An analysis of data for 2020



Aim

To provide an overview of HIV epidemiology in Northern Ireland by collating and analysing information from a number of sources. Although it reflects epidemiological trends over time, its main focus will be on data collected in 2020.

New HIV diagnoses definition

New HIV diagnoses are defined by area of residence.

Caveat

Trends over time must be interpreted with care, as each data source is subject to reporting delay. This means that numbers, particularly for recent years, may rise as a result of receiving further reports.

In response to the COVID-19 pandemic, the UK government enforced strict national lockdown from March 2020 onwards and encouraged people to stay at home and practice social distancing. People living with diagnosed HIV with advanced infection were advised to self-isolate and many consultations for HIV care moved from face-to-face to telephone appointments.

Other outputs

PHA World AIDS Day press release and summary data tables available at: www.publichealth.hscni.net/news/world-aids-day-pha-puts-focus-safer-sex-and-need-testing-0

PHE national and country HIV surveillance data tables are available at: https://www.gov.uk/government/statistics/hiv-annual-data-tables



Interpretation of 2020 data

The numbers of HIV diagnoses are influenced by access to services.

The COVID-19 pandemic caused major service disruptions, therefore caution is required in making any comparisons to different time periods.





Summary

- There were 60 new HIV diagnoses made in Northern Ireland (47 men and 13 women) in 2020; a 5% decline from 63 in 2019 and a decline of 41% from a peak of 102 new HIV diagnoses reported in 2015. This is the third consecutive year that new HIV diagnoses have decreased.
- The largest route of transmission for new HIV diagnoses (48%, 29/60) occurred through gay and bisexual men (GBM) transmission.
- Transmission between heterosexual partners accounts for almost one third (19/60) of new HIV diagnoses.
- Five (8%) new HIV diagnoses occurred through injecting drug use. This is a significant new risk group in Northern Ireland.



Summary

- The majority (63%, 38/60) of people newly diagnosed in 2020 were aged between 25 and 49 years. The proportion of people diagnosed aged 50 years or over increased slightly from 21% in 2011 to 23% in 2020 however, diagnoses in those aged over 65 have remained low with only 18 new diagnoses reported over the past ten years.
- Recent Infection Testing Algorithm (RITA) demonstrated that 15% of new diagnoses in gay and bisexual men and 29% in heterosexuals were a result of recently acquired infection.



Summary

- Almost half (48%, 24/50) new HIV diagnoses were made at a late stage i.e. cases had a CD4 count within 91 days of diagnosis, and the CD4 count was <350 cells/mm³).
- Of those newly diagnosed, six were also diagnosed with AIDS at their HIV diagnosis i.e. reported AIDS defining illness within three months of HIV diagnosis.
- Late diagnosis suggests that these individuals had been living with HIV for years prior to diagnosis and it is likely that there were missed opportunities for HIV testing prior to being diagnosed.



Summary

- In 2020, 1,234 People living with HIV (PWHIV) resident in Northern Ireland received medical HIV-related care. Of these, there were 970 men and 264 women.
- Almost all of those receiving medical HIV-related care (98%; 1,022/1,038) and where route of transmission was known, acquired their infection through sexual contact. Of these, 61% (634/1,038) acquired their infection through sexual contact involving gay and bisexual men and 37% (388/1,038) through heterosexual contact. Only 2% (16/1,038) acquired their infection through non-sexual contact.
- There were five deaths reported in 2020.



Summary

- Over three quarters of those received HIV-related medical care were aged 35-64 (77%, 952/1,234). Additionally, 85% were white, 10% were black-African and 5% were classified in other ethnic groups or not reported.
- Everyone in care received antiretroviral therapy, and 97% of those on treatment were virally suppressed.
- 65,906 HIV tests were carried out in Northern Ireland during 2020 this is a 6% decrease from 70,393 tests in 2019.
- Of the 65,906 HIV tests performed in Northern Ireland during 2020, 28,054 were performed by Regional Virology Laboratory, 22,261 were performed as part of the antenatal screening and 15,591 were online SH:24 tests. SH:24 online HIV tests played a significant role during the COVID-19 pandemic when lockdown restrictions were imposed.



HIV service developments

There have been a number of service developments and clinical practice changes that may have some impact on HIV testing and surveillance results during 2020, and going forward

- Treatment as Prevention (TasP) refers to starting HIV treatment early to suppression viral load and therefore prevent further transmission. In recent years it has become standard practice to start HIV treatment early/shortly after diagnosis to support viral load suppression. This is likely to have impacted on reduced HIV transmissions in the UK in recent years.
- HIV PrEP clinic opened in July 2018, with requirements for quarterly HIV testing in those prescribed PrEP.
- SH:24 is a free online sexual health testing service that provides confidential hometesting for chlamydia, gonorrhoea, syphilis and HIV. The service became available to residents in Northern Ireland in late 2019. Data from SH:24 are included in this report for the first time.



New HIV diagnoses

Table 1: New HIV diagnoses in Northern Ireland: all persons by demographics and probable route

of exposure, all years to 2020

Data to end of December 2020

New diagnoses and deaths ¹		<2011	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
HIV diagnoses	Men	566	59	68	87	70	82	60	66	59	46	47
	Women	182	12	16	13	21	20	14	17	20	17	13
	Subtotal	748	71	84	100	91	102	74	83	79	63	60
	Men	85	<5	0	<5	10	<10	6	<10	<5	<10	<10
AIDS at HIV diagnoses	Women	23	0	0	<5	<5	<5	0	<5	<5	<5	<10
	Subtotal	108	<5	0	<5	<15	8	6	7	5	10	6
	Men	84	<10	<5	<10	<5	6	5	<5	<5	<10	<5
Deaths	Women	15	<5	0	<5	<5	0	<5	0	<5	<5	<5
	Subtotal	99	10	<5	9	<5	6	<10	<5	<5	8	5

Age at diagnosis	<2011	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Under 15	9	0	0	0	0	0	0	<5	0	0	0
15 - 24	105	<10	11	<10	<15	9	12	10	<10	<10	8
25 - 34	278	24	34	29	25	37	22	25	23	14	10
35 - 49	292	24	21	38	40	43	26	29	31	24	28
50 - 64	56	13	18	23	14	13	<15	16	15	16	14
65 and over	7	<5	0	<5	<5	0	<5	<5	<5	<5	0

Probable exposure category and gender ²		<2011	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Sex between men		375	41	53	53	45	62	42	39	40	24	29
	Men	153	18	12	23	20	15	13	17	12	16	11
Heterosexual contact	Women	168	<15	16	12	18	20	12	12	16	13	8
	Subtotal	321	<30	28	35	38	35	25	29	28	29	19
	Men	12	0	<5	<5	<5	<5	<5	<5	0	<5	<5
Injecting drug use	Women	5	0	0	0	0	0	<5	<5	0	<5	<5
	Subtotal	17	0	<5	<5	<5	<5	<5	<5	0	<5	5
	Men	<5	0	0	0	0	0	0	<5	0	0	0
Mother to child	Women	<10	0	0	0	0	0	0	0	0	<5	0
	Subtotal	8	0	0	0	0	0	0	<5	0	<5	0
Other	Men	<25	0	<5	<5	0	0	0	0	0	<5	0
	Women	<5	<5	0	0	0	0	0	0	0	0	0
	Subtotal	24	<5	<5	<5	0	0	0	0	0	<5	0

Notes: Total includes individuals with incomplete/not reported demographic data.

1. Subtotals include individuals for whom gender was not reported, or for whom gender was reported in another way (e.g. non-binary or other).

• AIDS at HIV diagnosis indicates reports of an AIDS defining illness within 3 months of HIV diagnosis. Figures may be lower than previously published data which presented all reports of AIDS, regardless of the time in relation to HIV diagnosis.

2. Sex between men includes men who also reported injecting drug use. • Vertical transmission includes individuals born abroad but diagnosed in the UK.

• Other includes exposures such as contaminated blood products and healthcare related contact.

Trends in new diagnoses

Figure 1: Number of new HIV diagnoses, Northern Ireland, 2001 to 2020



Age group

Figure 2: Number of new HIV diagnoses by age group, 2011 – 2020, Northern Ireland



New HIV diagnoses in Northern Ireland are highest in the 35-49 age group. Numbers of those aged 25-34 have declined in recent years. The proportion of people diagnosed aged 50 years or over increased slightly from 21% in 2011 to 23% in 2020 however, diagnoses in those aged 65 and over have remained low with only 18 new diagnoses reported over the past ten years.



Risk groups

Figure 3: Annual new diagnoses of HIV by probable route of exposure, 2011 – 2020, Northern Ireland



New HIV diagnoses in Northern Ireland have been acquired mostly through sexual transmission, with gay and bisexual men accounting for the majority of these from 2011. Heterosexual transmission in 2020 reduced by 34% compared with 2019 and it is the lowest it has been over the past decade. The annual number of diagnoses where infection has been acquired through other exposures remains very low, however injecting drug use emerged as an important risk factor.

Risk groups

Gay and bisexual men

In 2020, 48% (29/60) of all new HIV diagnoses were in gay and bisexual men (compared to 38% in 2019 and 58% in 2011). Of the gay and bisexual men (GBM) newly diagnosed with HIV in 2020, 97% were white and where country of birth was recorded, 77% were UK-born. Overall, there has been a decline in GBM diagnoses since 2016 with a steep decline seen in 2019.

Heterosexual transmission

Heterosexual contact accounted for 32% (19/60) of all new HIV diagnoses made in 2020 (compared to 46% in 2019 and 41% in 2011). Black African accounted for 26% of new heterosexual diagnoses in 2020 (in cases were ethnicity was recorded) compared with 46% in 2019 and 15% in 2011. There has been a decline in new heterosexual diagnoses since 2014 with the lowest new diagnoses over the past decade reported in 2020.

People who inject drugs

A small number of cases of HIV were identified where the mode of transmission was injection of drugs (heroin and cocaine). This is a concerning new development.



Region of birth

Figure 4: Number of new HIV diagnoses by region of birth, 2011 – 2020, Northern Ireland



Where country of birth was recorded, almost two thirds (65%; 477/733) of new HIV diagnoses reported since 2011 were born in the UK.



Table 2: New HIV diagnoses in Northern Ireland: all persons by ethnicity, region of birth and CD4 count, all years to 2020

Data to end of December 2020

Ethnicity and gen	der ³	<2011	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
	Men	488	55	65	75	66	77	55	56	47	36	43
White	Women	87	6	9	6	11	11	8	11	12	9	7
	Subtotal	575	61	74	81	77	88	63	67	59	45	50
	Men	52	<5	<5	6	<5	<5	<5	<5	<5	<10	<5
Black African	Women	71	<5	<10	7	<10	5	<10	<5	<5	8	<5
	Subtotal	123	5	8	13	11	<10	9	<5	7	<15	5
Black Caribbean		<5	0	0	0	0	0	0	0	0	0	0
Other/mixed		32	<5	<5	5	<5	7	<5	7	6	<5	<5
Region of birth		<2011	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
UK		323	51	62	58	60	59	49	48	38	23	29
Europe		82	11	12	8	15	16	12	16	11	9	5
Africa		110	<10	6	13	10	10	7	7	13	17	9
Asia		17	0	0	5	<5	5	<5	<5	6	<5	<5
Other		7	<5	<5	5	0	<5	<5	<5	<5	0	<5
CD4 at diagnosis	4	<2011	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Number with a CD-	4 count	499	64	77	77	84	84	64	71	66	57	50
Number with CD4	<350	239	35	37	42	44	23	28	31	25	22	24
% of CD4 <350		48%	55%	48%	55%	52%	27%	44%	44%	38%	39%	48%
Median CD4		360	321	350	320	330	520	390	410	440	500	375

Notes:

3. Ethnicity data for new HIV diagnoses has been collected since 1995.

• Other/mixed includes other reported ethnicities such as 'Black Other'.

4 CD4 count data are presented for those with a CD4 count available within 91 days of diagnosis.



Late diagnoses

Figure 5: Number and proportion of new HIV diagnoses in adults diagnosed with a CD4 count <350 cells/mm³ within 91 days of diagnosis, 2011 – 2020, Northern Ireland



CD4 counts within 91 days of diagnosis were available for 83% (50/60) of new HIV diagnoses. Almost half (48%; 24/50) of new HIV diagnoses were diagnosed at a late stage i.e. cases which had a CD4 count within 91 days of diagnosis, and in whom the CD4 count <350 cells/mm³.



Figure 6: Proportion of new HIV diagnoses in adults with a CD4 count <350 cells/mm³ within 91 days of diagnosis, by probable route of infection, 2011 – 2020, Northern Ireland



Under half (44%; 7/16) of individuals with heterosexually acquired HIV were diagnosed at a late stage in 2020 compared with 50% (13/26) of diagnoses in gay and bisexual men being made at a late stage.

Interpretation of this data for Northern Ireland is complicated by year to year small number variation.



Recent diagnoses

Figure 7: Number of new HIV diagnoses, RITA* tested and recent infections, 2020 Northern Ireland



*The Recent Infection Treatment Algorithm (RITA) allows classification of HIV diagnoses as recent or incident infections (acquired within the last six months). The data used in the algorithm includes CD4 count, anti-retroviral treatment and the diagnosis of an AIDS defining illness.



Prevalent infection

Table 3: People seen for HIV care in the UK living in Northern Ireland by gender and age: 2011 to 2020

Data to end	l of December 2020										
Gender		2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Men		445	508	591	634	732	787	858	893	913	970
Women		136	160	179	182	209	220	224	237	245	264
Total		581	668	770	816	941	1,007	1,082	1,130	1,158	1,234
Age and ge	nder ¹	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
	Boys	0	0	0	0	0	0	<5	<5	<5	<5
Under 15	Girls	0	0	0	<5	0	0	0	0	0	0
	Subtotal	0	0	0	<5	0	0	<5	<5	<5	<5
	Men	19	21	17	<20	18	25	<35	<25	<25	<20
15 - 24	Women	6	8	6	<5	5	6	<10	<10	<10	<5
	Subtotal	25	29	23	<25	23	31	<40	<30	<30	<25
	Men	110	118	124	126	152	158	162	157	147	149
25 - 34	Women	53	53	53	52	55	45	45	43	33	28
	Subtotal	163	171	177	178	207	203	207	200	180	177
	Men	220	245	281	286	323	334	365	374	370	384
35 - 49	Women	61	72	82	84	96	114	113	118	124	138
	Subtotal	281	317	363	370	419	448	478	492	494	522
	Men	83	110	149	179	209	239	264	292	317	350
50 - 64	Women	16	27	38	39	47	50	53	61	67	80
	Subtotal	99	137	187	218	256	289	317	353	384	430
	Men	13	14	20	<30	30	31	36	45	57	67
65 and over	Women	0	0	0	<5	6	5	7	10	15	14
	Subtotal	13	14	20	27	36	36	43	55	72	81

Notes: Figures may be different to those released previously due to improvements in the methods used to identify persons seen more than once within the survey year. This method has been applied to all survey years. Persons with missing fields (e.g. age group) may have been assigned values based on subsequent years data. Total includes individuals with incomplete/not reported demographic data.

1 Subtotals include individuals for whom gender was not reported, or for whom gender was reported in another way (e.g. non-binary or other).

Table 4: People seen for HIV care in the UK living in Northern Ireland by probable exposure route and ethnic group:2011-2020

Data to end of December 2020

Probable exposure category ²	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Sex between men	308	365	419	454	532	582	635	631	625	634
Heterosexual contact	257	282	323	330	372	383	396	376	370	388
Injecting drug use	<10	<10	<10	<10	<10	<10	<15	12	<10	<15
Mother to child	<5	<5	<5	<5	<5	<5	<5	5	<5	<5
Other/undetermined	10	14	20	22	28	30	36	106	150	197
Ethnic group	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
White	471	564	638	690	802	859	933	971	992	1,047
Black African	87	84	103	95	103	112	110	117	118	127
Black Caribbean	<5	<5	<5	<5	<5	<5	<5	<5	<5	<5
Black other	<5	<5	<5	<5	<5	<5	<10	5	5	<5
Asian	8	9	13	13	16	16	17	22	22	23
Other/mixed	10	7	11	13	15	15	16	9	9	27

Notes: Figures may be different to those released previously due to improvements in the methods used to identify persons seen more than once within the survey year. This method has been applied to all survey years. Persons with missing fields (e.g. ethnicity) may have been assigned values based on subsequent years data. Total includes individuals with incomplete/not reported demographic data. 2. Sex between men includes men who also reported injecting drug use.

HSC Public Health Agency

Prevalent infection

Figure 8: Annual number of People living with HIV resident in Northern Ireland accessing HIV-related care, by probable route of infection, 2011 – 2020



In 2020, 1,234 People living with HIV (PWHIV) resident in Northern Ireland (970 men and 264 women) accessed HIV related care compared with 1,158 in 2019. These figures reflect continuing new diagnoses, transfers of care into and out of Northern Ireland and the role of HAART in increasing survival rates.



Prevalence by LGD of residence

Table 5: Diagnosed HIV prevalence per 1,000 population aged 15-59 years, by LGD, 2020, Northern Ireland*

Rate per 1,000 population	Local Government District
0.00 – 0.49	Causeway Coast and Glens
0.50 – 0.99	Antrim and Newtownabbey
	Ards and North Down
	Armagh City, <u>Banbridge</u> and Craigavon
	Derry City and Strabane
	Fermanagh and <u>Qmagh</u>
	Lisburn and Castlereagh
	Mid and East Antrim
	Mid Ulster
	Newry, Mourne and Down
1.00 – 1.49	
1.50 – 1.99	Belfast
2.00 - 2.49	

Note: *Numbers may rise as further reports are received and more information is obtained on area of residence. This is more likely to affect recent years, particularly 2020. This may impact on interpretation of trends in more recent years.

Estimates of prevalence derived from the Survey of Prevalent Infection Diagnosed (SOPHID) show that Belfast Local Government District (LGD) area has the highest rate in Northern Ireland at 1.96/1,000 population aged 15-59 years. Belfast (LGD) area is close to reaching 2/1,000 population threshold at which expanded testing is recommended.

The overall prevalence for the Northern Ireland population is 0.97/1,000 population aged 15-59 years.



Progress towards UNAIDS target

In 2014, UNAIDS set a target that by 2020, 90% of all people living with HIV know their HIV status, 90% of all people with diagnosed HIV infection receive sustained antiretroviral therapy, and 90% of all people receiving antiretroviral therapy have viral suppression. This target has been updated to 95% for each objective by 2030. Modelling suggests that achieving these targets globally will enable the world to end the AIDS epidemic by 2030.

Undiagnosed infection

National estimates of the number of all people living with HIV in the UK, including those undiagnosed, are obtained from a statistical model (multi-parameter evidence synthesis (MPES)) fitted to census, surveillance and survey-type prevalence data. The estimate for 2020 equates to 94% of people living with HIV in Northern Ireland being aware of their infection.

Antiretroviral therapy and viral load

In 2020, 100% of those in care received ART, and 97% of those on treatment had viral suppression i.e.<= 200 copies/ml (where a viral load was reported).



HIV testing

Table 6: Number of HIV tests performed by healthcare setting, 2010 – 2020, Northern Ireland

												Change	etrom
Service setting	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2019-2	2020
GUM	14,583	15,639	16,725	15,912	17,887	17,022	16,277	18,100	18,847	17,795	6,426	-11,369	-64%
Hospital	8,542	8,628	10,882	11,114	13,253	14,942	15,374	18,517	20,658	23,558	18,549	- 5,009	-21%
Primary Care	1,832	2,272	2,786	2,783	3,433	4,093	4,244	4,803	4,095	4,239	2,752	- 1,487	-35%
Other	701	927	783	741	611	738	643	614	642	625	327	- 298	-48%
Total	25,658	27,466	31,176	30,550	35,184	36,795	36,538	42,034	44,242	46,217	28,054	-18163	-39%

(excludes antenatal screening programme)

Source: Regional Virology Laboratory

- During 2020, 28,054 HIV tests were performed outside the antenatal screening programme in a health service setting in Northern Ireland. This represents a decrease of 39% compared with 2019 (46,217). Each service setting decreased during 2020 with the GUM setting seeing the largest decrease of 64% compared with 2019.
- HIV testing decreased significantly after lock down restrictions were imposed on 23rd March 2020 (Figure 11).
- The majority of testing is carried out in hospital or GUM setting, accounting for 89% of all tests during 2019 and 2020.



Figure 9: Number of HIV tests performed, 2010- 2020, Northern Ireland



During 2020, 65,906 HIV tests were performed in Northern Ireland. This represents a decrease of 6% compared with 2019 (70,393).

SH:24 online HIV tests accounted for 24% of overall testing during 2020 in Northern Ireland and this service played a significant role during the COVID-19 pandemic when lockdown restrictions were imposed.

Figure 10: Annual number of HIV tests performed, by healthcare setting, 2000-2020, Northern Ireland (excludes antenatal screening programme)





Figure 11: Number of HIV tests performed, by Regional Virus Laboratory, 2020, Northern Ireland (excludes antenatal screening programme)



Table 7: Number of primary care HIV tests performed in prisons, 2014 – 2020, Northern Ireland

Service setting	2014	2015	2016	2017	2018	2019	2020
Primary care (total HIV tests)	3,433	4,093	4,244	4,803	4,095	4,239	2,752
Primary care tests performed in prisons	176	273	418	411	435	403	478
Proportion (%) of primary care tests performed in prisons	5%	7%	10%	9%	11%	10%	17%

Source: Regional Virology Laboratory

• Of the 2,752 HIV tests performed in primary care during 2020, 478 were carried out in prisons (Table 7). The proportion of primary care tests performed in prisons has increased from 5% in 2014 to 17% in 2020.







Figure 12: Annual number of HIV screens carried out in GUM clinics, 2007 – 2020, Northern Ireland

Source: GUMCAD - HIV tests KC60/SHHAPT codes S2, P1A, T4 & T7

During 2020, the number of first episode HIV screens in females and heterosexual males decreased by 71% and 69% in gay and bisexual men (Figure 12).



SH:24 online HIV testing

During 2020, 15,591 SH:24 online HIV tests were performed in Northern Ireland. People aged between 20-29 years of age accounted for 59% of tests.





SH:24 online testing increased significantly after lockdown measures were imposed in Northern Ireland on 23rd March 2020, with the highest number of HIV tests performed in August 2020.

Notes: * Number of tests is based on the number of tests returned

SH:24 online testing is a capped system and therefore does not reflect demand and is limited by capacity. The decrease in testing during September 2020 was due to a funding issue. For further information on SH:24 testing: https://sh24.org.uk/about-sh24

PrEP

HIV pre-exposure prophylaxis (PrEP) is the use of antiretroviral drugs to protect individuals at risk of acquiring HIV. It is prescribed as either a daily dosing or event based (on-demand) regime. Both methods have been shown to be very effective at preventing HIV acquisition, with studies in men who have sex with men estimating a reduction in the risk of HIV acquisition by as much as 86%, with between 13 and 18 needing to be treated in a year to prevent one infection.

- During 2021-22 the provision of PrEP clinics in each Trust area was supported through the use of non-recurrent monies.
- The objective of the five Trust pilot was to determine if this regional approach, combining the establishment of PrEP clinics, supported by an STI online testing service, was effective in reducing the incidence of new cases of HIV and other STIs such as gonorrhoea, syphilis and chlamydia.
- Both PrEP and SH24 online STI testing services have been accepted as innovative and ground breaking schemes, well tested, highly praised, cost effective, patient centred and COVID-19 sensitive. With regards to the SH:24 online STI service the necessary staff were in post and the service was able to continue seamlessly and without any break in provision despite lockdown and the restrictions of COVID-19.
- Initially PrEP clinics had to be stood down as many staff were redeployed to other COVID-19 sensitive work. Clinics began to be reinstated in May/June 2021 but physical capacity was hindered by the need for social distancing and therefore the number of patients that could be seen on a daily basis was reduced. Trusts had to put into place additional evening clinics and "booster weekend clinics" to cope with demand.



Cluster of HIV in people who inject drugs

During 2020, a cluster of hepatitis C infection was identified in PWID in Belfast. Further testing identified a new cluster of HIV infection in the same group. Key risk factors are injection of heroin and cocaine. The injection of cocaine is a new trend.

A lookback exercise identified 5 confirmed cases linked to the cluster, between 1st January 2017 and 31st December 2020. Young adult males and females are affected, mostly 20-29 years of age.

The majority of cases were diagnosed within a year of their last negative test.

All of the cases had a hepatitis C co-infection (4 active infections and 1 previous infection).

The cluster is being managed by a multi-agency outbreak control team, and there is an overarching PHA and HSCB joint action plan to tackle the cluster.



Summary and conclusions

- The number of people living with HIV in Northern Ireland has increased in recent years as a consequence of new diagnoses, transfers of care into Northern Ireland, and improved survival rates due to the success of antiretroviral treatment.
- Overall there has been a decline in the annual number of diagnoses in people born in the UK.
- The number of new diagnoses in 2020 decreased slightly compared to 2019. This is the third consecutive year new diagnoses decreased, however, it is important to note that there was a 6% reduction in HIV testing during 2020.
- There was a shift to online testing, with SH:24 accounting for almost one quarter of all tests done, and a 39% reduction in tests done in GUM clinics.



Summary and conclusions

- Since 2014 there has been an overall decline in new HIV diagnoses in both heterosexual and gay and bisexual men. This may reflect the impact of PrEP, which was introduced in Northern Ireland in July 2018. Improvements in testing, earlier diagnosis, and entry into treatment may also be reflected.
- During 2020 there was an increase in new HIV diagnoses in people who inject drugs (PWID), and a cluster identified on next generation sequencing. This is the first time that a cluster of HIV has been identified in PWID in Northern Ireland.



Summary and conclusions

- The UNAIDS 90: 90: 90 HIV elimination targets have now been surpassed. In relation to the UNAIDS 95:95:95 HIV elimination strategy by 2030, the targets for treatment and viral suppression have been met, but there is work to do to meet the target of 95% of people living with HIV being aware of their diagnosis.
- During 2020 there was an increase in the proportion of new diagnoses made at a late stage.



Recommendations

- Safer sex messages including the benefits of HIV testing should continue to be promoted to the general population, young people and gay and bisexual men.
- Frequent repeat HIV testing should be advised to those most at risk.
- There should be a renewed focus on the promotion of HIV testing guidelines in both primary and secondary care.
- Service commissioners should continue to ensure HIV testing outside health service settings, including use of online services.



Recommendations

- Concerted efforts are required to prevent HIV infection becoming endemic in people who inject drugs in Northern Ireland.
- The high proportion of late diagnoses needs to be addressed.





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