Annual Epidemiology & Surveillance Report Appendices

Data Through **December 2019**

District of Columbia Department of Health HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA)





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Appendix A. Understanding Surveillance Data

In order to understand surveillance data it is important to be familiar with some key terms. 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 exactly the same time as someone is infected or gets sick; sometimes it is months or years before someone is diagnosed. 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 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, 2019.

Understanding HIV Surveillance

The District of Columbia Municipal Code (22 DCMR 206) mandates reporting of all HIV and stage 3 (AIDS) diagnoses to the DC DOH. 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); person 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). This is consistent with the Centers for Disease Control and Prevention HIV surveillance categorization and reports.

Understanding the District of Columbia HIV Prevalence Estimate

There were 1,766 newly diagnosed HIV cases reported between 2015 and 2019. However, the total number of persons diagnosed with HIV who were residents of the District and alive 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. HAHSTA matched HIV cases with Social Security Death files, as well as the National Death Index and Vital Records 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 matches provide information about persons diagnosed in the District who moved outside

the District. Executing matches 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. The summary table on the previous page 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 state or jurisdiction.

Year of HIV Diagnosis	Potential Duplicate Cases Identified	Cases Assigned to Another State/Jurisdiction			
		N	%		
2015	2,257	1,252	55.5		
2016	1,618	862	53.3		
2017	1226	599	48.9		
2018	811	433	53.4		
2019	451	258	57.2		

3. In previous reports, the prevalence of HIV in the District was calculated by dividing the number of cases who were DC residents at diagnosis and alive by the total population of the District in the calendar year. HIV cases who were not DC residents at diagnosis but were currently living in DC were not included in the prevalence calculation. Starting in this report, 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.

	Total Living H	HV Cases, 2019	Estimated DC	Rate per 100,000	
Sex	N	%	Ν	%	
Male	8,864	71.4	333,307	47.4	2,659.4
Female	3,292	26.5	369,148	52.6	891.8
Transgender l	252	2.0	N/A	N/A	N/A
Total	12,408	100%	702,455	100%	1,766.4
Race/Ethnicity					

White	1,887	15.8	260,268	37.1	725.0
Black	8,907	75.0	315,337	44.9	2,824.6
Hispanic	973	6.6	79,249	11.3	1,227.8
Other*	641	2.6	47,601	6.8	1,346.6
Total	12,408	100%	702,455	100	1,766.4
Male	12,100	10070	102/133		1,7 00.1
White	1,817	20.5	129,371	38.8	1,404.5
Black	5,745	64.8	143,099	42.9	4,014.7
Hispanic	827	9.3	40,241	12.1	2,055.1
Other*	475	5.4	20,596	6.2	2,306.3
Total	8,864	100%	333,307	100	2,659.4
Female					
White	55	1.7	130,897	35.5	42.0
Black	2,970	90.2	172,238	46.7	1,724.4
Hispanic	119	3.6	39,008	10.6	305.1
Other*	148	4.5	27,005	7.3	548.0
Total	3,292	100%	369,148	100	891.78
Transgender l					
White	15	6.0	N/A	N/A	N/A
Black	192	76.2	N/A	N/A	N/A
Hispanic	27	10.7	N/A	N/A	N/A
Other*	18	7.1	N/A	N/A	N/A
Total	252	100%			
Current Age					
<13	105	0.8	101,217	14.4	103.7
13-19	42	0.3	47,495	6.8	88.4
20-24	232	1.9	52,924	7.5	438.4
25-29	752	6.1	83,096	11.8	905.0
30-39	2,402	19.4	143,203	20.4	1,677.3
40-49	2,488	20.1	82,249	11.7	3,025.0
50-59	3,635	29.3	73,342	10.4	4,956.2
≥60	2,747	22.1	118,929	16.9	2,309.8
Missing	5	0.0	N/A		N/A
Total	12,408	100%	702,455	100	1,766.4

[†]Source: 2018 US Census Estimates

^{*}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian, Pacific Islanders, and unknown ‡Population data on Transgender individuals are not collected by the US Census, therefore prevalence rates are not able to be calculated.

4. The District of Columbia's population is changing as evidenced by the 2010 US Census and 2019 US Census data estimates. The table depicts the percent change between the 2010 Census and 2018 Census estimates. There was 12.6% increase in the total number of persons living in the District.

	DC Population 2010	Estimated DC Population, 2019	Percent Change
	N	N	%
Sex			
Male	285,786	333,307	16.6
Female	319,126	369,148	15.7
Total	604,912	702,455	16.1
Race/Ethnicity			
White	211,121	260,268	23.3
Black	303,731	315,337	3.8
Latino	55,266	79,249	43.4
Other*	34,794	47,601	36.8
Total	604,91	702,455	16.1
Current Age			
<13	73,919	101,217	36.9
13-19	50,090	47,495	-5.2
20-29	134,520	136,020	1.1
30-39	98,546	143,203	45.3
40-49	76,478	82,249	7.5
50-59	72,098	73,342	1.7
≥60	99,261	118,929	19.8
Total	604,912	702,455	16.1
†Source: 2010 US Census			
#Source: 2018 US Census I	Estimates		

^{*}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian, Pacific Islanders, and Unknowns

The composition of District residents also changed by race/ethnicity, and age. The number of Hispanics living in the District increased by 43.4% and the number of those classified as other race increased by 36.8%. The percent change among blacks was negligible at 3.8%. In addition, the population between 0 and 12 years of age increased by 36.9%, while the population between 13 and 19 years of age decreased by 5.2%. It is also important to note that the population between 30 and 39 years of age increased by 45.3%.

Understanding the HIV Incidence Estimate

The 2019 HIV incidence estimate provides an estimated number of new infections of HIV occurring each year among DC residents during the five year span from 2015-2019. The estimate takes into consideration the probability of being newly infected within the entire population at risk, thus including cases that are not yet diagnosed. For this reason, the incidence estimate should not be compared with the annual new diagnoses reported in the Annual Epidemiology and Surveillance Report. The objective of reducing new infections tackles the leading edge of the epidemic by reducing transmissions as well as determining where and among whom new infections are occurring. This insight can inform prevention strategies and allow for more effective resource allocation to best address the HIV epidemic in DC.

Methodology of the HIV Incidence Estimate

The HIV Incidence Estimate technique has changed from the Serologic Testing Algorithm for Recent HIV Seroconversion (STARHS) method to the CD4 depletion model. The CD4 depletion model uses the idea that CD4 counts proportionately decrease without treatment during the course of infection to estimate the date of infection based on the first CD4 result following diagnosis. The incidence estimate uses statistical imputation to estimate the number of newly infected individuals in DC while accounting for diagnosis and reporting delays. For cases where information was missing, a stratified extrapolation approach was used to impute the missing information.

Limitations and Assumptions of the Incidence Estimate

Delayed Diagnosis:

The time between infection and diagnosis is considered the diagnosis delay. The amount of diagnosis delay varies by case. The statistical imputation of the estimate adjusts for diagnosis delays using existing data to estimate delays.

• Delayed Reporting:

The incidence estimates are subject to variation by year since they are based on reported surveillance data. Fluctuations in timing of data reported to the DC DOH may affect data availability at the time of reporting. The statistical imputation of the estimate adjusts for reporting delays using existing data to estimate current delays.

• Reporting Completeness:

The completeness of CD4 results are limited by laboratory participation. Currently, laboratories representing approximately 90% of identified cases participate in the HIV Incidence Surveillance Program.

Missing Data:

Incidence testing can only be assessed among persons with reported laboratory data and testing and antiretroviral use history data. Proportions of the diagnosed population may not have these data, but as diagnosed cases in the District, are included in the report. For these cases it is assumed that the information is missing at random and, statistical imputation was used to estimate the missing information.

Understanding Clinical Outcomes

Primary care visits are not reportable to the DC DOH. 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. With improved reporting of laboratory data through the comprehensive electronic laboratory reporting system instituted in 2007, HAHSTA is able to obtain a picture of HIV care among persons living with HIV in the District.

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 the HIV-Related Drug Resistance

The 2019 HIV-related Drug Resistance profile provides information about drug resistance for HIV occurring each year among DC residents during the five year span from 2015-2019. The objective of HIV-related drug resistance is to track 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. Resistance to integrase strand-transfer inhibitors was not included since this has not been conducted in a standard way across all 5 years of the analysis.

Table 1. Drug Resistance Definitions

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
Susceptible*	No evidence of ARV resistance
Low Level Resistance*	The predicted level of resistance is similar to those with suboptimal response to treatment with the drug
Intermediate Resistance*	The predicted level of resistance may reduce drug effectiveness.
High Level Resistance*	The predicted level of resistance is similar to those with the highest levels of drug resistance

*Definitions and susceptibility were ascertained from the Stanford University Sierra HIV Drug Resistance Database. https://hivdb.stanford.edu/page/release-notes/

Limitations and Assumptions of HIV-Related Drug Resistance

• Reporting Completeness:

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

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. At the end of 2013, data management systems collecting STI information were upgraded.

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. For example, in 2018, only 426 (1.0%) cases of reported chlamydia had "unknown" gender identity but 28,039 (70.1%) cases had "unknown" race.

Data on race and ethnicity are reported separately and are not mutually exclusive variables. In order 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 tables and graphics included in this report is inclusive of individuals of any race reporting Latino ethnicity.

In addition, unlike HIV surveillance, STI surveillance is based on incident (new) infections. Some individuals may be diagnosed multiple times with the same STD, or with different types of STIs at the same time. Additionally, primary and secondary syphilis cases are used as a measure of disease incidence while early latent and late latent syphilis cases are a better indicator of disease prevalence.

Understanding Viral Hepatitis Surveillance for the District of Columbia

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, and medical institutions such as hospitals, and laboratories. Hepatitis cases are primarily reported to the DOH by laboratory reports, however, they are also identified through reports from health care providers, hospitals, clinics and reports from other health departments. In some instances, the DOH requires additional information to classify a case, therefore hepatitis program investigators contact providers and patients to obtain more complete information. Of note, the District does not currently receive federal funding to support or strengthen case surveillance for viral hepatitis.

The District's hepatitis surveillance program uses a confidential name-based Viral Hepatitis Registry (VHR) which includes basic demographic data, diagnosis and event/illness onset dates, when available. Supplemental information collected through the case investigation process is documented and often includes clinical features, serologic test results, and risk factors for infection. This information is compiled and used to classify cases according to CDC case definitions. Confirmed chronic hepatitis B or C cases include a complete series of labs. A probable case of chronic hepatitis B or C is a combination of reported lab results that are an incomplete series and don't include all results necessary to confirm a diagnosis.

Understanding Tuberculosis Surveillance

In the District of Columbia, active tuberculosis (TB) is a reportable condition by both medical providers and laboratories. Medical providers must report anyone diagnosed with, or who has symptoms suspicious of, TB. Laboratories are required to report preliminary tests indicative of active TB, as well as confirmed tests. In any given year approximately 25 to 30% of initial reports of persons with suspicious clinical or laboratory findings will be verified as 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.

Appendix B. Supplementary Tables and Figures

Table B1. People Living with HIV in the District of Columbia as of December 31, 2019, by Gender Identity, Current Age, Race/Ethnicity and Mode of Transmission

	Total HIV Cases who were DC Residents at diagnosis			DC Residents at HIV Diagnosis, still in DC		In-migrants: Diagnosed out of jurisdiction, now in DC		People living in DC diagnosed with HIV (total)		Out-migrants diagnosed in DC but now living out of jurisdiction	
	-		N	%	N	%	N	%	N	%	
Gender											
Male	12,978	73.0	7,118	69.4	1,749	81.5	8,863	71.4	5,860	77.9	
Female	4,493	25.3	2,933	28.6	356	16.6	3,292	26.5	1,560	20.7	
Transgender	310	1.7	210	2.0	42	2.0	253	2.0	100	1.3	
Total	17,781	100.0	10,261	100.0	2,147	100.0	12,408	100.0	7,520	100.0	
Current Age											
<13	13	0.1	10	0.1	95	4.4	105	0.8	3	0.0	
13-17	52	0.3	38	0.4	4	0.2	42	0.3	14	0.2	
18-19	235	1.3	181	1.8	51	2.4	232	1.9	54	0.7	
20-24	727	4.1	528	5.1	224	10.4	752	6.1	199	2.6	
25-29	2,957	16.6	1,810	17.6	592	27.6	2,402	19.4	1,147	15.3	
30-39	3,780	21.3	2,066	20.1	422	19.7	2,488	20.1	1,714	22.8	
40-49	5,601	31.5	3,146	30.7	489	22.8	3,635	29.3	2,455	32.6	
50-59	4,416	24.8	2,482	24.2	265	12.3	2,747	22.1	1,934	25.7	
60+	-	0.0	-	0.0	5	0.2	5	0.0	-	0.0	
Missing	13	0.1	10	0.1	95	4.4	105	0.8	3	0.0	
Total	17,781	100.0	10,261	100.0	2,147	100.0	12,408	100.0	7,520	100.0	
Race/Ethnicity	•		·		·		·		·		
White	2,991	16.8	1,435	14.0	452	21.1	1,887	15.2	1,556	20.7	
Black	12,365	69.5	7,623	74.3	1,284	59.8	8,907	71.8	4,742	63.1	
Latino	1,380	7.8	749	7.3	224	10.4	973	7.8	631	8.4	
Other*	1,045	5.9	454	4.4	187	8.7	641	5.2	591	7.9	
Unknown	2,991	16.8	1,435	14.0	452	21.1	1,887	15.2	1,556	20.7	
Total	17,781	100.0	10,261	100.0	2,147	100.0	12,408	100.0	7,520	100.0	
Mode of Transmission	·		•		•						
Sexual contact	13,030	73.3	7,540	73.5	1,579	73.5	9,120	73.5	5,490	73.0	
IDU	1,882	10.6	1,057	10.3	91	4.2	1,148	9.3	825	11.0	
Sexual contact/IDU	854	4.8	378	3.7	99	4.6	477	3.8	476	6.3	
Other**	208	1.2	119	1.2	109	5.1	227	1.8	89	1.2	
RNI	1,807	10.2	1,167	11.4	269	12.5	1,436	11.6	640	8.5	
Total	17,781	100.0	10,261	100.0	2,147	100.0	12,408	100.0	7,520	100.0	

^{*}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian, Pacific Islanders, and unknown

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

Table B2. People Living with HIV in the District of Columbia as of December 31, 2019, by Gender Identity and Mode of Transmission

	Total HIV Cases who were DC Residents at Diagnosis			DC Residents at HIV Diagnosis, still in DC		In-migrants: Diagnosed out of jurisdiction, now in DC		ng in DC vith HIV I)	Out-migrants diagnosed in DC but now living out of jurisdiction	
	N	%	N	%	N	%	N	%	N	%
Male										
MSM	8,172	63.0	4,375	61.5	1,245	71.2	5,620	63.4	3,793	64.7
IDU	1,033	8.0	544	7.6	54	3.1	598	6.7	489	8.3
MSM/IDU	836	6.4	365	5.1	96	5.5	461	5.2	471	8.0
Heterosexual contact	1,680	12.9	1,041	14.6	130	7.4	1,171	13.2	640	10.9
Other**	93	0.7	48	0.7	46	2.6	94	1.1	45	0.8
RNI	1,164	9.0	744	10.5	178	10.2	919	10.4	422	7.2
Total	12,978	100.0	7,118	100.0	1,749	100.0	8,863	100.0	5,860	100.0
Female										
IDU	839	18.7	507	7.1	36	10.1	543	16.5	332	21.3
Heterosexual contact	2,960	65.9	1,977	27.8	174	48.9	2,152	65.4	983	63.0
Other**	109	2.4	66	0.9	60	16.9	125	3.8	43	2.8
RNI	585	13.0	384	5.4	86	24.2	472	14.3	202	12.9
Total	4,493	100.0	2,933	100.0	356	100.0	3,292	100.0	1,560	100.0
Transgender										
Sexual contact	221	71.2	147	2.1	30	71.4	177	69.8	74	74.0
IDU	10	3.2	6	0.1	1	2.4	7	2.8	4	4.0
Sexual contact/IDU	18	5.8	13	0.2	3	7.1	16	6.3	5	5.0
Other**	6	1.9	5	0.1	3	7.1	8	3.2	1	1.0
RNI	55	17.8	39	0.5	5	11.9	45	17.9	16	16.0
Total	310	100.0	210	100.0	42	100.0	253	100.0	100	100.0

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

Table B3. HIV Cases Living in the District of Columbia by Race/Ethnicity, Sex, and Mode of Transmission, District of Columbia, 2019

	Whit	e	Black	(Latir	no	Othe	r*	Total	
	N	%	N	%	N	%	N	%	N	%
Gender Identity										
Male	1,817	96.3	5,745	64.5	826	85.0	475	74.1	8,863	71.4
Female	55	2.9	2,970	33.3	119	12.2	148	23.1	3,292	26.5
Transgender	15	0.8	192	2.2	28	2.8	18	2.8	253	2.0
Total	1,887	100.0	8,907	100.0	973	100.0	641	100.0	12,408	100.0
Mode of Transmission										
Sexual Contact	1,624	86.1	6,202	69.6	829	85.2	465	72.5	9,120	73.5
IDU	22	1.2	1,049	11.8	30	3.1	47	7.3	1,148	9.3
Sexual Contact/IDU	83	4.4	339	3.8	24	2.5	31	4.8	477	3.8
Risk not Identified	153	8.1	1,122	12.6	82	8.4	79	12.3	1,436	11.6
Other**	5	0.3	196	2.2	8	0.8	19	3.0	227	1.8
Total	1,887	100.0	8,907	100.0	973	100.0	641	100.0	12,408	100.0
Male										
MSM	1,546	85.1	3,120	54.3	637	77.1	317	66.7	5,620	63.4
IDU	12	0.7	545	9.5	16	1.9	25	5.3	598	6.7
MSM/IDU	83	4.6	326	5.7	21	2.5	31	6.5	461	5.2
Heterosexual Contact	31	1.7	1,006	17.5	90	10.9	44	9.3	1,171	13.2
Risk not Identified	142	7.8	668	11.6	58	7.0	51	10.7	919	10.4
Other**	3	0.2	80	1.4	4	0.5	7	1.5	94	1.1
Subtotal	1,817	100.0	5,745	100.0	826	100.0	475	100.0	8,863	100
Female										
IDU	9	16.4	498	16.8	14	11.8	22	14.9	543	16.5
Heterosexual Contact	34	61.8	1,950	65.7	77	64.7	91	61.5	2,152	65.4
Risk not Identified	10	18.2	413	13.9	24	20.2	25	16.9	472	14.3
Other**	2	3.6	109	3.7	4	3.4	10	6.8	125	3.8
Subtotal	55	100.0	2,970	100.0	119	100.0	148	100.0	3,292	100.0
Transgender										
Sexual Contact	13	86.7	126	65.6	25	88.9	13	72.2	159	62.7
IDU	1	6.7	6	3.1	0	0.0	0	0.0	8	3.2
Sexual Contact/IDU	0	0.0	13	6.8	3	11.1	0	0.0	11	4.4
Risk not Identified	1	6.7	41	21.4	0	0.0	3	16.7	49	19.4
Other**	0	0.0	6	3.1	0	0.0	2	11.1	4	1.6
Subtotal	15	100.0	192	100.0	28	100.0	18	100.0	253	100.0

^{*}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian and Pacific Islanders

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

Table B4. HIV Cases Living in the District of Columbia by Race/Ethnicity, Gender Identity and Current Age, District of Columbia, 2019

	White	e	Black	<	Latin	0	Othe	r*	Tota	I
	N	%	N	%	N	%	N	%	N	%
Current Age										
<13	1	0.1	87	1.0	4	0.4	13	2.0	105	0.8
13-17	0	0.0	15	0.2	2	0.2	1	0.2	18	0.0
18-19	0	0.0	23	0.3	0	0	1	1.7	24	0.2
20-24	10	0.5	180	2.0	24	2.5	18	2.8	232	1.9
25-29	45	2.4	570	6.4	85	8.7	52	8.1	752	6.1
30-39	279	14.8	1,693	19.0	277	28.5	153	23.9	2,402	19.4
40-49	418	22.2	1,709	19.2	235	24.2	126	19.7	2,488	20.1
50-59	651	34.5	2,582	29.0	229	23.5	173	27.0	3,635	29.3
≥60	482	25.5	2,045	23.0	116	11.9	104	16.2	2,747	22.1
Missing	1	0.1	3	0.0	1	0.1	0	0.0	5	0.0
Total	1,887	100.0	8,907	100.0	973	100.0	641	100.0	12,408	100.0
Male										
<13	0	0.0	38	0.7	2	0.2	6	1.3	46	0.5
13-17	0	0.0	4	0.1	1	0.1	0	0.0	5	0.1
18-19	0	0.0	13	0.2	0	0.0	1	0.2	14	0.2
20-24	9	0.5	122	2.1	16	2.1	11	2.3	158	1.8
25-29	43	2.4	429	7.5	78	9.4	37	7.8	587	6.6
30-39	266	14.7	1,227	21.4	244	29.5	127	26.7	1,864	21.0
40-49	399	22.0	970	16.9	189	22.9	87	18.3	1,645	18.6
50-59	628	34.6	1,625	28.3	198	24.0	126	26.5	2,577	29.1
≥60	469	25.8	1,316	22.9	96	11.6	80	16.8	1,961	22.1
Missing	1	0.1	1	0.0	1	0.1	0	0.0	3	0.0
Subtotal	1,815	100.0	5,745	100.0	828	100.0	475	100.0	8,860	100.0
Female										
<13	1	1.8	46	1.5	2	1.7	6	4.1	55	1.7
13-17	0	0.0	11	0.3	1	0.8	1	0.7	13	0.4
18-19	0	0.0	9	0.3	0	0.0	1	0.8	10	0.3
20-24	1	1.8	50	1.7	4	3.4	6	4.1	61	1.9
25-29	1	1.8	127	4.3	5	4.3	14	9.5	147	4.5
30-39	9	16.4	419	14.1	22	18.8	20	13.6	470	14.3
40-49	14	25.5	692	23.3	38	32.5	35	23.8	779	23.7
50-59	19	34.5	916	30.8	28	23.9	42	28.6	1,005	30.6
≥60	10	18.2	698	23.5	17	14.5	23	15.6	748	22.7
Missing	0	0.0	2	0.1	0	0.0	0	0.0	2	0.1
Subtotal	55	100.0	2,970	100.0	119	100.0	148	100.0	3,292	100.0
Transgender										

<13	0	0.0	3	1.6	0	0.0	1	5.6	4	1.6
13-17	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18-19	0	0.0	1	0.5	0	0.0	0	0.0	1	0.4
20-24	0	0.0	8	4.2	4	11.1	1	5.6	13	4.8
25-29	1	6.7	14	7.3	2	7.4	1	5.6	18	7.1
30-39	3	20.0	47	24.5	11	40.7	6	33.3	67	26.6
40-49	5	33.3	47	24.5	7	25.9	3	16.7	62	24.6
50-59	4	26.7	41	21.4	2	7.4	5	27.8	52	20.6
≥60	2	13.3	31	16.1	2	7.4	1	5.6	36	14.3
Missing	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Subtotal	16	100.0	183	100.0	29	100.0	18	100.0	253	100.0

^{*}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian and Pacific Islanders

Table B5. Newly Diagnosed HIV Cases by Year of Diagnosis, Gender Identity, Race/Ethnicity, Mode of Transmission, and Age at Diagnosis, District of Columbia, 2015-2019

	20	15	20	16	20	17	20	18	20)19	Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Gender Identity												
Male	291	72.9	275	72.6	275	74.1	254	75.8	213	75.9	1308	74.1
Female	96	24.1	94	24.8	88	23.7	71	21.2	61	21.6	410	23.2
Transgender	12	3.0	10	2.6	8	2.2	10	3.0	8	2.5	48	2.7
Total	399	100.0	379	100.0	371	100.0	335	100.0	283	100.0	1,766	100.0
Race/Ethnicity												
White	48	12.0	53	14.0	42	11.3	28	8.4	28	9.9	199	11.3
Black	271	67.9	266	70.2	262	70.6	258	77.0	206	73.0	1,263	71.5
Latino	59	14.8	42	11.1	47	12.7	31	9.3	37	13.1	216	12.2
Other*	21	5.3	18	4.7	20	5.4	18	5.4	11	3.9	88	5.0
Total	399	100.0	379	100.0	371	100.0	335	100.0	282	100.0	1,766	100.0
Mode of Transmission												
Sexual contact	314	78.7	289	76.3	289	77.9	276	82.4	254	89.7	1,422	80.5
IDU	9	2.3	6	1.6	9	2.4	10	3.0	2	0.7	36	2.0
Sexual contact/IDU	4	1.0	7	1.8	6	1.6	10	3.0	3	1.1	30	1.7
Risk not identified	72	18.0	76	20.1	63	17.0	39	11.6	21	7.8	271	15.4
Other**	0	0.0	1	0.3	4	1.1	0	0.0	2	0.7	7	0.4
Total	399	100.0	379	100.0	371	100.0	335	100.0	282	100.0	1,766	100.0
Age at Diagnosis												
<13†	0	0	1	0	3	0.8	0	0.0	2	0.7	6	0.3
13-17	4	1.0	2	0.5	6	1.6	2	0.6	3	1.1	17	1.0
18-19	12	3.0	12	3.2	12	3.2	11	3.3	12	4.3	59	3.3
20-24	61	15.3	56	14.8	56	15.1	50	14.9	34	12.1	257	14.6
25-29	93	23.3	73	19.3	66	17.8	59	17.6	52	18.4	343	19.4
30-39	111	27.8	96	25.3	111	29.9	100	29.9	84	29.8	502	28.4
40-49	52	13.0	61	16.1	51	13.7	49	14.6	35	12.4	248	14.0
50-59	44	11.0	53	14.0	36	9.7	44	13.1	41	14.5	218	12.3
≥60	22	5.5	25	6.6	30	8.1	20	6.0	19	6.7	116	6.6
Total	399	100.0	379	100.0	371	100.0	335	100.0	282	100.0	1,766	100.0

^{*}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian, and Pacific Islanders.

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

[†]One case diagnosed under the age of 13 had a mode of transmission of risk not identified (RNI)

Table B6. Newly Diagnosed HIV Cases by Year of Diagnosis, Gender Identity, and Mode of Transmission, District of Columbia, 2015-2019

	2015		201	6	201	7	201	8	201	.9	Tota	al
	N	%	N	%	N	%	N	%	N	%	N	%
Male												
MSM	198	68.0	178	64.7	191	69.5	177	69.7	155	72.4	899	68.7
IDU	5	1.7	3	1.1	2	0.7	7	2.8	1	0.5	18	1.4
MSM/IDU	3	1.0	7	2.5	6	2.2	10	3.9	3	1.4	29	2.2
Heterosexual contact	40	13.7	42	15.3	34	12.4	35	13.8	37	17.3	188	14.4
Risk not identified	45	15.5	45	16.4	40	14.5	25	9.8	16	7.9	171	13.1
Other**	0	0.0	0	0.0	2	0.7	0	0.0	1	0.5	3	0.2
Subtotal	291	100.0	275	100.0	275	100.0	254	100.0	213	100.0	1,308	100.0
Female												
IDU	4	4.2	3	3.2	7	8.0	3	4.2	1	1.6	18	4.4
Heterosexual contact	66	68.8	63	67.0	59	67.0	55	77.5	54	88.5	297	72.4
Risk not identified	26	27.1	27	28.7	20	22.7	13	18.3	5	8.2	91	22.2
Other**	0	0.0	1	1.1	2	2.3	0	0.0	1	1.6	4	1.0
Subtotal	96	100.0	94	100.0	88	100.0	71	100.0	61	100.0	410	100.0
Transgender												
Sexual contact	10	83.3	6	60.0	5	62.5	9	90.0	7	85.7	38	78.7
IDU	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Sexual contact/IDU	1	8.3	0	0.0	0	0.0	0	0.0	0	0.0	1	2.1
Risk not identified	1	8.3	4	40.0	3	37.5	1	10.0	0	0.0	9	19.1
Other**	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Subtotal	12	100.0	10	100.0	8	100.0	10	100.0	8	100.0	48	100.0

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

 Table B7. Newly Diagnosed HIV Cases by Year of Diagnosis, Gender Identity, and Age at Diagnosis, District of Columbia, 2015-2019

	2015		201	.6	201	7	201	8	201	.9	Tota	al
	N	%	N	%	N	%	N	%	N	%	N	%
Male												
<13	0	0.0	0	0.0	1	0.4	0	0.0	1	0.5	2	0.2
13-17	4	1.4	1	0.4	4	1.5	1	0.4	2	0.9	12	0.9
18-19	8	2.7	9	3.3	10	3.6	8	3.1	10	5.1	45	3.5
20-24	50	17.2	44	16.0	49	17.8	42	16.5	28	13.1	213	16.3
25-29	78	26.8	60	21.8	58	21.1	50	19.7	42	19.6	288	22.0
30-39	82	28.2	76	27.6	80	29.1	81	31.9	72	33.6	391	29.9
40-49	32	11.0	39	14.2	35	12.7	29	11.4	25	11.7	160	12.2
50-59	24	8.2	31	11.3	23	8.4	30	11.8	22	10.3	130	9.9
≥60	13	4.5	15	5.5	15	5.5	13	5.1	11	5.1	67	5.1
Subtotal	291	100.0	275	100.0	275	100.0	254	100.0	213	100.0	1308	100.0
Female												
<13	0	0.0	1	1.1	2	2.3	0	0.0	1	1.6	3	0.7
13-17	0	0.0	1	1.1	2	2.3	1	1.4	1	1.6	5	1.2
18-19	3	3.1	3	3.2	2	2.3	2	2.8	1	1.6	11	2.7
20-24	10	10.4	8	8.5	6	6.8	6	8.5	3	4.9	40	9.8
25-29	7	7.3	11	11.7	8	9.1	8	11.3	6	9.8	42	10.2
30-39	28	29.2	19	20.2	28	31.8	15	21.1	12	19.7	102	24.9
40-49	20	20.8	21	22.3	14	15.9	18	25.4	10	16.4	83	20.2
50-59	20	20.8	21	22.3	12	13.6	14	19.7	19	31.1	86	21.0
≥60	8	8.3	9	9.6	14	15.9	7	9.9	8	13.1	46	11.2
Subtotal	96	100.0	94	100.0	88	100.0	71	100.0	61	100.0	410	100.0
Transgender												
<13	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13-17	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
18-19	1	8.3	0	0.0	0	0.0	1	10.0	1	0.0	3	4.3
20-24	1	8.3	4	40.0	1	12.5	2	20.0	3	42.9	11	23.4
25-29	8	66.7	2	20.0	0	0.0	1	10.0	4	57.1	15	31.9
30-39	1	8.3	1	10.0	3	37.5	4	40.0	0	0.0	9	19.1
40-49	0	0.0	1	10.0	2	25.0	2	20.0	0	0.0	5	10.6
50-59	0	0.0	1	10.0	1	12.5	0	0.0	0	0.0	2	4.3
≥60	1	8.3	1	10.0	1	12.5	0	0.0	0	0.0	3	6.4
Subtotal	12	100.0	10	100.0	8	100.0	10	100.0	8	100.0	48	100.0

Table B8. HIV Care Continuum among Cases Living in DC, by Selected Characteristics, District of Columbia, 2019

	More than 1										
	Living in DC*	Ever linked	to Care	Retained care in	•	Medical v 2019		Ever vir suppre	•	Virally sup in 20	•
	N	N	%	N	%	N	%	N	%	N	%
Gender											
Male	8,761	8,513	97.2	6,895	78.7	4,931	56.3	7,494	85.5	6,098	69.6
Female	3,233	3,096	95.8	2,661	82.3	1,996	61.7	2,646	81.8	2,243	69.4
Transgender	241	233	96.7	189	78.4	139	57.7	189	78.4	154	63.9
Race/Ethnicity											
White	1,903	1,870	98.3	1,429	75.1	957	50.3	1,788	94.0	1,362	71.6
Black	8,769	8,464	96.5	7,120	81.2	5,268	60.1	7,209	82.2	6,099	69.6
Latino	934	898	96.1	686	73.4	486	52.0	817	87.5	613	65.6
Other**	629	610	97.0	510	81.1	355	56.4	515	81.9	421	66.9
Mode of Transmission											
Sexual contact	8,942	8,795	98.4	7,183	80.3	5,189	58.0	7,630	85.3	6,303	70.5
IDU	1,159	1,146	98.9	998	86.1	759	65.5	959	82.7	840	72.5
Sexual contact/IDU	475	473	99.6	402	84.6	298	62.7	401	84.4	343	72.2
Other***	216	141	65.3	128	59.3	95	44.0	163	75.5	91	42.1
RNI	1,443	1,287	89.2	1,034	71.7	725	50.3	1,176	81.5	919	63.6
Current Age											
0-19	140	136	97.1	108	77.1	48	34.3	112	80.0	44	31.4
20-24	271	250	92.3	189	69.7	128	47.2	199	73.4	148	54.6
25-29	833	792	95.1	628	75.4	415	49.8	607	72.9	490	58.8
30-39	2,355	2,234	94.9	1,816	77.1	1,285	54.6	1,849	78.5	1,496	63.5
40-49	2,502	2,425	96.9	1,996	79.8	1,392	55.6	2,115	84.5	1,743	69.7
50-59	3,655	3,582	98.0	3,005	82.2	2,279	62.4	3,221	88.1	2,732	74.7
60 and older	2,475	2,420	97.8	2,000	80.8	1,518	61.3	2,224	89.9	1,841	74.4
Missing	4	3	75.0	3	75.0	1	25.0	2	50.0	1	25.0
Total	12,235	11,842	96.8	9,745	79.6	7,066	57.8	10,329	84.4	8,495	69.4

^{*} HIV cases living in DC at the end of 2018

^{**}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian and Pacific Islanders

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

Table B9. 2019 HIV Care Continuum among Newly Diagnosed Cases, by Selected Characteristics, District of Columbia, 2014-2018

	Newly Diagnosed between 2014-2018 and living in 2019	Linked within 3 months	of diagnosis	Virally suppressed wit HIV diagr	
	N	N	%	N	%
Gender					
Male	1,444	1,176	81.4	993	68.8
Female	429	351	81.8	300	69.9
Transgender	53	21	39.6	33	62.3
Race/Ethnicity					
White	244	210	86.1	173	70.9
Black	1,366	1,103	80.7	932	68.2
Latino	219	180	82.2	153	69.9
Other*	97	75	77.3	68	70.1
Mode of Transmission					
Sexual contact	1,467	1,214	82.8	1,055	71.9
IDU	48	34	70.8	22	45.8
Sexual contact/IDU	34	25	73.5	19	55.9
Other**	5	4	80.0	4	80.0
RNI	372	291	78.2	226	60.8
Age at Diagnosis					
0-19	83	66	79.5	55	66.3
20-24	296	247	83.4	204	68.9
25-29	371	291	78.4	260	70.1
30-39	533	421	79.0	371	69.6
40-49	287	246	85.7	199	69.3
50-59	231	194	84.0	159	68.8
60 and older	125	103	82.4	78	62.4
Year of Diagnosis					
2014	442	293	66.3	249	56.3
2015	399	340	85.2	272	68.2
2016	379	328	86.5	266	70.2
2017	371	315	84.9	280	75.5
2018	335	292	87.2	259	77.3
Total	1,926	1,568	81.4	1,326	68.8

^{**}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian and Pacific Islanders

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

Table B10. Time to Linkage to HIV Care among Newly Diagnosed Cases, by Selected Characteristics, District of Columbia, 2015-2019

	Newly Diagnosed Cases 2015-2019	Linked within 7 Lin		Linked wit		Linked w	ithin 16-	Linked with 90 day		- Linked >90 days		No evidence of linkage to care	
	N	N ady.	%	N N	%	N	%	N	%	N N	%	N	%
Sex													
Male	1,308	828	63.3	150	11.5	78	6.0	86	6.6	122	9.3	44	3.4
Female	410	236	57.6	59	14.4	37	9.0	28	6.8	37	9.0	13	3.2
Transgender	48	27	57.4	7	14.9	1	2.1	3	6.4	7	14.9	3	6.4
Race/Ethnicity													
White	199	133	66.8	27	13.6	8	4.0	13	6.5	13	6.5	5	2.5
Black	1,263	777	61.5	153	12.1	85	6.7	83	6.6	121	9.6	44	3.5
Latino	216	133	61.6	25	11.6	16	7.4	17	7.9	16	7.4	9	4.2
Other*	88	48	54.5	11	12.5	7	8.0	4	4.5	16	18.2	2	2.3
Mode of													
Transmission													
Sexual contact	1,422	877	61.7	190	13.4	100	7.0	92	6.5	127	8.9	35	2.5
IDU	36	24	66.7	2	5.6	1	2.8	3	8.3	3	8.3	3	8.3
Sexual contact/IDU	30	18	60.0	3	10.0	3	10.0	1	3.3	5	16.7	0	0.0
Other**	7	6	85.7	0	0.0	0	0.0	0	0.0	1	14.3	0	0.0
RNI	271	166	61.0	21	7.7	12	4.4	21	7.7	30	11.0	22	8.1
Age at Diagnosis													
0-12	6	5	83.3	0	0.0	0	0.0	0	0.0	1	16.7	0	0.0
13-19	76	52	68.4	5	6.6	6	7.9	5	6.6	8	10.5	0	0.0
20-24	257	166	64.6	33	12.8	15	5.8	14	5.4	25	9.7	4	1.6
25-29	343	208	60.6	44	12.8	20	5.8	21	6.1	43	12.5	7	2.0
30-39	502	304	60.6	61	12.2	29	5.8	32	6.4	53	10.6	23	4.6
40-49	248	155	62.5	30	12.1	20	8.1	16	6.5	19	7.7	8	3.2
50-59	218	132	60.6	31	14.2	16	7.3	21	9.6	12	5.5	6	2.8
60 and older	116	69	59.5	12	10.3	10	8.6	8	6.9	5	4.3	12	10.3
Year of Diagnosis													
2015	399	213	53.4	64	16.0	32	8.0	31	7.8	43	10.8	16	4.0
2016	379	241	63.6	37	9.8	21	5.5	29	7.7	45	11.9	6	1.6
2017	371	235	63.3	35	9.4	20	5.4	25	6.7	45	12.1	11	3.0
2018	335	220	65.7	34	10.1	22	6.6	16	4.8	24	7.2	19	5.7
2019	282	182	64.5	46	16.3	21	7.4	16	5.7	9	3.2	8	2.8
Grand Total	1,766	1,091	61.8	216	12.2	116	6.6	117	6.6	166	9.4	60	3.4

^{**}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian and Pacific Islanders

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

Table B11. Time to Viral Suppression among Newly Diagnosed Cases, by Selected Characteristics, District of Columbia, 2015-2018[†]

	Newly Diagnosed	Suppresse		Suppresse		Suppresse		Suppresse		No evid		Median time to viral suppression
	Cases 2015-2018 N	0-90 d N	ays %	91-180 N	days %	181-36 N	5 days %	day N	'S %	viral sup N	pression %	(days)
Gender Identity	JV	IN	70	IN	70	IN	70	IN	70	IN	70	
Male	1,095	447	40.8	212	19.4	138	12.6	155	14.2	143	13.1	98.0
Female	349	144	41.3	58	16.6	54	15.5	44	12.6	44	12.6	97.5
Transgender	40	13	32.5	9	22.5	3	7.5	9	22.5	6	15.0	112.0
Race/Ethnicity												
White	213	91	42.7	30	14.1	30	14.1	34	16.0	28	13.1	77.0
Black	1,111	371	33.4	193	17.4	177	15.9	163	14.7	207	18.6	100.0
Latino	184	68	37.0	33	17.9	28	15.2	24	13.0	31	16.8	96.5
Other*	68	20	29.4	10	14.7	12	17.6	16	23.5	10	14.7	110.0
Mode of Transmission												
Sexual contact	1,168	485	41.5	238	20.4	159	13.6	161	13.8	125	10.7	100.0
IDU	34	12	35.3	6	17.6	1	2.9	9	26.5	6	17.6	128.0
Sexual contact/IDU	27	11	40.7	1	3.7	4	14.8	9	33.3	2	7.4	239.0
Other**	5	2	40.0	1	20.0	1	20.0	1	20.0	0	0.0	121.0
RNI	250	94	37.6	33	13.2	30	12.0	28	11.2	28	11.2	80.0
Age at Diagnosis												
0-12	4	1	25.0	1	25.0	2	50.0	0	0.0	0	0.0	155.5
13-19	61	31	50.8	11	18.0	4	6.6	10	16.4	5	8.2	78.0
20-24	223	89	39.9	41	18.4	29	13.0	40	17.9	24	10.8	108.0
25-29	291	119	40.9	59	20.3	39	13.4	43	14.8	31	10.7	102.5
30-39	418	160	38.3	82	19.6	58	13.9	60	14.4	58	13.9	106.0
40-49	213	91	42.7	33	15.5	34	16.0	22	10.3	33	15.5	89.0
50-59	177	76	42.9	34	19.2	20	11.3	20	11.3	27	15.3	86.0
60 and older	97	37	38.1	18	18.6	10	10.3	12	12.4	20	20.6	93.0
Year of Diagnosis												
2015	399	136	34.1	76	19.0	61	15.3	80	20.1	46	11.5	124.0
2016	379	159	42.0	62	16.4	45	11.9	58	15.3	55	14.5	92.0
2017	371	159	42.9	73	19.7	48	12.9	51	13.7	40	10.8	96.0
2018	335	150	44.8	68	20.3	41	12.2	19	5.7	57	17.0	80.5
Grand Total	1,484	604	40.7	279	18.8	195	13.1	208	14.0	198	13.3	98.0

^{†2019} newly diagnosed cases not included as they have not had a full year since the initial diagnosis

^{**}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian and Pacific Islanders

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

Table B12. 2019 Ryan Care Program Care Continuum, by Gender Identity, Race, Ethnicity, Mode of Transmission and Current Age, District of Columbia

	1 or more medical						
	visit	Retained i	n care	Prescribe	ed ART	VL Suppi	ressed
	N	N	%	N	%	N	%
Gender Identity							
Male	2,585	2,150	83.2%	2,438	94.3%	2,213	85.6%
Female	1,632	1,392	85.3%	1,550	95.0%	1,376	84.3%
Transgender M-F	62	48	77.4%	54	87.1%	44	71.0%
Transgender F-M	21	17	81.0%	18	85.7%	17	81.0%
Total	4,304	3,611	83.9%	4,061	94.4%	3,651	84.8%
Current age							
13 - 24	289	236	81.7%	270	93.4%	215	74.4%
25 - 34	715	571	79.9%	649	90.8%	552	77.2%
35 - 44	889	726	81.7%	824	92.7%	734	82.6%
45 - 54	919	785	85.4%	882	96.0%	808	87.9%
55 - 64	1,131	976	86.3%	1,088	96.2%	1,008	89.1%
65+	342	307	89.8%	331	96.8%	319	93.3%
Total	4,304	3,611	83.9%	4,061	94.4%	3,650	84.8%
Race*							
White	406	315	77.6%	343	84.5%	342	84.2%
Black/African American	4,942	4,214	85.3%	4,735	95.8%	4,165	84.3%
Asian	22	14	63.6%	20	90.9%	19	86.4%
Nat Hawaiian/Pac Islander	7	7	100.0%	7	100.0%	7	100.0%
Nat American/Alaska Native	17	13	76.5%	16	94.1%	14	82.4%
Total	5,394	4,563	84.6%	5,121	94.9%	4,547	84.3%
Ethnicity							
Latino	331	263	79.5%	279	84.3%	283	85.5%
Non-Latino	3,973	3,348	84.3%	3,782	95.2%	3,368	84.8%
Total	4,304	3,611	83.9%	4,061	94.4%	3,651	84.8%
HIV/AIDS Risk Factors*							
MSM	1,317	1,057	80.3%	1,235	93.8%	1,104	83.8%
IDU	221	195	88.2%	215	97.3%	195	88.2%
Hemophilia/Coagulation Disease	15	10	66.7%	15	100.0%	12	80.0%
Heterosexual contact	2,235	1,863	83.4%	2,126	95.1%	1,874	83.8%
Blood Transfusion/Blood Components	30	25	83.3%	27	90.0%	27	90.0%
Mother at risk/Perinatal	179	140	78.2%	173	96.6%	133	74.3%
RNI /Missing	711	645	90.7%	669	94.1%	610	85.8%
Total	4,708	3,935	83.6%	4,460	94.7%	3,955	84.0%

^{*}These data elements allow for reporting of multiple responses

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, 2014-2018

	20	14	201	L5†	20	16	20	17	20	018	Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Gender Identity												
Male	192	69.8	NA	NA	230	73.2	205	67.4	198	71.5	825	70.5
Female	81	29.5	NA	NA	79	25.2	95	31.3	75	27.1	330	28.2
Transgender	2	0.7	NA	NA	5	1.6	4	1.3	4	1.4	15	1.3
Total	275	100.0	NA	NA	314	100.0	304	100.0	277	100.0	1,170	100.0
Race/Ethnicity												
White	25	9.1	NA	NA	29	9.2	28	9.2	31	11.2	113	9.7
Black	222	80.7	NA	NA	252	80.3	259	85.2	214	77.3	947	80.9
Latino	5	1.8	NA	NA	11	3.5	3	1.0	13	4.7	32	2.7
Other*	23	8.4	NA	NA	22	7.0	14	4.6	19	6.9	78	6.7
Total	275	100.0	NA	NA	314	100.0	304	100.0	277	100.0	1,170	100.0
Mode of Transmission												
Sexual contact	144	52.4	NA	NA	191	60.8	162	53.3	163	58.8	660	56.4
IDU	75	27.3	NA	NA	68	21.7	80	26.3	52	18.8	275	23.5
Sexual contact/IDU	13	4.7	NA	NA	22	7.0	20	6.6	28	10.1	83	7.1
Risk not identified	43	15.6	NA	NA	31	9.9	37	12.2	33	11.9	144	12.3
Other**	0	0.0	NA	NA	2	0.6	5	1.6	1	0.4	8	0.7
Total	275	100.0	NA	NA	314	100.0	304	100.0	277	100.0	1,170	100.0
Age at Death												
<13	0	0.0	NA	NA	0	0.0	0	0.0	0	0.0	-	0.0
13-19	2	0.7	NA	NA	1	0.3	0	0.0	1	0.4	4	0.3
20-24	1	0.4	NA	NA	3	1.0	2	0.7	2	0.7	8	0.7
25-29	4	1.5	NA	NA	6	1.9	6	2.0	3	1.1	19	1.6
30-39	26	9.5	NA	NA	24	7.6	32	10.5	21	7.6	103	8.8
40-49	52	18.9	NA	NA	58	18.5	35	11.5	43	15.5	188	16.2
50-59	92	33.5	NA	NA	97	30.9	110	36.2	92	33.2	391	33.4
≥60	98	35.6	NA	NA	125	39.8	119	39.1	115	41.5	457	39.1
Total	275	100.0	NA	NA	314	100.0	304	100.0	277	100.0	1,170	100.0

^{†2015} cause of death is incomplete and will be updated when available.

^{*}Other race includes mixed race individuals, Asians, Alaska Natives, American Indians, Native Hawaiian and Pacific Islanders

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

Table B14. Number and Rate[†] per 100,000 persons of Chlamydia Cases by Year of Diagnosis, Gender, Age, and Ward, District of Columbia, 2015-2019

	20	15	20	16	2	017	2	2018	2019		Total
	N	Rate	N								
Gender Identity											
Male	2,952	926.6	3,401	1,052.2	4,452	1,356.6	4,128	1,238.5	4,155	1,247	19,088
Female	4,339	1,227.0	4,311	1,204.4	4,878	1,335.8	4,812	1,303.5	5,072	1,374	23,412
Transgender	2	N/A	221	N/A	20	N/A	28	N/A	19	N/A	114
Unknown	70	N/A	145	N/A	63	N/A	45	N/A	91	N/A	414
Total	7,386	1,098.7	7,879	1,156.7	9,413	1,357.6	9,013	1,283.1	9,337	1,329	43,028
Age at Diagnosis											
0-12	17	18.4	15	15.8	8	8.2	4	4.0	7	6.9	51
13-17	828	3,088.1	723	2,693.1	835	3,076.1	799	3,040.7	785	2,987.4	3,970
18-19	938	4,289.2	846	3,886.1	1,016	4,605.4	1,080	5,090.0	1,146	5,401.1	5,026
20-24	2,461	4,101.9	2,515	4,256.0	2,855	5,015.9	2,636	4,980.7	2,774	5,241.5	13,241
25-29	1,600	2,045.9	1,764	2,229.7	2,175	2,596.3	2,086	2,510.4	2,199	2,646.3	9,824
30-39	1,044	813.3	1,384	1,040.7	1,768	1,332.7	1,642	1,146.6	1,697	1,185.0	7,535
40+	457	171.9	579	216.0	706	258.3	708	257.9	691	251.7	3,141
Missing	41	N/A	53	N/A	50	N/A	58	N/A	38	N/A	240
Total	7,386	1,098.7	7,879	1,156.7	9,413	1,357.6	9,013	1,283.1	9,337	1,329	43,028
HIV Co-infected	415	61.7	498	73.1	557	80.3	560	79.7	410	58.4	415
Ward											
Ward 1	694	837.6	868	1,016.1	1,127	1,348.1	1,069	1,226.9	1,062	1,218.8	694
Ward 2	371	477.8	481	600.9	590	757.0	510	639.2	501	627.9	371
Ward 3	127	152.7	158	184.3	234	278.5	216	251.0	231	268.4	127
Ward 4	512	616.4	575	671.4	769	908.5	715	796.4	760	846.6	512
Ward 5	787	959.2	925	1,093.5	1,157	1,343.2	1,122	1,248.8	1,069	1,189.8	787
Ward 6	612	726.1	759	873.4	966	1,060.5	951	984.9	952	985.9	612
Ward 7	1,186	1,618.2	1,214	1,606.6	1,448	1,814.5	1,385	1,662.7	1,489	1,787.5	1,186
Ward 8	1,424	1,755.1	1,468	1,755.0	1,661	1,950.5	1,694	1,946.6	1,804	2,073.0	1,424
Missing	1,673	N/A	1,431	N/A	1,461	N/A	1,351	N/A	1,469	N/A	1,673
Total	7,386	1,098.7	7,879	1,156.7	9,413	1,357.6	9,013	1,283.1	9,337	1,329	43,028

^{*} Race/Ethnicity information is not included in table because of the high percentage of cases missing information (71%)

⁺Source: 2018 US Census Estimates

Table B15. Number and Rate[†] per 100,000 persons of Gonorrhea Cases by Year of Diagnosis, Gender, Age, and Ward, District of Columbia, 2015-2019

	20:	15	20	016	20)17	20	18	20	19	Total
	N	Rate	N								
Gender Identity											
Male	1,730	543.0	2,496	772.2	3,309	1,008.3	2,996	898.9	3,028	908.5	13,559
Female	820	231.9	911	254.5	1,298	355.5	1,211	328.1	1,295	350.8	5,535
Transgender	11	NA	30	NA	25	NA	31	NA	27	NA	124
Unknown	18	NA	48	NA	15	NA	18	NA	24	NA	123
Total	2,579	383.7	3,485	511.6	4,647	670.2	4,256	605.9	4,374	622.7	19,341
Age at Diagnosis											
0-12	3	3.3	5	5.3	9	9.2	0	0	5	4.9	22
13-17	227	846.6	196	730.1	259	954.1	190	723.1	230	875.3	1,102
18-19	197	900.8	229	1,051.9	305	1,382.5	298	1,404.5	309	1,456.3	1,338
20-24	674	1,123.4	861	1,457.0	1,081	1,899.2	890	1,681.7	901	1,702.4	4,407
25-29	618	790.2	855	1,080.7	1,171	1,397.8	1,071	1,288.9	1071	1,288.9	4,786
30-39	534	416.0	830	624.1	1,164	877.4	1,189	830.3	1241	866.6	4,958
40+	315	118.5	493	183.9	651	238.2	610	222.2	609	221.8	2,678
Missing	11		16		7		8		8		50
Total	2,579	383.7	3,485	511.6	4,647	670.2	4256	605.9	4,374	622.7	19,341
Anatomical Location**											
Rectal	112	NA	165	NA	860	NA	708	NA	451	NA	2,296
Oropharyngeal	217	NA	178	NA	551	NA	699	NA	1,034	NA	2,679
Genital	920	NA	1,279	NA	1,300	NA	1,183	NA	1,373	NA	6,055
Other	1,328	NA	1,829	NA	1,088	NA	708	NA	447	NA	130
Missing	2	NA	34	NA	848	NA	958	NA	1,069	NA	5,400
Total	2,579	383.7	3,485	511.6	4,647	670.2	4256	605.9	4,374	622.7	19,341
HIV Co-infected	378	56.2	579	85.0	698	100.7	630	89.7	547	77.9	
Ward											
Ward 1	299	360.9	480	561.9	605	723.7	570	654.2	595	682.9	2,549
Ward 2	198	255.0	304	379.8	367	470.9	356	446.2	349	437.4	1,574
Ward 3	33	39.7	58	67.7	105	125.0	86	99.9	88	102.3	370
Ward 4	129	155.3	198	231.2	277	327.3	251	279.6	291	324.1	1,146
Ward 5	280	341.3	428	506.0	583	676.8	558	621.0	549	611.0	2,398
Ward 6	252	299.0	357	410.8	545	598.3	480	497.1	494	511.6	2,128
Ward 7	409	558.1	482	637.9	646	809.5	641	769.5	632	758.7	2,810
Ward 8	495	610.1	614	734.0	844	991.1	724	832	781	897.5	3,458
Missing	484	NA	564	NA	675	NA	590	NA	595	NA	2,908
Total	2,579	383.7	3,485	511.62	4,647	670.2	4,256	605.9	4,374	622.7	19,341
C 2010 LIG C F :: :											

[†]Source: 2018 US Census Estimates

^{*} Race/Ethnicity information is not included in table because of the high percentage of cases missing information (59%)

^{**}A case is assigned to one location only. If an individual has more than one location per case the hierarchy is Rectal, Oropharyngeal then Genital

Table B16. Number and Rate[†] per 100,000 persons of Primary and Secondary Syphilis Cases by Year of Diagnosis, Gender Identity, Race/Ethnicity, Age, Sexual Behavior and Ward, District of Columbia, 2015-2019

	20	15	20:	16	20	17	2	018	20:	19	Total
	N	Rate	N								
Туре											
Primary	27	4.0	62	9.1	98	14.1	103	14.9	111	16.0	401
Secondary	88	13.1	133	19.5	199	28.7	181	26.1	186	26.8	787
Total	115	17.1	195	28.6	297	42.8	284	41.0	297	42.8	1,188
Gender Identity											
Male	104	32.6	186	57.5	287	87.5	267	81.4	263	80.1	1,107
Female	5	1.4	7	2.0	7	1.9	11	3.0	22	6.0	52
Transgender	6	NA	2	NA	2	NA	6	NA	12	NA	28
Unknown	0	NA	0	NA	1	NA	0	NA	0	NA	1
Total	115	17.1	195	28.6	297	42.8	284	41.0	297	42.8	1,188
Race/Ethnicity											<u> </u>
Black	52	16.6	82	26.1	126	38.8	135	41.6	153	47.1	548
White	27	11.1	74	29.8	97	38.2	85	33.5	91	35.9	374
Latino	12	16.9	14	18.8	28	36.7	35	45.9	26	34.1	115
Other	1	2.3	1	2.3	6	15.5	5	12.9	8	20.7	21
Unknown	23	NA	24	NA	40	NA	24	NA	19	NA	130
Total	115	17.1	195	28.6	297	42.8	284	41.0	297	42.8	1,188
Age at Diagnosis											·
13-17	0	NA	0								
18-19	0	0	3	11.2	1	3.7	1	3.7	1	3.7	6
20-24	3	13.7	1	4.6	6	27.2	4	18.1	6	27.2	20
25-29	20	33.3	24	40.6	23	40.4	23	40.4	31	54.5	121
30-39	22	28.1	34	43.0	67	80.0	59	70.4	70	83.6	252
40+	35	27.3	68	51.1	106	79.9	111	83.7	102	76.9	422
Total	115	17.1	195	28.6	297	42.8	284	41.0	297	42.8	1,188
Sexual Behavior											
Non-Cisgender Sex with Males	1	NA	1	NA	2	NA	2	NA	8	NA	14
Non-Cisgender Sex with Males and		NA									
Females	0		0		0		0		1		1
Non-Cisgender Sex with Females	0	NA	0	NA	0	NA	1	NA	0	NA	
Men who have Sex with Men and		NA									
Women	3		4		20		12		12		51
Women who have Sex with Men and		NA									
Women	0		0		0		0		2		2
Men who have Sex with Men	78	NA	138	NA	186	NA	205	NA	189	NA	796
Women who have Sex with Women	0	NA	0	NA	0	NA	0	NA	1	NA	1
Women who have Sex with Men	3	NA	5	NA	5	NA	8	NA	13	NA	34
Men who have Sex with Women	3	NA	8	NA	6	NA	11	NA	32	NA	60
Unknown	27	NA	39	NA	78	NA	45	NA	39	NA	228
Total	115	17.1	195	28.6	297	42.8	284	41.0	297	42.8	1,188
HIV co-infected	67	10.2	52	7.7	83	12.2	125	18.3	110	15.9	437
Ward	-										

Ward 1	21	25.7	18	21.7	37	43.3	58	69.4	49	58.6	183
Ward 2	13	15.9	21	25.3	30	35.1	37	44.3	36	43.1	137
Ward 3	4	4.9	7	8.4	3	3.5	10	12.0	6	7.2	30
Ward 4	18	22.0	4	4.8	16	18.7	28	33.5	32	38.3	98
Ward 5	23	28.2	22	26.6	33	38.6	48	57.4	47	56.2	173
Ward 6	15	18.4	16	19.3	36	42.1	42	50.2	46	55.0	155
Ward 7	20	24.5	17	20.5	17	19.9	32	38.3	31	37.1	117
Ward 8	15	18.4	15	18.1	14	16.4	30	35.9	27	32.3	101
Missing	8	NA	4	NA	12	NA	19	NA	8	NA	51
Total	115	17.1	195	28.6	297	42.8	284	41.0	297	42.8	1,188

†Source: 2018 US Census Estimates

Table B17. Reported Tuberculosis Cases by Selected Characteristics, District of Columbia, 2015-2019

	2015		2016		2017	7	2018	2018		2019		al
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	
District Total	33	4.9	25	3.7	36	5.3	36	5.2	24	3.4	154	NA
	N	%	N	%	N	%		%	N	%	N	%
Country of Birth												
Foreign Born	18	54.5	17	68.0	24	66.7	28	77.8	17	70.8	104	67.5
US Born	15	45.5	8	32.0	12	33.3	8	16.8	7	29.2	50	32.5
Total	33	100.0	25	100.0	36	100.0	36	100.0	24	100.0	154	100.0
Disease Site											0	
Pulmonary	18	54.5	16	64	21	58.3	24	67	17	71.0	96	62.3
Extra Pulmonary	11	33.3	9	36	14	38.9	8	22	7	29.2	49	31.8
Both	4	12.1	0	0	1	2.8	4	11	0	0.0	9	5.8
Total	33	100.0	25	100.0	36	100.0	36	100.0	24	100.0	154	100.0
Sex												
Males	15	45.5	15	60.0	19	52.8	25	69	12	50.0	86	55.8
Female	18	54.5	10	40.0	17	47.2	11	31	12	50.0	68	44.2
Total	33	100.0	25	100.0	36	100.0	36	100.0	24	100.0	154	100.0
Age at Diagnosis											0	
<5	2	6.1	0	0	1	2.8	0	0	0	0.0	3	1.9
5 - 14	0	0	0	0	0	0.0	0	0	0	0.0	0	0.0
15 - 24	3	9.1	3	12	4	11.1	1	3	3	12.5	14	9.1
25 - 44	12	36.4	13	52	11	30.6	13	36	10	41.7	59	38.3
45 - 64	6	18.2	5	20	12	33.3	16	44	8	33.3	47	30.5
≥65	10	30.3	4	16	8	22.2	6	17	3	12.5	31	20.1
Total	33	100.0	25	100.0	36	100.0	36	100	24	100.0	154	100.0
Race/Ethnicity												
White	4	12.1	4	16.0	2	5.6	2	5.6	5	20.8	17	11.1
Black	21	63.6	19	76.0	26	72.2	28	77.8	14	58.3	108	70.1
Latino	4	12.1	1	4.0	7	19.4	3	8.3	5	20.8	20	13.0
Other	4	12.1	1	4.0	1	2.8	3	8.3	0	0.0	9	5.8
Total	33	100.0	25	100.0	36	100.0	36	100.0	24	100.0	154	100.0
Homeless w/in past year												
Total	0	0	3	12	8	22.2	0	0	2	8.3	13	7.4
Alcohol/Substance Use												
Total	7	21.2	3	12	7	19.4	3	8.3	2	8.3	22	14.2
HIV Co-infection												
Total	4	12.1	7	28	5	13.9	3	8.3	1	4.2	20	13.6

Table 18. Number and Rate[†] per 100,000 persons of Newly Reported Chronic Hepatitis B Cases by Gender, Age at Diagnosis, and Year of Diagnosis, District of Columbia 2015-2019

	20	15	201	6	203	17	20	18	201	.9	Total
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N
Gender Identity											
Male	222	69.7	242	74.9	175	53.3	253	75.9	180	54.0	1,072
Female	140	39.6	142	39.7	122	33.4	153	41.9	121	32.8	678
Transgender		NA		NA		NA		NA		NA	
Unknown		NA		NA		NA		NA		NA	
Total	362	53.9	384	56.4	297	42.8	406	58.6	301	42.8	1,750
Age at Diagnosis											
0-12	1	1.1	2	2.1	2	2.0	1	1.0	1	1.0	7
13-19	5	10.3	3	6.2	6	12.2	4	8.1	10	21.1	28
20-29	40	28.9	51	36.9	42	29.9	36	25.6	43	31.6	212
30-39	93	72.4	90	67.7	89	67.1	100	75.4	73	51.0	445
40-49	75	93.5	72	89.1	55	67.5	87	105.8	55	66.9	344
50-59	77	101.6	83	110.1	57	74.0	80	103.8	56	76.4	353
60+	71	64.6	83	74.2	46	40.1	96	83.7	63	53.0	359
Missing	0	NA	0	NA	0	NA	2	NA	0	NA	2
Total	362	53.9	384	56.4	297	42.8	406	58.6	301	42.8	1,750

¹Cases with a reported residential address outside of the District of Columbia at the time of diagnosis are excluded from analysis.

²Numbers may differ from previous publications due to additional record matching and/or data cleaning efforts.

³Diagnosis year based on date of first reported chronic hepatitis C positive laboratory report based on 2016 CDC case definition guidance.

⁴Race/Ethnicity information is not included in table because of the high percentage of cases missing information

[†]Source: 2018 US Census Estimates

Table 19. All Positive Chronic Hepatitis C Cases by Gender, Age at Diagnosis, Case Classification, and Diagnosis Type, District of Columbia 2015-2019

	Total Cases	Reported	Diagnos	sis Type Previously		Documented	Non-Detectable
	N	%	Newly Reported N (%)	Reported N (%)	RNA Confirmed N (%)	Genotype Test N (%)	at Last RNA N (%)
Gender Identity			` '	` '	` ,	` '	` ,
Male	10,281	65%	4,222 (41)	6,059 (59)	7,885 (77)	1,022 (10)	1,875 (18)
Female	5,528	35%	2,390 (43)	3,138 (57)	4,109 (74)	547 (10)	1,010 (18)
Transgender	2	<1%	2 (100)		1 (50)		
Total	15,811		6,614 (42)	9,197 (58)	11,995 (76)	1,569 (10)	2,885 (18)
Current Age							
0-12	16	<1%	15 (94)	1 (6)	6 (38)		
13-19	9	<1%	9 (100)		2 (22)		
20-29	317	2%	287 (91)	30 (9)	140 (44)	7 (2)	16 (5)
30-39	731	5%	532 (73)	199 (27)	424 (58)	28 (4)	56 (8)
40-49	809	5%	491 (61)	318 (39)	517 (64)	49 (6)	82 (10)
50-59	3,689	23%	1,277 (35)	2,412 (65)	3,035 (82)	329 (9)	672 (18)
60+	10,192	64%	3,967 (39)	6,225 (61)	7,851 (77)	1,154 (11)	2,057 (20)
Unknown	48	<1%	36 (75)	12 (25)	20 (42)	2 (4)	2 (4)
Total	15,811		6,614 (42)	9,197 (58)	11,995 (76)	1,569 (10)	2,885 (18)
Birth Cohort							
<1945	902	6%	447 (50)	455 (50)	634 (70)	104 (12)	129 (14)
1945-1965	12,020	76%	4,125 (34)	7,895 (66)	9,649 (80)	1,331 (11)	2,516 (21)
1966+	2,826	18%	1,991 (70)	835 (30)	1,684 (60)	132 (5)	238 (8)
Unknown	63	<1%	51 (81)	12 (19)	28 (44)	2 (3)	2 (3)
Total	15,811		6,614 (42)	9,197 (58)	11,995 (76)	1,569 (10)	2,885 (18)

¹Cases with a reported residential address outside of the District of Columbia at the time of diagnosis are excluded from analysis.

²Numbers may differ from previous publications due to additional record matching and/or data cleaning efforts.

³Diagnosis year based on date of first reported chronic hepatitis C positive laboratory report based on 2016 CDC case definition guidance.

⁴Race/Ethnicity information is not included in table because of the high percentage of cases missing information

⁵Percentages for diagnosis type, RNA confirmation documented genotype test and non-detectable RNA are row percentages

Table 20. Number and Rate[†] per 100,000 persons of Newly Reported Chronic Hepatitis C Cases by Gender, Age at Diagnosis, and Year of Diagnosis, District of Columbia 2015-2019

	20:	15	20:	16	20)17	2	2018	203	19	To	otal
	N	Rate										
Gender Identity												
Male	990	312.9	902	280.9	760	232.8	914	285.2	695	208.5	4,261	283.0
Female	513	146.2	420	118.5	498	136.9	574	158.3	403	109.2	2,408	139.8
Transgender		NA		NA		NA	1	NA		NA	1	NA
Unknown		NA										
Total	1,503	225.2	1,322	195.5	1,258	182.3	1,489	218.5	1,099	156.5	6,671	189.9
Age at Diagnosis												
0-12	3	4.5	5	3.2	6	5.3	2	6.1		NA	16	3.2
13-19	6	12.3	8	14.4	2	4.1	5	10.2		NA	21	8.8
20-29	80	58.6	67	48.5	106	75.3	105	75.3		NA	21	3.1
30-39	136	105.9	103	77.5	142	107.0	166	127.4		NA	358	50.0
40-49	152	189.5	115	143.6	121	148.5	160	196.3		NA	548	133.3
50-59	468	625.4	376	509.2	333	433.4	401	534.6		NA	1,578	430.3
60+	655	599.6	642	575.8	543	477.7	628	557.1	1,027	863.5	3,495	587.7
Missing	3	NA	6	NA	5	NA	22	NA	57	NA	93	NA
Total	1,503	225.2	1,322	195.5	1,258	182.3	1,489	218.5	1,099		6,671	189.9

¹Cases with a reported residential address outside of the District of Columbia at the time of diagnosis are excluded from analysis.

²Numbers may differ from previous publications due to additional record matching and/or data cleaning efforts.

³Diagnosis year based on date of first reported chronic hepatitis C positive laboratory report based on 2016 CDC case definition guidance.

⁴Race/Ethnicity information is not included in table because of the high percentage of cases missing information

[†]Source: 2018 US Census Estimates

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