Epidemiology of HIV in the Baltic countries

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The first HIV case in countries was reported in 1987 and 1988 and has started in the MSM community.
New HIV infection cases diagnosed in

- Estonia
- Latvia
- Lithuania
New HIV infection cases diagnosed in

- Estonia
- Latvia
- Lithuania

The highest increase of HIV cases in PWID

Outbreak in Alytus prison

The highest increase of HIV cases in PWID

In some regions of EE more than every second drug user is HIV+
<table>
<thead>
<tr>
<th>Year</th>
<th>Estonia</th>
<th>Latvia</th>
<th>Lithuania</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>28.2</td>
<td>24.6</td>
<td>4.8</td>
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<tr>
<td>2011</td>
<td>27.5</td>
<td>23.8</td>
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</tr>
<tr>
<td>2012</td>
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<tr>
<td>2013</td>
<td>23.8</td>
<td>20.6</td>
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<td>2014</td>
<td>22.1</td>
<td>17.4</td>
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<tr>
<td>2015</td>
<td>20.6</td>
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<tr>
<td>2016</td>
<td>19.0</td>
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<tr>
<td>2017</td>
<td>18.7</td>
<td>17.3</td>
<td>5.4</td>
</tr>
</tbody>
</table>

HIV Incidence in Baltic Countries in 2010-2017 (cases per 100 000 pop.)
Estonia, Latvia and Lithuania

Estimated number of PLWHIV in 2016,

- Estonia: 7900
- Latvia: 6600
- Lithuania: 2900
Estonia, Latvia and Lithuania

Estimated number of PLWHIV in 2016, diagnosed end 2017

<table>
<thead>
<tr>
<th></th>
<th>Estonia</th>
<th>Latvia</th>
<th>Lithuania</th>
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<tbody>
<tr>
<td>Estim living</td>
<td>7900</td>
<td>6600</td>
<td>2900</td>
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<tr>
<td>Diagnosed</td>
<td>9711</td>
<td>7343</td>
<td>3012</td>
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</table>
Estonia, Latvia and Lithuania


The highest HIV incidence in EU
Estonia, Latvia and Lithuania


<table>
<thead>
<tr>
<th></th>
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<th>Latvia</th>
<th>Lithuania</th>
<th>EU average</th>
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<td>Estimated living</td>
<td>7900</td>
<td>6600</td>
<td>2900</td>
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<tr>
<td>Diagnosed</td>
<td>9711</td>
<td></td>
<td>7343</td>
<td></td>
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<tr>
<td>HIV incidence</td>
<td>17.4</td>
<td></td>
<td>18.5</td>
<td>5.9</td>
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<tr>
<td>AIDS incidence</td>
<td>3.1</td>
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<td>5.8</td>
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</tbody>
</table>
New HIV cases according to way of transmission (%), 1988 – 2017

in Estonia

in Latvia

in Lithuania

Start of targeted **primary prevention** activities among high risk groups (including HR for IDUS) and **positive prevention** in Lithuania.
New HIV cases according to way of transmission in Estonia, Latvia and Lithuania in 2010 – 2017 (%)
“...why HIV prevalence in 2013 was 3.8 times lower than in Latvia and 8.7 times lower than in Estonia...?”
V. Saldahana, UNAIDS

“...you have become a hostage of yours success...”
New and cumulative HIV cases diagnosed in Lithuania

Incidence rate increased 1.5 times

Source: ULAC (Centre for Communicable Diseases and AIDS)
HIV in Prison setting in Lithuania, 2013-2017

One incarceration at least 43% of HIV+
Every year, 92-95% of imprisoned population receive preventive examination for infectious diseases. **Testing for HIV:**

**HIV testing rate among prisoners in WHO Europe region, 2016**

- Kazakhstan 77.7%
- Bulgaria 59.17%
- UK 59%
- Armenia 49.7%
- Georgia 44.9%
- Kyrgyzstan 41.2%
- Ukraine 40.3%
- Latvia 26%
- Serbia 21.4%
- Montenegro 13.9%
- Moldova 7.6%
- Kosovo 7%
- Slovenia 4.7%
- Hungary 2.5%

Source:
**Time to diagnosis by year of infection**

- Will be diagnosed after 2 years

**Time to diagnosis by year of diagnosis**

- Time of infection of those diagnosed in the calendar year - 3 years ago

Source: UIAC
Fast Track Targets by 2020

Target 1: 90% of all living with HIV DIAGNOSED
Target 2: 90% of all diagnosed with HIV ON ART
Target 3: 90% of all on ART VIRALLY SUPPRESSED

Overall target: 73% of all people living with HIV VIRALLY SUPPRESSED
Progress toward achieving the 1st 90:
90% of all PLHIV who know their status (n=39)

Source: ECDC. Dublin Declaration monitoring 2018; validated unpublished data.
The high proportion of people who have been diagnosed but who are not on treatment reflect health system resource challenges and social and cultural factors.
HIV epidemic in Baltic countries started about the same time in the MSM community (in 1987 and 1988) but afterwards has developed rapidly among PWID and
- prevalence in the general population
  end 2017 the highest HIV prevalence vas in EE (737), followed by LV (378) and least (106) in LT.
- and prevalence in the high risk groups is different
  in some regions of EE more than every second drug user is HIV+.

Conclusions:
Conclusions:

- The epidemiology of HIV has changed substantially during the past decade - the heterosexual transmission has been increasing, but is more prevalent in LV and EE compared to LT - the spread of HIV through bridging groups to the general population in EE and LV started earlier than in LT.
- The recently started epidemic in LT compared to LV and EE also prove:
  - Least number of MTCT
  - Least number of AIDS cases
  - HIV prevalence in HR groups and other data
Conclusions:

- In 2016 the highest HIV incidence (cases per 100,000 pop.) in EU/EEA was observed in LV (18.5) and in EE (17.4).
  - In LT -7.5 (exceeded EU/EEA incidence average - EE 5.7).

- Although LT has the lowest HIV incidence, it has been increasing for the third year in a row due to HIV transmission among PWID, especially in prisons.
Conclusions:

- The example of the Baltic countries shows that if there is no adequate and timely response to the problem of drug addiction (especially in prison settings) the HIV situation can change very quickly.

- It is natural that after having reached its peak, HIV incidence starts declining
  - however, since far more people have sex (including MSM) than inject drugs, even if sexual transmission is less infectious, then if not properly managed, this may eventually lead to a high number of new infections.
Acknowledgement

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Sarlote Konova, Centre for Disease Prevention and Control of Latvia

Never confuse kindness as a sign of weakness:
https://twitter.com/ValaAfshar/status/1050074329931804672

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