDU had the highest proportion surviving more than 12 months (91%). However, the proportion surviving more than 36 months is only 81%.

# **GEOGRAPHIC MAPS OF HIV/AIDS**

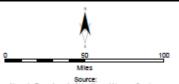
The following section contains maps that display the geographic distribution of new HIV infections and persons living with HIV/AIDS in Nevada. These maps were developed using a September 2010 extract of eHARS and 2010 U.S. Census population data. The other sections of this report use population data from the Nevada State Demographer, so the rates displayed in the following maps differ slightly from those in the rest of the report. Due to the small number of new HIV infections in Nevada's rural counties, a state wide map of new HIV infections is not included in this section.

Maps of new HIV infections represent where a person resided at the time of their first HIV diagnosis. Maps of persons living with HIV/AIDS include all persons living with HIV/AIDS in Nevada, regardless of their residence of diagnosis, and represent where a person was living in 2010. There is a great deal of migration within Nevada as well as to and from Nevada, so individuals may no longer reside in these areas.

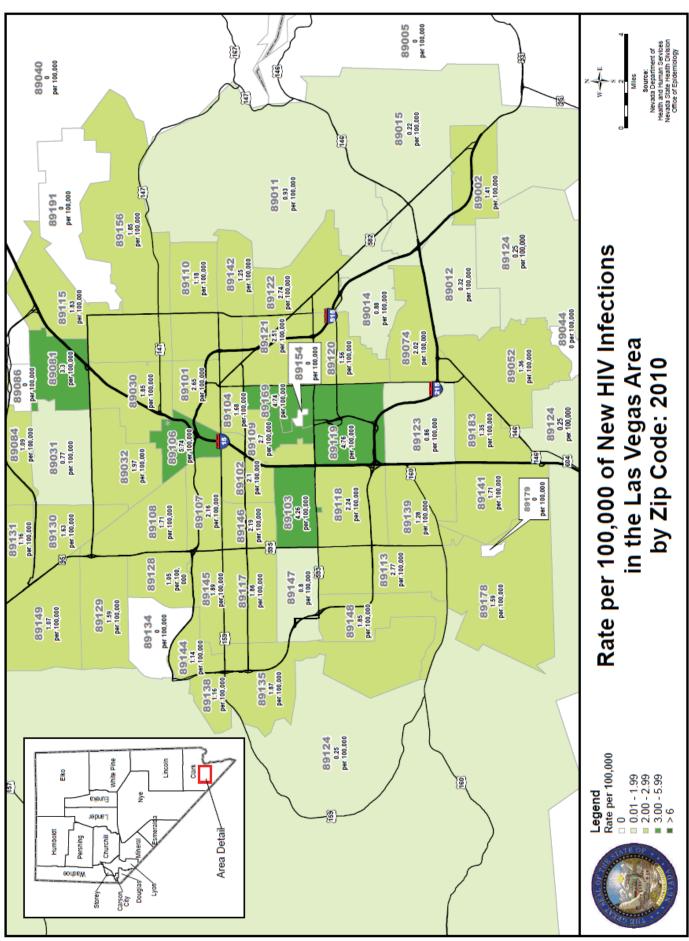




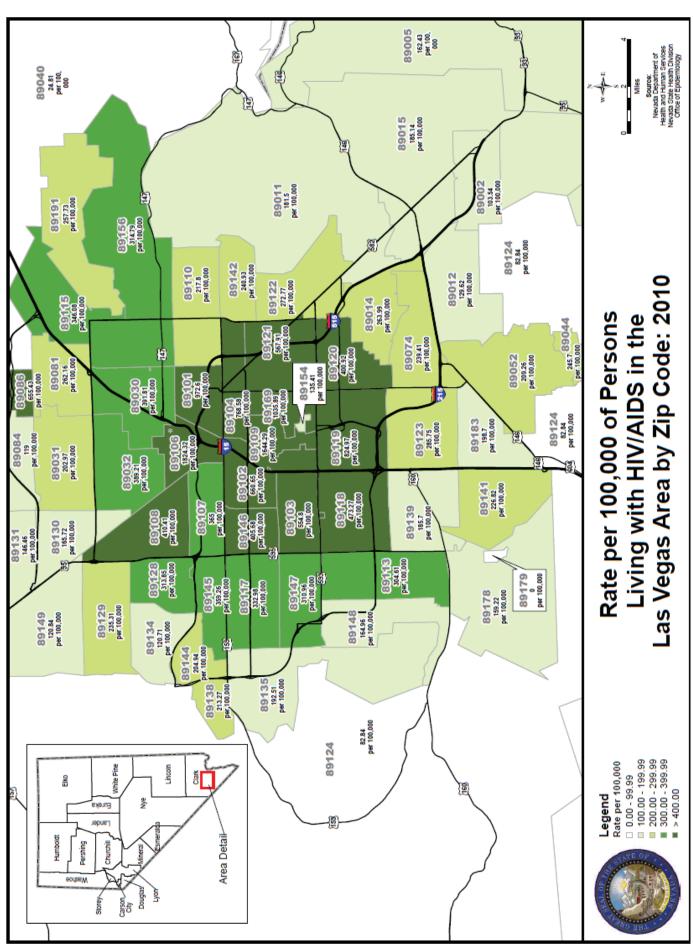
Rate per 100,000 of Persons Living with HIV/AIDS in Nevada: 2010



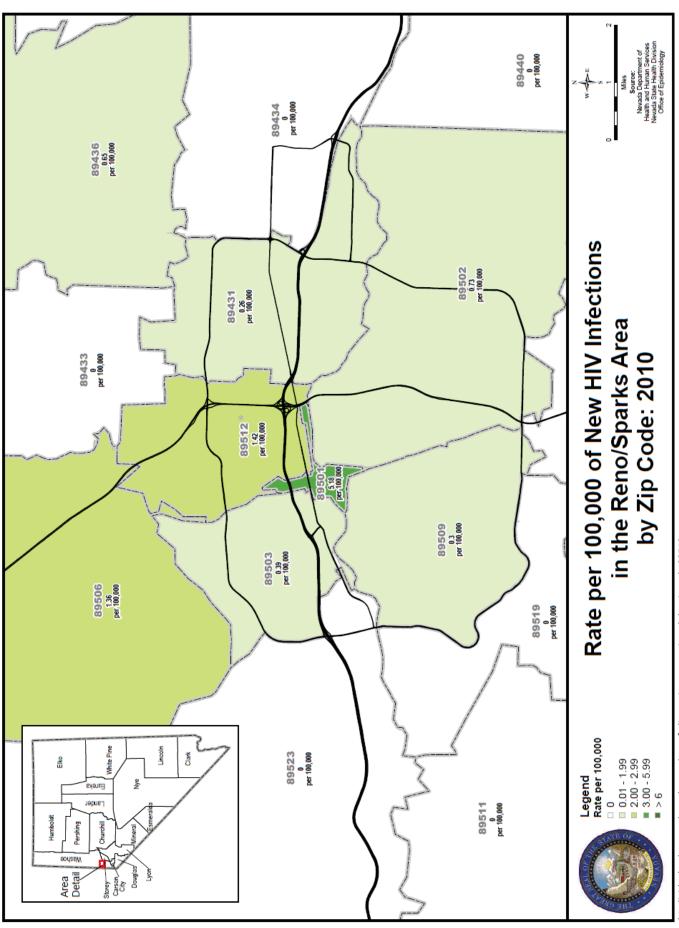
Source: Nevada Department of Health and Human Services Nevada State Health Ohvision Office of Epidemiology and the U.S. Census Bureau



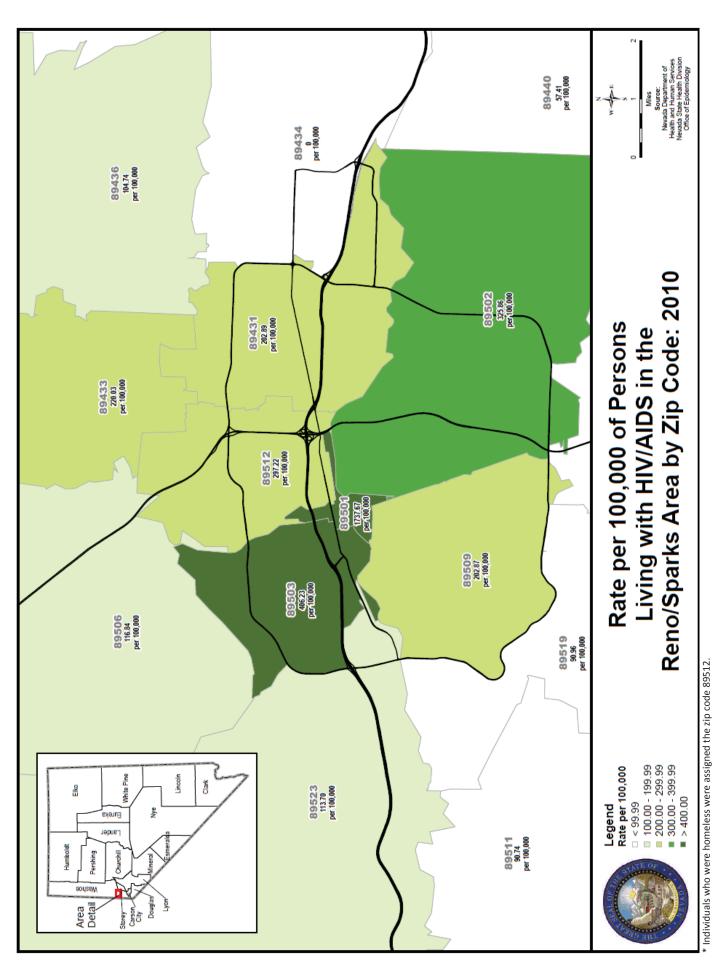
Individuals who were homeless at time of diagnosis were assigned the zip code 89106.



Individuals who were homeless were assigned the zip code 89106.



Individuals who were homeless at time of diagnosis were assigned the zip code 89512.



# **SUMMARY DATA TABLES**

Table 13 | New HIV Infections in Nevada, 2011

·		Total			Male			Female	
	N	%	Rate*	n	%	Rate*	n	%	Rate*
County at Diagnosis									
Clark County	348	92%	18.0	298	92%	30.5	50	93%	5.2
Washoe County	27	7%	6.6	23	7%	11.1	4	7%	2.0
All Other Counties**	3	1%	0.9	3	1%	1.7	0	0%	0.0
Race/Ethnicity									
White, non-Hispanic	128	34%	8.0	115	35%	14.4	13	24%	1.6
Black, non-Hispanic	104	28%	54.2	73	23%	75.8	31	57%	32.5
Hispanic	107	28%	15.6	100	31%	27.6	7	13%	2.2
Asian/Hawaiian/Pacific Islander	33	9%	18.6	31	10%	37.6	2	4%	2.1
American Indian/Alaska Native	2	1%	5.7	2	1%	11.6	0	0%	0.0
Multi-race/Other	4	1%	N/A	3	1%	N/A	1	2%	N/A
Age at Diagnosis									
< 13	0	0%	0.0	0	0%	0.0	0	0%	0.0
13 to 24	89	24%	20.7	79	24%	35.6	10	19%	4.8
25 to 34	133	35%	34.6	119	37%	59.5	14	26%	7.6
35 to 44	62	16%	16.6	52	16%	26.8	10	19%	5.6
45 to 54	61	16%	16.3	50	15%	25.9	11	20%	6.0
55 to 64	27	7%	8.8	18	6%	11.8	9	17%	5.8
65 +	6	2%	1.8	6	2%	4.0	0	0%	0.0
Transmission Category									
MSM	270	71%	N/A	270	83%	N/A	0	0%	N/A
IDU	18	5%	N/A	13	4%	N/A	5	9%	N/A
MSM+IDU	17	4%	N/A	17	5%	N/A	0	0%	N/A
Heterosexual contact	39	10%	N/A	10	3%	N/A	29	54%	N/A
Perinatal exposure	3	1%	N/A	1	0%	N/A	2	4%	N/A
NIR/NRR	31	8%	N/A	13	4%	N/A	18	33%	N/A
Total	378	100%	14.1	324	100%	23.8	54	100%	4.1

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)

Table 14 | New AIDS Diagnoses in Nevada, 2011

		Total			Male			Female	
	N	%	Rate*	n	%	Rate*	n	%	Rate*
County at Diagnosis									
Clark County	196	91%	10.1	158	91%	16.2	38	90%	4.0
Washoe County	15	7%	3.7	13	7%	6.3	2	5%	1.0
All Other Counties**	5	2%	1.5	3	2%	1.7	2	5%	1.2
Race/Ethnicity									
White, non-Hispanic	80	37%	5.0	70	40%	8.7	10	24%	1.3
Black, non-Hispanic	70	32%	36.5	45	26%	46.7	25	60%	26.2
Hispanic	53	25%	7.7	48	28%	13.3	5	12%	1.5
Asian/Hawaiian/Pacific Islander	9	4%	5.1	8	5%	9.7	1	2%	1.1
American Indian/Alaska Native	1	0%	2.8	1	1%	5.8	0	0%	0.0
Multi-race/Other	3	1%	N/A	2	1%	N/A	1	2%	N/A
Age at Diagnosis									
< 13	0	0%	0.0	0	0%	0.0	0	0%	0.0
13 to 24	24	11%	5.6	20	11%	9.0	4	10%	1.9
25 to 34	56	26%	14.6	46	26%	23.0	10	24%	5.4
35 to 44	60	28%	16.1	47	27%	24.3	13	31%	7.2
45 to 54	53	25%	14.1	43	25%	22.3	10	24%	5.5
55 to 64	19	9%	6.2	14	8%	9.2	5	12%	3.2
65 +	4	2%	1.2	4	2%	2.7	0	0%	0.0
Transmission Category									
MSM	134	62%	N/A	134	77%	N/A	0	0%	N/A
IDU	19	9%	N/A	12	7%	N/A	7	17%	N/A
MSM+IDU	7	3%	N/A	7	4%	N/A	0	0%	N/A
Heterosexual contact	25	12%	N/A	6	3%	N/A	19	45%	N/A
Perinatal exposure	6	3%	N/A	4	2%	N/A	2	5%	N/A
Transfusion/Hemophilia	1	0%	N/A	1	1%	N/A	0	0%	N/A
NIR/NRR	24	11%	N/A	10	6%	N/A	14	33%	N/A
Total	216	100%	8.0	174	100%	12.8	42	100%	3.2

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup>All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup>All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

Table 15 | New HIV Infections in Nevada, 2007-2011

		vada, 2007	7.7	1												
		_			∞ ∞			<b>o</b>			0			7		% Change
	z	%	Rate*	z	%	Rate*	z	% R	Rate*	z	%	Rate*	z	%	Rate*	%
County at Diagnosis																
Clark County	380	88%	19.4	362	%06	18.4	327	88%	16.8	343	95%	17.4	348	95%	18.0	-8%
Washoe County	68	%6	9.3	34	%8	8.0	30	%8	7.2	25	2%	0.9	27	2%	9.9	-31%
All Other Counties**	14	3%	4.0	7	7%	2.0	14	4%	4.1	3	1%	0.9	3	1%	0.9	%64-
Sex																
Male	354	82%	25.6	341	85%	24.5	312	84%	22.7	308	83%	22.3	324	%98	23.8	%8-
Female	6/	18%	5.9	62	15%	4.6	29	16%	4.4	63	17%	4.7	54	14%	4.1	-32%
Race/Ethnicity																
White, non-Hispanic	201	46%	12.2	180	45%	10.9	134	36%	8.2	137	37%	8.5	128	34%	8.0	-36%
Black, non-Hispanic	66	23%	52.5	105	79%	55.0	101	27%	52.9	103	28%	53.2	104	28%	54.2	5%
Hispanic	111	79%	16.7	100	25%	14.7	105	28%	15.4	101	27%	14.6	107	28%	15.6	-4%
Asian/Hawaiian/Pacific Islander	70	2%	11.1	11	3%	0.9	20	2%	11.1	23	%9	12.6	33	%6	18.6	%59
American Indian/Alaska Native	2	%0	5.6	4	1%	11.0	9	2%	16.7	1	%0	2.8	2	1%	5.7	%0
Multi-race/Other	0	%0	N/A	3	1%	N/A	2	1%	N/A	9	2%	A/N	4	1%	N/A	A/N
Age at Diagnosis																
< 13	1	%0	0.2	0	%0	0.0	0	%0	0.0	1	%0	0.2	0	%0	0.0	-100%
13 to 24	89	16%	14.6	61	15%	13.2	99	18%	14.7	82	22%	18.3	89	24%	20.7	31%
25 to 34	118	27%	29.5	111	78%	27.6	129	35%	32.7	110	30%	27.8	133	35%	34.6	13%
35 to 44	138	32%	35.2	115	762	29.5	83	22%	21.7	94	25%	24.7	62	16%	16.6	-55%
45 to 54	9/	18%	20.4	73	18%	19.3	70	19%	18.5	20	13%	13.2	61	16%	16.3	-20%
55 to 64	53	7%	10.1	35	%6	11.9	19	2%	6.4	28	8%	9.5	27	2%	8.8	-7%
65 +	ε	1%	1.0	8	2%	2.5	4	1%	1.2	9	7%	1.8	9	2%	1.8	100%
Transmission Category																
Males																
MSM	281	79%	N/A	271	%62	N/A	266	85%	N/A	259	84%	N/A	270	83%	N/A	-4%
IDU	16	2%	N/A	27	%8	N/A	15	2%	N/A	15	2%	N/A	13	4%	N/A	-19%
MSM+IDU	17	2%	N/A	18	2%	N/A	17	2%	N/A	16	2%	N/A	17	2%	N/A	%0
Heterosexual contact	27	8%	N/A	19	%9	N/A	7	2%	N/A	2	2%	N/A	10	3%	N/A	-63%
Perinatal exposure	1	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	1	%0	N/A	%0
Transfusion/Hemophilia	0	%0	N/A	1	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	N/A
NIR/NRR	12	3%	N/A	2	1%	N/A	7	7%	N/A	13	4%	N/A	13	4%	N/A	8%
Subtotal	354	100%	25.6	341	100%	24.5	312	100%	22.7	308	100%	22.3	324	100%	23.8	-8%
Females																
IDU	7	2%	N/A	4	%9	N/A	9	10%	N/A	4	%9	N/A	5	%6	N/A	25%
Heterosexual contact	23	95%	N/A	22	%68	N/A	51	%98	N/A	20	%62	N/A	29	54%	N/A	%09-
Perinatal exposure	0	%0	N/A	0	%0	N/A	0	%0	N/A	1	7%	N/A	2	4%	N/A	N/A
Transfusion/Hemophilia	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	N/A
NIR/NRR	2	3%	N/A	3	2%	N/A	2	3%	N/A	8	13%	N/A	18	33%	N/A	800%
Subtotal	79	100%	5.9	62	100%	4.6	29	100%	4.4	63	100%	4.7	54	100%	4.1	-32%
Total	433	100%	15.9	403	200%	14.7	371	200%	13.7	371	300%	13.6	378	300%	14.1	-13%
Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)	Reporting Sys	tem (eHARS)	), (August	2012)												

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012) \* Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

 $^{\dagger}$  % Change is the percent change in the number of new infections from 2007 to 2011.

<sup>\*\*</sup>All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

Table 16 | Persons Living with HIV/AIDS in Nevada, 2011

		Total			Male			Female	
	N	%	Rate*	n	%	Rate*	n	%	Rate*
Residence at Diagnosis									
Nevada	5,995	70%	N/A	4,962	70%	N/A	1,033	73%	N/A
Out of state	2,516	30%	N/A	2,138	30%	N/A	378	27%	N/A
County of Residence									
Clark County	7,249	85%	374.7	6,050	85%	618.7	1,199	85%	125.3
Washoe County	854	10%	208.5	718	10%	347.1	136	10%	67.1
All Other Counties**	408	5%	119.4	332	5%	190.9	76	5%	45.3
Race/Ethnicity									
White, non-Hispanic	4,284	50%	268.7	3,754	53%	469.0	530	38%	66.8
Black, non-Hispanic	2,061	24%	1,074.7	1,460	21%	1,515.1	601	43%	629.9
Hispanic	1,784	21%	259.5	1,566	22%	432.4	218	15%	67.0
Asian/Hawaiian/Pacific Islander	256	3%	144.4	219	3%	265.8	37	3%	39.0
American Indian/Alaska Native	71	1%	200.6	53	1%	307.9	18	1%	99.0
Multi-race/Other	55	1%	N/A	48	1%	N/A	7	0%	N/A
Age at End of Year									
Missing	58	1%	N/A	50	1%	N/A	8	1%	N/A
< 13	11	0%	2.3	5	0%	2.0	6	0%	2.5
13 to 24	302	4%	70.1	245	3%	110.4	57	4%	27.3
25 to 34	1,241	15%	322.7	1,013	14%	506.6	228	16%	123.5
35 to 44	2,298	27%	616.0	1,880	26%	970.7	418	30%	233.0
45 to 54	3,061	36%	816.7	2,610	37%	1,354.2	451	32%	247.7
55 to 64	1,221	14%	395.7	1,025	14%	672.8	196	14%	125.5
65 +	319	4%	96.3	272	4%	180.8	47	3%	26.0
Transmission Category									
MSM	5,328	63%	N/A	5,328	75%	N/A	0	0%	N/A
IDU	752	9%	N/A	499	7%	N/A	253	18%	N/A
MSM+IDU	530	6%	N/A	530	7%	N/A	0	0%	N/A
Heterosexual contact	1,128	13%	N/A	261	4%	N/A	867	61%	N/A
Perinatal exposure	63	1%	N/A	30	0%	N/A	33	2%	N/A
Hemophilia/Blood Transfusion	11	0%	N/A	7	0%	N/A	4	0%	N/A
NIR/NRR	699	8%	N/A	445	6%	N/A	254	18%	N/A
Total	8,511	100%	316.8	7,100	100%	522.6	1,411	100%	106.3

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (February 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup>All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

Table 17 | Persons Living with HIV/AIDS in Nevada, 2007-2011

0																
		2007			2008			2009			2010			2011		% Change
	z	%	Rate*	z	%	Rate*	z	%	Rate*	z	- %	Rate*	z	- %	Rate*	%
Residence at Diagnosis																
Nevada	5,442	74%	N/A	5,840	%92	N/A	5,838	73%	N/A	5,838	71%	N/A	5,995	20%	A/N	10%
Out of state	1,874	792	N/A	1,883	24%	N/A	2,108	27%	N/A	2,108	798	N/A	2,516	30%	N/A	34%
County of Residence																
Clark County	6,140	84%	314.2	6,514	84%	331.0	6,720	85%	344.3	096′9	85%	353.5	7,249	85%	374.7	18%
Washoe County	734	10%	175.6	260	10%	179.3	791	10%	189.9	824	10%	197.4	854	10%	208.5	16%
All Other Counties **	442	%9	127.7	449	%9	129.3	435	2%	126.9	426	2%	125.8	408	2%	119.4	%8-
Sex																
Male	6,102	83%	441.4	6,434	83%	462.5	6,613	83%	480.8	6,839	83%	495.4	7,100	83%	522.6	16%
Female	1,214	17%	90.9	1,289	17%	92.6	1,333	17%	8.66	1,371	17%	102.0	1,411	17%	106.3	16%
Race/Ethnicity	,															
White, non-Hispanic	4,004	25%	243.0	4,173	54%	253.1	4,182	53%	257.4	4,218	51%	260.2	4,284	20%	268.7	2%
Black, non-Hispanic	1,702	23%	901.8	1,804	23%	944.2	1,883	24%	985.7	1,971		1,018.5	2,061		1,074.7	21%
Hispanic	1,360	19%	204.2	1,474	19%	216.4	1,574	20%	231.5	1,684	21%	243.3	1,784	21%	259.5	31%
Asian/Hawaiian/Pacific Islander	166	2%	92.4	182	2%	100.0	204	3%	113.4	220	3%	120.9	256	3%	144.4	54%
American Indian/Alaska Native	64	1%	178.2	99	1%	182.3	71	1%	198.1	71	1%	198.3	71	1%	200.6	11%
Multi-race/Other	20	%0	N/A	24	%0	N/A	32	%0	A/N	46	1%	A/N	55	1%	A/N	N/A
Age at End of Year																
Missing	62	1%	N/A	62	1%	N/A	61	1%	A/N	59	1%	A/N	28	1%	A/N	
< 13	18	%0	3.7	16	%0	3.2	13	%0	2.7	11	%0	2.3	11	%0	2.3	-39%
13 to 24	232	3%	49.9	254	3%	54.9	256	3%	56.9	270	3%	60.3	302	4%	70.1	30%
25 to 34	994	14%	248.5	1,039	13%	258.7	1,118	14%	283.0	1,169	14%	295.8	1,241	15%	322.7	25%
35 to 44	2,802	38%	714.9	2,742	36%	702.7	2,567	32%	671.5	2,428	30%	637.2	2,298	27%	616.0	-18%
45 to 54	2,256	31%	604.6	2,513	33%	664.5	2,716	34%	719.5	2,906	35%	764.7	3,061	36%	816.7	36%
55 to 64	792	11%	274.5	895	12%	303.4	973	12%	326.4	1,090	13%	357.1	1,221	14%	395.7	54%
65 +	160	7%	52.1	202	3%	64.0	242	3%	75.5	277	3%	84.5	319	4%	96.3	%66
Transmission Category																
Males																
MSM	4,364	72%	N/A	4,649	72%	N/A	4,879	74%	N/A	5,092	74%	N/A	5,328	75%	N/A	22%
IDU	499	8%	N/A	515	8%	N/A	489	2%	N/A	499	2%	N/A	499	7%	N/A	%0
MSM+IDU	491	%8	N/A	496	%8	N/A	202	%8	N/A	510	2%	N/A	530	2%	N/A	8%
Heterosexual contact	230	4%	N/A	247	4%	N/A	246	4%	N/A	255	4%	N/A	261	4%	N/A	13%
Perinatal exposure	28	%0	N/A	29	%0	N/A	27	%0	N/A	26	%0	N/A	30	%0	N/A	7%
Transfusion/Hemophilia	8	%0	N/A	6	%0	N/A	7	%0	N/A	7	%0	N/A	7	%0	N/A	N/A
NIR/NRR	482	%8	N/A	489	%8	N/A	458	2%	N/A	450	2%	N/A	445	%9	N/A	-8%
Subtotal	6,102	100%	441.4	6,434	100%	462.5	6,613	100%	480.8	6,839	100%	495.4	7,100	100%	522.6	16%
Females																
IDU	251	21%	N/A	259	20%	N/A	259	19%	N/A	255	19%	N/A	253	18%	N/A	1%
Heterosexual contact	674	26%	N/A	742	28%	N/A	799	%09	N/A	839	61%	N/A	867	61%	N/A	29%
Perinatal exposure	27	7%	N/A	27	7%	N/A	26	7%	N/A	31	2%	N/A	33	2%	N/A	N/A
Transfusion/Hemophilia	2	%0	N/A	2	%0	N/A	4	%0	N/A	4	%0	N/A	4	%0	N/A	N/A
NIR/NRR	257	21%	N/A	256	20%	N/A	245	18%	N/A	242	18%	N/A	254	18%	N/A	-1%
Subtotal	1,214	100%	90.9	1,289	100%	92.6	1,333	100%	8.66	1,371	100%	102.0	1,411	100%	106.3	16%
Total	7,316	100%	269.1	7,723	200%	282.0	7,946	200%	293.1	8,210	200%	301.3	8,511	100%	316.8	16%
Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (February 2012)	porting System	(eHARS), (F	ebruary 20	12)												

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (February 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.
\*\*All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

<sup>†</sup> % Change is the percent change in the number of number of persons living with HIV/AIDS from 2007 to 2011.

Table 18 | New HIV Infections in Clark County, 2011

		Total			Male			Female	
	N	%	Rate*	n	%	Rate*	n	%	Rate*
Race/Ethnicity									
White, non-Hispanic	111	32%	10.6	99	33%	18.8	12	24%	2.3
Black, non-Hispanic	101	29%	56.7	71	24%	80.3	30	60%	33.4
Hispanic	100	29%	18.3	94	32%	32.8	6	12%	2.3
Asian/Hawaiian/Pacific Islander	30	9%	20.5	29	10%	42.5	1	2%	3.8
Multi-race/Other**	4	1%	N/A	5	2%	N/A	1	2%	N/A
Age at Diagnosis									
< 13	0	0%	N/A	0	0%	N/A	0	0%	N/A
13 to 24	87	25%	28.2	67	22%	42.3	7	14%	4.7
25 to 34	120	34%	42.8	87	29%	59.8	11	22%	8.1
35 to 44	58	17%	20.9	71	24%	49.1	14	28%	10.5
45 to 54	54	16%	20.4	35	12%	25.5	10	20%	7.8
55 to 64	24	7%	11.4	20	7%	19.3	10	20%	9.3
65 +	5	1%	2.2	5	2%	4.8	1	2%	0.8
Transmission Category									
MSM	252	72%	N/A	252	85%	N/A	0	0%	N/A
IDU	17	5%	N/A	12	4%	N/A	5	10%	N/A
MSM+IDU	16	5%	N/A	16	5%	N/A	0	0%	N/A
Heterosexual contact	33	9%	N/A	8	3%	N/A	25	50%	N/A
Perinatal exposure	3	1%	N/A	1	0%	N/A	2	4%	N/A
NIR/NRR	27	8%	N/A	9	3%	N/A	18	36%	N/A
Total	348	100%	18.0	298	100%	30.5	50	100%	5.2

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)

Table 19 | New AIDS Diagnoses in Clark County, 2011

		Total			Male			Female	
	N	%	Rate*	n	%	Rate*	n	%	Rate*
Race/Ethnicity									
White, non-Hispanic	67	1%	6.4	59	37%	11.2	8	21%	1.5
Black, non-Hispanic	69	35%	38.7	45	28%	50.9	24	63%	26.7
Hispanic	49	25%	9.0	45	28%	15.7	4	11%	1.5
Asian/Hawaiian/Pacific Islander	8	4%	5.5	7	4%	10.3	1	3%	3.8
Multi-race/Other**	3	2%	N/A	2	1%	N/A	1	3%	N/A
Age at Diagnosis									
< 13	0	0%	N/A	0	0%	N/A	0	0%	N/A
13 to 24	24	12%	7.8	20	13%	12.6	4	11%	2.7
25 to 34	54	28%	19.2	44	28%	30.2	10	26%	7.4
35 to 44	51	26%	18.3	41	26%	28.3	10	26%	7.5
45 to 54	47	24%	17.7	38	24%	27.7	9	24%	7.0
55 to 64	17	9%	8.1	12	8%	11.6	5	13%	4.7
65 +	3	2%	1.3	3	2%	2.9	0	0%	0.0
Transmission Category									
MSM	122	62%	N/A	122	77%	N/A	0	0%	N/A
IDU	18	9%	N/A	11	7%	N/A	7	18%	N/A
MSM+IDU	7	4%	N/A	7	4%	N/A	0	0%	N/A
Heterosexual contact	21	11%	N/A	5	3%	N/A	16	42%	N/A
Perinatal exposure	6	3%	N/A	4	3%	N/A	2	5%	N/A
Transfusion/Hemophilia	1	1%	N/A	1	1%	N/A	0	0%	N/A
NIR/NRR	21	11%	N/A	8	5%	N/A	13	34%	N/A
Total	196	100%	10.1	158	100%	16.2	38	100%	4.0

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup> Multi-Race/Other includes persons who identified as multi-race, other race, or American Indian/Alaska Native. These categories were combined due to their small population size and low number of new infections.

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup> Multi-Race/Other includes persons who identified as multi-race, other race, or American Indian/Alaska Native. These categories were combined due to their small population size and low number of new infections.

		Total			Male			Female	
	N	%	Rate*	N	%	Rate*	N	%	Rate*
Residence at Diagnosis									
Nevada	5,186	72%	N/A	4,297	71%	N/A	889	74%	N/A
Out of state	2,063	28%	N/A	1,753	29%	N/A	310	26%	N/A
Race/Ethnicity									
White, non-Hispanic	3,441	49%	328.2	3,053	50%	580.1	388	32%	74.3
Black, non-Hispanic	1,898	26%	1,065.1	1,327	22%	1,501.6	571	48%	635.7
Hispanic	1,584	21%	290.6	1,394	23%	485.7	190	16%	73.6
Asian/Hawaiian/Pacific Islander	230	3%	156.8	200	3%	293.1	30	3%	38.3
American Indian/Alaska Native	49	1%	300.6	36	1%	452.2	13	1%	155.9
Multi-race/Other	47	1%	N/A	40	1%	N/A	7	1%	N/A
Age at End of Year									
Missing	58	1%	N/A	50	1%	N/A	8	1%	N/A
< 13	10	0%	2.8	5	0%	2.7	5	0%	2.8
13 to 24	273	4%	88.6	218	4%	137.7	55	5%	36.7
25 to 34	1,094	15%	389.8	897	15%	616.1	197	16%	145.8
35 to 44	1,968	27%	707.5	1,609	27%	1,112.4	359	30%	268.9
45 to 54	2,571	35%	969.0	2,198	36%	1,599.5	373	31%	291.6
55 to 64	1,018	14%	482.8	856	14%	828.1	162	14%	150.7
65 +	257	4%	111.1	217	4%	208.4	40	3%	31.4
Transmission Category									
MSM	4,681	64%	N/A	4,681	77%	N/A	0	0%	N/A
IDU	597	6%	N/A	397	7%	N/A	200	17%	N/A
MSM+IDU	419	9%	N/A	419	7%	N/A	0	0%	N/A
Heterosexual contact	974	14%	N/A	212	4%	N/A	762	64%	N/A
Perinatal exposure	56	1%	N/A	26	0%	N/A	30	3%	N/A
Hemophilia/Blood Transfusion	8	0%	N/A	7	0%	N/A	1	0%	N/A
NIR/NRR	514	7%	N/A	308	5%	N/A	206	17%	N/A
Total	7,249	100%	374.7	6,050	100%	618.7	1,199	100%	125.3

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (February 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

Table 21 | New HIV Infections and New AIDS Diagnoses in Washoe County, 2011

	New	HIV Infection	ns	New	AIDS Diagno	ses
	N	%	Rate*	N	%	Rate*
Sex						
Male	23	85%	11.1	13	87%	6.3
Female	4	15%	2.0	2	13%	1.0
Race/Ethnicity						
White, non-Hispanic	15	56%	5.5	9	60%	3.3
Black, non-Hispanic	3	11%	32.8	1	7%	10.9
Hispanic	6	22%	6.5	3	20%	3.2
Asian/Hawaiian/Pacific Islander	3	11%	12.0	1	7%	4.0
Multi-race/Other**	0	0%	N/A	1	7%	N/A
Age at Diagnosis	27					
< 13	0	0%	0.0	0	0%	0.0
13 to 24	2	7%	3.0	0	0%	0.0
25 to 34	11	41%	18.1	0	0%	0.0
35 to 44	4	15%	7.3	7	47%	12.7
45 to 54	6	22%	10.3	5	33%	8.5
55 to 64	3	11%	6.0	2	13%	4.0
65 +	1	4%	2.1	1	7%	2.1
Transmission Category						
MSM	17	63%	N/A	11	73%	N/A
MSM+IDU	1	4%	N/A	0	0%	N/A
IDU	1	4%	N/A	1	7%	N/A
Heterosexual contact	5	19%	N/A	2	13%	N/A
Perinatal exposure	0	0%	N/A	0	0%	N/A
Hemophilia/Blood Transfusion	0	0%	N/A	0	0%	N/A
NIR/NRR	3	11%	N/A	1	7%	N/A
Total	27	100%	6.6	15	100%	3.7

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)

Table 22 | Persons Living with HIV/AIDS in Washoe County, 2011

		Total			Male			Female	
	N	%	Rate*	N	%	Rate*	N	%	Rate*
Residence at Diagnosis									
Nevada	539	63%	N/A	440	61%	N/A	99	73%	N/A
Out of state	315	37%	N/A	278	39%	N/A	37	27%	N/A
Race/Ethnicity									
White, non-Hispanic	569	49%	206.7	485	68%	352.1	84	62%	61.1
Black, non-Hispanic	110	26%	1,201.7	86	12%	1,768.2	24	18%	559.4
Hispanic	135	21%	146.1	115	16%	236.2	20	15%	45.7
Asian/Hawaiian/Pacific Islander	20	3%	80.1	15	2%	128.7	5	4%	37.5
American Indian/Alaska Native	14	1%	176.8	11	2%	281.7	3	2%	74.8
Multi-race/Other	6	1%	N/A	6	1%	N/A	0	0%	N/A
Age at End of Year									
Missing	0	0%	N/A	0	0%	N/A	0	0%	N/A
< 13	1	0%	1.4	0	0%	0.0	1	1%	2.9
13 to 24	21	2%	31.7	20	3%	67.5	1	1%	3.1
25 to 34	101	12%	166.1	80	11%	350.3	21	15%	71.7
35 to 44	232	27%	422.6	194	27%	929.0	38	28%	142.0
45 to 54	328	38%	560.5	280	39%	1,086.2	48	35%	165.7
55 to 64	137	16%	271.9	115	16%	483.7	22	16%	87.3
65 +	34	4%	72.4	29	4%	116.7	5	4%	19.6
Transmission Category									
MSM	478	64%	N/A	478	67%	N/A	0	0%	N/A
IDU	82	6%	N/A	49	7%	N/A	33	24%	N/A
MSM+IDU	79	9%	N/A	79	11%	N/A	0	0%	N/A
Heterosexual contact	89	14%	N/A	19	3%	N/A	70	51%	N/A
Perinatal exposure	2	1%	N/A	1	0%	N/A	1	1%	N/A
Hemophilia/Blood Transfusion	1	0%	N/A	0	0%	N/A	1	1%	N/A
NIR/NRR	123	7%	N/A	92	13%	N/A	31	23%	N/A
Total	854	100%	208.5	718	100%	347.1	136	100%	67.1

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (February 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup> Multi-race/other includes persons who identified as multi-race, other race, or American Indian/Alaska Native. These categories were combined due to their small population size and low number of new infections.

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

Table 23 | New HIV Infections in Nevada by Race/Ethnicity, 2011

week 25 week me meetings in wedada by week Emmer		W.bito	א ואמרכי ד	<u> </u>	Plack		=	licasi.			- C			+204+0/000 itl://	+**
		2			Diach			nspaille.			ī		NIC	nace/ Our	- D
	<b>u</b>	%	Rate	u	%	Rate	<b>L</b>	%	Rate	<b>-</b>	%	Rate	u	%	Rate
County at Diagnosis															
Clark County	111	87%	10.6	101	82%	26.7	100	95%	18.3	30	91%	20.5	9	100%	N/A
Washoe County	15	11%	5.5	3	2%	32.8	9	%9	6.5	3	%6	12.0	0	%0	N/A
All Other Counties**	7	7%	0.7	0	%0	0.0	1	7%	2.0	0	%0	0.0	0	%0	N/A
Sex															
Male	115	%06	14.4	73	100%	75.8	100	100%	27.6	31	94%	37.6	5	83%	N/A
Female	13	10%	1.6	31	100%	32.5	7	100%	2.2	2	%9	2.1	1	17%	N/A
Age															
< 13	0	%0	0.0	0	%0	0.0	0	%0	0.0	0	%0	0.0	0	%0	N/A
13 to 24	18	14%	8.2	32	31%	84.7	27	72%	19.3	10	30%	39.2	2	33%	N/A
25 to 34	43	34%	21.2	32	31%	118.4	40	37%	32.4	17	52%	66.7	1	17%	N/A
35 to 44	22	17%	10.6	12	12%	48.6	23	21%	21.2	4	12%	14.7	1	17%	N/A
45 to 54	32	25%	12.9	14	13%	54.0	12	11%	17.1	1	3%	3.9	2	33%	N/A
55 to 64	11	%6	4.8	11	11%	59.5	4	4%	11.2	1	3%	4.9	0	%0	N/A
92 +	7	7%	0.7	3	3%	17.5	1	1%	4.2	0	%0	0.0	0	%0	N/A
Transmission Category															
Males															
MSM	26	84%	N/A	28	%62	N/A	83	83%	N/A	28	%06	N/A	4	%08	N/A
IDU	4	3%	N/A	2	3%	N/A	9	%9	N/A	1	3%	N/A	0	%0	N/A
MSM+IDU	7	%9	N/A	4	2%	N/A	4	4%	N/A	1	3%	N/A	1	70%	N/A
Perinatal exposure	7	7%	N/A	9	%8	N/A	2	7%	N/A	0	%0	N/A	0	%0	N/A
Heterosexual contact	0	%0	N/A	1	1%	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
NIR/NRR	2	4%	N/A	2	3%	N/A	2	2%	N/A	1	3%	N/A	0	%0	N/A
Subtotal	115	100%	14.4	73	100%	75.8	100	100%	27.6	31	100%	37.6	2	100%	N/A
Females															
IDU	2	38%	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
Heterosexual contact	2	38%	N/A	17	22%	N/A	2	71%	N/A	1	20%	N/A	1	100%	N/A
Perinatal exposure	0	%0	N/A	2	%9	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
NIR/NRR	3	23%	N/A	12	39%	N/A	2	79%	N/A	1	20%	N/A	0	%0	N/A
Subtotal	13	100%	1.6	31	100%	32.5	7	100%	2.2	2	100%	2.1	1	100%	N/A
Total	128	100%	8.0	104	100%	54.2	107	100%	15.6	33	100%	18.6	9	100%	A/N

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>†</sup>Multi-race/other includes persons who identified as multi-race, other race, or American Indian/Alaska Native. These categories were combined due to their small population size and low number of new infections. \*\*All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

Table 24 | Persons Living with HIV/AIDS in Nevada by Race/Ethnicity, 2011

יים ביים ביים ביים ביים ביים ביים ביים	1118 WICH	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			)	c, Edinicity,	í											
		White			Black			Hispanic			API		4	AI/AN		Multi	Multi-race/Other	in.
	Ľ	%	Rate	u	%	Rate	u	%	Rate	u	%	Rate	u	%	Rate	u	%	Rate
County of Residence																		
Clark County	3,441	%08	328.2	1,898	95%	1,065.1	1,584	%68	290.6	230	%06	156.8	49	%69	300.6	49	%68	N/A
Washoe County	269	13%	206.7	110	2%	1,201.7	135	8%	146.1	20	8%	80.1	14	20%	176.8	14	25%	N/A
All Other Counties**	274	%/	101.3	53	3%	1,196.4	65	4%	130.6	9	2%	105.6	8	11%	71.6	8	15%	N/A
Sex																		
Male	3,754	%88	469.0	1,460	71%	1,515.1	1,566	%88	432.4	219	%98	265.8	53	75%	307.9	53	%96	N/A
Female	230	12%	8.99	601	767	629.9	218	12%	0.79	37	14%	39.0	18	25%	0.66	18	33%	N/A
Age at End of Year																		
Missing	33	1%	N/A	11	1%	N/A	14	1%	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
< 13	2	%0	0.9	5	%0	12.3	4	%0	2.2	0	%0	0.0	0	%0	0.0	0	%0	N/A
13 to 24	73	7%	33.1	128	%9	338.9	78	4%	55.6	16	%9	62.7	2	3%	31.1	2	4%	N/A
25 to 34	404	%6	198.9	367	18%	1,357.5	388	22%	314.6	57	22%	223.6	12	17%	217.4	12	22%	N/A
35 to 44	1,062	25%	511.0	535	79%	2,168.6	591	33%	545.6	80	31%	293.4	16	23%	323.0	16	78%	N/A
45 to 54	1,788	42%	722.4	664	32%	2,561.2	495	78%	704.6	70	27%	270.3	25	35%	480.1	25	45%	N/A
55 to 64	701	16%	304.8	304	15%	1,644.5	174	10%	485.6	27	11%	133.6	13	18%	326.4	13	24%	N/A
65 +	221	2%	82.2	47	2%	274.1	40	7%	167.8	9	2%	33.2	3	4%	86.1	3	2%	N/A
Transmission Category																		
Males																		
MSM	2,846	%9/	N/A	286	%89	N/A	1,228	78%	N/A	197	%06	N/A	38	72%	N/A	32	%29	N/A
IDU	258	7%	N/A	156	11%	N/A	74	2%	N/A	2	1%	N/A	5	%6	N/A	4	%8	N/A
MSM+IDU	347	%6	N/A	80	2%	N/A	79	2%	N/A	10	2%	N/A	7	13%	N/A	7	15%	N/A
Heteros exual contact	81	7%	N/A	102	2%	N/A	70	4%	N/A	2	2%	N/A	1	2%	N/A	2	4%	N/A
Perinatal exposure	8	%0	N/A	16	1%	N/A	9	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
Transfuion/Hemophilia	7	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
NIR/NRR	207	%9	N/A	119	8%	N/A	109	7%	N/A	2	2%	N/A	2	4%	N/A	3	%9	N/A
Subtotal	3,754	100%	469.0	1,460	100%	1,506.5	1,566	100%	432.4	219	100%	265.8	53	100%	307.9	48	100%	N/A
Females																		
IDU	144	27%	N/A	80	13%	N/A	22	10%	N/A	2	2%	N/A	4	22%	N/A	1	14%	N/A
Heteros exual contact	281	23%	N/A	385	64%	N/A	156	72%	N/A	30	81%	N/A	10	%95	N/A	2	71%	N/A
Perinatal exposure	10	2%	N/A	18	3%	N/A	2	7%	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
Transfuion/Hemophilia	3	1%	N/A	0	%0	N/A	0	%0	N/A	1	3%	N/A	0	%0	N/A	0	%0	N/A
NIR/NRR	95	17%	N/A	118	20%	N/A	35	16%	N/A	4	11%	N/A	4	22%	N/A	1	14%	N/A
Subtotal	530	100%	66.8	601	100%	612.7	218	100%	67.0	37	100%	39.0	18	100%	99.0	7	100%	N/A
Total	4,284	100%	268.7	2,061	100%	1,074.7	1,784	100%	259.5	256	100%	144.4	71	100%	200.6	22	100%	N/A
	0	:																

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (February 2012)

<sup>\*</sup> Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup>All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

Table 25 | New HIV Infections in Nevada by Age at Diagnosis, 2011

£ 55 55 55 55 55 55 55 55 55 55 55 55 55		c / 2		00.1	13 to 24			7E +0 2/		20	25 +0 44			AE +0 EA		ī	EE +0 64			1.0	
	_	; %	Rate	· _	: : :	Rate	i	; 2 %	Rate	; _		Rate	f	; 2 %	Rate	; 		Rate	_	5 %	Rate
County at Diagnosis																					
Clark County	0	%0	0.0	87	%86	28.2	120	%06	42.8	58	94%	20.9	54	87%	20.4	24	%68	11.4	5	83%	2.2
Washoe County	0	%0	0.0	7	2%	3.0	11	%8	18.1	4	%9	7.3	9	10%	10.3	3	11%	0.9	1	17%	2.1
All Other Counties**	0	%0	0.0	0	%0	0.0	2	2%	4.6	0	%0	0.0	1	2%	2.0	0	%0	0.0	0	%0	0.0
Sex																					
Male	0	%0	0.0	62	%68	35.6	119	%68	59.5	52	84%	26.8	20	81%	25.9	18	%29	11.8	9	100%	4.0
Female	0	%0	0.0	10	11%	4.8	14	11%	9.7	10	16%	5.6	11	18%	0.9	6	33%	5.8	0	%0	0.0
Race/Ethnicity																					
White, non-Hispanic	0	%0	0.0	18	70%	8.2	43	32%	21.2	22	35%	10.6	32	25%	12.9	11	41%	4.8	2	33%	0.7
Black, non-Hispanic	0	%0	0.0	32	36%	84.7	32	24%	118.4	12	19%	48.6	14	23%	54.0	11	41%	59.5	3	20%	17.5
Hispanic	0	%0	0.0	72	30%	19.3	40	30%	32.4	23	37%	21.2	12	19%	17.1	4	15%	11.2	1	17%	4.2
Asian/Hawaiian/Pacific Islander	0	%0	0.0	10	11%	39.2	17	13%	66.7	4	%9	14.7	1	2%	3.9	1	4%	4.9	0	%0	0.0
Multi-race/Othert	0	%0	N/A	2	7%	N/A	1	1%	N/A	1	7%	N/A	2	3%	N/A	0	%0	N/A	0	%0	N/A
Transmission Category																					
Males																					
MSM	0	%0	N/A	72	91%	N/A	100	84%	N/A	43	83%	N/A	37	100%	N/A	14	100%	N/A	4	100%	N/A
IDN	0	%0	N/A	0	%0	N/A	3	3%	N/A	4	%8	N/A	2	%0	N/A	0	%0	N/A	1	%0	N/A
MSM+IDU	0	%0	N/A	9	%8	N/A	10	%8	N/A	0	%0	N/A	1	%0	N/A	0	%0	N/A	0	%0	N/A
Heterosexual contact	0	%0	N/A	0	%0	N/A	4	3%	N/A	2	4%	N/A	2	%0	N/A	2	%0	N/A	0	%0	N/A
Perinatal exposure	0	%0	N/A	I	1%	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
NIR/NRR	0	%0	N/A	0	%0	N/A	2	2%	N/A	3	%9	N/A	2	%0	N/A	2	%0	N/A	1	%0	N/A
Subtotal	0	%0	0.0	62	100%	35.6	119	100%	59.5	52	100%	26.8	20	%0	25.9	18	100%	11.8	9	100%	4.0
Females																					
IDU	0	%0	N/A	0	%0	N/A	0	%0	N/A	1	10%	N/A	3	2%	N/A	1	%0	N/A	0	%0	N/A
Heterosexual contact	0	%0	N/A	9	%09	N/A	7	20%	N/A	4	40%	N/A	8	13%	N/A	4	100%	N/A	0	%0	N/A
Perinatal exposure	0	%0	N/A	7	70%	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
NIR/NRR	0	%0	N/A	7	20%	N/A	7	20%	N/A	5	20%	N/A	0	%0	N/A	4	%0	N/A	0	%0	N/A
Subtotal	0	%0	0.0	10	100%	4.8	14	100%	7.6	10	100%	5.6	11	18%	0.9	6	100%	5.8	0	100%	0.0
Total	0	100%	0.0	88	100%	20.7	133	100%	34.6	62	100%	16.6	61	100%	16.3	27	100%	8.8	9	100%	1.8
			:																		

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (August 2012)

 $<sup>^</sup>st$  Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup>All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties.

<sup>†</sup>Multi-Race/Other includes persons who identified as multi-race, other race, or American Indian/Alaska Native. These categories were combined due to the small number of new infections in these populations.

Table 26 Persons Living with HIV/AIDS in Nevada by Age at End of Year<sup>+</sup>, 2011

																:			,		
				15	<b>5</b> 7		72	44		35 to 44	<b>4</b>		45	4		Ϋ́	4		٥		
	u	% R	Rate	u	% R	Rate	u	% R	Rate	% u	% Ra	Rate	u	% R	Rate	u	% R	Rate	u	% R	Rate
County of Residence																					
Clark County	10	91%	2.8	273	%06	9.88	1,094	%88	389.8	1,968	86% 7	707.5	2,571	84%	0.696	1,018	83%	482.8	257	81%	111.1
Washoe County	1	%6	1.4	21	2%	31.7	101	%8	166.1	232	10% 4	422.6	328	11%	5.095	137	11%	271.9	34	11%	72.4
All Other Counties**	0	%0	0.0	8	3%	14.2	46	4%	106.9	86	4% 2	244.9	162	2%	318.0	99	2%	139.5	28	%6	52.8
Sex																					
Male	2	45%	2.0	245	81%	110.4	1,013	82%	9.905	1,880	82% 9	970.7	2,610	85% 1,3	1,354.2	1,025	84%	672.8	272	85%	180.8
Female	9	25%	2.5	57	19%	27.3	228	18%	123.5	418	18% 2	233.0	451	15%	247.7	196	16%	125.5	47	15%	26.0
Race/Ethnicity																					
White, non-Hispanic	2	45%	6.0	73	42%	33.1	404	30%	198.9	1,062	23% 5	511.0	1,788	22%	722.4	701	25%	304.8	221	15%	82.2
Black, non-Hispanic	2	36%	12.3	128	79%	338.9	367	31% 1,3	1,357.5	535	26% 2,1	2,168.6	664	16% 2,5	2,561.2	304	14% 1,	1,644.5	47	13%	274.1
Hispanic	4	%0	2.2	78	2%	55.6	388	2%	314.6	591	3% 2	545.6	495	2%	704.6	174	7%	485.6	40	7%	167.8
Asian/Hawaiian/Pacific Islander	0	%0	0.0	16	1%	62.7	22	1%	223.6	80	1% 2	293.4	20	1%	270.3	27	1%	133.6	9	1%	33.2
American Indian/Alaska Native	0	%0	0.0	2	7%	31.1	12	1%	217.4	16	1% 3	323.0	25	1% 4	480.1	13	%0	326.4	3	1%	86.1
Multi-race/Other	0	%0	N/A	5	%0	N/A	13	%0	N/A	14	%0	N/A	19	%0	N/A	2	%0	N/A	2	%0	N/A
Transmission Category																					
Males																					
MSM	0	%0	N/A	196	%08	N/A	839	83%	N/A	1,485	%62	N/A	1883	72%	N/A	889	%29	N/A	201	74%	N/A
IDU	0	%0	N/A	3	1%	N/A	18	7%	N/A	88	2%	N/A	233	%6	N/A	132	13%	N/A	22	%8	N/A
MSM+IDU	0	%0	N/A	6	4%	N/A	72	%/	N/A	132	2%	N/A	232	%6	N/A	75	2%	N/A	6	3%	N/A
Heteros exual contact	0	%0	N/A	4	20%	N/A	35	73%	N/A	65 (	%09	N/A	105	%89	N/A	41	47%	N/A	11	4%	N/A
Perinatal exposure	4	%08	N/A	25	10%	N/A	1	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
Transfuion/Hemophilia	0	%0	N/A	0	%0	N/A	0	%0	N/A	1	%0	N/A	3	%0	N/A	2	%0	N/A	1	%0	N/A
NIR/NRR	1	70%	N/A	8	3%	N/A	48	2%	N/A	109	%9	N/A	154	%9	N/A	87	%8	N/A	28	10%	N/A
Subtotal	2	100%	2.0	245	100%	110.4	1,013	100%	9.905	1,880 10	100% 9	970.7	2,610 1	100% 1,3	1,354.2	1,025	100%	672.8	272	100%	180.8
Females																					
IDU	0	%0	N/A	1	7%	N/A	18	%8	N/A	70	17%	N/A	106	24%	N/A	49	25%	N/A	9	13%	N/A
Heteros exual contact	0	%0	N/A	23	40%	N/A	154	%89	N/A	270 (	%59	N/A	264	29%	N/A	118	%09	N/A	37	%62	N/A
Perinatal exposure	2	83%	N/A	26	46%	N/A	2	1%	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A	0	%0	N/A
Transfuion/Hemophilia	0	%0	N/A	0	%0	N/A	1	%0	N/A	0	%0	N/A	3	1%	N/A	0	%0	N/A	0	%0	N/A
NIR/NRR	1	17%	N/A	7	12%	N/A	53	23%	N/A	78	19%	N/A	78	17%	N/A	29	15%	N/A	4	%6	N/A
Subtotal	9	100%	2.5	57	100%	27.3	228	100%	123.5	418 10	100% 2	233.0	451 1	100%	247.7	196	100%	125.5	47 1	100%	26.0
Total	11	100%	2.3	302	100%	70.1	1,241	100%	322.7	2,298 10	100% 6	616.0	3,061 1	100%	816.7	1,221	100%	395.7	319 1	100%	96.3

Source: Nevada State Health Division HIV/AIDS Reporting System (eHARS), (February 2012) \* Rates per 100,000 population were calculated using 2011 population projections from the Nevada State Demographer vintage 2011 data.

<sup>\*\*</sup>All other counties include Carson City, Churchill, Douglas, Elko, Esmeralda, Eureka, Humboldt, Lander, Lincoln, Lyon, Mineral, Nye, Pershing, Storey, and White Pine Counties. †There were 58 persons missing age at end of year at the end of 2011. Data for these persons were not included in this table.

#### For more information contact:

Sandi Noffsinger, MPH
HIV/AIDS/STD/Hepatitis Surveillance and Control Manager
Office of Public Health Informatics and Epidemiology
Nevada State Health Division
3811 W. Charleston, Suite 205
Las Vegas, NV 89102
Phone: 702-486-0068
snoffsinger@health.nv.gov

Aliya Buttar, MPH
HIV/AIDS Epidemiology Capacity Coordinator
Office of Public Health Informatics and Epidemiology
Nevada State Health Division
3811 W. Charleston, Suite 205
Las Vegas, NV 89102
Phone: 702.486.0403

abuttar@health.nv.gov