Annual Epidemiology & Surveillance Report Data Through December 2023

Appendices







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Appendix A. Understanding Surveillance Data

To understand surveillance data, it is important to be familiar with some key terms.

Diagnosis

Newly diagnosed, or new diagnoses, are persons diagnosed with a disease in a given time period; a diagnosis could be a positive test result or could be determined by a clinician. A diagnosis does not always occur at the same time as someone is infected or gets sick; sometimes it is months or years before someone is diagnosed.

Incidence

Incidence is the number of **new infections** of a disease in a defined population during a specific period of time. It is important to understand the difference between incidence and 'newly diagnosed'. Incident cases, or new infections, are not always diagnosed right away. Thus, the number of new diagnoses does not necessarily reflect trends in incidence (that is, new infections). At the time of diagnosis, some individuals will have been infected recently while others will have been infected sometime in the past.

Prevalence

Prevalence is the total number of people in a population with a particular disease or condition at a given time point. Prevalence can be thought of as a snapshot of all existing cases of a disease or condition at a specified time - for instance the percentage of persons living with HIV among all persons living in the District as of December 31, 2023.

Understanding HIV Surveillance

The District of Columbia Municipal Code (22 DCMR 206) mandates reporting of all HIV and stage 3 (AIDS) diagnoses to DC Health. An HIV diagnosis or case refers to a person who has tested positive for HIV infection. A stage 3 (AIDS) case refers to a person who had a diagnosis of HIV infection and later had a diagnosis of stage 3 HIV disease (AIDS), or a person diagnosed with HIV and stage 3 disease (AIDS) at the same time. Stage 3 disease (AIDS) is defined by a CD4+ T-cell count less than 200 cells/µL or a stage 3 defining opportunistic infection; both of these are signs of immune system failure. Only confirmed reports of HIV and stage 3 disease cases are accepted; anonymous test results are not reported. Reports are received from a variety of sources including hospitals, private physicians' offices, community-based organizations, clinics, and laboratories. Data on HIV and stage 3 disease cases are entered into the federally issued enhanced HIV/AIDS Reporting System (eHARS) and de-identified case information is shared with CDC monthly. CDC uses these data to prepare national surveillance reports. Please note that the term 'HIV' encompasses all persons living with HIV infection regardless of their stage of disease (including persons diagnosed with HIV infection who have not progressed to stage 3 disease (AIDS); persons who were diagnosed with HIV infection and stage 3 disease at the same time; and persons who were diagnosed with HIV infection and later received a stage 3 diagnosis).

Understanding Sexually Transmitted Infections (STI) Surveillance

Currently, chlamydia, gonorrhea, and syphilis are the only STIs for which surveillance data are routinely collected and analyzed in the District. Local reporting laws require all clinicians and laboratories to report findings relevant to STIs –including positive test results, patients receiving STI treatment, and suspicious STI-related symptoms – to the department of health. STI morbidity reports should include the patient's name, address, and requested demographic information

(sex, age, race, ethnicity, etc.); however, demographic information is often missing from these reports. The percentage of cases missing pertinent data varies depending on the disease and the variable of interest. Data on race and ethnicity are reported separately and are not mutually exclusive variables. To avoid the double counting of individuals reporting both a race and ethnicity, information regarding the racial/ethnic background of reported infection cases has been consolidated into one variable. The Latino category under race/ethnicity for all STI tables and graphics included in this report includes individuals of any race reporting Latino ethnicity. In addition, STI surveillance is based on incident (new) infections. Some individuals may be diagnosed multiple times with the same STI, or with different types of STIs at the same time. Primary and secondary syphilis cases are used as a measure of disease incidence, while early, non-primary, non-secondary syphilis and late latent or unknown and late latent syphilis cases are a better indicator of disease prevalence.

Understanding Viral Hepatitis Surveillance

Viral hepatitis is a nationally and locally reportable disease. The District of Columbia municipal code (22 DCMR Chapter 2 201.5) mandates reporting of "hepatitis, infections and serum" by healthcare providers, medical institutions, and laboratories. This includes probable cases which meet clinical definitions but are not laboratory supported and confirmed cases which meet both the clinical definition and have an associated positive laboratory report. HAHSTA holds primary responsibility for hepatitis B (HBV) and hepatitis C (HCV) surveillance activities, while hepatitis A (HAV) is monitored by the Center for Policy and Program Evaluation within DC Health. Viral hepatitis surveillance activities within the District have historically been passive with laboratory reports serving as the primary source of information regarding the occurrence of infection. Recently HAHSTA received funding through the CDC to conduct active case investigations, engagement in care and treatment, and provider engagement. This includes hepatitis C cases that would be defined as cured, where a nucleic acid test (NAT) is negative for viral RNA particles following treatment. As a result, a substantial amount of data reconciliation occurred resulting in a considerable difference in the number of cases reflected in this report when compared to previous annual reports and providing a better description of the burden of HBV and HCV in the District of Columbia. This process involved identifying cases that were reported more than once and actively searching for missing critical elements including treatment or viral load laboratory records not previously reported to DC Health. This allowed for a more accurate application of the CDC hepatitis case surveillance definition identifying acute and chronic infections. Acute hepatitis C infection is defined by a patient testing positive for the hepatitis C virus or antibodies within 6 months of the initial exposure. Acute hepatitis can often occur without symptoms but symptoms may include fatigue, nausea, fever, jaundice, and muscle aches. Chronic hepatitis C infection persists beyond 6 months after the person first tests positive for the hepatitis C virus or antibodies. Additionally, these significant improvements to data quality have allowed elements such as race/ethnicity, housing, and treatment to be included to describe HBV and HCV Cases in the District. As new methods of data collection, case investigation and data extractions are developed the case counts will change and improve. The increase in chronic HCV prevalence and acute HCV cases in this year's report is a result of an improvement in data cleaning and extraction and the availability of previous negative HCV antibody labs. Surveillance data presented in this report include probable and confirmed acute and chronic HBV and HCV cases reported to DC Health as defined by the CDC, diagnosed through December 31, 2023.

Understanding Tuberculosis Surveillance

In the District of Columbia, active tuberculosis (TB) is a reportable condition by medical providers and laboratories. Medical providers must report anyone diagnosed with, or who has symptoms suspicious of TB. Laboratories are required to report preliminary and confirmatory tests indicative of active TB. In any given year approximately 25 to 30% of initial reports of persons with suspicious clinical or laboratory findings will be verified as active TB by laboratory confirmation or clinical case definition. Receiving initial reports allows HAHSTA to begin immediate medical and epidemiological follow-up on suspect cases; this is done to interrupt potential disease transmission while the person waits for final results, which could take as long as eight weeks.

Impact of COVID-19 Pandemic on Disease Prevention, Screening and Care Services

The declaration of a local public health emergency on March 11, 2020, in response to the COVID-19 pandemic necessitated the initiation of community mitigation measures, including a stay-at-home order, and the redirection of health care related resources and personnel, impacting the accessibility and utilization of core routine disease prevention, screening, and care services in the District. Over the course of the pandemic, restricted patient eligibility for services, reduced operating hours, and suspended activities by provider facilities and organizations contributed to significant disruptions within the health care system. Additionally, active HIV, hepatitis, and STI disease surveillance and case investigation efforts were limited during the initial stages of the COVID-19 pandemic while emergency response operations were stood up.

While directly assessing the impact of the COVID-19 pandemic on surveillance activities poses some challenges, corresponding laboratory reporting and case diagnosis patterns raise concerns regarding the underreporting and underdiagnosis of HIV, hepatitis, and STI cases during 2020-2021. DC Health saw a nearly 20% decline in the volume of HIV, chlamydia, gonorrhea, syphilis, HBV, and HCV laboratory reports received in 2020 compared to 2019 (Figure A1). A substantial decline in new diagnoses was observed from January through April of 2020 across conditions, consistent with declines in other outpatient health services such as pediatric vaccinations. Corresponding with evolving strategies for providing health care services during the pandemic, a subsequent increase in the number of new HIV and STI diagnoses was observed from May through July 2020 and remained relatively stable for the remainder of the year. Reporting was more consistent in 2021, with a slight dip in diagnosed primary and secondary syphilis cases in April and May. In 2021, lab reporting increased for primary and secondary syphilis (8%), chlamydia (13%), and gonorrhea (17%), but reporting for STIs was still below 2019 levels for chlamydia and syphilis. Hepatitis B and C saw a small decline of 4% and 8% respectively from 2020 to 2021. HIV lab volume decreased further from 2020 to 2021 with a 20% decline, and an overall decline from 2019 of 32% (Figure 1A). Given disruptions to screening services, the potential for underdiagnosis and underreporting is most substantial for those with asymptomatic infections. In 2023, labs have rebounded with HIV labs being at 76% of 2019 levels which is consistent with the decrease in newly diagnosed HIV cases. Hepatitis C labs are at 52% and hepatitis B labs at 65% of 2019 levels and both can be asymptomatic. The combination of lower lab volume and asymptomatic infections may have led to underdiagnosis and underreporting of hepatitis B and C. Syphilis has seen a 28% increase in lab volume in 2023 compared to the 2019 level. The increase since 2019 could be due to greater awareness of at-risk populations or improved screening practices. Chlamydia and gonorrhea labs are above or near 2019 levels. As we get further from the peak of the COVID-19 pandemic, we will continue to monitor its impact on disease and public health trends.

All 2020 and 2021 data presented in the current report should be interpreted in the context of the potential impact of the COVID-19 pandemic on the utilization of disease prevention, screening, and care services.

Figure A1. Volume of HIV, Primary & Secondary Syphilis, Chlamydia, Gonorrhea, HBV, and HCV laboratory reports received by DC Health comparing 2019-2023, District of Columbia

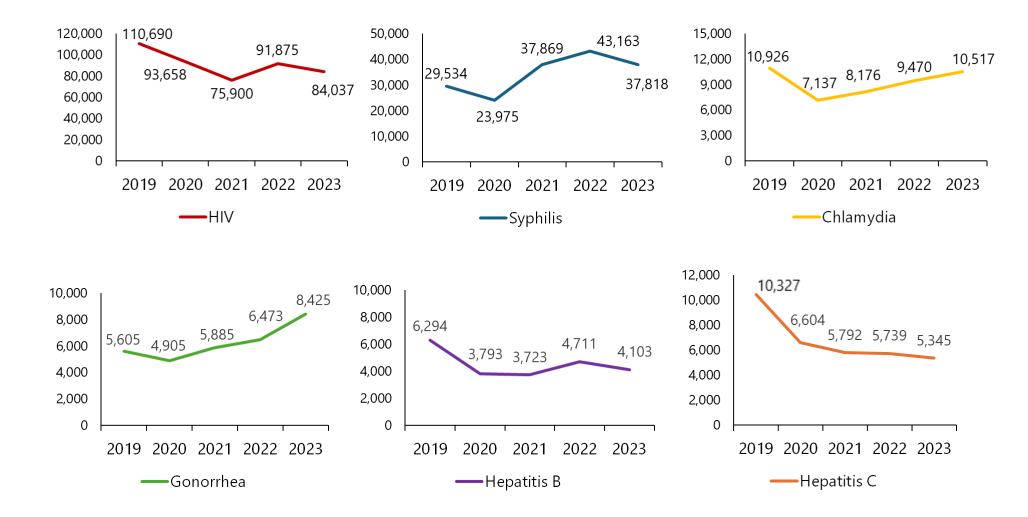


Table A1. Type of facility at HIV Diagnosis by Year of Diagnosis, District of Columbia, 2019-2023

Facility Type	201	19	202	20	202	21	202	2	202	.3	Tota	al
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%
Federally Qualified Health Center (FQHC) or												
Community Health Center (CHC)	99	35.7	77	35.1	77	33.8	81	36.9	83	43.2	417	36.6
Hospital	72	25.9	56	25.5	70	30.7	64	29.2	43	22.4	305	26.8
Private Practice	41	14.7	33	15.1	32	14	25	11.4	21	10.9	152	13.4
Public Health Department	7	2.5	22	10.0	21	9.2	21	9.6	15	7.8	86	7.6
Hospital-based clinic	25	9.0	12	5.5	8	3.5	7	3.2	3	1.6	55	4.8
Health Maintenance Organization (HMO)	14	5.0	8	3.7	7	3.1	5	2.2	9	4.7	43	3.8
Corrections	7	2.5	4	1.8	3	1.3	5	2.2	9	4.7	28	2.5
Urgent care	2	0.7	3	1.4	5	2.2	5	2.2	3	1.6	18	1.6
Military or Veterans	3	1.1	1	0.5	1	0.4	1	0.4	2	1.0	8	0.7
Community Based Organization (CBO)	0	0.0	2	0.9	2	0.9	2	0.9	0	0	6	0.5
Other	8	2.9	1	0.5	2	0.9	4	1.8	4	2.1	19	1.7
Total	278	100	219	100	228	100	220	100	192	100	1,137	100

Understanding the District of Columbia HIV Prevalence Estimate

There were 1,137 newly diagnosed HIV cases reported between 2019 and 2023. The total number of persons who are both living with HIV and were diagnosed in the District decreased compared to last year's report. Reasons for this change in these data include the following:

- 1. Completeness of vital status data continues to improve. Annually, HAHSTA matches HIV cases with the DC Department of Health Vital Records Registry, the National Social Security Death Master File, and the National Death Index to determine the vital status of persons diagnosed with HIV in the District. While HAHSTA routinely receives information regarding District of Columbia residents who have died, national death registries matching provides information about persons diagnosed in the District who moved outside the District and have died outside of the District. Executing matches with the national death registries reduces case counts, resulting in a more accurate prevalence estimate of persons living with HIV in the District.
- 2. CDC routinely notifies HAHSTA if an HIV case reported in DC appears to be the same person reported in another state or jurisdiction. CDC makes this determination based on the Soundex (a phonetic algorithm for indexing names) of a person's name, date of birth, and sex at birth; CDC does not have access to names, so matches must be determined through this process. Each case is investigated to determine if both states/jurisdictions are reporting on the same individual. If such a determination is made, the state with the earliest report date counts the case as diagnosed with HIV in their jurisdiction. Additionally, DC Health conducts quarterly data exchanges with Maryland and Virginia to provide case and laboratory information. This exchange helps to identify where a client is currently living and whether or not a person is in care. The summary table below shows the number of times newly diagnosed cases were identified as a possible duplicate report and the number and proportion of possible duplicates that were assigned to another jurisdiction.

Year of HIV Diagnosis	Potential Duplicate Cases Identified		ed to Another risdiction
	Ν	Ν	%
2019	1,027	595	57.9
2020	584	308	52.7
2021	549	309	56.3
2022	435	230	52.9
2023	194	87	44.8

Table A2. Number of Potential Duplicate HIV cases Identified and Proportion Assigned to another Jurisdiction, District of Columbia, 2019-2023

3. Change in method of prevalence calculation. HAHSTA has included all HIV cases who are living in DC, regardless of where they were diagnosed in the prevalence calculation to fully reflect the current HIV epidemic in Washington, DC. The total population of DC

District, US Census 2023

Table A3. People Living HIV Cases and Rates of HIV based on Estimated 2023 DC Population by Gender Identity, Race/Ethnicity, and Age

	Total Living HIV Cas	es, 2023	Estimated DC Population ⁺	, 2023	Rate per 100,000	
Gender Identity	Ν	%	Ν	%		
Male	8,388	71.9	321,715	47.4	2,607.3	
Female	3,005	25.7	357,257	52.6	841.1	
Transgender l	270	2.3	N/A	N/A	N/A	
Missing	7	0.1	N/A	N/A	N/A	
Race/Ethnicity*						
White	1,664	14.3	255,639	37.7	650.9	
Black	8,192	70.2	289,767	42.7	2,827.1	
Latino	1,040	8.9	81,458	12.0	1,276.7	
Other	774	6.6	52,108	7.6	1,485.4	
Current Age						
<13	8	0.1	96,878	14.3	8.3	
13-19	27	0.2	49,908	7.4	54.1	
20-24	168	1.4	47,661	7.0	352.5	
25-29	463	4.0	71,621	10.5	646.5	
30-39	2,307	19.8	138,151	20.4	1,669.9	
40-49	2,257	19.3	87,964	12.9	2,565.8	
50-59	2,947	25.3	66,828	9.8	4,409.8	
60 and older	3,489	29.9	119,961	17.7	2,908.4	
Missing	4	0.0	0.0	N/A	N/A	
Total	11,670	100	678,972	100	1,718.8	
Male						
White	1,601	19.1	127,244	39.6	1,258.2	
Black	5,329	63.5	131,281	40.8	4,059.2	
Latino	871	10.4	40,575	12.6	2,146.6	
Other	587	7.0	22,615	7.0	2,595.6	
Total	8,388	100	321,715	100	2,607.3	
Female						
White	52	1.7	128,395	36.0	40.5	
Black	2,680	89.2	158,486	44.3	1,691.0	
Latino	116	3.9	40,883	11.4	285.9	
Other	157	5.2	29,493	8.3	532.3	
Total	3,005	100	357,257	100	841.9	
Transgender l						
White	11	4.1	N/A	N/A	N/A	
Black	183	67.8	N/A	N/A	N/A	

Latino	53	19.6	N/A	N/A	N/A
Other	23	8.5	N/A	N/A	N/A
Total	270	100			
Ward					
Ward 1	1,384	11.9	85,285	12.4	1,622.8
Ward 2	1,056	9.0	89,485	13.0	1,180.1
Ward 3	381	3.3	85,301	12.3	446.7
Ward 4	1,180	10.1	84,660	12.3	1,393.8
Ward 5	1,815	15.6	89,617	13.0	2,025.3
Ward 6	1,215	10.4	84,266	12.2	1,441.9
Ward 7	2,247	19.3	85,685	12.4	2,622.4
Ward 8	2,085	17.9	85,246	12.4	2,445.9
Missing	307	2.5	N/A	-	-
Total	11,670	100	689,545**	100	1,692.4

+Source: 2023 US Census Estimates.

*Race and ethnicity are combined for this report into mutually exclusive categories. Individuals who identified as Hispanic or Latino are included in the Latino group. White, Black, and Other race/ethnicity does not include Latino individuals. The term "Latino" is used in place of "Latinx" due to local focus group data revealing that many Latino individuals in DC do not identify with the term Latinx. However, in recognition of the gendered nature of the Spanish language, our use of "Latino" includes everyone on the gender spectrum. Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals. #Population data on transgender individuals are not collected by the US Census, therefore prevalence rates are not able to be calculated. **Most recent population counts by Ward is from 2023 estimates using 2020 census data from the DC Office of Planning and cannot currently be calculated from 2023 census estimates

https://planning.dc.gov/sites/default/files/dc/sites/op/page_content/attachments/All%20Wards%20Map%202022_Population.pdf

4. Increase in DC population. The District of Columbia's population is changing as evidenced by the 2010 US Census and 2023 US Census data estimates. The table depicts the percent change between the 2010 Census and 2023 Census estimates. There was an 12.2% increase in the total number of persons living in the District.

	DC Population 2010 ⁺	Estimated DC Population ⁺⁺ , 2023	Percent change
Birth Sex	Ν	Ν	%
Male	285,953	321,715	12.5
Female	319,273	357,257	11.9
Total	605,226	678,972	12.2
Race/Ethnicity			
White	211,946	255,639	20.6
Black	302,598	289,767	-4.2
Latino	55,847	81,458	45.9
Other*	34,835	52,108	49.6
Total	605,226	678,972	12.2
Current Age			
<13	74,288	96,878	30.4
13-19	49,920	49,908	0.0
20-29	133,980	119,282	-11.0
30-39	99,467	138,151	38.9
40-49	76,652	87,964	14.8
50-59	71,763	66,828	-6.9
≥60	99,156	119,961	21.0
Total	605,226	678,972	12.2

[‡] Population data on transgender individuals are not collected by the US Census.

+ Source: 2010 US Census. ++ Source: 2023 US Census Estimates.

* Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals.

The number of Latino individuals living in the District increased by 45.9%, and the number of those classified as other race increased by 49.6%. The change among Black individuals was -4.2%, the only race/ethnicity group showing a decline in population. In addition, the population between 30 and 39 years of age

increased by 38.9%, while the population between 20 and 29 years of age decreased by 11%.

Understanding HIV Clinical Outcomes

Primary care visits are not included in mandatory reporting requirements for surveillance in DC. However, HIV-related laboratory measures, such as CD4+ T-cell counts and HIV RNA viral loads, are required by DC Municipal Code to be reported to HAHSTA by healthcare providers and clinical laboratories. Laboratory measures are used in surveillance to provide approximate measures of access to medical care and HIV-related clinical health status. The Health Resources and Services Administration (HRSA), Centers for Disease Control and Prevention (CDC), and the Department of Health and Human Services (DHHS) released measures to monitor the stages of HIV care, including diagnosis, linkage to care, retention in care and measurement of viral suppression. The measures reported reflect local variations of federal standards revised to reflect the realities of available HIV surveillance data.

Understanding Surveillance for HIV Drug Resistance

The objective of surveillance for HIV drug resistance is to understand trends in the prevalence of resistance to particular drug classes in DC. Drug resistance occurs when the HIV virus adapts to the effects of particular drugs, making them ineffective to treat the infection. Genetic sequence testing is an essential tool for assessing an individual's drug resistance and developing an effective treatment plan. The 2023 HIV Transmitted Drug Resistance profile provides information about HIV drug resistance among DC residents newly diagnosed with HIV during the five-year span from 2019-2023.

Limitations and Assumptions of HIV Drug Resistance

• **Reporting Completeness:** The completeness of HIV drug resistance data is limited by laboratory participation. Due to the nature of the result, electronic laboratory reporting via HL7 messaging is required. Currently, genotype sequences are reported by labs representing approximately ~90% of HIV-related tests conducted in the District.

Term	Definition						
Integrase Strand Transfer Inhibitors (INSTIs)	Class of drugs used to prevent the HIV virus from making copies within the cell						
Nucleotide Reverse Transcriptase Inhibitors (NRTIs)	Class of drugs used to prevent the HIV virus from making copies within the cell						
Non-Nucleotide Reverse Transcriptase Inhibitors (NNRTIs)	Class of drugs used to prevent the HIV virus from making copies within the cell						
Protease Inhibitors (PIs)	Class of drugs used to prevent the virus from growing within the cell						
1-Class TDRM	Transmitted drug resistance mutation against one class of drugs						
2-Class TDRM	Transmitted drug resistance mutation against two classes of drugs						
3-Class TDRM	Transmitted drug resistance mutation against three classes of drugs						
4-Class TDRM	Transmitted drug resistance mutation against four classes of drugs						
*Definitions and resistance ascertained from Secure HIV-TRACE, a secure online tool developed by CDC to analyze sequences.							

Table A5. Antiretroviral Drug Classes and Drug Resistance Definitions

Table A6. Completeness of HIV Sequences for New HIV Diagnoses, District of Columbia, 2020-2023

	Total Diagnoses	Total DiagnosesComplete SequenceSequence WithinDiagnosesDiagnoses			
Year	Ν	N	%	Ν	%
2020	204	127	62.3	113	55.4
2021	210	115	54.8	91	43.3
2022	212	123	58.0	104	49.1
2023	184	108	58.7	105	57.1
Total	810	473	58.4	413	50.9

Table A7. TDRMs in Individuals with No Evidence of ARV Use, by Gender Identity, Age at Diagnosis, and Race/Ethnicity, District of Columbia, 2023

	Total	Any TDRM	
Gender	N	Ν	%
Male	284	50	17.6
Female	75	18	24.0
Transgender	12	4	33.3
Total	371	72	19.4
Race/Ethnicity			
Black	263	50	19.0
Latino	50	8	16.0
White	46	10	21.7
Other	10	4	40.0
Unknown	2	0	0.0
Total	371	72	19.4
Age at Diagnosis			
< 13	2	0	0.0
13–19	18	4	22.2
20–29	146	25	17.1
30–39	105	21	20.0
40–49	47	13	27.7
50+	53	9	17.0
Total	371	72	19.4

Glossary

- **Primary syphilis**: a syphilis infection with a firm, round, and painless chance at the initial site of infection.
- Secondary syphilis: A syphilis infection characterized by localized or diffused rashes on the skin. Often found on the palms of the hands, soles of the feet or trunk of the body along with generalized swelling of the lymph nodes.
- **Early syphilis**: a syphilis infection that has occurred within 12 months where the patient exhibits no symptoms of primary or secondary syphilis infection, but the patient's syphilis serology tests are reactive for both nontreponemal (ex: RPR) and treponemal tests (ex: TP-PA).
- Acute hepatitis C: hepatitis C infection where the patient tests positive for the hepatitis C virus or antibodies within 6 months of the initial exposure. Acute hepatitis can often occur without symptoms but symptoms may include fatigue, nausea, fever, jaundice and muscle aches.
- Chronic hepatitis: hepatitis C infection that persists beyond 6 months after the person first tests positive for the hepatitis C virus or antibodies.
- **Transmitted drug resistance mutation (TDRM)**: a HIV sequence mutation identified in an individual with no evidence of antiretroviral (ARV) use within three months of diagnosis.
- **MSM**: men who have sex with men
- **IDU**: injection drug use
- **RNI**: risk not identified
- Other transmission category: perinatal transmission, hemophilia, blood transfusion, and occupational exposure

Appendix B. Supplementary Tables and Figures

Table B1. People Living with HIV in the District of Columbia as of December 31, 2023, by Gender Identity, Current Age, Race/Ethnicity, and Mode of Transmission

	DC residents at di		DC residents at diagnosis, still in	HIV	In-migrants: Dia out of jurisdiction DC	gnosed	People living i diagnosed with H	in DC	Out-migrants d in DC but now of jurisdic	iagnosed living out
	N	%	N	%	N	%	N	%	N	%
Gender Identity										
Male	12,953	73.3	6,354	68.8	2,036	83.4	8,388	71.9	6,599	78.1
Female	4,426	25.0	2,678	29.0	328	13.4	3,005	25.7	1,748	20.7
Transgender	288	1.6	192	2.1	77	3.2	270	2.3	96	1.1
Missing	9	0.1	5	0.1	0	0.0	7	0.1	4	0.0
Total	17,676	100	9,229	100	2,441	100	11,670	100	8,447	100
Current Age										
<13	6	0.0	4	0.0	4	0.2	8	0.1	2	0.0
13-19	36	0.2	24	0.3	3	0.1	27	0.2	12	0.1
20-24	157	0.9	128	1.4	40	1.6	168	1.4	29	0.3
25-29	452	2.6	305	3.3	158	6.5	463	4.0	147	1.7
30-39	2,524	14.3	1,515	16.4	792	32.4	2,307	19.8	1,009	11.9
40-49	3,380	19.1	1,738	18.8	519	21.3	2,257	19.3	1,642	19.4
50-59	4,842	27.4	2,411	26.1	536	22.0	2,947	25.3	2,431	28.8
60+	6,275	35.5	3,100	33.6	389	15.9	3,489	29.9	3,175	37.6
Missing	4	0.0	4	0.0	0	0.0	4	0.0	-	0.0
Total	17,676	100	9,229	100	2,441	100	11,670	100	8,447	100
Race/Ethnicity										
White	2,829	16.0	1,184	12.8	480	19.7	1,664	14.3	1,645	19.5
Black	11,834	66.9	6,806	73.7	1,386	56.8	8,192	70.2	5,028	59.5
Latino	1,571	8.9	741	8.0	299	12.2	1,040	8.9	830	9.8
Multi-race	1,221	4.4	405	4.4	202	8.3	607	5.2	816	9.7
NHAAPI*	105	0.6	42	0.5	30	1.2	72	0.6	63	0.8
American Indian/Alaskan Native	16	0.1	11	0.1	4	0.2	15	0.1	5	0.1
Missing	100	0.6	40	0.4	40	1.6	80	0.69	60	0.7
Total	17,676	100	9,229	100	2,441	100	11,670	100	8,447	100
Mode of Transmission										
Sexual contact	13,218	74.8	6,976	75.6	2,012	82.4	8,989	77.0	6,242	73.9
Injection drug use (IDU)	1,720	9.7	873	9.5	77	3.2	950	8.1	847	10.0
Sexual contact/IDU	878	5.0	343	3.7	116	4.8	459	3.9	535	6.3
Other**	202	1.1	113	1.2	38	1.6	151	1.3	89	1.1
Risk not identified	1,658	9.4	924	10.0	198	8.1	1,121	9.6	734	8.7
Total	17,676	100	9,229	100	2,441	100	11,670	100	8,447	100

* NHAAPI includes Native Hawaiian, Asian, Asian American, and Pacific Islander.

** Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

	DC residents at diagnosis		DC residents at HIV diagnosis, still in DC		In-migrants: Dia of jurisdiction,	2	People livin diagnosed with	2	Out-migrants diagnosed in DC but now living out of jurisdiction	
	Ν	%	N	%	N	%	N	%	N	%
Male										
MSM	8,407	64.9	4,039	63.6	1,587	77.9	5,626	67.1	4,368	66.2
IDU	930	7.2	434	6.8	43	2.1	477	5.7	496	7.5
MSM/IDU	855	6.6	326	5.1	110	5.4	436	5.2	529	8.0
Heterosexual contact	1,578	12.2	914	14.4	132	6.5	1,046	12.5	664	10.1
Other*	96	0.7	47	0.7	18	0.9	65	0.8	49	0.7
Risk not identified	1,087	8.4	594	9.3	146	7.2	738	8.8	493	7.5
Total	12,953	100	6,354	100	2,036	100	8,388	100	6,599	100
Female										
IDU	790	17.8	439	16.4	34	10.4	473	15.7	351	20.1
Heterosexual contact	2,977	67.3	1,853	69.2	225	68.6	2,078	69.2	1,124	64.3
Other*	106	2.4	66	2.5	19	5.8	85	2.8	40	2.3
Risk not identified	553	12.5	320	11.9	50	15.2	369	12.3	233	13.3
Total	4,426	100	2,678	100	328	100	3,005	100	1,748	100
Transgender										
Sexual contact	256	88.9	170	88.5	68	88.3	239	88.5	86	89.6
IDU	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Sexual contact/IDU	23	8.0	17	8.9	6	7.8	23	8.5	6	6.3
Other*	0	0.0	0	0.0	1	1.3	1	0.4	0	0.0
Risk not identified	9	3.1	5	2.6	2	2.6	7	2.6	4	4.1
Total	288	100	192	100	77	100	270	100	96	100

Table B2. People Living with HIV in the District of Columbia as of December 31, 2023, by Gender Identity and Mode of Transmission

*Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

Table B3. People Living with HIV in the District of Columbia by Race/Ethnicity, Gender Identity, and Mode of Transmission, 2023

		White		Black		Latino	Multi-	race	NHAA	NPI*	(Other**		Total
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	9
Gender Identity														
Male	1,601	96.2	5,329	65.1	871	83.8	448	73.8	66	91.7	73	76.8	8,388	71.9
Female	52	3.1	2,680	32.7	116	11.1	137	22.6	6	8.3	14	14.7	3,005	25.7
Transgender	11	0.7	183	2.2	53	5.1	22	3.6	0	0.0	1	1.1	270	2.3
Missing	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	7	7.4	7	0.
Total	1,664	100	8,192	100	1,040	100	607	100	72	100	95	100	11,670	10
Mode of Transmission														
Sexual Contact	1,449	87.1	6,054	73.9	895	86.1	476	78.4	61	84.7	54	56.8	8,989	77.
Injection drug use (IDU)	17	1.0	850	10.4	36	3.5	45	7.4	0	0.0	2	2.1	950	8.
Sexual Contact/IDU	79	4.7	305	3.7	33	3.2	39	6.4	1	1.4	2	2.1	459	3.
Risk not Identified	116	7.0	859	10.5	65	6.2	37	6.1	10	13.9	34	35.8	1,121	9.
Other***	3	0.2	124	1.5	11	1.0	10	1.7	0	0.0	3	3.2	151	1.
Total	1,664	100	8,192	100	1,040	100	607	100	72	100	95	100	11,670	10
Male														
MSM	1,372	85.8	3,149	59.1	688	79.0	317	70.8	56	84.9	44	60.3	5,626	67.
Injection drug use (IDU)	10	0.6	425	8.0	17	1.9	23	5.1	0	0.0	2	2.7	477	5.
MSM/IDU	79	4.9	283	5.3	33	3.8	38	8.5	1	1.5	2	2.7	436	5.
Heterosexual Contact	31	1.9	888	16.7	78	9.0	44	9.8	1	1.5	4	5.5	1,046	12
Risk not Identified	107	6.7	530	9.9	50	5.7	24	5.4	8	12.1	19	26.0	738	8
Other***	2	0.1	54	1.0	5	0.6	2	0.5	0	0.0	2	2.7	65	0.
Subtotal	1,601	100	5,329	100	871	100	448	100	66	100	73	100	8,388	10
Female														
Injection drug use (IDU)	7	13.5	425	15.9	19	16.4	22	16.1	0	0.0	0	0.0	473	15.
Heterosexual Contact	35	67.3	1,862	69.5	77	66.4	95	69.3	4	66.7	5	35.7	2,078	69.
Risk not Identified	9	17.3	324	12.1	14	12.0	12	8.8	2	33.3	8	57.1	369	12.
Other***	1	1.9	69	2.5	6	5.2	8	5.8	0	0.0	1	7.1	85	2
Subtotal	52	100	2,680	100	116	100	137	100	6	100	14	100	3,005	10
Transgender														
Sexual Contact	11	100.0	155	84.7	52	98.1	20	90.9	0	0.0	1	100	239	88
Injection drug use (IDU)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.
Sexual Contact/IDU	0	0.0	22	12.0	0	0.0	1	4.6	0	0.0	0	0.0	23	8
Risk not Identified	0	0.0	5	2.8	1	1.9	1	4.6	0	0.0	0	0.0	7	2
Other***	0	0.0	1	0.5	0	0.0	0	0.0	0	0.0	0	0.0	1	0.
Subtotal	11	100	183	100	53	100	22	100	0	0	1	100	270	10

* NHAAPI includes Native Hawaiian, Asian, Asian American, and Pacific Islander.

** Other race includes Alaska Native, American Indian, and unknown race individuals.

*** Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

	Whi	te	Blac	:k	Latir	10	Multi-	race	NHAA	API*	Othe	r**	Tot	al
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	9
Current Age														
<13	0	0.0	5	0.1	1	0.1	1	0.2	0	0.0	1	1.1	8	0.1
13-19	0	0.0	21	0.3	6	0.6	0	0.0	0	0.0	0	0.0	27	0.2
20-24	6	0.4	137	1.7	19	1.8	2	0.3	1	1.4	3	3.2	168	1.4
25-29	26	1.6	338	4.1	63	6.1	26	4.8	6	8.3	4	4.2	463	4.(
30-39	210	12.6	1,632	19.9	284	27.3	143	23.6	19	26.4	19	20.0	2,307	19.8
40-49	303	18.2	1,538	18.8	240	23.1	137	22.6	19	26.4	20	21.1	2,257	19.3
50-59	496	29.8	2,003	24.4	260	25.0	147	24.2	20	27.8	21	22.1	2,947	25.3
60 and older	623	37.4	2,518	30.7	167	16.0	151	24.9	7	9.7	23	24.2	3,489	29.9
Missing	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	4	4.2	4	0.0
Total	1,664	100	8,192	100	1,040	100	607	100	72	100	95	100	11,670	100
Male														
<13	0	0.0	3	0.1	1	0.1	0	0.0	0	0.0	1	1.4	5	0.1
13-19	0	0.0	12	0.2	3	0.3	0	0.0	0	0.0	0	0.0	15	0.2
20-24	6	0.4	92	1.7	15	1.7	0	0.0	1	1.5	1	1.4	115	1.4
25-29	25	1.5	244	4.6	55	6.3	17	3.8	6	9.1	2	2.7	349	4.2
30-39	194	12.1	1,240	23.3	243	27.9	109	24.3	18	27.3	14	19.2	1,818	21.7
40-49	291	18.2	937	17.6	194	22.3	99	22.1	19	28.8	15	20.6	1,555	18.5
50-59	482	30.1	1,180	22.1	220	25.3	110	24.6	16	24.2	18	24.7	2,026	24.1
60 and older	603	37.7	1,621	30.4	140	16.1	113	25.2	6	9.1	22	30.1	2,505	29.8
Missing	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Subtotal	1,601	100	5,329	100	871	100	448	100	66	100	73	100	8,388	100
Female														
<13	0	0.0	2	0.1	0	0.0	1	0.7	0	0.0	0	0.0	3	0.1
13-19	0	0.0	8	0.3	3	2.6	0	0.0	0	0.0	0	0.0	11	0.4
20-24	0	0.0	31	1.2	1	0.9	1	0.7	0	0.0	2	14.3	35	1.2
25-29	1	1.9	69	2.6	2	1.7	8	5.8	0	0.0	1	7.1	81	2.7
30-39	9	17.3	328	12.2	17	14.7	22	16.1	1	16.7	3	21.4	380	12.6
40-49	11	21.2	561	20.9	32	27.6	32	23.4	0	0.0	4	28.6	640	21.3
50-59	12	23.1	794	29.6	36	31.0	35	25.6	4	66.7	3	21.4	884	29.4
60 and older	19	36.5	887	33.1	25	21.5	38	27.7	1	16.7	1	7.1	971	32.3
Missing	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Subtotal	52	100	2,680	100	116	100	137	100	6	100	14	100	3,005	10

Table B4. People Living with HIV in the District of Columbia by Race/Ethnicity, Gender Identity and Current Age, 2023

		White		Black		Latino	Mu	lti-race	NH	AAPI*	(Other**		Total
	Ν	%	Ν	%	Ν	%					Ν	%	Ν	%
Transgender														
<13	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13-19	0	0.0	1	0.5	0	0.0	0	0.0	0	0.0	0	0.0	1	0.3
20-24	0	0.0	14	7.6	3	5.7	1	4.6	0	0.0	0	0.0	18	6.7
25-29	0	0.0	25	13.7	6	11.3	1	4.6	0	0.0	0	0.0	32	11.9
30-39	7	63.6	64	35.0	24	45.3	12	54.6	0	0.0	1	100.0	108	40.0
40-49	1	9.1	40	21.9	14	26.4	6	27.3	0	0.0	0	0.0	61	22.6
50-59	2	18.2	29	15.8	4	7.5	2	9.1	0	0.0	0	0.0	37	13.7
60 and older	1	9.1	10	5.5	2	3.8	0	0.0	0	0.0	0	0.0	13	4.8
Missing	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Subtotal	11	100	183	100	53	100	22	100	0	0	1	100	270	100

* NHAAPI includes Native Hawaiian, Asian, Asian American, and Pacific Islander. ** Other race includes Alaska Native, American Indian, and unknown race individuals.

Table B4a. People Living with HIV by Ward, District of Columbia, 2023

Ward	N	%	Rate
Ward 1	1,384	11.9	1,622.8
Ward 2	1,056	9.0	1,180.1
Ward 3	381	3.3	446.7
Ward 4	1,180	10.1	1,393.8
Ward 5	1,815	15.6	2,025.3
Ward 6	1,215	10.4	1,441.9
Ward 7	2,247	19.3	2,622.4
Ward 8	2,085	17.9	2,445.9
Missing	307	2.6	N/A
Total	11,670	100	1,692

Zip	Ν	%
20019	1,615	13.8
20020	1,385	11.9
20002	1,353	11.6
20011	1,072	9.2
20032	977	8.4
20009	961	8.2
20001	844	7.2
20010	512	4.4
20003	488	4.2
20018	447	3.8
20024	403	3.5
20017	308	2.6
20005	262	2.3
20012	205	1.8
20008	199	1.7
20016	125	1.1
20007	100	0.9
20037	95	0.8
20036	75	0.6
20015	61	0.5
20004	14	0.1
20013	9	0.1
20006	7	0.1
20090	6	0.1
20030	5	0.0
20059	5	0.0
In Zips with <5*	29	0.3
Missing	108	0.9
Total	11,670	100

Table B5. Newly Diagnosed HIV Cases by Year of Diagnosis, Gender Identity, Race/Ethnicity, Mode of Transmission, and Age at Diagnosis, District of Columbia, 2019-2023

	2	019	20	020	2	021	2	.022	20	023	То	tal
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%
Gender Identity												
Male	204	73.4	162	74.0	165	72.4	162	73.6	147	76.6	840	73.9
Female	60	21.6	40	18.3	52	22.8	48	21.8	28	14.6	228	20.1
Transgender	14	5.0	16	7.3	10	4.4	9	4.1	15	7.8	64	5.6
Missing	0	0.0	1	0.4	1	0.4	1	0.5	2	1.0	5	0.4
Total	278	100	219	100	228	100	220	100	192	100	1,137	100
Race/Ethnicity												
White	24	8.6	27	12.3	25	11.0	17	7.7	19	9.9	112	9.9
Black	199	71.6	151	69.0	146	64.0	164	74.5	132	68.8	792	69.7
Latino	39	14.0	25	11.4	35	15.4	31	14.1	32	16.7	162	14.2
Other*	16	5.8	16	7.3	22	9.6	8	3.6	9	4.6	71	6.2
Total	278	100	219	100	228	100	220	100	192	100	1,137	100
Mode of Transmission												
Sexual contact	254	91.4	189	86.3	195	85.5	194	88.2	175	91.2	1,007	88.6
IDU	3	1.1	1	0.5	2	0.9	7	3.2	1	0.5	14	1.2
Sexual contact/IDU	5	1.8	7	3.2	5	2.2	6	2.7	2	1.0	25	2.2
Risk not identified	14	5.0	22	10.0	26	11.4	13	5.9	14	7.3	89	7.8
Other**	2	0.7	0	0.0	0	0.0	0	0.0	0	0.0	2	0.2
Total	278	100	219	100	228	100	220	100	192	100	1,137	100
Age at Diagnosis												
Under 13	2	0.7	0	0.0	0	0.0	0	0.0	0	0.0	2	0.2
13-17	3	1.1	4	1.8	1	0.4	2	0.9	5	2.6	15	1.3
18-19	11	4.0	6	2.7	8	3.5	3	1.4	8	4.2	36	3.2
20-24	36	12.9	28	12.8	23	10.1	37	16.8	35	18.2	159	14.0
25-29	49	17.6	45	20.5	36	15.8	49	22.2	30	15.6	209	18.4
30-39	83	29.9	52	23.7	83	36.4	67	30.4	51	26.6	336	29.5
40-49	35	12.6	33	15.1	24	10.5	25	11.4	35	18.2	152	13.4
50-59	40	14.4	31	14.2	30	13.2	20	9.1	16	8.3	137	12.0
60 and older	19	6.8	12	5.5	15	6.6	14	6.4	9	4.7	69	6.1
Missing	0	0.0	8	3.7	8	3.5	3	1.4	3	1.6	22	1.9
Total	278	100	219	100	228	100	220	100	192	100	1,137	100

* Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals.

** Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

Table B5a. Newly Diagnosed HIV Cases by Ward, District of Columbia, 2023

Ward	Ν	%	Rate
Ward 1	21	10.9	24.6
Ward 2	15	7.8	16.8
Ward 3	4	2.1	4.7
Ward 4	19	9.9	22.4
Ward 5	33	17.2	36.8
Ward 6	19	9.9	22.5
Ward 7	31	16.1	36.2
Ward 8	41	21.4	48.1
Missing	9	4.7	-
Total	192	100	27.8

Table B5b. Newly Diagnosed HIV Cases by Zip Code, District of Columbia, 2023

Zip	Ν	%
20032	25	13.0
20019	24	12.5
20002	22	11.5
20020	21	10.9
20011	19	9.9
20001	18	9.4
20009	14	7.3
20024	7	3.6
20018	6	3.1
20010	6	3.1
20003	6	3.1
20017	5	2.6
In Zips with <5*	17	8.9
Homeless/Missing	2	1.0
Total	192	99.4

*DC Health does not report counts of less than 5 in compliance with security and confidentiality guidelines.

	201	9	2020)	202	1	202	2	202	3	Tota	d
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%
Male												
MSM	153	75.0	120	74.1	122	73.9	118	72.8	110	74.8	623	74.2
IDU	2	1.0	0	0.0	0	0.0	4	2.5	1	0.7	7	0.8
MSM/IDU	5	2.5	6	3.7	5	3.0	6	3.7	2	1.4	24	2.9
Heterosexual Contact	32	15.7	21	13.0	18	10.9	24	14.8	24	16.3	119	14.2
Risk not identified	11	5.4	15	9.3	20	12.1	10	6.2	10	6.8	66	7.9
Other*	1	0.5	0	0.0	0	0.0	0	0.0	0	0.0	1	0.1
Subtotal	204	100	162	100	165	100	162	100	147	100	840	100
Female												
IDU	1	1.7	1	2.5	2	3.8	3	6.3	0	0.0	7	3.1
Heterosexual Contact	55	91.7	35	87.5	45	86.5	43	89.6	26	92.9	204	89.5
Risk not identified	3	5.0	4	10.0	5	9.6	2	4.1	2	7.1	16	7.0
Other*	1	1.6	0	0.0	0	0.0	0	0.0	0	0.0	1	0.4
Subtotal	60	100	40	100	52	100	48	100	28	100	228	100
Transgender												
Sexual Contact	14	100.0	13	81.3	10	100.0	9	100.0	15	100.0	61	95.3
IDU	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Sexual Contact/IDU	0	0.0	1	6.3	0	0.0	0	0.0	0	0.0	1	1.6
Risk not identified	0	0.0	2	12.4	0	0.0	0	0.0	0	0.0	2	3.1
Other*	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Subtotal	14	100	16	100	10	100	9	100	15	100	64	100

Table B6. Newly Diagnosed HIV Cases by Year of Diagnosis, Gender Identity, and Mode of Transmission, District of Columbia, 2019-2023

* Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers)

** One individual with missing gender was excluded

Table B7. Newly Diagnosed HIV Cases by Year of Diagnosis, Gender Identity, and Age at Diagnosis, District of Columbia, 2019-2023

	2	019	2	020	2	021	2	022	2	023	Т	otal
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	ç
Male												
Under 13	1	0.5	0	0.0	0	0.0	0	0.0	0	0.0	1	0.
13-17	2	1.0	3	1.9	1	0.6	2	1.2	3	2.0	11	1.
18-19	10	4.9	6	3.7	6	3.6	2	1.2	6	4.1	30	3
20-24	28	13.7	23	14.2	17	10.3	28	17.3	27	18.4	123	14
25-29	39	19.1	36	22.2	28	17.0	38	23.5	26	17.7	167	19
30-39	68	33.3	41	25.3	68	41.2	55	34.1	44	29.9	276	32
40-49	23	11.3	23	14.2	16	9.7	14	8.6	25	17.0	101	12
50-59	22	10.8	18	11.1	13	7.9	14	8.6	10	6.8	77	9
60 and older	11	5.4	7	4.3	10	6.1	8	4.9	6	4.1	42	5
Missing	0	0.0	5	3.1	6	3.6	1	0.6	0	0.0	12	1
Subtotal	204	100	162	100	165	100	162	100	147	100	840	1(
Female												
Under 13	1	1.7	0	0.0	0	0.0	0	0.0	0	0.0	1	0
13-17	1	1.7	0	0.0	0	0.0	0	0.0	2	7.1	3	1
18-19	1	1.7	0	0.0	1	1.9	1	2.1	0	0.0	3	1
20-24	3	5.0	4	10.0	3	5.8	4	8.3	3	10.7	17	7
25-29	7	11.7	3	7.5	5	9.6	9	18.8	0	0.0	24	10
30-39	10	16.7	8	20.0	14	26.9	10	20.8	5	17.9	47	20
40-49	11	18.3	6	15.0	8	15.4	10	20.8	8	28.6	43	18
50-59	18	30.0	13	32.5	15	28.9	6	12.5	6	21.4	58	25
60 and older	8	13.3	5	12.5	5	9.6	6	12.5	3	10.7	27	11
Missing	0	0.0	1	2.5	1	1.9	2	4.2	1	3.6	5	2
Subtotal	60	100	40	100	52	100	48	100	28	100	228	1(
Transgender												
Under 13	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
13-17	0	0.0	1	6.3	0	0.0	0	0.0	0	0.0	1	1
18-19	0	0.0	0	0.0	1	10.0	0	0.0	2	13.3	3	4
20-24	5	35.7	1	6.3	3	30.0	5	55.6	5	33.4	19	29
25-29	3	21.5	6	37.4	3	30.0	2	22.2	4	26.7	18	28
30-39	5	35.7	3	18.7	1	10.0	1	11.1	2	13.3	12	18
40-49	1	7.1	4	25.0	0	0.0	1	11.1	2	13.3	8	12
50-59	0	0.0	0	0.0	2	20.0	0	0.0	0	0.0	2	3
60 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
Missing	0	0.0	1	6.3	0	0.0	0	0.0	0	0.0	1	1
Subtotal	14	100	16	100	10	100	9	100	15	100	64	1(

* Five individuals with missing gender over the five-year period were excluded.

	Living in DC	Ever link care		Retained care in 2	-	Retainec continuous 2023 ^t	care in	Ever vira suppress	-	Suppressed known viral s 2023	status in
	N	Ν	%	N	%	Ν	%	N	%	N	%
Sex											
Male	8,461	8,360	98.8	6,675	78.9	4,376	51.7	7,395	87.4	5,939	70.2
Female	3,015	2,982	98.9	2,468	81.9	1,632	54.1	2,561	84.9	2,145	71.1
Transgender	274	270	98.5	228	83.2	166	60.6	236	86.1	200	73.0
Total	11,750	11,612	98.8	9,371	79.8	6,174	52.5	10,192	86.7	8,284	70.5
Race/Ethnicity											
White	1,727	1,710	99.0	1,370	79.3	879	50.9	1,647	95.4	1,303	75.4
Black	8,292	8,195	98.8	6,628	79.9	4,366	52.7	7,028	84.8	5,753	69.4
Latino	1,006	993	98.7	817	81.2	572	56.9	901	89.6	748	74.4
Other*	725	714	98.5	556	76.7	357	49.2	616	85.0	480	66.2
Total	11,750	11,612	98.8	9,371	79.8	6,174	52.5	10,192	86.7	8,224	70.5
Mode of Transmission											
Sexual contact	8,950	8,862	99.0	7,188	80.3	4,709	52.6	7,814	87.3	6,383	71.3
Injection drug use (IDU)	994	992	99.8	809	81.4	558	56.1	848	85.3	696	70.0
Sexual contact/IDU	465	465	100.0	380	81.7	267	57.4	394	84.7	328	70.5
Other**	145	144	99.3	111	76.6	72	49.7	108	74.5	85	58.6
Risk not identified	1,196	1,149	96.1	883	73.8	568	47.5	1,028	86.0	792	666.2
Total	11,750	11,612	98.8	9,371	79.8	6,174	52.5	10,192	86.7	8,284	70.5
Current Age											
0-19	39	35	89.7	29	74.4	25	64.1	29	74.4	20	51.3
20-24	162	151	93.2	112	69.1	74	45.7	109	67.3	84	51.9
25-29	521	505	96.9	374	71.8	219	42.0	404	77.5	317	60.8
30-39	2,338	2,295	98.2	1,785	76.3	1,083	46.3	1,870	80.0	1,482	63.4
40-49	2,283	2,258	98.9	1,809	79.2	1,166	51.1	1,957	85.7	1,568	68.7
50-59	3,121	3,104	99.5	2,574	82.5	1,740	55.8	2,789	89.4	2,317	74.2
60 and older	3,286	3,264	99.3	2,688	81.8	1,867	56.8	3,034	92.3	2,496	76.0
Total	11,750	11,612	98.8	9,371	79.8	6,174	52.5	10,192	86.7	8,284	70.5

Table B8. HIV Care Continuum among People Living with HIV in DC through the end of 2022, by Selected Characteristics, District of Columbia, 2023

^a Having at least 1 medical visit in 2023. ^b Having 2 or more medical visits in 2023 that were at least 90 days apart.

*Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals.

** Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

Newly Diagnosed between 2018- 2022 and Living in 2023***	Linked within 3 Month	ns of Diagnosis	Viral suppression within 12 months of HIV diagnosis		
N	Ν	%	Ν		
927	798	86.1	720	77	
		88.8		79	
	47	82.5	38	66	
3	1	33.3	1	33	
1,254	1,083	86.4	971	77	
119	110	92.4	97	81	
897	769	85.7	687	76	
159	139	87.4	128	80	
79	65	82.3	59	74	
1,254	1,083	86.4	971	7	
1,095	963	88.0	873	79	
24	19	79.2	14	5	
33	31	93.9	28	8	
2	2	100.0	2	10	
100	68	68.0	54	54	
1,254	1,083	86.4	971	7	
52	47	90.4	42	8	
176	147	83.5	137	7	
240	217	90.4	192	80	
377	325	86.2	296	78	
161	134	83.2	116	72	
168	143	85.1	129	76	
79	70	88.6	59	74	
1	0	0.0	0	(
1,254	1,083	86.4	971	7	
313	277	88.5	241	7	
278	236	84.9	213	70	
216	184	85.2	170	7	
228	189	82.9	175	70	
	2022 and Living in 2023*** N 927 267 57 3 1,254 10 119 897 159 79 1,254 1,095 24 333 2 1,095 24 333 2 1,00 1,254 100 1,25 10	2022 and Living in 2023*** N N 927 798 267 237 57 47 3 1 1,254 1,083 1 1,254 1,083 119 110 897 769 139 79 65 1,254 1,083 1 1,095 963 1 1 1 1,095 963 31 2 2 1 1,095 963 31 2 2 2 1 1,095 963 31 2 2 2 1	N N % 927 798 86.1 267 237 88.8 57 47 82.5 3 1 33.3 1,254 1,083 86.4 119 110 92.4 897 769 85.7 159 139 87.4 79 65 82.3 1,254 1,083 86.4 109 10 92.4 19 139 87.4 79 65 82.3 1,095 963 88.0 24 19 79.2 33 31 93.9 2 2 100.0 100 68 68.0 1,254 1,083 86.4 52 47 90.4 176 147 83.5 240 217 90.4 377 325 86.2 161 134 85.1	2022 and Living in 2023*** Linked within 3 Months of Diagnosis 12 months of HIV d N N % N 927 798 86.1 720 267 237 88.8 212 57 47 82.5 38 3 1 33.3 1 1.254 1.083 86.4 971 119 110 92.4 97 897 769 85.7 667 159 139 87.4 128 79 65 82.3 59 1254 1003 86.4 971 1095 963 88.0 873 24 19 79.2 14 33 31 93.9 28 2 2 1000 2 100 100 68 68.0 54 1254 1083 86.4 971 240 217 90.4 192 377 </td	

Table B9. Linkage to Care and Viral Suppression among Newly Diagnosed HIV Cases, by Selected Characteristics, District of Columbia, 2018-2022

* Other race includes mixed race individuals, Asian, Alaska Native, American Indian, Native Hawaiian, and Pacific Islander.

** Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

*** Excluded if deceased on or before December 31, 2023.

	Newly diagnosed	Linked v			d within	Linked withi		Linked within	31-90	Linked	>90	No eviden	
	cases 2019-2023***	7 da	ys	8-15	5 days	days		days		days		linkage to	care
	N	N	%	Ν	%	N	%	N	%	N	%	N	%
Sex													
Male	838	467	55.7	130	15.5	62	7.4	63	7.5	73	8.7	43	5.1
Female	227	114	50.2	43	18.9	18	7.9	25	11.0	13	5.7	14	6.2
Transgender	64	33	51.6	13	20.3	7	10.9	1	1.6	8	12.5	2	3.1
Total	1,1133	614	54.2	186	16.4	87	7.7	89	7.9	94	8.3	63	5.6
Race/Ethnicity													
White	112	69	61.6	19	17.0	7	6.3	10	8.9	3	2.7	4	3.6
Black	791	412	52.1	130	16.4	69	8.7	68	8.6	72	9.1	40	5.1
Latino	162	98	60.5	26	16.1	9	5.6	9	5.6	12	7.4	8	4.9
Other*	68	35	51.5	11	16.2	2	2.9	2	2.9	7	10.3	11	16.2
Total	1,133	614	54.2	186	16.4	87	7.7	89	7.9	94	8.3	63	5.6
Mode of Transmission	n												
Sexual contact	1,007	547	54.3	174	17.3	83	8.2	84	8.3	85	8.4	34	3.4
Injection drug use (IDU	J) 14	11	78.6	0	0.0	0	0.0	0	0.0	1	7.1	2	14.3
Sexual contact/IDU	25	17	68.0	5	20.0	1	4.0	1	4.0	1	4.0	0	0.0
Other**	2	2	100.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Risk not identified	85	37	45.5	7	8.2	3	3.5	4	4.7	7	8.2	27	31.8
Total	1,133	614	54.2	186	16.4	87	7.7	89	7.9	94	8.3	63	5.6
Age at Diagnosis													
0-19	53	28	52.8	10	18.9	4	7.6	5	9.4	3	5.7	3	5.7
20-24	161	80	49.7	29	18.0	15	9.3	8	5.0	18	11.2	11	6.8
25-29	212	125	59.0	40	18.9	12	5.7	13	6.1	17	8.0	5	2.4
30-39	341	179	52.5	50	14.7	28	8.2	37	10.9	27	7.9	20	5.9
40-49	153	86	56.2	26	17.0	14	9.2	7	4.6	16	10.5	4	2.6
50-59	141	78	55.3	19	13.5	11	7.8	9	6.4	11	7.8	13	9.2
60 and older	71	38	53.5	12	16.9	3	4.2	10	14.1	2	2.8	6	8.5
Missing	1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1	0.1
Total	1,133	614	54.2	186	16.4	87	7.7	89	7.9	94	8.3	63	5.6
Year of Diagnosis													
2019	278	140	50.4	50	18.0	25	9.0	21	7.6	35	12.6	7	2.5
2020	216	130	60.2	35	16.2	11	5.1	8	3.7	18	8.3	14	6.5
2021	228	124	54.4	28	12.3	13	5.7	24	10.5	20	8.8	19	8.3
2022	219	115	52.5	44	20.1	17	7.8	21	9.6	12	5.5	10	4.6
2023	192	105	54.7	29	15.1	21	10.9	15	7.8	9	4.7	13	6.8
Total	1,133	614	54.2	186	16.4	87	7.9	89	7.9	94	8.3	63	5.6

Table B10. Time to Linkage to HIV Care among Newly Diagnosed Cases, by Selected Characteristics, District of Columbia, 2019-2023

*Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals.

**Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

***Excluded if diagnosed from 2019-2022 and deceased on or before December 31, 2023.

	Newly diagnosed	Suppressed w		Suppressed wit	hin 91-	Suppressed		No docur		Median time to vira
	cases 2019-2023	90 days	;	180 days	5	>180 d	ays	suppres	ssion	suppression (days)
	Ν	Ν	%	Ν	%	N	%	Ν	%	
Gender Identity										
Male	838	442	53.3	134	16.0	129	15.4	133	15.9	61
Female	227	121	52.7	38	16.7	37	16.3	31	13.7	62
Transgender	64	33	51.6	5	7.8	15	23.4	11	17.2	59
Total	1,129	596	52.6	177	15.6	181	16.0	175	15.4	
Race/Ethnicity										
White	112	60	53.6	23	20.5	16	14.3	13	11.6	57
Black	791	399	50.4	127	16.1	135	17.1	130	16.4	65
Latino	162	102	63.0	18	11.1	22	13.6	20	12.4	50
Other**	68	35	51.5	9	13.2	8	11.8	16	23.5	50
Total	1,133	596	52.6	177	15.6	181	16.0	179	15.8	
Mode of Transmission										
Sexual contact	1,007	546	54.2	163	16.9	167	16.6	131	13.0	62
Injection drug use (IDU)	14	7	50.0	2	14.3	1	7.1	4	28.6	4
Sexual contact/IDU	25	12	48.0	6	24.0	3	12.0	4	16.0	59
Other***	2	2	100.0	0	0.0	0	0.0	0	0.0	N
Risk not identified	85	29	34.1	6	7.1	10	11.8	40	47.1	5
Total	1,133	596	286	177	15.6	181	16.0	179	15.8	
Age at Diagnosis										
0-19	53	32	60.4	8	15.1	6	11.3	7	13.2	6
20-24	161	81	50.3	18	11.2	31	19.3	31	19.3	60
25-29	212	104	49.1	42	19.8	33	15.6	33	15.6	59
30-39	341	189	55.4	53	15.5	52	15.3	47	13.8	6
40-49	153	79	51.6	25	16.3	25	16.3	24	15.7	6
50-59	141	71	50.4	19	13.5	28	19.9	23	16.3	64
60 and older	71	40	56.3	12	16.9	6	8.5	13	18.3	5
Total	1,132	596	52.6	177	15.6	181	16.0	178	15.7	
Year of Diagnosis										
2019	278	143	51.4	42	15.1	64	23.0	29	10.4	7
2020	216	109	50.5	43	19.9	32	14.8	32	14.8	64
2021	228	121	53.1	27	11.8	42	18.4	38	16.7	5
2022	219	115	52.5	38	17.4	19.1	13.3	37	16.9	6
2023	192	108	56.3	27	15.3	14	7.3	43	22.4	5
Total	1,133	596	52.6	177	15.6	171	15.1	179	15.8	

Table B11. Time to Initial Viral Suppression among Newly Diagnosed Cases, by Selected Characteristics, District of Columbia, 2019-2023*

* Follow-up time varies by year of diagnosis, excluded if diagnosed from 2019-2021 and deceased on or before December 31, 2022.

** Other race includes mixed race individuals, Asian, Alaska Native, American Indian, Native Hawaiian, and Pacific Islander.

*** Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

Table B12. Ryan White Program HIV Care Continuum, by Gender Identity, Race, Ethnicity, Mode of Transmission and Current Age, District of Columbia, 2023

	≥ 1 medical visit	Retained	in care**	Prescri	bed ART	VL suppre	essed***
Gender Identity	Ν	N	%	N	%	N	%
Male	1,698	1,326	78.1	1,622	95.5	1,479	87.
Female	1,105	877	79.4	1,046	94.7	970	87.8
Transgender M-F	53	36	67.9	48	90.6	41	77.4
Transgender F-M	12	7	58.3	11	91.7	12	100
Current age							
<13	5	5	100.0	5	100	4	80.0
13-24	81	78	96.3	76	93.8	64	79.0
25-34	389	290	74.6	372	95.6	325	83.5
35-44	543	404	74.4	511	94.1	453	83.4
45-54	599	458	76.5	566	94.5	526	87.8
55-64	785	624	79.5	750	95.5	703	89.6
65+	466	387	83.0	447	95.9	427	91.6
Race*							
White	263	188	71.5	253	96.2	243	92.4
Black	2,465	1,946	78.9	2,341	95.0	2,135	86.6
Asian	5	3	60.0	5	100.0	5	100.0
More than one race	68	54	79.4	65	95.6	59	86.8
Missing/Other	67	55	82.1	63	94.0	60	89.6
Ethnicity							
Latino	288	211	73.3	276	95.8	262	91.0
Not Latino	2,543	2,001	78.7	2,420	95.2	2,215	87.1
Unknown	37	34	91.9	31	83.8	25	67.6
Mode of Transmission*							
MSM	963	707	73.4	925	96.1	833	86.5
MSM/IDU	8	5	62.5	7	87.5	5	62.5
Injection drug use (IDU)	252	202	80.2	234	92.9	222	88.
Heterosexual contact	1,392	1,109	79.7	1,326	95.3	1,223	87.9
Blood Transfusion/Blood Comp	7	6	85.7	7	100.0	7	100.0
Mother at risk/Perinatal	47	40	85.1	47	100.0	38	80.9
Risk not identified	199	177	88.9	181	91.0	174	87.4
Total	2,868	2,246	78.3	2,727	95.1	2,502	87.2

*These data elements allow for reporting of multiple responses, totals may vary.

** \geq 2 medical visits in 2023 at least 90 days apart.

***<200 copies/mL at last VL in 2023.

Table B13. Deaths among Persons with HIV by Year of Death, Gender Identity, Race/Ethnicity, Mode of Transmission and Age at Death, District of Columbia, 2018-2022

	20)18	20	019	20	020	2	2021	2	022	Т	otal
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%
Gender Identity												
Male	199	71.1	143	66.2	271	71.9	236	69.6	210	72.7	1,059	70.6
Female	77	27.5	71	32.9	100	26.5	98	28.9	75	26.0	421	28.0
Transgender	4	1.4	2	0.9	6	1.6	5	1.5	4	1.3	21	1.4
Total	280	100	216	100	377	100	339	100	289	100	1,501	100
Race/Ethnicity												
White	30	10.7	17	7.9	31	8.2	36	10.6	29	10.0	143	9.5
Black	214	76.4	172	79.6	308	81.7	266	78.5	218	75.5	1,178	78.5
Latino	15	5.4	10	4.6	21	5.6	10	2.9	11	3.8	67	4.5
Other*	21	7.5	17	7.9	17	4.5	27	8.0	31	10.7	113	7.5
Total	280	100	216	100	377	100	339	100	289	100	1,501	100
Mode of												
Transmission												
Sexual contact	167	59.6	122	56.5	218	57.8	233	68.7	183	63.3	923	61.5
IDU	52	18.6	51	23.6	80	21.2	62	18.3	53	18.3	298	19.9
Sexual contact/IDU	27	9.6	16	7.4	32	8.5	17	5.0	25	8.7	117	7.8
Other**	1	0.4	3	1.4	6	1.6	2	0.6	2	0.7	14	0.9
Risk not identified	33	11.8	24	11.1	41	10.9	25	7.4	26	9.0	149	9.9
Total	280	100	216	100	377	100	339	100	289	100	1,501	100
Age at Death												
Under 13	0	0.0	0	0.0	1	0.3	0	0.0	0	0.0	1	0.1
13-19	1	0.3	0	0.0	0	0.0	0	0.0	1	0.3	2	0.1
20-24	2	0.7	0	0.0	1	0.3	2	0.6	1	0.3	6	0.4
25-29	3	1.1	4	1.9	6	1.5	5	1.5	8	2.7	26	1.7
30-9	22	7.9	19	8.8	23	6.1	23	6.8	27	9.2	114	7.6
40-49	44	15.7	30	13.9	38	10.1	38	11.2	33	11.4	183	12.2
50-59	93	33.2	72	33.3	108	28.6	94	27.7	77	26.6	444	29.6
60 and older	115	41.1	91	42.1	200	53.1	177	52.2	142	49.1	725	48.3
Total	280	100	216	100	377	100	339	100	289	100	1,501	100

* Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals.

** Other mode of transmission includes perinatal transmission, hemophilia, blood transfusion, and occupational exposure (healthcare workers).

	201	19	202	20	202	1	202	22	202	23	Total
	Ν	Rate	1								
Gender Identity											
Male	4,424	1,317.2	3,198	996.7	3,772	1,184.0	4,316	1,355.9	4,557	1,416.5	20,26
Female	5,218	1,401.2	3,293	940.9	3,282	936.5	3,808	1,079.9	3,732	1,044.6	19,33
Transgender	25	-	26	-	43	-	45	-	44	-	18
Unknown	83	-	33	-	14	-	66	-	53	-	2
Total	9,750	1,376.6	6,550	976.4	7,111	1,062.9	8,235	1,227.4	8,386	1,249.9	40,0
Age at Diagnosis											
Under 13	13	12.8	4	4.0	4	4.1	3	3.1	7	7.2	
13-17	1,049	4,006.4	635	2,362.6	575	2,073.6	794	2,785.5	852	2,867.3	3,9
18-19	1,276	6,048.0	785	6,224.7	768	3,779.9	842	4,314.2	839	4,154.7	4,5
20-24	2,818	5,468.8	1,792	4,363.2	1,768	3,852.6	2,034	4,371.5	2,057	4,315.9	10,4
25-29	2,176	2,624.2	1,469	1,927.3	1,619	2,316.3	1,775	2,520.1	1,739	2,428.1	8,7
30-39	1,682	1,148.1	1,349	940.6	1,681	1,215.6	1,905	1,383.7	2,013	1,457.1	8,6
40-49	427	508.9	306	364.1	417	499.6	581	683.2	567	644.6	2,2
50-59	198	271.4	149	210.4	213	310.2	225	332.2	209	312.7	9
60 and Older	74	61.0	58	49.9	65	55.5	70	59.1	96	80.0	3
Missing	37	-	3	-	1	-	6	-	7	-	
Total	9,750	1,376.6	6,550	976.4	7,111	1,062.9	8,235	1,227.4	8,386	1,249.9	40,0
Ward											
Ward 1	1,134	1,353.0	736	862.9	938	1,099.8	1,087	1,274.6	1,195	1,401.2	5,0
Ward 2	674	865.7	521	668.6	701	855.9	818	914.1	736	822.5	3,4
Ward 3	261	315.5	173	204.4	225	263.8	258	302.5	266	311.8	1,1
Ward 4	820	911.2	505	559.2	587	693.4	682	805.6	700	826.8	3,2
Ward 5	1,167	1,294.2	865	939.3	925	1,034.4	1,093	1,219.6	1,180	1,316.7	5,2
Ward 6	750	751.6	537	527.1	648	598.9	733	869.9	735	872.2	3,4
Ward 7	1,769	2,158.7	1,249	1,482.1	1,289	1,690.4	1,532	1,787.9	1,505	1,756.4	7,3
Ward 8	2,073	2,399.7	1,403	1,639.7	1,469	1,871.0	1,533	1,798.3	1,578	1,851.1	8,0
Missing	1,102	-	561	-	329	-	499	-	491	-	2,9
Total	9,750	1,376.6	6,550	976.4	7,111	1,062.9	8,235	1,227.4	8,386	1,249.9	40,0
HIV co-infected	N	%	N	%	N	%	N	%	N	%	
Prior diagnosis	513	5.3%	465	7.1%	594	8.4%	614	7.5%	604	7.2%	2,7
Concurrent diagnosis	24	0.2%	17	0.2%	26	0.4%	21	0.3%	24	0.3%	1
Total	537	5.5%	482	7.3%	620	8.8%	635	7.8%	628	7.5%	2,9

* Source: 2023 US Census Estimates. Rates calculated on events and not individuals. Race/ethnicity not included because of the high percentage of missing information.

Table B15. Gonorrhea Cases and Rates per 100,000 persons by Year of Diagnosis, Gender Identity, Age, and Ward, District of Columbia, 2019-2023

	20	019	202		202	21	202		202		Total
	N	Rate	Ν								
Gender Identity											
Male	3,233	962.6	2,814	877.0	3,271	1,026.7	3,689	1,158.9	4,342	1,349.6	17,3
Female	1,334	358.2	1,142	326.3	1,168	333.3	1,219	345.7	1,448	405.3	6,3
Transgender	32	-	42	-	52	-	50	-	49	-	2
Unknown	27	-	16	-	12	-	16	-	17	-	
Total	4,626	653.2	4,014	598.4	4,503	673.1	4,974	741.3	5,856	872.8	23,9
Age at Diagnosis											
Under 13	5	4.9	6	6.0	1	1.0	2	2.1	4	4.1	
13-17	300	1,145.8	189	703.2	174	627.5	190	666.5	330	1,110.6	1,1
18-19	336	1,592.6	286	2,267.9	276	1,358.4	289	1,480.8	346	1,713.4	1,5
20-24	976	1,894.1	842	2,050.1	835	1,819.5	933	2,005.2	1,001	2,100.2	4,5
25-29	1,133	1,366.4	965	1,266.1	1,103	1,578.1	1,152	1,635.6	1,312	1,831.9	5,6
30-39	1,255	856.7	1,154	804.6	1,463	1,058.0	1,686	1,224.7	1,997	1,445.5	7,5
40-49	373	444.5	351	417.7	426	510.4	466	548.0	555	630.9	2,1
50-59	191	261.8	167	235.9	177	257.7	192	283.5	227	339.7	9
60 and Older	51	42.0	54	46.4	47	40.1	64	54.1	83	69.2	2
Missing	6	-	0	-	1	-	0	-	1	-	
Total	4,626	653.2	4,014	598.4	4,503	673.1	4,974	741.3	5,856	872.8	23,9
Ward											
Ward 1	628	749.3	458	537.0	656	769.2	825	967.3	957	1122.1	3,5
Ward 2	456	585.7	334	428.6	540	659.3	613	685.0	684	764.4	2,6
Ward 3	109	131.7	77	91.0	105	123.1	132	154.7	139	163.0	5
Ward 4	308	342.3	261	289.0	315	372.1	328	387.4	370	437.0	1,5
Ward 5	591	655.4	529	574.4	586	655.3	646	720.8	844	941.8	3,1
Ward 6	353	353.8	349	342.6	408	377.1	480	569.6	559	663.4	2,1
Ward 7	774	944.5	752	892.4	794	1,041.2	863	1,007.2	976	1,139.1	4,1
Ward 8	873	1,010.6	839	980.6	817	1,040.6	840	985.4	1030	1,208.3	4,3
Missing	534	-	415	-	282	-	247	-	297	-	1,7
Total	4,626	653.2	4,014	598.4	4,503	673.1	4,974	741.3	5,856	872.8	23,9
HIV co-infected	N	%	N	%	N	%	N	%	N	%	
Prior diagnosis	647	14.0%	598	14.9%	689	15.3%	718	14.4%	749	12.8%	3,4
Concurrent diagnosis	23	0.5%	22	0.5%	27	0.6%	30	0.6%	37	0.6%	1
Total	670	14.5%	620	15.4%	716	15.9%	748	15.0%	786	13.4%	3,5
Infection Site, Males											
Rectal	158	4.9%	390	13.9%	668	20.4%	830	22.5%	992	22.8%	3,0
Pharyngeal	949	29.4%	536	19.0%	800	24.5%	917	24.8%	1,117	25.7%	4,3
Genital	2	0.1%	19	0.7%	5	0.2%	7	0.2%	11	0.3%	.,0
Urine Only	178	5.5%	456	16.2%	530	16.2%	675	18.3%	811	18.7%	2,6
Multi-site	74	2.3%	257	9.1%	510	15.6%	552	15.0%	686	15.8%	2,0

* Source: 2023 US Census Estimates. Rates calculated on events and not individuals. Race/Ethnicity information is not included because of the high percentage of missing information.

Table B16. Primary, Secondary, and Early Non-Primary, Non-Secondary Syphilis Cases and Rates per 100,000 persons by Year of Diagnosis, Gender Identity,Race/Ethnicity, Age, Gender of Sex Partner, and Ward, District of Columbia, 2019-2023

	2019		2020		2021		2022		2023		Total
	Ν	Rate	Ν								
Diagnosis											
Primary	131	18.5	103	15.4	110	16.4	114	17.0	89	13.3	547
Secondary	210	29.7	167	24.9	194	29.0	189	28.2	197	29.4	957
Early Syphilis	517	73.0	461	68.7	453	67.7	570	85.0	402	59.9	2,403
Total	858	121.1	731	109.0	757	113.1	873	130.1	688	102.5	3,907
Gender Identity											
Male	768	228.7	639	199.2	660	207.2	752	236.2	577	179.4	3,396
Female	63	16.9	70	20.0	68	19.4	73	20.7	81	22.7	355
Transgender	23	-	21	-	29	-	48	-	30	-	151
Unknown	4	-	1	-	0	-	0	-	0	-	5
Total	858	121.1	731	109.0	757	113.1	873	130.1	688	102.5	3,907
Age at Diagnosis											
13-17	5	19.1	6	22.3	4	14.4	4	14.0	4	13.5	23
18-19	24	113.8	13	103.1	14	68.9	7	35.9	10	49.5	68
20-24	93	180.5	78	189.9	55	119.8	60	129.0	44	92.3	330
25-29	183	220.7	144	188.9	138	197.4	141	200.2	99	138.2	705
30-39	302	206.1	290	202.2	294	212.6	360	261.5	274	198.3	1,520
40-49	116	138.2	93	110.7	120	143.8	151	177.6	137	155.7	617
50-59	107	146.7	79	111.6	101	147.1	105	155.0	74	110.7	466
60 and Older	28	23.1	28	24.1	31	26.4	45	38.0	46	38.3	178
Missing	0	-	0	-	0	-	0	-	0	-	-
Total	858	121.1	731	109.0	757	113.1	873	130.1	688	102.5	3,907
Race/Ethnicity											
Black	460	146.3	434	145.6	417	141.4	496	170.6	416	143.6	2,223
White	229	86.4	166	66.7	180	72.0	195	77.2	118	46.2	888
Latino	118	147.8	102	132.7	100	131.2	120	153.6	102	125.2	542
Multi-Race	8	47.6	12	74.4	11	65.8	15	86.0	23	126.9	69
Other*	16	49.4	8	26.1	10	32.1	14	43.5	14	41.2	62
Missing	27	-	9	-	39	-	33	-	15	-	123
Total	858	121.1	731	109.0	757	113.1	873	130.1	688	102.5	3,907

	20	19	20)20	20	021	20	022	2	023	Total
	Ν	Rate	Ν								
Ward											
Ward 1	134	159.9	98	114.9	121	141.9	119	139.5	117	137.2	589
Ward 2	106	136.2	71	91.1	95	116.0	106	118.5	78	87.2	456
Ward 3	31	37.5	26	30.7	20	23.4	24	28.1	16	18.8	117
Ward 4	79	87.8	69	76.4	60	70.9	76	89.8	49	57.9	333
Ward 5	114	126.4	82	89.0	100	111.8	132	147.3	93	103.8	521
Ward 6	72	72.2	76	74.6	78	72.1	93	110.4	59	70.0	378
Ward 7	125	152.5	120	142.4	106	139.0	142	165.7	100	116.7	593
Ward 8	111	128.5	122	142.6	111	141.4	130	152.5	119	139.6	593
Missing	86	-	67	-	66	-	51	-	57	-	327
Total	858	121.1	731	109.0	757	113.1	873	130.1	688	102.5	3,907
Gender of Sex Partner **	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν
MSM	409	47.7%	350	47.9%	514	67.9%	594	68.0%	455	66.1%	2,322
Men who have sex with women	46	5.4%	38	5.2%	55	7.3%	68	7.8%	50	7.3%	257
Females who have sex with men only	41	4.8%	41	5.6%	44	5.8%	54	6.2%	51	7.4%	231
Non-cisgender sex with males only	13	1.5%	13	1.8%	21	2.8%	39	4.5%	22	3.2%	108
Total **	509	59.3%	442	60.5%	634	83.8%	755	86.5%	578	84.0%	2,918
HIV co-infected	365	42.5%	343	46.9%	328	43.3%	389	44.6%	324	47.1%	1,749
Prior hepatitis B infections	26	3.0%	14	1.9%	24	3.2%	26	3.0%	20	2.9%	110
Prior hepatitis C infections	64	7.5%	69	9.4%	54	7.1%	61	7.0%	46	6.7%	294
GC or CT infection in the past year	216	25.2%	182	24.9%	192	25.4%	199	22.8%	153	22.2%	942

* Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals.

** Gender of Sex Partner for categories with less than 5 in a given year is not presented. This includes: Females having sex with females, Females having sex with males and females,

Non-cisgender individuals having sex with females, Non-cisgender having sex with females and males, Non-cisgender having sex with non-cisgender individuals.

+ Total of individuals who were interviewed, disclosed information about their sex partners, and whose data were not suppressed due to low numbers (see above).

Table B17. Reported Tuberculosis Cases by Selected Characteristics, District of Columbia, 2019-2023

I	,											
	2	2019		2020		2021		2022		2023	Т	otal
	Ν	Rate	Ν	Rate								
District Total	24	3.4	19	2.7	19	2.7	15	2.7	27	4.0	104	N/A
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%
Place of Birth												
Foreign-Born	17	70.8	17	89.5	14	73.7	11	73.3	19	70.4	78	75.0
US-Born	7	29.2	2	10.5	5	26.3	4	26.7	8	29.6	26	25.0
Total	24	100	19	100	19	100	15	100	27	100	104	100
Anatomical Site												
Pulmonary	17	70.8	10	52.6	11	57.9	9	60.0	20	74.1	67	64.4
Extrapulmonary	7	29.2	8	42.1	6	31.6	2	13.3	5	18.5	28	26.9
Both	0	0.0	1	5.3	2	10.5	4	26.7	2	7.4	9	8.7
Total	24	100	19	100	19	100	15	100	27	100	104	100
Sex												
Male	12	50.0	6	31.6	7	36.8	6	40.0	14	51.8	45	43.3
Female	12	50.0	13	68.4	12	63.2	9	60.0	13	48.2	59	56.7
Total	24	100	19	100	19	100	15	100	27	100	104	100
Age												
<14	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
15 - 24	3	12.5	1	5.3	3	15.8	0	0.0	0	0.0	7	6.7
25 - 44	10	41.7	10	52.6	8	42.1	5	33.3	10	37.0	43	41.4
45 - 64	8	33.3	7	36.8	6	31.6	6	40.0	11	40.8	38	36.5
≥65	3	12.5	1	5.3	2	10.5	4	26.7	6	22.2	16	15.4
Total	24	100	19	100	19	100	15	100	27	100	104	100
Race/Ethnicity												
White	5	20.8	0	0.0	2	10.5	2	13.3	3	11.1	14	13.5
Black	14	58.3	15	78.9	14	73.7	7	46.7	17	63.0	67	64.4
Latino	5	20.8	4	21.1	2	10.5	1	6.7	2	7.4	14	13.5
Other*	0	0.0	0	0.0	1	5.3	5	33.3	5	18.5	11	10.6
Total	24	100	19	100	19	100	15	100	27	100	104	100
Homeless w/in past year	2	8.3	0	0.0	1	5.3	0	0.0	1	3.7	4	3.8
Heavy Alcohol or Substance Use ⁺	2	8.3	2	10.5	0	0.0	0	0.0	4	14.8	8	6.7
HIV Co-infection	1	4.2	3	15.8	3	15.8	0	0.0	2	7.4	9	8.6

* Other race includes mixed race, Asian, Alaska Native, American Indian, Native Hawaiian, Pacific Islander, and unknown race individuals.

[†]Heavy alcohol use: binge drinking on 5 or more days in a month over the past 12 months, i.e. bringing blood alcohol concentration levels to 0.08 g/dL, which typically occurs after four drinks for women and five drinks for men in about 2 hours. (Source: National Institute on Alcohol Abuse and Alcoholism). Substance use includes injecting and noninjecting drug use in the past 12 months not prescribed by a health care provider or approved by FDA for over-the-counter dispensing

Table B18. Newly Reported Hepatitis B Cases and Rates per 100,000 persons by Gender Identity, Age at Diagnosis, Race/Ethnicity, Ward, and Year of Diagnosis, District of Columbia, 2019-2023

	20)19	202	0	202	1	2022	2	2023	3	Total
	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν
Total	233	32.9	136	20.3	168	25.1	144	21.5	113	16.6	794
Confirmed Acute	6	0.8	2	0.3	2	0.3	8	1.2	3	0.4	21
Confirmed Chronic	93	13.1	42	6.3	71	10.6	51	7.6	23	3.4	280
Probable Chronic	134	18.9	92	13.7	95	14.2	85	12.7	87	12.8	493
Total	233	32.9	136	20.3	168	25.1	144	21.5	113	16.6	794
Gender Identity											
Male	132	39.3	88	27.4	102	32.0	85	26.7	77	23.9	484
Female	101	27.1	47	13.4	63	18.0	57	16.2	35	9.8	303
Transgender	0	-	1	-	1	-	2	-	0	-	4
Missing	0	-	0	-	2	-	0	-	1	-	3
Total	233	32.9	136	20.3	168	25.1	144	21.5	113	16.6	794
Age at Diagnosis											
2-12	0	0.0	0	0.0	1	1.2	2	2.5	0	0.0	3
13-19	7	14.8	3	7.6	0	0.0	0	0.0	2	4.0	12
20-29	42	31.2	17	14.5	13	11.2	16	13.7	6	5.0	94
30-39	59	40.3	26	18.1	48	34.7	30	21.8	29	21.0	192
40-49	44	52.4	28	33.3	42	50.3	28	32.9	31	35.2	173
50-59	36	49.3	27	38.1	35	51.0	32	47.3	19	28.4	149
60 and older	45	37.1	35	30.1	29	24.7	36	30.4	26	21.7	171
Missing	0	-	0	-	0	-	0	-	0	-	0
Total	233	32.9	136	20.3	168	25.1	144	21.5	113	16.6	794
Race/Ethnicity											
NHAAPI*	31	100.3	32	109.1	24	80.6	19	61.8	16	49.1	122
Black	121	38.5	72	24.1	88	29.8	76	26.1	56	19.3	413
Latino	11	13.8	4	5.2	7	9.2	9	11.5	6	7.4	37
White	28	10.6	10	4.0	20	8.0	15	5.9	10	3.9	83
Other**	6	32.9	2	11.5	5	27.7	2	10.6	3	15.4	18
Missing	36	-	16	-	24	-	23	-	22	-	121
Total	233	32.9	136	20.3	168	25.1	144	21.5	113	16.6	794

	20)19	202	0	202	1	202	2	2023	3	Total
Ward	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν
Ward 1	26	31.0	12	14.1	9	10.6	16	18.8	14	16.4	77
Ward 2	36	46.2	13	16.7	19	23.2	22	24.6	17	19.0	107
Ward 3	15	18.1	11	13.0	15	17.6	11	12.9	14	16.4	66
Ward 4	38	42.2	13	14.4	23	27.2	21	24.8	15	17.7	110
Ward 5	29	32.2	23	25.0	24	26.8	19	21.2	14	15.6	109
Ward 6	16	16.0	11	10.8	14	12.9	11	13.1	7	8.3	59
Ward 7	26	31.7	17	20.2	17	22.3	19	22.2	16	18.7	95
Ward 8	27	31.3	13	15.2	21	26.7	14	16.4	9	10.6	84
Missing	20	-	23	-	26	-	11	-	7	-	87
Total	233	32.9	136	20.3	168	25.1	144	21.5	113	16.6	794
	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	N
Born After 1990***	44	18.9%	21	15.4%	18	10.7%	26	18.1%	16	14.2%	125
MSM	6	2.6%	7	5.1%	3	1.8%	2	1.4%	4	3.5%	22
HIV co-infected	26	11.1%	18	13.2%	22	13.1%	20	13.9%	8	7.1%	94
Prior history of STIs	17	7.3%	13	9.6%	11	6.6%	9	6.2%	6	5.3%	56

* NHAAPI includes Native Hawaiian, Asian, Asian American, and Pacific Islander.

** Other race includes mixed race, Alaska Native, American Indian, and unknown race individuals.

*** Hepatitis B was added to the childhood immunization schedule in the US in 1990.

+ Source: Source: 2023 US Census estimates. Numbers may differ from previous publications due to additional record matching and/or data cleaning efforts.

Table B19. Hepatitis B Cases Ever Reported by Gender Identity and Age at Diagnosis, District of Columbia, 2023

	Ν	%
Gender Identity		
Male	5,868	60.2
Female	3,819	39.2
Transgender	9	0.1
Missing	44	0.5
Fotal	9,740	100
Age at Diagnosis		
0-12	55	0.6
13-19	176	1.8
20-29	1,374	14.1
30-39	2,414	24.8
40-49	2,457	25.2
50-59	1,831	18.8
60 and older	1,404	14.4
Missing	29	0.3
Total	9,740	100

						Treatment							
	Total Cases R	Total Cases Reported			Genotyp	bed	documer	ited	Curec	ł			
	Ν	%	Ν	%*	Ν	%*	Ν	%*	Ν	%*			
Gender Identity													
Male	16,984	64.5	10,779	63.5	1,681	9.9	457	2.7	1,539	9.1			
Female	9,282	35.2	5,344	57.6	893	9.6	221	2.4	793	8.5			
Transgender	20	0.1	14	70.0	2	10.0	6	30.0	3	15.0			
Missing	40	0.2	16	40.0	1	2.5	0	0.0	0	0.0			
Total	26,326	100	16,153	61.4	2,577	9.8	684	2.6	2,335	8.9			
Race/Ethnicity													
NHAAPI**	153	0.6	63	41.2	9	5.9	7	4.6	8	5.2			
Black	12,405	47.1	8,036	64.8	1,470	11.9	480	3.9	1,110	8.9			
Latino	216	0.8	149	69.0	35	16.2	32	14.8	32	14.8			
White	943	3.6	471	49.9	120	12.7	39	4.1	43	4.6			
Other***	45	0.2	24	53.3	8	17.8	3	6.7	1	2.2			
Missing	12,564	47.7	7,410	59.0	935	7.4	123	1.0	1,141	9.1			
Total	26,326	100	16,153	61.4	2,577	9.8	684	2.6	2,335	8.9			
Birth Cohort													
Before 1945	2,439	9.3	1,088	44.6	196	8.0	19	0.8	97	4.0			
1945-1965	19,460	73.8	12,869	66.1	2,076	10.7	473	2.4	2,040	10.5			
1966-1980	2,811	10.7	1,478	52.6	173	6.2	100	3.6	139	4.9			
1981-1994	1,489	5.7	669	44.9	117	7.9	78	5.2	55	3.7			
After 1995	127	0.5	49	38.6	15	11.8	14	11.0	4	3.1			
Total	26,326	100	16,153	61.4	2,577	9.8	684	2.6	2,335	8.9			

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* Proportions out of all cases ever reported.

** NHAAPI includes Native Hawaiian, Asian, Asian American, and Pacific Islander.

** Other race includes mixed race, Alaska Native, American Indian, and unknown race individuals.

Table B21. Newly Reported Hepatitis C Cases and Rates per 100,000 persons by Gender Identity, Age at Diagnosis, Race/Ethnicity, Birth Cohort, Ward, and Year of Diagnosis, District of Columbia, 2019-2023

	201	2019		2020		2021		2022		2023	
	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν
Total Chronic	613	86.6	307	45.8	327	48.9	301	44.9	207	30.5	1,755
Total Acute	6	0.8	13	1.9	9	1.3	40	6.0	34	5.0	102
Total	619	87.4	320	47.7	336	50.2	341	50.8	241	35.5	1,857
Gender Identity	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν
Male	395	117.6	215	67.0	237	74.4	227	71.3	169	52.5	1243
Female	218	58.5	101	28.9	95	27.1	110	31.2	70	19.6	594
Transgender	2	-	2	-	4	-	3	-	2	-	13
Missing	4	-	2	-	0	-	1	-	0	-	7
Total	619	87.4	320	47.7	336	50.2	341	50.8	241	35.5	1,857
Age at Diagnosis											
<13	2	2.0	0	0.0	0	0.0	0	0.0	0	0.0	2
13-19	1	2.1	1	2.5	1	2.1	4	8.3	4	8.0	11
20-29	71	52.8	28	23.9	37	32.0	36	30.8	32	26.8	204
30-39	76	51.9	65	45.3	50	36.2	67	48.7	64	46.3	322
40-49	65	77.5	38	45.2	37	44.3	51	60.0	27	30.7	218
50-59	140	191.9	48	67.8	62	90.3	49	72.4	29	43.4	328
60 and older	261	215.0	137	117.8	146	124.6	128	108.1	82	68.4	754
Missing	3	-	3	-	3	-	6	-	3	-	18
Total	619	87.4	320	47.7	336	50.2	341	50.8	241	35.5	1,857
Race/Ethnicity											
NHAAPI*	7	22.7	10	34.1	6	20.2	3	10.1	4	13.5	30
Black	417	132.7	210	70.4	226	76.6	232	79.8	160	55.2	1245
Latino	23	28.8	13	16.9	19	24.9	12	15.4	15	18.4	82
White	86	32.5	48	19.3	34	13.6	60	23.8	39	15.3	267
Other**	4	21.9	3	17.2	3	16.6	3	15.9	4	20.5	17
Missing	82	-	36	-	48	-	31	-	19	-	216
Total	619	87.4	320	47.7	336	50.2	341	50.8	241	35.5	1,857

	201	9	2020		202 ⁻	2021		2022		3	Total
	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν	Rate	Ν
Ward											
Ward 1	44	52.5	32	37.5	19	22.3	25	29.3	29	34.0	149
Ward 2	42	53.9	22	28.2	26	31.7	18	20.1	20	22.4	128
Ward 3	30	36.3	14	16.5	16	18.8	15	17.6	10	11.7	85
Ward 4	54	60.0	24	26.6	29	34.3	32	37.8	19	22.4	158
Ward 5	78	86.5	48	52.1	38	42.5	39	43.5	35	39.1	238
Ward 6	65	65.1	28	27.5	33	30.5	36	42.7	27	32.0	189
Ward 7	117	142.8	56	66.5	53	69.5	66	77.0	37	43.2	329
Ward 8	105	121.6	50	58.4	77	98.1	54	63.3	53	62.2	339
Missing	84	-	46	-	45	-	56	-	11	-	242
Total	619	87.4	320	47.7	336	50.2	341	50.8	241	35.5	1,857
Birth Cohort	Ν	%	Ν	%	Ν	%	Ν	%	Ν	%	Total
Before 1945	30	4.8	22	6.9	24	7.1	19	5.6	8	3.3	103
1945-1965	339	54.8	144	45.0	163	48.5	133	39.0	91	37.9	870
1966-1980	106	17.1	62	19.4	59	17.6	69	20.2	29	12.0	325
1981-1994	125	20.2	81	25.3	76	22.6	104	30.5	83	34.4	469
After 1995	19	3.1	11	3.4	14	4.2	16	4.7	30	12.4	90
Total	619	100	320	100	336	100	341	100	241	100	1,857
MSM (Acute)	4	66.7	4	30.8	3	33	22	55	20	71	53
MSM (Chronic)	26	4.2	23	7.5	23	7	16	5	24	17	112
HIV co-infected (Acute)	3	50.0	7	53.8	3	33.3	23	57.5	18	52.9	54
HIV co-infected (Chronic)	27	4.4	38	12.4	36	11.0	28	9.3	26	12.6	155
Known history of IDU	24	3.9	27	8.4	19	5.7	40	11.7	35	14.5	145
Known history of homelessness	77	12.4	41	12.8	52	15.5	54	15.8	48	19.9	272
Known history of incarceration	42	6.8	24	7.5	28	8.3	46	13.5	37	15.4	177
Documented treatment	32	5.2	43	13.4	42	12.5	73	21.4	46	19.1	236
Prior history of STIs	54	8.7	43	13.4	37	11.0	43	12.6	51	21.2	228

* NHAAPI includes Native Hawaiian, Asian, Asian American, and Pacific Islander.

** Other race includes mixed race, Alaska Native, American Indian, and unknown race individuals.

+ Source: 2023 US Census Estimates. Numbers may differ from previous publications due to additional record matching and/or data cleaning efforts.

Table B22. Cured Hepatitis C Cases by Gender Identity, Age at Diagnosis, and Year of Diagnosis, District of Columbia, 2019-2023

	-			2020		2021		2022		2022		Tatal	
	2019			2020		2021		2022		2023		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	
Gender Identity													
Male	21	70.0	40	80.0	25	71.4	41	70.7	17	77.3	144	73.8	
Female	8	26.7	10	20.0	9	25.7	16	27.6	4	18.2	47	24.1	
Transgender	1	3.3	0	0.0	1	2.9	1	1.7	1	4.5	4	2.1	
Total	30	100	50	100	35	100	58	100	22	100	195	100	
Age at Diagnosis												0.0	
<19	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
20-29	4	13.3	4	8.0	3	8.6	8	13.8	3	13.6	22	11.3	
30-39	6	20.0	12	24.0	9	25.7	10	17.2	5	22.7	42	21.5	
40-49	3	10.0	6	12.0	2	5.7	11	19.0	0	0.0	22	11.3	
50-59	6	20.0	7	14.0	6	17.1	9	15.5	4	18.2	32	16.4	
60 and older	11	36.7	21	42.0	15	42.9	20	34.5	10	45.5	77	39.5	
Total	30	100	50	100	35	100	58	100	22	100	195	100	
Race/Ethnicity										0.0		0.0	
NHAAPI*	1	3.3	0	0.0	2	5.7	0	0.0	0	0.0	3	1.5	
Black or African American	23	76.6	35	70.0	19	54.3	45	77.6	15	68.2	137	70.3	
Latino	2	6.7	5	10.0	5	14.3	5	8.6	0	0.0	17	8.7	
White	2	6.7	8	16.0	7	20.0	8	13.8	5	22.7	30	15.4	
Other**	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
Missing	2	6.7	2	4.0	2	5.7	0	0.0	2	9.1	8	4.1	
Total	30	100	50	100	35	100	58	100	22	100	195	100	
Birth Cohort										0.0		0.0	
Before 1945	0	0.0	1	2.0	1	2.9	2	3.4	0	0.0	4	2.1	
1945-1965	16	53.4	24	48.0	19	54.3	19	32.8	12	54.6	90	46.2	
1966-1980	6	20.0	9	18.0	3	8.6	17	29.3	2	9.1	37	19.0	
1981-1994	7	23.3	15	30.0	10	28.6	19	32.8	5	22.7	56	28.6	
After 1995	1	3.3	1	2.0	2	5.6	1	1.7	3	13.6	8	4.1	
Total	30	100	50	100	35	100	58	100	22	100	195	100	
MSM	5	16.7	10	20.0	6	17.1	15	25.9	7	31.8	43	22.1	
IDU	3	10.0	10	20.0	1	2.9	5	8.6	4	18.2	23	11.8	
History of homelessness	6	20.0	7	14.0	4	11.4	5	8.6	4	18.2	26	13.3	
History of incarceration	2	6.7	7	14.0	1	2.9	8	13.8	6	27.3	24	12.3	
HIV coinfected	6	20.0	16	32.0	15	42.9	30	51.7	14	63.6	81	41.5	
		20.0		52.0	.5		50	51.7		05.0	0,	11.5	

* NHAAPI includes Native Hawaiian, Asian, Asian American, and Pacific Islander.

** Other race includes mixed race, Alaska Native, American Indian, and unknown race individuals.

Strategic Information Division HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA)

Government of the District of Columbia Department of Health 2201 Shannon Place, SE Washington, DC 20020

Phone: (202) 671-4900

dchealth.dc.gov

