

8 Calendar 8

LI Meeting of the Advisory

Council on AIDS (ACA)

2:30 pm 22 July 2005

XXXVI Meeting of the Scientific

Committee on AIDS (SCA)

2:30 pm 28 June 2005

XX Meeting of the AIDS

Prevention and Care Committee (APCC)

6:00 pm 17 June 2005

XVI Meeting of the Committee on Promoting Acceptance of People Living with HIV/AIDS (CPA)

2:30 pm 13 July 2005



IN THIS ISSUE:

We have

RRC 8th Anniversary

on page 21

HIV Update on page 22

Highlights of HIV/AIDS

on page 23

Delivery of HIV Clinical Care

on page 24

Web site: http://www.aca-hk.com

*8th Anniversary of the Red Ribbon Centre cum ''Red Ribbon in Action'' AIDS Education Funding Scheme Launching Ceremony



To celebrate the 8th anniversary and to introduce the "Red Ribbon in Action" AIDS Education Funding Scheme to the community, the Red Ribbon Centre organized a "Red Ribbon in Action" AIDS Education Funding Scheme Launching Ceremony on Saturday, 21 May 2005 at Lok Fu Shopping Centre.

Dr Homer TSO, JP, Chairman of the Hong Kong Advisory Council on AIDS, Dr PY LAM, JP, Director of Health, Ms V TANG, JP, District Officer (Wong Tai Sin), Mr.HO Wai-Chi, Consultant Resource Development & Fund Raising, Hong Kong Council of Social Service, Rev. CHU Yiu-ming, Chairman of the Red Ribbon Centre Management Advisory Committee were the officiating guests of the function.

The "Red Ribbon in Action" AIDS Education Funding Scheme aims at encouraging local community groups to organize and implement AIDS education activities by providing financial and technical support.

HIV/AIDS situation in first quarter of 2005

65 people tested positive for HIV (Human Immunodeficiency Virus) antibody in the first quarter of 2005, bringing the total of reported HIV infections to 2.577.

Five new cases of AIDS (Acquired Immune Deficiency Syndrome) were reported in the same quarter, bringing to 723 the total number of confirmed AIDS cases reported since 1985. Sixty per cent of the new cases were related to heterosexual contact.

Of the 65 new HIV cases reported, 22 acquired the infection via heterosexual contact, 19 via homosexual or bisexual contact, six through intravenous drug use and one case of haemophilia (non-local).

The routes of transmission of the remaining 17 cases were undetermined due to inadequate data.

The 65 cases comprised 55 males and 10 females.

In this quarter, Mycobacterium tuberculosis infection is the commonest AIDS defining illness.

Of the 2,577 HIV infections since 1984, around 78% acquired infection through sexual contact. Of them, 70% resulted from heterosexual transmission and 92 infections occurred among injection drug users.

The newly diagnosed cases for this quarter were reported by four major sources: public hospitals and clinics (38), private hospitals and clinics (13), Social Hygiene Clinics (4) and the DH's AIDS Counselling Service (6). Cumulatively, the four sources have accounted for 44%, 22%, 15.3% and 13.1% of all reported infections.

Of the newly reported cases in this quarter, 44 (67.7%) have received care at the DH's HIV Specialist Services or the Hospital Authority.

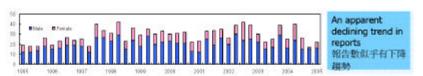
HIV/AIDS STATISTICS IN HONG KONG updated 31 March 2005 This Quarter Cumulative HIV AIDS HIV AIDS 55 2072 623 Sex Male 3 10 2 505 Female 100 43 Chinese 4 1785 564 **Ethnicity** 22 792 Non-Chinese 159 1 Route of **Sexual Contacts** 41 2008 641 **Transmission** 22 3 1396 490 Heterosexual Homosexual 504 16 1 121 Bisexual 108 30 0 Injecting drug use 6 92 13 Blood/blood 0 69 20 products recipients Perinatal 0 0 15 6 Undetermined 17 393 43 1 Total 65 2577 723

ACA Newsfile Vol 12 Page 22

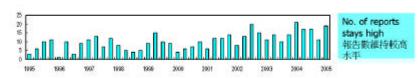
Highlights of HIV/AIDS epidemic in the first quarter of 2005



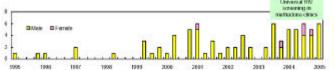
Heterosexual transmission 異性性接觸感染個案



MSM transmission 男男性接觸感染個案



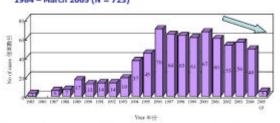
Transmission through injecting drug use 因注射用藥感染個案



No. of reports increasing 報告數有上升 総勢

Decreasing trend in No. of reported AIDS

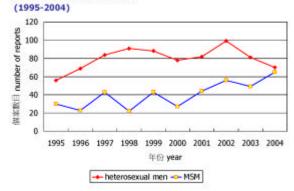
受滋病個案有下降趨勢 1984 - March 2005 (N = 723)



	2002				2003				2004				2005	Cumulative
	Q1	Q2	Q9	Q4	Qt	Q2	Q3	Q4	Q1.	Q2	Q9	Q4	Q1	観散
No. of cases 個單數目	53				56				49				5	723
	10	15	18	10	14	14	9	19	7	13	14	15	5	143

Increasing trend of HIV reports from MSM

男男性接觸者感染上升趨勢



New case registry

12% of all new admissions to DH HIV clinic have newly acquired infection. Among them, -Most are Chinese men (85%)

•Most are Chinese men (85%) •Median age 34 •Half are MSM (53%)

百分之十二於衛生署要遊 病診所就診之人士爲新感 染假來, 他們大能分是華裔及男性。 年齡中位數爲三十四處。 而對一學是透過男男性接 觸而受到感染。

New infection continues to take place

愛滋病病毒新感染仍繼續發生

Precaution is always required to prevent getting infected

應採取有效預防措施而免感染

Get tested if at risk of infection

若懷疑受感染, 應接受愛滋病病 毒抗體測試

Summary 撮要

- 65 HIV infection were reported to DH in the first quarter 2005, a figure that remains high compared to previous years
 本季度樂生署共牧到六十五優愛謝網感染優案,報告數目較往年同期揭高
- Only 5 AIDS reports were received, a decrease that could be apparent or real
 本學度只有五宗愛遊詢显縣較往年民期傷低
- New infections continue to take place 新感染機器等性
- Infection among injecting drug users and MSM is a cause for concern 吸毒人士及男男性授權者受滋病病志感染情况令人騙注
- Physicians are strongly encouraged to report to DH using

DH2293 醫生應向衛生署呈報覺滋病認染及覺滋病價案,表格可於網上下載 www.aids.gov.hk/report.htm

Recommended Framework for the Delivery of HIV Clinical Care in Hong Kong

The Scientific Committee on AIDS (SCA) has recently released the above titled document. Here is a summary.

♦ Purpose

The document sets out the recommended goal, principles and standards of a practical model for delivering HIV clinical care in the Hong Kong setting.

♦ Background

HIV clinical care has undergone revolutionary changes in recent years as a result of scientific advancement in HIV medicine, changing epidemiology and the expectations of PLWHA and the community.

♦ Rationale

- (a) The development of clinical care models must naturally tie in with other factors epidemiology, advances in medical sciences, local strategy and the existing health infrastructure.
- (b) Over the years, the <u>HIV prevalence</u> in Hong Kong has remained at a low level of <0.1% in the general population.
- (c) Advances in medical sciences have led to

- the use of highly active antiretroviral therapy (HAART) as an effective means of restoring health in patients living with the infection. In Hong Kong, antiretroviral drugs were first introduced in 1987. HAART has become generally available in the public service ever since 1997.
- (d) A robust health care system is crucial in the delivery of HIV care. There is in place a coordinated and comprehensive health infrastructure for managing patients with chronic illnesses, plus a public health programme on disease control. HIV management can be effectively integrated with the existing infrastructure.

♦ Goal

Minimizing morbidity arising from HIV/AIDS in Hong Kong is the goal.

• Principles of HIV Clinical Care

- (a) HIV medicine shall be developed as expertise area for promoting the delivery of specialist care to PLWHA.
- (b) A multidisciplinary

- professional team, working in line with international standards, shall lead the coordination and governance of HIV care.
- (c) Easy access to quality clinical care and services in all settings is ensured.
- (d) Continuum of prevention and care shall be observed, with the integration of clinical care with public health control of the infection.
- (e) Community involvement should be promoted through the encouragement of participation and the mobilisation of community resources.
- (f) HIV patient's confidentiality and privacy must be upheld.

• If you are interested in

reading the whole document, please visit our website:

www.aca-hk.com at the document cabinet.