

Epideminin Hızlanmasının Nedenleri Olgu Sayısı Neden Artıyor? Tanı Almayan Hastaya Nasıl Ulaşıyoruz?

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Ege Üniversitesi Tıp Fakültesi
Enfeksiyon Hastalıkları ve Klinik Mikrobiyoloji AD
Bornova İzmir

Dünyada HIV : 2000 - 2015

2000'den bu yana yeni HIV enfeksiyonları

↓ %35

2000'den bu yana AIDS ile ilişkili ölümler

↓ %27

2000'den bu yana çocuklarda HIV enfeksiyonları

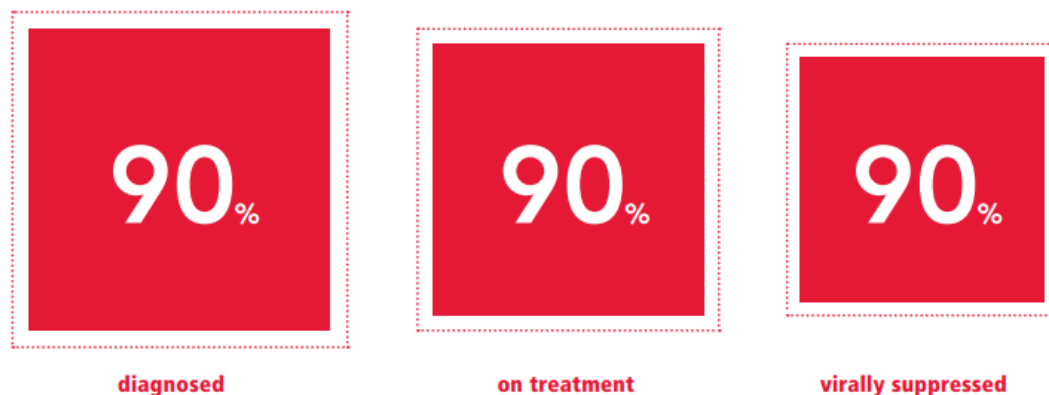
↓ %70

2010'dan bu yana ART kapsayıcılığı

↑ %43

1. UNAIDS. AIDS by the numbers 2016. Available at:
http://www.unaids.org/sites/default/files/media_asset/AIDS-by-the-numbers-2016_en.pdf [Erişim Ağustos 2017].

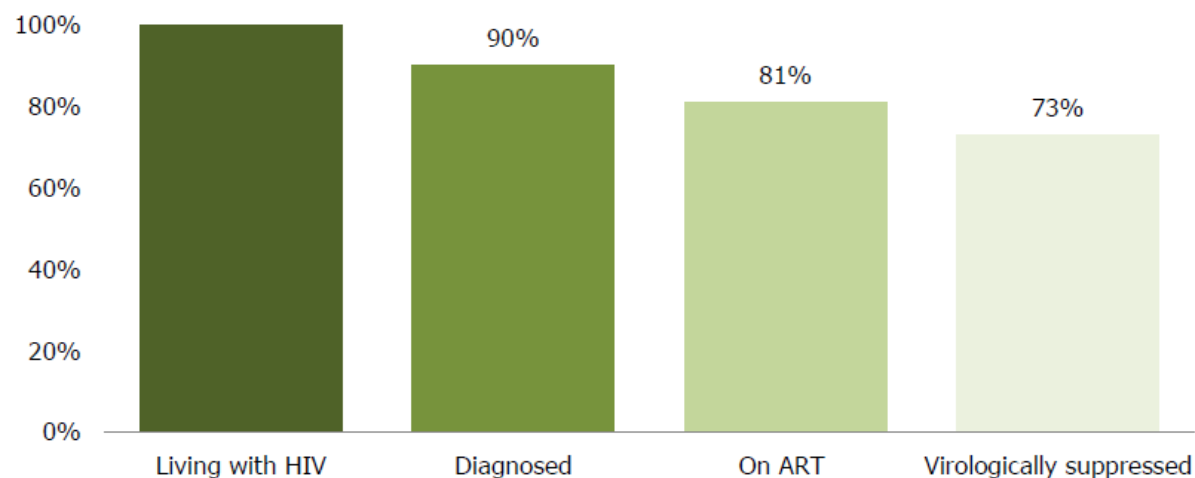
THE TREATMENT TARGET



SPECIAL REPORT

Dublin Declaration 2014 progress report – HIV continuum of care

Figure 3. Pictorial depiction of 90–90–90 targets



Fast-Track Targets

.....

By 2020

Fewer than
500 000
new infections

Fewer than
500 000
AIDS-related deaths

ZERO
discrimination

By 2030

Fewer than
200 000
new infections

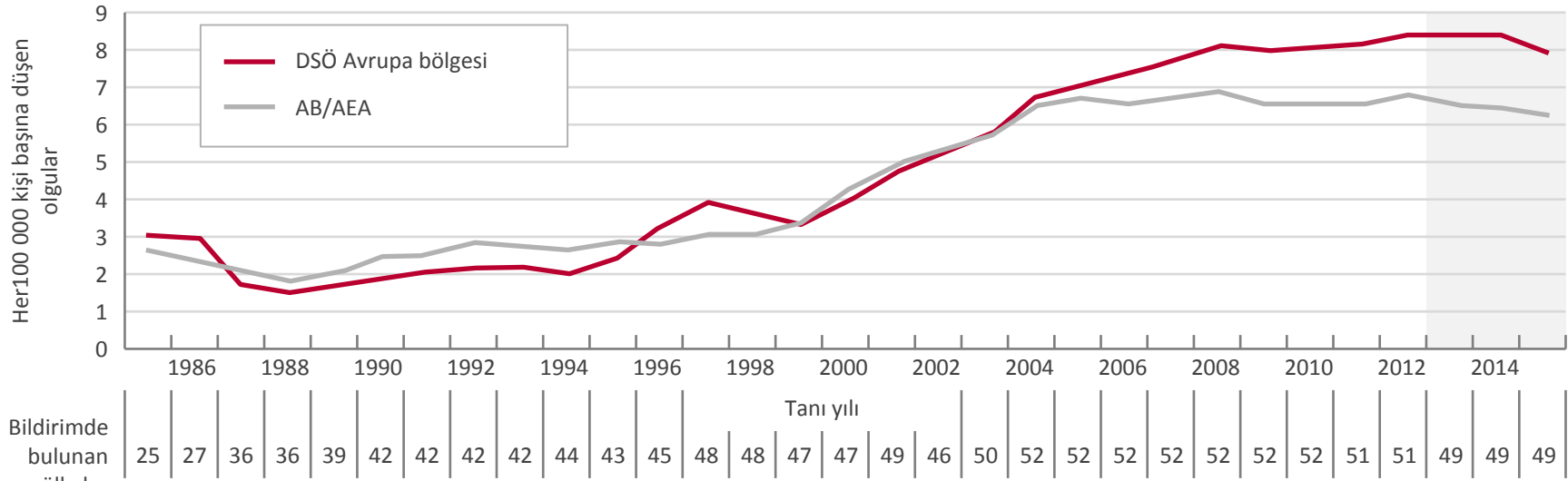
Fewer than
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ZERO
discrimination

1. AIDS by the Numbers 2016 Available at:
http://www.unaids.org/sites/default/files/media_asset/AIDS-by-the-numbers-2016_en.pdf (Erişim Ekim 2017)

AB/AEA ve DSÖ Avrupa bölgesinde yeni HIV tanıları* (1985–2015)

AB/AEA ve DSÖ Avrupa bölgesinde* yıllara göre (ve raporlamadaki gecikmelere göre uyarlanmış) her 100 000 kişi başına düşen yeni HIV tanıları, 1985-2015



Yeni HIV tanıları*

153,407

Birikimli HIV tanıları*

2,003,674

DSÖ Avrupa bölgesinden *50/53 ülke; Bosna ve Hersek, Türkmenistan, Özbekistan hariç.

1. European Centre for Disease Prevention and Control. HIV/AIDS surveillance in Europe 2015. Available at: <http://ecdc.europa.eu/en/publications/Publications/HIV-AIDS-surveillance-Europe-2015.pdf> [Erişim Ağustos 2017].

DSÖ Avrupa bölgesinde yeni HIV enfeksiyonları (2015)

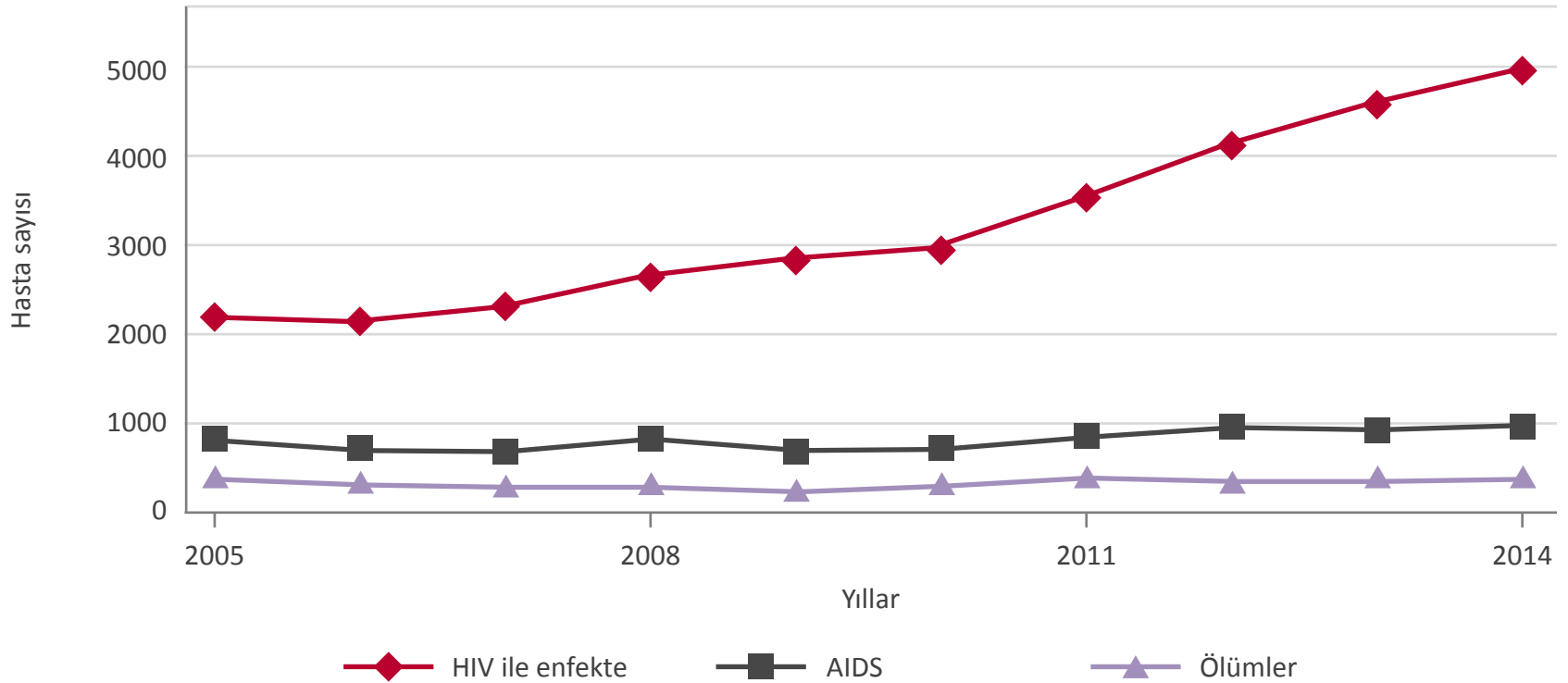
	Her 100,000 kişi için HIV tanıları	Yeni tanı almış Avrupalı hastaların yüzdesi**	2006-2015 arasında yeni HIV tanılarındaki görece artış
DSÖ Avrupa bölgesi (Rusya hariç)*	7,6	-	
DSÖ Avrupa bölgesi (Rusya dahil)*	17,6	-	%59 ↑
Doğu Avrupa	47,5	%79	%23 ↑
Batı Avrupa	6,3	%18	-%20 ↓
Orta Avrupa	2,8	%3	%133 ↑

* Bosna ve Hersek, Türkmenistan ve Özbekistan verleri dahil değil.

1. European Centre for Disease Prevention and Control. HIV/AIDS surveillance in Europe 2015. Available at: <http://ecdc.europa.eu/en/publications/Publications/HIV-AIDS-surveillance-Europe-2015.pdf> [Erişim Ağustos 2017].

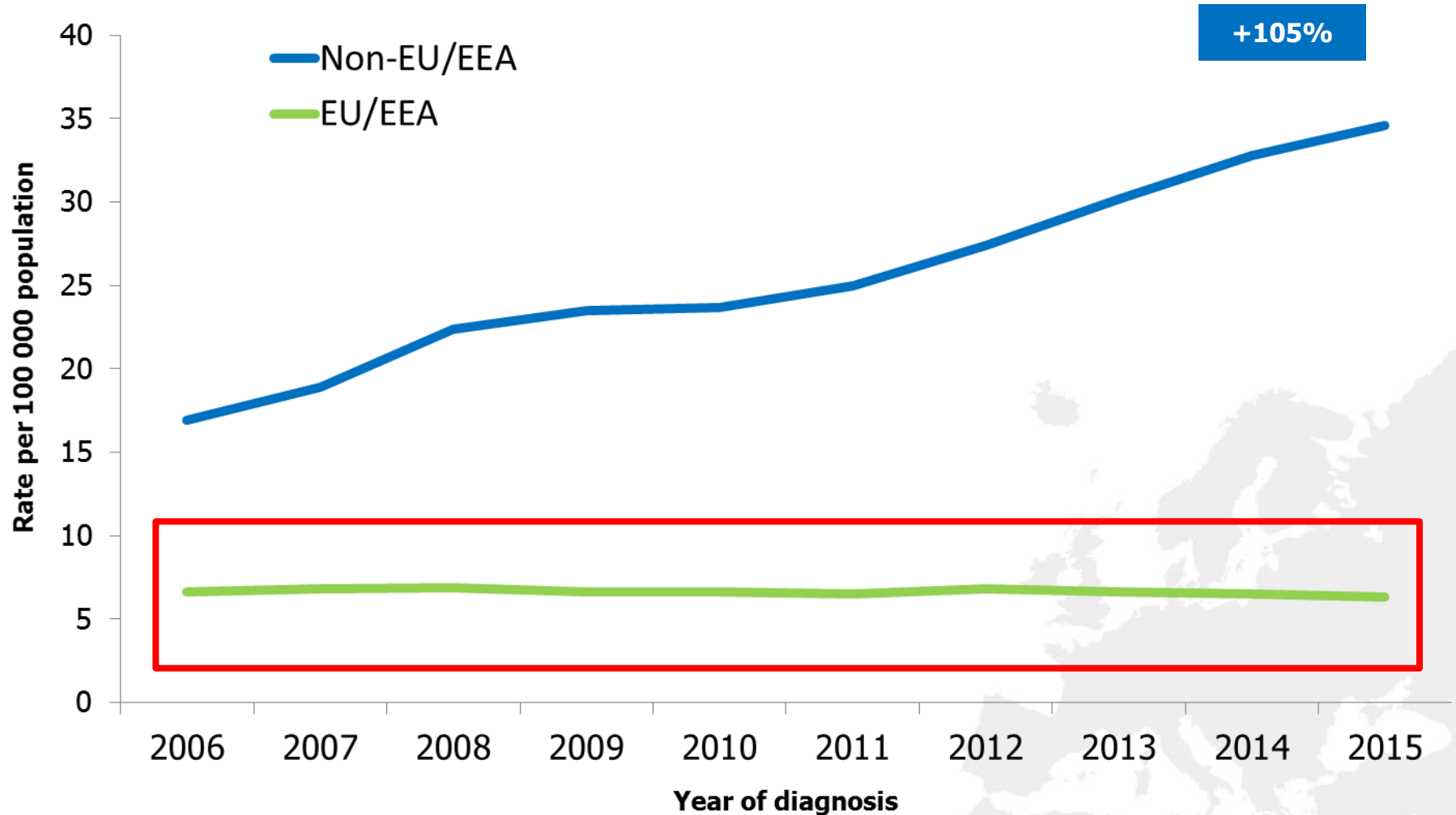
Orta Avrupa'da HIV enfeksiyonu, AIDS ve mortalitenin yönelimi (2005–2014)

DSÖ Orta Avrupa bölgesinde 2005-2014 arasında her takvim yılında yeni tanı alan HIV/AIDS olgularının ve ölümlerin toplam sayısı (ECDC verileri)



Yeni HIV tanılarının oranı

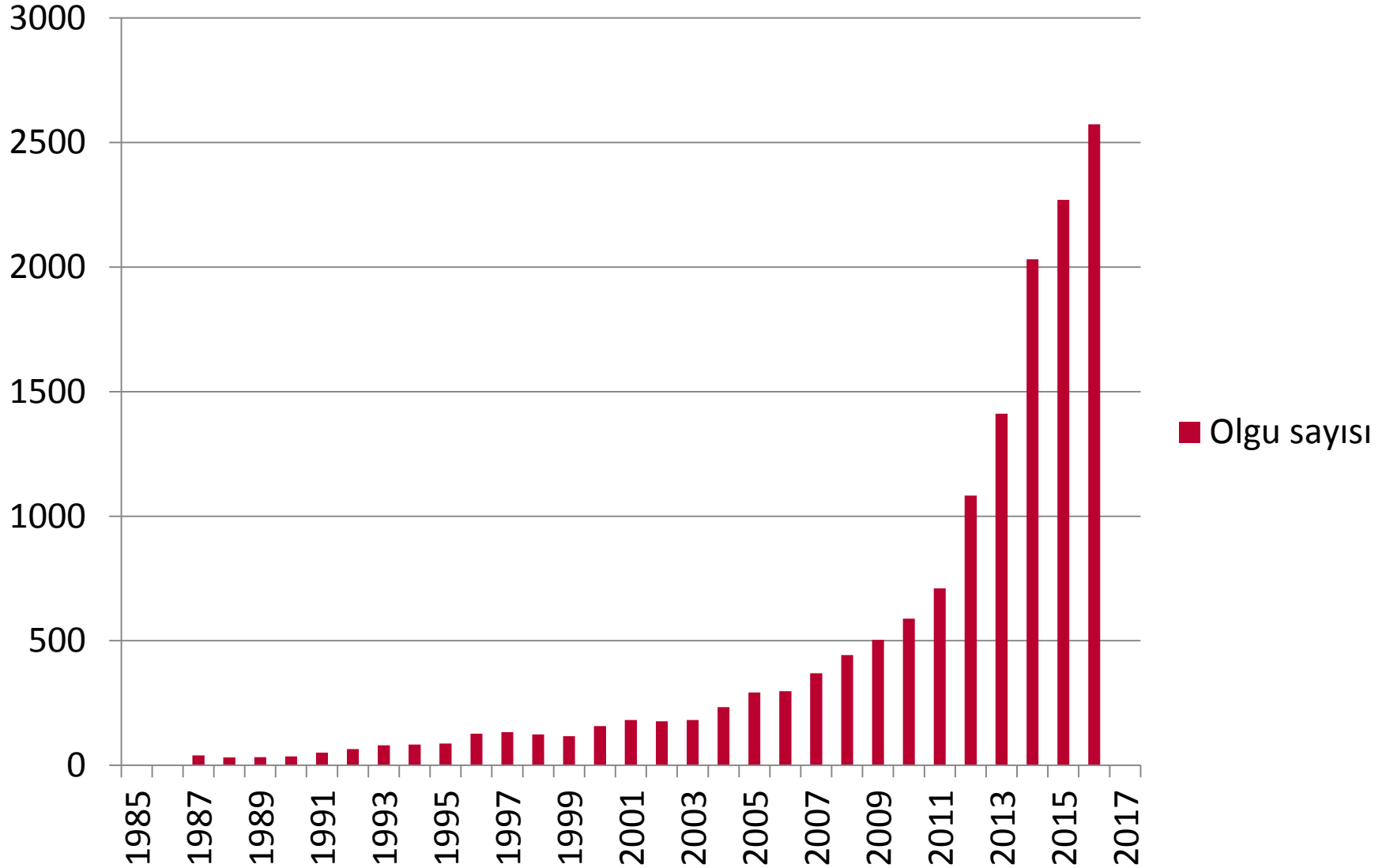
AB/AEA ve AB/AEA dışı ülkeler, 2006–2015



TÜRKİYE’DE HIV/AIDS VAKALARININ YILLARA GÖRE DAĞILIMI

Ekim 1985 – Aralık 2016 s:14 695

(2013: 1411 / 2014:2031 / 2015: 2270 / 2016: 2573)

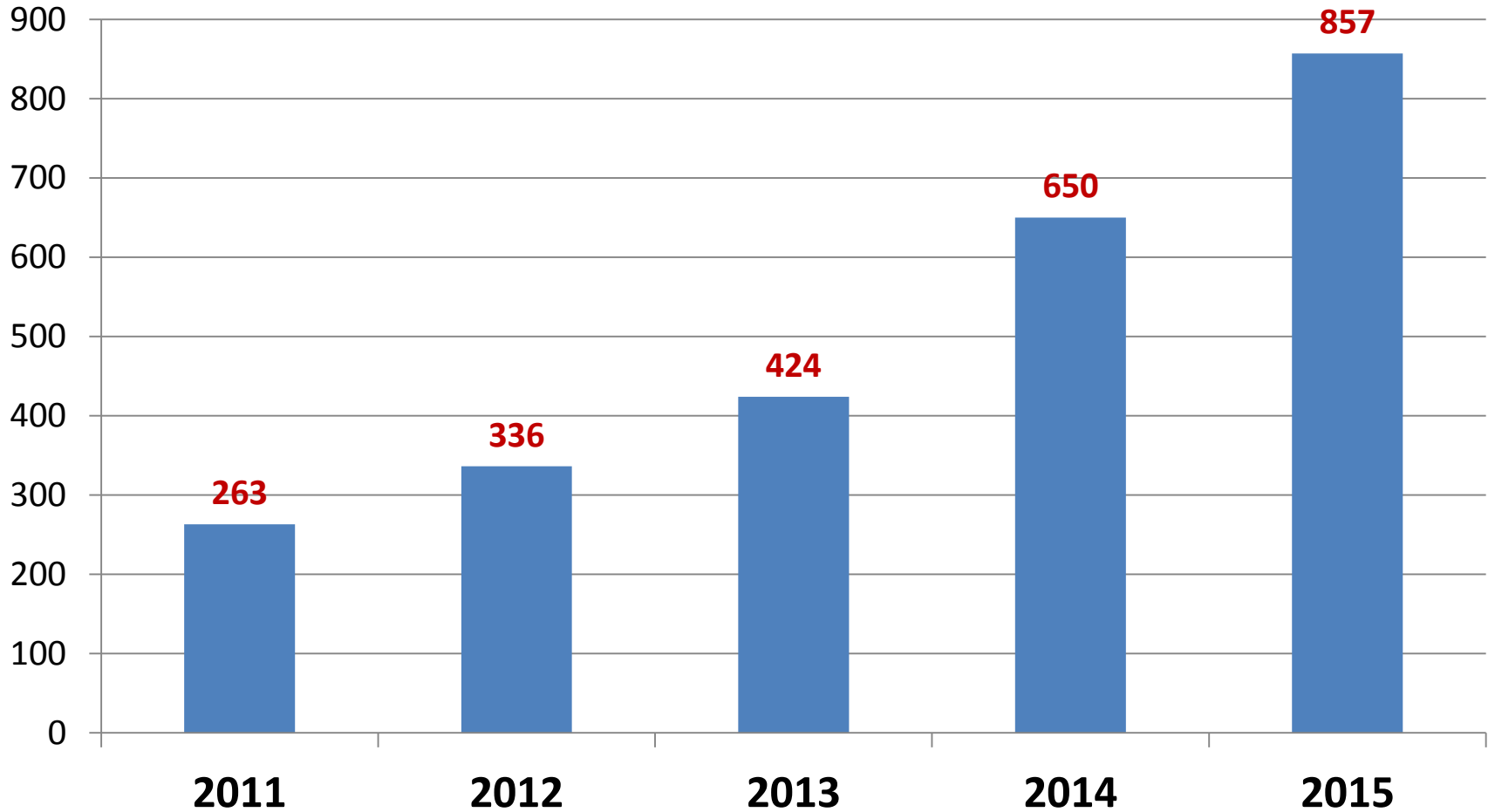


- **Dokuzoğuz B et al.** Transmission route and reasons for HIV testing among recently diagnosed HIV patients in HIV-TR cohort, 2011–2012. J Int AIDS Society 2014, 17(Suppl 3):19595
- **Korten V et al.** Outcomes of initial antiretroviral treatment (ART) among recently diagnosed HIV patients in HIV-TR cohort, 2011–2012. J Int AIDS Society 2014, 17(Suppl 3):19678
- **Erdinç FŞ et al.** Changing trends in the epidemiology of HIV in Turkey. 30thIUSTI-Europe Congress (15-17 Eylül 2016; Budapeşte, Macaristan)
- **Sargın F, Göktaş Ş.** HIV prevalence among men who have sex with men in Istanbul. Int J Infect Dis 2017; 54:58-61.
- **Gökengin D et al.** HIV Care in Central and Eastern Europe (yayınlanmamış veri)
- Türkiye’de HIV Epidemisinin Değerlendirilmesi (AIDS ve CYBH Derneği projesi-halen devam ediyor)

Türkiye’de HIV enfeksiyonunun epidemiyolojisindeki değişim (2011-2015)

Ulaşılan Merkez Sayısı	49
Katılan Merkez Sayısı	33
İl Sayısı	17
5 Yıllık Tam Veri Paylaşan Merkez Sayısı	16
Toplam Hasta Sayısı	2530

Yeni tanı hasta sayıları



*Erdoğan FŞ ve ark. 30. IUSTI Avrupa Kongresi 2016; Budapeşte, Macaristan

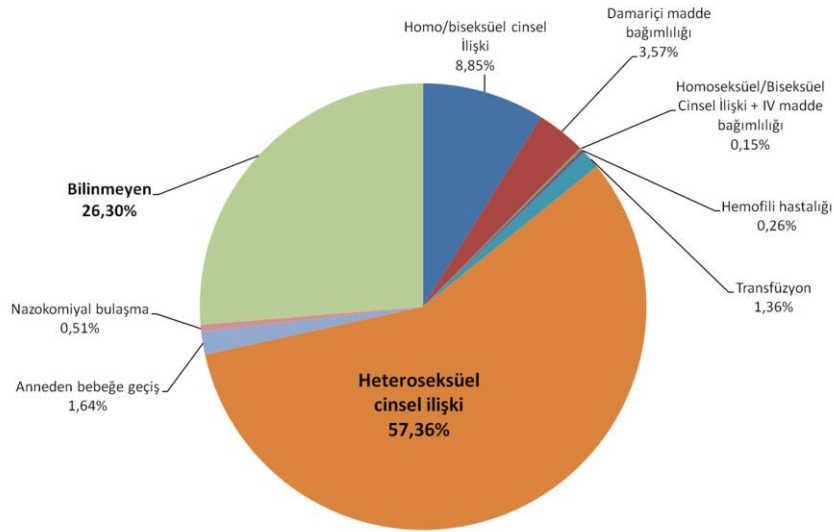
Transmission route and reasons for HIV testing among recently diagnosed HIV patients in HIV-TR cohort, 2011–2012

Dokuzoguz, Basak¹; Korten, Volkan²; Gökengin, Deniz³; Fincanci, Muzaffer⁴; Yildirmak, Taner⁵; Nuray Kes, Uzun⁶; Tasdelen Fisgin, Nuriye⁷; Inan, Dilara⁸; Eraksoy, Haluk⁹ and Akalin, Halis¹⁰

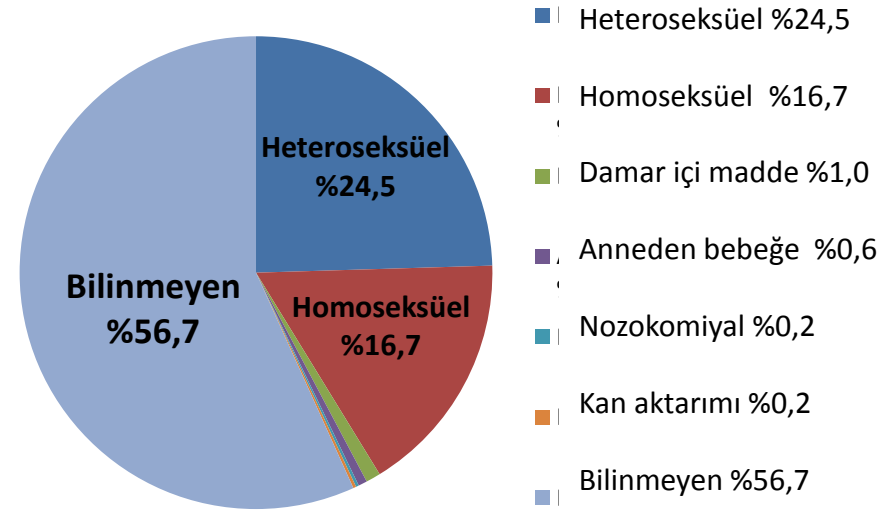
¹Infectious Diseases and Clinical Microbiology, Ankara Numune Education Training and Research Hospital, Ankara, Turkey. ²Infectious Diseases, Marmara University Hospital, Istanbul, Turkey. ³Infectious Diseases, Ege University Hospital, Izmir, Turkey. ⁴Infectious Diseases, Istanbul Education and Research Hospital, Istanbul, Turkey. ⁵Infectious Diseases, Okmeydanı Education and Research Hospital, Istanbul, Turkey. ⁶Infectious Diseases, Dışiçi Education and Research Hospital, Istanbul, Turkey. ⁷Infectious Diseases, 19 Mayıs University Hospital, Samsun, Turkey. ⁸Infectious Diseases, Akdeniz University Hospital, Antalya, Turkey. ⁹Infectious Diseases, Istanbul Medical School, Istanbul University, Istanbul, Turkey. ¹⁰Infectious Diseases, Uludağ University Hospital, Bursa, Turkey.

- 24 merkezden 693 hasta (561 E, 132 K)
- Bulaşma yolları
 - Heteroseksüel (%62,7)
 - Erkekle seks yapan erkek (%22,6)
- Geç başvuru %52,4
- İleri düzeyde hastalıkla başvuru %30,6

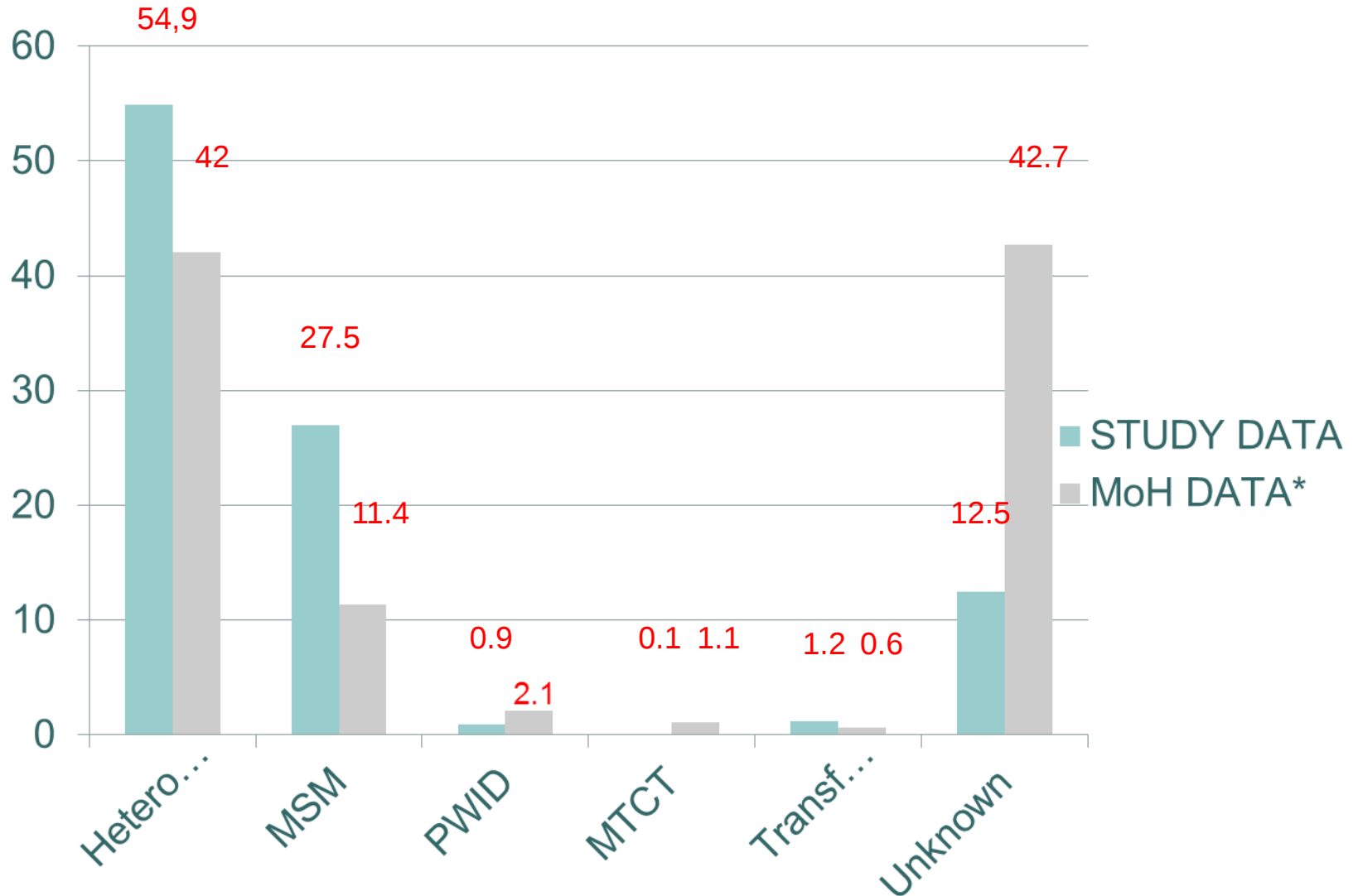
THSK 2009 verileri



THSK 2015 verileri



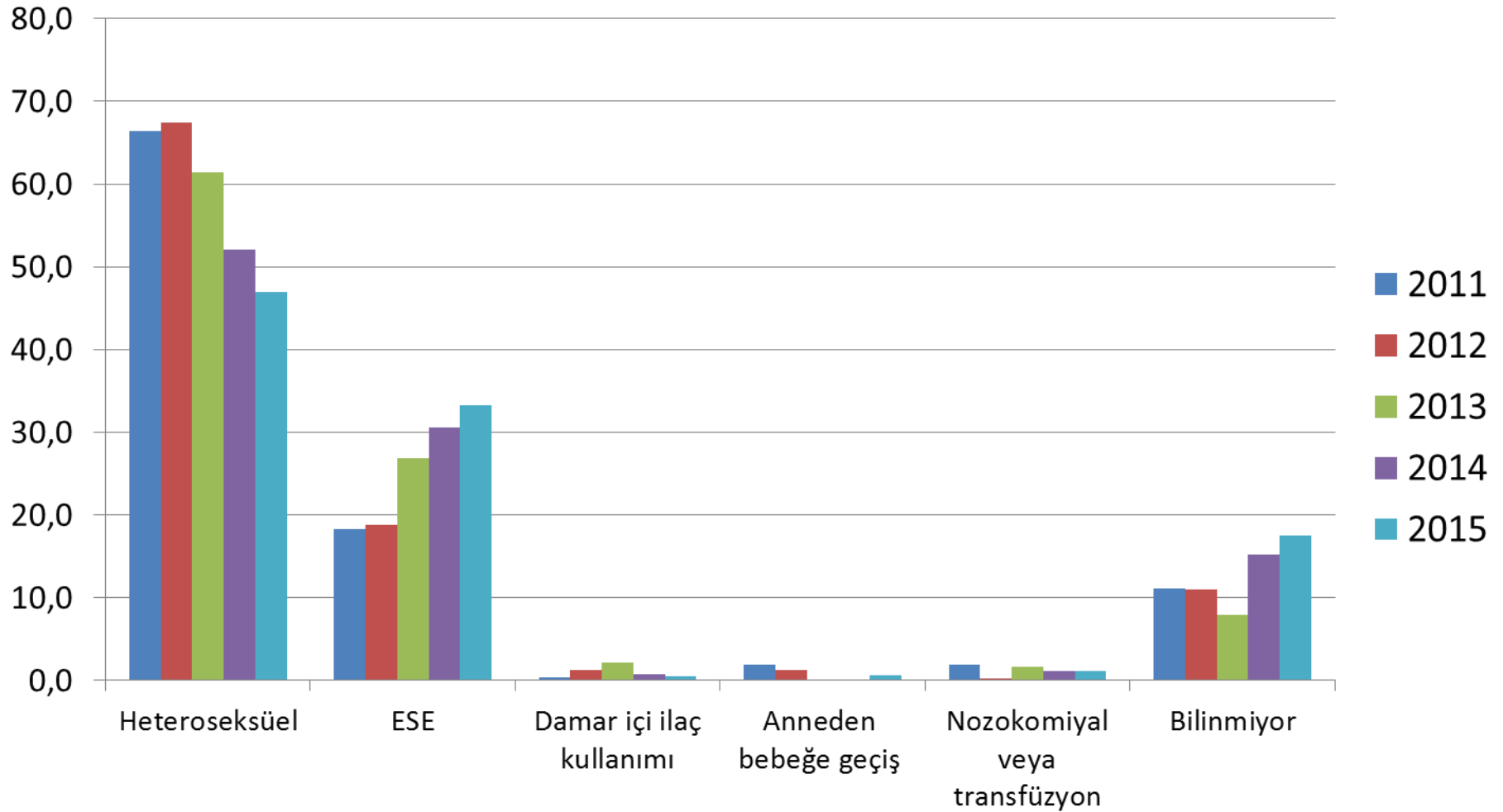
Bulaşma yolları-Resmi verilerle karşılaştırma



*Erdoğan FŞ ve ark. 30. IUSTI Avrupa Kongresi 2016; Budapeşte, Macaristan

*TC Sağlık Bakanlığı THSK verileri

Bulaş yollarının yıllar içindeki dağılımı



*Erdinç FŞ ve ark. 30. IUSTI Avrupa Kongresi 2016; Budapeşte, Macaristan

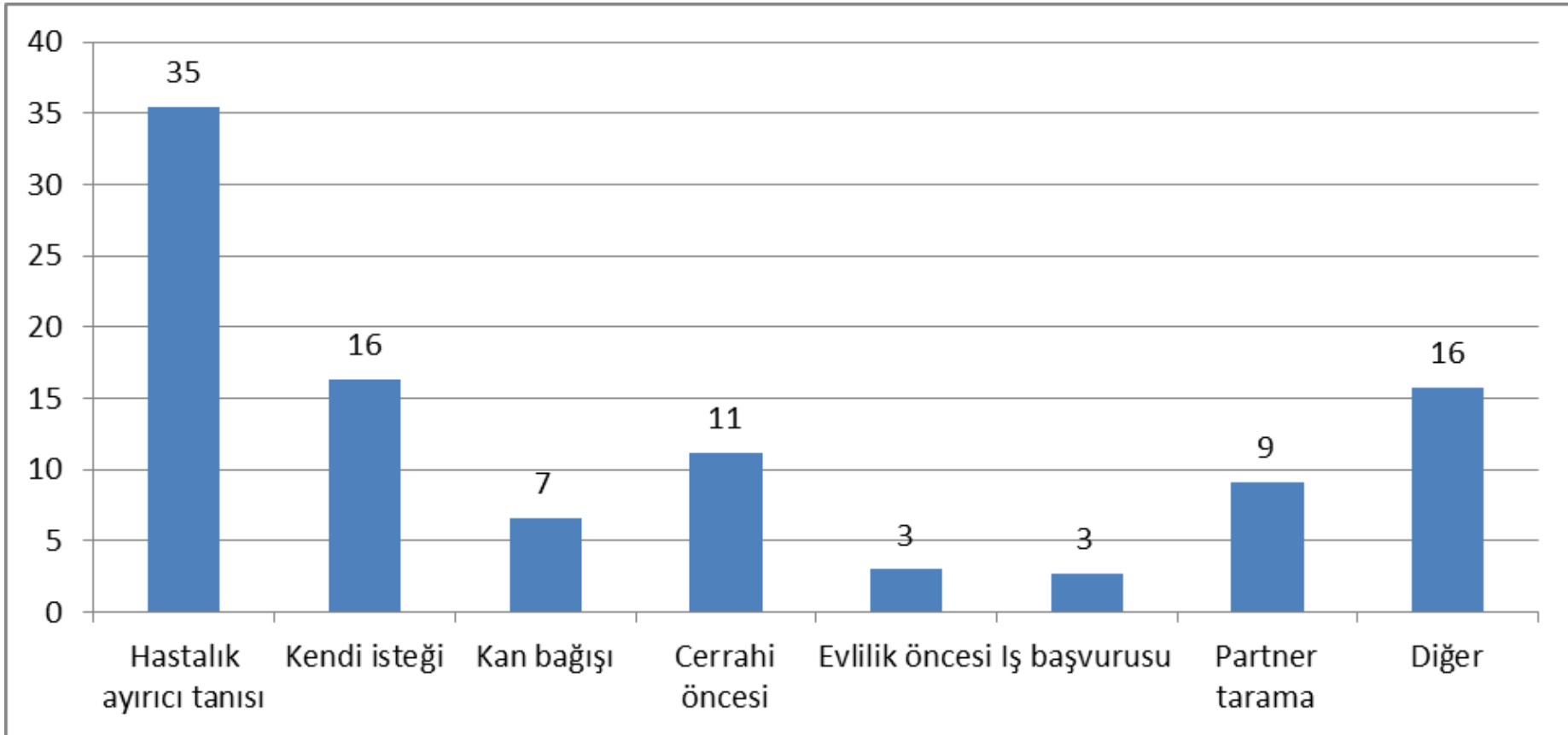
Test yaptırma nedenleri

Table 1. Reasons for HIV testing

Reason for testing	N	%
Blood/organ donation	63	9.8
Prior to surgical/parenteral intervention	63	9.8
Premarital testing	20	3.1
Screening for pregnancy	11	1.7
Patient-initiated	98	15.3
Diagnostic workout for other medical condition/illness	312	48.8
Job application	8	1.3
Other	65	10.2
Total	640	100

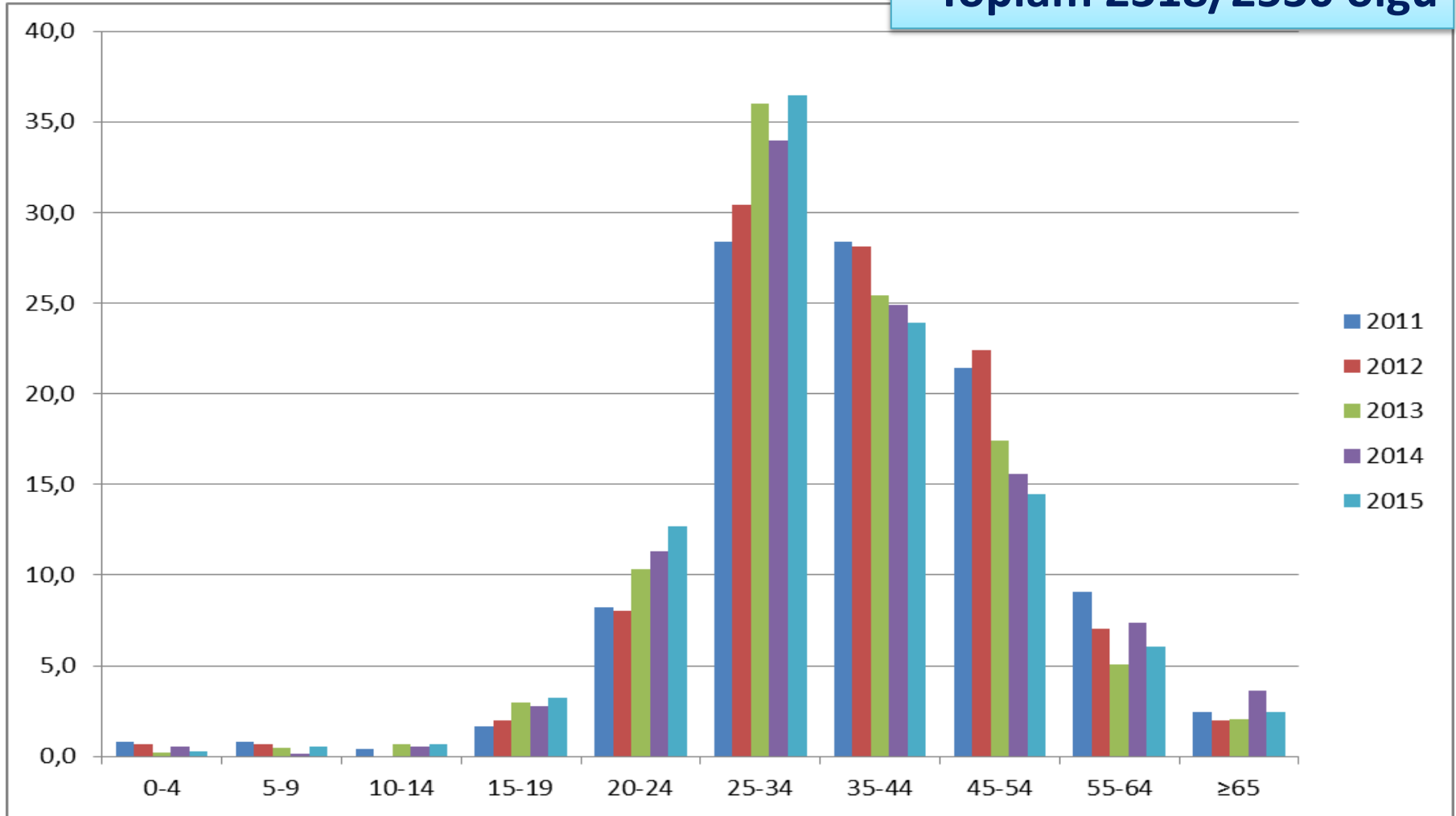
Test nedenleri

Beş yıllık genel: 2269/2530 Olgu



Yıllar içinde yaş dağılımları

Toplam 2318/2530 olgu



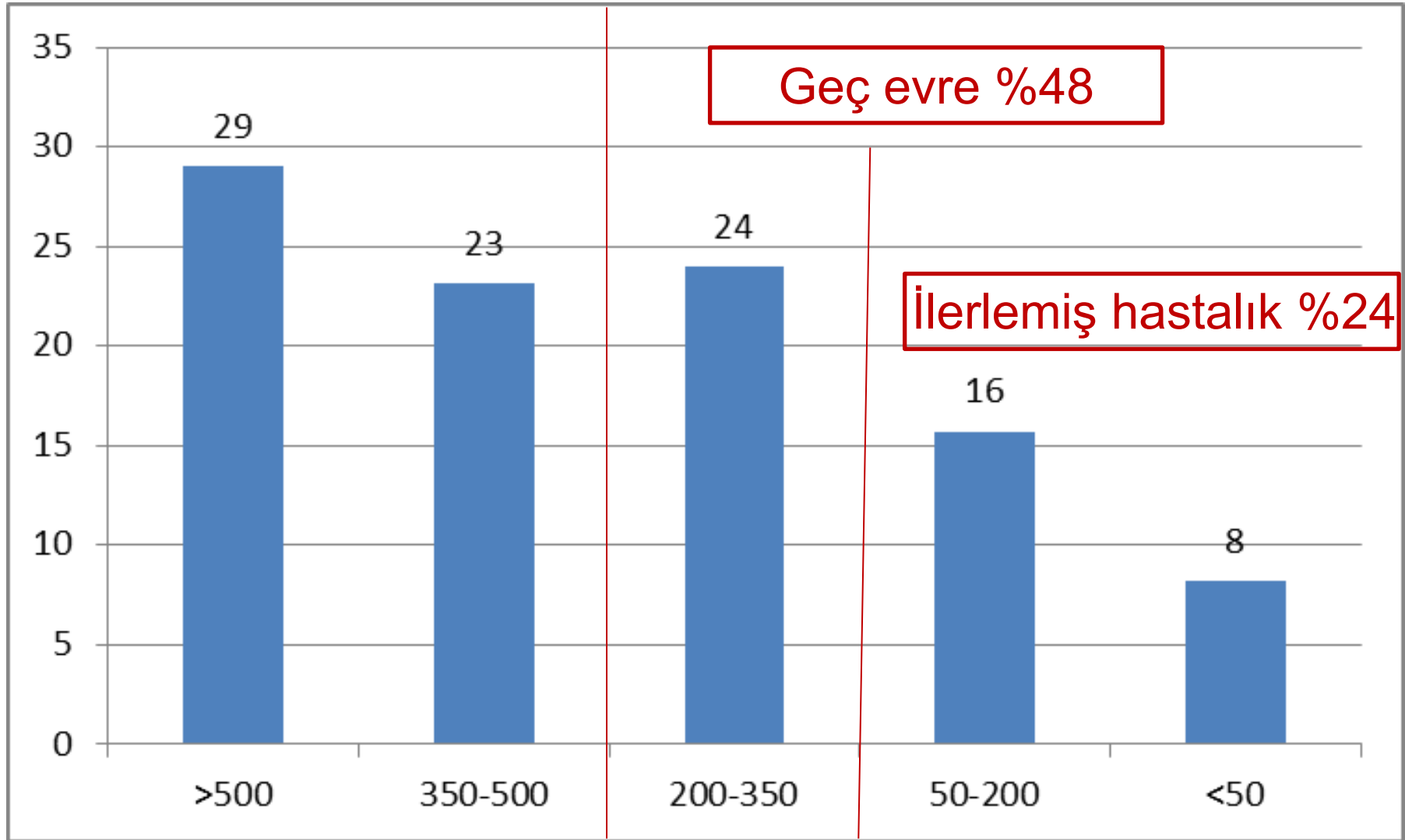
Transmission route and reasons for HIV testing among recently diagnosed HIV patients in HIV-TR cohort, 2011–2012

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Bazal CD4 sayısı





Orta ve Doğu Avrupa'da HIV enfeksiyonunun yönetimi

2014 yılında geliştirildi:

Deniz Gökengin (Türkiye)
Josip Begovac (Hırvatistan)
Cristiana Oprea (Romanya)
Andrzej Horban (Polonya)

Yanıt oranı %77,4

Orta Avrupa

- Arnavutluk
- Bosna Hersek
- Bulgaristan*
- Hırvatistan
- Kıbrıs*
- Çek Cumhuriyeti*
- Macaristan*
- Kosovo
- Makedonya
- Karadağ
- Polonya*
- Romanya*
- Sırbistan
- Slovak Cumhuriyeti*
- Slovenya*
- Türkiye

Doğu Avrupa

- Azerbaycan
- Belarus
- Ermenistan
- Estonya*
- Gürcistan
- Kazakistan
- Kırgız Cumhuriyeti
- Letonya*
- Litvanya*
- Moldova
- Rus Federasyonu
- Tacikistan
- Türkmenistan
- Ukrayna
- Özbekistan

1. HIV Care in Central and Eastern Europe Survey. Yayınlanmamış veri.

Geç tanı alan hastaların oranı* (2014)

	Çalışma (2014) ¹	DSÖ Avrupa Bölgesi (2015) ^{†2}
Geç başvuru	%40,3 (%14–80)	%48
İleri düzeyde hastalıkla başvuru	%25,4 (%9–50)	%28

Geç başvuru: CD4 T hücresi sayısı <350 /mikrolitre veya CD4 T sayısından bağımsız olarak AIDS tanımlayan hastalık

İleri düzeyde hastalıkla başvuru: CD4 T hücresi sayısı <200 /mikrolitre veya CD4 T hücresi sayısından bağımsız olarak AIDS tanımlayan hastalık

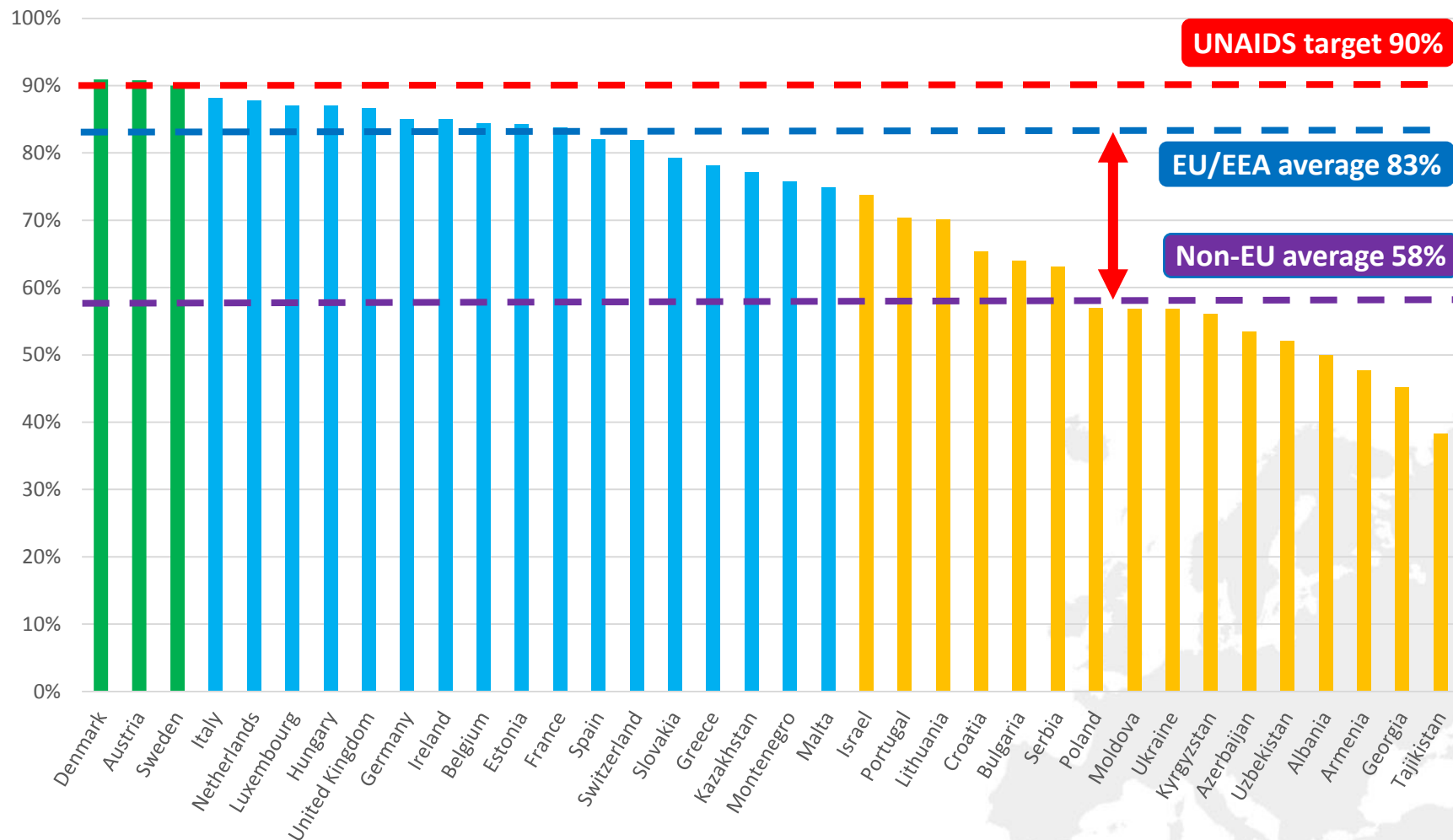
[†] Belarus, Bosna Hersek, Hırvatistan, Almanya, Macaristan, İzlanda, Monako, Norveç, Polonya, Rusya, San Marino, Türkmenistan, Ukrayna ve Özbekistan'dan veri yok. S=23,920

CEE, Central and Eastern Europe; WHO, World Health Organization

1. HIV Care in Central and Eastern Europe Survey. Yayınlanmamış veri.
2. European Centre for Disease Prevention and Control. HIV/AIDS surveillance in Europe 2015. Available at: <http://ecdc.europa.eu/en/publications/Publications/HIV-AIDS-surveillance-Europe-2015.pdf> [Accessed May 2017].

Progress toward achieving the first 90:

Target 1: 90% of all PLHIV who know their status (n=36)



Kilit toplumların taranması

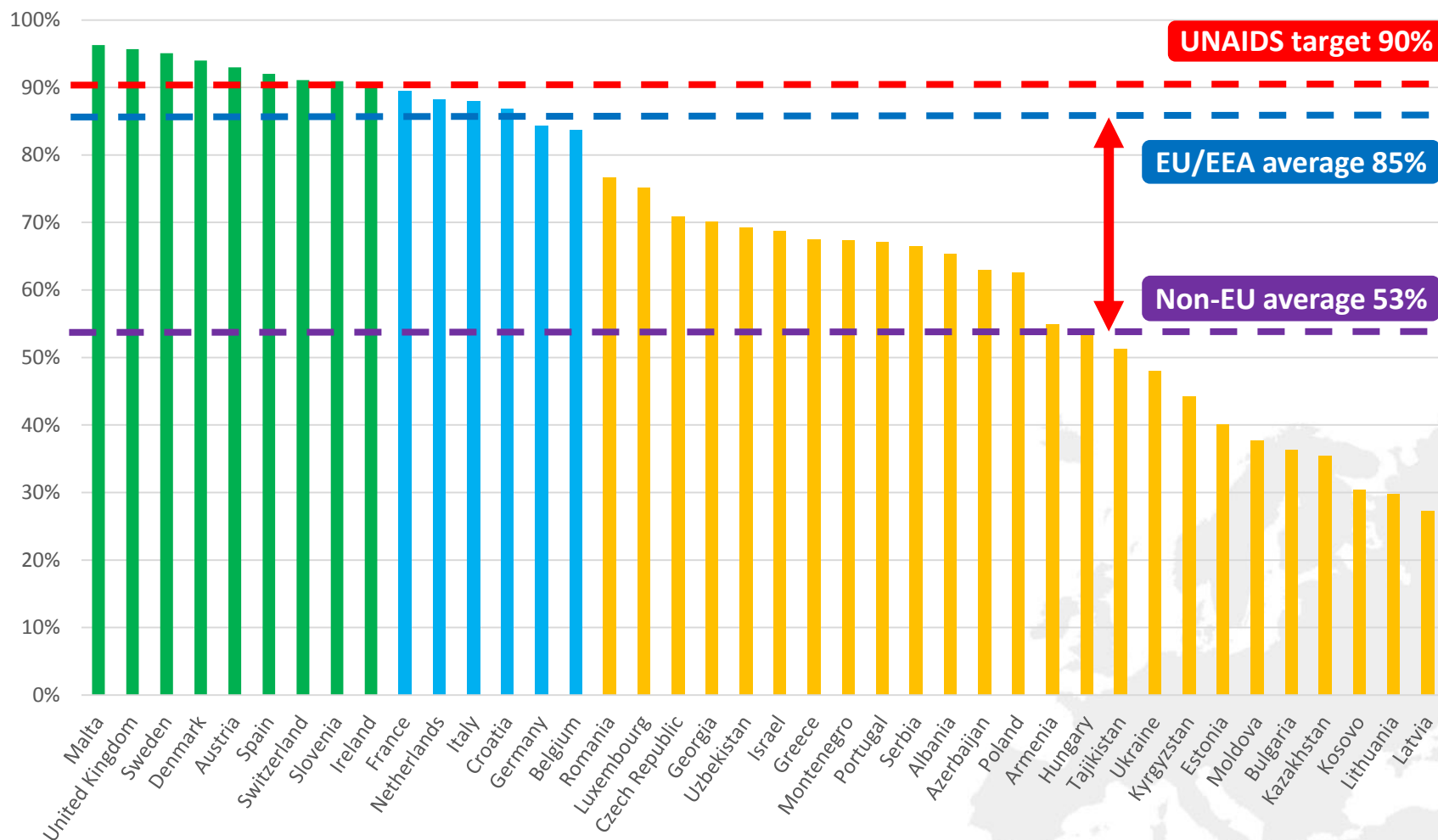
	Kosov	Gürc.	Erm	Kırgız	Mold	Özbek	Arnav	Bulg	Bosn	Sırbis	Karadağ	Maked
ESE												
Sİ												
DİB												
Mahkûm												
Kan/ organ b												
Gebe												
Evlilik öncesi												
TB												
	Türk	Roman	Azerb	Kazak	Hırvat	Çek	Macar	Polonya	Sloven	Slovak	Eston	Rusya
ESE												
Sİ												
DİB												
Mahkûm												
Kan/ organ b												
Gebe												
Evlilik öncesi												
TB												

ESE, erkekle seks yapan erkek; Sİ, seks işçisi; DİB, Damar içi madde bağımlısı; TB, Tüberküloz

1. HIV Care in Central and Eastern Europe Survey. Yayınlanmamış veri.

Progress toward achieving the second 90:

Target 2: 90% of those diagnosed on ART (n=40)



Poster Sessions – Abstract P146

Outcomes of initial antiretroviral treatment (ART) among recently diagnosed HIV patients in HIV-TR cohort, 2011–2012

Korten, Volkan¹; Gökengin, Deniz²; Fincanci, Muzaffer³; Yildirmak, Taner⁴; Uzun Kes, Nuray⁵; Taşdelen Fişgin, Nuriye⁶; Inan, Dilara⁷; Eraksoy, Haluk⁸; Akalin, Halis⁹ and Kaptan, Figen¹⁰

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2011-2012 yıllarında yeni tanı almış 693 olgudan 531'ine ART başlanmıştır (%76.6)

ART başlama sınırı*

Gelir düzeyi	CD4<350	CD4<500	Herhangi bir CD4 sayısı
Alt-Orta	Kosovo Özbekistan	Ermenistan Kırgız Cumhuriyeti Moldova	Gürcistan
Üst-Orta	Arnavutluk Azerbeycan Bulgaristan Makedonya Karadağ Sırbistan	Bosna Kazakistan	Türkiye Romanya
Yüksek	Rus Federasyonu		Hırvatistan Çek cumhuriyeti Estonya Macaristan Polonya Slovak Cumhuriyeti Slovenya
Toplam	8	6	10

** 2015 itibariyle; belli başlı kılavuzlarda değişiklik yapıldıktan sonra

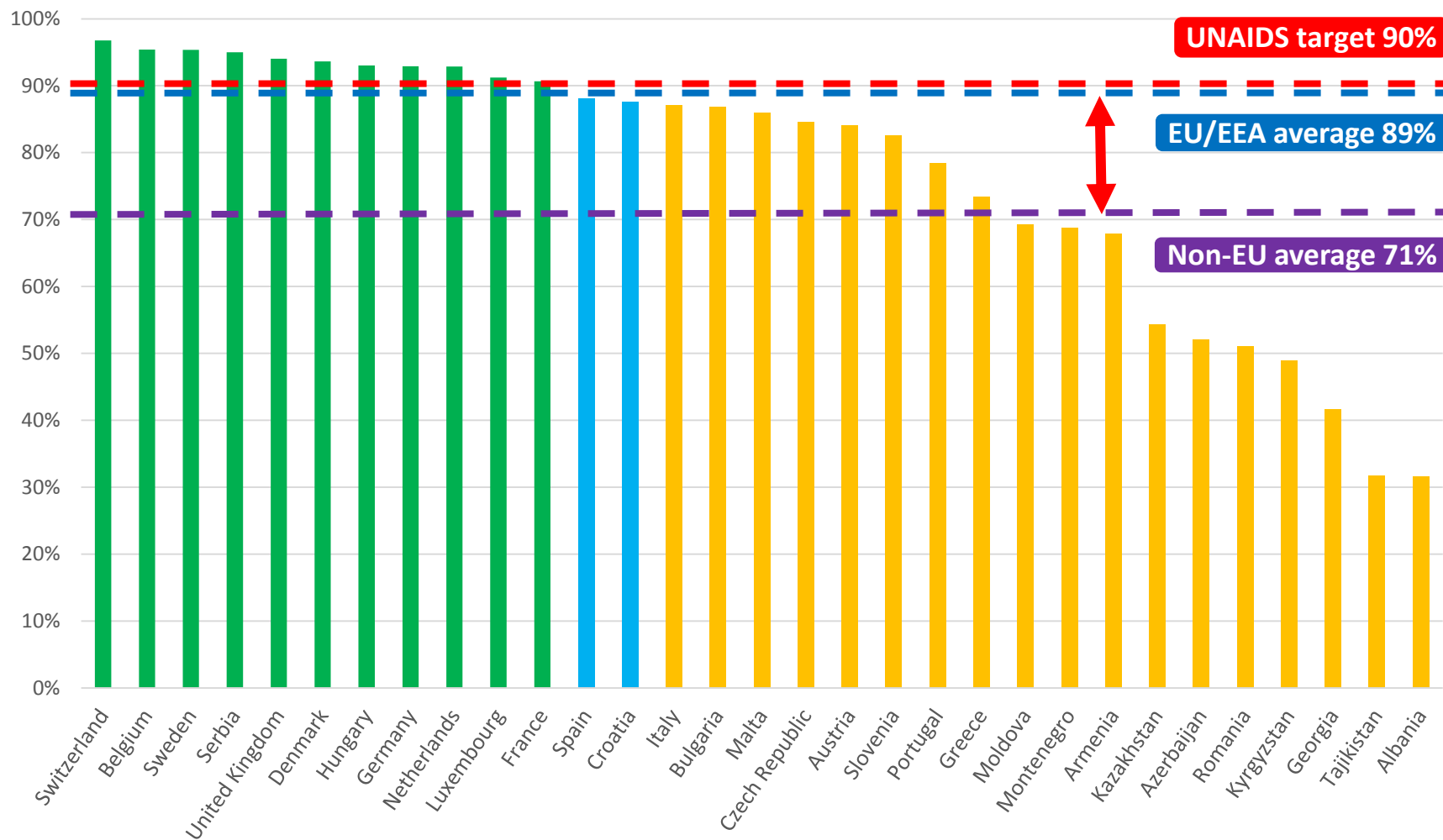
Policies on ART initiation in European countries

2014 (n=48) and 2016 (n=47)



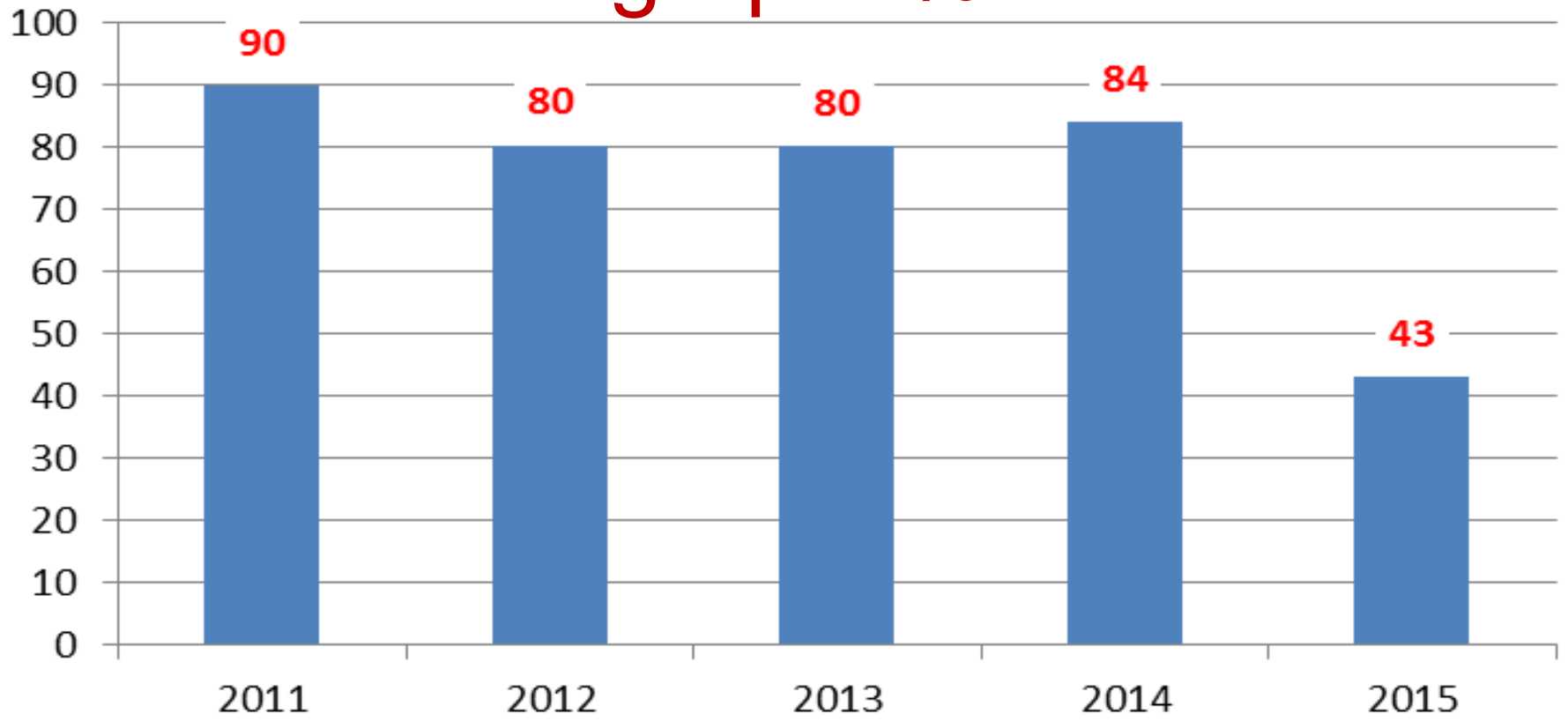
Progress toward achieving the third 90:

Target 3: 90% of those on ART virally suppressed (n=31)



Virolojik baskılanma elde edilenler

Tüm grupta %71



Poster Sessions – Abstract P146

Outcomes of initial antiretroviral treatment (ART) among recently diagnosed HIV patients in HIV-TR cohort, 2011–2012

Korten, Volkan¹; Gökengin, Deniz²; Fincanci, Muzaffer³; Yildirmak, Taner⁴; Uzun Kes, Nuray⁵; Taşdelen Fişgin, Nuriye⁶; Inan, Dilara⁷; Eraksoy, Haluk⁸; Akalin, Halis⁹ and Kaptan, Figen¹⁰

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Olguların %76,6'sında virolojik başarı elde edilmiş.

HIV kaskadı (2014)

	Armenia	Georgia	Moldova	Uzbekistan	Kazakhstan	Estonia	Russia	Bulgaria	Romania*	Bosnia*	Slovenia*	Croatia*	Czech R
HIV pozitif bireyler	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Tanı alan	33%	42%	38%	52%	85%	85%	78%	64%	80%	77%	58%	76%	51%
Sisteme dâhil olan	28%	36%	17%		25%	51%	58%	31%	85%	74%	53%	66%	41%
ART başlanan	19%	32%		23%	25%	32%	19%	23%	90%	53%	50%	62%	31%
Virolojik başarı sağlanan	16%	27%			13%			20%	62%	50%	48%	54%	24%

Ülkeler arasında yöntemsel farklılıklar olduğundan verilerin doğrudan kıyaslanması mümkün değildir.

1. HIV Care in Central and Eastern Europe Survey. Yayınlanmamış veri.

ORIGINAL RESEARCH

HIV continuum of care in Europe and Central Asia

RS Drew,¹ B Rice,² K Rüütel,³ V Delphech,⁴ KA Attawell,⁵ DK Hales,⁶ C Velasco,⁷ AJ Amato-Gauci,⁸ A Pharris,⁸ L Tavošchi⁸ and T Noori⁸

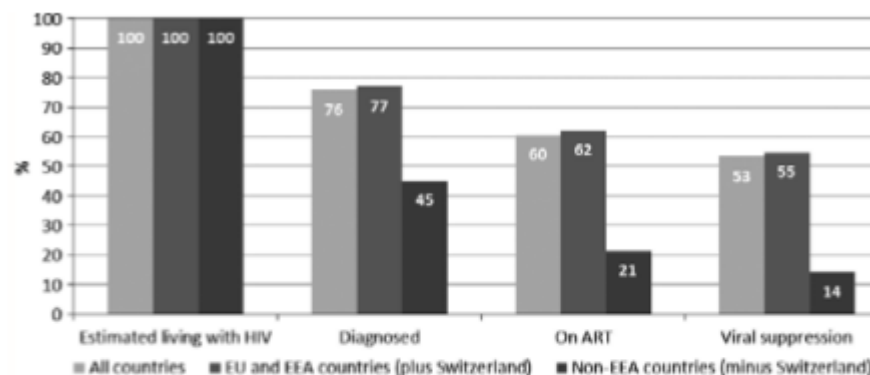


Fig. 3 Continuum of care in 16 countries of Europe and Central Asia. European Union (EU) and European Economic Area (EEA) countries included: Austria, Bulgaria, Denmark, France, Germany, Luxembourg, the Netherlands, Romania, Spain, Sweden and the United Kingdom; non-EEA countries included: Armenia, Azerbaijan, Georgia and Serbia. ART, antiretroviral therapy.

Data for 40 countries analyzed

Güncel önleme stratejileri

- Önleme amacıyla erken tedavi («*treatment as prevention*»)
- Test et tedavi et («*test and treat*»)
- Temas öncesi profilaksi

ÖNLEME AMACIYLA TEDAVİ

ORIGINAL ARTICLE

Antiretroviral Therapy for the Prevention of HIV-1 Transmission

M.S. Cohen, Y.Q. Chen, M. McCauley, T. Gamble, M.C. Hosseinipour, N. Kumarasamy, J.G. Hakim, J. Kumwenda, B. Grinsztejn, J.H.S. Pilotto, S.V. Godbole, S. Chariyalertsak, B.R. Santos, K.H. Mayer, I.F. Hoffman, S.H. Eshleman, E. Piwovar-Manning, L. Cottle, X.C. Zhang, J. Makhema, L.A. Mills, R. Panchia, S. Faesen, J. Eron, J. Gallant, D. Havlir, S. Swindells, V. Elharrar, D. Burns, T.E. Taha, K. Nielsen-Saines, D.D. Celentano, M. Essex, S.E. Hudelson, A.D. Redd, and T.R. Fleming, for the HPTN 052 Study Team*

Serolojik açıdan benzeşik olmayan 1763 çift
Erken tedavi kolunda pozitif eşle bağlantılı bulaş yok

Original Investigation

Sexual Activity Without Condoms and Risk of HIV Transmission in Serodifferent Couples When the HIV-Positive Partner Is Using Suppressive Antiretroviral Therapy

Alison J. Rodger, MD; Valentina Cambiano, PhD; Tina Bruun, RN; Pietro Vernazza, MD; Simon Collins; Jan van Lunzen, PhD; Giulio Maria Corbelli; Vicente Estrada, MD; Anna Maria Geretti, MD; Apostolos Beloukas, PhD; David Asboe, FRCP; Pompeyo Viciano, MD; Félix Gutiérrez, MD; Bonaventura Clotet, PhD; Christian Pradier, MD; Jan Gerstoft, MD; Rainer Weber, MD; Katarina Westling, MD; Gilles Wandeler, MD; Jan M. Prins, PhD; Armin Rieger, MD; Marcel Stoeckle, MD; Tim Kummerle, PhD;

(U)ndetectable=(U)ntransmissible
Belirlenemez viral yük=Bulaş yok

TEST ET TEDAVİ ET

Test yaptırmanın önündeki engeller

Damgalama

- Kültürel, dini veya yerel geleneksel değerlerle bağlantılı cinsiyet ayrımı/homofobi
- Tedaviyi korunma ve önlemeden üstün tutan kültürel tutumlar

Farkındalık

- HIV prevalansının düşük olması
- Düşük risk algısı
- HIV hakkında genel bilgi eksikliği

Hizmet sağlama

- Teste erişimin sınırlı olması veya test için fon bulunmaması
- Yasaların, ulusal planların ve kılavuzların olmaması veya yetersiz olması
- En yüksek riski taşıyan toplumları hedef alan programların bulunmaması
- Eşitsizlik, işsizlik ve göç
- Paydaşlar arasında iletişim ve eşgüdümün zayıf olması

Barcelona Checkpoint





CHECKPOINT

GESUNDHEITZENTRUM
FÜR DIE COMMUNITY

ZÜRICH

Ath Checkpoint





HIV testing center checkpoint

Miesten Kesken

miestenkesken.fi/en/

%67

Arama

CHECKPOINT
miestenkesken.fi

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News

Blog

EN

You decide:
condoms
PrEP
hiv+medication
#safesexstrategy

Ask us!

Search

What's your safe sex strategy?

You decide! Nowadays you have a chance to choose the methods of preventing HIV. Condom, PrEP, HIV+medication

Read more

What's the safe sex strategy of these guys?

Meet Antti, Pekka and Timo. They all enjoy having sex and want to do it safely. They all have a safe sex strategy of their own.

Watch the video and find out more!

Read more

You decide - Sinä päätät (English subtitles)

These guys also choose their safe sex strategy depending on the situation and their partner

ANTTI + PEKKA + TIMO

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Ok

CHAT

Rapid initiation of antiretroviral treatment in newly diagnosed HIV: experience of a central London clinic

G Whitlock, S Blackwell, M Carbonell, S Patel, T Suchak
M Mohabeer, M Toby, T Barber, N Nwokolo, A McOwan



'Standard' pathway



U&E
LFT
FBC

Hep A/B/C
Syphilis
glucose
lipids

CD4

VL
HLA-B5701
VRT

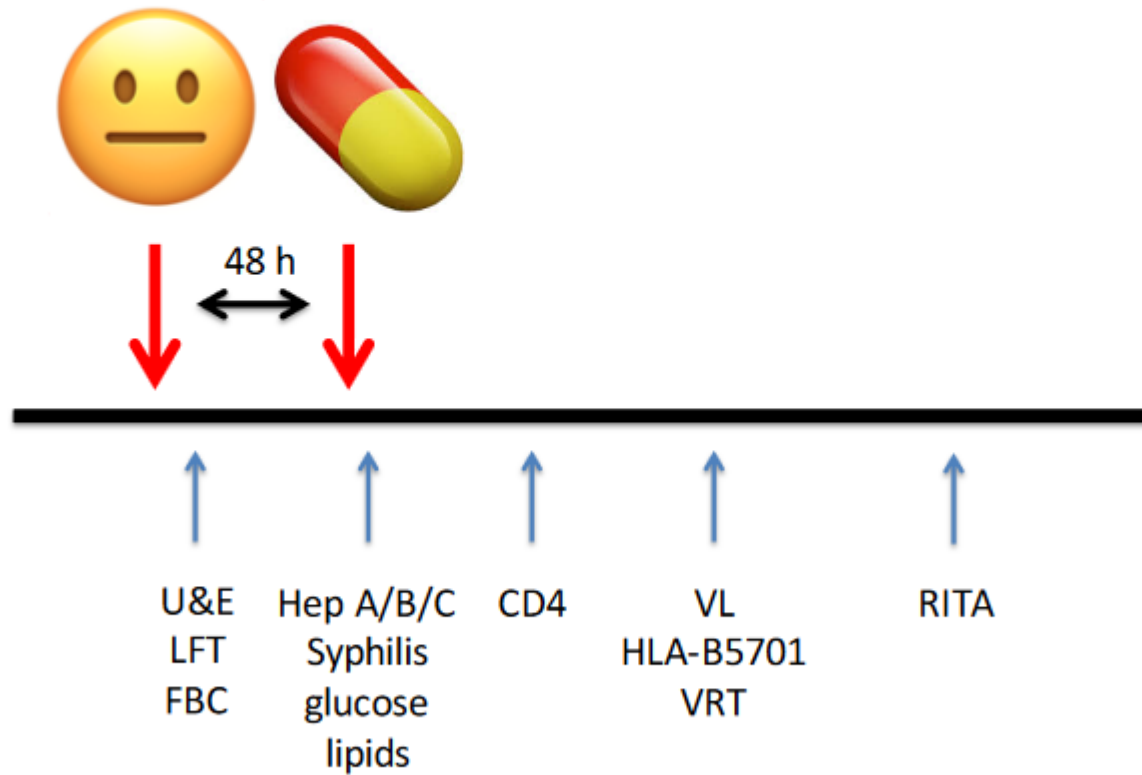
RITA



14 gün

Chelsea and Westminster Hospital **NHS**
NHS Foundation Trust

New pathway



Chelsea and Westminster Hospital **NHS**
NHS Foundation Trust

- 127 yeni başvuru
- %14 VY >1 milyon kopya/mL
- Aktarılmış direnç oranı %24

İlk randevuya gelen

Evet
118 (%93)

Hayır
9 (%7)

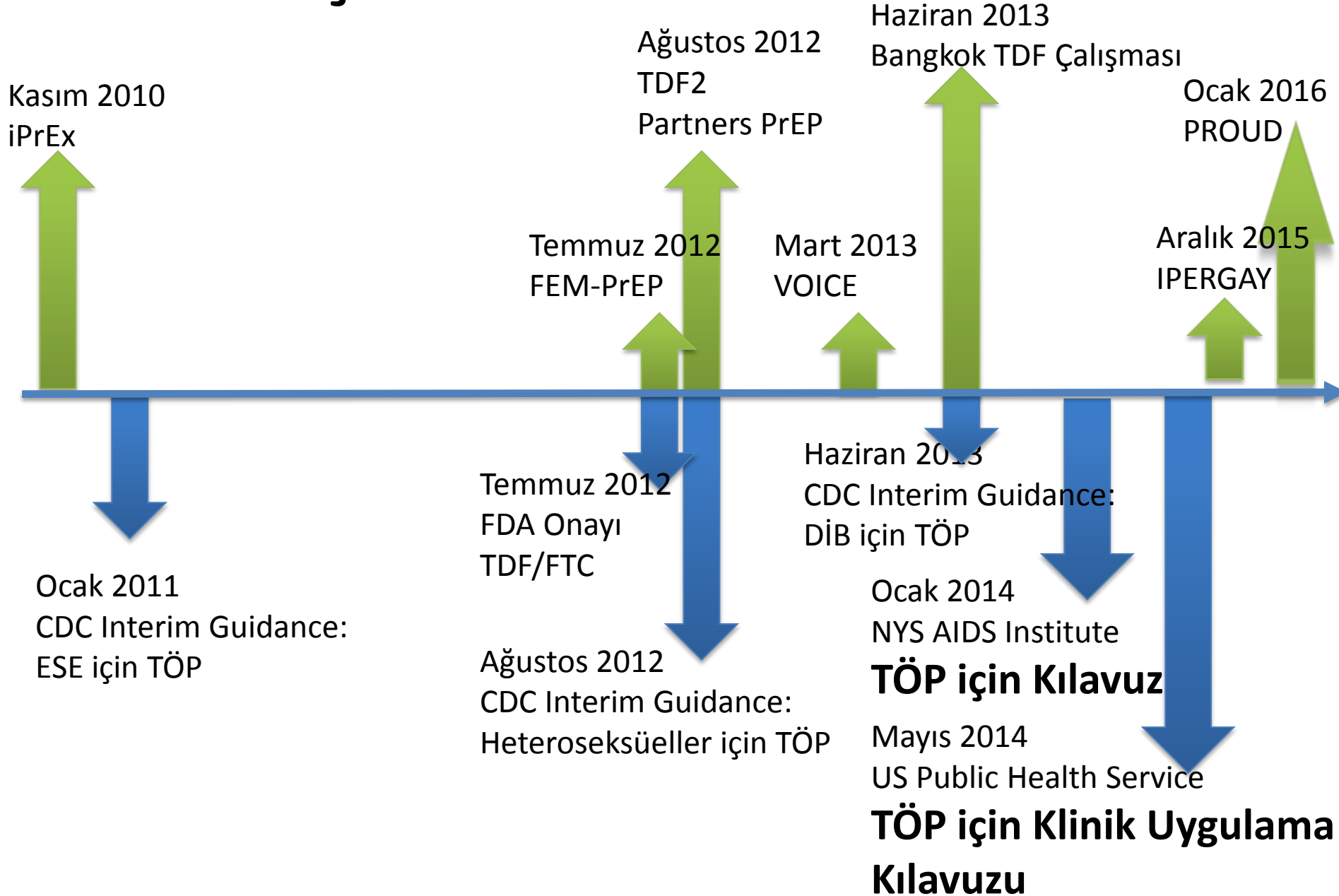
Tedavi başlayan

Evet
89 (%75)

Hayır
29 (%25)*

*26 olgu daha sonra tedaviye başlamış
Toplamda tedaviye başlama oranı %98

TÖP Gelişim Süreci





The time for debate on the effectiveness of PrEP is over.

>%90 etkinlik

ABD, Fransa ve Norveç'te kullanımda

RAPID COMMUNICATIONS

Fall in new HIV diagnoses among men who have sex with men (MSM) at selected London sexual health clinics since early 2015: testing or treatment or pre-exposure prophylaxis (PrEP)?

AE Brown ^{1,2}, H Mohammed ^{1,2}, D Ogaz ¹, PD Kirwan ¹, M Yung ¹, SG Nash ¹, M Furegato ¹, G Hughes ¹, N Connor ¹, VC Delpech ¹, ON Gill ¹

1. HIV & STI Department, Centre for Infectious Disease Surveillance and Control (CIDSC), Public Health England, London, United Kingdom

2. These authors contributed equally to this work and share first authorship

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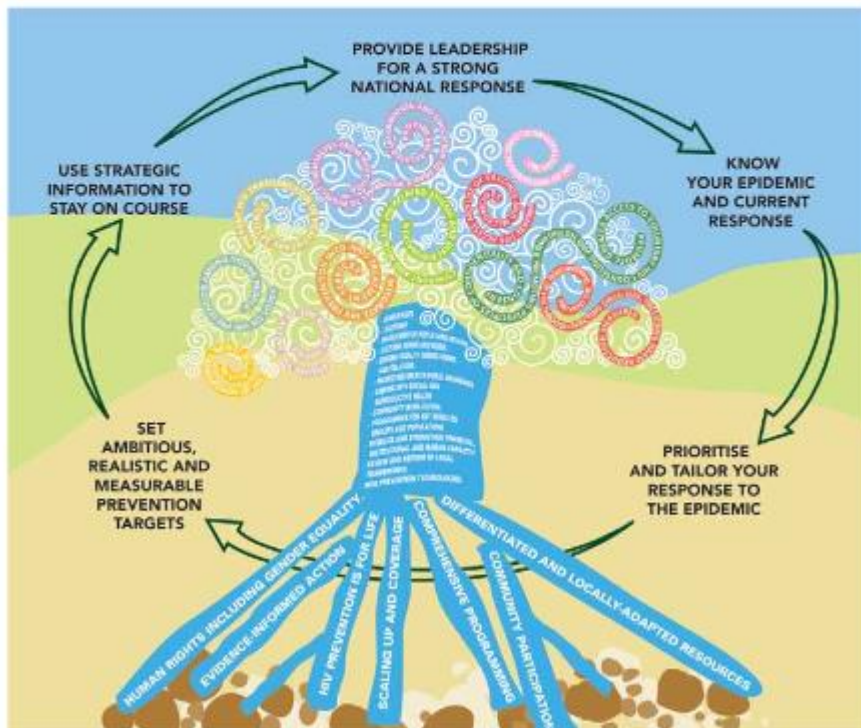
Brown AE, Mohammed H, Ogaz D, Kirwan PD, Yung M, Nash SG, Furegato M, Hughes G, Connor N, Delpech VC, Gill ON. Fall in new HIV diagnoses among men who have sex with men (MSM) at selected London sexual health clinics since early 2015: testing or treatment or pre-exposure prophylaxis (PrEP)? *Euro Surveill.* 2017;22(25):pii=30553. DOI: <http://dx.doi.org/10.2807/1560-7917.ES.2017.22.25.30553>

Article submitted on 12 June 2017 / accepted on 20 June 2017 / published on 22 June 2017

Ekim 2015-Eylül 2016 arasında ESE’de HIV tanısında %32 azalma (Ekim 2014–Eylül 2015 dönemine kıyasla).

HIV testlerinde artış ve tanı alanlara hemen ART başlanması ve TÖP kullanılması ile bağlantılı

Practical Guidelines for Intensifying HIV Prevention TOWARDS UNIVERSAL ACCESS



Uniting the world against **AIDS**

Epidemini tanı Yanıtını bil

Characterization of female and transgender sex workers in Ankara, Turkey¹

Deniz Gökengin^{1,2}, Georgetta Aybek², Faran Emmanuel³, James F Blanchard³, Demir Serter², and Sevgi Aral⁴

¹Department of Clinical Microbiology and Infectious Diseases, Faculty of Medicine, Ege University, Izmir, Turkey; ²Society for the Prevention of AIDS and Sexually Transmitted Diseases, Izmir, Turkey; ³Centre for Global Public Health, Department of Community Health Science, University of Manitoba, Winnipeg, Canada; ⁴Division of STD Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention, Atlanta, Georgia US

Characterization of female and transgender sex workers in İstanbul, Turkey²

Georgetta Aybek¹, Deniz Gökengin², Faran Emmanuel³, James F Blanchard³, Demir Serter¹, and Sevgi Aral⁴

¹Society for the Prevention of AIDS and Sexually Transmitted Diseases, Izmir, Turkey; ²Department of Clinical Microbiology and Infectious Diseases, Faculty of Medicine, Ege University, Izmir, Turkey; ³Centre for Global Public Health, Department of Community Health Science, University of Manitoba, Winnipeg, Canada; ⁴Division of STD Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention, Atlanta, Georgia

İstanbul'un 29 ilçesinde ve Ankara'nın 9 ilçesinde dört kilit toplumun haritalanması

1. aşama: Seks işçilerinin bulunduğu noktaların belirlenmesi
2. aşama: Bulunan noktaların doğrulanması
3. aşama: Örneklem grubunda davranış araştırması ve HIV testleri

¹ 31st Congress of IUSTI Europe, 31 Ağustos-2 eylül 2017, Helsinki, Finaİndiya

² Yayınlanmamış veri

İstanbul'da trans seks işçilerinin tahmini sayısı

DISTRICT	Spots	Peak Min	Peak Max	Peak Avg	% Distribution
Ataşehir	24	145	201	173	1.7%
Avcılar	140	692	956	824	8.2%
Bağcılar	6	21	29	25	0.3%
Bahçelievler	75	291	402	347	3.5%
Bakırköy	49	195	270	232	2.3%
Başakşehir	10	34	47	40	0.4%
Bayrampaşa	6	23	32	28	0.3%
Beşiktaş	72	291	402	346	3.5%
Beylikdüzü	106	660	911	785	7.9%
BeYOğlu	326	2055	2840	2,447	24.5%
Büyükkçekmece	25	113	155	134	1.3%
Esenyurt	67	400	553	477	4.8%
Eyüp	7	22	31	26	0.3%
Fatih	118	539	745	642	6.4%
Güngören	31	127	176	152	1.5%
Kadıköy	163	674	932	803	8.0%
Kağıthane	11	56	77	67	0.7%
Kartal	101	383	529	456	4.6%
Küçükçekmece	45	175	242	209	2.1%
Maltepe	20	88	122	105	1.0%
Pendik	36	132	183	158	1.6%
Şişli	225	999	1380	1,190	11.9%
Sultanbeyli	1	3	4	4	0.0%
Tuzla	2	6	8	7	0.1%
Ümraniye	4	34	48	41	0.4%
Üsküdar	2	6	8	7	0.1%
Zeytinburnu	87	327	452	390	3.9%
Grand Total	1759	8,494	11,736	10,115	100%

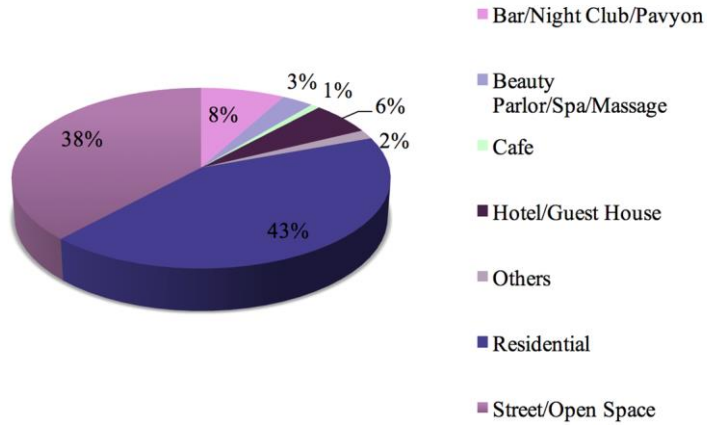
İstanbul'da kadın seks işçilerinin tahmini sayısı

District	Spots	Min Est	Max Est	Average Est	% distribution
Arnavutköy	19	75	91	83	0.4%
Ataşehir	56	329	401	365	1.8%
Avcılar	191	1,009	1,230	1,120	5.6%
Bağcılar	106	537	654	595	3.0%
Bahçelievler	220	1,078	1,314	1,196	6.0%
Bakırköy	141	580	707	643	3.2%
Başakşehir	39	194	237	216	1.1%
Bayrampaşa	47	191	232	211	1.1%
Beşiktaş	50	250	305	277	1.4%
Beylikdüzü	145	1,382	1,684	1,533	7.6%
Beyoğlu	342	2,003	2,442	2,223	11.1%
Büyükkçekmece	102	495	603	549	2.7%
Esenler	12	67	81	74	0.4%
Esenyurt	196	1,075	1,310	1,192	5.9%
Eyüp	49	250	305	277	1.4%
Fatih	564	2,978	3,630	3,304	16.4%
Gaziosmanpaşa	5	21	26	24	0.1%
Güngören	75	361	440	400	2.0%
Kadıköy	130	584	712	648	3.2%
Kağıthane	32	189	231	210	1.0%
Kartal	133	671	817	744	3.7%
Küçükçekmece	194	904	1,102	1,003	5.0%
Maltepe	77	407	496	452	2.2%
Pendik	149	751	915	833	4.1%
Sancaktepe	4	22	27	24	0.1%
Şişli	172	852	1,039	945	4.7%
Sultanbeyli	22	98	119	109	0.5%
Tuzla	82	444	541	492	2.4%
Ümraniye	3	15	18	17	0.1%
Zeytinburnu	72	302	368	335	1.7%
TOTAL	3,429	18,113	22,078	20,095	100.0%

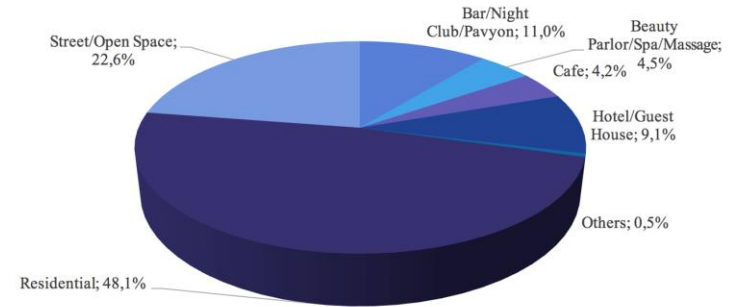
Yayınlanmamış veri

İSTANBUL

Trans seks işçilerinin çalışma tipleri



Kadın seks işçilerinin çalışma tipleri



Yayınlanmamış veri

Ankara'da trans seks işçilerinin ilçelere ve tipolojiye göre tahmini sayısı

City	District	No of spots	USUAL DAY MIN	USUAL DAY MAX	USUAL DAY AVG	PEAK DAY MIN	PEAK DAY MAX	PEAK DAY AVG
ANKARA	ALTINDAĞ	38	82	125	104	138	159	148
	ÇANKAYA	381	560	860	710	1,081	1,337	1,209
	KEÇİÖREN	1	1	1	1	2	2	2
	YENİ MAHALLE	14	16	26	21	34	42	38
ANKARA Total		434	659	1,012	836	1,255	1,54	1,398

TYPE	No of spots	USUAL DAY MIN	USUAL DAY MAX	USUAL DAY AVG	PEAK DAY MIN	PEAK DAY MAX	PEAK DAY AVG
Bar/N Club/Pavyon	8	42	70	56	66	104	85
Beauty Parlor/Spa/M assage	84	111	166	139	234	278	256
Hotel/Guest house	37	50	79	64	96	120	108
Residence	47	68	110	89	147	172	160
Street/Open spaces	258	387	589	488	712	866	789
TOTAL	434	659	1,012	836	1,255	1,54	1,398

Ankara'da kadın seks işçilerinin ilçelere ve tipolojiye göre tahmini sayısı

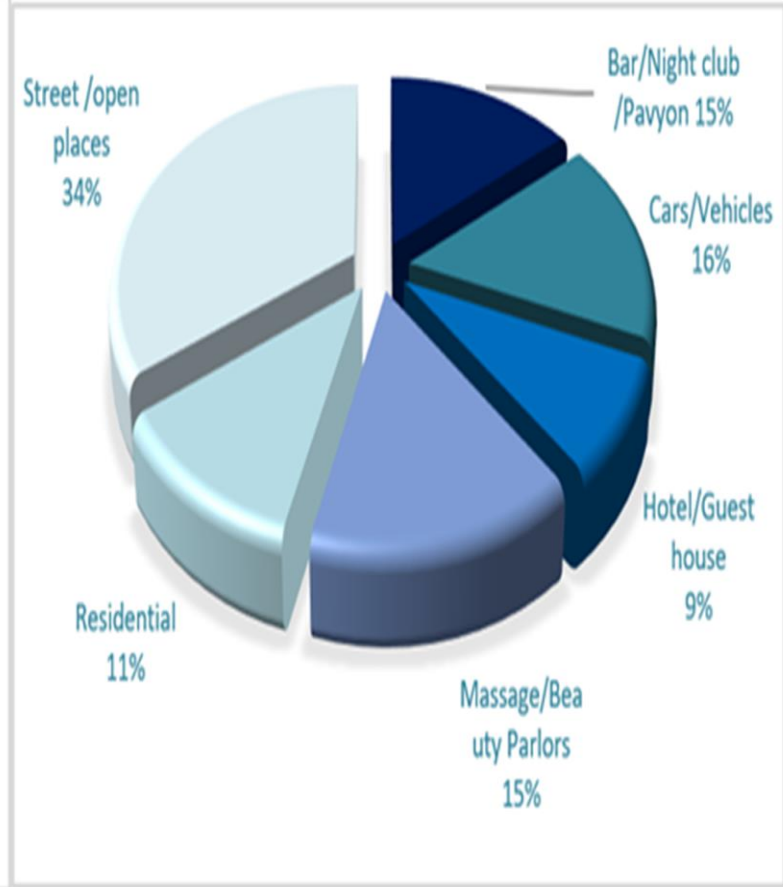
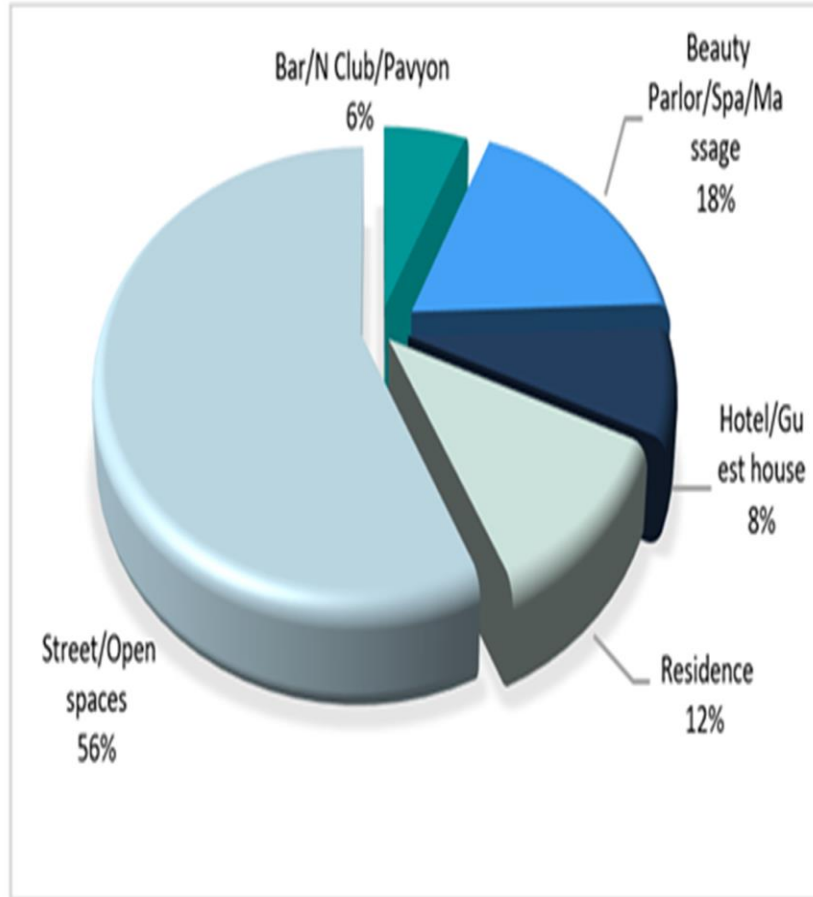
İLÇE	No of spots	Min Estimate	Max Estimate	Avg Estimate	% Distribution
ALTINDAĞ	236	1,402	1,834	1,618	21.4%
ÇANKAYA	783	4,185	5,251	4,718	62.4%
GÖLBAŞI	33	148	175	162	2.1%
KEÇİÖREN	60	176	198	187	2.5%
MAMAK	32	116	127	122	1.6%
SİNCAN	9	36	35	36	0.5%
YENİ MAHALLE	172	682	750	716	9.5%
Grand Total	1325	6,746	8,370	7,558	

SPOT TYPOLOGY	No of spots	Min Estimate	Max Estimate	Avg Estimate	% Distribution
Bar/Night club /Pavyon	150	992	1,242	1,117	14.8%
Cars/Vehicles	160	1,089	1,325	1,207	16.0%
Hotel/Guest house	104	542	755	649	8.6%
Massage/Beauty Parlors	208	1,031	1,216	1,124	14.9%
Residential	220	812	922	867	11.5%
Street /open places	483	2,279	2,910	2,594	34.3%
Grand Total	1325	6,746	8,370	7,558	

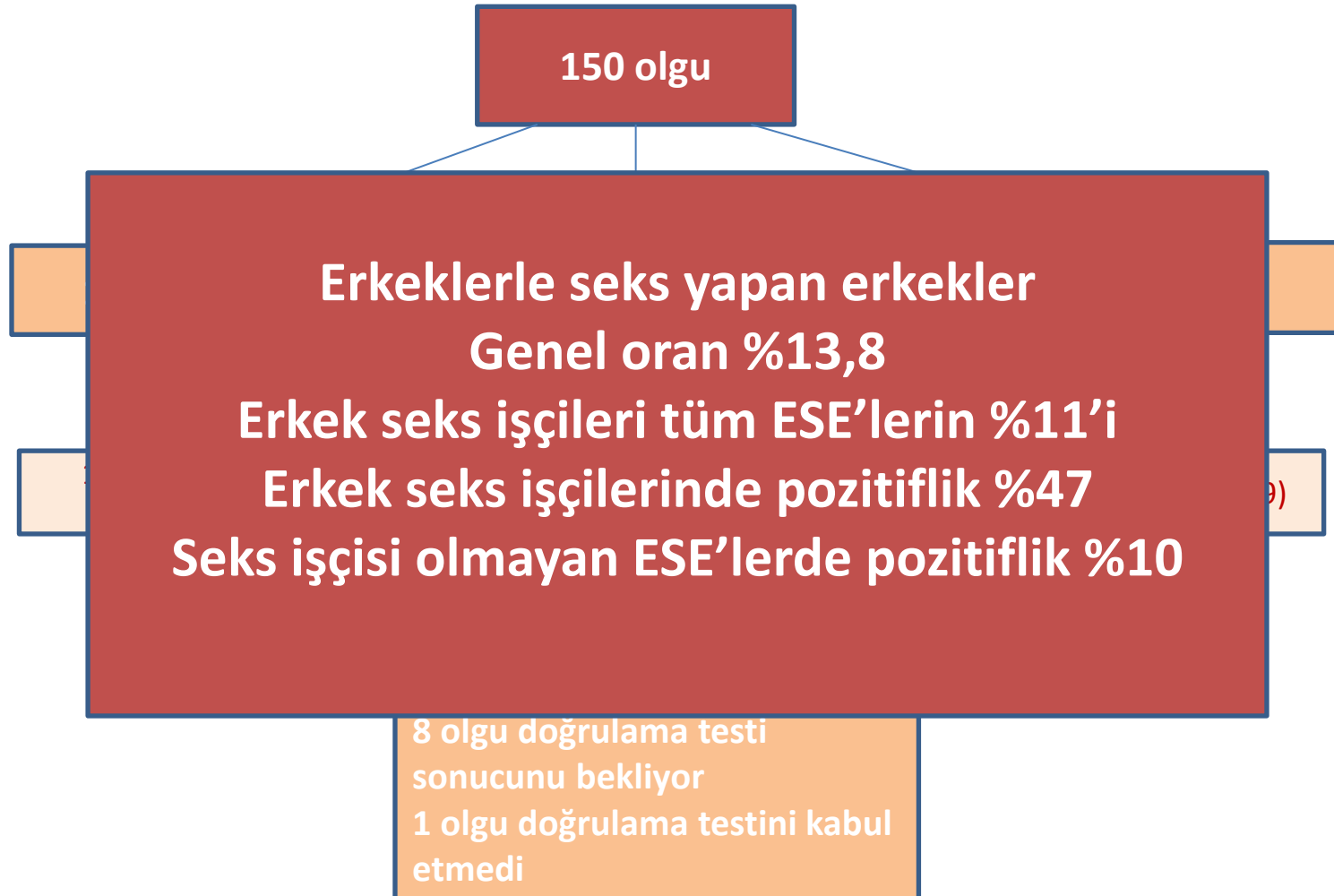
ANKARA

Trans seks işçilerinin çalışma tipolojileri

Kadın seks işçilerinin çalışma tipolojileri



HIV testleri (İstanbul)

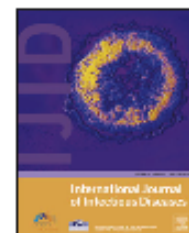




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HIV prevalence among men who have sex with men in Istanbul

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Prevalence

SUMMARY

Objectives: The re-emergence of the HIV epidemic among men who have sex with men (MSM) represents a serious health issue. This study aimed to assess the HIV prevalence among MSM in a very low prevalence population of a large city.

Methods: A public campaign to raise awareness of HIV infection and to provide access to anonymous testing was conducted in places frequented by MSM and through a mobile phone application. No identity information was requested from individuals contacting the call centre, and anonymous and free HIV testing was offered proactively. Those who agreed to have a test were provided a code number, which was used in blood sampling procedures.

Results: Of 1200 subjects who contacted the call centre, 197 consented to undergo HIV testing and visited the laboratory to give a blood sample. Twenty-five subjects were found to have a reactive ELISA result on two different occasions plus a positive Western blot test result. Thus, the HIV prevalence in this group of MSM was 12.7%.

Conclusions: MSM remain a high risk group for HIV infection in a low prevalence setting, and thus represent a key target population for diagnostic and therapeutic interventions.

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- Tüm ülkelere uyacak etkinlikte bir reçete yok.
- Gelişim ve iyileştirme önündeki engel para değil, maliyet-etkin girişimlerin doğru gruplara, doğru zamanda, doğru yerde ve doğru kapsayıcılık ile iletilmesini sağlayamayan zayıf sağlık sistemleri.
- UNAIDS'in «Epideminizi tanıyın» sloganından yola çıkılarak ülkemizdeki epidemi analiz edilmeli.
 - HIV bulaşmasında rol oynayan kaynaklar kanıta dayalı yöntemlerle belirlenmeli
 - HIV'in önlenmesi ve AIDS'in tedavisinde kullanılacak girişimlerin etkinliği kanıta dayalı yöntemlerle belirlenmeli.
 - En etkili girişimlerin ihtiyaç sahiplerine ulaştırılmasını engelleyen darboğazlar tanımlanmalı
 - Ülkenin koşullarına en uygun sistem belirlenerek bir plan dahilinde uygulanmalı