

NEW!

What is HIV Incidence Surveillance?

The Indiana State Department of Health (ISDH) implemented a new surveillance activity in 2005 called HIV incidence surveillance. As with any new surveillance activity, it has gone through many changes. In the early 1980s the State of Indiana began collecting HIV/AIDS data on reportable cases of HIV/AIDS. The data represented newly reported cases of HIV/AIDS but did not indicate how long someone had been infected. HIV Incidence Surveillance allows us to make estimations of recent HIV infections, as opposed to long-standing or chronic infections.

HIV Incidence Surveillance utilizes the serologic testing algorithm for recent HIV seroconversion (STARHS).¹

“STARHS is performed on remnant serum specimens from confirmed HIV antibody positive tests and consists of a series of two tests, a standard, sensitive, HIV antibody test currently followed by a test to determine the normalized optical density (ODN) level of concentration of HIV-specific antibodies to total antibodies. STARHS distinguishes between recent and long-standing HIV-1 infection on a population level and should allow the estimation of local and national HIV incidence.”²

Testing and treatment histories (TTH) are also being collected by our HIV testing partners and through case reports sent to ISDH. Once the STARHS results are combined with the TTHs, we will be able to make population-based estimates of HIV infections. The goal for the Centers for Disease Control and Prevention (CDC) is to release the very first national HIV incidence estimation in early 2008. Indiana plans to release a local HIV incidence estimation sometime after the national release. By including the incidence data in calculations, Indiana will have a better idea of where recent HIV infections are occurring, and be able to apply this information to our statewide prevention efforts.

References

¹Janssen RS, Satten GA, Stramer SL, et al. (1998). New testing strategy to detect early HIV-1 infection for use in incidence estimates and for clinical and prevention purposes. *JAMA*, 280:42-48.

²Centers for Disease Control and Prevention (2007). *Technical guidance for HIV/AIDS surveillance programs – HIV incidence surveillance*, p12-5.