



# STD/HIV Program Update

Department of Health and Human Services

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# Reportable STDs

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## Bacterial

Chlamydia  
Gonorrhea  
Syphilis

## Viral

HIV/AIDS  
Hepatitis B  
Hepatitis C

# Five Things to Remember about STDs

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- 1. Often show no symptoms (screening vital)**
- 2. May be transmitted by blood**
- 3. May be passed on to unborn (prenatal screening)**
- 4. May cause severe complications**
- 5. Vaccine available for hepatitis B**

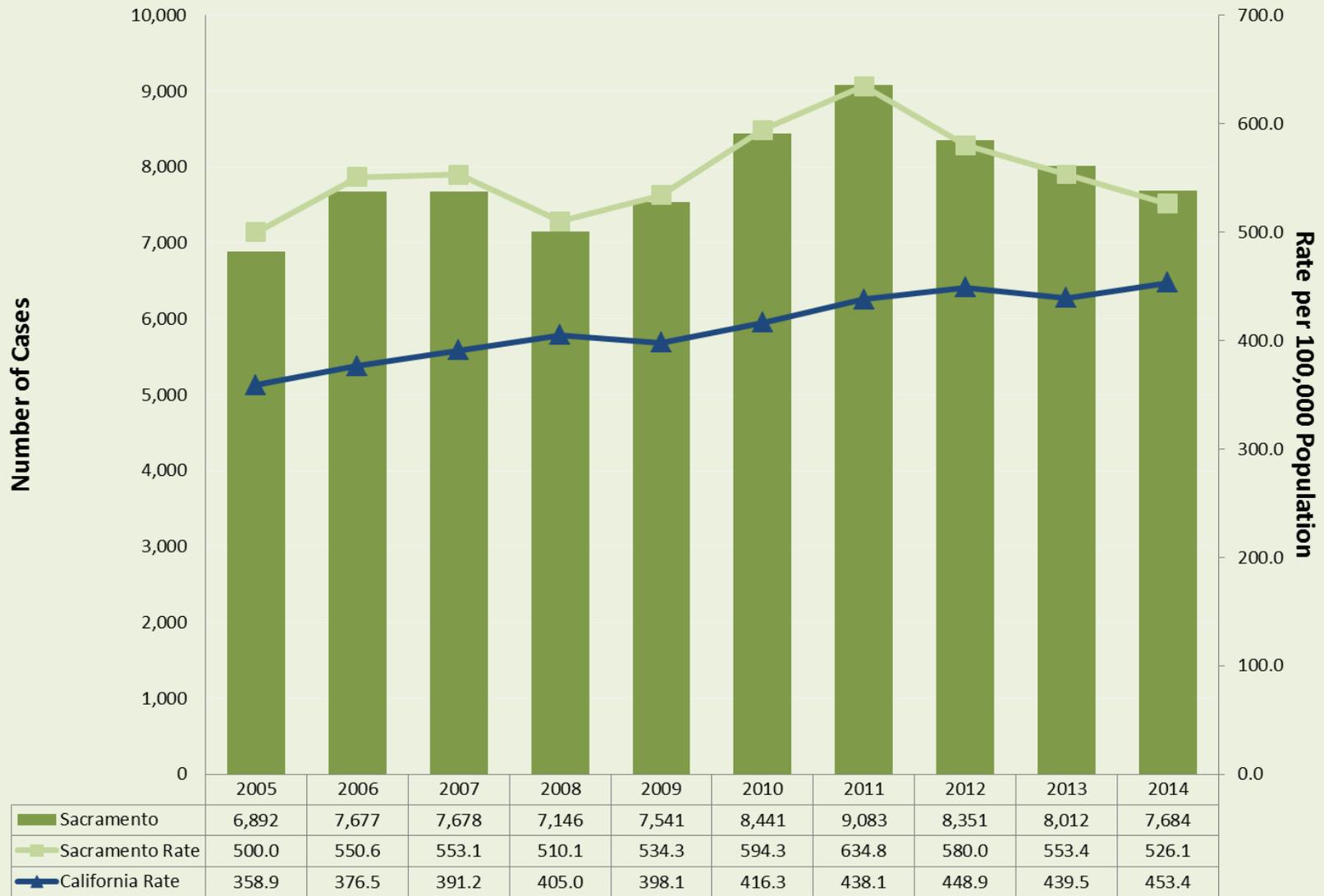
# STD/HIV Disease Burden

- **In 2014, Sacramento County ranked in the top 10 California counties for the following STDs:**
  - Chlamydia (6<sup>th</sup>)
  - Gonorrhea (5<sup>th</sup>)
  - HIV/AIDS (9<sup>th</sup>)

**Volume of STDs Reported in Sacramento County, 2014**

Disease	New Infections, Sacramento County, 2014	2014 County Rate (per 100,000 population)	2014 State Rate (per 100,000 population)
Chlamydia	7,684	526.1	453.4
Gonorrhea	2,223	152.2	116.8
Syphilis (P&S)	139	5.5	9.9
HIV	163	11.1	N/A

## Chlamydia Cases and Rates, Sacramento County, 2005-2014



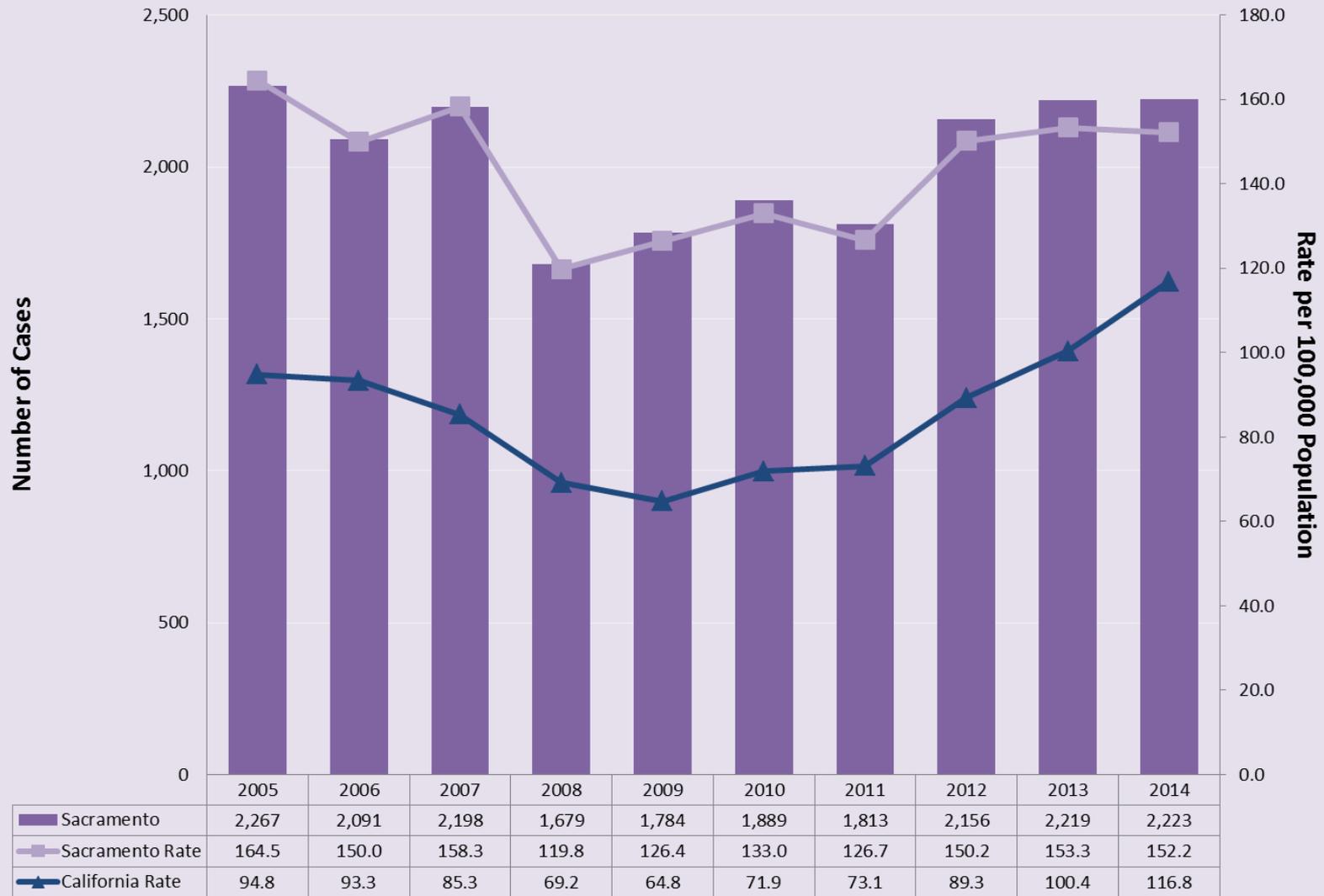
Source: California Department of Public Health, STD Control Branch (data reported through 6/9/2015); State of California, Department of Finance, California County Population Estimates

# Chlamydia Rates

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- **Rates are highest for females and young adults**
  - Rates for females ages 15 to 24 were over six times higher than the overall County rate
  - Rates for females ages 15 to 24 have been decreasing since 2011
- **Rates are highest for African Americans and lowest for Asian/Pacific Islanders**

## Gonorrhea Cases and Rates, Sacramento County, 2005-2014



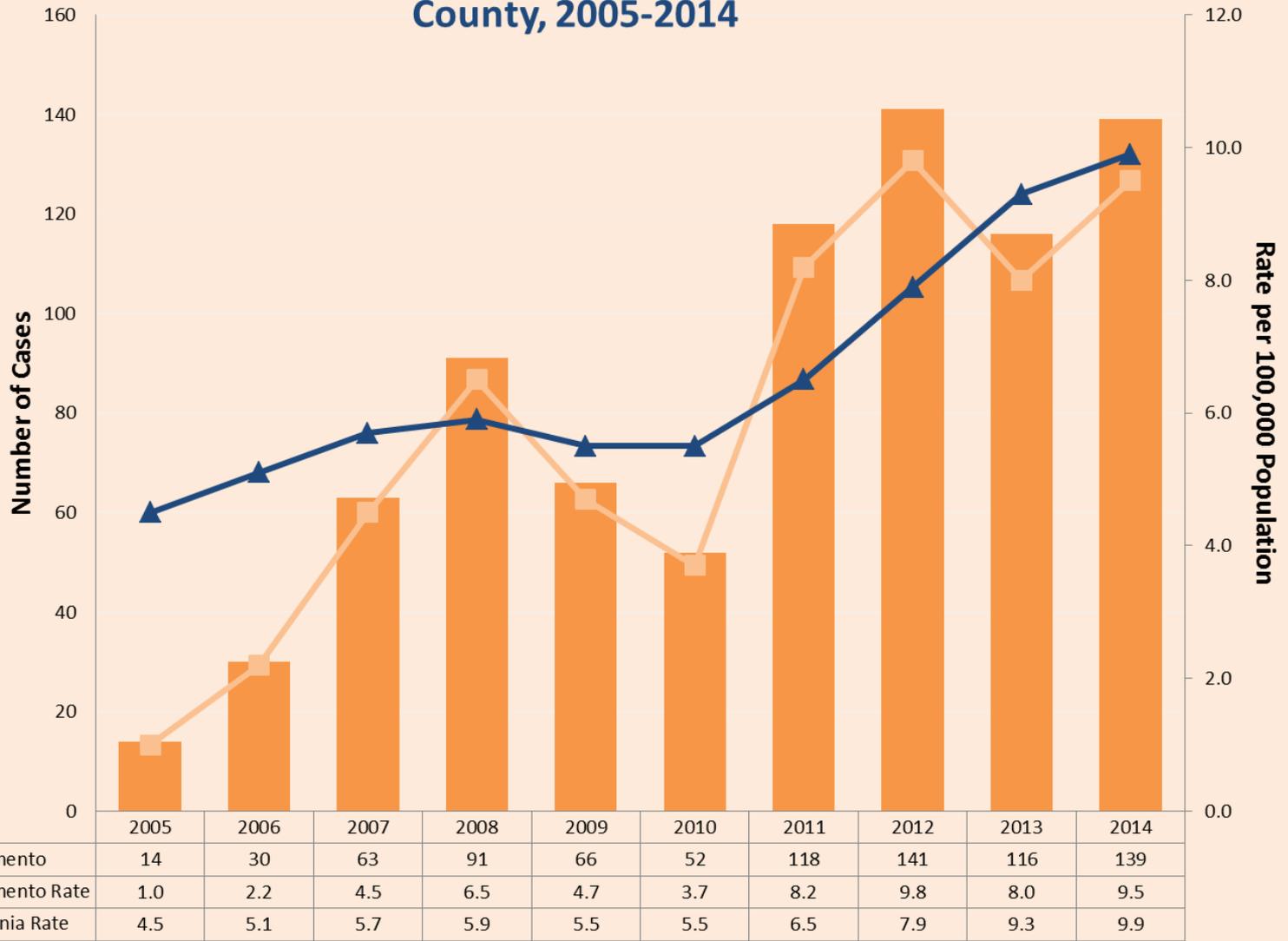
Source: California Department of Public Health, STD Control Branch (data reported through 6/9/2015); State of California, Department of Finance, California County Population Estimates

# Gonorrhea Rates

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- **Rates are highest for 15 to 24 year-old females and for 20 to 29 year-old males**
  - Rates for females ages 15 to 24 were nearly four times higher than the overall County rate
  - Rates for females age 15 to 24 have been decreasing since 2012
- **Racial disparities in STDs are most evident among gonorrhea cases**

## Primary & Secondary Syphilis Cases and Rates, Sacramento County, 2005-2014



Source: California Department of Public Health, STD Control Branch (data reported through 6/9/2015); State of California, Department of Finance, California County Population Estimates

# Syphilis Rates

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- Female cases are of high concern despite males having much higher rates
- Trends show an increase in syphilis infection among youth
- Cases are distributed across several race/ethnicity groups
- Preliminary data for 2015 show 181 P&S cases vs. 139 cases in 2014 ( 30% increase)

# Congenital Syphilis

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- Between 2012-2014 National cases of CS increased by 38%.
- Between 2012-2014 the number of CS cases in California tripled.
- No cases in Sacramento in a number of years but many concerns that will soon change.
- 2015 data shows 17 cases of syphilis among pregnant women and

# Impact of Congenital Syphilis

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- Miscarriage, stillbirth, or death shortly after birth (up to 40% occurrence among women with untreated syphilis)
- Babies born with CS can have:
  - Deformed bones
  - Severe anemia
  - Enlarged liver and spleens
  - Jaundice
  - Blindness/deafness
  - Meningitis
  - Sniffles
  - Skin rashes

# Observations from the Field

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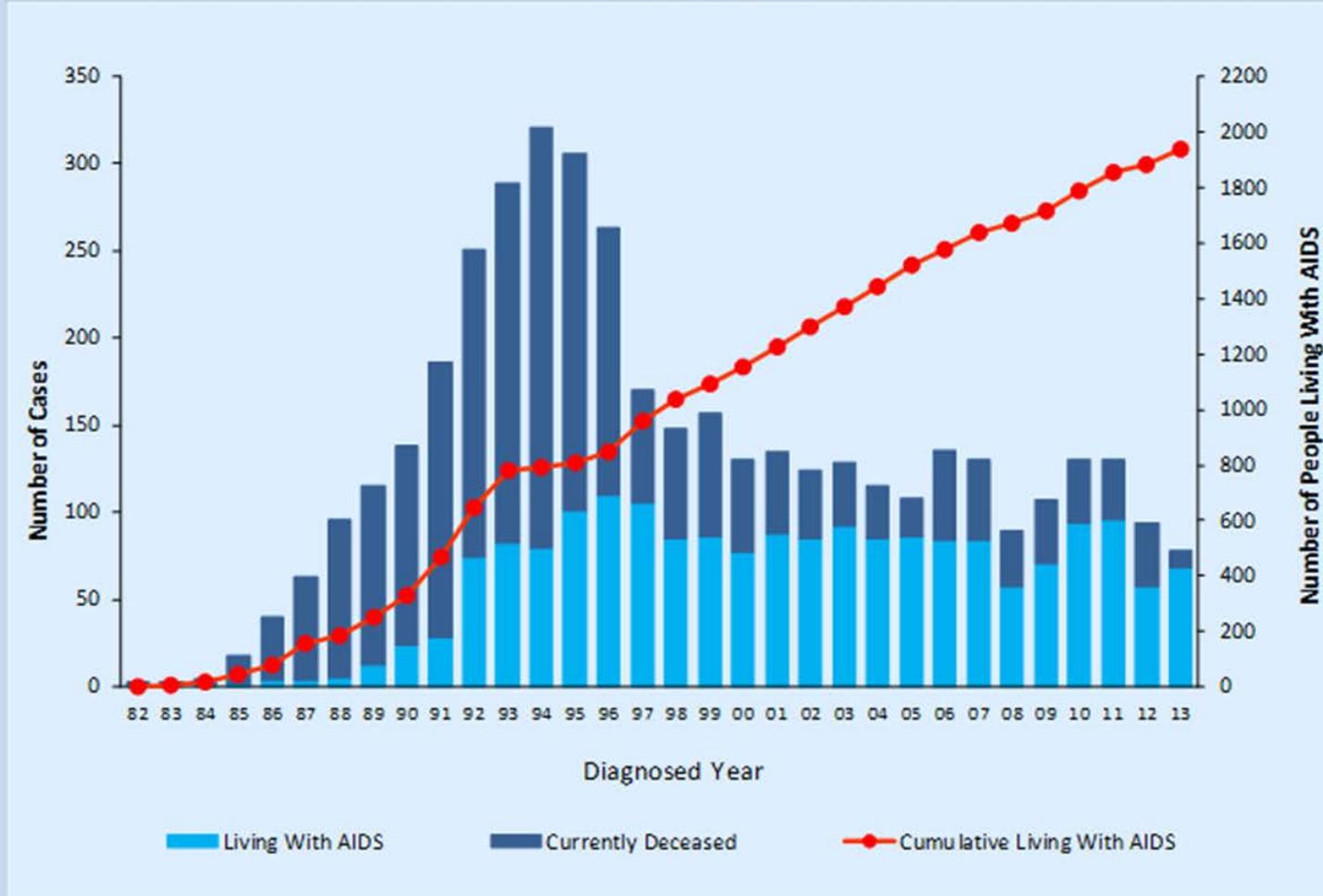
- Increase of P&S Syphilis among women of childbearing age and lack of awareness among this audience
- Increased number of heterosexual males transmitting to women
- Association with drugs and incarceration
- Lack of awareness of screening and treatment guidelines among local providers.
  - New treatment guidelines recommend screening during 3<sup>rd</sup> trimesters
  - Recent case examples

# What are we doing?

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- Developed a “Syphilis Hot-Sheet” to garner real-time data
- Attending meetings regarding CS and Syphilis rapid testing
- Developing provider alerts, education, and training
- Bicillin Delivery Program
- Working with Prevention Program to develop perinatal syphilis awareness information

## Vital Status of AIDS Cases by Year of Diagnosis, Sacramento County, 1982-2013



Cumulative living with AIDS: Cases are calculated by adding the number of living cases from one year to the next.

Data shows persons living with AIDS/Deceased as of December 31, 2013

Data source: Office of AIDS EHARS HIV/AIDS Data System (As of 6/30/2014), Department of Public Health, State of California

# HIV Rates

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- Rates are higher for males than for females
- Trends show an increase in HIV infection among youth
- Whites represent the largest number of HIV cases and African Americans have the highest rate
- Hispanics have had the largest increase in the rate of HIV in the last five years

# County Programs

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- **STD/HIV Surveillance and Disease Control (9)**
- **HIV/STD Prevention Programs (6)**
- **Ryan White (2)**
- **Epidemiology (2)**
- **Perinatal Hepatitis B Program (3)**

# Public Health Toolbox

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- **Primary prevention**
- **Screening/early detection**
- **Contact identification and evaluation**
- **Harm reduction**
- **Treatment**

# Accomplishments/Performance Metrics

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- **Bicillin Delivery Project**
  - 182 doses delivered in 2014
- **Perinatal Hepatitis B Program**
  - 98.7% of infant infections prevented
- ***I Know Project***
  - 400 kits mailed; 11% positivity
- **Ryan White Program**
  - 99.1% of clients linked to care

# STD Community Stakeholder Group

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- BloodSource
- Breaking Barriers
- CA Dept. of Public Health, STD Control Branch
- CA Dept. of Education
- CA State University, Sacramento
- California Family Health Council
- Cares Community Health
- CommuniCare Health Centers
- County of Sacramento
- County of Yolo
- EGUSD Student Support and Health Services
- Golden Rule Services
- First 5 Sacramento Commission
- Harm Reduction Services
- Kaiser Permanente
- People Reaching Out
- Planned Parenthood Mar Monte
- Sacramento City Unified School District
- Sacramento LGBT Community Center
- Sierra Sacramento Valley Medical Society
- Sutter Medical Center, Sacramento
- WellSpace Health
- University of CA, San Francisco
- Women's Health Specialists

# Community Action Plan

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- **Goals**

- Reduce rates of chlamydia, gonorrhea and HIV by 10%, by 2020
- Eliminate cases of syphilis by 2020

- **Objectives**

- Improve outreach and education in schools
- Improve STD/HIV testing, treatment and reporting
- Increase community awareness
- Establish a coalition to support common priorities
- Identify and target services to vulnerable populations
- Strengthen the capacity of County's programs to provide STD prevention and control services

# Continuing Challenges/Opportunities

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- **Youth outreach, education, screening**
- **Screening for pregnant women**
- **Disparities in minority communities**
- **Outreach to high risk groups**

# Acknowledgements

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