



Public Health
Communicable Disease Section

STD/HIV Update 2019

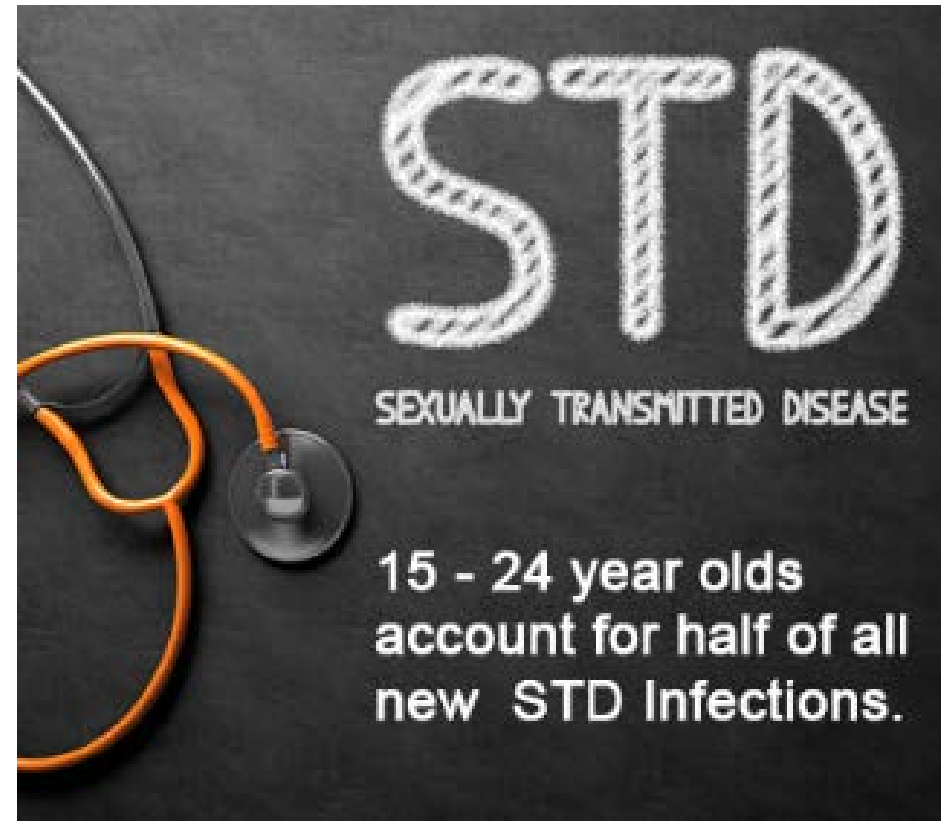
Valerie Dulay
Epidemiologist
May 8, 2019



Source: Centers for Disease Control and Prevention (CDC)

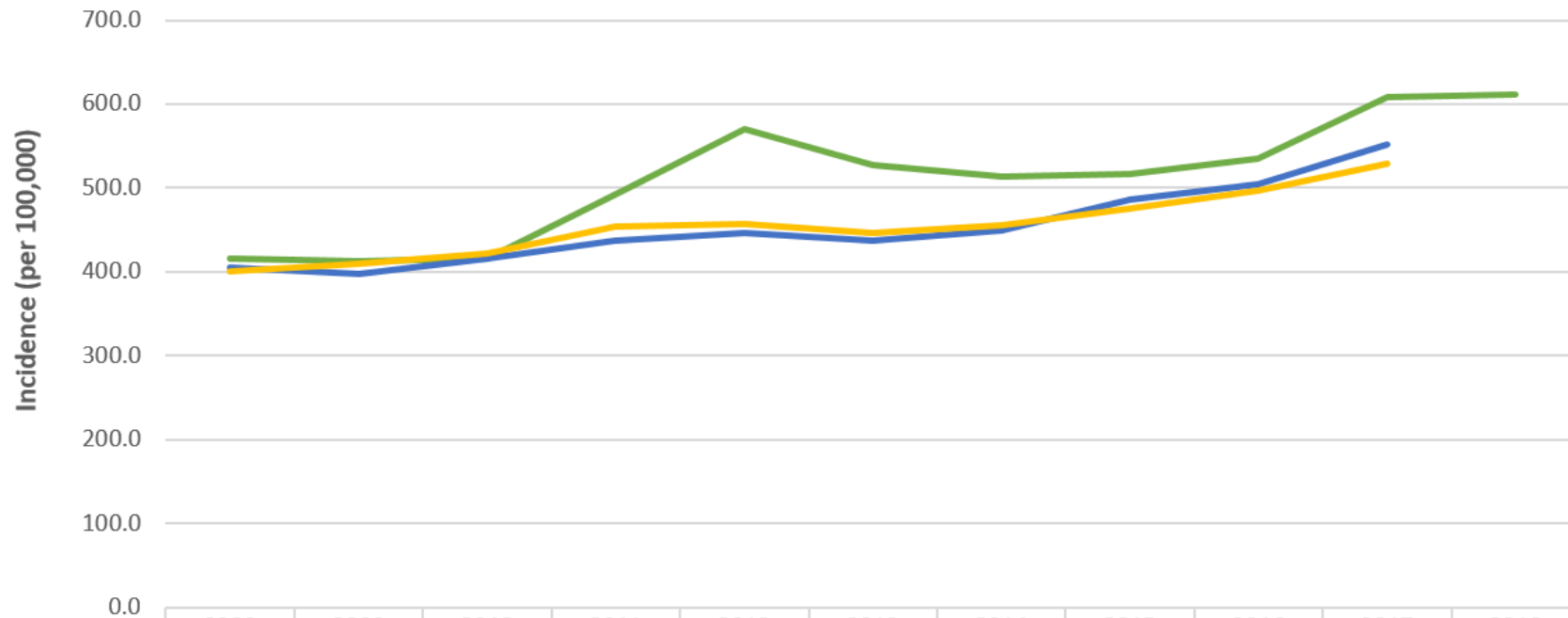
- Reportable conditions by providers and laboratories
 - Chlamydia, Gonorrhea & Syphilis (including congenital syphilis)
 - Not reported: Herpes, HPV, NGU, Scabies & Lice
- San Bernardino County received **21,090** STD reports in 2018
 - Increased by **3%** from 2017
- Communicable Disease Investigators (CDIs) follow
 - Untreated cases and partners
 - Priority cases: very young, pregnant, juvie & HIV-coinfected

- Burden of disease shifting to younger demographic
 - Short duration of relationships common
 - Tend to have more partners due to online dating culture
 - Lack of access to health information and services
- 2018 cases in the 15-24 age range:
 - 60% positive for chlamydia
 - 40% positive for gonorrhea
 - 29% staged primary and secondary syphilis
 - 32% gave birth to a baby with congenital syphilis
 - 24% new HIV cases (2017)



Chlamydia Incidence Rates

Incidence Rates for Chlamydia in San Bernardino County, California, and the United States, 2008-2018

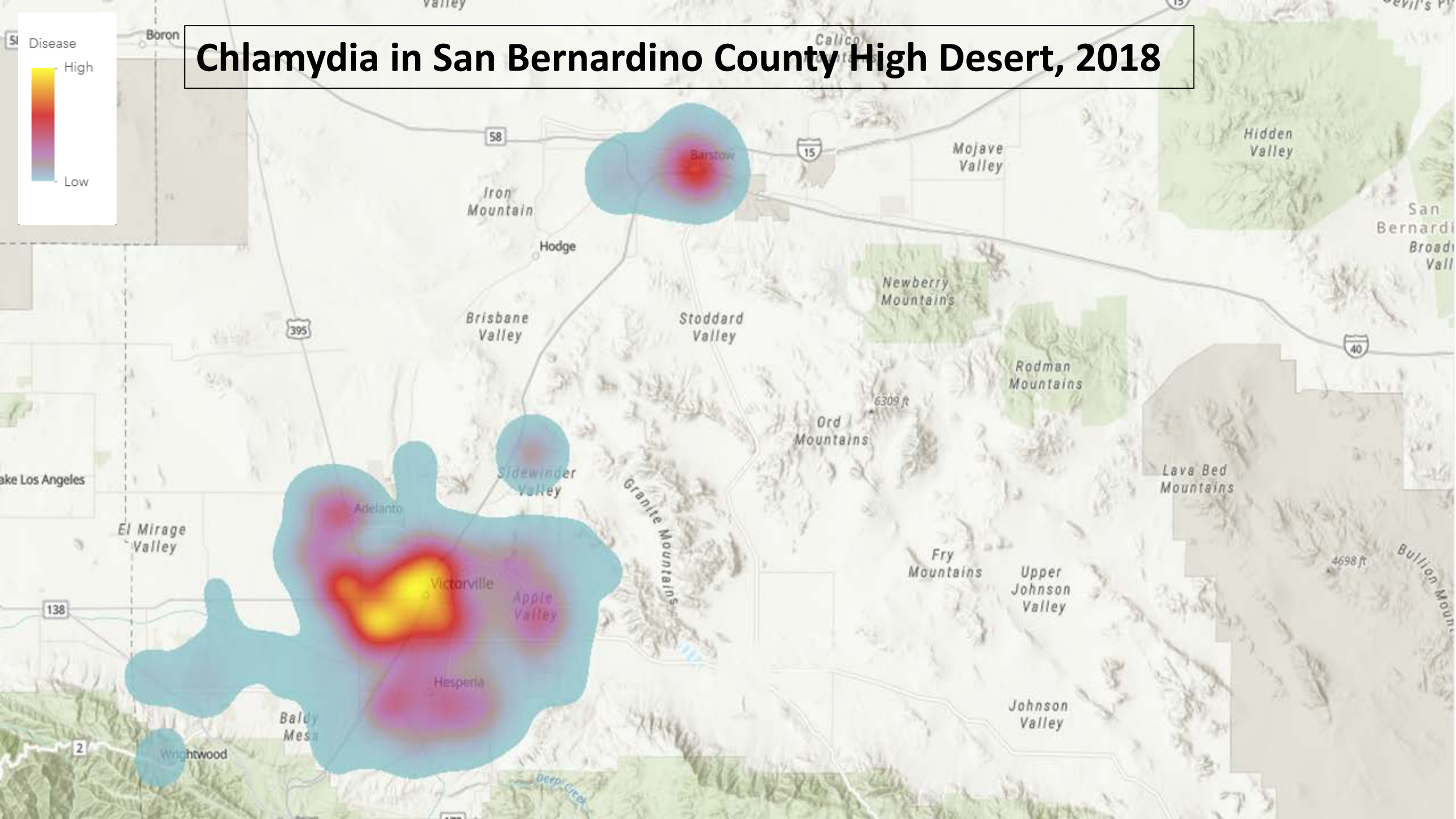


	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
San Bernardino County*	416.0	413.6	416.3	491.7	570.8	528.0	513.1	516.6	535.7	607.9	612.2
California**	405.0	398.1	416.0	437.2	446.0	437.2	450.3	486.1	504.4	552.1	
United States**	401.3	409.2	422.8	453.4	456.9	446.6	456.1	475.0	497.3	528.8	

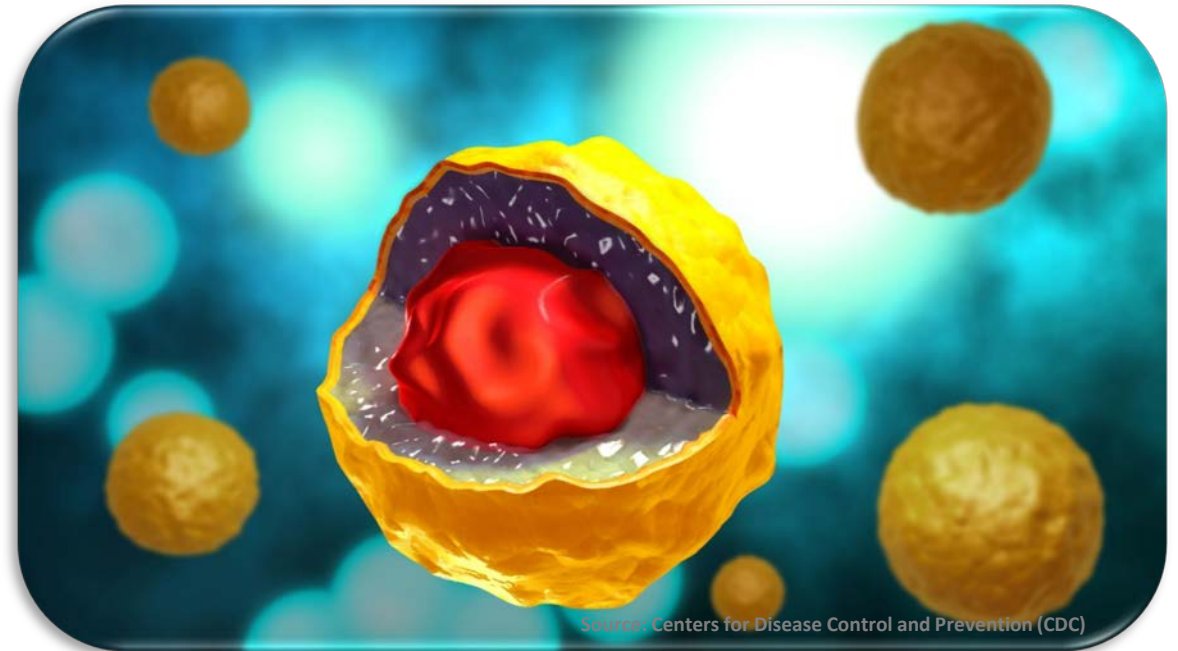
*2018 data for San Bernardino County is preliminary.

**CA and US data for 2018 were not available at the time this report was published.

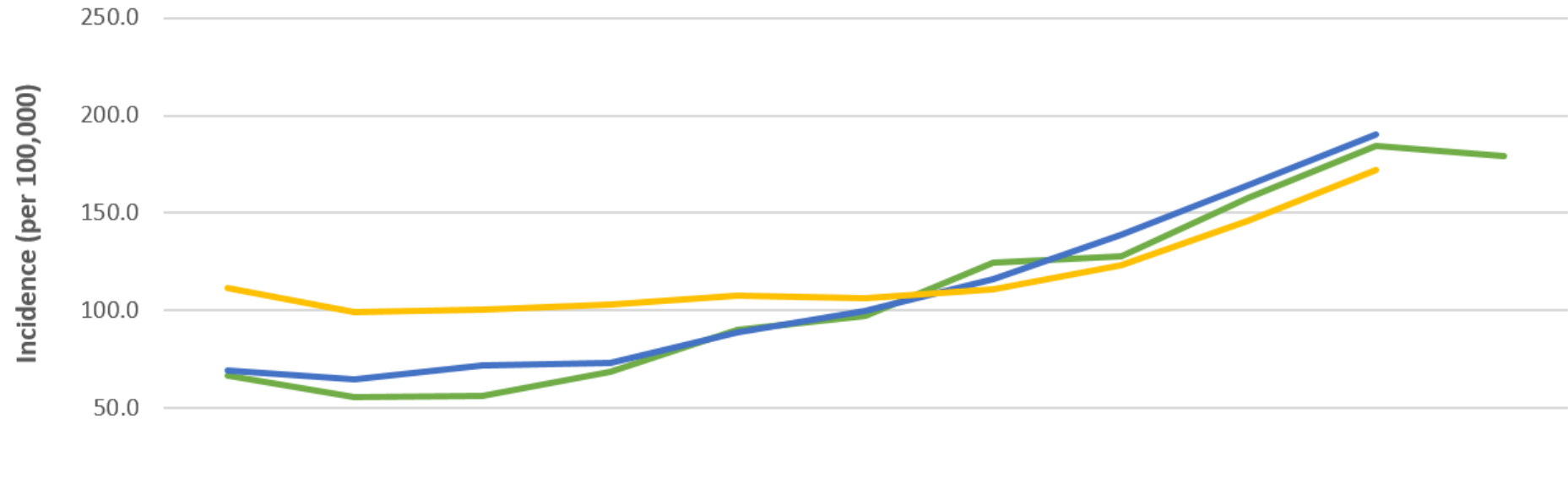
Chlamydia in San Bernardino County High Desert, 2018



- Total of 13,382 reports received in 2018
 - 13,376 of which were confirmed, probable or suspect cases
- Females accounted for 70% of all cases
 - 15-24 years of age accounted for 64% of female cases
- A majority of cases were asymptomatic
 - Only 8% showed signs/symptoms
- Becoming re-infected is possible even after treatment
 - CDPH states that nearly 14% of women become re-infected within months of treatment
- Untreated females may experience complications with their pregnancy or reproductive health



Incidence Rates for Gonorrhea in San Bernardino County, California, and the United States, 2008-2018

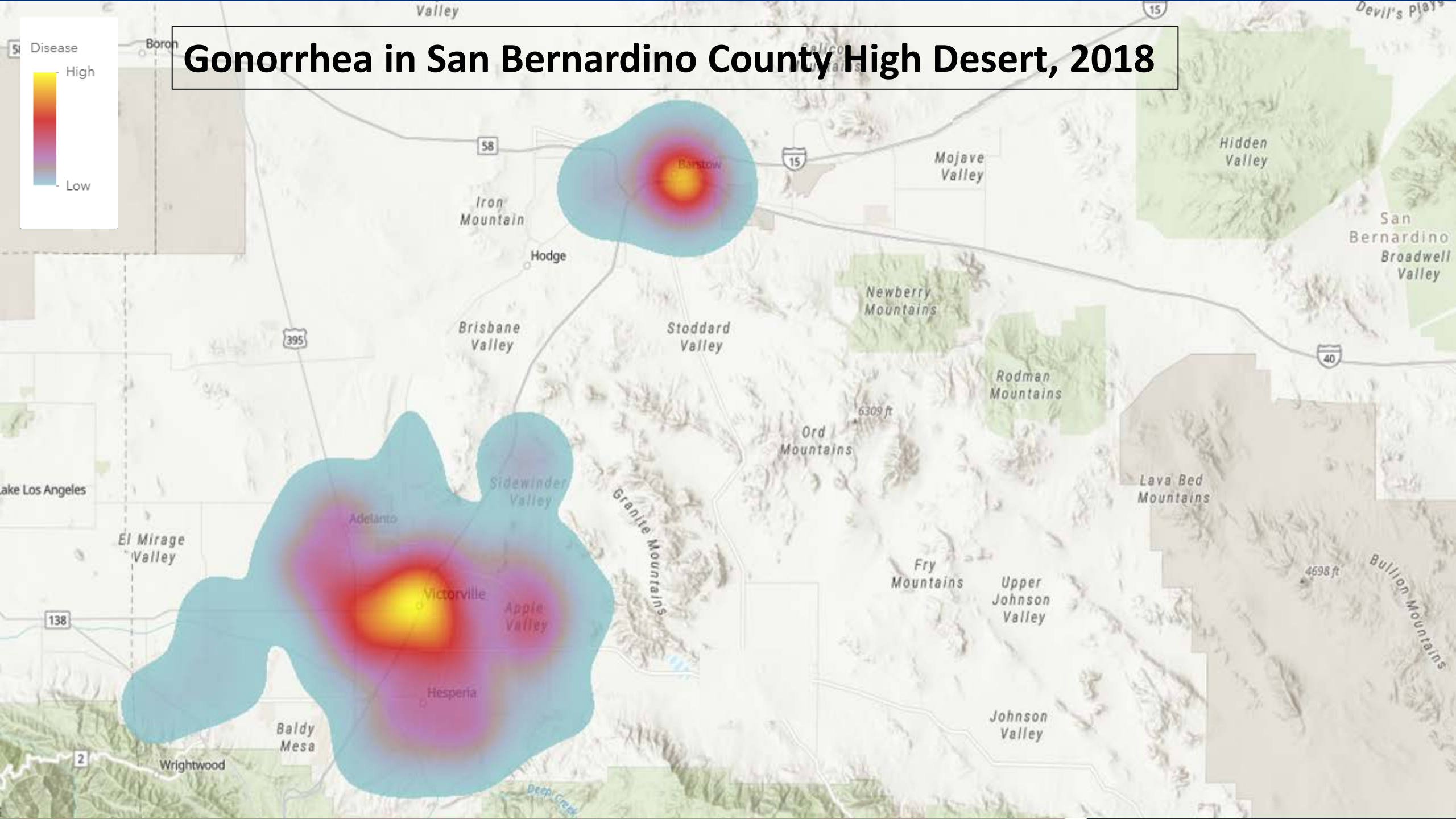
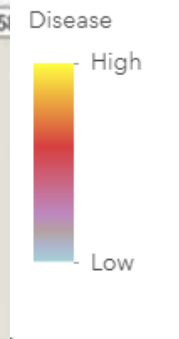


	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
San Bernardino County*	66.7	55.6	56.3	68.6	90.1	97.2	124.5	127.9	157.5	184.3	178.9
California**	69.2	64.8	71.9	72.9	88.8	99.9	116.1	138.9	164.3	190.5	
United States**	111.6	99.1	100.8	103.3	107.5	106.1	110.7	123.0	145.8	171.9	

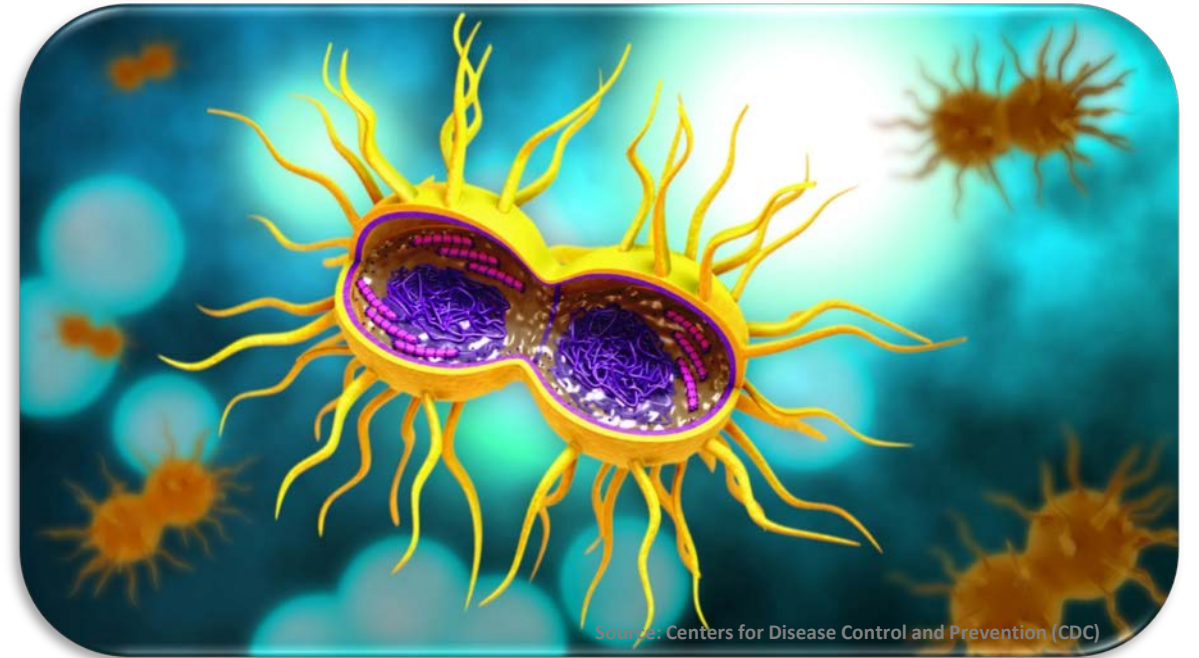
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Gonorrhea in San Bernardino County High Desert, 2018

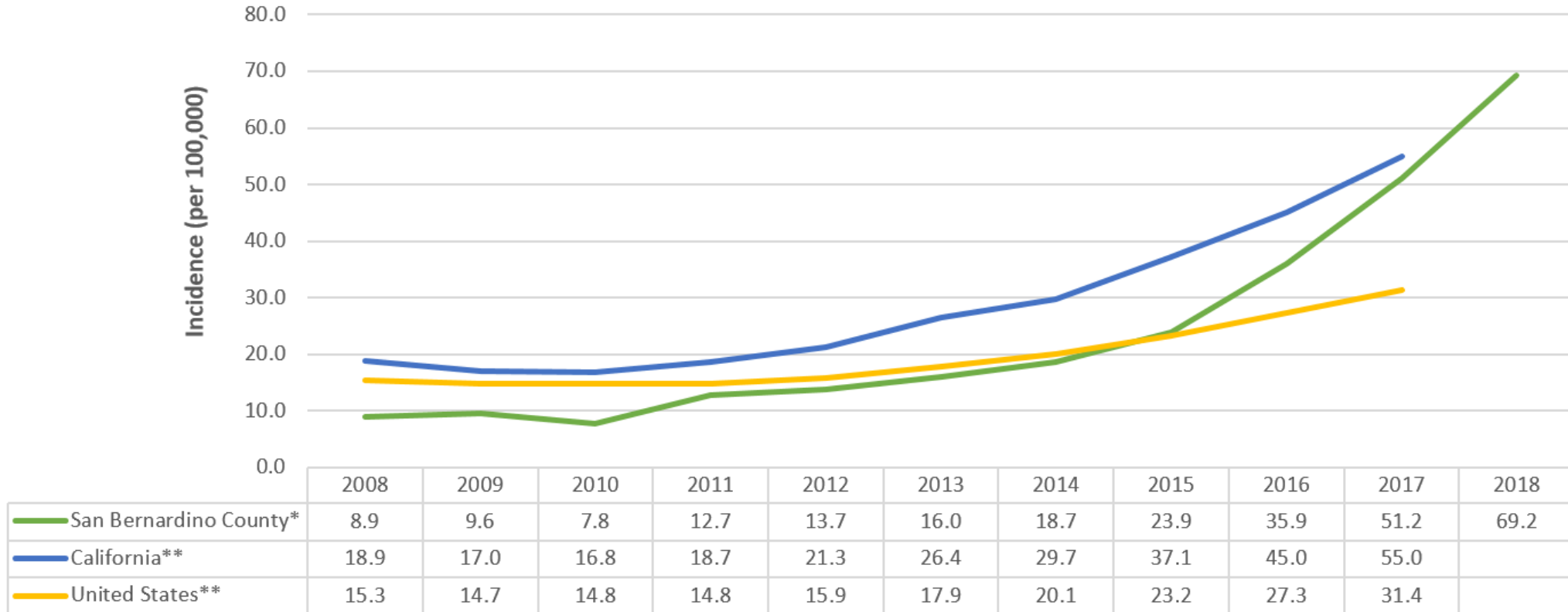


- Total of 3,940 reports received in 2018
 - 3,909 of which were confirmed, probable or suspect cases
- Males accounted for 54% of all cases
 - MSM accounted for 12% of male cases
 - CDPH states that MSM should be tested at all anatomic sites of exposure
 - Urine only testing can miss extra genital infections
 - MSM are more likely to be co-infected with HIV
- Becoming re-infected is possible even after treatment
 - CDPH states that nearly 12% of women become re-infected within months of treatment
- CDC has labeled resistance in Gonorrhea an urgent threat
 - 30% of isolates have some resistance to an antibiotic
 - Two antibiotics are now required for treatment – last line of defense



Syphilis (All Stages) Incidence Rates

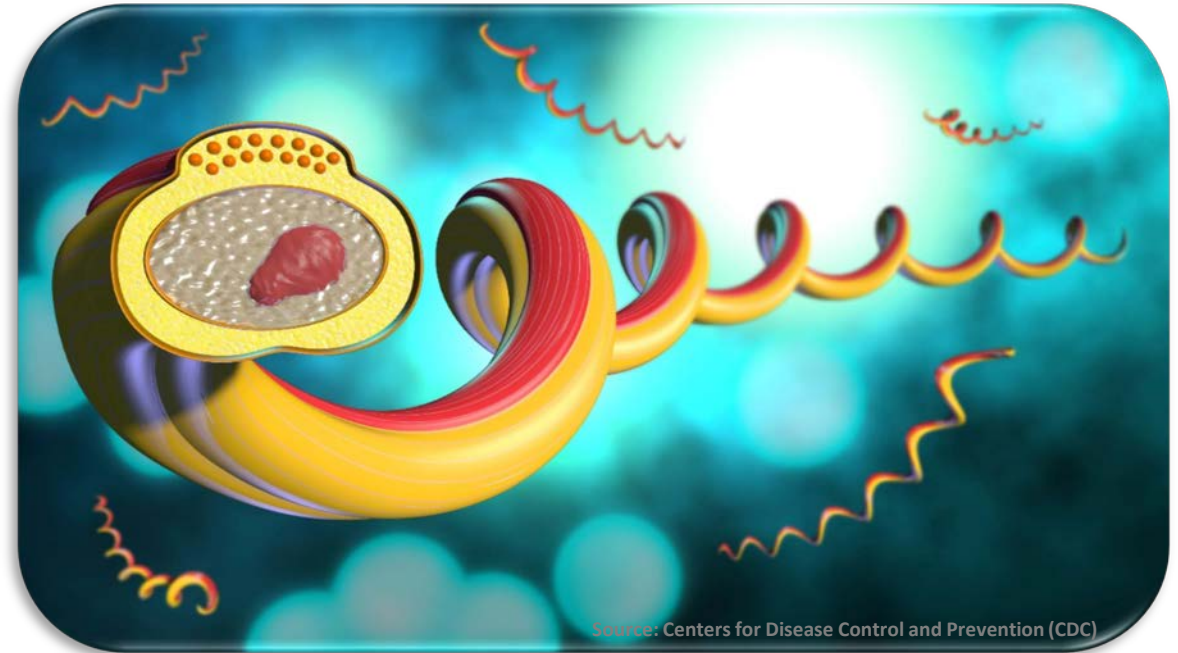
Incidence Rates for Syphilis (All Stages) in San Bernardino County, California, and the United States, 2008-2018



*2018 data for San Bernardino County is preliminary

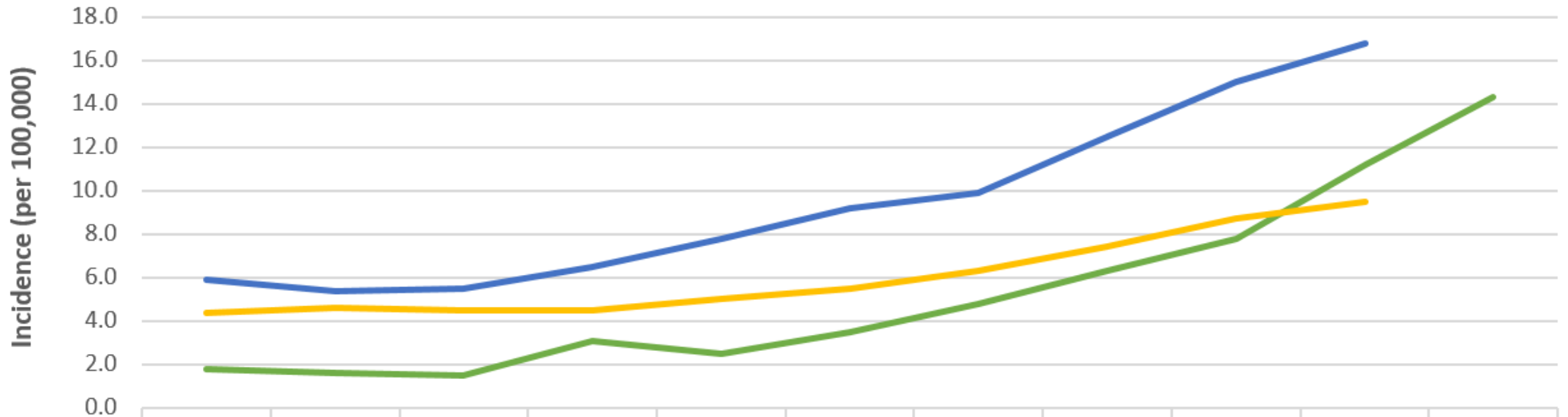
**CA and US data for 2018 were not available at the time this report was published.

- Annually, the number of cases are increasing nationwide
- Total of 3,680 reports received in 2018
 - 1,512 of which were confirmed or probable cases
- Males accounted for 67% of all cases
 - MSM accounted for 38% of male cases
 - 36% are also co-infected with HIV
- The number of female cases have nearly tripled since 2016
 - Risk of congenital syphilis if untreated during pregnancy



Syphilis (Primary & Secondary) Incidence Rates

Incidence Rates for Syphilis (Primary & Secondary) in San Bernardino County, California, and the United States, 2008-2018

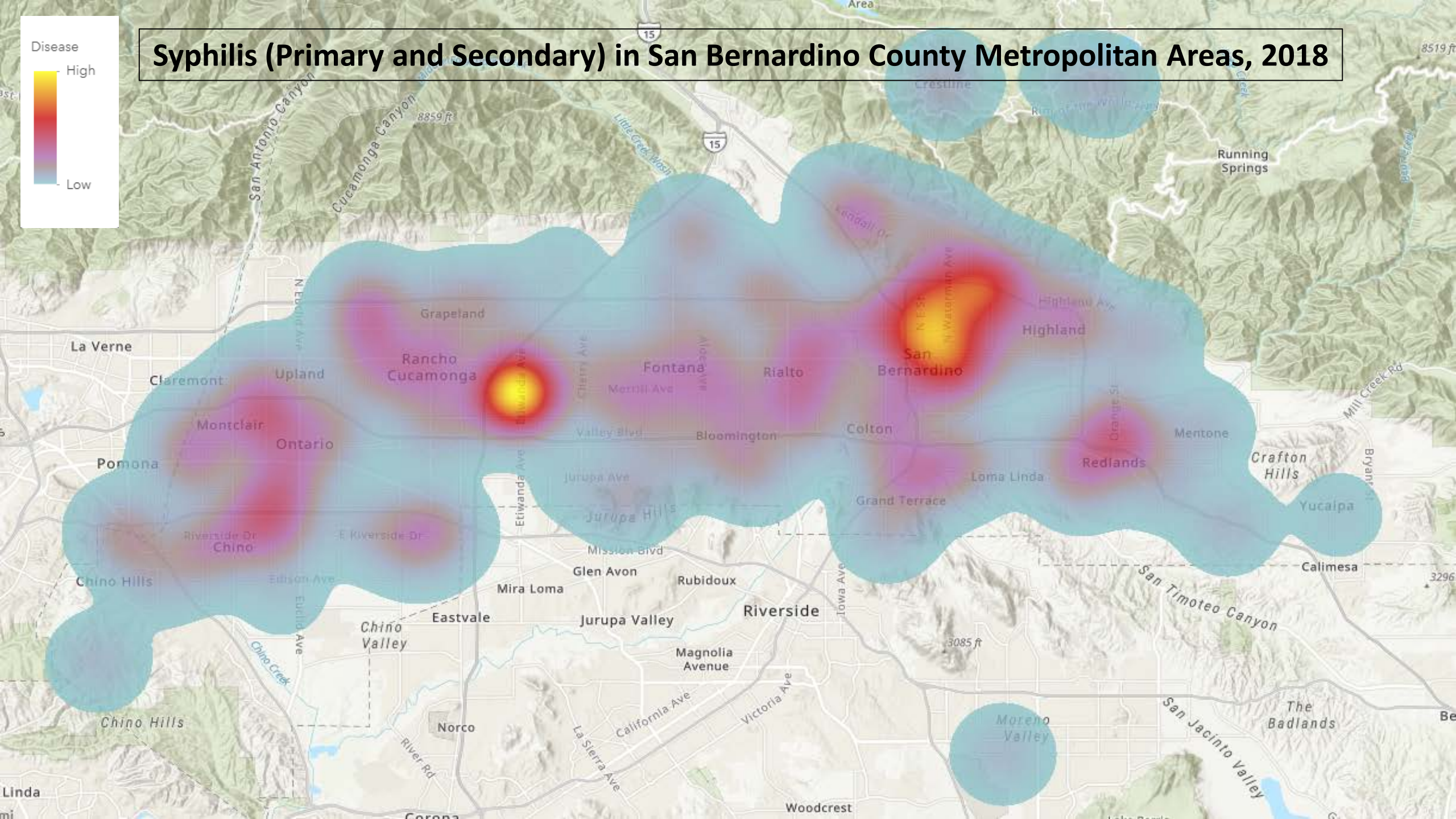
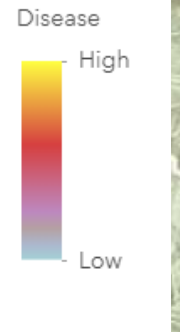


	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
San Bernardino County*	1.8	1.6	1.5	3.1	2.5	3.5	4.8	6.3	7.8	11.18	14.3
California**	5.9	5.4	5.5	6.5	7.8	9.2	9.9	12.5	15.0	16.8	
United States**	4.4	4.6	4.5	4.5	5.0	5.5	6.3	7.4	8.7	9.5	

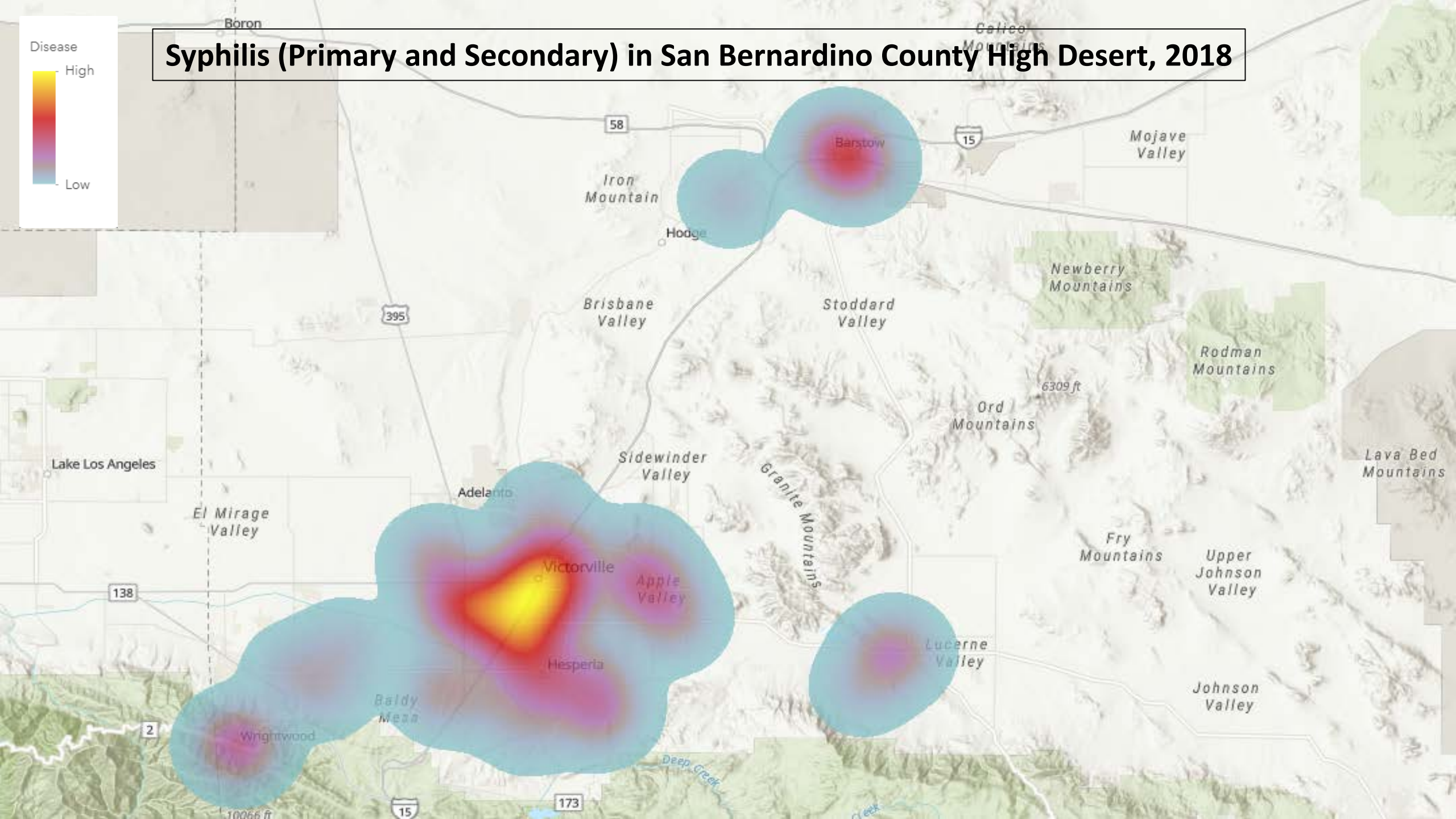
*2018 data for San Bernardino County is preliminary.

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Syphilis (Primary and Secondary) in San Bernardino County Metropolitan Areas, 2018

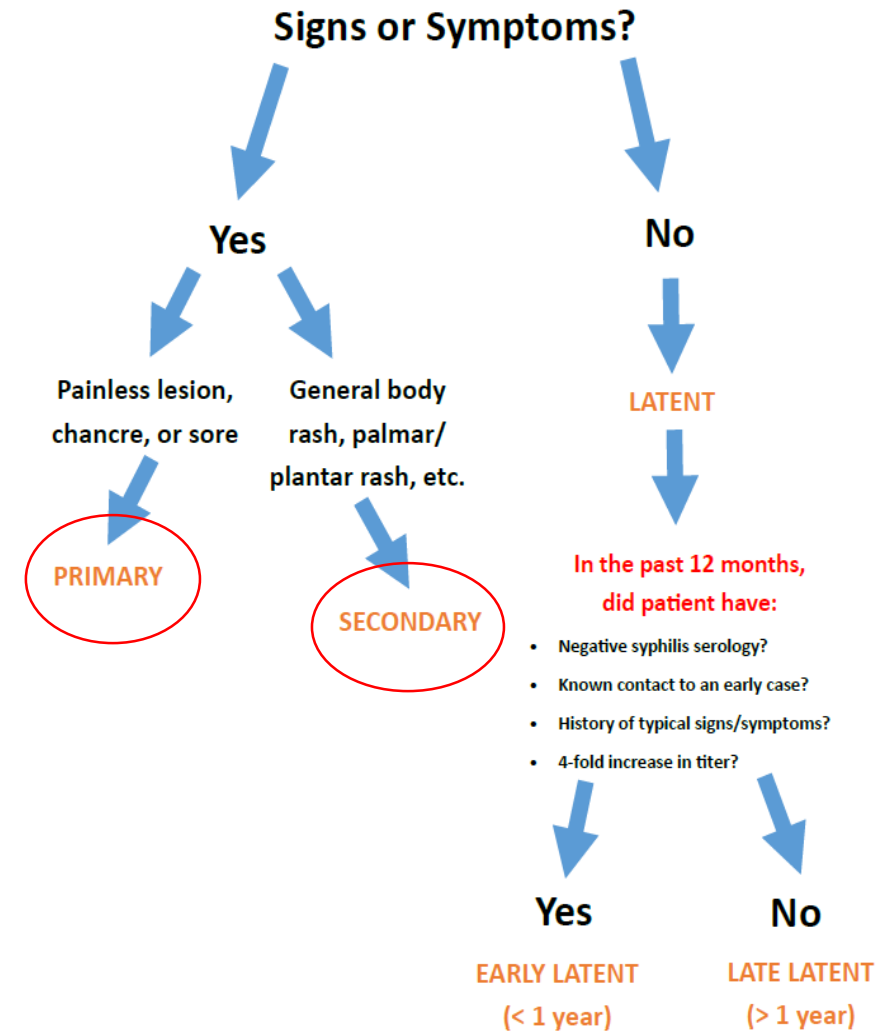


Syphilis (Primary and Secondary) in San Bernardino County High Desert, 2018



Syphilis (Primary & Secondary)

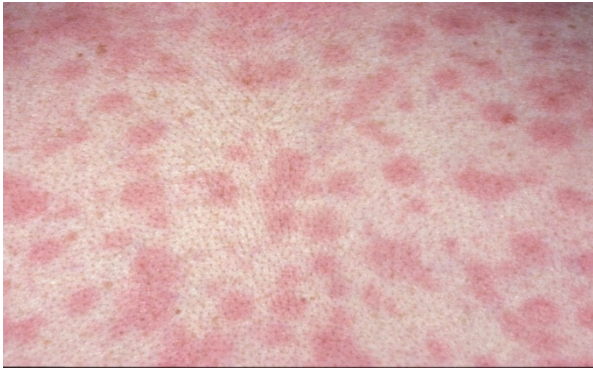
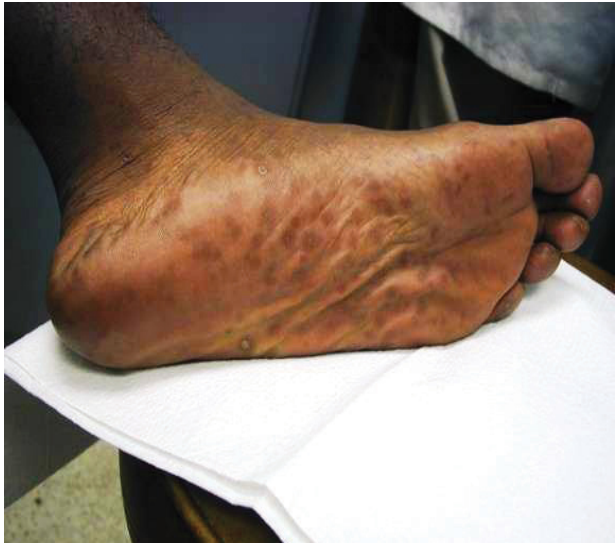
- In 2017, San Bernardino County ranked #31 in primary and secondary syphilis case numbers compared to all U.S. counties
- Total of 333 reports received in 2018
 - 313 of which were confirmed or probable cases
- Males accounted for 80% of all cases
- Primary and secondary syphilis are the most infectious stages of syphilis
 - Signs and symptoms associated with each stage
 - Treatment for both stages are the same



Primary

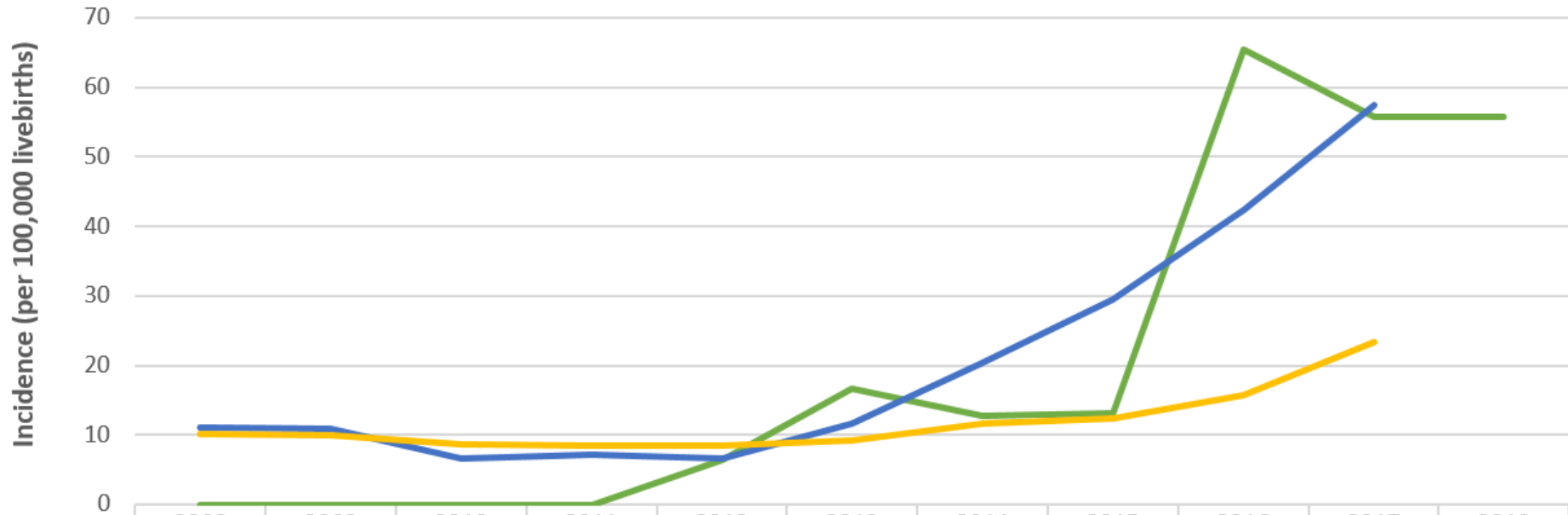


Secondary



Syphilis (Congenital) Incidence Rates

Incidence Rates for Syphilis (Congenital) in San Bernardino County, California, and the United States, 2008-2018



	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
San Bernardino County*	0	0	0	0	6.5	16.6	12.8	13.1	65.5	55.7	55.7
California**	11	10.8	6.7	7.2	6.6	11.7	20.3	29.5	42.4	57.5	
United States**	10.1	10	8.7	8.5	8.4	9.2	11.6	12.3	15.7	23.3	

*2018 data for San Bernardino County is preliminary.

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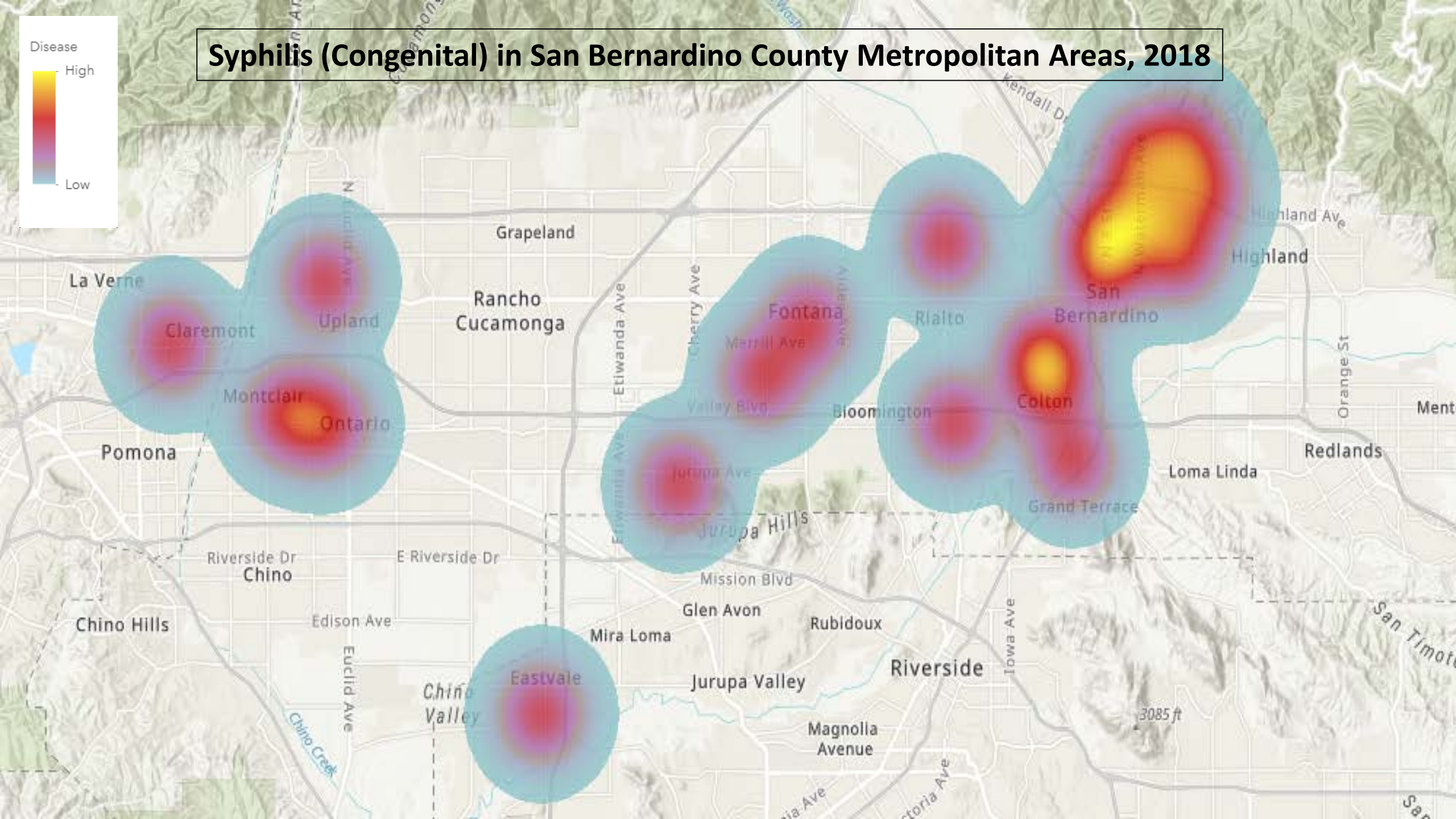
Syphilis (Congenital) in San Bernardino County Metropolitan Areas, 2018

Disease

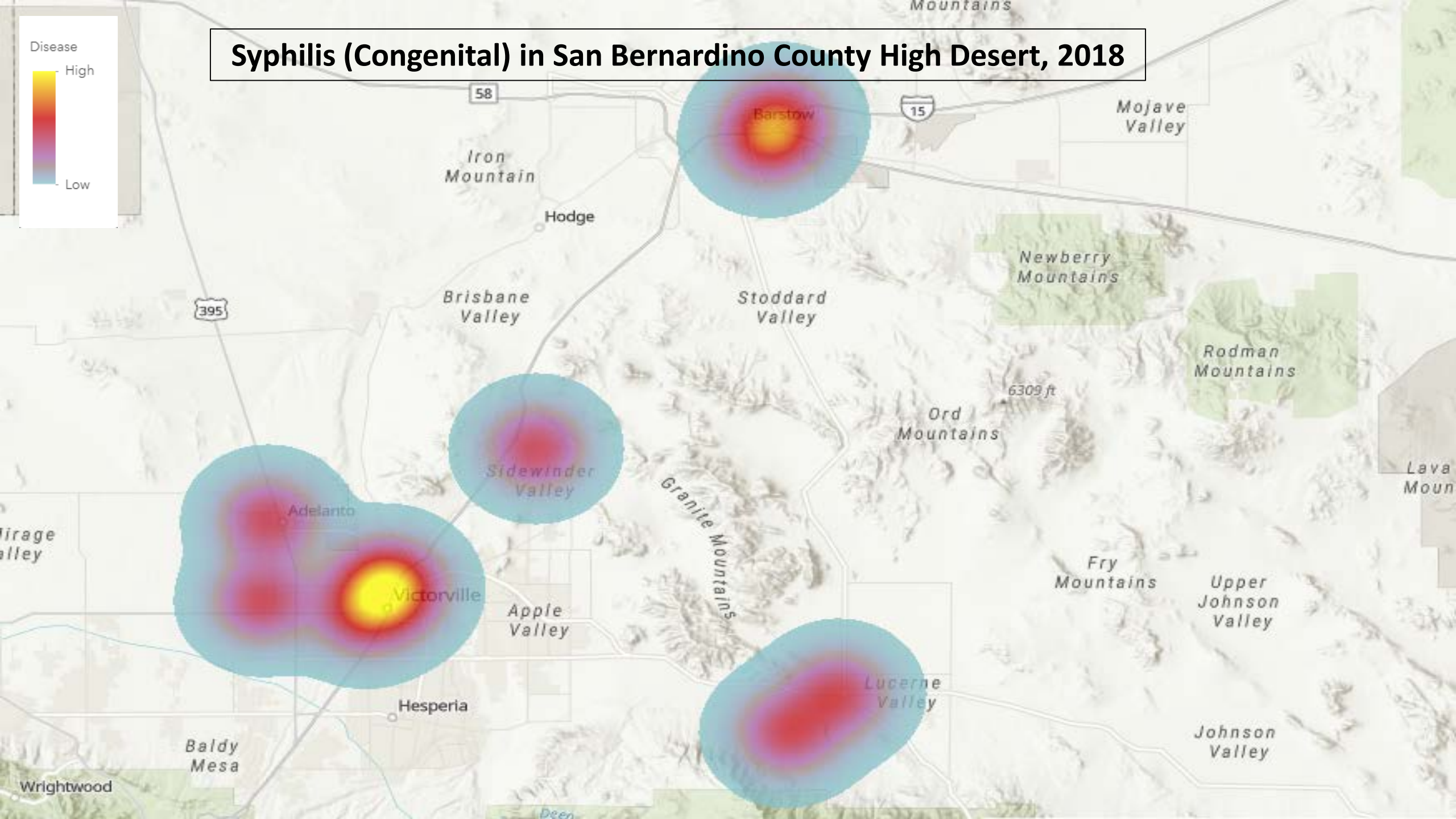
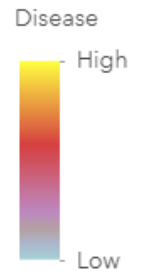
High



Low



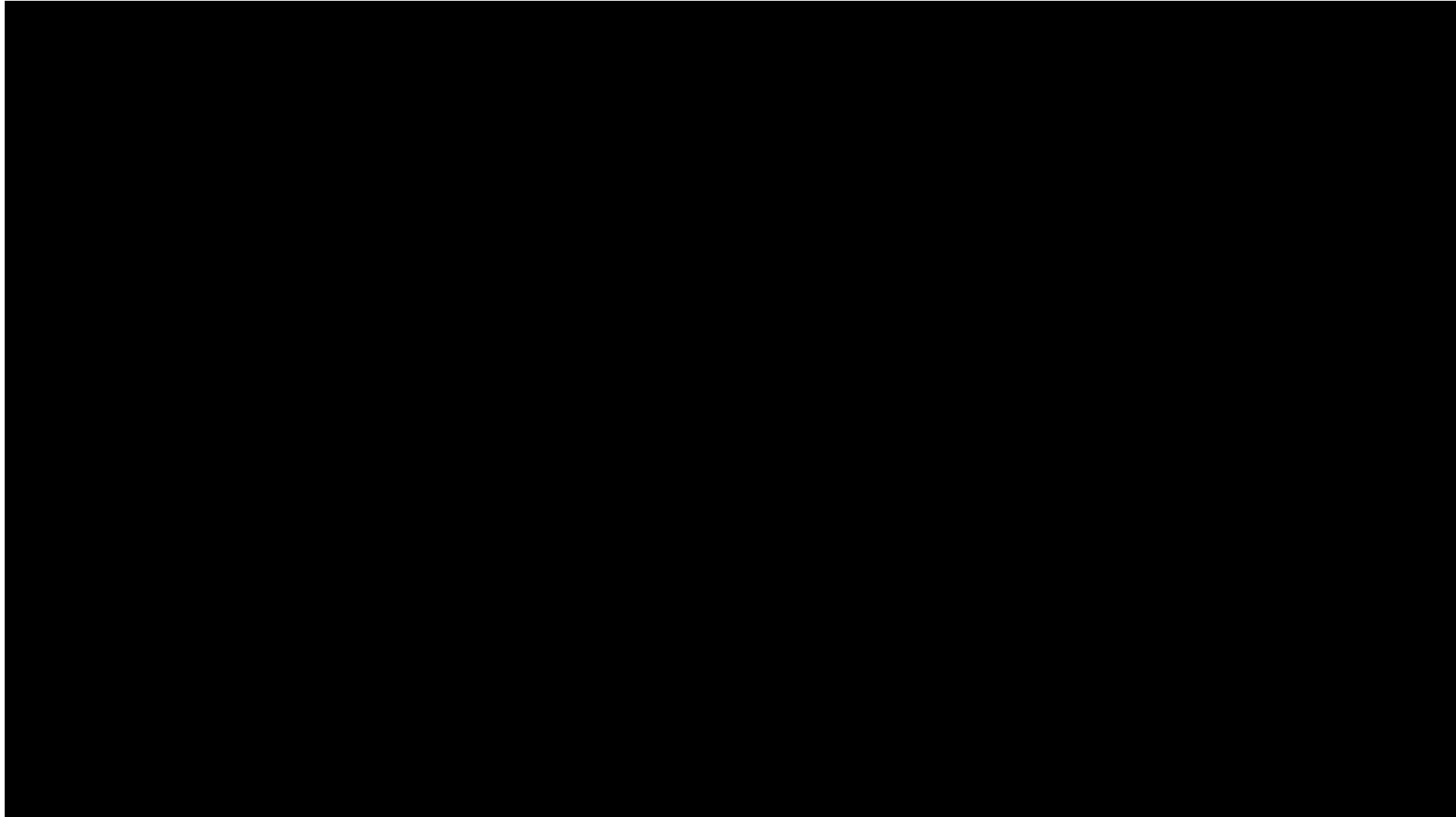
Syphilis (Congenital) in San Bernardino County High Desert, 2018



Syphilis (Congenital)

- In 2017, San Bernardino County ranked #9 in congenital syphilis rates compared to all CA counties.
- Total of 87 reports received in 2018
 - 34 of which were actual cases
- 32% of female cases who gave birth to a baby with CS were in the 15-24 age range
- 30% of female cases who gave birth to a baby with CS have used/were using recreational drugs before or throughout their pregnancy
- Congenital syphilis cases are associated with recreational drug use, incarceration, lack of prenatal care, poverty and/or homelessness



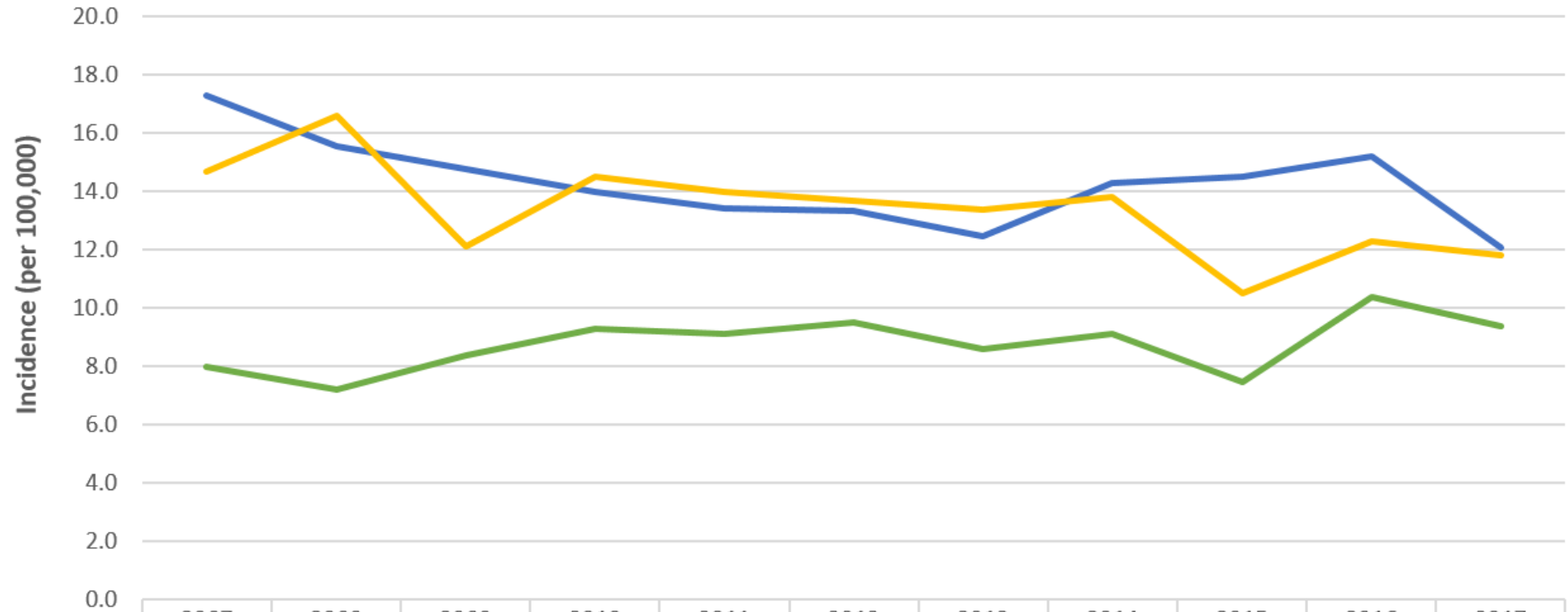


<https://youtu.be/N1jyR2Ib0Ec>

- Being infected with STDs increases the chance of being infected with or transmitting HIV by 3-6 times
 - Open sores and cell layer breakdown provide pathway to bloodstream
 - White blood cells fighting an STD provide receptors for HIV
 - Infections lower natural defenses in vagina (pH and good bacteria)
 - Gonorrhea may increase the amount of HIV in semen

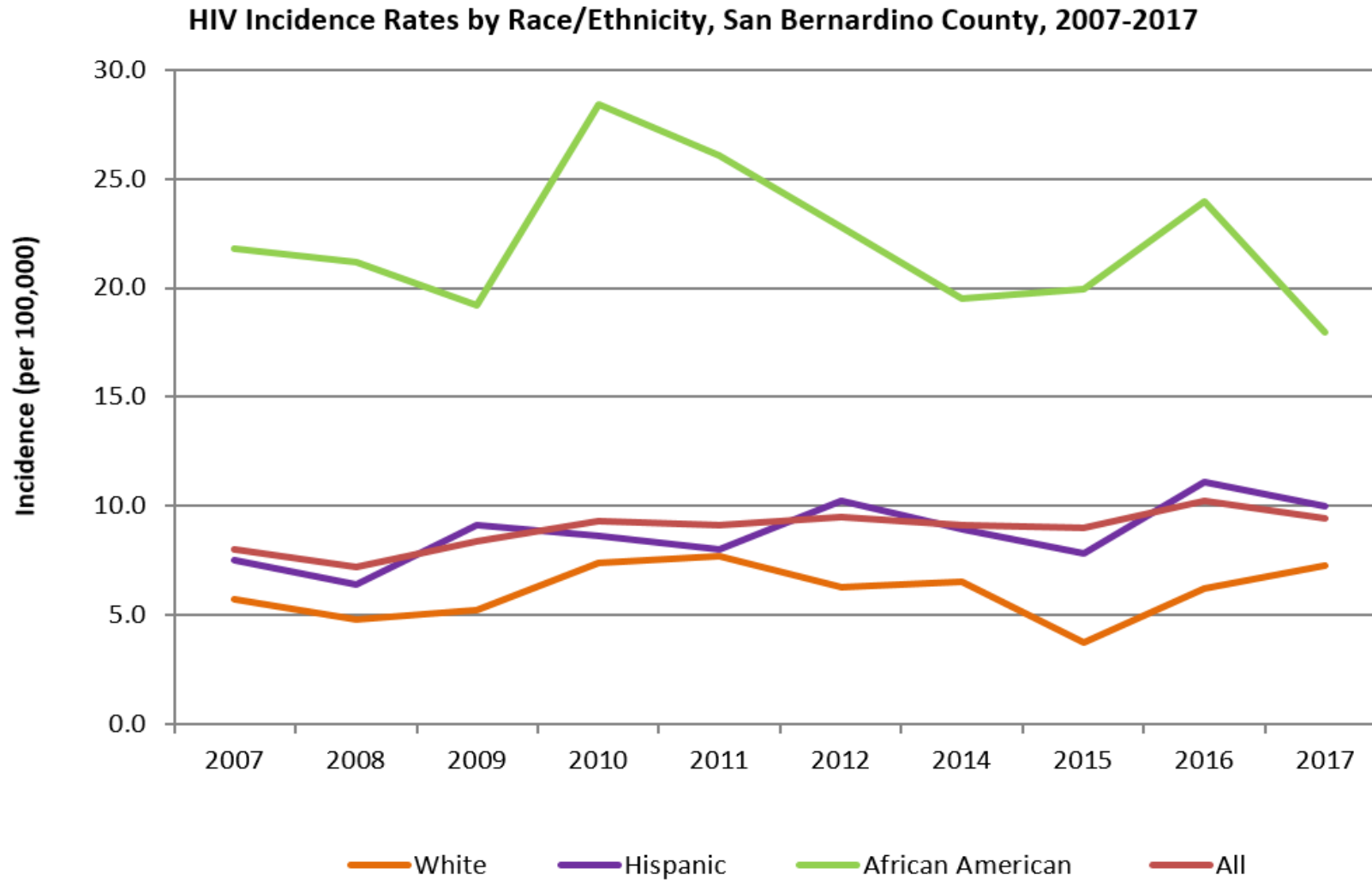


Incidence Rates for HIV in San Bernardino County, California, and the United States, 2007-2017



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
San Bernardino County	8.0	7.2	8.4	9.3	9.1	9.5	8.6	9.1	7.5	10.4	9.4
California	17.3	15.5	14.8	14.0	13.4	13.3	12.5	14.3	14.5	15.2	12.1
United States	14.7	16.6	12.1	14.5	14.0	13.7	13.4	13.8	10.5	12.3	11.8

HIV Incidence Rates by Race/Ethnicity




- Prevention with positives
 - Linkage to care, treatment adherence and support services to maintain undetectable viral loads
 - 81% of all persons living with HIV and are in care have undetectable viral loads which make them less infectious
 - New focus on acute HIV infections who are very infectious
- Why HIV testing is important
 - Many people with STDs are co-infected with HIV
 - Approximately 16% of HIV+ cases are unaware of their diagnosis
 - Approximately 23% of new HIV cases develop AIDS within 90 days
 - Public Health departments can notify partners and further prevent the infection from spreading



- Pre-Exposure Prophylaxis (PrEP)
 - High risk individuals take HIV meds to prevent from becoming infected
 - Truvada – 2 HIV meds: 1 pill taken per day
 - Must continue to use condoms
 - Early side effects are mild and usually disappear
 - Clinical studies – reduced risk up to 90%
 - MSM, discordant heterosexual couples
 - Requires regular medical monitoring
 - Many insurances will pay for PrEP

Find A PrEP Provider Near You


Start Talking. Stop HIV.




Pre-Exposure Prophylaxis is a pill for those at high risk for HIV. Taken daily, it can block HIV.

Search within miles of

The cost of PrEP may be covered by health insurance. Contact your nearest provider to discuss payment options.

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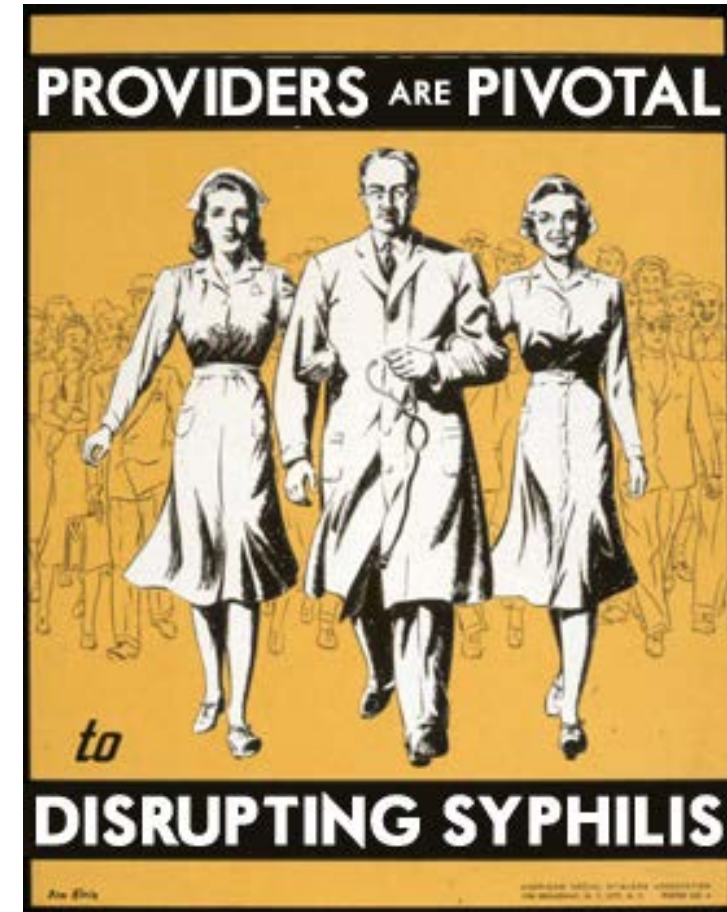


- STD Task Force
 - Goals: raise awareness, look for interventions and decrease STDs in the County
 - Attendees: providers, health agency representatives, community organizations, school representatives and youth
- STD Testing Van
 - Van parks in designated *Hot Spots* including schools and parks where target demographic would be
 - Tests include chlamydia, gonorrhea, syphilis and HIV rapid tests
 - Test and results are given in the same visit for chlamydia and gonorrhea
- Jail Testing
 - Women under 35 years of age offered STD testing by vaginal swab



- Partnership with Providers

- Presentations at birthing hospitals in the County about congenital syphilis
 - Testing algorithm
 - Signs/symptoms associated with each stage
 - Proper treatment for each stage
 - Reporting guidelines
- CDS encourages providers to...
 - Educate patients
 - Request thorough sexual history
 - Testing/referral of partners
 - Provide treatment to partners
 - Report complete and in a timely manner to CDS
 - Link STD investigations with HIV testing



Questions?

Call CDS at
1-800-722-4794