

INTERIM 2016 HIV/AIDS KEY INFORMATION

Preliminary data

Release date: June, 2017

We are providing a preliminary summary of 2016 HIV and AIDS cases. It must be noted that this data is preliminary and expected to change as data verification occurs.

Purpose

This information for 2016 HIV and AIDS cases, point of care (POC) and provincial laboratory tests is provided for surveillance and program planning purposes.

Technical Notes and Limitations

The report includes preliminary confirmed HIV and AIDS cases, HIV test counts and positive test results as of March 31st, 2017 and is subject to change. Population Health Branch provides routine surveillance for notifiable diseases including HIV and AIDS. Under *The Public Health Act, 1994* and the accompanying Disease Control Regulations, the local Medical Health Officers (MHOs) must report HIV and AIDS cases to the Chief Medical Health Officer/Deputy Chief Medical Health Officer. Data sources include the provincially mandated iPHIS database for reported HIV and AIDS cases; RHAs for POC tests; and the Saskatchewan Disease Control Laboratory (SDCL). Confirmed HIV cases must meet the provincial surveillance case definition. These definitions facilitate uniform reporting to allow comparability of surveillance data and are not intended to be used for clinical or laboratory diagnosis or management of cases.

Case counts are dependent on timely reporting by physicians and laboratories to the local MHO and timely entry of information into the iPHIS system by the regions, First Nations and Inuit Health Branch and Northern Inter-Tribal Health Authority. The case numbers may differ from the annual HIV/AIDS report distributed in December as a result of a combination of factors, including late reporting of notifiable diseases and data verification.

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Table 1: Number of New HIV/AIDS Cases by Year, 2006 to 2016

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016 ¹
New HIV Cases	101	127	174	199	174	186	177	129	112	160	170
Change from previous year	28%↑	26%↑	37%↑	14%↑	13%↓	7%↑	5%↓	27%↓	13%↓	43%↑	6%↑
Rate per 100,000	10.1	12.5	16.8	19.2	16.3	17.2	16.2	11.5	9.8	13.9	14.5
Canadian rate per 100,000	7.8	7.4	7.9	7.1	6.9	6.7	6.0	5.9	5.8	5.8	N/A
Comparison SK to Canada	1.3	1.7	2.1	2.7	2.4	2.6	2.7	1.9	1.7	2.4	N/A
Aboriginal (self-reported)	71%	66%	77%	79%	73%	80%	75%	68%	71%	81%	79%
Non-Aboriginal & not-specified	29%	34%	23%	21%	27%	20%	25%	32%	29%	19%	21%
Mean Age (years)	33.4	32.8	34.9	34.8	36.3	36.8	36.2	38.4	39.8	37.9	38.1
Female	52%	49%	45%	45%	38%	42%	40%	34%	34%	38%	44%
IDU as a risk factor	69%	69%	78%	79%	75%	76%	67%	56%	49%	61%	60%
MSM as a risk factor	5%	6%	4%	2%	6%	4%	8%	7%	13%	8%	4%
Heterosexual contact	19%	13%	13%	15%	14%	15%	19%	27%	29%	27%	34%
Perinatal transmission	0	4	0	1	1	0	0	0	0	3	0
New AIDS Cases	8	9	12	14	28	27	36	24	32	28	22

¹2016 data is preliminary. Detailed analyses not yet available.

Saskatchewan has **the highest rates of HIV in Canada** with 2,091 cases reported between 1985 and 2016 (Table 1). The 2016 cases of 170 is preliminary at this time.

The **170 (preliminary) cases in 2016** is an increase of 10 from 2015 (160 cases). Significant clusters in two largely rural regions accounted for over 20 of these cases (12.5%). Injection drug use and sexual contact are the reported risk factors.

In Saskatchewan for the 10 year period 2007 to 2016, the number of HIV patients where injection drug use was identified ranged from a **low of 49% (55 cases) in 2014 to a high of 79% (157 cases) in 2009**.

Heterosexual contact, the second most common risk factor, doubled in the four most recent years, 2013 to 2016 ranging from 13% to 19% between 2006 to 2012 to 27% to 34% between 2013 to 2016. Men having unprotected sex with men was the third most common risk factor for HIV exposure ranging from a low of 2% (4 cases) in 2009 to 13% in 2014 (15 cases).

We are also aware of other characteristics in our **HIV population**. **For example, age**. While the variance is small, ranging from 32.8 years to 39.8 years, we have seen a **slow increase** in the mean age of patients.

Another demographic change noted is an overall **slight decrease in the number of female cases**. Between 2006 and 2009, the number of new cases that were female ranged from 45% to 52%. From 2010 to 2016, the number has declined to between 34% to 44% of new cases.

77% of all female cases diagnosed in 2016 were of a childbearing age (15-44 years). Although this is lower than 87% in 2015, it is comparable to percentages in 2008 to 2012 when HIV case counts remained high.

Table 2: New HIV Cases by Region: Includes First Nations, 10-year Counts and Average and 2016 Cases

Region	10 years (2006-15)	Average per year (2006-15)	2016	Change (%) (2006-15 to 2016)
Regina Qu'Appelle	370	37.0	23	38%↓
Saskatoon	620	62.0	45	27%↓
Prince Albert Parkland	323	32.3	56	73%↑
Sunrise	20	2.0	18	800%↑
Prairie North	61	6.1	11	80%↑
North (3 regions)	103	10.3	13	26%↑
Other regions	42	4.2	4	-
Total	1539	153.9	170	10%↑

2016 numbers are preliminary

From 2006 to 2016, most new HIV cases in the province were found in Saskatoon, Regina and Prince Albert (Table 2). That trend is changing. For both 2015 and 2016 the number of new cases in both Regina and Saskatoon decreased.

The 2016 HIV cases show that Prince Albert Parkland and Prairie North experienced a considerable increase in the number of HIV cases. The North also experienced an increase in cases.

Sunrise showed a considerable increase in cases (18 cases) due to an outbreak.

Table 3: Number of HIV Tests performed at SDCL, 2006-2016

	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017 Q1	TOTAL
Tests	42,955	44,779	47,294	48,843	52,229	54,463	60,357	65,180	67,971	72,659	76,675	20,597	633,405
% Change	...	4%	6%	3%	7%	4%	11%	8%	4%	6%	6%	N/A	79%↑

Note: Total does not include Q1 2017

Table 4: Number of HIV Tests by Quarter, 2014-17

	2014				2015				2016				2017	TOTAL
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	
POC tests¹	N/A	N/A	N/A	N/A	60	420	383	469	472	485	458	481	N/A	3228
Total POCT	N/A				1,332				1,896				N/A	
SDCL tests	17,226	16,885	17,155	16,705	17,530	18,171	18,438	18,520	18,711	19,204	19,125	19,635	20,597	237,902
Total SDCL test	67,971				72,659				76,675				20,597	
SDCL pos. tests²	71	76	107	75	99	106	111	88	107	134	115	116	126	1331
% positive	0.4	0.5	0.6	0.4	0.6	0.6	0.6	0.5	0.6	0.7	0.6	0.6	0.6	0.6
Total Positive	329				404				472				126	

POC – Point of Care, Saskatchewan Disease Control Laboratory (SDCL)

¹POC test numbers are not available prior to the first quarter of 2015. All POC positive tests are retested at SDCL. Numbers are preliminary for 2017 Q1.

²The number of HIV positive tests will not match the number of reported cases due to retesting, out-of-province cases, etc.

There has been a **steady increase in HIV testing** performed by the SDCL from 17,226 in the first quarter of 2014 to 20,597 completed in the first quarter of 2017, representing a 20% increase (Table 3 and Table 4).

POCT numbers have also increased due to improved reporting and increased testing. In 2015 - 1,332 tests were performed; in 2016 – 1,896 tests were performed; an increase of 564 tests or 42%.