HIV/AIDS Epidemiological Profile: 2012 Update

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HIV/AIDS Surveillance Program
Office of Public Health Informatics and Epidemiology
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DEFINITIONS

All other counties
The category *all other counties* includes all counties in Nevada other than Clark and Washoe counties. This includes 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 has been 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, 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.

Transgender

Persons whose gender identity, expression or behaviors are different from those typically associated with their assigned sex at birth. HIV/AIDS surveillance programs use two variables, *sex at birth* and *current gender identity*, to identify transgender individuals and commonly use the following gender categories:

Male-to-Female (MTF): An individual who was born as a male but currently identifies as a female.

Female-to-Male (FTM): An individual who was born as a female but currently identifies as a male.

Additional gender identity: Gender identities other than male, female, MTF, and FTM. For example, genderqueer, gender fluid, and bigender.

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
MTF	male-to-female
FTM	female-to-male
NIR	no identified risk
NRR	no reported risk
SB	senate bill

EXECUTIVE SUMMARY

In 2012, there were only 344 new HIV infections statewide, which is a substantial decrease from the 378 new HIV infections in 2011. This decrease is unusual and may be due to the unexpected closure of the Southern Nevada Health District building in April 2012 and the subsequent disruption in HIV testing services, causing fewer people to get tested and diagnosed. With this overall decline, there are unusual declines in the number of new HIV infections among many sub-populations, so it is important to consider how these events may affect new HIV infection trends.

At the end of 2012, a total of 8,792 persons were known to be living with HIV/AIDS in Nevada, over half (53%) of whom have been diagnosed with AIDS. Overall, 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 2012, Clark County had the highest rate of new HIV infections (15.6 per 100,000 population) and rate of persons living with HIV/AIDS (378.1 per 100,000 population). In Washoe County, which is the next most populous county in Nevada, the rate of new HIV infections was 6.1 per 100,0000 population and the rate of persons living with HIV/AIDS was 207.6 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 2012, the rate of new HIV infections in the all other counties region was only 2.1 cases per 100,000 population and the rate of persons living with HIV/AIDS was 116.9 per 100,000 population.

Males continue to be disproportionately affected by HIV/AIDS in Nevada. In 2012, 88% of newly diagnosed HIV infections were among males and 82% of persons living with HIV/AIDS were male. Furthermore, 80% 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 (48.6 and 27.8 per 100,000 population respectively).

Large racial/ethnic disparities exist within our state, especially among Blacks. In 2012, the rate of new HIV infections among Blacks was 4.5 times that of Whites (35.6 vs. 8.0 per 100,000 population). This disparity is even greater for Black females, whose rate of new HIV infections was 16.1 times higher than that of White females (22.5 vs. 1.4 per 100,000 population). In addition, the rate of new HIV infections among Black youths (13-24 years) was nearly 7 times higher than that of White youths (47.7 vs. 7.1 per 100,000 population).

With regard to age, from 2008 to 2012 there has been a steady increase in the rate of new HIV infections among youth (13 to 24 years), while other age groups have experienced substantial declines during this same time period. The rate among 13 to 24 year olds increased from 13.8 per 100,000 population in 2008 to 16.6 per 100,000 population in 2012. The rate among 25 to 34 year olds increased from 28.9 per 100,000 population in 2008 to 34.2 per 100,000 population in 2011 but decreased to a rate similar to 2008's rate (28.5 per 100,000 population).

New to this report are sections on expanded behavioral risks and HIV/AIDS among transgender persons. 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 February 2013 extract of the Nevada enhanced HIV/AIDS Reporting System (eHARS), and data on persons living with HIV/AIDS are from a February 2013 extract of the Nevada 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, 1982-2012*

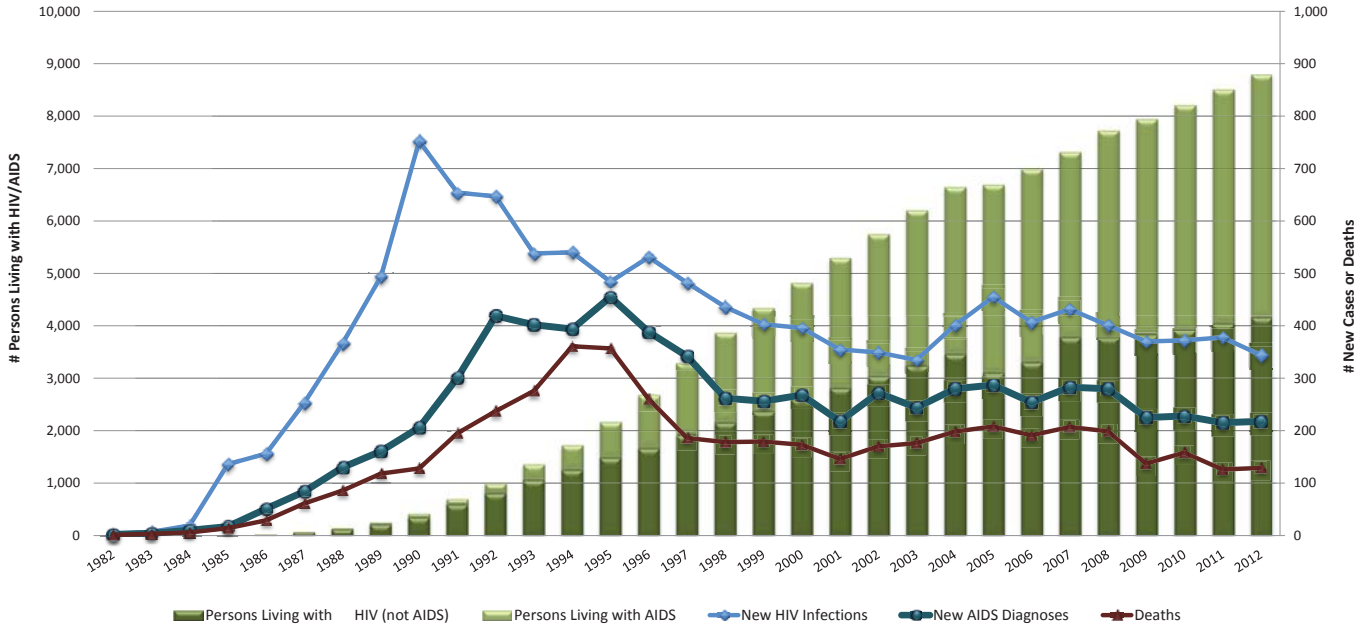


Table 1 *| Persons Living with HIV/AIDS, New HIV Infections, New AIDS Diagnoses, and Deaths in Nevada, 1982-2012*

	New HIV Infections		New AIDS Diagnoses		Persons Living with HIV (not AIDS)		Persons Living with AIDS		Persons Living with HIV/AIDS*		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	136	14.2	17	1.8	7	0.7	2	0.2	10	1.0	14	24
1986	156	15.7	51	5.1	39	3.9	5	0.5	48	4.8	29	53
1987	253	24.4	84	8.1	85	8.2	8	0.8	101	9.8	61	114
1988	367	33.5	130	11.9	146	13.3	20	1.8	179	16.4	86	200
1989	494	42.5	161	13.9	237	20.4	38	3.3	295	25.4	118	318
1990	752	60.8	206	16.7	372	30.1	68	5.5	470	38.0	128	446
1991	654	49.6	301	22.8	616	46.7	104	7.9	767	58.1	195	641
1992	647	47.2	419	30.5	828	60.4	186	13.6	1,074	78.3	237	878
1993	538	37.6	402	28.1	1,080	75.4	302	21.1	1,457	101.8	276	1,154
1994	540	35.4	394	25.8	1,273	83.4	470	30.8	1,826	119.7	361	1,515
1995	484	30.0	455	28.2	1,505	93.4	671	41.6	2,269	140.8	357	1,872
1996	531	31.3	388	22.9	1,682	99.2	1,008	59.4	2,789	164.4	260	2,132
1997	482	26.9	342	19.1	1,924	107.5	1,379	77.0	3,410	190.5	186	2,318
1998	436	23.3	262	14.0	2,158	115.3	1,712	91.5	3,985	213.0	178	2,496
1999	403	20.7	256	13.2	2,383	122.4	1,971	101.3	4,476	230.0	179	2,675
2000	396	19.6	268	13.3	2,598	128.8	2,232	110.6	4,959	245.8	173	2,848
2001	355	16.7	218	10.3	2,812	132.2	2,493	117.2	5,437	255.7	146	2,994
2002	349	15.9	272	12.4	3,033	137.8	2,724	123.8	5,895	267.9	170	3,164
2003	335	14.6	244	10.7	3,245	141.7	2,962	129.3	6,349	277.1	176	3,340
2004	401	16.7	280	11.6	3,458	143.8	3,194	132.9	6,796	282.7	198	3,538
2005	455	18.1	287	11.4	3,104	123.7	3,594	143.2	6,822	271.8	208	3,746
2006	407	14.9	254	9.3	3,303	121.2	3,693	135.5	6,996	256.8	191	3,937
2007	432	15.9	283	10.4	3,779	139.0	3,537	130.1	7,316	269.1	207	4,144
2008	401	15.2	280	10.6	3,780	143.1	3,943	149.3	7,723	292.4	199	4,343
2009	370	13.8	225	8.4	3,838	145.3	4,108	153.4	7,946	296.7	137	4,480
2010	372	13.7	228	8.4	3,920	148.4	4,290	158.5	8,210	303.4	158	4,638
2011	378	13.9	215	7.9	4,040	152.9	4,464	164.0	8,504	312.4	126	4,764
2012	344	12.5	218	7.9	4,160	151.3	4,632	168.4	8,792	319.7	129	4,893

**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: In the last five years (2008 to 2012), the number of persons newly diagnosed with HIV infection decreased 14%, from 401 to 344. From 2011 to 2012 there was a large decline in the number of new infections, whereas the number of new infections from 2009 to 2011 has been fairly stable. It is believed that this decrease in 2012 is due to the closure of the Southern Nevada Health District main building in April 2012 and the subsequent disruption in testing services. With fewer people getting tested, fewer people who may have been infected were diagnosed.

The number of new AIDS diagnoses has also decreased during this time period, from 280 in 2008 to 218 in 2012. In addition, the rate of new AIDS diagnoses has also decreased from 10.6 per 100,000 population in 2008 to 7.9 per 100,000 population in 2012.

In 2012, there were 4,160 persons living with HIV (not AIDS), 4,632 persons living with AIDS, and a total of 8,792 persons living with HIV/AIDS. Of the 8,792 persons living with HIV/AIDS at the end of 2012, 32% were diagnosed with HIV infection outside of Nevada. The number of persons living with HIV (not AIDS) increased 10% from 2008 to 2012, and the number of persons living with AIDS increased 26% from 2008 to 2012. The total number of persons living with HIV/AIDS in Nevada increased 17% from 7,723 in 2008 to 8,792 in 2012.

Since the beginning of the epidemic, 4,893 persons known to be living with HIV/AIDS in Nevada have died. In 2012 alone, there were 129 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 Living with HIV/AIDS in Nevada by County, 2012*

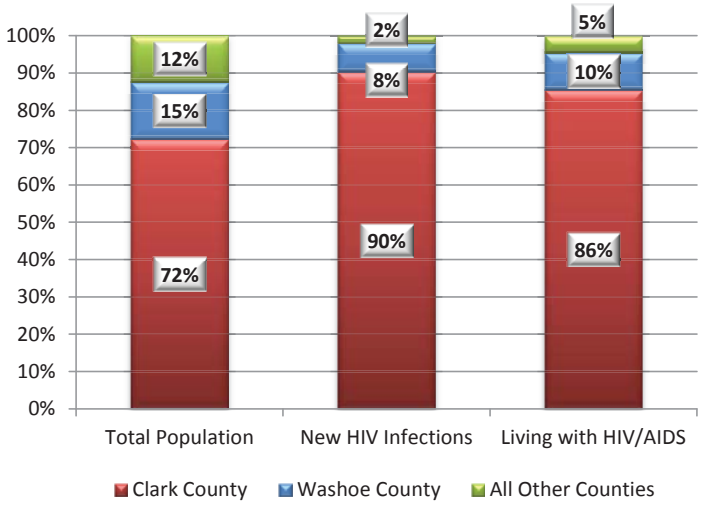
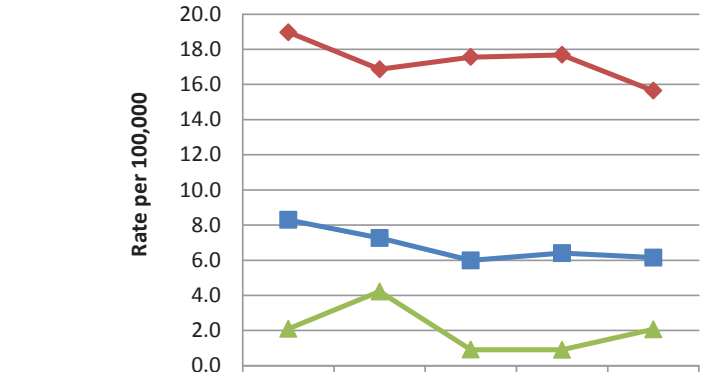


Figure 2: At the end of 2012, there were 2,750,335 persons living in Nevada. Nevada's population was concentrated in Clark County, with the next most populous county being Washoe County. The remaining counties in the state will be grouped together and referred to as *all other counties.* In 2012, 12% 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 2012, 90% of new HIV infections and 86% of persons living with HIV/AIDS were in Clark County, although only 72% of the total state population resided in Clark County.

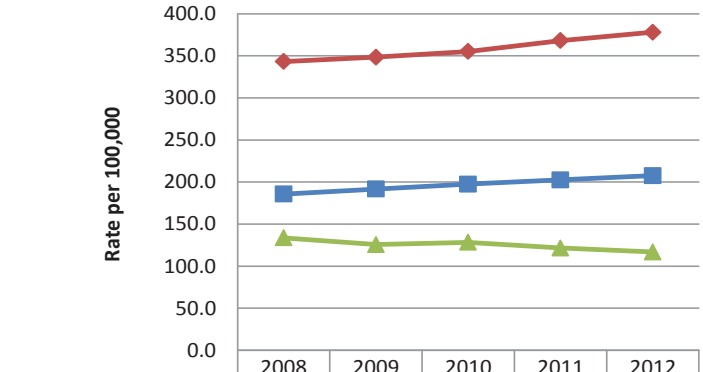
Figure 3| *Annual Rate of New HIV Infections in Nevada by County, 2008—2012*



	2008	2009	2010	2011	2012
Clark County	19.0	16.9	17.6	17.7	15.6
Washoe County	8.3	7.3	6.0	6.4	6.1
All Other Counties	2.1	4.2	0.9	0.9	2.1

Figure 3: In 2012, the rate of new infections in Clark County (15.6 per 100,000 population) was 2.6 times greater than that of Washoe County (6.1 per 100,000 population) and 7.4 times greater than that of all other counties (2.1 per 100,000 population). From 2008 to 2012, there has been a steady decline in the rate of new infections in Washoe County. From 2009 to 2011, the rate of new infections in Clark County has remained fairly stable but dropped to 15.6 per 100,000 population in 2012. This drop in 2012 was most likely due to the unexpected closure of the Southern Nevada Health District main building in April 2012 and disruption in testing services.

Figure 4| *Annual Rate of Persons Living with HIV/AIDS in Nevada by County, 2008—2012*



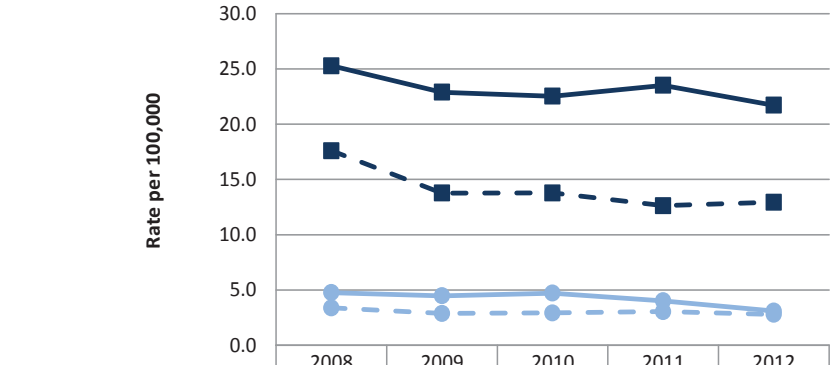
	2008	2009	2010	2011	2012
Clark County	343.3	348.5	355.3	368.2	378.1
Washoe County	185.7	191.6	197.4	202.6	207.6
All Other Counties	133.7	125.7	128.3	121.5	116.9

Figure 4: Clark County has the highest rate of people living with HIV/AIDS, and in 2012 the rate in Clark County (378.1 per 100,000 population) was 1.8 times higher than the rate in Washoe County (207.6 per 100,000 population) and 3.2 times higher than the rate in all other counties (116.9 per 100,000 population). From 2008 to 2012, in Clark and Washoe Counties the rate of persons living with HIV/AIDS has 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 elsewhere 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, 2008– 2012*

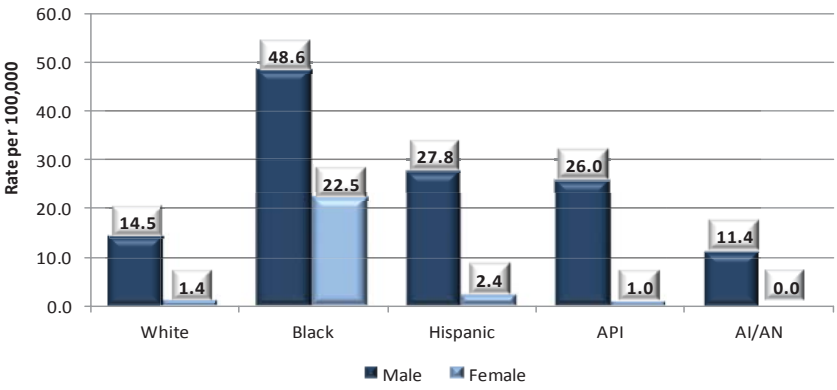


	2008	2009	2010	2011	2012
Male HIV Infection	25.3	22.9	22.5	23.5	21.7
Male AIDS Diagnoses	17.6	13.8	13.8	12.6	12.9
Female HIV Infection	4.8	4.5	4.7	4.0	3.1
Female AIDS Diagnoses	3.4	2.9	2.9	3.1	2.8

Figure 5: In 2012, the rate of new HIV infections among men (21.7 per 100,000 population) was 7 times that of women (3.1 per 100,000 population). Since 2008, the rate of new infections among males and females has decreased.

The rate of new AIDS diagnoses among men is also significantly higher than that of women (12.9 vs. 2.8 per 100,000 population). The rate of new AIDS diagnoses among males and females has decreased over the last five years.

Figure 6| *Annual Rate of New HIV Infections in Nevada by Sex and Race/Ethnicity, 2012**



**There were 7 persons who identified as multi-racial in 2012. Data for these persons were not included in this figure.*

Figure 6: In 2012, rates of new HIV infections were highest among Blacks. The rate of new HIV infections among Black males (48.6 per 100,000 population) was 3.4 times higher than that of White males (14.5 per 100,000 population), and the rate of new HIV infections among Black females (22.5 per 100,000 population) was 16.1 times higher than that of White females (1.4 per 100,000 population). Hispanic and Asian/Hawaiian/Pacific Islander (API) males also experienced disparately high rates of new HIV infection (27.8 and 26.0 per 100,000 population respectively).

Figure 7| *Annual Rate of New HIV Infections in Nevada by Sex and Age, 2012*

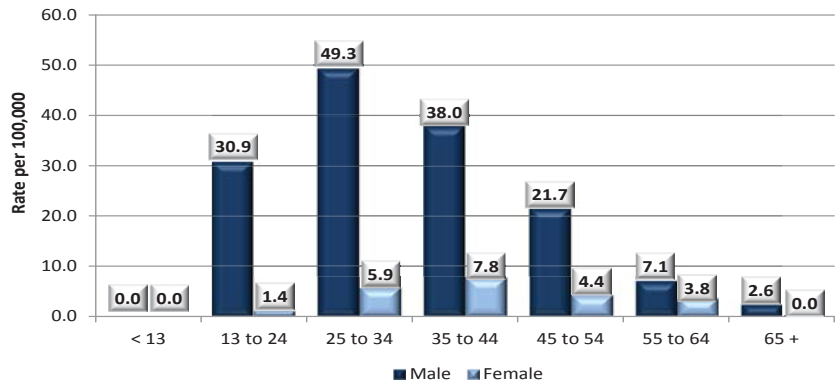


Figure 7: In 2012, among men, the highest rates of new HIV infections were among persons 25 to 34 years old (49.3 per 100,000 population), 35 to 44 years old (38.0 per 100,000 population), and 13 to 24 years old (30.9 per 100,000 population).

Among women, rates of new HIV infections were highest among persons 35 to 44 years old (7.8 per 100,000 population), 25 to 34 years old (5.9 per 100,000 population), and 45 to 54 years old (4.4 per 100,000 population).

Table 2| *New HIV Infections in Nevada by Sex and Transmission Category, 2008-2012*

Transmission Category	2008		2009		2010		2011		2012	
	N	%	N	%	N	%	N	%	N	%
Males										
MSM	270	80%	265	85%	259	84%	270	83%	241	80%
IDU	27	8%	15	5%	15	5%	13	4%	5	2%
MSM+IDU	18	5%	17	5%	17	6%	17	5%	16	5%
Heterosexual contact	18	5%	7	2%	5	2%	10	3%	6	2%
Perinatal exposure	0	0%	0	0%	0	0%	1	0%	0	0%
Transfusion/Hemophilia	1	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	5	1%	7	2%	13	4%	13	4%	34	11%
Subtotal	**339**	**100%**	**311**	**100%**	**309**	**100%**	**324**	**100%**	**302**	**100%**
Females										
IDU	5	8%	6	10%	4	6%	5	9%	4	7%
Heterosexual contact	54	87%	51	86%	50	79%	29	54%	11	26%
Perinatal exposure	0	0%	0	0%	1	2%	2	4%	0	0%
Transfusion/Hemophilia	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	3	5%	2	3%	8	13%	18	33%	27	64%
Subtotal	**62**	**100%**	**59**	**100%**	**63**	**100%**	**54**	**100%**	**42**	**100%**
Total	**401**	**100%**	**370**	**100%**	**372**	**100%**	**378**	**100%**	**344**	**100%**

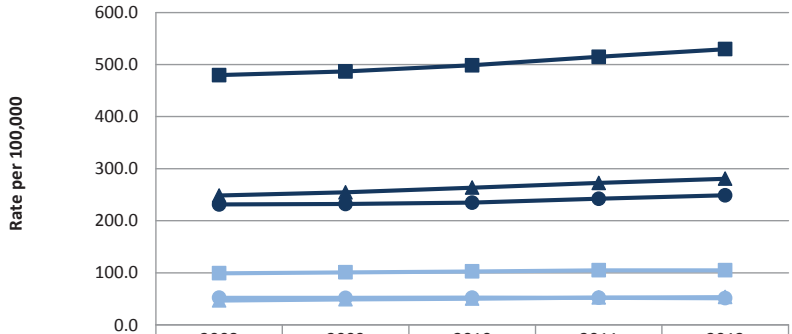
Table 2: From 2008 to 2012, male-to-male sexual contact (MSM) has been the transmission category for 80% of more of new HIV infections among males. Over the past five years, the percentage of newly infected males with a transmission category of MSM and combined MSM and IDU has remained relatively stable. During this same time period, the percentage of males with a transmission category of injection drug use (IDU) has decreased from 8% to 2% .

Among females, heterosexual contact has been the most common transmission category. Although the percentage of females with this risk has decreased from 2008 to 2012, 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 as no identified risk/ no risk reported (NIR/NRR).

Since 2008, 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

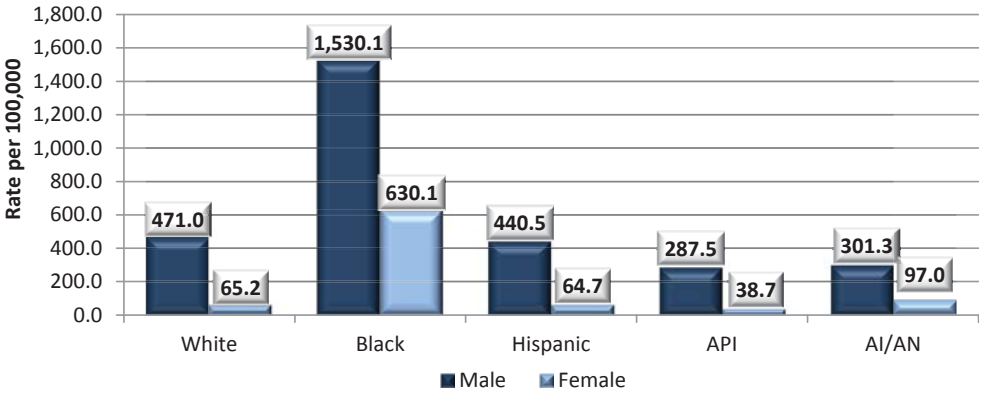
Figure 8| *Annual Rate of Persons Living with HIV/AIDS, HIV (not AIDS), and AIDS in Nevada by Sex, 2008– 2012*



	2008	2009	2010	2011	2012
Males living with HIV/AIDS	479.7	486.8	498.6	514.9	529.6
Males living with HIV (not AIDS)	231.3	232.1	234.9	242.3	248.9
Males living with AIDS	248.4	254.7	263.7	272.6	280.7
Female living with HIV/AIDS	99.1	101.0	102.7	104.9	104.9
Females living with HIV (not AIDS)	52.1	51.9	52.3	52.2	51.3
Females living with AIDS	47.0	49.1	50.4	52.7	53.5

Figure 8: For both males and females, the rate of persons living with HIV/AIDS has steadily increased. In 2012, the rate of males living with HIV/AIDS (529.6 per 100,000) was 5.0 times that of females (104.9 per 100,000). The rate of persons living with AIDS has also been increasing for both males and females. In 2012, the rate of males living with AIDS (280.7 per 100,000) was 5.2 times that of females (53.5 per 100,000).

Figure 9| *Annual Rate of Persons Living with HIV/AIDS in Nevada by Sex and Race/Ethnicity, 2012**



**There were 80 persons living with HIV/AIDS at the end of 2012 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 3.2 times that of White males (1,530.1 vs. 471.0 per 100,000 population), and the rate among Black females was nearly 10 times that of White females (630.1 vs. 65.2 per 100,000 population).

The rate of persons living with HIV/AIDS was lowest among API. API males had a rate of 287.5 per 100,000 population, and API females had a rate of 38.7 per 100,000 population.

Figure 10| *Annual Rate of Persons Living with HIV/AIDS in Nevada by Sex and Age, 2012*

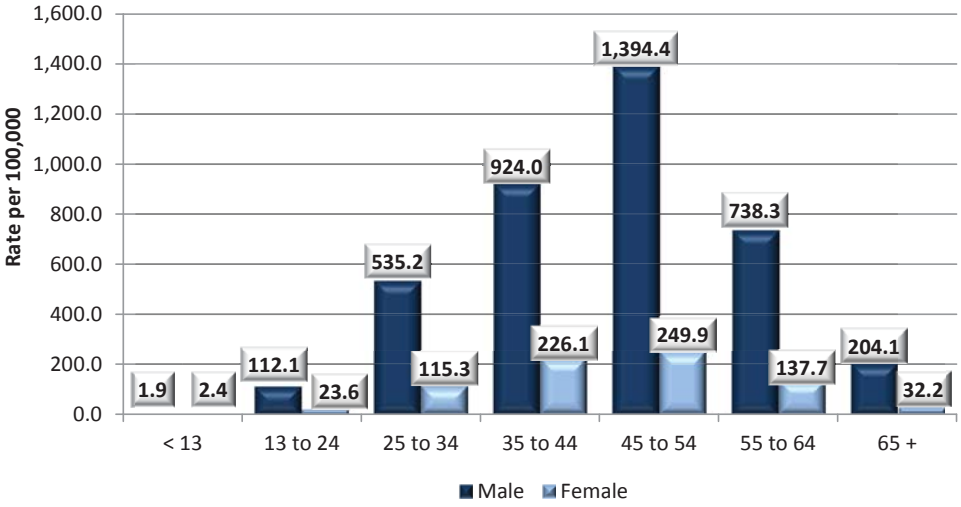


Figure 10: Among males, 45 to 54 year olds followed by 35 to 44 year olds had the highest rates of persons living with HIV/AIDS in Nevada (1,394.4 and 924.0 per 100,000 population respectively).

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 (249.9 per 100,000) followed by females 35 to 44 years old (226.1 per 100,000).

Table 3| *Persons Living with HIV/AIDS in Nevada by Sex and Transmission Category, 2008-2012*

Transmission Category	2008		2009		2010		2011		2012	
	N	%	N	%	N	%	N	%	N	%
Males										
MSM	4,649	72%	4,879	74%	5,092	74%	5,324	75%	5,555	75%
IDU	515	8%	489	7%	499	7%	498	7%	497	7%
MSM+IDU	496	8%	507	8%	510	7%	529	7%	548	7%
Heterosexual contact	247	4%	246	4%	255	4%	261	4%	264	4%
Perinatal exposure	29	0%	27	0%	26	0%	30	0%	33	0%
Transfusion/Hemophilia	9	0%	7	0%	7	0%	7	0%	7	0%
NIR/NRR	489	8%	458	7%	450	7%	445	6%	462	6%
Subtotal	**6,434**	**100%**	**6,613**	**100%**	**6,839**	**100%**	**7,094**	**100%**	**7,366**	**100%**
Females										
IDU	259	20%	259	19%	255	19%	252	18%	251	18%
Heterosexual contact	742	58%	799	60%	839	61%	867	61%	863	61%
Perinatal exposure	27	2%	26	2%	31	2%	33	2%	33	2%
Transfusion/Hemophilia	5	0%	4	0%	4	0%	4	0%	4	0%
NIR/NRR	256	20%	245	18%	242	18%	254	18%	275	19%
Subtotal	**1,289**	**100%**	**1,333**	**100%**	**1,371**	**100%**	**1,410**	**100%**	**1,426**	**100%**
Total	**7,723**	**100%**	**7,946**	**100%**	**8,210**	**100%**	**8,504**	**100%**	**8,792**	**100%**

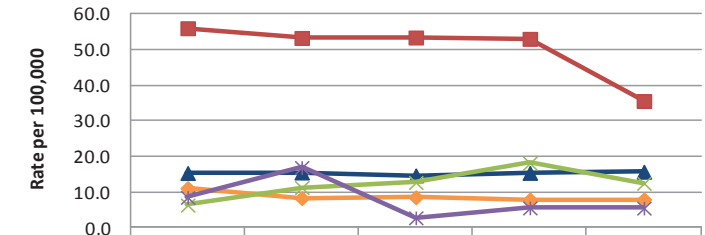
Table 3: In 2012, 75% of males living with HIV/AIDS had a transmission category of MSM. Since 2008, this has been the transmission category for 72% or more of males. In 2012, 7% of males living with HIV/AIDS had a transmission category of IDU, and another 7% of males had a transmission category of combined MSM and IDU. The percentage of cases with a transmission category of IDU or combined MSM and IDU has remained relatively stable since 2008.

From 2008 to 2012, heterosexual contact has been the most common transmission category for females living with HIV/AIDS, accounting for over half of all cases. In 2012, 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

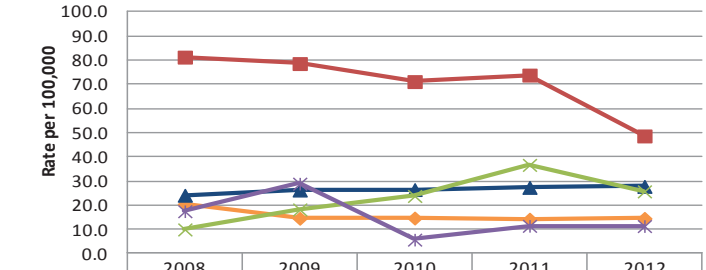
Figure 11| *Annual Rate of New HIV Infections in Nevada by Race/Ethnicity, 2008– 2012**



	2008	2009	2010	2011	2012
White	11.1	8.3	8.6	8.0	8.0
Black	56.0	53.3	53.4	53.1	35.6
Hispanic	15.4	15.5	14.7	15.4	15.7
API	6.4	11.3	12.7	18.2	12.5
AI/AN	8.5	16.9	2.8	5.6	5.5

**The number of persons who identified as multi-racial was 5 in 2008; 5 in 2009; 6 in 2010; 4 in 2011; and 7 in 2012. Data for these persons were not included in this figure.*

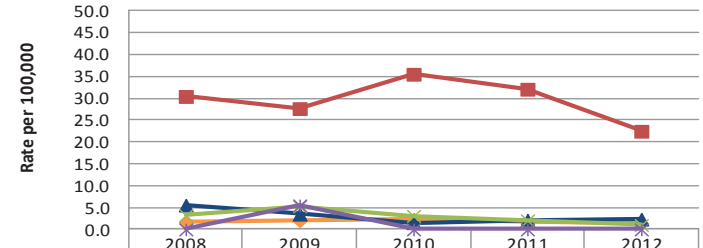
Figure 12| *Annual Rate of New HIV Infections among Males in Nevada by Race/Ethnicity, 2008– 2012**



	2008	2009	2010	2011	2012
White	20.5	14.6	14.7	14.2	14.5
Black	81.2	78.6	71.1	73.8	48.6
Hispanic	24.1	26.3	26.5	27.4	27.8
API	10.0	18.2	23.8	36.7	25.7
AI/AN	17.5	28.9	5.8	11.5	11.4

**The number of males who identified as multi-racial was 4 in 2008; 5 in 2009; 4 in 2010; 3 in 2011; and 7 in 2012. 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, 2008—2012**



	2008	2009	2010	2011	2012
White	1.6	2.0	2.4	1.6	1.4
Black	30.4	27.7	35.5	32.1	22.5
Hispanic	5.6	3.5	1.5	2.1	2.4
API	3.2	5.3	3.1	2.1	1.0
AI/AN	0.0	5.5	0.0	0.0	0.0

**The number of females who identified as multi-racial was 1 in 2008; 0 in 2009; 2 in 2010; 1 in 2011; and 0 in 2012. Data for these persons were not included in this figure.*

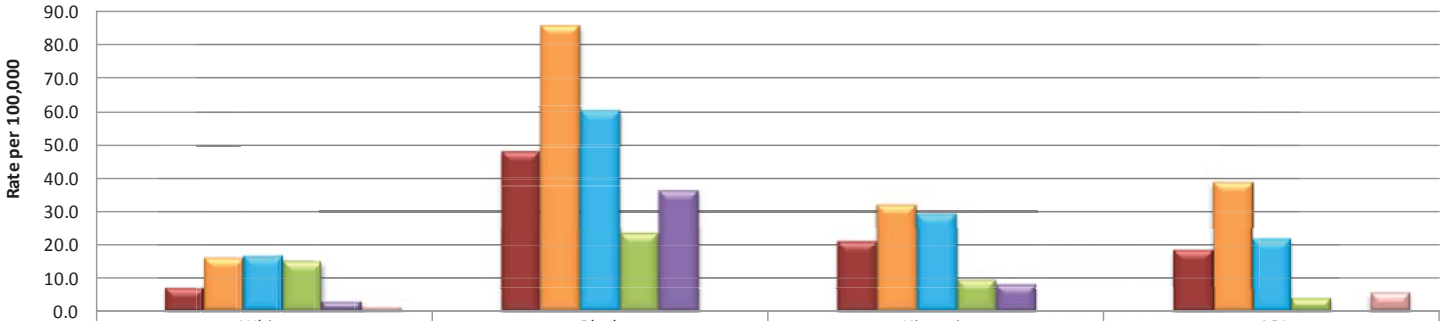
Figure 11: Large racial/ethnic disparities exist in Nevada. In 2012, the highest rate of new HIV infections was among Blacks (35.6 per 100,000 population) and was 4.5 times higher than the rate among Whites (8.0 per 100,000 population). The second highest rate was among Hispanics (15.7 per 100,000 population) followed by APIs (12.5 per 100,000 population).

From 2008 to 2012, the rate of new HIV infections increased among APIs, while the rate among Blacks and Whites decreased. However, the rate among Blacks dropped suddenly in 2012, which may have been caused by the unexpected disruption in Southern Nevada Health District's testing services in 2012. 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 (48.6 per 100,000 population) and Hispanics (27.8 per 100,000). From 2008 to 2012, API males experienced a large increase in their rate of new infections, from 10.0 to 25.7 per 100,000 population. During this same time period, there was a substantial decrease in the rate of new infections among Black and White males, while the rate among Hispanic males remained relatively stable. As discussed previously, the rate among Blacks decreased suddenly in 2012, and this decline may be due to disruptions in testing services. Due to the small number of new infections, the rate among AI/AN has been unstable over the past five years.

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 2012, the rate among Black females (22.5 per 100,000 population) was 16 times higher than that of White females (1.4 per 100,00 population). The rate among Black women decreased greatly in 2012, but this decrease was may be due to unexpected disruptions in testing services. During this same time period, the rates among Hispanic and White females have also decreased, while rates among API and AI/AN females fluctuated greatly due to the small number of new infections in these populations.

Figure 14| *Rates of New HIV Infections by Age at Diagnosis and Race/Ethnicity, 2012**



	White	Black	Hispanic	API
<13	0.0	0.0	0.0	0.0
13 to 24	7.1	47.7	20.9	18.3
25 to 34	16.0	85.7	32.2	38.8
35 to 44	16.4	60.2	29.1	21.4
45 to 54	14.6	23.1	9.5	3.8
55 to 64	3.0	36.3	7.9	0.0
65+	1.1	0.0	0.0	5.3

**Data for persons who identified as multi-racial and AI/AN were not included in this figure. AI/AN were not included due to the small number of new infections in this population.*

Figure 14: Among Whites, the highest rates of new infections were among 35 to 44 year olds (16.4 per 100,000 population) and 25 to 34 year olds (16.0 per 100,000 population). For all other race/ethnicity groups, the highest rate of new infections was among 25 to 34 year olds, followed by 35 to 44 year olds. Overall, rates among older age groups were lower, except for among Blacks aged 55 to 64 years old.

Table 4| *New HIV Infections in Nevada by Race/Ethnicity and Transmission Category, 2012*

Transmission Category	White		Black		Hispanic		API		Multi-Race/Other*	
	n	%	n	%	n	%	n	%	n	%
Males										
MSM	87	74%	35	73%	89	85%	21	95%	9	100%
IDU	4	3%	1	2%	0	0%	0	0%	0	0%
MSM+IDU	12	10%	0	0%	4	4%	0	0%	0	0%
Heterosexual contact	2	2%	4	8%	0	0%	0	0%	0	0%
Perinatal exposure	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	13	11%	8	17%	12	11%	1	5%	0	0%
Subtotal	**118**	**100%**	**48**	**100%**	**105**	**100%**	**22**	**100%**	**9**	**100%**
Females										
IDU	3	27%	1	5%	0	0%	0	0%	0	0%
Heterosexual contact	3	27%	4	18%	3	38%	1	100%	0	0%
Perinatal exposure	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	5	45%	17	77%	5	63%	0	0%	0	0%
Subtotal	**11**	**100%**	**22**	**100%**	**8**	**100%**	**1**	**100%**	**0**	**0%**
Total	**129**	**100%**	**70**	**100%**	**113**	**100%**	**23**	**100%**	**9**	**100%**

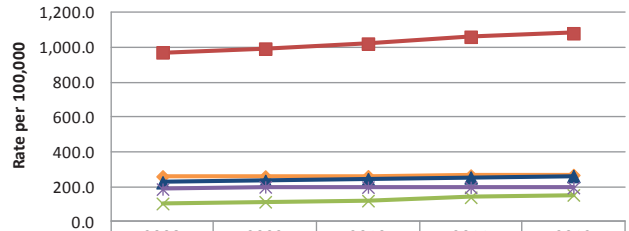
**Multi-race/other includes persons who identified as multi-racial, other race, or AI/AN. These were combined due the small number of new infections in these populations.*

Table 4: For all race/ethnicity 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 Black males (8%).

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

Persons Living with HIV/AIDS

Figure 15| *Annual Rate of Persons Living with HIV/AIDS in Nevada by Race/Ethnicity, 2008– 2012**

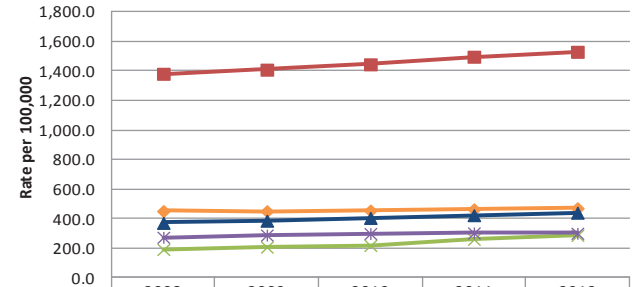


	2008	2009	2010	2011	2012
White	261.1	260.4	261.8	265.8	268.9
Black	972.1	993.8	1,022.5	1,061.6	1,081.8
Hispanic	226.8	235.0	245.3	254.7	262.6
API	105.3	115.2	121.8	140.9	154.5
AI/AN	188.0	200.3	199.2	198.2	196.4

**Data for persons who identified as multi-racial were not included in this figure. The number of persons who identified as multi-racial was 22 in 2008; 31 in 2009; 45 in 2010; 54 in 2011; and 80 in 2012.*

Figure 15: As with new HIV infections, in 2012 the highest rate of persons living with HIV/AIDS was among Blacks (1,081.8 per 100,000 population). The second highest rate was among Whites (268.9 per 100,000 population), followed by Hispanics (262.6 per 100,000 population). From 2008 to 2012, the rate of persons living with HIV/AIDS has increased among all race/ethnicity groups.

Figure 16| *Annual Rate of Males Living with HIV/AIDS in Nevada by Race/Ethnicity, 2008– 2012**

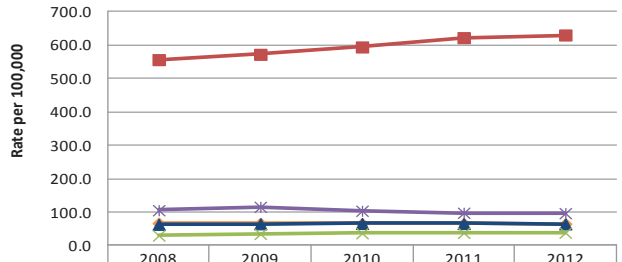


	2008	2009	2010	2011	2012
White	451.7	451.1	455.3	463.6	471.0
Black	1,381.2	1,409.2	1,445.2	1,496.8	1,530.1
Hispanic	371.8	386.4	405.3	423.9	440.5
API	192.0	207.8	219.1	260.8	287.5
AI/AN	274.1	289.2	299.3	303.6	301.3

**Data for males who identified as multi-racial were not included in this figure. The number of males who identified as multi-racial was 18 in 2008; 27 in 2009; 39 in 2010; 47 in 2011; and 72 in 2012.*

Figure 16: Among males, from 2008 to 2012, there were increases in the rate of persons living with HIV/AIDS among all race/ethnicity groups. In 2012, Black males, had the highest rate of persons living with HIV/AIDS (1,530.1 per 100,000 population), while API males had the lowest rate (287.5 per 100,000 population)

Figure 17| *Annual Rate of Females Living with HIV/AIDS in Nevada by Race/Ethnicity, 2008 – 2012**

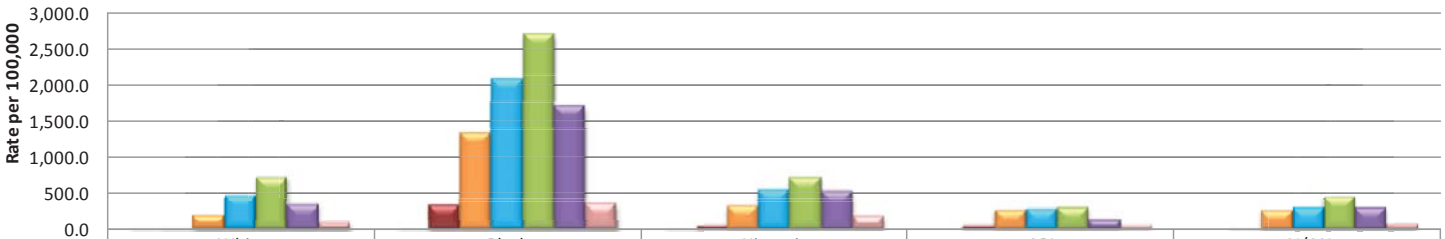


	2008	2009	2010	2011	2012
White	67.2	66.8	65.9	66.0	65.2
Black	556.3	572.2	594.2	622.1	630.1
Hispanic	63.5	65.0	66.1	65.9	64.7
API	30.2	34.8	37.3	38.1	38.7
AI/AN	105.8	115.7	104.0	98.0	97.0

**Data for females who identified as multi-racial were not included in this figure. The number of females who identified as multi-racial was 4 in 2008; 4 in 2009; 6 in 2010; 7 in 2011; and 8 in 2012.*

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 Whites and AI/AN have experienced an increase in the rate of persons living with HIV/AIDS from 2008 to 2012. The rate among Black females is much higher compared to all other race/ethnicity groups, and has increased substantially from 2008 to 2012.

Figure 18| *Rate of Persons Living with HIV/AIDS by Age at End of Year and Race/Ethnicity, 2012**



	White	Black	Hispanic	API	AI/AN
<13	0.9	11.7	2.0	0.0	0.0
13 to 24	30.9	336.5	57.9	58.7	30.8
25 to 34	202.2	1,331.8	330.6	263.6	264.8
35 to 44	470.0	2,086.5	546.9	292.3	298.5
45 to 54	731.1	2,701.7	714.7	298.4	458.5
55 to 64	340.0	1,700.6	526.6	148.3	298.2
65+	93.1	337.2	175.9	47.7	82.3

**Data were not included for multi-racial persons in this figure. There were 80 multi-racial persons living with HIV/AIDS at the end of 2012.*

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 35 to 44 years old and 45 to 54 years old. The lowest rates were among persons less than 13, which may be due to the lack of new infections in this age group (Figure 19).

Table 5| *Persons Living with HIV/AIDS in Nevada by Race/Ethnicity and Transmission Category, 2012*

Transmission Category	White		Black		Hispanic		API		AI/AN		Multi-Race	
	n	%	n	%	n	%	n	%	n	%	n	%
Males												
MSM	2,898	76%	1,022	68%	1,322	79%	222	90%	39	74%	52	72%
IDU	258	7%	156	10%	72	4%	2	1%	5	9%	4	6%
MSM+IDU	358	9%	82	5%	81	5%	12	5%	6	11%	9	13%
Heterosexual contact	78	2%	107	7%	72	4%	4	2%	1	2%	2	3%
Perinatal exposure	10	0%	16	1%	7	0%	0	0%	0	0%	0	0%
Transfusion/Hemophilia	7	0%	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	211	6%	127	8%	111	7%	6	2%	2	4%	5	7%
Subtotal	**3,820**	**100%**	**1,510**	**100%**	**1,665**	**100%**	**246**	**100%**	**53**	**100%**	**72**	**100%**
Females												
IDU	144	27%	78	13%	22	10%	2	5%	4	22%	1	13%
Heterosexual contact	277	53%	386	63%	153	70%	31	82%	10	56%	6	75%
Perinatal exposure	9	2%	19	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	18%	134	22%	40	18%	4	11%	4	22%	1	13%
Subtotal	**525**	**100%**	**617**	**100%**	**220**	**100%**	**38**	**100%**	**18**	**100%**	**8**	**100%**
Total	**4,345**	**100%**	**2,127**	**100%**	**1,885**	**100%**	**284**	**100%**	**71**	**100%**	**80**	**100%**

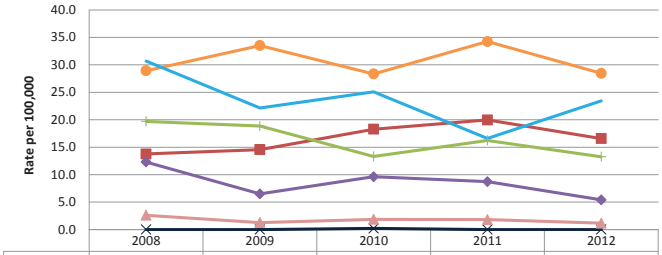
Table 5: For all race/ethnicity groups, MSM was the most common transmission category among males living with HIV/AIDS. However, this percentage was lower among Black (68%), AI/AN (74%), and multi-racial (72%) males. Black and AI/ANs had the highest percentage of males with a transmission category of IDU (10% and 9% respectively). The percentage of males with a transmission category of combined MSM and IDU was highest among multi-racial persons (13%) and AI/AN (11%).

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%). (22%).

HIV/AIDS AND AGE

New HIV Infections

Figure 19| *Annual Rate of New HIV Infections in Nevada by Age at Diagnosis, 2008 – 2012*

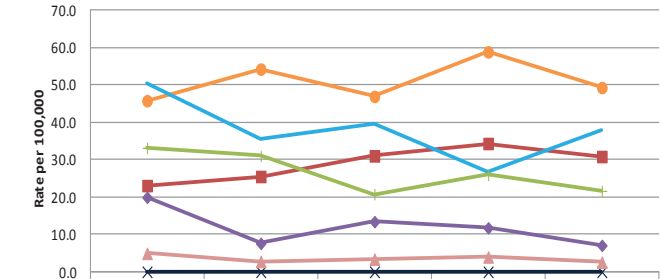


	2008	2009	2010	2011	2012
< 13	0.0	0.0	0.2	0.0	0.0
13 to 24	13.8	14.6	18.3	20.0	16.6
25 to 34	28.9	33.5	28.3	34.2	28.5
35 to 44	30.7	22.2	25.1	16.6	23.4
45 to 54	19.7	18.9	13.3	16.2	13.3
55 to 64	12.3	6.5	9.6	8.7	5.4
65 +	2.6	1.3	1.9	1.8	1.2

Figure 19: From 2008 to 2012, 13 to 24 year olds had the greatest increase in rate of new infections. The rate among 25 to 34 year olds remained relatively stable, while the rate among all other age groups decreased.

From 2011 to 2012, all age groups except for 35 to 44 year olds experienced a decrease in the rate of new infections. This may have been due to the closure of Southern Nevada Health District's main building and disruptions in testing services.

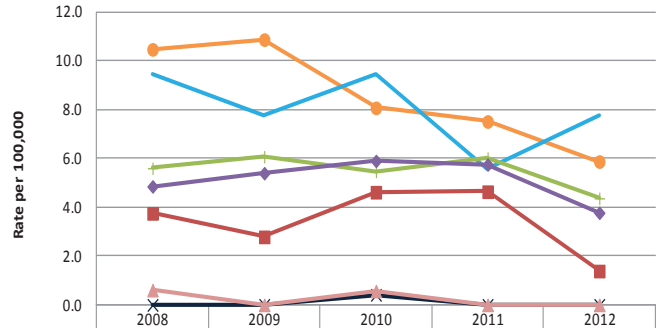
Figure 20| *Annual Rate of New HIV Infections among Males in Nevada by Age at Diagnosis, 2008– 2012*



	2008	2009	2010	2011	2012
< 13	0.0	0.0	0.0	0.0	0.0
13 to 24	23.1	25.5	31.0	34.4	30.9
25 to 34	45.8	54.3	47.0	58.9	49.3
35 to 44	50.3	35.4	39.5	26.8	38.0
45 to 54	33.2	31.0	20.8	25.9	21.7
55 to 64	19.9	7.6	13.4	11.8	7.1
65 +	5.0	2.8	3.4	4.0	2.6

Figure 20: Among males, in 2012, the highest rates of new HIV infection were among persons 25 to 34 years old (49.3 per 100,000 population), followed by persons 35 to 44 years old (38.0 per 100,000 population). From 2008 to 2012, HIV infection rates increased among 13 to 24 year olds and 25 to 34 year olds. All other age groups have experienced a stable decline in the rate of new infections. 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| *Annual Rate of New HIV Infections among Females in Nevada by Age at Diagnosis, 2008 – 2012*



	2008	2009	2010	2011	2012
< 13	0.0	0.0	0.4	0.0	0.0
13 to 24	3.7	2.8	4.6	4.6	1.4
25 to 34	10.5	10.9	8.1	7.5	5.9
35 to 44	9.5	7.8	9.5	5.6	7.8
45 to 54	5.6	6.1	5.5	6.0	4.4
55 to 64	4.9	5.4	5.9	5.7	3.8
65 +	0.6	0.0	0.6	0.0	0.0

Figure 21: In 2012, 35 to 44 year old females had the highest rate of new infections in 2012 (7.8 per 100,000 population), followed by 25 to 34 year olds (5.9 per 100,000 population). From 2008 to 2012, there has been a steady decline in the rate of new HIV infections among 25 to 34 year old females. The rate among other age groups has fluctuated over this time period, which is most likely due to the small number of new infections within each age group.

Table 6| *New HIV Infections by Age at Diagnosis and Transmission Category, 2012*

Transmission Category	13 to 24		25 to 34		35 to 44		45 to 54		55 to 64		65+	
	n	%	n	%	n	%	n	%	n	%	n	%
Males												
MSM	62	87%	83	83%	56	76%	30	71%	6	55%	4	100%
IDU	0	0%	2	2%	3	4%	0	0%	0	0%	0	0%
MSM+IDU	4	6%	7	7%	2	3%	2	5%	0	0%	0	0%
Heterosexual contact	2	3%	1	1%	2	3%	1	2%	1	9%	0	0%
Perinatal exposure	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	3	4%	7	7%	11	15%	9	21%	4	36%	0	0%
Subtotal	**71**	**100%**	**100**	**100%**	**74**	**100%**	**42**	**100%**	**11**	**100%**	**4**	**100%**
Females												
IDU	0	0%	2	18%	0	0%	2	25%	0	0%	0	0%
Heterosexual contact	1	33%	2	18%	6	43%	1	13%	1	17%	0	0%
Perinatal exposure	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
NIR/NRR	2	67%	7	64%	8	57%	5	63%	5	83%	0	0%
Subtotal	**3**	**100%**	**11**	**100%**	**14**	**100%**	**8**	**100%**	**6**	**100%**	**0**	**0%**
Total	**74**	**100%**	**111**	**100%**	**88**	**100%**	**50**	**100%**	**17**	**100%**	**4**	**100%**

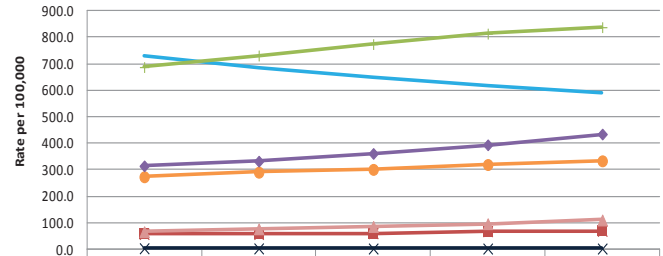
Table 6: For both males and females, there were very few differences in transmission categories across age groups.

Among males, 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 (55%). The percentage of males with a transmission category of IDU was highest among males 35 to 44 years old (4%), 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 13 to 24 years old (6%).

Among females, the majority of women had a transmission category of NIR/NRR. This combined with the small number of new HIV infections within each age group makes it difficult to draw conclusions about transmission category across age.

Persons Living with HIV/AIDS

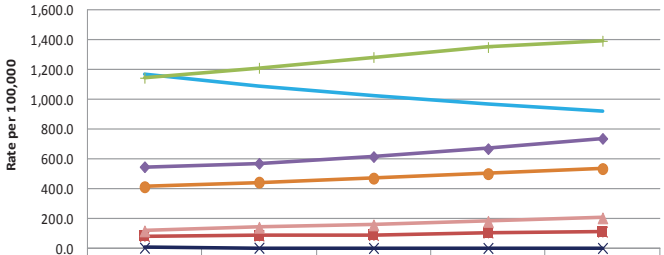
Figure 22| *Annual Rate of Persons Living with HIV/AIDS by Age at End of Year, 2008-2012**



	2008	2009	2010	2011	2012
< 13	3.3	2.6	2.2	2.2	2.2
13 to 24	57.3	57.3	60.2	67.8	69.2
25 to 34	273.3	290.5	301.2	319.5	333.6
35 to 44	731.9	685.1	647.9	615.4	588.4
45 to 54	687.7	731.4	774.4	814.0	838.3
55 to 64	314.5	332.2	361.4	394.0	434.6
65 +	65.8	76.7	85.6	96.1	110.1

**The number of persons missing age at end of year was 62 in 2008, 61 in 2009, 59 in 2010, 58 in 2011, and 58 in 2012.*

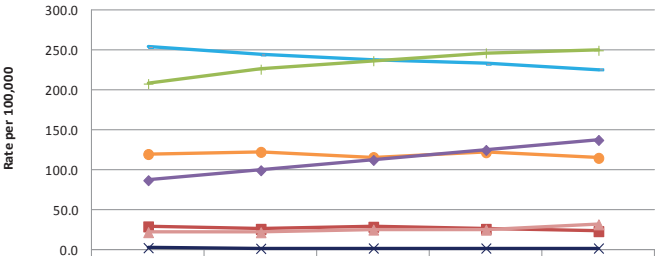
Figure 23| *Annual Rate of Males Living with HIV/AIDS by Age at End of Year, 2008– 2012**



	2008	2009	2010	2011	2012
< 13	3.6	3.2	2.0	2.0	1.9
13 to 24	83.2	86.1	89.2	106.5	112.1
25 to 34	413.3	444.1	471.1	501.3	535.2
35 to 44	1,172.8	1,091.3	1,026.0	968.8	924.0
45 to 54	1,146.1	1,212.8	1,285.2	1,352.2	1,394.4
55 to 64	547.9	570.8	616.2	669.2	738.3
65 +	116.8	141.1	157.1	180.7	204.1

**The number of males missing age at end of year was 53 in 2008, 52 in 2009, 51 in 2010, 50 in 2011, and 50 in 2012.*

Figure 24| *Annual Rate of Females Living with HIV/AIDS by Age at End of Year, 2008– 2012**



	2008	2009	2010	2011	2012
< 13	2.9	2.1	2.5	2.5	2.4
13 to 24	29.5	26.5	29.1	26.4	23.6
25 to 34	120.1	122.8	116.2	122.4	115.3
35 to 44	254.1	244.7	238.0	233.1	226.1
45 to 54	208.2	226.3	236.8	246.6	249.9
55 to 64	87.4	99.8	112.7	125.2	137.7
65 +	22.4	22.2	25.6	25.5	32.2

**The number of females missing age at end of year was 9 in 2008, 9 in 2009, 8 in 2010, 8 in 2011, and 8 in 2012.*

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 2008 to 2012, 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 their large decreases in 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 and "aging" into these older age groups.

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 2012, the highest rates of persons living with HIV/AIDS were among males 45 to 54 years old (1,394.4 per 100,000 population) followed by males 35 to 44 years old (924.0 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 in 2012 were among persons 45 to 54 years old (249.9 per 100,000 population) and persons 35 to 44 years old (226.1 per 100,000 population).

Table 7| *Persons Living with HIV/AIDS by Age at End of Year and Transmission Category, 2012*

Transmission Category	<13		13 to 24		25 to 34		35 to 44		45 to 54		55 to 64		65+	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Males														
MSM	0	0%	207	80%	906	84%	1,420	79%	1,980	73%	771	67%	235	74%
IDU	0	0%	1	0%	18	2%	82	5%	225	8%	145	13%	23	7%
MSM+IDU	0	0%	12	5%	76	7%	129	7%	227	8%	91	8%	12	4%
Heterosexual contact	0	0%	4	2%	31	3%	62	3%	108	4%	46	4%	13	4%
Perinatal exposure	5	100%	26	10%	2	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	0	0%	8	3%	52	5%	106	6%	161	6%	93	8%	32	10%
Subtotal	**5**	**100%**	**258**	**100%**	**1,085**	**100%**	**1,800**	**100%**	**2,704**	**100%**	**1,148**	**100%**	**316**	**100%**
Females														
IDU	0	0%	1	2%	18	8%	59	14%	107	23%	57	26%	6	10%
Heterosexual contact	0	0%	18	35%	136	63%	270	66%	264	58%	128	58%	46	77%
Perinatal exposure	5	83%	25	49%	3	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	14%	58	27%	79	19%	84	18%	34	16%	8	13%
Subtotal	**6**	**100%**	**51**	**100%**	**216**	**100%**	**408**	**100%**	**458**	**100%**	**219**	**100%**	**60**	**100%**
Total	**11**	**100%**	**309**	**200%**	**1,301**	**300%**	**2,208**	**400%**	**3,162**	**500%**	**1,367**	**100%**	**376**	**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 (8%) and 55 to 64 year olds (8%).

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 (26%) and 45 to 54 years old (23%).

EXPANDED BEHAVIORAL RISKS

The majority of persons newly diagnosed with HIV in Nevada are interviewed by health department staff after their initial diagnosis. At this time, detailed information on their risk behaviors and the risk behaviors of their partners is collected. Typically individuals engage in a wide range of risk behaviors, but not all of these behaviors are conveyed in the standard risk categories used in surveillance reports.

Generally, Nevada and CDC HIV surveillance reports use the *transmission category* variable to display information on risk behaviors. This variable is calculated using a hierarchy to select the risk factor that was most likely to cause HIV transmission. The hierarchy is as follows:

1. Perinatal exposure
2. Transfusion/hemophilia
3. Male-to-male sexual contact (MSM)
4. Injection drug use (IDU)
5. MSM+IDU
6. Heterosexual contact with documented risk factor/HIV infection of partner
7. No identified risk/No risk reported (NIR/NRR)
    - Includes persons who report heterosexual contact with no documented risk factor/HIV infection of their partner(s).
    - Includes persons who reported no risks, most likely because they could not be interviewed.

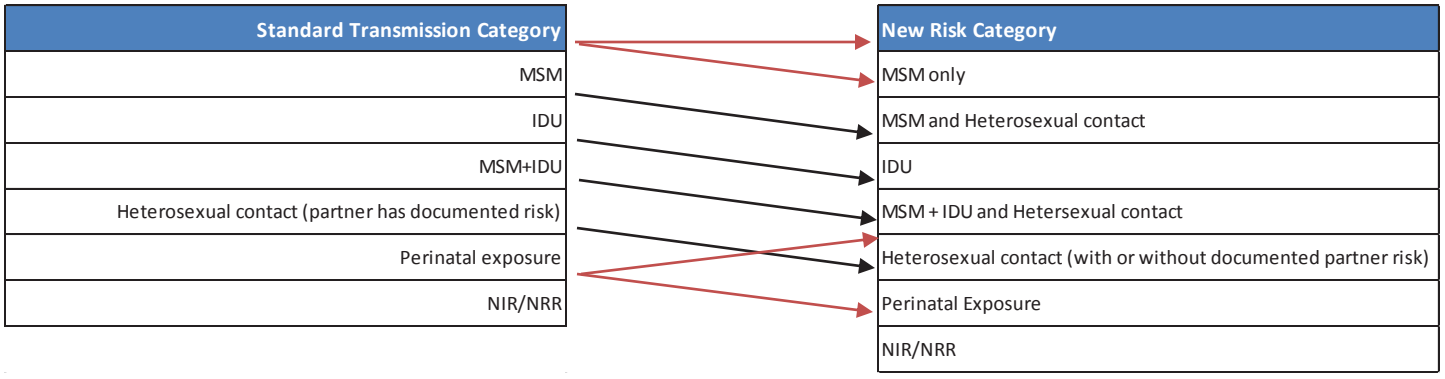
For individuals who report multiple risks, only their most likely mode of transmission is assigned as their transmission category. For example, men who report sexual contact with men as well as with women are only counted in the MSM category and not the heterosexual contact category.

In addition, this variable does not display all of the information available on heterosexual risk. In order to confirm heterosexual contact as the primary exposure mode, it must be confirmed that the case's partner is HIV-positive or engages in other high risk behaviors such as IDU and MSM. Persons who report heterosexual contact only and whose partners have no documented risk or HIV infection are considered to have no identified risk and are included in the "no identified risk" (NIR) category. Furthermore, the transmission category variable does not display the risk behaviors of the partners of heterosexual cases.

In light of these limitations, this section uses a new risk variable to better display the multiple risks persons engage in, as well as provide more information on heterosexual contact. This new variable provides information on men who engage in sex with both men and women and also groups heterosexual contact cases together, regardless of whether there is documented HIV infection/risk for their partner(s).

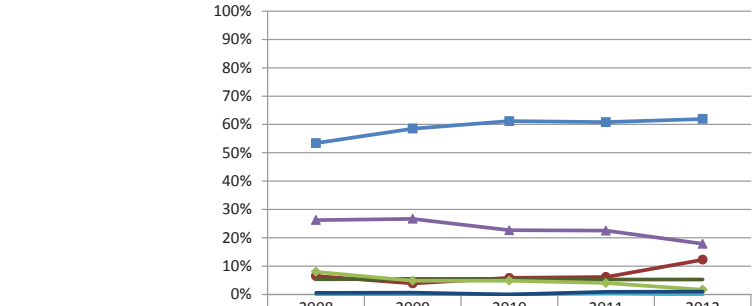
Figure 25 below shows the standard transmission category to the left, the new risk variable to the right, and how they correspond to each other. Black arrows indicate where categories directly correspond between the two variables, and red arrows indicate where a category corresponds to a new category or more than one category.

Figure 25| *Standard Transmission Category vs. New Risk Category*



Males Newly Diagnosed with HIV Infection

Figure 26| *Reported Risks of Males Newly Diagnosed with HIV, Percent of New HIV Infections, 2008 —2012*



	2008	2009	2010	2011	2012
MSM only	53%	59%	61%	61%	62%
MSM and heterosexual contact	26%	27%	23%	23%	18%
Heterosexual contact	6%	4%	6%	6%	12%
MSM + IDU	5%	5%	6%	5%	5%
IDU	8%	5%	5%	4%	2%
Perinatal exposure	0%	0%	0%	0%	0%
No risks reported	1%	1%	0%	1%	1%

Figure 26: From 2008 to 2012, the majority of males newly diagnosed with HIV reported a risk of MSM only, and the percentage of cases who reported only a risk of MSM increased from 53% in 2008 to 62% in 2012.

In 2012, 18% of males reported both MSM and heterosexual contact. The percentage of males reporting both of these risk behaviors has decreased from 26% in 2008 to 18% in 2012. Conversely, the percentage of newly diagnosed males reporting only heterosexual contact has increased from 6% in 2008 to 12% in 2012.

Figure 27| *Reported Risks of Males Newly Diagnosed with HIV, Percent of New HIV Infections, 2012*

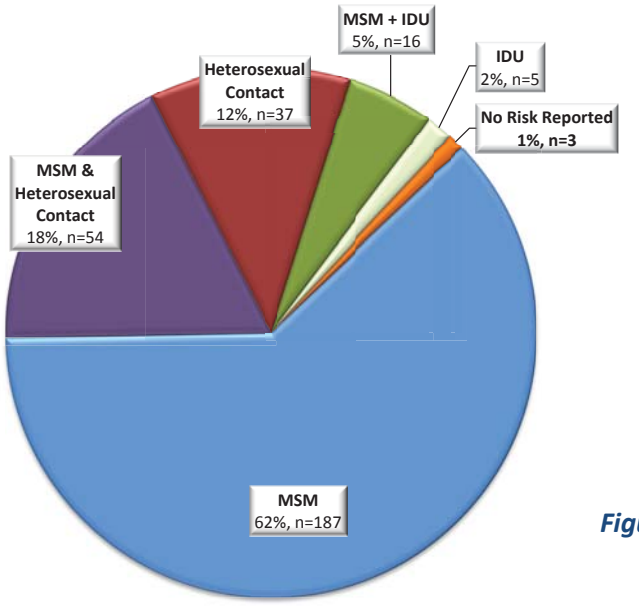


Figure 27: Using the new risk variables, 62% of males reported risk of MSM, 18% of males reported both MSM and heterosexual contact, 12% reported heterosexual contact, 5% reported MSM and IDU, 2% reported IDU, and 1% reported no risk in 2012.

Figure 27a: Of the 37 males who reported a risk of heterosexual contact, the majority (84%) did not have a partner with a documented risk for HIV or HIV infection. Eleven percent had a partner who was HIV positive with no documented risk behaviors, and only 5% had a partner who engaged in IDU.

Figure 27a| *Heterosexual Contact and HIV Status/Risk of Partner*

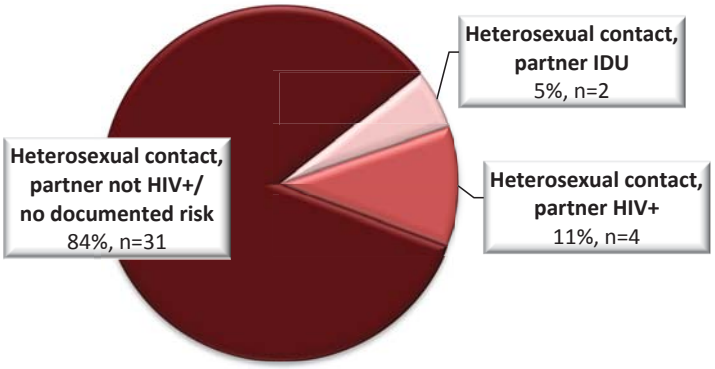
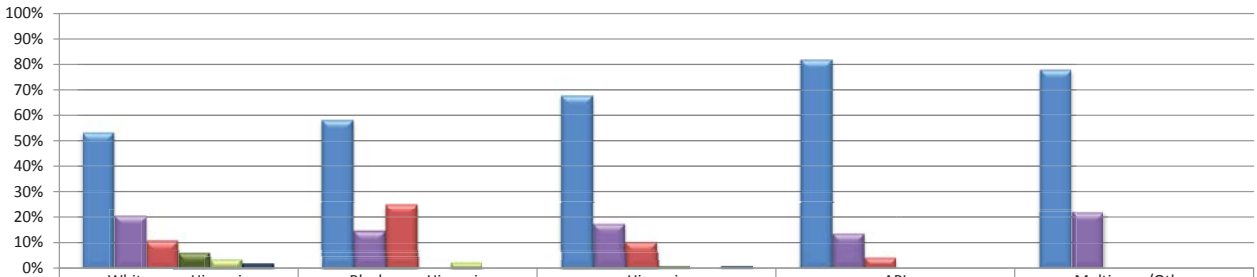


Figure 28| *Reported Risks of Males Newly Diagnosed with HIV by Race/Ethnicity, Percent of New HIV Infections, 2012**

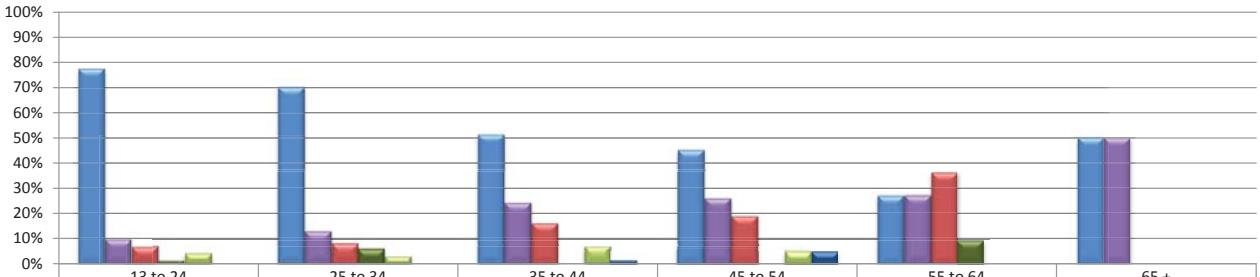


	White, non-Hispanic	Black, non-Hispanic	Hispanic	API	Multi-race/Other
MSM only	53%	58%	68%	82%	78%
MSM and heterosexual contact	20%	15%	17%	14%	22%
Heterosexual Contact	11%	25%	10%	5%	0%
MSM+IDU	6%	0%	1%	0%	0%
IDU	3%	2%	0%	0%	0%
No risks reported	2%	0%	1%	0%	0%

**Data for persons who identified as multi-racial and AI/AN were combined due to the small number of new infections and small size of these populations.*

Figure 28: MSM accounted for the greatest percentage of cases among all race/ethnicity groups, with the highest percentage (82%) among API males. White, non-Hispanic males had the greatest percentage of cases who reported both MSM and heterosexual contact (22%), as well as MSM+IDU (6%) and IDU (3%). Black, non-Hispanic males had the greatest percentage of cases who reported heterosexual contact only (25%).

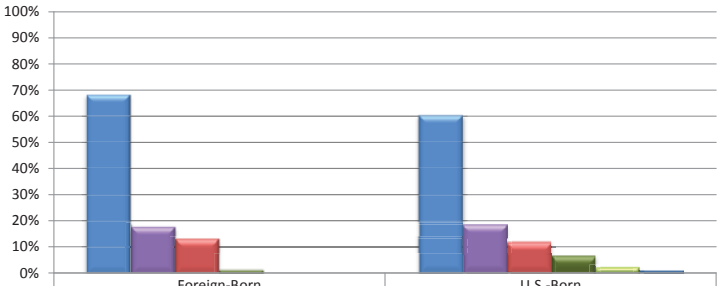
Figure 29| *Reported Risks of Males Newly Diagnosed with HIV by Age at Diagnosis, Percent of New HIV Infections, 2012*



	13 to 24	25 to 34	35 to 44	45 to 54	55 to 64	65 +
MSM only	77%	70%	51%	45%	27%	50%
MSM and heterosexual contact	10%	13%	24%	26%	27%	50%
Heterosexual Contact	7%	8%	16%	19%	36%	0%
MSM+IDU	1%	6%	0%	0%	9%	0%
IDU	4%	3%	7%	5%	0%	0%
No risks reported	0%	0%	1%	5%	0%	0%

Figure 29: A greater percentage of younger males reported only a risk of MSM, whereas a greater percentage of older males reported both MSM and heterosexual contact or heterosexual contact only. IDU and MSM+IDU varied between age groups.

Figure 30| *Reported Risks of Males Newly Diagnosed with HIV by Nativity, Percent of New HIV Infections, 2012**



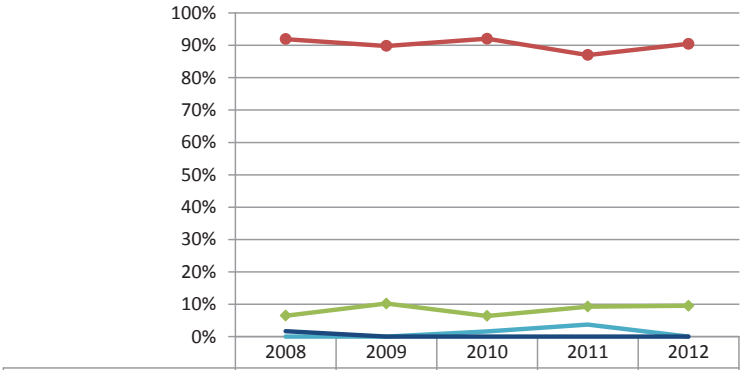
	Foreign-Born	U.S.-Born
MSM only	68%	60%
MSM and heterosexual contact	17%	18%
Heterosexual Contact	13%	12%
MSM+IDU	1%	7%
IDU	0%	2%
No risks reported	0%	1%

**4 persons missing information on nativity were not included in this figure.*

Figure 30: MSM accounted for the greatest percentage of cases among both foreign-born and U.S.-born males. A higher percentage of foreign-born males compared to U.S.-born males reported MSM only (68% vs. 60%); whereas a lower percentage of foreign-born males compared to U.S.-born males reported MSM+IDU (1% vs. 7%) or IDU (0% vs. 2%). The percentage of foreign-born and U.S.-born males who reported MSM and heterosexual contact and heterosexual contact only was almost the same.

Females Newly Diagnosed with HIV Infection

Figure 31| *Reported Risks of Females Newly Diagnosed with HIV, Percent of New HIV Infections, 2008 —2012*

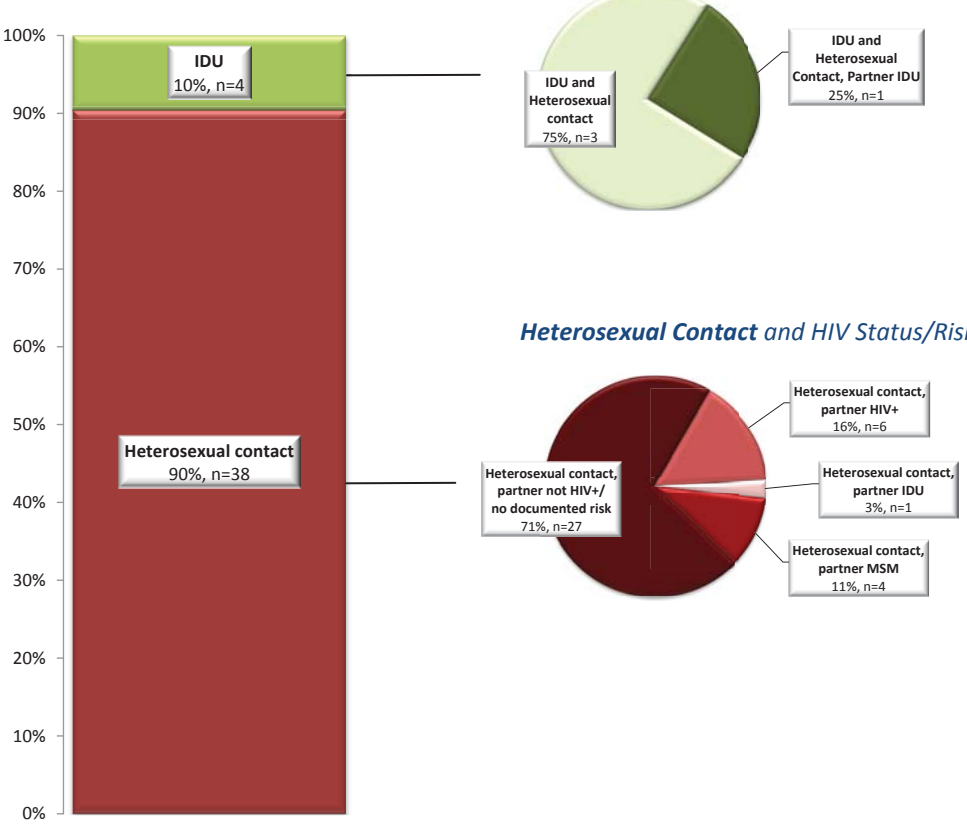


	2008	2009	2010	2011	2012
Heterosexual contact	92%	90%	92%	87%	90%
IDU	6%	10%	6%	9%	10%
Perinatal exposure	0%	0%	2%	4%	0%
no risks reported	2%	0%	0%	0%	0%

Figure 31: From 2008 to 2012, on average 90% of females reported a risk of heterosexual contact. More detailed information on heterosexual risk is not shown in this figure as the methods for collecting the risks and HIV status of partners has changed over time. Changes in the risks and HIV status of partners would reflect changes in data collection practices and not changes in behaviors.

The percentage of females reporting IDU has fluctuated over the past 5 years due to the small number of new cases reporting this risk.

Figure 32| *Reported Risks of Females Newly Diagnosed with HIV, Percent of New HIV Infections, 2012*



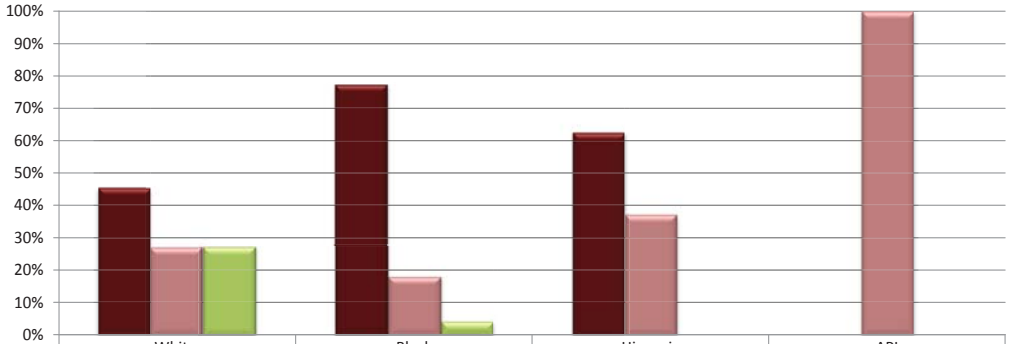
IDU *and Heterosexual Contact*

Of the 4 females who reported IDU, 3 reported both IDU and heterosexual contact and one reported heterosexual contact with a partner who also engaged in IDU.

Heterosexual Contact *and HIV Status/Risk of Partner*

Of the 38 females who reported a risk of heterosexual contact, the majority (71%) did not have a partner with a documented HIV infection or risk for HIV. Sixteen percent had a partner who was HIV positive with no documented risk behaviors, 11% had a partner who reported MSM, and 3% had a partner who reported IDU.

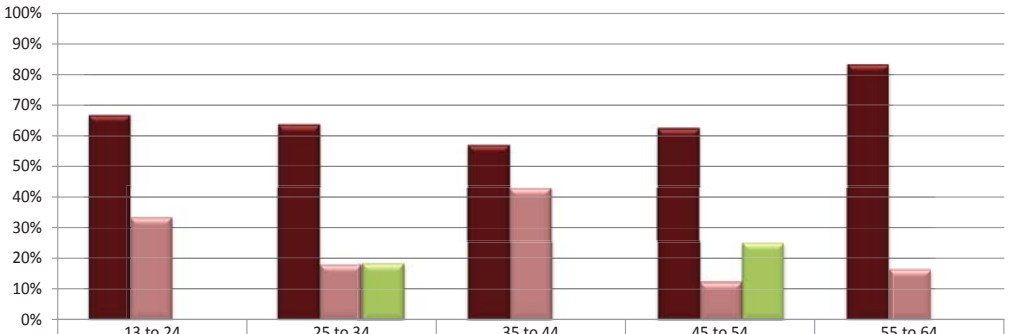
Figure 33| *Reported Risks of Females Newly Diagnosed with HIV by Race/Ethnicity, Percent of New HIV Infections, 2012*



	White	Black	Hispanic	API
Heterosexual contact (no documented HIV infection/risk of partner)	45%	77%	63%	0%
Heterosexual contact (documented HIV infection/risk of partner)	27%	18%	38%	100%
IDU	27%	5%	0%	0%

Figure 33: Across all race/ethnicity groups, the majority of women had a risk of heterosexual contact, with or without documented HIV infection or risk of their partner(s). Black females had the greatest percentage of cases who reported heterosexual contact with no information on HIV status or risk for their partner(s) (77%), whereas Hispanic women had the greatest percentage of cases who reported heterosexual contact with information on the HIV status or risks for their partner(s) (38%).

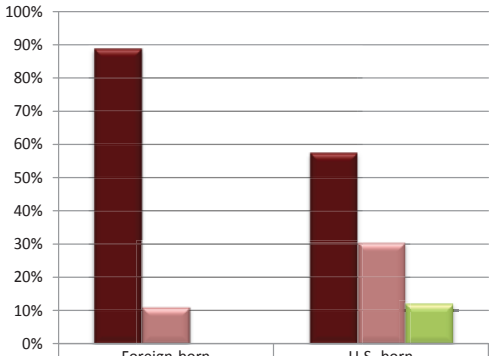
Figure 34| *Reported Risks of Females Newly Diagnosed with HIV by Age at Diagnosis, 2012*



	13 to 24	25 to 34	35 to 44	45 to 54	55 to 64
Heterosexual contact (no documented HIV infection/risk of partner)	67%	64%	57%	63%	83%
Heterosexual contact (documented HIV infection/risk of partner)	33%	18%	43%	13%	17%
IDU	0%	18%	0%	25%	0%

Figure 34: Across all age groups, the majority of women had a risk of heterosexual contact, with or without documented HIV infection or risk of their partner(s). 35 to 44 year old females had the highest percentage (43%) of females whose partner had a documented risk or HIV infection. 25 to 34 year olds and 45 to 54 year olds were the only age groups to report IDU.

Figure 35| *Reported Risks of Females Newly Diagnosed with HIV by Nativity, 2012*



	Foreign-born	U.S.-born
Heterosexual contact (no documented HIV infection/risk of partner)	89%	58%
Heterosexual contact (documented HIV infection/risk of partner)	11%	30%
IDU	0%	12%

Figure 35: The majority of both foreign-born and U.S.-born women had a risk of heterosexual contact, with or without documented HIV infection or risk of their partner(s). The percentage of foreign-born women who reported heterosexual contact with no documented HIV infection/risk of partner was higher than U.S.-born women (89% vs. 8%). No foreign-born women reported IDU.

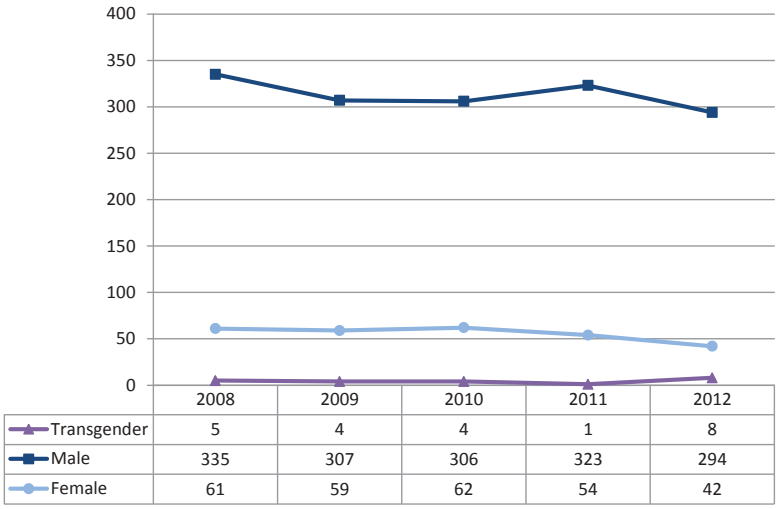
HIV/AIDS AMONG TRANSGENDER PERSONS

Transgender is an umbrella term that refers to people whose current gender identity does not conform to their assigned sex at birth. Information on transgender identities is not collected uniformly in national HIV surveillance data, so information on HIV infection in this population is limited. However, data from local health departments and research studies indicate that this population experiences a high morbidity of HIV. Based on data from CDC funded testing programs, in 2009, 2.6% of transgender individuals tested positive for HIV compared to only 0.9% of males and 0.3% of females.[1] In a review of studies on male-to-female (MTF) transgender women, Herbst et al.[2] estimated that 27.7% [95% CI: (24.8% — 30.6%)] of MTFs tested positive for HIV infection. Considering these findings, efforts to understand the impact of HIV on Nevada's transgender community are timely and important.

In accordance with CDC guidelines, Nevada's HIV counseling/testing and surveillance programs use a two question model to collect data on sex/gender.[2] One question asks sex at birth and the second asks current gender identity. Data on transgender gender identities has been collected for some time, but not robustly or uniformly; therefore, in 2012 HIV program staff received additional training on how to more effectively collect information on gender status. It is important to consider that implementation of these practices is new, and that data presented in this section may be an underestimate of HIV morbidity in the transgender population.

New HIV Infections

Figure 36| *New HIV Infections in Nevada by Current Gender, 2008– 2012**



	2008	2009	2010	2011	2012
Transgender	5	4	4	1	8
Male	335	307	306	323	294
Female	61	59	62	54	42

Figure 36: Due to the small number of transgender persons newly infected with HIV, only limited data can be provided on new HIV infections in this population. From 2008 to 2012, of the 1,865 persons newly diagnosed with HIV in Nevada, 22 identified as transgender. The number of transgender persons newly diagnosed with HIV has increased over the past five years, suggesting that gender ascertainment practices are improving and more complete information on gender will be available in the future.

[1] Centers for Disease Control and Prevention. (2011). HIV among Transgender People: http://www.cdc.gov/hiv/transgender/pdf/transgender.pdf

[2] Herbst, J.H. et al. (2008). Estimating HIV prevalence and risk behaviors of transgender persons in the United States: a systematic review. AIDS Behavior 12(1):1-17.

[3] Sausa LA, Sevelius J, Keatley J, Iñiguez JR, Reyes M. (2009). Policy recommendations for inclusive data collection of trans people in HIV prevention, care & services. Center of Excellence for Transgender HIV Prevention: University of California, San Francisco: http://transhealth.ucsf.edu/pdf/data-recommendation.pdf

Persons Living with HIV/AIDS

Table 7| *Transgender Persons Living with HIV/AIDS in Nevada, 2008-2012*

Transgender Persons Living with HIV/AIDS in Nevada: 2008-2012

	Total		Male-to-Female (MTF)		Female-to-Male (FTM)	
	N	%	n	%	n	%
Residence at Diagnosis						
Nevada	75	72%	45	60%	23	79%
Out of State	29	28%	30	40%	6	21%
Race/Ethnicity						
White, non-Hispanic	29	28%	21	28%	8	28%
Black, non-Hispanic	38	37%	25	33%	13	45%
Hispanic	22	21%	15	20%	7	24%
Asian/Hawaiian/Pacific Islander	7	7%	6	8%	1	3%
American Indian/Alaska Native	2	2%	2	3%	0	0%
Multi-race/Other	6	6%	6	8%	0	0%
Age at End of Calendar Year 2012						
< 13	0	0%	0	0%	0	0%
13 to 24	7	7%	6	8%	1	3%
25 to 34	19	18%	16	21%	3	10%
35 to 44	31	30%	21	28%	10	34%
45 to 54	31	30%	22	29%	9	31%
55 to 64	12	12%	7	9%	5	17%
65 +	4	4%	3	4%	1	3%
Transmission Category						
Sexual Contact*	82	79%	64	85%	18	62%
IDU	7	7%	2	3%	5	17%
Sexual Contact+IDU*	5	5%	5	7%	0	0%
Perinatal exposure	2	2%	2	3%	0	0%
NIR/NRR	8	8%	2	3%	6	21%
Total	**104**	**100%**	**75**	**100%**	**29**	**100%**

**Sexual contact includes any sexual contact and does not differentiate between male to male sexual contact and heterosexual contact.*

Table 7: From 2008 to 2012, of the 8,792 unique individuals living with HIV/AIDS in Nevada, 104 identified as transgender, accounting for 1% of all persons living with HIV/AIDS in Nevada (not shown in table). The majority of transgender persons living with HIV/AIDS in Nevada identified as MTF (72%) and were diagnosed with HIV/AIDS in Nevada.

Over one-third (37%) of transgender persons living with HIV/AIDS were Black, with the next highest percentage identifying as White (28%).

The greatest proportions of transgender persons living with HIV/AIDS were between 35 to 44 and 45 to 54 years of age at the end of 2012 for both MTF and FTM individuals.

Sexual contact was the most common transmission category for both MTF and FTM persons living with HIV/AIDS from 2008 to 2012 (85% and 62% respectively). The second most common mode of transmission for MTF persons was combined sexual contact + IDU (7%), while the second most common transmission mode for FTM persons was IDU (17%).

FACILITY OF DIAGNOSIS

Table 8| *Facility of HIV Diagnosis, 2012*

	Nevada		Clark County		Washoe County		All Other Counties*	
	N	%	n	%	n	%	n	%
Facility of Diagnosis								
HIV Counseling and Testing Site	117	34%	111	36%	6	23%	0	0%
Private Physician's Office	74	22%	69	22%	4	15%	1	14%
Inpatient Facility/Hospital	61	18%	55	18%	3	12%	3	43%
Obstetrics and Gynecology Clinic	1	0%	0	0%	1	4%	0	0%
Adult HIV Clinic	8	2%	0	0%	7	27%	1	14%
Correctional Facility	18	5%	17	5%	0	0%	1	14%
STD Clinic	29	8%	29	9%	0	0%	0	0%
Blood Bank or Plasma Center	11	3%	8	3%	3	12%	0	0%
Emergency Room	0	0%	0	0%	0	0%	0	0%
Facility/Other/Unknown	25	7%	22	7%	2	8%	1	14%
Total	**344**	**100%**	**311**	**100%**	**26**	**100%**	**7**	**100%**

Table 8: The majority of people who were diagnosed with HIV in 2012 were diagnosed at an HIV counseling and testing site (34%). 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 9| *Facility of AIDS Diagnosis, 2012*

	Nevada		Clark County		Washoe County		All Other Counties*	
	N	%	n	%	n	%	n	%
Facility of Diagnosis								
HIV Counseling and Testing Site	64	29%	62	32%	0	0%	2	50%
Private Physician's Office	46	21%	44	23%	2	10%	0	0%
Inpatient Facility/Hospital	75	34%	62	32%	12	57%	1	25%
Outpatient Facility/Other	0	0%	0	0%	0	0%	0	0%
Adult HIV Clinic	22	10%	16	8%	6	29%	0	0%
Correctional Facility	2	1%	2	1%	0	0%	0	0%
STD Clinic	1	0%	1	1%	0	0%	0	0%
Blood Bank or Plasma Center	0	0%	0	0%	0	0%	0	0%
Emergency Room	0	0%	0	0%	0	0%	0	0%
Facility/Other/Unknown	8	4%	6	3%	1	5%	1	25%
Total	**218**	**100%**	**193**	**100%**	**21**	**100%**	**4**	**100%**

Table 9: The majority of people who were diagnosed with AIDS in 2012 were diagnosed at an inpatient facility/hospital (34%) or an HIV counseling and testing site (29%), which raises several concerns.

Being diagnosed with AIDS at an inpatient facility/hospital suggests that the individual was either diagnosed with HIV late during the course of the infection or was not receiving routine care and became very ill. Fifty seven percent (n=43) of individuals diagnosed at an inpatient facility/hospital were diagnosed with AIDS within three months of their HIV diagnosis. Of the remaining individuals (n=32), 66% (n=21) had not been obtaining regular care after their HIV diagnosis based on lab data from eHARS.

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. Sixty nine 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.

TIME FROM HIV INFECTION TO AIDS DIAGNOSIS

Table 10| *AIDS diagnosis within 12 Months of HIV diagnosis among Persons Diagnosed with HIV Infection in Nevada, 2007 vs. 2011**

	2007			2011			Difference in proportion diagnosed < 12 months*
	AIDS Diagnosis <12 months n	Total HIV Diagnoses N	% of Total Diagnoses %	AIDS Diagnosis <12 months n	Total HIV Diagnoses N	% of Total Diagnoses %	
Residence at Diagnosis							
Clark County	120	369	33%	126	339	37%	5%
Washoe County	16	38	42%	6	27	22%	-20%
All Other Counties	4	12	33%	1	2	50%	17%
Total	**140**	**419**	**33%**	**133**	**368**	**36%**	3%
Sex at Birth							
Male	113	343	33%	106	316	34%	1%
Female	27	76	36%	27	52	52%	16%
Total	**140**	**419**	**33%**	**133**	**368**	**36%**	3%
Race/Ethnicity							
White, non-Hispanic	60	194	31%	45	126	36%	5%
Black, non-Hispanic	28	94	30%	37	98	38%	8%
Hispanic	43	108	40%	43	105	41%	1%
Asian/Hawaiian/Pacific Islander	9	20	45%	7	33	21%	-24%
American Indian/Alaska Native	0	2	0%	0	2	0%	0%
Multi-race/other/unknown	0	1	0%	1	4	25%	25%
Total	**140**	**419**	**33%**	**133**	**368**	36%	3%
Age at Diagnosis							
< 13	0	0	N/A	0	0	N/A	N/A
13 to 24	13	66	20%	16	86	19%	-1%
25 to 34	39	115	34%	39	128	30%	-3%
35 to 44	37	136	27%	30	61	49%	22%
45 to 54	32	71	45%	30	60	50%	5%
55 to 64	17	28	61%	15	27	56%	-5%
65 +	2	3	67%	3	6	50%	-17%
Total	**140**	**419**	**33%**	**133**	**368**	**36%**	3%
Transmission Category							
Male							
MSM	87	274	32%	82	263	31%	-1%
IDU	7	16	44%	9	13	69%	25%
MSM+IDU	5	16	31%	5	17	29%	-2%
Heterosexual contact	8	26	31%	4	9	44%	14%
Perinatal exposure	0	0	N/A	1	1	100%	N/A
Transfusion/Hemophilia	0	0	N/A	0	0	N/A	N/A
NIR/NRR	6	11	55%	5	13	38%	-16%
Subtotal	**113**	**343**	33%	**106**	**316**	**34%**	1%
Female							
IDU	3	4	75%	3	4	75%	0%
Heterosexual contact	24	71	34%	10	28	36%	2%
Perinatal exposure	0	0	N/A	1	2	50%	N/A
Transfusion/Hemophilia	0	0	N/A	0	0	N/A	N/A
NIR/NRR	0	1	0%	13	18	72%	72%
Subtotal	**27**	**76**	**36%**	**27**	**52**	**52%**	16%
Total	**140**	**419**	**33%**	**133**	**368**	**36%**	**3%**

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

**Difference in proportion was calculated as the proportion of persons in 2007 with a diagnosis of AIDS within 12 months of their HIV diagnosis subtracted from the proportion of persons in 2011 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.[1] 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/µL of blood or CD4 percent is less than 14), AIDS diagnosis information was complete for a majority of these individuals. In 2011, 100% of persons had a CD4 lab within 12 months of their HIV diagnosis, and in 2007, 99% of persons had a CD4 lab within 12 months of their HIV diagnosis. However, CD4 counts greater than 500 cells/µL of blood do not have to be reported, so some lab results may have been missing.

In 2011, of the 368 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 2007 to 2011, there was an increase of 3 percentage points in the proportion of late diagnoses.

The all other counties region had the highest proportion of persons with a late diagnosis (50%) in 2011, and this proportion has increased by 17 percentage points since 2007. In 2011, Washoe County had the lowest proportion of late diagnoses (22%), and this proportion decreased by 20 percentage points from 2007 to 2011.

In 2011, a greater proportion of females had a late diagnosis compared to males (52% vs. 34%). From 2007 to 2011, the proportion of late diagnoses points among females increased 5 percentage points .

In terms of race/ethnicity, the highest proportion of late diagnoses occurred among persons who identified as Hispanic (41%), Black (38%), and White (36%) in 2011. APIs were the only race/ethnicity group to experience a decrease. The proportion of late diagnoses among API decreased by 24 percentage points from 2007 to 2011.

With regard to age, the proportion of late diagnoses was much higher in older age groups, with the highest proportion among 55 to 64 year olds (56%). From 2007 to 2011, 35 to 44 year olds experienced the greatest increase in proportion of late diagnoses, from 27% in 2007 to 49% in 2011.

Among males, individuals with a transmission category of IDU (aside from perinatal exposure) had the highest proportion of late diagnoses (69%). This proportion increased 34 percentage points from 2007 to 2011. Males who had a transmission category of MSM+IDU had the lowest proportion of late diagnoses (29%), and there was a 2 percentage point decrease in this proportion from 2007 to 2011.

Among females, individuals with a transmission category of IDU had the highest proportion of late diagnoses (75%), followed by individuals who had NIR/NRR (72%).

[1]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

In this report, death information was obtained from eHARS. Several measures are taken to ensure the quality of this data, including annual matches to the state electronic death registry, the national Social Security Death Index, and the National Death Index. Throughout 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.

Table 11| *Deaths among Persons Living with HIV/AIDS in Nevada, 2012*

Deaths among Persons Living with HIV/AIDS in Nevada: 2012

	Total			Male			Female		
	N	%	Age Adjusted Rate*	n	%	Age Adjusted Rate*	n	%	Age Adjusted Rate*
County at Diagnosis									
Clark County	106	82%	5.3	87	82%	8.6	19	83%	2.0
Washoe County	20	16%	4.2	17	16%	7.7	3	13%	1.0
All Other Counties**	3	2%	0.8	2	2%	1.1	1	4%	0.6
Race/Ethnicity									
White, non-Hispanic	62	48%	3.3	56	53%	5.9	6	26%	0.7
Black, non-Hispanic	37	29%	19.3	24	23%	25.1	13	57%	13.9
Hispanic	25	19%	4.6	21	20%	7.7	4	17%	1.4
Asian/Hawaiian/Pacific Islander	1	1%	0.6	1	1%	1.3	0	0%	0.0
American Indian/Alaska Native	0	0%	0.0	0	0%	0.0	0	0%	0.0
Multi-race/Other	4	3%	N/A	4	4%	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	4	3%	0.9	4	4%	1.7	0	0%	0.0
25 to 34	12	9%	3.1	9	8%	4.4	3	13%	1.6
35 to 44	24	19%	6.4	18	17%	9.2	6	26%	3.3
45 to 54	41	32%	10.9	34	32%	17.5	7	30%	3.8
55 to 64	33	26%	10.5	26	25%	16.7	7	30%	4.4
65 +	15	12%	4.4	15	14%	9.7	0	0%	0.0
Transmission Category									
MSM	71	55%	N/A	71	67%	N/A	0	0%	N/A
IDU	18	14%	N/A	10	9%	N/A	8	35%	N/A
MSM+IDU	10	8%	N/A	10	9%	N/A	0	0%	N/A
Heterosexual contact	13	10%	N/A	3	3%	N/A	10	43%	N/A
Perinatal exposure	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	17	13%	N/A	12	11%	N/A	5	22%	N/A
Total	**129**	**100%**	**4.5**	**106**	**100%**	**3.7**	**23**	**100%**	**0.8**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

**Age adjusted rates per 100,000 population were calculated using 2012 population estimates from the Nevada State Demographer vintage 2012 data and adjusted to the 2000 U.S. standard population.*

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

Table 11: In this table, age-adjusted death rates were calculated as the number of deaths of persons living with HIV/AIDS in Nevada per 100,000 persons and weighted to reflect standard age distributions.

In 2012, the age-adjusted death rate of persons living with HIV/AIDS in Nevada was 4.5 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 (0.8 per 100,000 population). For both males and females, Blacks had the highest age-adjusted death rate. Of all age groups, 45 to 54 year old males had the highest death rate (17.5 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 (67%), while among females, persons with a transmission category of heterosexual accounted for the greatest proportion of deaths (43%).

Table 12| *Survival for more than 12, 24, and 36 months after a diagnosis of AIDS in Nevada during 2005-2009 by selected characteristics**

	Number of Persons	Proportion Survived (in months)		
		>12	>24	>36
Residence at AIDS Diagnosis				
Clark County	1,019	87%	84%	81%
Washoe County	122	83%	80%	80%
All Other counties*	43	88%	86%	86%
Total	**1,184**	**86%**	**83%**	**81%**
Sex at Birth				
Male	983	86%	84%	81%
Female	201	87%	82%	81%
Total	**1,184**	**86%**	**83%**	**81%**
Race/Ethnicity				
White, non-Hispanic	499	85%	81%	79%
Black, non-Hispanic	309	88%	85%	81%
Hispanic	301	90%	87%	85%
Asian/Hawaiian/Pacific Islander	51	76%	76%	76%
American Indian/Alaska Native	10	80%	80%	70%
Multi-race/Other	14	86%	71%	71%
Total	**1,184**	**86%**	**83%**	**81%**
Age at AIDS Diagnosis				
< 13	1	100%	100%	100%
13 to 24	72	99%	96%	93%
25 to 34	261	88%	86%	83%
35 to 44	440	88%	87%	85%
45 to 54	288	86%	81%	78%
55 to 64	104	75%	69%	63%
65 +	18	50%	39%	39%
Total	**1,184**	**86%**	**83%**	**81%**
Transmission Category				
Male				
MSM	734	87%	84%	81%
IDU	77	79%	77%	74%
MSM+IDU	48	85%	83%	81%
Heterosexual Contact	47	94%	94%	94%
Perinatal Exposure	3	100%	100%	100%
Hemophilia/Blood Transfusion	1	100%	100%	100%
NIR/NRR	73	84%	81%	79%
Subtotal	**983**	**86%**	**84%**	**81%**
Female				
IDU	40	90%	83%	78%
Heterosexual Contact	130	88%	84%	83%
Perinatal Exposure	1	100%	100%	100%
Hemophilia/Blood Transfusion	1	100%	100%	100%
NIR/NRR	29	76%	72%	72%
Subtotal	**201**	**87%**	**82%**	**81%**
Year of AIDS Diagnosis				
2005	256	87%	83%	80%
2006	225	86%	84%	82%
2007	249	87%	84%	82%
2008	251	84%	82%	80%
2009	203	**89%**	**84%**	**80%**
Total	**1,184**	**86%**	**83%**	**81%**

Table 12: In this analysis of survival after an AIDS diagnosis, only persons who were diagnosed with AIDS in Nevada in 2005-2009 and had a current Nevada residence as of February 2013 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 2005 to 2009, 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 (86%).

In Nevada as a whole, the proportion of males surviving more than 36 months was similar to that of females. Sex at birth differences were small with regard to survival for more than 12 months and more than 24 months.

APIs had the lowest proportion of persons surviving more than 12 months after an AIDS diagnosis (76%), followed by AI/ANs (80%). Hispanics had the highest proportion surviving more than 12 months (90%) followed by Blacks (88%).

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 (75% and 50%, respectively).

Among males, persons with a transmission category of injection drug use (IDU) had the lowest proportion of persons surviving more than 12 months (79%).

Among females, persons with a transmission category of IDU had the highest proportion surviving more than 12 months (90%). However, the proportion surviving more than 36 months was only 78%.

SUMMARY DATA TABLES

Table 13| New HIV Infections in Nevada, 2012

	Total			Male			Female		
	N	%	Rate*	n	%	Rate*	n	%	Rate*
County at Diagnosis									
Clark County	311	90%	15.6	275	91%	27.4	36	86%	3.7
Washoe County	26	8%	6.1	22	7%	10.3	4	10%	1.9
All Other Counties**	7	2%	2.1	5	2%	2.9	2	5%	1.2
Race/Ethnicity									
White, non-Hispanic	129	38%	8.0	118	39%	14.5	11	26%	1.4
Black, non-Hispanic	70	20%	35.6	48	16%	48.6	22	52%	22.5
Hispanic	113	33%	15.7	105	35%	27.8	8	19%	2.4
Asian/Hawaiian/Pacific Islander	23	7%	12.5	22	7%	25.7	1	2%	1.0
American Indian/Alaska Native	2	1%	5.5	2	1%	11.4	0	0%	0.0
Multi-race/Other	7	2%	N/A	7	2%	N/A	0	0%	N/A
Age at Diagnosis									
< 13	0	0%	0.0	0	0%	0.0	0	0%	0.0
13 to 24	74	22%	16.6	71	24%	30.9	3	7%	1.4
25 to 34	111	32%	28.5	100	33%	49.3	11	26%	5.9
35 to 44	88	26%	23.4	74	25%	38.0	14	33%	7.8
45 to 54	50	15%	13.3	42	14%	21.7	8	19%	4.4
55 to 64	17	5%	5.4	11	4%	7.1	6	14%	3.8
65 +	4	1%	1.2	4	1%	2.6	0	0%	0.0
Transmission Category									
MSM	241	70%	N/A	241	80%	N/A	0	0%	N/A
IDU	9	3%	N/A	5	2%	N/A	4	10%	N/A
MSM+IDU	16	5%	N/A	16	5%	N/A	0	0%	N/A
Heterosexual contact	17	5%	N/A	6	2%	N/A	11	26%	N/A
Perinatal exposure	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	61	18%	N/A	34	11%	N/A	27	64%	N/A
Total	**344**	**100%**	**12.5**	**302**	**100%**	**21.7**	**42**	**100%**	**3.1**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

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

Table 14| New AIDS Diagnoses in Nevada, 2012

	Total			Male			Female		
	N	%	Rate*	n	%	Rate*	n	%	Rate*
County at Diagnosis									
Clark County	193	89%	9.7	159	88%	15.8	34	89%	3.5
Washoe County	21	10%	5.0	19	11%	8.9	2	5%	1.0
All Other Counties**	4	2%	1.2	2	1%	1.2	2	5%	1.2
Race/Ethnicity									
White, non-Hispanic	88	40%	5.4	79	44%	9.7	9	24%	0.6
Black, non-Hispanic	60	28%	30.5	33	18%	33.4	27	71%	13.7
Hispanic	61	28%	8.5	59	33%	15.6	2	5%	0.3
Asian/Hawaiian/Pacific Islander	5	2%	2.7	5	3%	5.8	0	0%	0.0
American Indian/Alaska Native	2	1%	5.5	2	1%	11.4	0	0%	0.0
Multi-race/Other	2	1%	N/A	2	1%	N/A	0	0%	N/A
Age at Diagnosis									
< 13	0	0%	0.0	0	0%	0.0	0	0%	0.0
13 to 24	22	10%	4.9	20	11%	8.7	2	5%	0.9
25 to 34	67	31%	17.2	58	32%	28.6	9	24%	4.8
35 to 44	54	25%	14.4	43	24%	22.1	11	29%	6.1
45 to 54	50	23%	13.3	39	22%	20.1	11	29%	6.0
55 to 64	21	10%	6.7	16	9%	10.3	5	13%	3.1
65 +	4	2%	1.2	4	2%	2.6	0	0%	0.0
Transmission Category									
MSM	124	57%	N/A	124	69%	N/A	0	0%	N/A
IDU	11	5%	N/A	6	3%	N/A	5	13%	N/A
MSM+IDU	19	9%	N/A	19	11%	N/A	0	0%	N/A
Heterosexual contact	24	11%	N/A	7	4%	N/A	17	45%	N/A
Perinatal exposure	2	1%	N/A	1	1%	N/A	1	3%	N/A
Transfusion/Hemophilia	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	38	17%	N/A	23	13%	N/A	15	39%	N/A
Total	**218**	**100%**	**7.9**	**180**	**100%**	**12.9**	**38**	**100%**	**2.8**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

***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, 2008- 2012

	2008			2009			2010			2011			2012			% Change[†]
	N	%	Rate*	N	%	Rate*	N	%	Rate*	N	%	Rate*	N	%	Rate*	%
County at Diagnosis																
Clark County	360	90%	19.0	326	88%	16.9	344	92%	17.6	348	92%	17.7	311	90%	15.6	-14%
Washoe County	34	8%	8.3	30	8%	7.3	25	7%	6.0	27	7%	6.4	26	8%	6.1	-24%
All Other Counties**	7	2%	2.1	14	4%	4.2	3	1%	0.9	3	1%	0.9	7	2%	2.1	0%
Sex																
Male	339	85%	25.3	311	84%	22.9	309	83%	22.5	324	86%	23.5	302	88%	21.7	-11%
Female	62	15%	4.8	59	16%	4.5	63	17%	4.7	54	14%	4.0	42	12%	3.1	-32%
Race/Ethnicity																
White, non-Hispanic	178	44%	11.1	134	36%	8.3	138	37%	8.6	128	34%	8.0	129	38%	8.0	-28%
Black, non-Hispanic	104	26%	56.0	101	27%	53.3	103	28%	53.4	103	27%	53.1	70	20%	35.6	-33%
Hispanic	100	25%	15.4	104	28%	15.5	101	27%	14.7	108	29%	15.4	113	33%	15.7	13%
Asian/Hawaiian/Pacific Islander	11	3%	6.4	20	5%	11.3	23	6%	12.7	33	9%	18.2	23	7%	12.5	109%
American Indian/Alaska Native	3	1%	8.5	6	2%	16.9	1	0%	2.8	2	1%	5.6	2	1%	5.5	-33%
Multi-race/Other	5	1%	N/A	5	1%	N/A	6	2%	N/A	4	1%	N/A	7	2%	N/A	40%
Age at Diagnosis																
< 13	0	0%	0.0	0	0%	0.0	1	0%	0.2	0	0%	0.0	0	0%	0.0	N/A
13 to 24	61	15%	13.8	65	18%	14.6	82	22%	18.3	89	24%	20.0	74	22%	16.6	21%
25 to 34	110	27%	28.9	129	35%	33.5	110	30%	28.3	133	35%	34.2	111	32%	28.5	1%
35 to 44	115	29%	30.7	83	22%	22.2	94	25%	25.1	62	16%	16.6	88	26%	23.4	-23%
45 to 54	72	18%	19.7	70	19%	18.9	50	13%	13.3	61	16%	16.2	50	15%	13.3	-31%
55 to 64	35	9%	12.3	19	5%	6.5	29	8%	9.6	27	7%	8.7	17	5%	5.4	-51%
65 +	8	2%	2.6	4	1%	1.3	6	2%	1.9	6	2%	1.8	4	1%	1.2	-50%
Transmission Category																
Males																
MSM	270	80%	N/A	265	85%	N/A	259	84%	N/A	270	83%	N/A	241	80%	N/A	-11%
IDU	27	8%	N/A	15	5%	N/A	15	5%	N/A	13	4%	N/A	5	2%	N/A	-81%
MSM+IDU	18	5%	N/A	17	5%	N/A	17	6%	N/A	17	5%	N/A	16	5%	N/A	-11%
Heterosexual contact	18	5%	N/A	7	2%	N/A	5	2%	N/A	10	3%	N/A	6	2%	N/A	-67%
Perinatal exposure	0	0%	N/A	0	0%	N/A	0	0%	N/A	1	0%	N/A	0	0%	N/A	N/A
Transfusion/Hemophilia	1	0%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A	N/A
NIR/NRR	5	1%	N/A	7	2%	N/A	13	4%	N/A	13	4%	N/A	34	11%	N/A	580%
Subtotal	**339**	**100%**	**25.3**	**311**	**100%**	**22.9**	**309**	**100%**	**22.5**	**324**	**100%**	**23.5**	**302**	**100%**	**21.7**	**-11%**
Females																
IDU	5	8%	N/A	6	10%	N/A	4	6%	N/A	5	9%	N/A	4	10%	N/A	-20%
Heterosexual contact	54	87%	N/A	51	86%	N/A	50	79%	N/A	29	54%	N/A	11	26%	N/A	-80%
Perinatal exposure	0	0%	N/A	0	0%	N/A	1	2%	N/A	2	4%	N/A	0	0%	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	3	5%	N/A	2	3%	N/A	8	13%	N/A	18	33%	N/A	27	64%	N/A	800%
Subtotal	**62**	**100%**	**4.8**	**59**	**100%**	**4.5**	**63**	**100%**	**4.7**	**54**	**100%**	**4.0**	**42**	**100%**	**3.1**	**-32%**
Total	**401**	**100%**	**15.2**	**370**	**100%**	**13.8**	**372**	**100%**	**13.7**	**378**	**100%**	**13.9**	**344**	**100%**	**12.5**	**-14%**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

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

[†] % Change is the percent change in the number of new infections from 2008 to 2012.

Table 16| Persons Living with HIV/AIDS in Nevada, 2012

	Total			Male			Female		
	N	%	Rate*	n	%	Rate*	n	%	Rate*
Residence at Diagnosis									
Nevada	5,954	68%	N/A	4,943	67%	N/A	1,011	71%	N/A
Out of state	2,835	32%	N/A	2,421	33%	N/A	414	29%	N/A
Missing	3	0%	N/A	2	0%	N/A	1	0%	N/A
County of Residence									
Clark County	7,518	86%	378.1	6,306	86%	627.6	1,212	85%	123.2
Washoe County	878	10%	207.6	742	10%	347.2	136	10%	65.0
All Other Counties**	396	5%	116.9	318	4%	184.6	78	5%	46.8
Race/Ethnicity									
White, non-Hispanic	4,345	49%	268.9	3,820	52%	471.0	525	37%	65.2
Black, non-Hispanic	2,127	24%	1,081.8	1,510	20%	1,530.1	617	43%	630.1
Hispanic	1,885	21%	262.6	1,665	23%	440.5	220	15%	64.7
Asian/Hawaiian/Pacific Islander	284	3%	154.5	246	3%	287.5	38	3%	38.7
American Indian/Alaska Native	71	1%	196.4	53	1%	301.3	18	1%	97.0
Multi-race/Other	80	1%	N/A	72	1%	N/A	8	1%	N/A
Age at End of Year									
Missing	58	1%	N/A	50	1%	N/A	8	1%	N/A
< 13	11	0%	2.2	5	0%	1.9	6	0%	2.4
13 to 24	309	4%	69.2	258	4%	112.1	51	4%	23.6
25 to 34	1,301	15%	333.6	1,085	15%	535.2	216	15%	115.3
35 to 44	2,208	25%	588.4	1,800	24%	924.0	408	29%	226.1
45 to 54	3,162	36%	838.3	2,704	37%	1,394.4	458	32%	249.9
55 to 64	1,367	16%	434.6	1,148	16%	738.3	219	15%	137.7
65 +	376	4%	110.1	316	4%	204.1	60	4%	32.2
Transmission Category									
MSM	5,555	63%	N/A	5,555	75%	N/A	0	0%	N/A
IDU	748	9%	N/A	497	7%	N/A	251	18%	N/A
MSM+IDU	548	6%	N/A	548	7%	N/A	0	0%	N/A
Heterosexual contact	1,127	13%	N/A	264	4%	N/A	863	61%	N/A
Perinatal exposure	66	1%	N/A	33	0%	N/A	33	2%	N/A
Hemophilia/Blood Transfusion	11	0%	N/A	7	0%	N/A	4	0%	N/A
NIR/NRR	737	8%	N/A	462	6%	N/A	275	19%	N/A
Total	**8,792**	**100%**	**319.7**	**7,366**	**100%**	**529.6**	**1,426**	**100%**	**104.9**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

***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, 2008- 2012

	2008			2009			2010			2011			2012			% Change†
	N	%	Rate*	N	%	Rate*	N	%	Rate*	N	%	Rate*	N	%	Rate*	%
Residence at Diagnosis																
Nevada	5,799	75%	N/A	5,791	73%	N/A	5,812	71%	N/A	5,899	69%	N/A	5,954	68%	N/A	3%
Out of state	1,879	24%	N/A	2,123	27%	N/A	2,371	29%	N/A	2,585	30%	N/A	2,835	32%	N/A	51%
County of Residence																
Clark County	6,516	84%	343.3	6,738	85%	348.5	6,963	85%	355.3	7,246	85%	368.2	7,518	86%	378.1	15%
Washoe County	761	10%	185.7	791	10%	191.6	824	10%	197.4	854	10%	202.6	878	10%	207.6	15%
All Other Counties**	446	6%	133.7	417	5%	125.7	423	5%	128.3	404	5%	121.5	396	5%	116.9	-11%
Sex																
Male	6,434	83%	479.7	6,613	83%	486.8	6,839	83%	498.6	7,094	83%	514.9	7,366	84%	529.6	14%
Female	1,289	17%	99.1	1,333	17%	101.0	1,371	17%	102.7	1,410	17%	104.9	1,426	16%	104.9	11%
Race/Ethnicity																
White, non-Hispanic	4,173	54%	261.1	4,182	53%	260.4	4,218	51%	261.8	4,279	50%	265.8	4,345	49%	268.9	4%
Black, non-Hispanic	1,804	23%	972.1	1,883	24%	993.8	1,971	24%	1,022.5	2,061	24%	1,061.6	2,127	24%	1,081.8	18%
Hispanic	1,474	19%	226.8	1,574	20%	235.0	1,684	21%	245.3	1,783	21%	254.7	1,885	21%	262.6	28%
Asian/Hawaiian/Pacific Islander	182	2%	105.3	204	3%	115.2	220	3%	121.8	256	3%	140.9	284	3%	154.5	56%
American Indian/Alaska Native	66	1%	188.0	71	1%	200.4	71	1%	199.2	71	1%	198.2	71	1%	196.4	8%
Multi-race/Other	22	0%	N/A	31	0%	N/A	45	1%	N/A	54	1%	N/A	80	1%	N/A	264%
Age at End of Year																
Missing	62	1%	N/A	61	1%	N/A	59	1%	N/A	58	1%	N/A	58	1%	N/A	
< 13	16	0%	3.3	13	0%	2.6	11	0%	2.2	11	0%	2.2	11	0%	2.2	-31%
13 to 24	254	3%	57.3	256	3%	57.3	270	3%	60.2	302	4%	67.8	309	4%	69.2	22%
25 to 34	1,039	13%	273.3	1,118	14%	290.5	1,169	14%	301.2	1,241	15%	319.5	1,301	15%	333.6	25%
35 to 44	2,742	36%	731.9	2,567	32%	685.1	2,428	30%	647.9	2,297	27%	615.4	2,208	25%	588.4	-19%
45 to 54	2,513	33%	687.7	2,716	34%	731.4	2,906	35%	774.4	3,058	36%	814.0	3,162	36%	838.3	26%
55 to 64	895	12%	314.5	973	12%	332.2	1,090	13%	361.4	1,219	14%	394.0	1,367	16%	434.6	53%
65 +	202	3%	65.8	242	3%	76.7	277	3%	85.6	318	4%	96.1	376	4%	110.1	86%
Transmission Category																
Males																
MSM	4,649	72%	N/A	4,879	74%	N/A	5,092	74%	N/A	5,324	75%	N/A	5,555	75%	N/A	19%
IDU	515	8%	N/A	489	7%	N/A	499	7%	N/A	498	7%	N/A	497	7%	N/A	-3%
MSM+IDU	496	8%	N/A	507	8%	N/A	510	7%	N/A	529	7%	N/A	548	7%	N/A	10%
Heterosexual contact	247	4%	N/A	246	4%	N/A	255	4%	N/A	261	4%	N/A	264	4%	N/A	7%
Perinatal exposure	29	0%	N/A	27	0%	N/A	26	0%	N/A	30	0%	N/A	33	0%	N/A	14%
Transfusion/Hemophilia	9	0%	N/A	7	0%	N/A	7	0%	N/A	7	0%	N/A	7	0%	N/A	-22%
NIR/NRR	489	8%	N/A	458	7%	N/A	450	7%	N/A	445	6%	N/A	462	6%	N/A	-6%
Subtotal	**6,434**	**100%**	**479.7**	**6,613**	**100%**	**486.8**	**6,839**	**100%**	**498.6**	**7,094**	**100%**	**514.9**	**7,366**	**100%**	**529.6**	**14%**
Females																
IDU	259	20%	N/A	259	19%	N/A	255	19%	N/A	252	18%	N/A	251	18%	N/A	-3%
Heterosexual contact	742	58%	N/A	799	60%	N/A	839	61%	N/A	867	61%	N/A	863	61%	N/A	16%
Perinatal exposure	27	2%	N/A	26	2%	N/A	31	2%	N/A	33	2%	N/A	33	2%	N/A	22%
Transfusion/Hemophilia	5	0%	N/A	4	0%	N/A	4	0%	N/A	4	0%	N/A	4	0%	N/A	-20%
NIR/NRR	256	20%	N/A	245	18%	N/A	242	18%	N/A	254	18%	N/A	275	19%	N/A	7%
Subtotal	**1,289**	**100%**	**99.1**	**1,333**	**100%**	**101.0**	**1,371**	**100%**	**102.7**	**1,410**	**100%**	**104.9**	**1,426**	**100%**	**104.9**	**11%**
Total	**7,723**	**100%**	**292.4**	**7,946**	**200%**	**296.7**	**8,210**	**200%**	**303.4**	**8,504**	**200%**	**312.4**	**8,792**	**100%**	**319.7**	**14%**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

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

† % Change is the percent change in the number of nunber of persons living with HIV/AIDS from 2008 to 2012.

Table 18| New HIV Infections in Clark County, 2012

	Total			Male			Female		
	N	%	Rate*	n	%	Rate*	n	%	Rate*
Race/Ethnicity									
White, non-Hispanic	113	36%	10.6	104	38%	19.4	9	25%	1.7
Black, non-Hispanic	65	21%	36.0	44	16%	49.1	21	58%	23.1
Hispanic	102	33%	18.4	96	35%	32.8	6	17%	2.3
Asian/Hawaiian/Pacific Islander	22	7%	14.7	22	8%	31.5	0	0%	0.0
Multi-race/Other**	9	3%	N/A	9	3%	N/A	0	0%	N/A
Age at Diagnosis									
< 13	0	0%	N/A	0	0%	N/A	0	0%	N/A
13 to 24	68	22%	15.2	65	24%	28.3	3	8%	1.4
25 to 34	103	33%	26.4	93	34%	45.9	10	28%	5.3
35 to 44	77	25%	20.5	64	23%	32.9	13	36%	7.2
45 to 54	42	14%	11.1	38	14%	19.6	4	11%	2.2
55 to 64	17	5%	5.4	11	4%	7.1	6	17%	3.8
65 +	4	1%	1.2	4	1%	2.6	0	0%	0.0
Transmission Category									
MSM	219	70%	N/A	219	80%	N/A	0	0%	N/A
IDU	8	3%	N/A	5	2%	N/A	3	8%	N/A
MSM+IDU	16	5%	N/A	16	6%	N/A	0	0%	N/A
Heterosexual contact	15	5%	N/A	5	2%	N/A	10	28%	N/A
Perinatal exposure	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	53	17%	N/A	30	11%	N/A	23	64%	N/A
Total	**311**	**100%**	**15.6**	**275**	**100%**	**27.4**	**36**	**100%**	**3.7**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

*** 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.*

Table 19| New AIDS Diagnoses in Clark County, 2012

	Total			Male			Female		
	N	%	Rate*	n	%	Rate*	n	%	Rate*
Race/Ethnicity									
White, non-Hispanic	72	37%	6.8	65	41%	12.2	7	21%	1.3
Black, non-Hispanic	56	29%	31.0	31	19%	34.6	25	74%	27.5
Hispanic	58	30%	10.4	56	35%	19.1	2	6%	0.8
Asian/Hawaiian/Pacific Islander	5	3%	3.3	5	3%	7.2	0	0%	0.0
Multi-race/Other**	2	1%	N/A	2	1%	N/A	0	0%	N/A
Age at Diagnosis									
< 13	0	0%	N/A	0	0%	N/A	0	0%	N/A
13 to 24	21	11%	4.7	19	12%	8.3	2	6%	0.9
25 to 34	65	34%	16.7	56	35%	27.6	9	26%	4.8
35 to 44	49	25%	13.1	38	24%	19.5	11	32%	6.1
45 to 54	40	21%	10.6	32	20%	16.5	8	24%	4.4
55 to 64	15	8%	4.8	11	7%	7.1	4	12%	2.5
65 +	3	2%	0.9	3	2%	1.9	0	0%	0.0
Transmission Category									
MSM	111	58%	N/A	111	70%	N/A	0	0%	N/A
IDU	9	5%	N/A	5	3%	N/A	4	12%	N/A
MSM+IDU	17	9%	N/A	17	11%	N/A	0	0%	N/A
Heterosexual contact	21	11%	N/A	4	3%	N/A	17	50%	N/A
Perinatal exposure	2	1%	N/A	1	1%	N/A	1	3%	N/A
Transfusion/Hemophilia	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	33	17%	N/A	21	13%	N/A	12	35%	N/A
Total	**193**	**100%**	**9.7**	**159**	**100%**	**15.8**	**34**	**100%**	**3.5**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

*** 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.*

Table 20| Persons Living with HIV/AIDS in Clark County, 2012

	Total			Male			Female		
	N	%	Rate*	N	%	Rate*	N	%	Rate*
Residence at Diagnosis									
Nevada	5,151	69%	N/A	4,287	68%	N/A	864	71%	N/A
Out of state	2,366	31%	N/A	2,018	32%	N/A	348	29%	N/A
Race/Ethnicity									
White, non-Hispanic	3,502	47%	328.8	3,118	49%	582.8	384	32%	72.5
Black, non-Hispanic	1,964	26%	1,087.6	1,375	22%	1,534.7	589	49%	647.4
Hispanic	1,678	22%	302.1	1,489	24%	508.8	189	16%	71.9
Asian/Hawaiian/Pacific Islander	256	3%	170.6	226	4%	323.4	30	2%	37.4
American Indian/Alaska Native	51	1%	307.3	38	1%	468.7	13	1%	153.1
Multi-race/Other	67	1%	N/A	60	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%	2.0	5	0%	1.9	5	0%	2.0
13 to 24	279	4%	62.5	231	4%	100.4	48	4%	22.2
25 to 34	1,144	15%	293.3	958	15%	472.6	186	15%	99.3
35 to 44	1,894	25%	504.7	1,543	24%	792.1	351	29%	194.5
45 to 54	2,679	36%	710.3	2,302	37%	1,187.1	377	31%	205.7
55 to 64	1,146	15%	364.4	960	15%	617.4	186	15%	117.0
65 +	308	4%	90.2	257	4%	166.0	51	4%	27.3
Transmission Category									
MSM	4,892	65%	N/A	4,892	78%	N/A	0	0%	N/A
IDU	589	8%	N/A	396	6%	N/A	193	16%	N/A
MSM+IDU	436	6%	N/A	436	7%	N/A	0	0%	N/A
Heterosexual contact	979	13%	N/A	217	3%	N/A	762	63%	N/A
Perinatal exposure	58	1%	N/A	29	0%	N/A	29	2%	N/A
Hemophilia/Blood Transfusion	8	0%	N/A	7	0%	N/A	1	0%	N/A
NIR/NRR	556	7%	N/A	329	5%	N/A	227	19%	N/A
Total	**7,518**	**100%**	**378.1**	**6,306**	**100%**	**627.6**	**1,212**	**100%**	**123.2**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

Table 21| New AIDS Diagnoses and New HIV Infections in Washoe County, 2012

	New HIV Infections			New AIDS Diagnoses		
	N	%	Rate*	N	%	Rate*
Sex						
Male	22	85%	10.3	19	90%	8.9
Female	4	15%	1.9	2	10%	1.0
Race/Ethnicity						
White, non-Hispanic	13	50%	4.6	13	62%	4.6
Black, non-Hispanic	2	8%	21.1	3	14%	31.7
Hispanic	10	38%	10.1	3	14%	3.0
Asian/Hawaiian/Pacific Islander	1	4%	3.8	0	0%	0.0
Multi-race/Other**	0	0%	N/A	2	10%	N/A
Age at Diagnosis						
< 13	0	0%	0.0	0	0%	0.0
13 to 24	5	19%	7.1	1	5%	1.4
25 to 34	7	27%	11.3	1	5%	1.6
35 to 44	9	35%	16.1	5	24%	9.0
45 to 54	5	19%	8.5	7	33%	11.9
55 to 64	0	0%	0.0	6	29%	11.7
65 +	0	0%	0.0	1	5%	2.0
Transmission Category						
MSM	19	73%	N/A	11	52%	N/A
MSM+IDU	0	0%	N/A	2	10%	N/A
IDU	0	0%	N/A	1	5%	N/A
Heterosexual contact	1	4%	N/A	3	14%	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	6	23%	N/A	4	19%	N/A
Total	**26**	**100%**	**6.1**	**21**	**100%**	**5.0**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)
** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*
*** 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.*

Table 22| Persons Living with HIV/AIDS in Washoe County, 2012

	Total			Male			Female		
	N	%	Rate*	N	%	Rate*	N	%	Rate*
Residence at Diagnosis									
Nevada	540	62%	N/A	441	59%	N/A	99	73%	N/A
Out of state	338	38%	N/A	301	41%	N/A	37	27%	N/A
Race/Ethnicity									
White, non-Hispanic	57	6%	20.3	492	66%	350.4	85	63%	60.7
Black, non-Hispanic	111	13%	1,172.8	91	12%	1,810.9	20	15%	450.5
Hispanic	146	17%	148.1	124	17%	238.7	22	16%	47.1
Asian/Hawaiian/Pacific Islander	23	3%	87.5	17	2%	138.6	6	4%	42.7
American Indian/Alaska Native	13	1%	158.8	10	1%	247.6	3	2%	72.3
Multi-race/Other	8	1%	N/A	8	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%	1.3	0	0%	0.0	1	1%	2.7
13 to 24	20	2%	28.5	19	3%	52.5	1	1%	2.9
25 to 34	108	12%	174.2	88	12%	273.3	20	15%	67.1
35 to 44	228	26%	408.8	190	26%	665.3	38	28%	139.6
45 to 54	325	37%	552.0	275	37%	923.0	50	37%	171.9
55 to 64	156	18%	303.4	136	18%	530.0	20	15%	77.6
65 +	40	5%	81.0	34	5%	150.2	6	4%	22.4
Transmission Category									
MSM	498	57%	N/A	498	67%	N/A	0	0%	N/A
IDU	89	10%	N/A	55	7%	N/A	34	25%	N/A
MSM+IDU	75	9%	N/A	75	10%	N/A	0	0%	N/A
Heterosexual contact	90	10%	N/A	22	3%	N/A	68	50%	N/A
Perinatal exposure	3	0%	N/A	1	0%	N/A	2	1%	N/A
Hemophilia/Blood Transfusion	1	0%	N/A	0	0%	N/A	1	1%	N/A
NIR/NRR	122	14%	N/A	91	12%	N/A	31	23%	N/A
Total	**878**	**100%**	**207.6**	**742**	**100%**	**347.2**	**136**	**100%**	**65.0**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)
** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

Table 23| New HIV Infections in Nevada by Race/Ethnicity, 2012

	White			Black			Hispanic			API			Multi-Race/Other†		
	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate
County at Diagnosis															
Clark County	113	88%	10.6	65	95%	35.5	102	92%	17.9	22	96%	14.5	9	100%	N/A
Washoe County	13	10%	4.6	2	5%	21.1	10	6%	10.1	1	4%	3.8	0	0%	N/A
All Other Counties**	3	2%	1.1	3	0%	71.4	1	2%	2.0	0	0%	0.0	0	0%	N/A
Sex															
Male	118	91%	14.5	48	100%	48.6	105	100%	27.8	22	96%	25.7	9	100%	N/A
Female	11	9%	1.4	22	100%	22.5	8	100%	2.4	1	4%	1.0	0	0%	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	16	12%	7.1	18	26%	47.7	31	27%	20.9	5	22%	18.3	4	44%	N/A
25 to 34	33	26%	16.0	24	34%	85.7	40	35%	32.2	10	43%	38.8	4	44%	N/A
35 to 44	34	26%	16.4	15	21%	60.2	32	28%	29.1	6	26%	21.4	1	11%	N/A
45 to 54	36	28%	14.6	6	9%	23.1	7	6%	9.5	1	4%	3.8	0	0%	N/A
55 to 64	7	5%	3.0	7	10%	36.3	3	3%	7.9	0	0%	0.0	0	0%	N/A
65 +	3	2%	1.1	0	0%	0.0	0	0%	0.0	1	4%	5.3	0	0%	N/A
Transmission Category															
Males															
MSM	87	74%	N/A	35	73%	N/A	89	85%	N/A	21	95%	N/A	9	100%	N/A
IDU	4	3%	N/A	1	2%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
MSM+IDU	12	10%	N/A	0	0%	N/A	4	4%	N/A	0	0%	N/A	0	0%	N/A
Perinatal exposure	0	0%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
Heterosexual contact	2	2%	N/A	4	8%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	13	11%	N/A	8	17%	N/A	12	11%	N/A	1	5%	N/A	0	0%	N/A
Subtotal	**118**	**100%**	**14.5**	**48**	**100%**	**48.6**	**105**	**100%**	**27.8**	**22**	**100%**	**25.7**	**9**	**100%**	**N/A**
Females															
IDU	3	27%	N/A	1	5%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
Heterosexual contact	3	27%	N/A	4	18%	N/A	3	38%	N/A	1	100%	N/A	0	0%	N/A
Perinatal exposure	0	0%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
NIR/NRR	5	45%	N/A	17	77%	N/A	5	63%	N/A	0	0%	N/A	0	0%	N/A
Subtotal	**11**	**100%**	**1.4**	**22**	**100%**	**22.5**	**8**	**100%**	**2.4**	**1**	**100%**	**1.0**	**0**	**0%**	**N/A**
Total	**129**	**100%**	**8.0**	**70**	**100%**	**35.6**	**113**	**100%**	**15.7**	**23**	**100%**	**12.5**	**9**	**100%**	**N/A**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

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

†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.

Table 24| Persons Living with HIV/AIDS in Nevada by Race/Ethnicity, 2012

	White			Black			Hispanic			API			AI/AN			Multi-race/Other		
	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate
County of Residence																		
Clark County	3,502	81%	328.0	1,964	92%	1,073.5	1,678	89%	294.8	256	90%	168.5	51	72%	304.4	67	84%	N/A
Washoe County	577	13%	205.8	111	5%	1,172.8	146	8%	148.1	23	8%	87.5	13	18%	158.8	8	10%	N/A
All Other Counties**	266	#DIV/0!	99.3	52	2%	1,237.7	61	3%	122.0	5	2%	89.4	7	10%	62.5	5	6%	N/A
Sex																		
Male	3,820	88%	471.0	1,510	71%	1,530.1	1,665	88%	440.5	246	87%	287.5	53	75%	301.3	72	90%	N/A
Female	525	12%	65.2	617	29%	630.1	220	12%	64.7	38	13%	38.7	18	25%	97.0	8	10%	N/A
Age at End of Year																		
Missing	29	1%	N/A	11	1%	N/A	14	1%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
< 13	1	0%	0.5	5	0%	11.7	4	0%	2.0	0	0%	0.0	0	0%	0.0	0	0%	N/A
13 to 24	58	1%	25.6	127	6%	336.5	86	5%	57.9	16	6%	58.7	2	3%	30.8	8	10%	N/A
25 to 34	355	8%	172.1	373	18%	1,331.8	411	22%	330.6	68	24%	263.6	15	21%	264.8	17	21%	N/A
35 to 44	825	19%	398.1	520	24%	2,086.5	602	32%	546.9	82	29%	292.3	15	21%	298.5	15	19%	N/A
45 to 54	1,614	37%	654.9	703	33%	2,701.7	524	28%	714.7	78	27%	298.4	24	34%	458.5	31	39%	N/A
55 to 64	708	16%	304.7	328	15%	1,700.6	200	11%	526.6	31	11%	148.3	12	17%	298.2	6	8%	N/A
65 +	230	5%	83.3	60	3%	337.2	44	2%	175.9	9	3%	47.7	3	4%	82.3	3	4%	N/A
Transmission Category																		
Males																		
MSM	2,898	76%	N/A	1,022	68%	N/A	1,322	79%	N/A	222	90%	N/A	39	74%	N/A	52	72%	N/A
IDU	258	7%	N/A	156	10%	N/A	72	4%	N/A	2	1%	N/A	5	9%	N/A	4	6%	N/A
MSM+IDU	358	9%	N/A	82	5%	N/A	81	5%	N/A	12	5%	N/A	6	11%	N/A	9	13%	N/A
Heterosexual contact	78	358%	N/A	107	7%	N/A	72	4%	N/A	4	2%	N/A	1	2%	N/A	2	3%	N/A
Perinatal exposure	10	0%	N/A	16	1%	N/A	7	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	211	6%	N/A	127	8%	N/A	111	7%	N/A	6	2%	N/A	2	4%	N/A	5	7%	N/A
Subtotal	**3,820**	**100%**	**471.0**	**1,510**	**100%**	**1,530.1**	**1,665**	**100%**	**440.5**	**246**	**100%**	**291.0**	**53**	**100%**	**303.6**	**72**	**100%**	**N/A**
Females																		
IDU	144	27%	N/A	78	13%	N/A	22	10%	N/A	2	5%	N/A	4	22%	N/A	1	13%	N/A
Heterosexual contact	277	53%	N/A	386	63%	N/A	153	70%	N/A	31	82%	N/A	10	56%	N/A	6	75%	N/A
Perinatal exposure	9	2%	N/A	19	3%	N/A	5	2%	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	92	18%	N/A	134	22%	N/A	40	18%	N/A	4	11%	N/A	4	22%	N/A	1	13%	N/A
Subtotal	**525**	**100%**	**65.5**	**617**	**100%**	**630.1**	**220**	**100%**	**64.7**	**38**	**100%**	**38.7**	**18**	**100%**	**97.0**	**8**	**100%**	**N/A**
Total	**4,345**	**100%**	**269.9**	**2,127**	**100%**	**1,095.5**	**1,885**	**100%**	**262.6**	**284**	**100%**	**154.5**	**71**	**100%**	**196.4**	**80**	**100%**	**N/A**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

***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, 2012

	<13			13 to 24			25 to 34			35 to 44			45 to 54			55 to 64			65+		
	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate
County at Diagnosis																					
Clark County	0	0%	0.0	68	92%	21.2	103	93%	36.2	77	88%	27.4	42	48%	15.6	17	100%	7.9	4	100%	1.9
Washoe County	0	0%	0.0	5	7%	7.1	7	6%	11.3	9	10%	16.1	5	6%	8.5	0	0%	0.0	0	0%	0.0
All Other Counties**	0	0%	0.0	1	1%	1.8	1	1%	2.3	2	2%	5.2	3	3%	6.2	0	0%	0.0	0	0%	0.0
Sex																					
Male	0	0%	0.0	71	96%	30.9	100	90%	49.3	74	84%	38.0	42	48%	21.7	11	65%	7.1	4	100%	2.6
Female	0	0%	0.0	3	4%	1.4	11	10%	5.9	14	16%	7.8	8	9%	4.4	6	35%	3.8	0	0%	0.0
Race/Ethnicity																					
White, non-Hispanic	0	0%	0.0	16	22%	7.1	33	30%	16.0	34	39%	16.4	36	41%	14.6	7	41%	3.0	3	75%	1.1
Black, non-Hispanic	0	0%	0.0	18	24%	47.7	24	22%	85.7	15	17%	60.2	6	7%	23.1	7	41%	36.3	0	0%	0.0
Hispanic	0	0%	0.0	31	42%	20.9	40	36%	32.2	32	36%	29.1	7	8%	9.5	3	18%	7.9	0	0%	0.0
Asian/Hawaiian/Pacific Islander	0	0%	0.0	5	7%	18.3	10	9%	38.8	6	7%	21.4	1	1%	3.8	0	0%	0.0	1	25%	5.3
Multi-race/Other†	0	0%	N/A	4	5%	N/A	4	4%	N/A	1	1%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
Transmission Category																					
Males																					
MSM	0	0%	N/A	62	87%	N/A	83	83%	N/A	56	76%	N/A	30	100%	N/A	6	100%	N/A	4	100%	N/A
IDU	0	0%	N/A	0	0%	N/A	2	2%	N/A	3	4%	N/A	0	0%	N/A	0	0%	N/A	0	0%	N/A
MSM+IDU	0	0%	N/A	4	6%	N/A	7	7%	N/A	2	3%	N/A	2	0%	N/A	1	0%	N/A	0	0%	N/A
Heterosexual contact	0	0%	N/A	2	3%	N/A	1	1%	N/A	2	3%	N/A	1	0%	N/A	0	0%	N/A	0	0%	N/A
Perinatal exposure	0	0%	N/A	0	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	0	0%	N/A	3	4%	N/A	7	7%	N/A	11	15%	N/A	9	0%	N/A	4	0%	N/A	0	0%	N/A
Subtotal	**0**	**0%**	**0.0**	**71**	**100%**	**30.9**	**100**	**100%**	**49.3**	**74**	**100%**	**38.0**	**42**	**0%**	**21.7**	**11**	**100%**	**7.1**	**4**	**100%**	**2.6**
Females																					
IDU	0	0%	N/A	0	0%	N/A	2	18%	N/A	0	0%	N/A	2	4%	N/A	0	0%	N/A	0	0%	N/A
Heterosexual contact	0	0%	N/A	1	33%	N/A	2	18%	N/A	6	43%	N/A	1	2%	N/A	1	100%	N/A	0	0%	N/A
Perinatal exposure	0	0%	N/A	0	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	0	0%	N/A	2	67%	N/A	7	64%	N/A	8	57%	N/A	5	10%	N/A	5	0%	N/A	0	0%	N/A
Subtotal	**0**	**0%**	**0.0**	**3**	**100%**	**1.4**	**11**	**100%**	**5.9**	**14**	**100%**	**7.8**	**8**	**16%**	**4.4**	**6**	**100%**	**3.8**	**0**	**100%**	**0.0**
Total	**0**	**100%**	**0.0**	**74**	**100%**	**16.6**	**111**	**100%**	**28.5**	**88**	**100%**	**23.4**	**50**	**100%**	**13.3**	**17**	**100%**	**5.4**	**4**	**100%**	**1.2**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

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

†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†, 2012

	<13			13 to 24			25 to 34			35 to 44			45 to 54			55 to 64			65+		
	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate	n	%	Rate
County of Residence																					
Clark County	10	91%	2.6	279	90%	86.8	1,144	88%	402.6	1,894	86%	674.6	2,679	85%	992.7	1,146	84%	530.2	308	82%	142.5
Washoe County	1	9%	1.3	20	6%	28.5	108	8%	174.2	228	10%	408.8	325	10%	552.0	156	11%	303.4	40	11%	77.8
All Other Counties**	0	0%	0.0	10	3%	18.2	49	4%	111.8	86	4%	221.9	158	5%	326.3	65	5%	138.5	28	7%	59.7
Sex																					
Male	5	45%	1.9	258	83%	112.1	1,085	83%	535.2	1,800	82%	924.0	2,704	86%	1,394.4	1,148	84%	738.3	316	84%	204.1
Female	6	55%	2.4	51	17%	23.6	216	17%	115.3	408	18%	226.1	458	14%	249.9	219	16%	137.7	60	16%	32.2
Race/Ethnicity																					
White, non-Hispanic	2	45%	0.9	70	41%	30.9	417	29%	202.2	974	24%	470.0	1,802	22%	731.1	790	24%	340.0	257	16%	93.1
Black, non-Hispanic	5	36%	11.7	127	28%	336.5	373	32%	1,331.8	520	27%	2,086.5	703	17%	2,701.7	328	15%	1,700.6	60	12%	337.2
Hispanic	4	0%	2.0	86	5%	57.9	411	5%	330.6	602	4%	546.9	524	2%	714.7	200	2%	526.6	44	2%	175.9
Asian/Hawaiian/Pacific Islander	0	0%	0.0	16	1%	58.7	68	1%	263.6	82	1%	292.3	78	1%	298.4	31	1%	148.3	9	1%	47.7
American Indian/Alaska Native	0	0%	0.0	2	3%	30.8	15	1%	264.8	15	1%	298.5	24	1%	458.5	12	0%	298.2	3	1%	82.3
Multi-race/Other	0	0%	N/A	8	0%	N/A	17	0%	N/A	15	0%	N/A	31	0%	N/A	6	0%	N/A	3	0%	N/A
Transmission Category																					
Males																					
MSM	0	0%	N/A	207	80%	N/A	906	84%	N/A	1,420	79%	N/A	1980	73%	N/A	771	67%	N/A	235	74%	N/A
IDU	0	0%	N/A	1	0%	N/A	18	2%	N/A	82	5%	N/A	225	8%	N/A	145	13%	N/A	23	7%	N/A
MSM+IDU	0	0%	N/A	12	5%	N/A	76	7%	N/A	129	7%	N/A	227	8%	N/A	91	8%	N/A	12	4%	N/A
Heterosexual contact	0	0%	N/A	4	50%	N/A	31	60%	N/A	62	58%	N/A	108	67%	N/A	46	49%	N/A	13	4%	N/A
Perinatal exposure	5	100%	N/A	26	10%	N/A	2	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	0	0%	N/A	8	3%	N/A	52	5%	N/A	106	6%	N/A	161	6%	N/A	93	8%	N/A	32	10%	N/A
Subtotal	**5**	**100%**	**1.9**	**258**	**100%**	**112.1**	**1,085**	**100%**	**535.2**	**1,800**	**100%**	**924.0**	**2,704**	**100%**	**1,394.4**	**1,148**	**100%**	**738.3**	**316**	**100%**	**204.1**
Females																					
IDU	0	0%	N/A	1	2%	N/A	18	8%	N/A	59	14%	N/A	107	23%	N/A	57	26%	N/A	6	10%	N/A
Heterosexual contact	0	0%	N/A	18	35%	N/A	136	63%	N/A	270	66%	N/A	264	58%	N/A	128	58%	N/A	46	77%	N/A
Perinatal exposure	5	83%	N/A	25	49%	N/A	3	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	14%	N/A	58	27%	N/A	79	19%	N/A	84	18%	N/A	34	16%	N/A	8	13%	N/A
Subtotal	**6**	**100%**	**2.4**	**51**	**100%**	**23.6**	**216**	**100%**	**115.3**	**408**	**100%**	**226.1**	**458**	**100%**	**249.9**	**219**	**100%**	**137.7**	**60**	**100%**	**32.2**
Total	**11**	**100%**	**2.2**	**309**	**100%**	**69.2**	**1,301**	**100%**	**333.6**	**2,208**	**100%**	**588.4**	**3,162**	**100%**	**838.3**	**1,367**	**100%**	**434.6**	**376**	**100%**	**110.1**

Source: Division of Public and Behavioral Health HIV/AIDS Reporting System (eHARS), (February 2013)

** Rates per 100,000 population were calculated using 2012 population projections from the Nevada State Demographer vintage 2012 data.*

***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 2012. Data for these persons were not included in this table.

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