



# STD/HIV Quarterly Report

San Mateo County Health System, STD/HIV Program

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**Table 1** STD Cases Reported Among County of San Mateo Residents by Quarter (Apr 1 - Jun 30) and Year to Date for 2016 and 2015

	2016		2015	
	2nd Qtr	YTD	2nd Qtr	YTD
<b>Chlamydia trachomatis CT</b>	601	1,269	581	1,159
Male	231	487	238	439
Female	368	780	341	714
Unknown / Transgender	2	2	2	6
<b>Lymphogranuloma Venereum (LGV)</b>	0	1	0	0
<b>Gonorrhea (GC)</b>	157	296	140	257
Male	118	224	110	203
Female	38	71	30	54
Unknown / Transgender	1	1	0	0
Urine	75	127	55	101
Genitourinary	21	40	15	32
Rectal and/or Pharyngeal	40	87	41	74
Unknown/Missing	21	42	29	50
<b>Early Syphilis (total)<sup>1</sup></b>	23	47	31	46
Male	22	45	28	43
Female	0	0	3	3
Transgender/Unknown	1	2	0	0
<b>Syphilis (total)</b>	35	76	54	76
Primary	5	8	3	4
Secondary	12	20	17	23
Early Latent	6	19	11	19
Late Latent	12	29	22	29
Congenital	0	0	1	1
Neurosyphilis <sup>2</sup>	0	1	2	2

YTD: Year to Date. <sup>1</sup>Early Syphilis is defined as primary, secondary, and early latent <sup>2</sup>Cases not included in the total as neurosyphilis is a sequelae and not a stage; the neurosyphilis cases are captured under other syphilis stages.

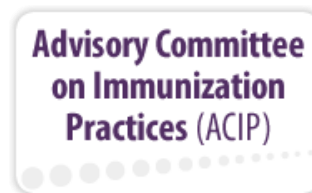
- CT has increased 11% in males and 9% in females since this time last year.
- GC has increased 10% in males and 31% in females since this time last year. Females comprise about one quarter of the county's GC cases.
- Total and early syphilis is similar compared to this time last year.
- For total syphilis cases in 2016, 8% of cases are in females.
- Health system HIV positive prevalence is 0.58% in 2016, which is modestly decreased from 2015 (0.99%). New HIV cases identified at county clinics have decreased this year (.63%) compared to 1.1% in 2015.

**Table 2** HIV testing through the San Mateo County Health System by Quarter (Apr 1 - Jun 30) and Year to Date for 2016 and 2015<sup>1</sup>

	2016		2015	
	2nd Qtr	YTD	2nd Qtr	YTD
<b>Total Specimens Tested for HIV</b>	2,484	5,139	2,537	5,437
SMC-STD Clinic	206	445	222	447
STD/HIV Program Outreach <sup>2</sup>	264	546	276	547
Other County Clinics <sup>3</sup>	2,014	4,148	2,039	4,443
<b>Total HIV Antibody Positive</b>	20	30	27	54
SMC-STD Clinic	3	3	1	2
STD/HIV Program Outreach <sup>2</sup>	1	1	2	3
Other County Clinics <sup>3</sup>	16	26	24	49

<sup>1</sup>The HIV antibody positives do not reflect the true burden of disease. Some patients may be repeat testers. <sup>2</sup>Includes data from Testing on Demand and other STD/HIV program outreach. <sup>3</sup>Includes all HIV testing (oral and blood) at San Mateo Medical Center (SMMC), SMMC Satellite Clinics, SMC Public Health Clinics, and PH Subcontractors. Beginning Aug 2015, a 4th generation HIV screening test implemented. HIV positive cases may not yet be confirmed by HIV-1/HIV-2 differentiation immunoassay.

## Meningococcal Vaccines for HIV Infected Persons & MSM



- In June 2016, US Advisory Committee for Immunization Practices (ACIP) recommended all HIV infected persons routinely receive 2 doses of MenACWY (Menveo® or Menactra®) vaccine 8-12 weeks apart as their primary series.
- Outbreaks of serogroup C invasive meningococcal disease among MSM have been reported in US urban areas since 2014. CDPH recommends MSM who are not HIV infected but who regularly have close or intimate contact with multiple partners, who seek partners through websites or apps, regularly visit crowded venues such as bars or parties or smoke or spend time in smoky settings be offered 1 dose of MenACWY vaccine. A booster dose can be considered for those whose last dose of MenACWY was  $\geq$  5 years ago.

More information available at: <http://www.smchealth.org/alerts>