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[TITLE:] PATTERNS OF NEW HIV/AIDS AMONG ADOLESCENTS AND YOUNG ADULTS IN 25 STATES

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BACKGROUND/OBJECTIVES: Despite reported declines in the prevalence of risky sexual behaviors among adolescents in the last decade, little is published about recent trends in HIV diagnoses among adolescents and young adults in the United States. The objective of this analysis was to review national surveillance data to examine trends in HIV diagnoses among adolescents and young adults in the U.S.

METHODS: We conducted an analysis new HIV/AIDS cases (persons diagnosed with HIV regardless of the stage at diagnosis) among persons 13 to 24 years of age reported to the national HIV/AIDS Surveillance System. We included cases diagnosed from 1994 to 2003 from 25 areas that have met CDC standards for stable, name-based HIV reporting over that period. We used SAS 8.2 for statistical analyses. All analyses were adjusted for reporting delays and unreported risk factors.

RESULTS: For all age groups combined, the number of HIV diagnoses among females in the 25 states declined from 968 in 1994 to 775 in 2003. The number of diagnoses among males declined from 1,492 in 1994 to 1,039 in 1998 and then increased from 1,040 in 1999 to 1,471 in 2003. The observed increase in the number of diagnoses among males was driven by an increase among young adult MSM, most of whom were racial/ethnic minorities (83%). Among 16-19 year old MSM, the number of HIV diagnoses increased steadily over the 10 year period from 460 to 509. The number of diagnoses among black males was consistently higher than in other racial/ethnic groups in every year of the 10 years of data analyzed. In particular, among black adolescents and young adults the number of HIV diagnoses increased 43%, from 614 in 1999 to 877 in 2003, compared to a 30% percent increase in the same time period among whites from 306 to 397.

CONCLUSIONS: The patterns of HIV diagnosis by sex and mode of transmission are congruent with recent reports that suggest a surge of HIV among young MSM. Primary prevention efforts should be maintained to sustain the decline in HIV among females, while increased efforts are needed to reverse the increase observed among young racial/ethnic minority MSM. In particular, attention to the changing and long-lasting needs of HIV-positive persons is essential to ensure effective strategies for prevention of secondary transmission.



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