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To: Sexual Health Clinics, Hospitals, Emergency Rooms, Community Health Centers, College Health Centers, Local Health Departments, Community Based Organizations, Internal Medicine, Family Medicine, Infectious Disease, OB/GYN, Planned Parenthood, Primary Care Providers, County Jails, Public Safety Community, and Urgent Care Centers

From: New York State (NYS) Department of Health (DOH), AIDS Institute

Date: October 15, 2020

HEALTH ADVISORY: INCREASED NUMBER OF HIV DIAGNOSES IN MONROE COUNTY

- **The number of new diagnoses of Human Immunodeficiency Virus (HIV) infection among residents of Monroe County is elevated in 2020.**
- **Preliminary data indicate the number of new HIV diagnoses in 2020 is expected to exceed the number of new diagnoses in recent past years (2016-2019: N=55/year; 2020: N=55 as of September 2020).**
- **The number of new diagnoses among persons with a history of injection drug use (IDU) has been elevated since 2019. There have been 10 diagnoses among persons with a history of IDU so far in 2020; there were 10 in all of 2019 and the average for 2013-2018 was less than 5 per year.**

What the Current Data Show

New HIV diagnoses in Monroe County and the Rochester Ryan White Region (RWR) began increasing in late 2019. Increases continued into 2020 with an unusually high number of diagnoses in January and February (11 and 10 diagnoses respectively). Approximately 9% of new diagnoses were in the early or acute infection stage. The average age at diagnosis was 30-49 years. Most persons newly diagnosed were male and over half were non-Hispanic black or Hispanic.

There was a notable increase in HIV diagnoses among persons with a history of IDU starting in May 2019, with more diagnoses than typical sustained through fall 2020. DOH surveillance and partner services investigations have not uncovered commonalities among persons newly diagnosed. Additionally, in Monroe County, opioid overdose mortality, opioid overdose Emergency Department visits, and naloxone administration by EMS have notable increases in 2020 compared to the last quarter of 2019. It is worth noting that the Centers for Disease Control and Prevention (CDC) and Health Departments across the US have identified several HIV clusters occurring among persons who inject drugs¹.

Finally, more than 30% of Monroe County residents newly diagnosed with HIV in 2020 had a prior diagnosis of a sexually transmitted infection (STI); the most common diagnoses were

¹ <https://emergency.cdc.gov/han/2020/han00436.asp>

gonorrhea and chlamydia. Independent of HIV status, reported gonorrhea diagnoses in Monroe County have increased in 2020². Sexual health services such as DOH partner services and HIV PrEP, where indicated, must be provided.

Public health partnerships among providers, health departments, and CBOs are integral to preventing outbreaks of HIV and STIs. Law enforcement agencies also have a role by not unnecessarily detaining individuals in lawful possession of syringes, medications, and naloxone -- and by not confiscating these critical public health tools.

What Health Care Providers Can Do to Help Control HIV, HCV, and Other STIs

- **Offer and perform HIV testing** for every patient age 13 years and older.
- Despite the challenges posed by the COVID-19 pandemic, **expeditious initiation of antiretroviral therapy (ART) in people newly diagnosed with HIV** remains a high priority and can be accomplished with modest adjustments to the established protocol³. See the NYSDOH AIDS Institute's Guidance: Rapid Antiretroviral Therapy (ART) Initiation During COVID-19⁴ document which aims to assist primary care providers and other clinicians in adjusting the protocol for implementing rapid ART initiation during the COVID-19 pandemic.
- **Offer and perform HCV testing** for every patient age 18 years and older. Injection drug use is the most common risk factor for HCV transmission. People who inject drugs, even once in their lifetime, should be tested for HCV. Annual HCV testing is recommended for those with on-going risk, such as IDU, HIV-infected MSM and MSM on PrEP.
- **Conduct a complete sexual health history, risk and drug use assessment** for every patient. Ask about specific behaviors that may increase one's risk of HIV, HCV, or other STIs, such as the number of sex partners, type of sex (i.e., vaginal, anal, oral), sex of sex partners, and drugs used and route of drug ingestion, to help guide laboratory testing. Visit www.ncshguide.org/providers for guidance and additional resources.
- **Screen** for HIV and/or STIs as appropriate in:
 - Persons presenting with evidence of active injection drug or other drug use
 - Sexually active MSM, at least annually
 - Sexually active persons regardless of HIV status, at least annually
 - All persons with newly diagnosed HIV
 - Persons diagnosed with STIs
 - Sex or needle sharing partners of people with HIV/STIs
 - Pregnant people at their first prenatal visit and during the third trimester. For complete information on screening, diagnosing, and treating syphilis in pregnancy, see the Centers for Disease Control and Prevention's (CDC) 2015 STD Treatment Guidelines⁵.
- **Treat promptly or link patients immediately to care and treatment** to interrupt the spread of HIV, syphilis and other STIs.
- **Refer** all patients diagnosed with HCV for treatment if HCV treatment is not offered onsite.
- **Offer** Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP)
- **Facilitate partner management** to encourage your patients to refer their sex or needle sharing partners to medical care for testing, STI treatment and HIV prophylaxis.

² https://www.health.ny.gov/diseases/communicable/std/docs/health_advisory_gonorrhea.pdf

³ https://www.hivguidelines.org/antiretroviral-therapy/when-to-start-plus-rapid-start/#tab_4

⁴ <https://www.hivguidelines.org/antiretroviral-therapy/rapid-art-covid-19/>

⁵ <https://www.cdc.gov/std/tg2015/syphilis-pregnancy.htm>

- **Collaborate** with State and County public health personnel on partner notification efforts. Expect the Health Department to contact you and/or your patient for additional information.
- **Refer** consenting individuals living with HIV and people engaging in behaviors that put themselves at risk of acquiring HIV to CBOs for support services.
- **Report** newly diagnosed cases of HIV and/or AIDS using the Provider Portal on the NYSDOH Health Commerce System at <https://commerce.health.ny.gov> or the paper DOH-4189 Medical Provider HIV/AIDS and Partner/Contact Report Form (PRF). Completion of the PRF within 14 days of diagnosis is required by Public Health Law.
- **Report** all suspected and confirmed STI diagnoses promptly to your local county health department. Information is available at www.health.ny.gov/forms/doh-389.pdf and www.health.ny.gov/forms/instructions/doh-389_instructions.pdf.

What Community Based Organizations Can Do to Support Sexual Health, Drug User Health, and Prevent HIV, HCV and other STIs

- **Assess risk:** conduct a comprehensive behavioral sexual risk assessment for program participants/clients. Ask about specific behaviors, such as the number of partners, type of sex (i.e., vaginal, anal, oral), sex of partners, drugs used, and route of drug ingestion to help guide lab testing.
- **Provide harm reduction services:** facilitate access to clean syringes and essential support services for people who inject drugs. Syringes should be provided to ensure a sterile syringe for every projected injection and without limiting access. There are three mechanisms to provide sterile syringes in NYS – syringe exchange, second tier syringe exchange and the expanded syringe access program. In addition, provide syringe disposal options for people with used syringes. Individuals should be trained in how to recognize an overdose, trained in how to respond to an overdose, and provided with naloxone. To become a registered Opioid Overdose Program or to facilitate access to and disposal of syringes please see https://www.health.ny.gov/diseases/aids/consumers/prevention/needles_syringes/index.htm
- **Implement targeted client recruitment:** prioritize agency services to identify individuals who do not access health care services or who may not otherwise have access to HIV and STI testing in clinical settings. These persons may benefit most from HIV and STI testing services in nonclinical settings.
- **Conduct venue based and/or mobile HIV/STI testing activities to key priority populations:** offer testing to persons who inject drugs and the needs in your local community. Provide HIV Self-Test kits and/or promote the NYS HIV Home Test Giveaway when venue based and/or mobile based testing activities are not available and/or possible. Eligibility survey for the NYS HIV Home Test Giveaway available at <https://bit.ly/NYPausedHHTG>
- **Provide easy access buprenorphine:** as part of comprehensive harm reduction services, individuals with opioid use disorder should be offered access to buprenorphine in a non-punitive way via a variety of settings.
- **Offer navigation services:** assist persons living with HIV, or persons who engage in behaviors that put themselves at risk of acquiring HIV, to obtain timely, essential, and appropriate medical, prevention, and support services (including PrEP/PEP) to optimize health and prevent HIV/STI/HCV transmission and acquisition.
- **Provide effective behavioral interventions:** implement prevention activities that are culturally relevant and have been shown to be successful by evaluation or research.
- **Engage in condom promotion, education, and distribution:** make condoms available at no cost and increase access to condoms in ways that reduce embarrassment or discomfort

when acknowledging sexual activity. Information about the NYS Condom Program is available at <https://www.health.ny.gov/diseases/aids/consumers/condoms/nyscondom.htm>

- **Work with existing coordinating and community planning bodies** such as NYS Ending the Epidemic regional steering committees, the NYS HIV Advisory Body, and NY Links to plan, promote and conduct community education events/activities, foster dialogue, and share resources.
- **Use technology and social media platforms** to promote partner services, increase general awareness, provide accurate and science-based education, and address misinformation. Social media efforts should be informed by contextual factors such as culture, language, health literacy levels, norms, stigma, discrimination, and health care disparities. Partner services public service announcement available at <https://www.youtube.com/watch?v=63hsXYucSrs>
- **Collaborate** with public health stakeholders including county departments of health, regional partner services staff, other AIDS Institute funded providers, CBOs (including non-AIDS service organizations), medical providers, behavioral health providers, etc. to discuss the health advisory, communicate current services, and develop a local response plan and/or collaboration agreements (as needed) to best serve the needs of the priority populations.

Additional Resources

Free and confidential HIV and STI testing is available at local health department STD clinics. www.health.ny.gov/diseases/communicable/std/clinics/

HIV Testing Toolkit: Resources to Support Routine HIV Testing for Adults and Teens
http://www.health.ny.gov/diseases/aids/providers/testing/docs/testing_toolkit.pdf

HIV Self-testing done entirely at home or in a private location is available in New York State (excluding NYC). <https://bit.ly/NYPausedHHTG>

New York State Department of Health AIDS Institute Provider Directory
<https://providerdirectory.aidsinstituteny.org/>

NYS Department of Health HIV/AIDS Hotline: 1-800-541-AIDS
<http://www.nyhealth.gov/diseases/aids/index.htm>

HIV / HCV / Prevention Training for Providers <https://ceitraining.org/>

CEI Line - Clinicians can call the Clinical Education Initiative (CEI Line) to speak with an experienced HIV care provider: 1-866-637-2342

NYS DOH AIDS Institute Clinical Guidelines for HIV/HCV/PrEP/PEP <https://hivguidelines.org>

Pre-Exposure Prophylaxis (PrEP) and Non-Occupational Post-Exposure Prophylaxis (PEP) www.health.ny.gov/diseases/aids/general/pep

Consumer PEP Hotline – 844-PEP4NOW (844-737-4699) Available 24/7

HIV Clinician Reporting and NYSDOH Partner Services
https://www.health.ny.gov/diseases/aids/providers/regulations/partner_services/

Bureau of HIV/AIDS Epidemiology at 518-474-4284 for information and assistance with HIV reporting.

Office of Sexual Health and Epidemiology at 518-474-3598 for information and assistance with STI reporting.

Partner Services Public Service Announcement for Providers Educate yourself and your team on the services offered by partner services and how partner services can extend the continuum of care to your patients, their partners, and others who may have been exposed
<https://www.youtube.com/watch?v=cumGb4ASugk>

Local Health Department and NYSDOH Regional Contacts for Partner Services

- NYSDOH Rochester Regional Office 585-423-8095 or 1-800-962-5063
- Monroe County Department of Health 585-753-5391

Free and confidential HCV testing is available at locations across NYS.

https://www.health.ny.gov/diseases/communicable/hepatitis/hepatitis_c/consumers/screening_program.htm