

San Mateo County Sexually Transmitted Disease and HIV-AIDS Surveillance Annual Report, 2017



**SAN MATEO
COUNTY HEALTH**

www.smchealth.org/std • Provider STD Reporting 650-573-2346 • STD Clinic: 650.573.2385

• Aracely Tamayo PhD, Epidemiologist • Vivian Levy MD, STD Controller

• Scott Morrow MD, MPH, MBA, Health Officer



Introduction and Acknowledgements

This is the 2017 report of data and program highlights from the STD/HIV Program in the San Mateo County Health System. For questions and feedback on this report or on the STD/HIV Program, please contact the Epidemiology unit.

San Mateo County Health System
Epidemiology
225 W 37th Ave
San Mateo, CA 94403
epidemiology@smcgov.org
650-573-2144

Suggested Citation:

San Mateo County Department of Public Health, Policy & Planning. San Mateo County Sexually Transmitted Disease and HIV-AIDS Surveillance Annual Report, 2017. San Mateo County Department of Public Health, Policy & Planning, San Mateo, California. December 2018.

Note on data for previous years:

Numbers in the document listed for past years may not match totals in previous reports. Totals may increase due to late reports, may decrease when duplicate reports are removed or cases are subsequently identified as out of our jurisdiction, or when case definitions are changed. In addition, disease rates may have changed due to updated denominator data from the U.S. Census Bureau or the California Department of Finance.

The following contributed to the creation of this report: Matt Geltmaker, Sharon Jones, Darryl Lampkin, Teresa Lopez, Judith Ochoa, Marco Vergara, Wesley Yuen, Mary Luc, and Karen Pfister.

Table of Contents

| | |
|---|--------------|
| I. Overview of the Sexually Transmitted Diseases/ HIV Program | 2 |
| II. Bacterial Sexually Transmitted Diseases in San Mateo County | 3-20 |
| 1. Overview of Bacterial STDs in San Mateo County | 3 |
| Figure 1. STDs Rates By Year in San Mateo County, 2003-2017 | 3 |
| Table 1. STD Cases and Rates By Year Reported in San Mateo County, 2003-2017 | 4 |
| Figure 2. STDs Rates for Females By Year in San Mateo County, 2003-2017 | 5 |
| Figure 3. STDs Rates for Males By Year in San Mateo County, 2003-2017 | 5 |
| A. Chlamydia | 6 |
| 1. Overview of Chlamydia in San Mateo County | 6 |
| Figure 4. Chlamydia Cases and Rates by Year in San Mateo County, 2003-2017 | 6 |
| Figure 5. Chlamydia Rates by Sex and Year in San Mateo County and State of California, 2003-2017 | 7 |
| Figure 6. Chlamydia Cases by Sex and Age in San Mateo County, 2017 | 7 |
| Figure 7. Chlamydia Cases by Sex and Selected Race/Ethnic Groups in San Mateo County, 2017 | 8 |
| Table 2. Chlamydia Cases and Rates by Demographic and Clinical Characteristics by Sex in San Mateo County, 2016 and 2017 | 9 |
| Figure 8. Chlamydia Rates by Census Tract in San Mateo County, 2017 | 10 |
| B. Gonorrhea | 11 |
| 1. Overview of Gonorrhea in San Mateo County | 11 |
| Figure 9. Gonorrhea Cases and Rates by Year in San Mateo County, 2003-2017 | 11 |
| Figure 10. Gonorrhea Rates by Sex and Year in San Mateo County and State of California, 2003-2017 | 12 |
| Figure 11. Gonorrhea Cases by Sex and Age in San Mateo County, 2017 | 12 |
| Figure 12. Gonorrhea Cases by Sex and Selected Race/Ethnic Groups in San Mateo County, 2017 | 13 |
| Table 3. Gonorrhea Cases and Rates by Demographic and Clinical Characteristics by Sex in San Mateo County, 2016 and 2017 | 14 |
| Figure 13. Gonorrhea Rates by Census Tract in San Mateo County, 2013-2017 | 15 |
| C. Syphilis | 16 |
| 1. Overview of Syphilis in San Mateo County | 16 |
| Figure 14. Early Syphilis Cases and Rates by Year in San Mateo County, 2003-2017 | 16 |
| Figure 15. Early Syphilis Rates by Sex and Year in San Mateo County and State of California, 2003-2017 | 17 |
| Figure 16. Early Syphilis Rates by Syphilis Stage and Year in San Mateo County, 2003-2017 | 17 |
| Table 4. Early Syphilis Cases and Rates by Syphilis Stage, Demographic Characteristics, and Risk Factors, San Mateo County, 2016 and 2017 | 18 |
| Table 5. Syphilis Cases and Rates by Demographic Characteristics for All Syphilis Stages, San Mateo County, 2016 and 2017 | 19 |
| Figure 17. Early Syphilis Rates by Census Tract in San Mateo County, 2013-2017 | 20 |
| III. HIV/AIDS in San Mateo County | 21-26 |
| A. HIV/AIDS | 21 |
| 1. Overview of HIV/AIDS in San Mateo County | 21 |
| Table 6. Newly Reported HIV Cases Among County Residents and Percentage of Late Testers by Year of Diagnosis, San Mateo County, 2005-2017 | 21 |
| Table 7. Characteristics of Newly Reported HIV Cases Among County Residents by Year of Diagnosis, San Mateo County, 2011-17 .. | 21 |
| Table 8. Characteristics of Late HIV Testers in Residents of San Mateo County, 2012-2017 | 22 |
| Figure 18. Adult HIV Cases Diagnosed in County Residents From 2013-2017 by Transmission Category, Sex, and Race/Ethnicity, San Mateo County | 23 |
| Figure 19. Persons Living with HIV, Living with AIDS, and the County Population by Race/Ethnicity, San Mateo County, 2017 | 24 |
| Table 9. Demographic and Exposure Risk Characteristics of Living Persons Diagnosed with HIV/AIDS, San Mateo County (2017) and California (2016) | 25 |
| Figure 20. Population Rates of Reported Living HIV Cases by Current Residential Zip Code in San Mateo County, 2017 | 26 |
| IV. Summary of Sources and Technical Notes | 27 |

San Mateo County Health System STD/HIV Program Overview

The STD/HIV Program was created in November 2008, with the merging of the long-standing STD and AIDS Programs, in order to integrate STD and HIV services within the San Mateo County Health System. The program aims to identify, prevent and treat Sexually Transmitted Diseases (STDs) and HIV, as well as monitor STD/HIV disease trends in San Mateo County.

Services of the STD/HIV Program

- Provide comprehensive primary and specialty medical care, psychosocial support and case management for persons living with HIV
- Provide STD and HIV screening and treatment through San Mateo County STD Clinic as well as mobile outreach and testing for high-risk populations
- Provide linkage to care services for newly diagnosed HIV-positive residents as well as HIV-positive patients who have fallen out of care
- Provide partner services for newly diagnosed HIV-positive patients as well as those already in care
- Provide HIV PrEP (Pre-Exposure Prophylaxis) information, referrals and linkage for high-risk individuals
- Provide STD and HIV prevention and treatment information through the San Mateo County Health web site: <http://www.smchealth.org/std>
- Conduct case and behavioral surveillance, analysis and reporting of syphilis, gonorrhea, chlamydia, and HIV
- Conduct analysis of disease trends using demographic, clinical, and interview data
- Conduct STD prevalence monitoring in high-risk settings such as STD clinic and correctional facilities
- Conduct disease intervention services, including field-delivered therapy and partner delivered therapy where appropriate
- Support training opportunities and distribute STD/HIV clinical educational materials to health care providers
- Partner with public and private laboratories offering STD/HIV testing
- Collaborate with public and private key stakeholders to identify and solve health problems

External partners include: California Department of Public Health, San Francisco Department of Public Health, San Francisco Mayor's Office of Housing, California STD/HIV Controllers Association.

Community partners include: Mental Health Association of San Mateo County, AIDS Community Research Consortium, Harm Reduction Therapy Center.

Funding and Grants

The STD/HIV Program received funding from the following sources in 2017:

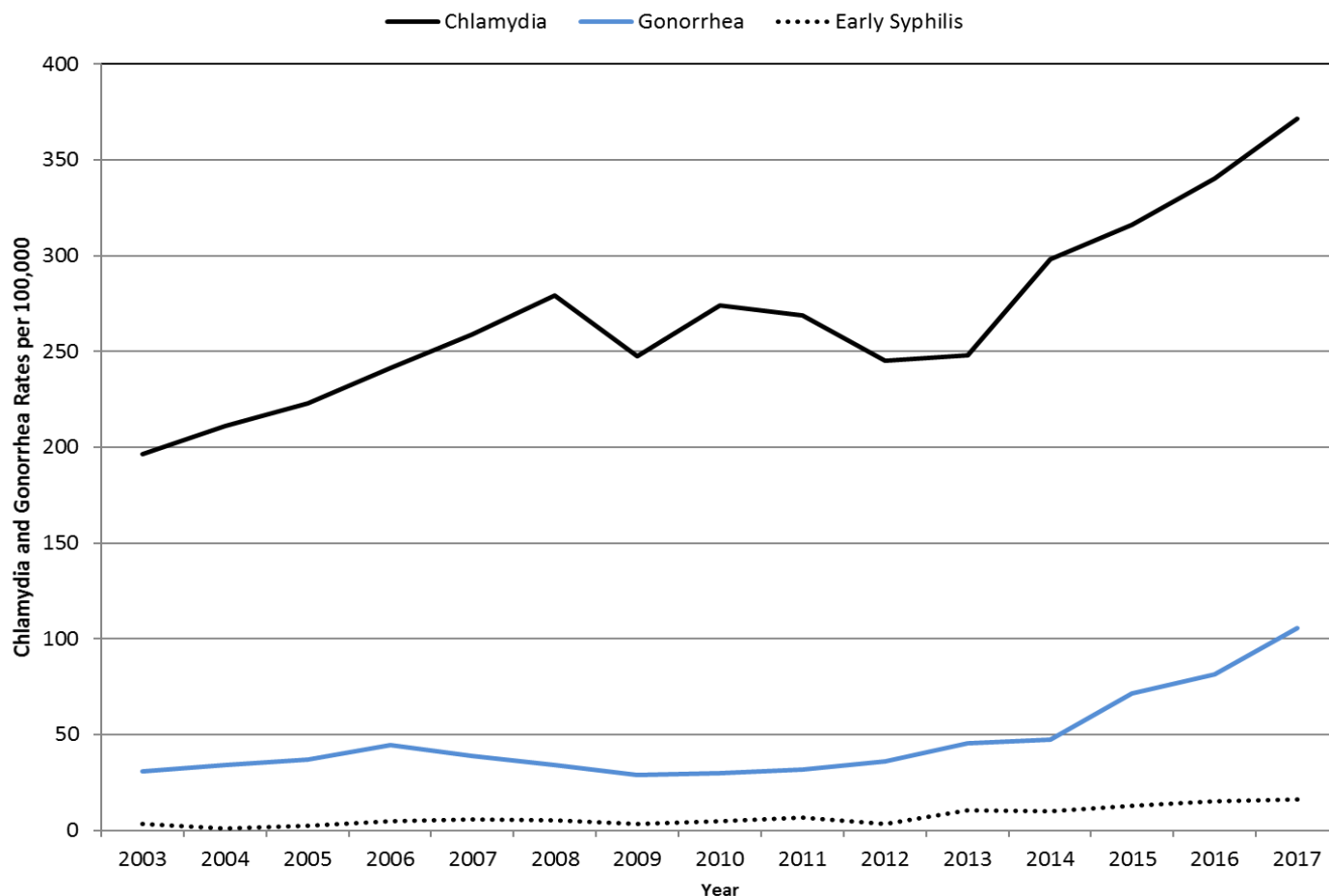
- San Mateo County General Fund
- Federal Health Resources and Services Administration (HRSA) - Ryan White Part A as part of the San Francisco Eligible Metropolitan Area (EMA)
- Federal Centers for Disease Control & Prevention (CDC) - HIV Prevention Funds through the California Department of Public Health – Office of AIDS
- Federal Housing and Urban Development (HUD) - Housing Opportunities for People with AIDS (HOPWA) as part of the San Francisco Eligible Metropolitan Statistical Area (EMSA)
- Federal Health Resources and Services Administration (HRSA) - Ryan White Part B through the California Department of Public Health – Office of AIDS

All Bacterial STDs In San Mateo County (SMC)

Overview

- SMC early syphilis cases (acquired in the last year) increased 7% in 2017 compared to 2016. Females comprised only 5% of SMC early syphilis cases in 2017.
- SMC gonorrhea (GC) case numbers and rates are the highest reported since 2000, with a 32% increase in cases compared to 2016. The GC male to female ratio is approximately 3:1. GC increased 41% in women and 29% in men compared to 2016.
- Chlamydia trachomatis (CT) cases increased 11% in 2017 compared to 2016.
- Statewide and nationally, all three notifiable STDs increased compared to 2016 and the prior five years.
- SMC rates are below California rates for all three notifiable STDs.
- The drivers of these increases are likely multifactorial with possible reasons including increased disease incidence, increased oral and rectal screening in men who have sex with men (MSM,) less condom use in the setting of HIV pre-exposure prophylaxis (PrEP) and the role of apps in meeting sexual partners.
- Programmatic priorities are MSM screening for rectal and throat GC and CT, provider adherence to recommended dual treatment regimens for GC to prevent emergence of resistance, assuring timely syphilis treatment and partner services especially for women of reproductive age and improving HIV PrEP access and rapid linkage to care and antiretroviral start for newly HIV infected persons.

Figure 1. STD Rates by Year in San Mateo County, 2003-2017



Early Syphilis is defined as primary, secondary, and early latent syphilis stages of disease. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CaREDIE) system and the Automated Vital Statistics System (AVSS).

All Bacterial STDs

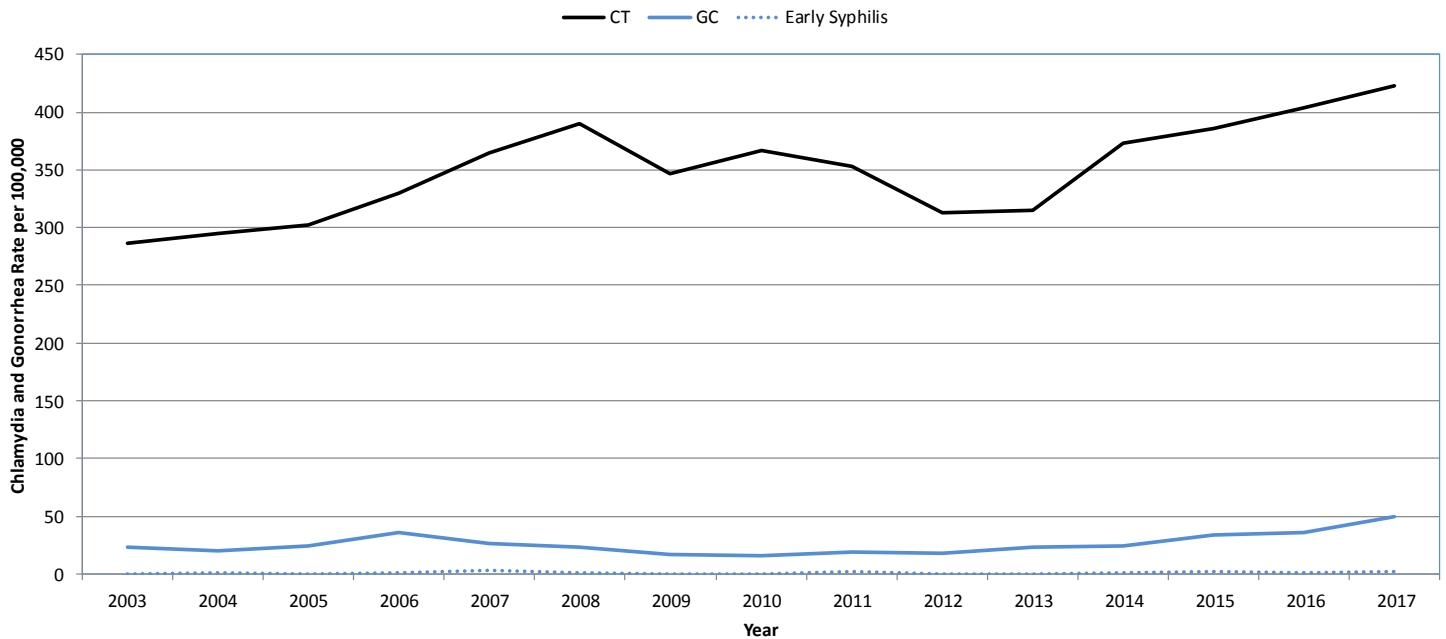
Table 1. STD Cases and Rates by Year Reported in San Mateo County, 2003-2017

| Reported Cases | | | | | | | | | | | | | | | |
|--|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| Chlamydia | 1376 | 1480 | 1560 | 1687 | 1823 | 1986 | 1773 | 1972 | 1957 | 1803 | 1839 | 2228 | 2378 | 2579 | 2873 |
| Gonorrhea | 215 | 239 | 259 | 310 | 273 | 241 | 206 | 214 | 231 | 265 | 337 | 355 | 539 | 618 | 815 |
| Syphilis (Total) | 44 | 13 | 47 | 57 | 75 | 60 | 37 | 51 | 69 | 48 | 101 | 117 | 153 | 168 | 192 |
| Primary | 9 | 2 | 5 | 10 | 4 | 15 | 8 | 9 | 7 | 7 | 18 | 20 | 12 | 19 | 36 |
| Secondary | 5 | 2 | 10 | 17 | 22 | 11 | 11 | 13 | 28 | 7 | 39 | 30 | 43 | 41 | 26 |
| Early Latent | 8 | 2 | 2 | 7 | 13 | 11 | 5 | 13 | 13 | 9 | 22 | 24 | 41 | 55 | 61 |
| (Total Early Syphilis ¹) | 22 | 6 | 17 | 34 | 39 | 37 | 24 | 35 | 48 | 23 | 79 | 74 | 96 | 115 | 123 |
| Late Latent | 22 | 7 | 30 | 23 | 35 | 21 | 13 | 16 | 19 | 25 | 22 | 43 | 56 | 53 | 69 |
| Neurosyphilis² | 1 | 0 | 1 | 0 | 0 | 0 | 2 | 0 | 2 | 2 | 1 | 0 | 2 | 2 | 4 |
| Congenital Syphilis³ | 0 | 0 | 0 | 0 | 1 | 2 | 0 | 0 | 2 | 0 | 0 | 0 | 1 | 0 | 0 |
| Rate⁴ | | | | | | | | | | | | | | | |
| | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
| Chlamydia | 196.2 | 211.0 | 223.1 | 241.2 | 258.8 | 279.2 | 247.5 | 274.1 | 268.9 | 245.1 | 247.9 | 298.1 | 315.9 | 340.4 | 371.7 |
| Gonorrhea | 30.7 | 34.1 | 37.0 | 44.3 | 38.8 | 33.9 | 28.8 | 29.7 | 31.7 | 36.0 | 45.4 | 47.5 | 71.6 | 81.6 | 105.4 |
| Syphilis (Total) | 6.3 | 1.9 | 6.7 | 8.1 | 10.5 | 8.2 | 5.2 | 7.1 | 9.5 | 6.5 | 13.6 | 15.7 | 20.3 | 22.2 | 24.8 |
| Primary | 1.3 | 0.3 | 0.7 | 1.4 | 0.6 | 2.1 | 1.1 | 1.3 | 1.0 | 1.0 | 2.4 | 2.7 | 1.6 | 2.5 | 4.7 |
| Secondary | 0.7 | 0.3 | 1.4 | 2.4 | 3.1 | 1.5 | 1.5 | 1.8 | 3.8 | 1.0 | 5.3 | 4.0 | 5.7 | 5.4 | 3.4 |
| Early Latent | 1.1 | 0.3 | 0.3 | 1.0 | 1.8 | 1.5 | 0.7 | 1.8 | 1.8 | 1.2 | 3.0 | 3.2 | 5.4 | 7.3 | 7.9 |
| (Total Early Syphilis ¹) | 3.1 | 0.9 | 2.4 | 4.9 | 5.5 | 5.2 | 3.4 | 4.9 | 6.6 | 3.1 | 10.6 | 9.9 | 12.8 | 15.2 | 15.9 |
| Late Latent | 3.1 | 1.0 | 4.3 | 3.3 | 5.0 | 3.0 | 1.8 | 2.2 | 2.6 | 3.4 | 3.0 | 5.8 | 7.4 | 7.0 | 8.9 |
| Neurosyphilis² | 0.1 | 0.0 | 0.1 | 0.0 | 0.0 | 0.0 | 0.3 | 0.0 | 0.3 | 0.3 | 0.1 | 0.0 | 0.3 | 0.3 | 0.5 |
| Congenital Syphilis³ | 0.0 | 0.0 | 0.0 | 0.0 | 10.1 | 20.5 | 0.0 | 0.0 | 22.1 | 0.0 | 0.0 | 0.0 | 11.2 | 0.0 | 0.0 |

¹Early syphilis includes primary, secondary and early latent syphilis stages. ² Neurosyphilis cases are a sequelae of syphilis and not a stage, neurosyphilis cases are captured under other syphilis stages. ³Rates equal cases per 100,000 live births per year based on CA Department of Finance, Demographic Research Unit, Historical and Projected Births by County. ⁴Rates equal cases per 100,000 residents per year based on population data from the California Department of Finance. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS).

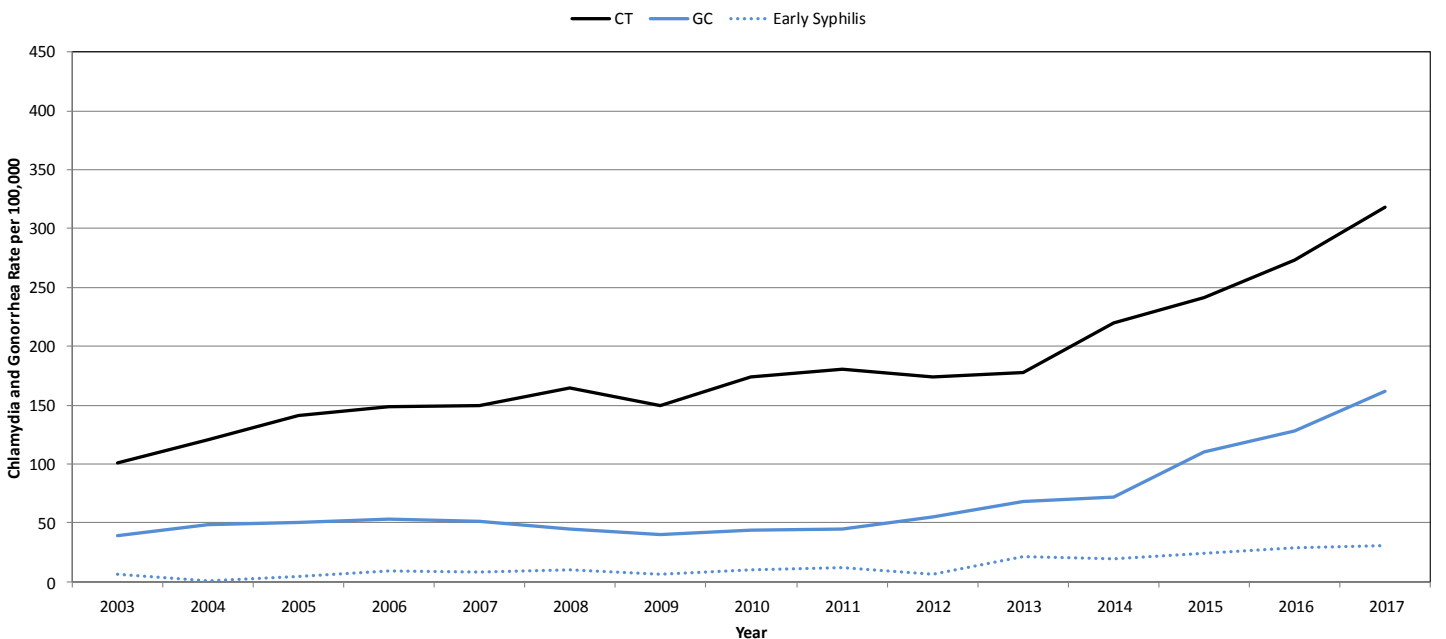
All Bacterial STDs

Figure 2. STD Rates For Females by Year in San Mateo County, 2003-2017



Early Syphilis is defined as primary, secondary, and early latent syphilis stages of disease. Note difference in scale for Early Syphilis. Rates equal cases per 100,000 female residents per year based on population data from the California Department of Finance. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS).

Figure 3. STD Rates For Males by Year in San Mateo County, 2003-2017



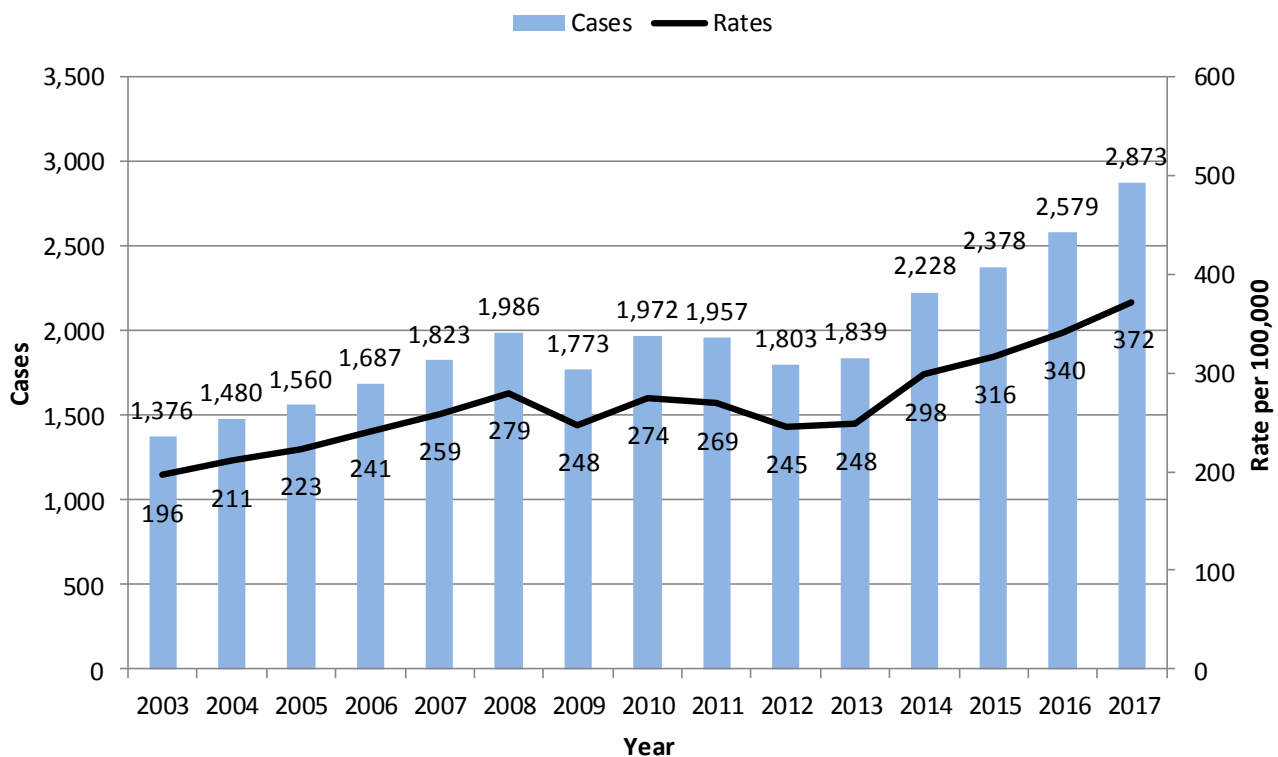
Early Syphilis is defined as primary, secondary, and early latent syphilis stages of disease. Note difference in scale for Early Syphilis. Rates equal cases per 100,000 male residents per year based on population data from the California Department of Finance. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS).

Chlamydia

Overview

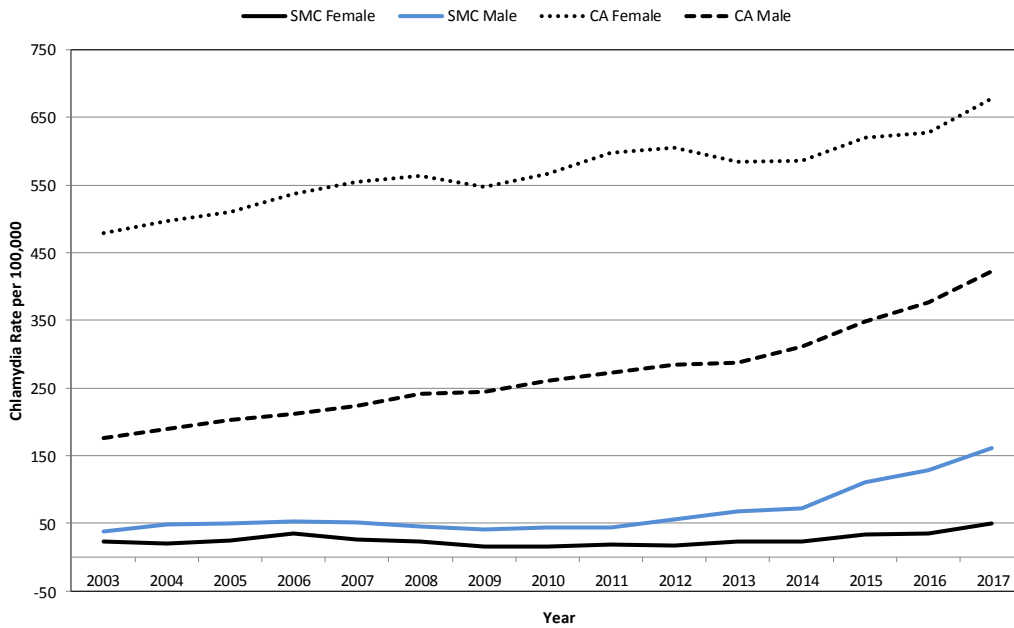
- SMC chlamydia trachomatis (CT) cases increased 19% in men and 6% in women in 2017 compared to 2016 .
- SMC CT rates remain below California CT rates for both males and females.
- The largest number of female CT cases were in women age 20-24 years.
- Given approximately half of all CT cases are asymptomatic, screening in women age 25 and under, MSM, and high risk heterosexuals is recommended at least annually or more frequently based on risk.
- In August 2017, the California Department of Public Health implemented auto-closing of CT cases statewide in CalREDIE, the state surveillance database, due to the high volume of cases. This means CT infections are not investigated for treatment by Health Department staff unless the provider requests assistance or pregnancy documented by provider when case reported.

Figure 4. Chlamydia Cases and Rates by Year San Mateo County, 2003-2017



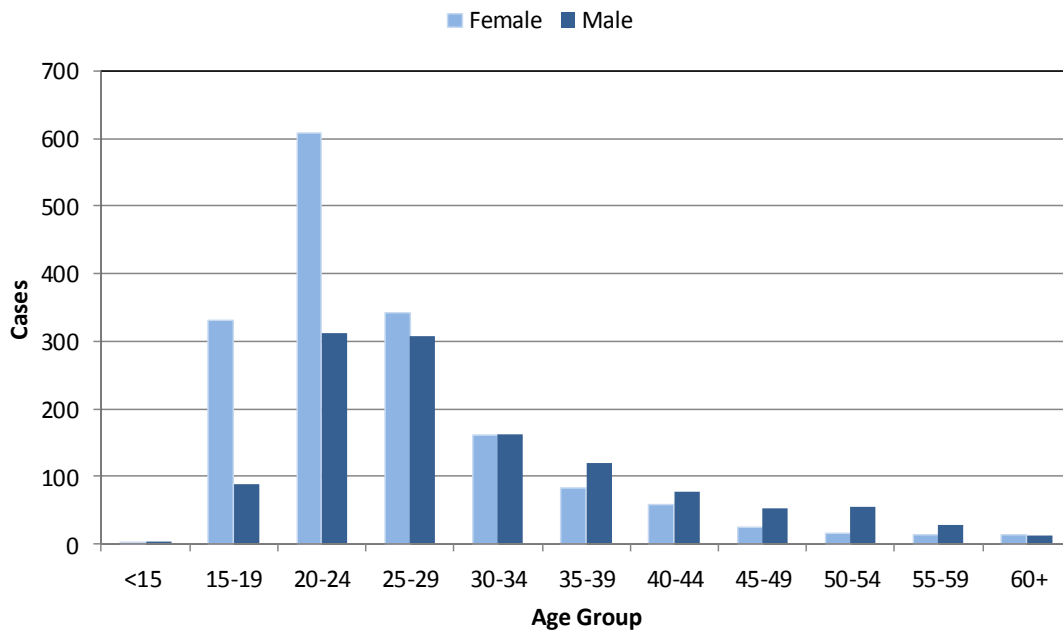
Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS). Rates equal cases per 100,000 residents per year based on population data from the California Department of Finance.

Figure 5. Chlamydia Rates By Sex and Year in San Mateo County and State of California, 2003-2017



Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS). Data for California rates was provided by the California Department of Public Health STD Control Branch. Rates equal cases per 100,000 sex specific residents per year based on population data from the California Department of Finance.

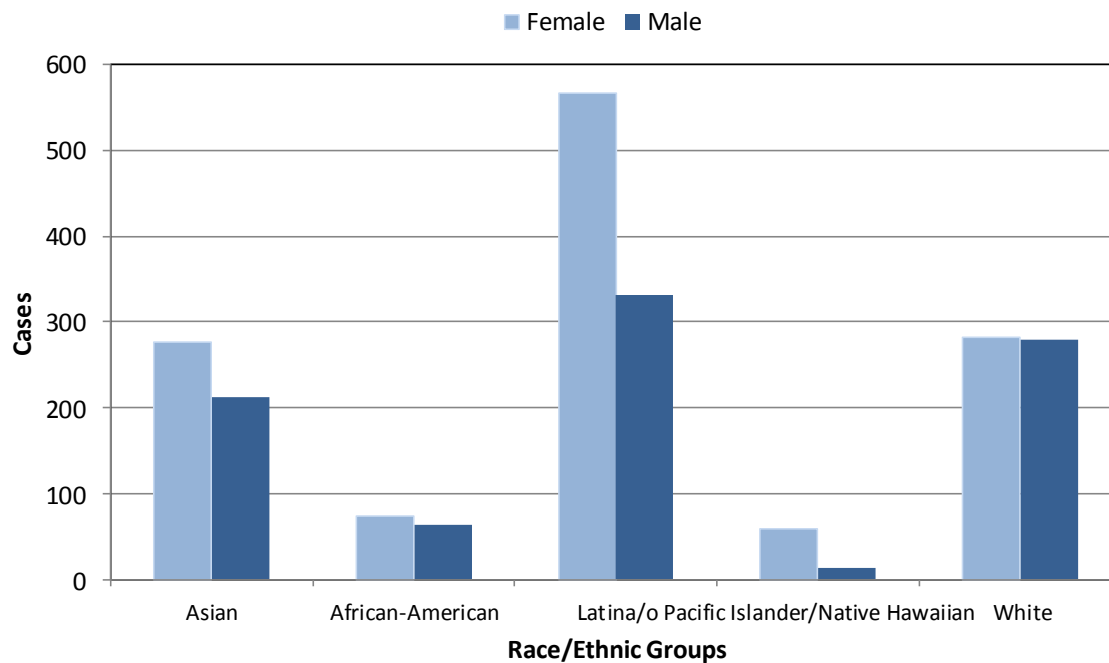
Figure 6. Chlamydia Cases by Sex and Age in San Mateo County, 2017



Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system.

Chlamydia

**Figure 7. Chlamydia Cases by Sex and Selected Race/Ethnic Groups
San Mateo County, 2017 (n=2,159)**



Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system.

Chlamydia

Table 2. Chlamydia Cases and Rates by Demographic and Clinical Characteristics by Sex in San Mateo County, 2016 and 2017

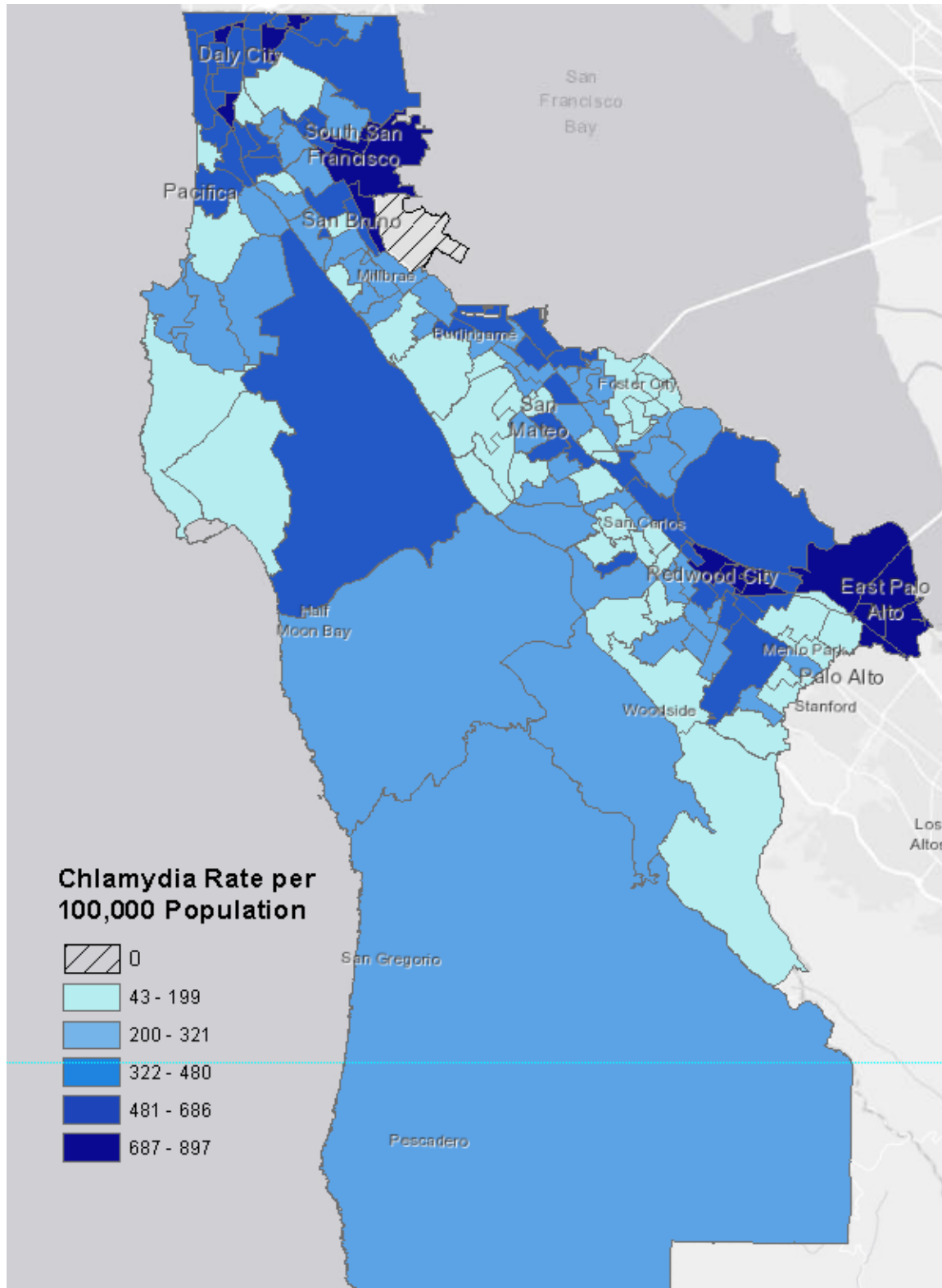
| | <u>Women</u> | | | | | | <u>Men</u> | | | | | |
|-----------------------------------|--------------|---------|-------------------|-------|---------|-------------------|------------|---------|-------------------|-------|---------|-------------------|
| | 2016 | | | 2017 | | | 2016 | | | 2017 | | |
| | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ |
| County Total | 2,579 | 100 | 340.4 | 2,873 | 100 | 371.7 | 2,579 | 100 | 340.4 | 2,873 | 100 | 371.7 |
| Sex Total | 1,555 | 60.3 | 403.9 | 1,654 | 57.6 | 422.4 | 1,018 | 39.5 | 273.2 | 1,214 | 42.3 | 318.3 |
| Age | | | | | | | | | | | | |
| <15 | 9 | 0.6 | 13.6 | 3 | 0.2 | 4.5 | 0 | 0.0 | 0.0 | 1 | 0.1 | 1.1 |
| 15-19 | 306 | 19.7 | 1423.9 | 331 | 20.0 | 1668.5 | 87 | 8.5 | 385.2 | 88 | 7.2 | 419.9 |
| 20-24 | 608 | 39.1 | 2815.2 | 609 | 36.8 | 3084.2 | 247 | 24.3 | 1087.5 | 313 | 25.8 | 1525.8 |
| 25-29 | 287 | 18.5 | 1509.5 | 342 | 20.7 | 1605.5 | 241 | 23.7 | 1113.7 | 307 | 25.3 | 1291.5 |
| 30-34 | 170 | 10.9 | 701.6 | 160 | 9.7 | 620.0 | 157 | 15.4 | 616.5 | 162 | 13.3 | 598.8 |
| 35-39 | 74 | 4.8 | 280.5 | 82 | 5.0 | 307.3 | 114 | 11.2 | 431.8 | 119 | 9.8 | 437.5 |
| 40-44 | 53 | 3.4 | 198.8 | 58 | 3.5 | 209.5 | 61 | 6.0 | 232.5 | 78 | 6.4 | 279.6 |
| 45-49 | 19 | 1.2 | 67.2 | 25 | 1.5 | 83.0 | 52 | 5.1 | 190.3 | 53 | 4.4 | 178.7 |
| 50-54 | 12 | 0.8 | 42.2 | 16 | 1.0 | 56.0 | 26 | 2.6 | 95.7 | 54 | 4.4 | 193.2 |
| 55-59 | 9 | 0.6 | 32.1 | 13 | 0.8 | 47.1 | 22 | 2.2 | 83.0 | 27 | 2.2 | 103.1 |
| 60+ | 8 | 0.5 | 8.5 | 13 | 0.8 | 13.3 | 10 | 1.0 | 13.0 | 11 | 0.9 | 13.8 |
| Missing | 0 | 0.0 | - | 2 | 0.1 | - | 1 | 0.1 | - | 1 | 0.1 | - |
| Race/Ethnicity | | | | | | | | | | | | |
| American Indian/Alaskan | 3 | 0.2 | 479.2 | 3 | 0.2 | 499.2 | 1 | 0.1 | 170.1 | 3 | 0.2 | 500.0 |
| Asian | 199 | 12.8 | 191.3 | 277 | 16.7 | 264.1 | 113 | 11.1 | 124.4 | 213 | 17.5 | 228.7 |
| African-American | 80 | 5.1 | 852.7 | 73 | 4.4 | 765.3 | 62 | 6.1 | 644.2 | 64 | 5.3 | 665.9 |
| Latina/o | 579 | 37.2 | 592.2 | 567 | 34.3 | 570.0 | 279 | 27.4 | 278.5 | 332 | 27.3 | 324.9 |
| Multirace | 13 | 0.8 | 99.2 | 9 | 0.5 | 66.5 | 1 | 0.1 | 7.6 | 2 | 0.2 | 14.6 |
| Pacific Islander | 44 | 2.8 | 766.2 | 59 | 3.6 | 990.4 | 20 | 2.0 | 341.9 | 13 | 1.1 | 243.0 |
| White | 273 | 17.6 | 176.8 | 282 | 17.0 | 179.0 | 285 | 28.0 | 187.0 | 279 | 23.0 | 177.9 |
| Other/Unknown ³ | 364 | 23.4 | - | 384 | 23.2 | - | 257 | 25.2 | - | 308 | 25.4 | - |
| Clinical Site of Infection | | | | | | | | | | | | |
| Urine | 624 | 40.1 | - | 664 | 40.1 | - | 599 | 58.8 | - | 662 | 54.5 | - |
| Genitourinary | 620 | 39.9 | - | 689 | 41.7 | - | 22 | 2.2 | - | 19 | 1.6 | - |
| Rectal/Pharyngeal | 3 | 0.2 | - | 6 | 0.4 | - | 179 | 17.6 | - | 252 | 20.8 | - |
| Other/Unknown | 308 | 19.8 | - | 295 | 17.8 | - | 218 | 21.4 | - | 281 | 23.1 | - |

Case data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE). ¹ Rates equal cases per 100,000 sex and age or race/ethnicity specific residents per year based on population data from the California Department of Finance. ² Race/ethnicity data not available for many cases as positive tests for infections are automatically reported to testing laboratories and no follow-up interviews are conducted for chlamydia cases. Note: There were 6 transgender CT cases in 2016 and 5 transgender CT cases in 2017.

The Geography of Chlamydia in San Mateo County

The highest rates of chlamydia infections in 2017 were seen in census tracts in parts of Daly City, East Palo Alto, Redwood City, and South San Francisco.

Figure 8. Chlamydia Rates by Census Tract in San Mateo County, 2017



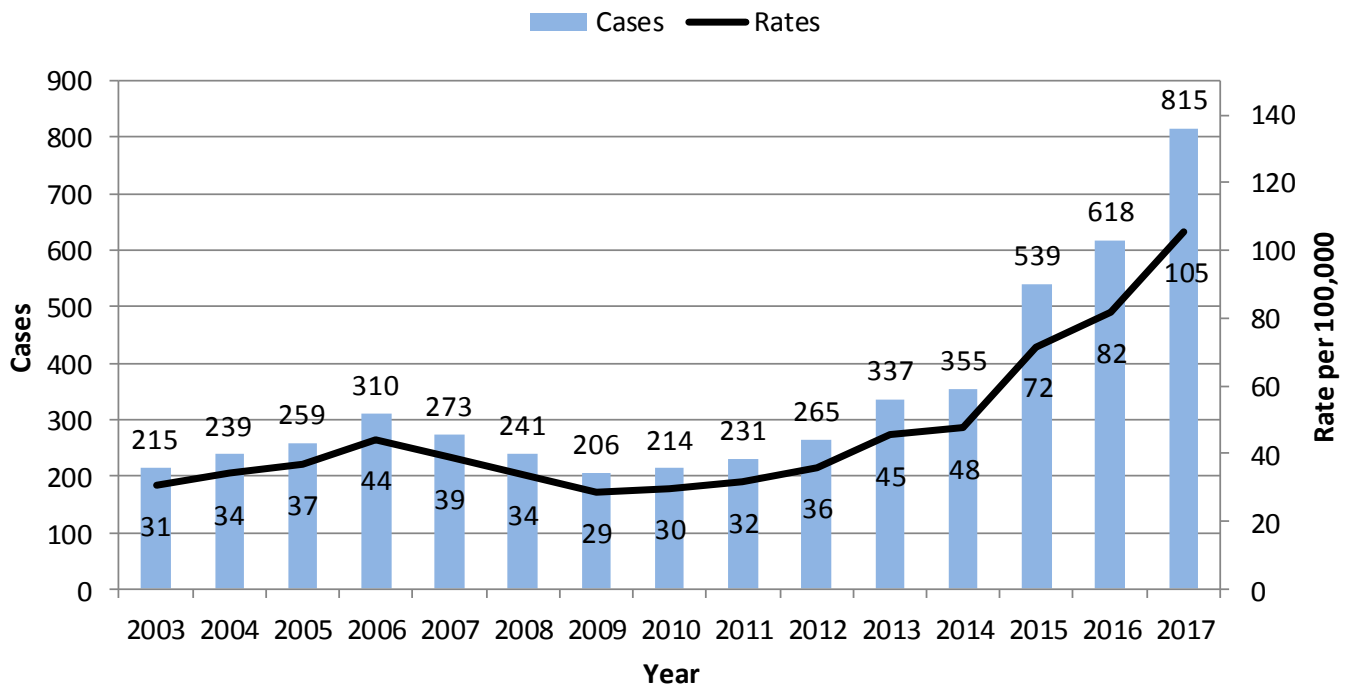
Case data based on California Reportable Disease Information Exchange (CalREDIE) San Mateo County. Rates equal count of 2017 chlamydia cases per census tract population.

Gonorrhea

Overview

- SMC gonorrhea (GC) case numbers and rates are the highest reported since 2000, with a 41% increase in female GC cases and a 29% increase in male GC cases in 2017 compared to 2016.
- In California, 2017 gonorrhea cases increased 16% compared to 2016, with the highest statewide gonorrhea case numbers and rates since the early 1990s.
- Over one quarter, 27% of GC cases occurred in persons under 25 years of age compared to one third of statewide GC cases.
- In males, rectal and throat GC made up the majority of reported infections.
- California rates of decreased susceptibility to antibiotics used in current gonorrhea treatments remains low. The San Mateo County (SMC) Public Health Lab participates in a surveillance gonorrhea culture pilot project to maintain lab culture capacity.

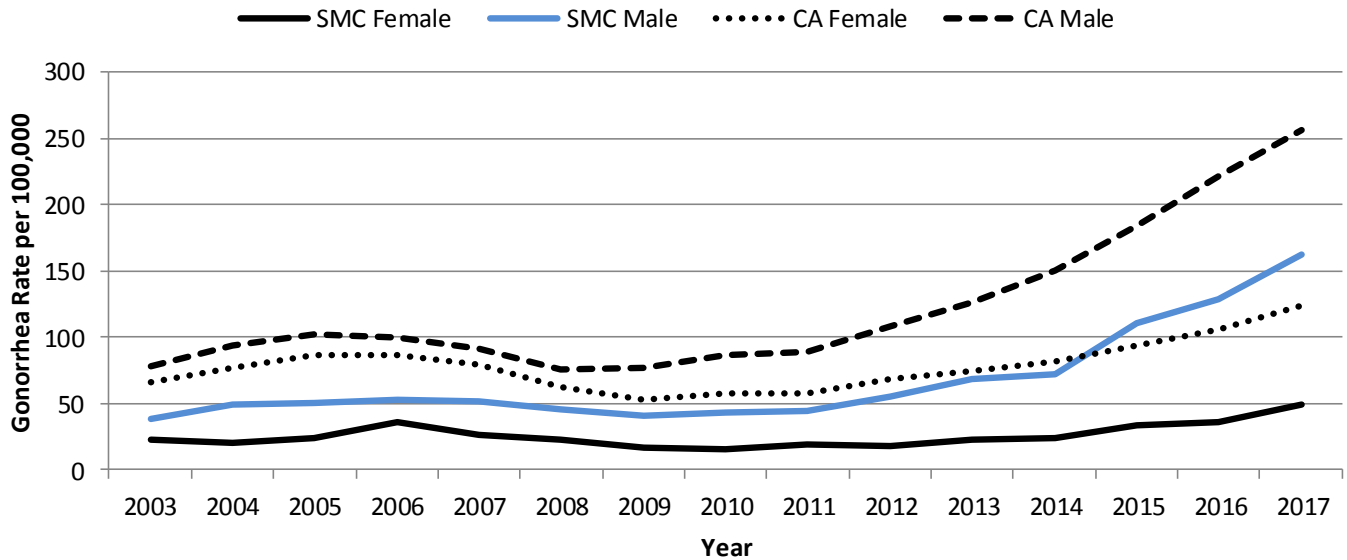
Figure 9. Gonorrhea Cases and Rates by Year San Mateo County, 2003-2017



Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS). Rates equal cases per 100,000 residents per year based on census data from the California Department of Finance.

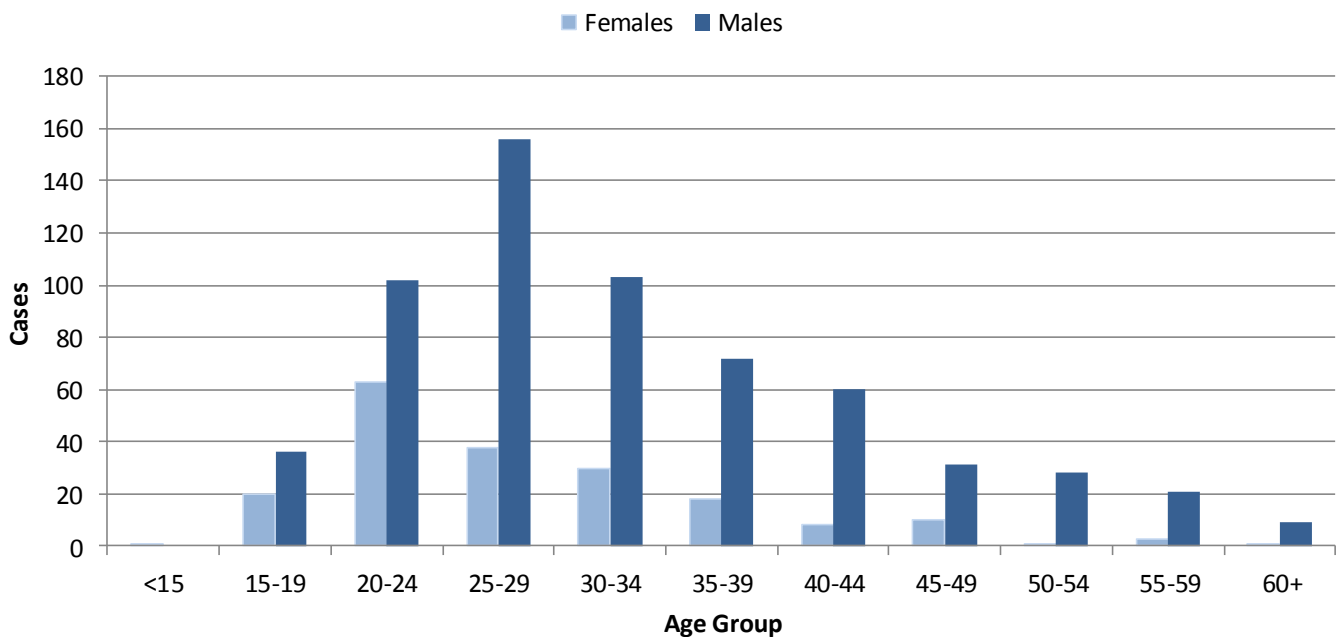
Gonorrhea

Figure 10. Gonorrhea Rates By Sex and Year in San Mateo County and State of California, 2003-2017



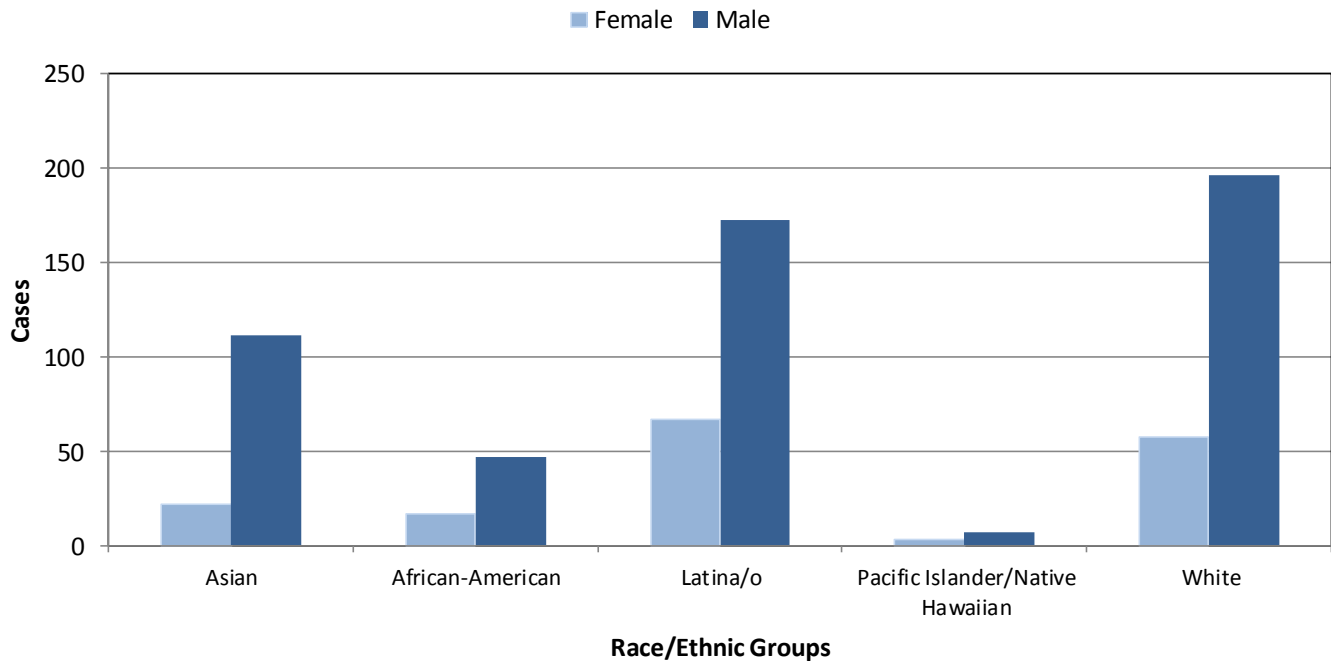
Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS). Data for California rates was provided by the California Department of Public Health STD Control Branch. Rates equal cases per 100,000 sex specific residents per year based on population data from the California Department of Finance.

Figure 11. Gonorrhea Cases by Sex and Age in San Mateo County, 2017



Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system.

Figure 12. Gonorrhea Cases By Sex and Selected Race/Ethnic Groups in San Mateo County, 2017 (n=533)



Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system.

Table 3. Gonorrhea Cases and Rates by Demographic and Clinical Characteristics by Sex in San Mateo County, 2016 and 2017

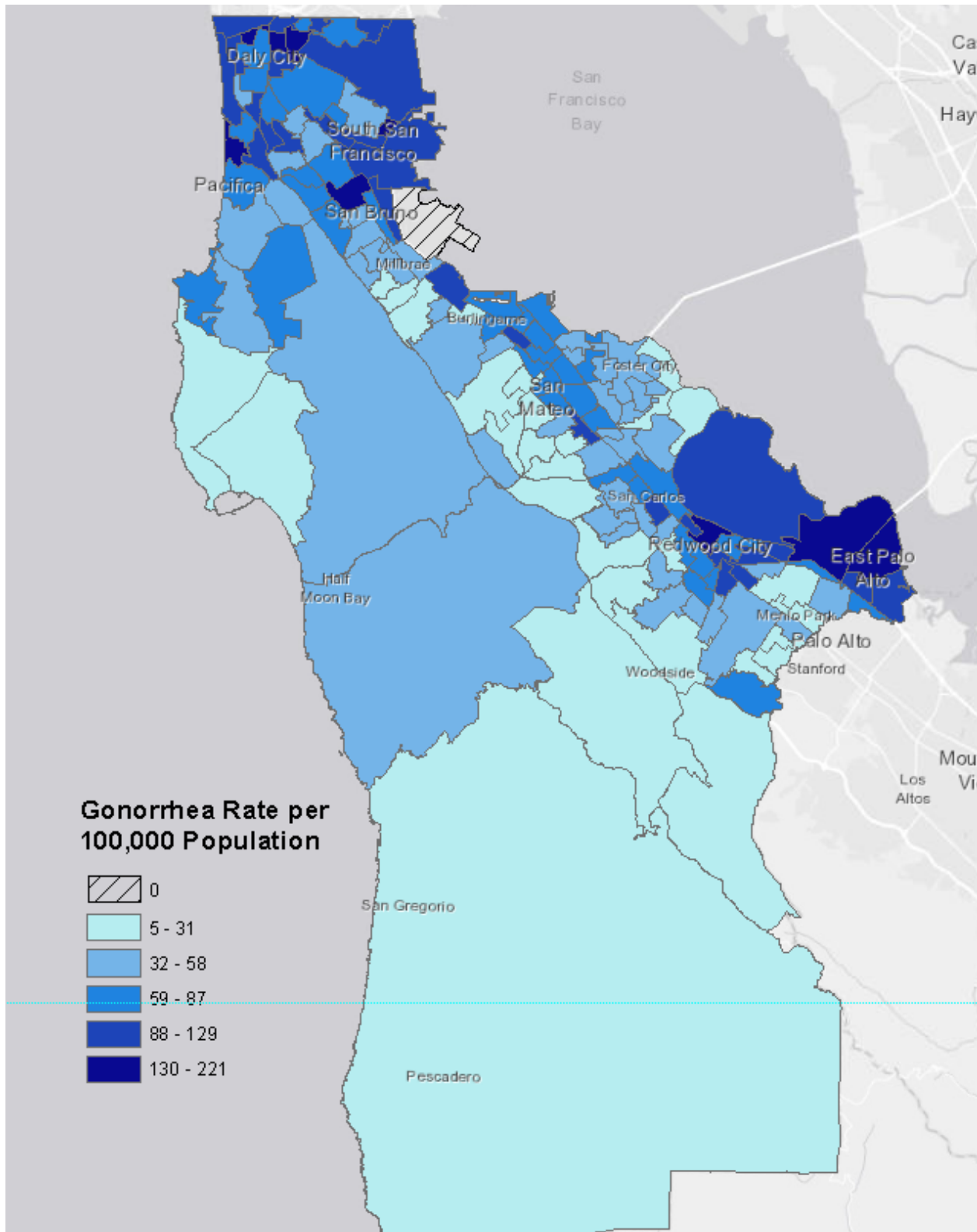
| | <u>Women</u> | | | | | | <u>Men</u> | | | | | |
|-----------------------------------|--------------|---------|-------------------|-------|---------|-------------------|------------|---------|-------------------|-------|---------|-------------------|
| | 2016 | | | 2017 | | | 2016 | | | 2017 | | |
| | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ |
| County Total | 618 | 100 | 81.6 | 815 | 100 | 105.4 | 618 | 100 | 81.6 | 815 | 100 | 105.4 |
| Sex Total | 137 | 22.2 | 35.6 | 193 | 23.7 | 49.3 | 479 | 77.5 | 128.6 | 618 | 75.8 | 162.0 |
| Age | | | | | | | | | | | | |
| <15 | 0 | 0.0 | 0.0 | 1 | 0.5 | 1.5 | 1 | 0.2 | 1.4 | 0 | 0.0 | 0.0 |
| 15-19 | 18 | 13.1 | 83.8 | 20 | 10.4 | 100.8 | 21 | 4.4 | 93.0 | 36 | 5.8 | 171.8 |
| 20-24 | 35 | 25.5 | 162.1 | 63 | 32.6 | 319.1 | 97 | 20.3 | 427.1 | 102 | 16.5 | 497.2 |
| 25-29 | 31 | 22.6 | 163.0 | 38 | 19.7 | 178.4 | 115 | 24.0 | 531.4 | 156 | 25.2 | 656.3 |
| 30-34 | 27 | 19.7 | 111.4 | 30 | 15.5 | 116.2 | 81 | 16.9 | 318.1 | 103 | 16.7 | 380.7 |
| 35-39 | 14 | 10.2 | 53.1 | 18 | 9.3 | 67.5 | 66 | 13.8 | 250.0 | 72 | 11.7 | 264.7 |
| 40-44 | 5 | 3.6 | 18.8 | 8 | 4.1 | 28.9 | 32 | 6.7 | 122.0 | 60 | 9.7 | 215.1 |
| 45-49 | 4 | 2.9 | 14.1 | 10 | 5.2 | 33.2 | 22 | 4.6 | 80.5 | 31 | 5.0 | 104.5 |
| 50-54 | 0 | 0.0 | 0.0 | 1 | 0.5 | 3.5 | 21 | 4.4 | 77.3 | 28 | 4.5 | 100.2 |
| 55-59 | 3 | 2.2 | 10.7 | 3 | 1.6 | 10.9 | 12 | 2.5 | 45.3 | 21 | 3.4 | 80.2 |
| 60+ | 0 | 0.0 | 0.0 | 1 | 0.5 | 1.0 | 11 | 2.3 | 14.2 | 9 | 1.5 | 11.3 |
| Race/Ethnicity | | | | | | | | | | | | |
| American Indian/Alaskan | 1 | 0.7 | 159.7 | 1 | 0.5 | 166.4 | 1 | 0.2 | 170.1 | 3 | 0.5 | 500.0 |
| Asian | 20 | 14.6 | 19.2 | 22 | 11.4 | 21.0 | 54 | 11.3 | 59.5 | 111 | 18.0 | 119.2 |
| African-American | 12 | 8.8 | 127.9 | 17 | 8.8 | 178.2 | 46 | 9.6 | 477.9 | 47 | 7.6 | 489.0 |
| Latina/o | 44 | 32.1 | 45.0 | 67 | 34.7 | 67.4 | 137 | 28.6 | 136.7 | 172 | 27.8 | 168.3 |
| Multirace | 0 | 0.0 | 0.0 | 3 | 1.6 | 22.2 | 1 | 0.2 | 7.6 | 2 | 0.3 | 14.6 |
| Pacific Islander | 4 | 2.9 | 69.7 | 3 | 1.6 | 50.4 | 5 | 1.0 | 85.5 | 7 | 1.1 | 130.8 |
| White | 32 | 23.4 | 20.7 | 57 | 29.5 | 36.2 | 175 | 36.5 | 114.8 | 196 | 31.7 | 125.0 |
| Other/Unknown ² | 24 | 17.5 | - | 23 | 11.9 | - | 60 | 12.5 | - | 80 | 12.9 | - |
| Clinical Site of Infection | | | | | | | | | | | | |
| Urine | 61 | 44.5 | - | 88 | 45.6 | - | 206 | 43.0 | - | 264 | 42.7 | - |
| Genitourinary | 56 | 40.9 | - | 92 | 47.7 | - | 28 | 5.8 | - | 28 | 4.5 | - |
| Rectal/Pharyngeal | 1 | 0.7 | - | 4 | 2.1 | - | 197 | 41.1 | - | 293 | 47.4 | - |
| Other/Unknown | 19 | 13.9 | - | 9 | 4.7 | - | 48 | 10.0 | - | 33 | 5.3 | - |

Case data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE). ¹Rates equal cases per 100,000 sex and age or race/ethnicity specific residents per year based on population data from the California Department of Finance. ²Race/ethnicity data not available for many cases as positive tests for infections are automatically reported to testing laboratories and no follow-up interviews are conducted for gonorrhea cases. Note: There was 2 transgender GC cases in 2016 and 4 transgender GC cases in 2017.

The Geography of Gonorrhea in San Mateo County

- The highest rates of gonorrhea infections in 2013-2017 were seen in census tracts in parts of Daly City, East Palo Alto, Pacifica, Redwood City, San Bruno, and South San Francisco.

Figure 13. Gonorrhea Rates by Census Tract in San Mateo County, 2013-2017



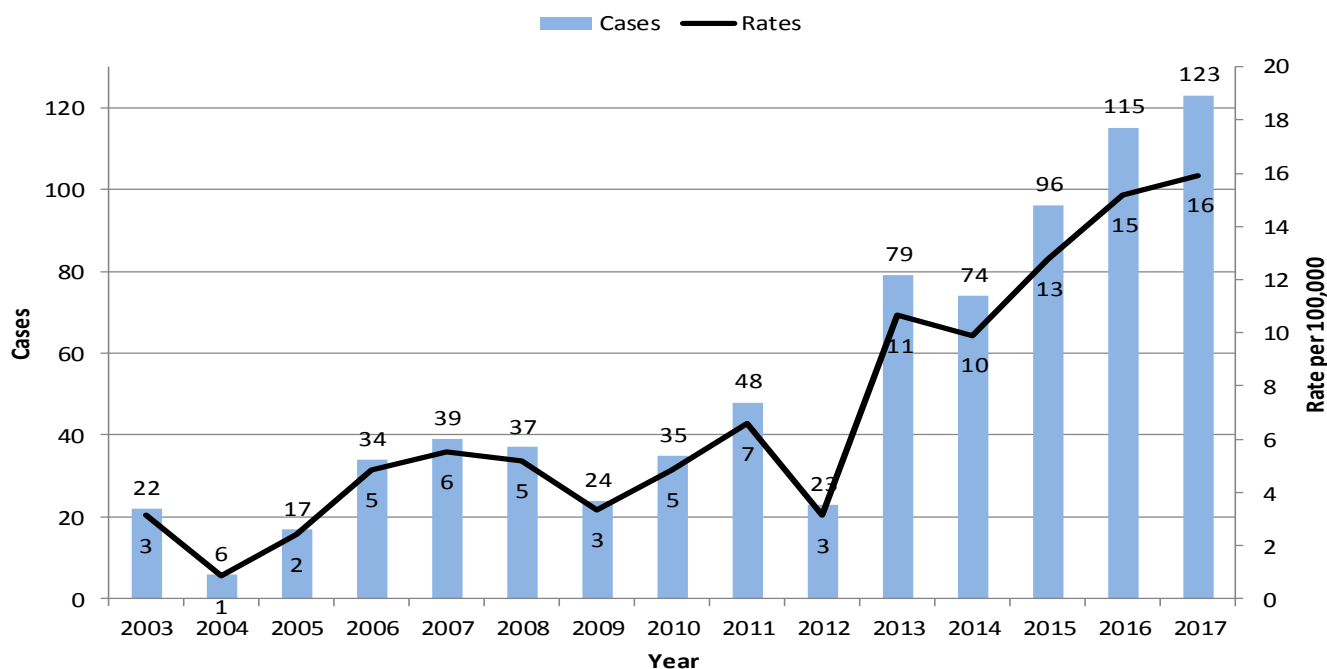
Case data based on California Reportable Disease Information Exchange (CalREDIE) San Mateo County. Rates equal count of 2013-2017 gonorrhea cases per census tract population.

Syphilis

Overview

- SMC total syphilis and early syphilis (defined as acquired in the last year) cases and rates increased in 2017 compared to 2016. SMC early syphilis cases increased 7% compared to last year.
- In 2017, 94% of SMC early syphilis cases were diagnosed in men, which is similar to 2016 (95% early syphilis cases in men).
- SMC had no congenital syphilis cases in 2017.
- California early syphilis cases increased 21% in 2017 compared to 2016. SMC male and female syphilis rates remain below California rates.
- SMC clinical providers should offer syphilis serology testing every 4-6 months to sexually active MSM and others at risk for syphilis infection.

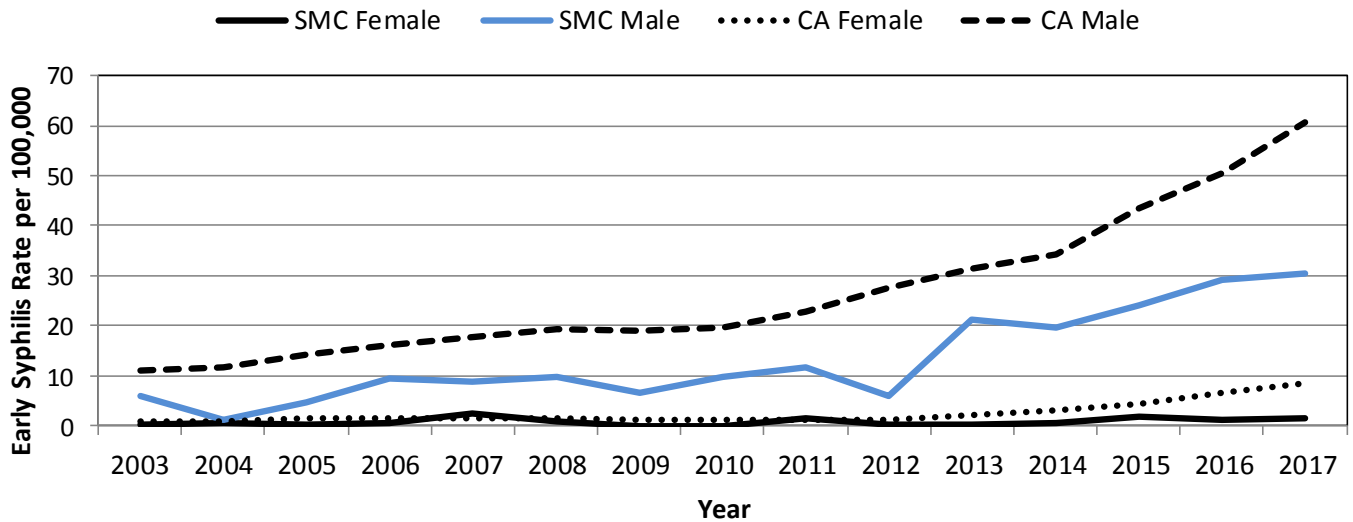
Figure 14. Early Syphilis Cases and Rates by Year San Mateo County, 2003-2017



Early Syphilis includes primary, secondary, and early latent stages of syphilis. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS). Rates equal cases per 100,000 residents per year based on population data from the California Department of Finance.

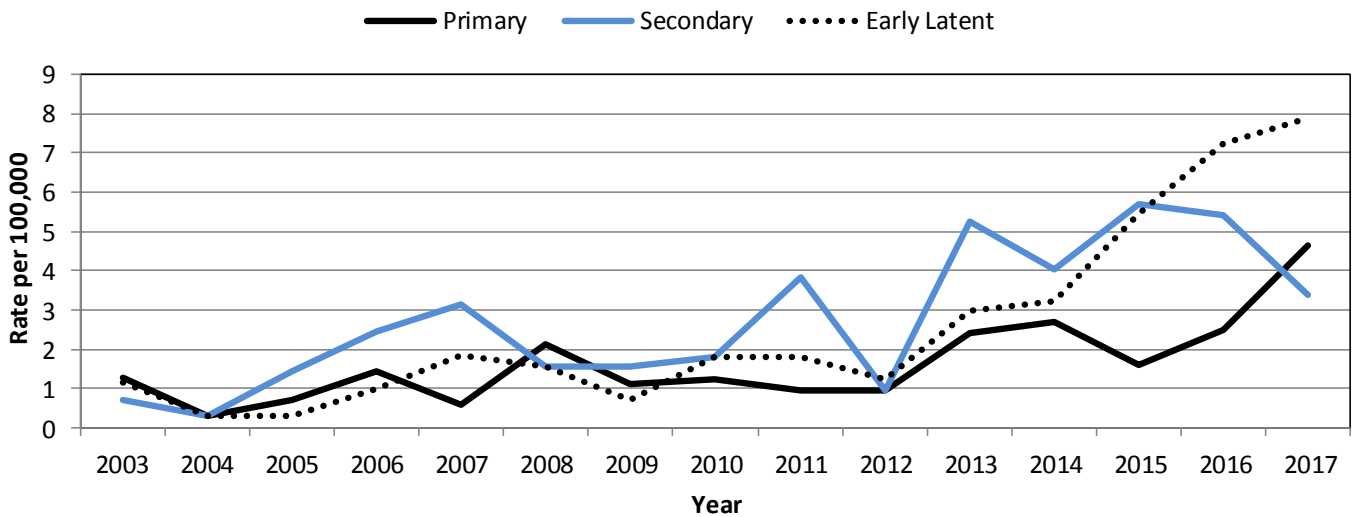
Syphilis

Figure 15. Early Syphilis Rates by Sex and Year in San Mateo County and State of California, 2003-2017



Early Syphilis includes primary, secondary, and early latent stages of syphilis. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS). Data for California rates was provided by the California Department of Public Health STD Control Branch. Rates equal cases per 100,000 residents per year based on population data from the California Department of Finance.

Figure 16. Early Syphilis Rates by Syphilis Stage and Year in San Mateo County, 2003-2017



Early Syphilis includes primary, secondary, and early latent stages of syphilis. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system and the Automated Vital Statistics System (AVSS). Rates equal cases per 100,000 residents per year based on population data from the California Department of Finance.

Table 4. Syphilis Cases and Rates by Syphilis Stage, Demographic Characteristics, and Risk Factors, San Mateo County, 2016 and 2017

| | 2016 | | | 2017 | | |
|---|-------|---------|-------------------|-------|---------|-------------------|
| | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ |
| Syphilis County Total | 168 | 100 | 22.2 | 192 | 100 | 24.8 |
| Primary | 19 | 11.3 | 2.5 | 36 | 18.8 | 4.7 |
| Secondary | 41 | 24.4 | 5.4 | 26 | 13.5 | 3.4 |
| Early Latent | 55 | 32.7 | 7.3 | 61 | 31.8 | 7.9 |
| Late Latent | 53 | 31.5 | 7.0 | 69 | 35.9 | 8.9 |
| Congenital Syphilis | 0 | 0.0 | 0.0 | 0 | 0.0 | 0.0 |
| Neurosyphilis | 2 | 1.2 | 0.3 | 4 | 2.1 | 0.5 |
| Early Syphilis² | 115 | 100.0 | 15.2 | 123 | 100.0 | 15.9 |
| Sex | | | | | | |
| Female | 4 | 3.5 | 1.0 | 6 | 4.9 | 1.5 |
| Male | 109 | 94.8 | 29.3 | 116 | 94.3 | 30.4 |
| Transgender | 2 | 1.7 | - | 1 | 0.8 | - |
| Ages | | | | | | |
| <15 years old | 0 | 0.0 | 0.0 | 0 | 0.0 | 0.0 |
| 15-19 | 4 | 3.5 | 9.1 | 5 | 4.1 | 12.3 |
| 20-24 | 18 | 15.7 | 40.6 | 13 | 10.6 | 32.3 |
| 25-29 | 14 | 12.2 | 34.4 | 26 | 21.1 | 57.7 |
| 30-34 | 13 | 11.3 | 26.2 | 21 | 17.1 | 39.7 |
| 35-39 | 10 | 8.7 | 18.9 | 14 | 11.4 | 26.0 |
| 40-44 | 18 | 15.7 | 34.0 | 10 | 8.1 | 18.0 |
| 45-49 | 14 | 12.2 | 25.2 | 13 | 10.6 | 21.8 |
| 50-54 | 10 | 8.7 | 18.0 | 8 | 6.5 | 14.2 |
| 55-59 | 7 | 6.1 | 12.8 | 8 | 6.5 | 14.9 |
| 60+ | 7 | 6.1 | 4.1 | 5 | 4.1 | 2.8 |
| Race/Ethnicity | | | | | | |
| American Indian/Alaska Native | 0 | 0.0 | 0.0 | 0 | 0.0 | 0.0 |
| Asian | 22 | 19.1 | 11.3 | 19 | 15.4 | 9.6 |
| African-American | 7 | 6.1 | 36.8 | 2 | 1.6 | 10.4 |
| Latina/o | 31 | 27.0 | 15.7 | 47 | 38.2 | 23.3 |
| Multirace | 2 | 1.7 | 7.6 | 0 | 0.0 | 0.0 |
| Pacific Islander/Hawaiian | 0 | 0.0 | 0.0 | 1 | 0.8 | 8.8 |
| White | 40 | 34.8 | 13.0 | 45 | 36.6 | 14.3 |
| Other/Unknown/Not Specified | 13 | 11.3 | - | 9 | 7.3 | - |
| Self Reported Risk Factors³ | | | | | | |
| MSM ⁴ | 94 | 86.2 | - | 101 | 87.1 | - |
| Anonymous Partners | 48 | 41.7 | - | 67 | 54.5 | - |
| HIV Coinfection ⁵ | 50 | 43.5 | - | 49 | 39.8 | - |

¹Rates equal cases per 100,000 residents per year based on population data from the California Department of Finance. ²Early Syphilis includes primary, secondary, and early latent stages of syphilis. ³Data missing for cases that could not be located or refused to be interviewed. ⁴Data on sex of partner for men was available for 95% (n=104) of 109 total male cases in 2016 and for 96% (n=111) of 116 total male cases in 2017. ⁵Data for HIV coinfections was not available (missing or refused) for 5 cases in 2016 and for 4 cases in 2017. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system.

Table 5. Syphilis Cases and Rates by Demographic Characteristics for All Syphilis Stages, San Mateo County, 2016 and 2017

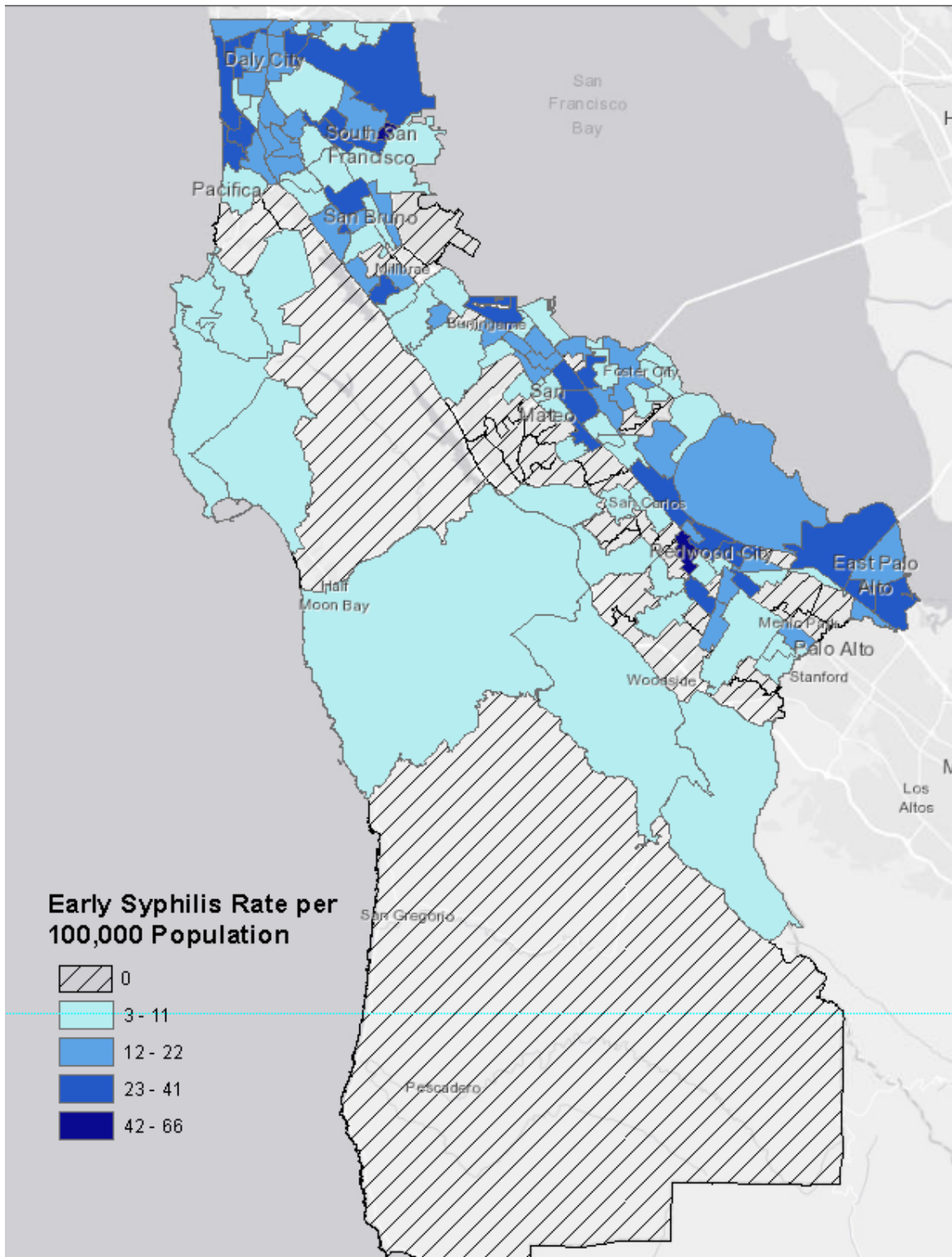
| | 2016 | | | 2017 | | |
|-------------------------------|-------|---------|-------------------|-------|---------|-------------------|
| | Cases | Percent | Rate ¹ | Cases | Percent | Rate ¹ |
| All Syphilis Stages | 192 | 100 | 24.8 | 168 | 100 | 22.2 |
| Sex | | | | | | |
| Female | 28 | 14.6 | 7.2 | 15 | 8.9 | 3.9 |
| Male | 163 | 84.9 | 42.7 | 151 | 89.9 | 40.5 |
| Transgender | 1 | 0.5 | - | 2 | 1.2 | - |
| Ages | | | | | | |
| <15 years old | 0 | 0.0 | 0.0 | 0 | 0.0 | 0.0 |
| 15-19 | 7 | 3.6 | 17.2 | 4 | 2.4 | 9.1 |
| 20-24 | 21 | 10.9 | 52.2 | 22 | 13.1 | 49.7 |
| 25-29 | 39 | 20.3 | 86.5 | 24 | 14.3 | 59.0 |
| 30-34 | 29 | 15.1 | 54.9 | 22 | 13.1 | 44.3 |
| 35-39 | 26 | 13.5 | 48.3 | 17 | 10.1 | 32.2 |
| 40-44 | 20 | 10.4 | 36.0 | 26 | 15.5 | 49.2 |
| 45-49 | 16 | 8.3 | 26.8 | 19 | 11.3 | 34.2 |
| 50-54 | 13 | 6.8 | 23.0 | 14 | 8.3 | 25.2 |
| 55-59 | 11 | 5.7 | 20.4 | 8 | 4.8 | 14.7 |
| 60+ | 10 | 5.2 | 5.6 | 12 | 7.1 | 7.0 |
| Race/Ethnicity | | | | | | |
| American Indian/Alaska Native | 0 | 0.0 | 0.0 | 0 | 0.0 | 0.0 |
| Asian | 26 | 13.5 | 13.1 | 29 | 17.3 | 14.9 |
| African-American | 9 | 4.7 | 47.0 | 10 | 6.0 | 52.6 |
| Latina/o | 75 | 39.1 | 37.2 | 55 | 32.7 | 27.8 |
| Multirace | 0 | 0.0 | 0.0 | 3 | 1.8 | 11.4 |
| Pacific Islander/Hawaiian | 1 | 0.5 | 8.8 | 1 | 0.6 | 8.6 |
| White | 55 | 28.6 | 17.5 | 46 | 27.4 | 15.0 |
| Other/Unknown/Not Specified | 26 | 13.5 | - | 24 | 14.3 | - |

¹Rates equal cases per 100,000 sex, age, and race/ethnic residents per year based on population data from the California Department of Finance. Data for San Mateo County is compiled from the California Reportable Disease Information Exchange (CalREDIE) system.

The Geography of Early Syphilis in San Mateo County

- The highest rates of early syphilis infections for 2013-2017 were seen in census tracts in parts of Pacifica, Redwood City, San Mateo, and South San Francisco.

Figure 17. Early Syphilis Rates by Census Tract in San Mateo County, 2013-2017



Case data based on California Reportable Disease Information Exchange (CalREDIE) San Mateo County. Rates equal count of 2013-2017 early syphilis cases per census tract population.

HIV –Overview and Newly Reported Cases

Overview

- Late testers, persons who receive an AIDS diagnosis within one year of an HIV diagnosis decreased from 24% in 2016 to 16% of newly reported HIV cases in 2017.
- Over two thirds, 69%, of newly reported HIV cases in 2017 identified as men who have sex with men (MSM).
- One fifth, 21%, of newly identified HIV cases did not specify a risk exposure category.
- Asian ethnicity increased among newly identified HIV cases to 23% while Latino/a decreased to 29% in 2017 compared to 2016.

Table 6. Newly Reported HIV Cases Among County Residents and Percentage of Late Testers by Year of Diagnosis, San Mateo County, 2005-2017¹

| | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|---|------|------|------|------|------|------|------|------|------|------|------|
| HIV Cases | 41 | 50 | 46 | 57 | 75 | 69 | 51 | 69 | 65 | 58 | 62 |
| Late Testers¹ | 15% | 6% | 37% | 28% | 31% | 26% | 31% | 22% | 26% | 24% | 16% |
| HIV and AIDS Diagnosed within 12 months | 5% | 0% | 13% | 9% | 7% | 7% | 4% | 7% | 6% | 2% | 3% |
| HIV and AIDS Diagnosed Simultaneously | 10% | 6% | 24% | 19% | 24% | 19% | 27% | 14% | 20% | 22% | 13% |
| Non Late Tester | 85% | 94% | 63% | 72% | 69% | 74% | 69% | 78% | 74% | 76% | 84% |

¹ San Mateo County data are reported through June 30, 2018 from the electronic HIV/AIDS Reporting System (eHARS). ² Late testers are defined as individuals who receive an AIDS diagnosis within 1 year of their HIV diagnosis or who are diagnosed with HIV and AIDS simultaneously. New cases are among individuals who were San Mateo County residents at the time of diagnosis. Totals may add up to >100% due to rounding.

Table 7. Characteristics of Newly Reported HIV Cases Among County Residents by Year of Diagnosis, San Mateo County, 2011 - 2017¹

| | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|-----------------------------------|---------|---------|---------|---------|---------|---------|---------|
| Total Number | 75 | 69 | 51 | 69 | 65 | 58 | 62 |
| | Percent | Percent | Percent | Percent | Percent | Percent | Percent |
| Sex | | | | | | | |
| Male | 91% | 84% | 92% | 91% | 88% | 84% | 85% |
| Female | 9% | 16% | 6% | 7% | 12% | 14% | 13% |
| Transgender | 0% | 0% | 2% | 1% | 0% | 2% | 2% |
| Age at Diagnosis | | | | | | | |
| 0 - 19 Years | 0% | 0% | 2% | 1% | 2% | 2% | 0% |
| 20 - 29 Years | 11% | 13% | 16% | 20% | 18% | 17% | 27% |
| 30 - 39 Years | 21% | 26% | 20% | 28% | 26% | 34% | 34% |
| 40 - 49 Years | 27% | 26% | 25% | 22% | 25% | 24% | 18% |
| 50 - 59 Years | 33% | 25% | 22% | 19% | 15% | 16% | 18% |
| 60+ | 8% | 10% | 14% | 10% | 14% | 7% | 3% |
| Missing | 0% | 0% | 2% | 0% | 0% | 0% | 0% |
| Race/Ethnicity | | | | | | | |
| White | 25% | 32% | 33% | 29% | 38% | 21% | 31% |
| African American | 11% | 12% | 4% | 12% | 3% | 5% | 10% |
| Latina/o | 33% | 35% | 35% | 39% | 40% | 52% | 29% |
| Asian | 24% | 20% | 20% | 19% | 15% | 14% | 23% |
| Multi-Race/Other/Unknown | 7% | 1% | 8% | 1% | 3% | 9% | 8% |
| Exposure Category | | | | | | | |
| MSM | 63% | 61% | 73% | 65% | 54% | 71% | 69% |
| IDU | 1% | 6% | 2% | 3% | 5% | 3% | 0% |
| Heterosexual Contact ² | 7% | 16% | 2% | 10% | 11% | 16% | 8% |
| MSM/IDU | 5% | 1% | 0% | 3% | 5% | 0% | 2% |
| Other Risk ³ | 0% | 0% | 0% | 1% | 0% | 0% | 0% |
| Not specified | 24% | 16% | 24% | 17% | 26% | 10% | 21% |

¹ San Mateo County data are reported through June 30, 2018 from the electronic HIV/AIDS Reporting System (eHARS). ² Sex with MSM, IDU or known HIV infected person. ³ Other risk includes either perinatal transmission, exposure to blood transfusion or blood products, or receiving a transplant. New cases are among individuals who were San Mateo County residents at the time of diagnosis.

HIV– Late Testers, 2012-2017

- Females comprise 12% of late testers between 2012-2017.
- Late HIV testers between 2012-2017 were more likely to be 50+ years of age compared to all newly reported HIV cases. During this period 39% of late testers were older than 50 years.
- Late HIV testers were more likely to be Latino/a than newly diagnosed cases.
- Late HIV testers were more likely to have risk not specified and less likely to identify MSM risk than newly reported HIV cases. One third of HIV late testers between 2012 –2017 did not specify an exposure risk.

Table 8. Characteristics of Late HIV Tests in Residents of San Mateo County, 2012 - 2017¹

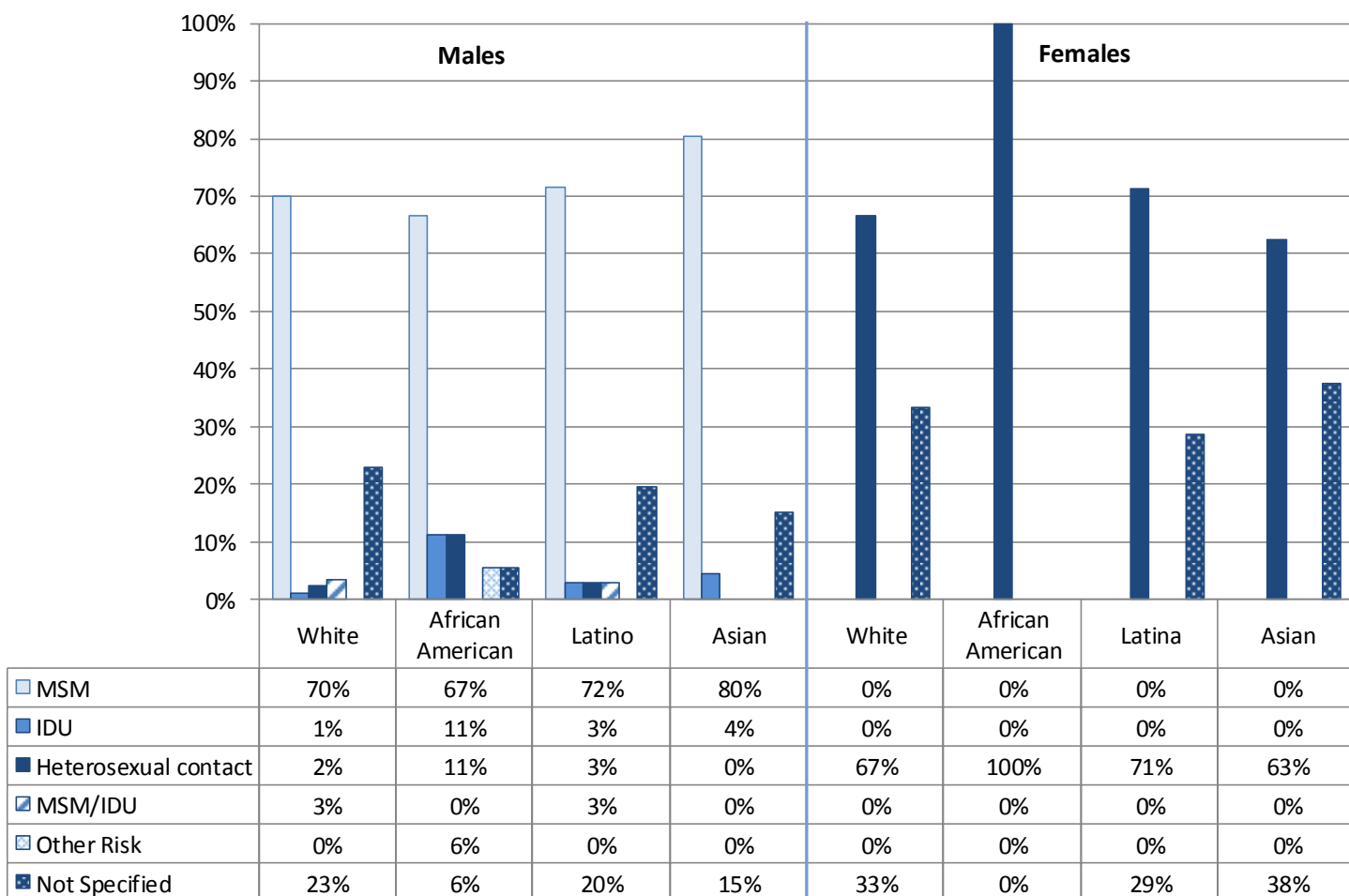
| (6 years) | Number | % |
|-----------------------------------|--------|-----|
| Total Number | 90 | 100 |
| Sex | | |
| Male | 78 | 87 |
| Female | 11 | 12 |
| Transgender | 1 | 1 |
| Age at Diagnosis | | |
| 0 - 19 Years | 1 | 1 |
| 20 - 29 Years | 8 | 9 |
| 30 - 39 Years | 22 | 24 |
| 40 - 49 Years | 24 | 27 |
| 50 - 59 Years | 21 | 23 |
| 60+ | 14 | 16 |
| Race/Ethnicity | | |
| White | 29 | 32 |
| African American | 6 | 7 |
| Latina/o | 37 | 41 |
| Asian | 14 | 16 |
| Multi-Race/Other/Unknown | 4 | 4 |
| Exposure Category | | |
| MSM | 45 | 50 |
| IDU | 2 | 2 |
| Heterosexual Contact ² | 13 | 14 |
| MSM/IDU | 1 | 1 |
| Other Risk ³ | 0 | 0 |
| Not Specified | 29 | 32 |

¹ San Mateo County data are reported through June 30, 2018 from the electronic HIV/AIDS Reporting System (eHARS). Late testers are defined as individuals who receive an AIDS diagnosis within 1 year of their HIV diagnosis or who are diagnosed with HIV and AIDS simultaneously. ²Sex with MSM, IDU or known HIV infected person. ³Other risk includes either perinatal transmission, exposure to blood transfusion or blood products, or receiving a transplant. Cases are among individuals who were San Mateo County residents at the time of diagnosis.

HIV- Diagnosed HIV Cases, 2013-2017

- Among male HIV cases diagnosed 2013-2017, the transmission category with the highest percentage of cases ($\geq 67\%$) across all race/ethnicities is men who have sex with men (MSM).
- Among male HIV cases diagnosed 2013-2017, 23% of White males and 20% of Latino males specified no risk transmission category around time of HIV diagnosis
- For female HIV cases diagnosed 2013-2017, approximately one third did not specify a risk transmission category.

Figure 18. Adult HIV Cases Diagnosed in County Residents From 2013-2017 by Transmission Category, Sex, and Race/Ethnicity, San Mateo County

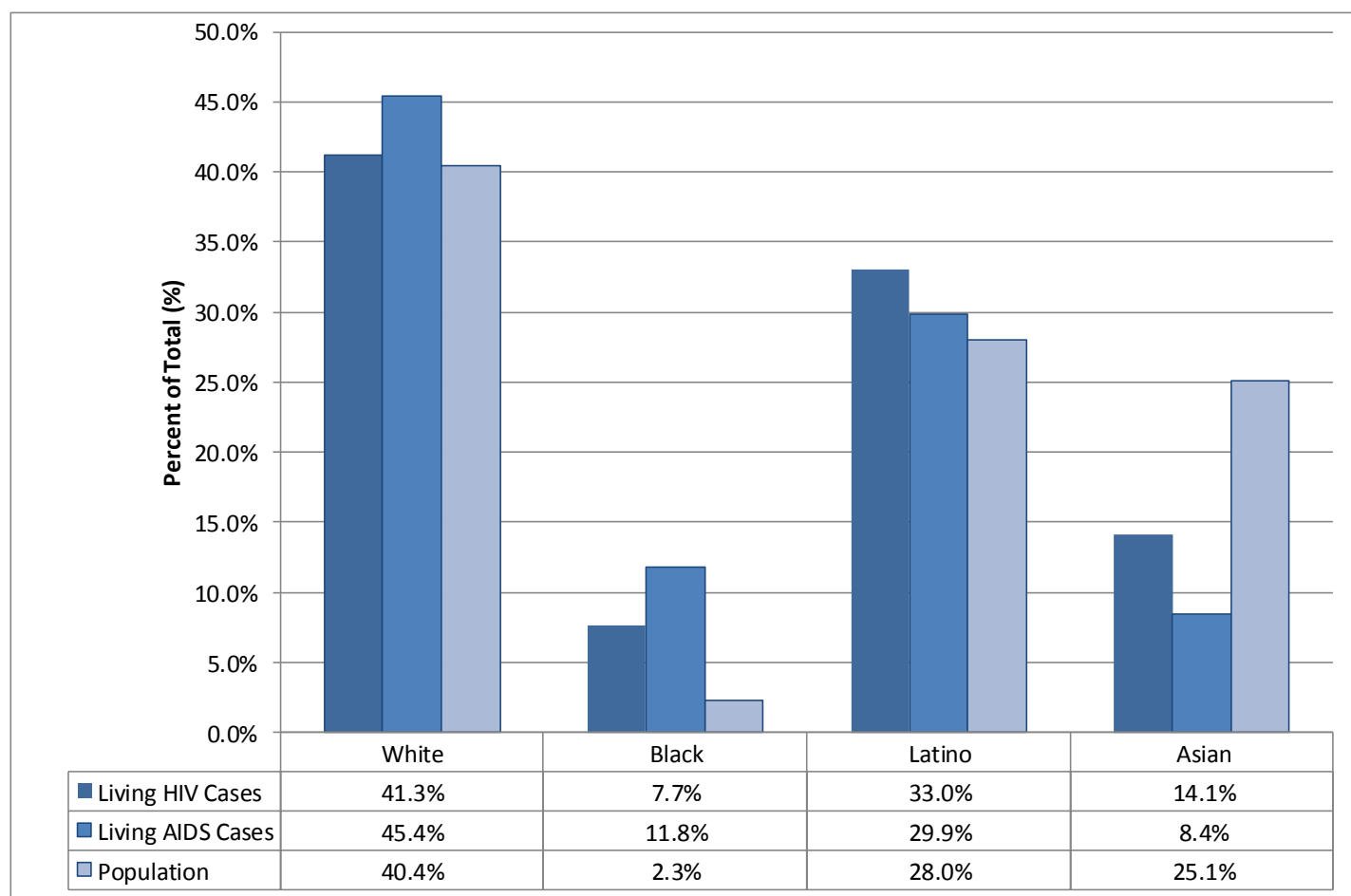


Data is compiled from the June 30, 2018 data set from the electronic HIV/AIDS Reporting System of California (eHARS). Other risk includes either perinatal transmission, exposure to blood transfusion or blood products, or receiving a transplant. Cases are among individuals who were San Mateo County residents at the time of diagnosis.

HIV- Persons Living with HIV/AIDS, 2017

- In 2017, African Americans were over represented among living HIV and AIDS cases based on county population percentage.
- In 2017, Asian Americans were under represented among living HIV and AIDS cases based on county population percentage.

Figure 19. Persons Living with HIV, Living with AIDS, and the County Population by Race/Ethnicity, San Mateo County, 2017



HIV/AIDS data is compiled from the June 30, 2018 data set from the electronic HIV/AIDS Reporting System of California (eHARS). Population data is from the U.S. Census Bureau, 2016 American Community Survey 1-year estimates. Persons living with HIV/AIDS are current San Mateo County residents.

HIV– People Living with HIV/AIDS, San Mateo County (2017) and CA (2016)

- SMC has a higher percentage of persons living with HIV in the 60+ age category (25%) than California (18%) for years compared
- SMC has a higher percentage of Asians living with HIV and a lower percentage of African Americans than California for years compared.
- SMC has a higher percentage of risk not specified for living HIV cases than California (11% vs. 5%).

Table 9. Demographic and Exposure Risk Characteristics of Living Persons Diagnosed with HIV/AIDS in San Mateo County (2017) and California (2016)

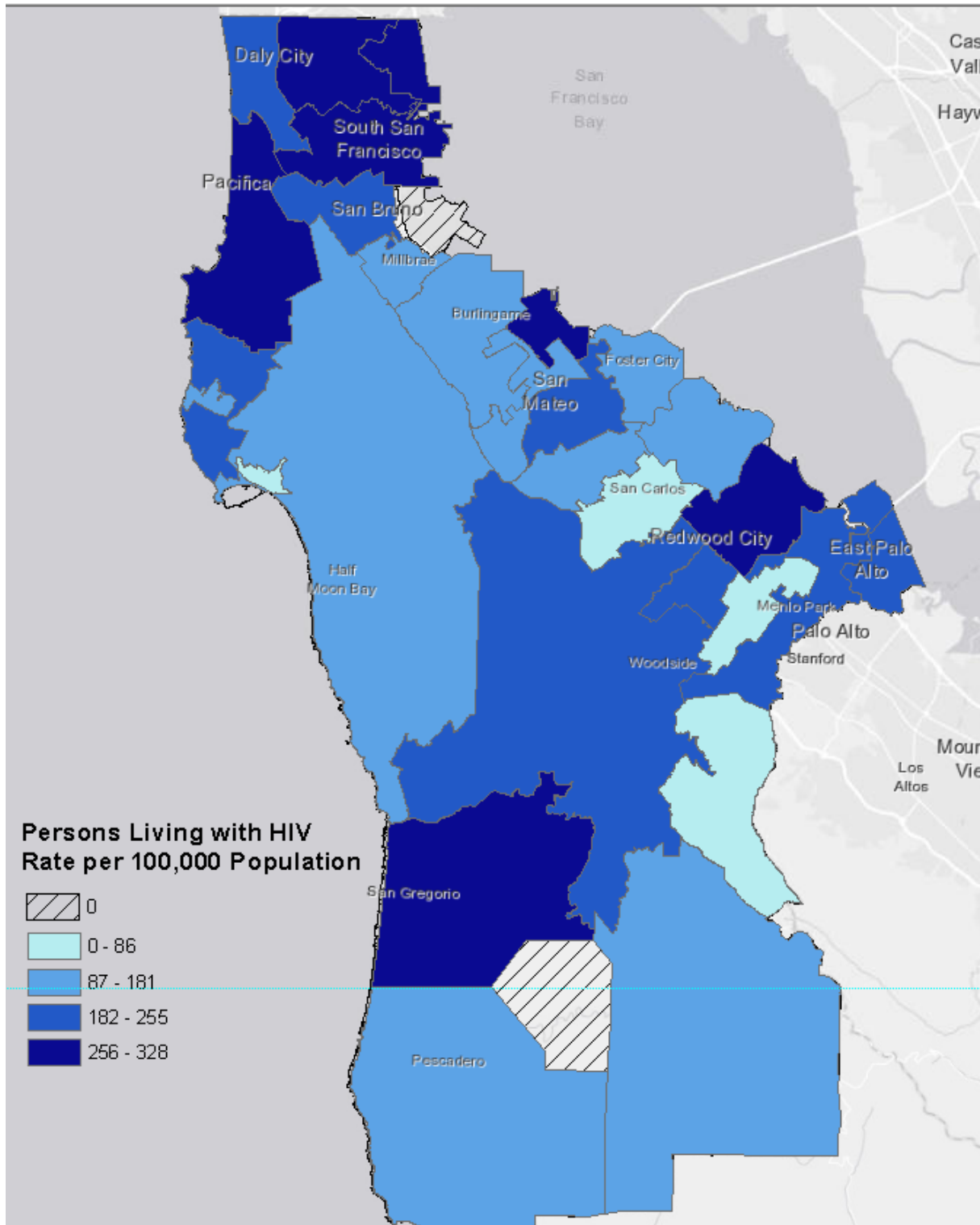
| | San Mateo County ¹ | | California ² | |
|-----------------------------------|-------------------------------|------|-------------------------|------|
| | (N = 1,704) | | (N = 132,405) | |
| | Number | % | Number | % |
| Sex | | | | |
| Male | 1,463 | 85.9 | 115,193 | 87.0 |
| Female | 216 | 12.7 | 15,528 | 11.7 |
| Transgender | 25 | 1.5 | 1,684 | 1.3 |
| Race/Ethnicity | | | | |
| White | 742 | 43.5 | 53,310 | 40.3 |
| Black | 170 | 10.0 | 23,124 | 17.5 |
| Hispanic | 533 | 31.3 | 46,746 | 35.3 |
| Asian | 187 | 11.0 | 5,211 | 3.9 |
| American Indian/Alaskan Native | 5 | 0.3 | 405 | 0.3 |
| Pacific Islander | 16 | 0.9 | 272 | 0.2 |
| Multi-Race/Other/Unknown | 51 | 3.0 | 3,337 | 2.5 |
| Current Age | | | | |
| 0 - 19 | 10 | 0.6 | 550 | 0.4 |
| 20 - 29 | 83 | 4.9 | 10,663 | 8.1 |
| 30 - 39 | 263 | 15.4 | 22,160 | 16.7 |
| 40 - 49 | 379 | 22.2 | 32,110 | 24.3 |
| 50 - 59 | 546 | 32.0 | 42,951 | 32.4 |
| 60+ | 423 | 24.8 | 23,971 | 18.1 |
| Exposure Category | | | | |
| MSM | 1,094 | 64.2 | 88,251 | 66.7 |
| IDU | 118 | 6.9 | 7,979 | 6.0 |
| Heterosexual contact ³ | 182 | 10.7 | 19,529 | 14.7 |
| MSM/IDU | 98 | 5.8 | 9,218 | 7.0 |
| Other Risk ⁴ | 24 | 1.4 | 1,134 | 0.9 |
| Not Specified | 188 | 11.0 | 6,294 | 4.8 |

¹ California Department of Public Health, Office of AIDS, HIV/AIDS Surveillance Section. Electronic HIV/AIDS Reporting System of California (eHARS) June 30, 2018 data set. ² California Department of Public Health, Office of AIDS, HIV/AIDS Surveillance Section. Year 2016 data included as 2017 data is not yet available. ³Sex with MSM, IDU or known HIV infected person. ⁴Other risk includes perinatal transmission or by receiving clotting factor, transfusion, or a transplant. Cases are among individuals who are current San Mateo County residents.

Geography of Living HIV Cases, San Mateo County

- The highest rates where living HIV/AIDS cases currently reside are seen in the cities of Brisbane, Colma, Pacifica, Redwood City, San Mateo, San Gregorio and South San Francisco.

Figure 20. Population Rates of Reported Living HIV Cases by Current Residential Zip Code in San Mateo County, 2017



Data is compiled from the June 30, 2018 data set from the electronic HIV/AIDS Reporting System of California (eHARS). Cases are among individuals who are current San Mateo County residents.

Summary of Sources and Technical Notes

Summary of Sources for all Bacterial STDs

The STD surveillance systems operated by San Mateo County Public Health and California Department of Public Health (CDPH) are the sources of San Mateo County data in this publication. Case reports and STD laboratory results are submitted to San Mateo County and/or CDPH through the California Reportable Disease Information Exchange (CalREDIE) system. CalREDIE data was used to compile the most recent years of data for this report. Historical data used to create trend graphs for San Mateo County and the State of California included information from the Automated Vital Statistics System (AVSS) and from information supplied by the California Department of Public Health STD Control Branch.

Disease rates for San Mateo were calculated using State of California, Department of Finance, Report P-3: State and County Population Projections by Race/Ethnicity, Detailed Age, and Gender, 2010-2060, Baseline 2016, Sacramento, California, January 2018.

California STD numbers and rates were gathered from the California Department of Public Health, STD Control Branch's report: California Department of Public Health, STD Control Branch (data as reported through 8/31/2018).

Race/Ethnicity Grouping

The race and ethnicity information listed and the corresponding census categories are Black (Black or African-American, non-Hispanic); Latino/Hispanic (Hispanic ethnicity, regardless of race); White (White, non-Hispanic); Asian (Asian, non-Hispanic), Pacific Islander (Pacific Islander/Native Hawaiian, non-Hispanic); American Indian/Alaska Native (American Indian/Alaska Native, non-Hispanic), Multirace (2 or more races, non-Hispanic), and Other/Unknown (Other, non-Hispanic, or where no race or ethnicity information was available).

Summary of Sources for HIV and AIDS

HIV and AIDS cases are reported to local health departments using the California Department of Public Health Office of AIDS HIV/AIDS confidential case report form. The case report form collects demographic information, patient risk history, laboratory data to confirm and stage diagnosis, opportunistic and HIV-associated malignancy diagnoses, and treatment and service referrals.

Data for this report were obtained from the electronic HIV/AIDS Reporting System (eHARS) for San Mateo County, which includes persons who reside in San Mateo County at the time of diagnosis. Cases reported from laboratories, providers, death certificates, and other health departments are reviewed for accuracy and completeness. AIDS case data may not represent the characteristics of persons with more recent infections or persons who never progress to AIDS due to combination antiretroviral therapy. Because of reporting delays, data are not complete at the time of analysis. Hence, a change in the overall numbers in future reports is to be expected.

California HIV numbers were gathered from the California Department of Public Health, Office of AIDS, California HIV Surveillance Report — 2016.

Race/Ethnicity Grouping

Data about certain racial / ethnic groups or risk factors were grouped together when the number of persons with HIV/AIDS in that group was small and did not present significant trends. For example, Multi-race/Other/Unknown in the Race/Ethnicity breakdown represents persons of unknown and multiple race/ethnicity or Native Americans.

Technical Notes

Many rates have been calculated using few cases of disease. Caution should be observed when interpreting rates based on few events and/or small populations. For more information, refer to Guidelines for statistical analysis of public health data with attention to small numbers, Revised, July, 2003. This publication can be found at: http://www.cdph.ca.gov/data/dataresources/Documents/Guidelines%20for%20Statistics%200723031_Small_Num.pdf