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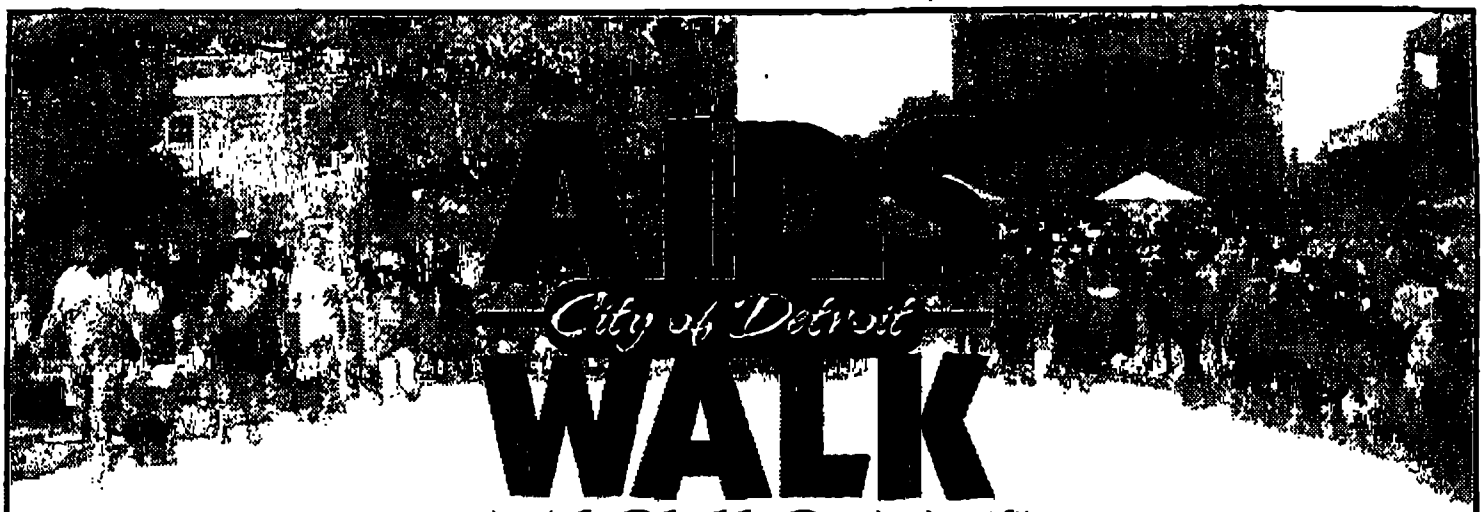


City of Detroit

WALK MICHIGAN℠

Taking Great Strides Together

Sunday, September 26, 1999
5K Fundraising Walk-a-thon
Downtown Detroit - Hart Plaza, 2:00 PM
Benefiting Over Three Dozen Area HIV/AIDS Service Providers

Did you know?

- Nearly half of Michigan's reported cases of AIDS are in the City of Detroit, the highest percentage of which are in the African-American community.
- Advances in treatment haven't slowed the spread of HIV; infection rates in the Metro area are at an all-time high.
- HIV/AIDS is spreading fastest among women, young people and racial minorities.
- Since the beginning of the epidemic, the Latino population of Metro Detroit has been proportionately impacted by HIV/AIDS.
- Most people living with HIV/AIDS live in urban areas.
- President Clinton recently declared a "State of Emergency" on HIV/AIDS for communities of color.

For more information, to obtain a walker pledge envelope or to form a walk team, please call:

Robyn Seay at 313-876-0399 or John Joanette at 888-791-WALK

Participating Agencies as of 6/99: Affirmations, AIDS Consortium of Southeastern Michigan, AIDS Interfaith Network, AIDS Partnership Michigan, Alternatives for Girls, Arab Community Center for Economic and Social Service, Canfield Health Services/DMC, CareGivers, Children's Immune Disorder, Community Health Awareness Group, Detroit Hispanic Development Corporation, FRIENDS Alliance, Geared for Life, Gospel Against AIDS, Health Emergency Lifeline Programs, Latino Family Services, Men of Color, Michigan Protection and Advocacy Service (HAAP Program), Michigan Women and AIDS Committee, Midwest AIDS Prevention Project, Oakland Livingston Human Services Agency, Pontiac Area Urban League, Pontiac Teen Health Center, NAMES Project – AIDS Memorial Quilt, Project Hope/Goodwill Industries, Project: Survival, Rainbow Alliance, Simon House, Taylor Teen Health Center, Visiting Nurse Association of Southeast Michigan, WSU/DMC HIV/AIDS Program, WSU/CHM Horizons Project, Wayne State University/Children's Hospital, and Wellness House of Michigan.

Figure 1: Estimated Persons Living with HIV or AIDS, by Residence

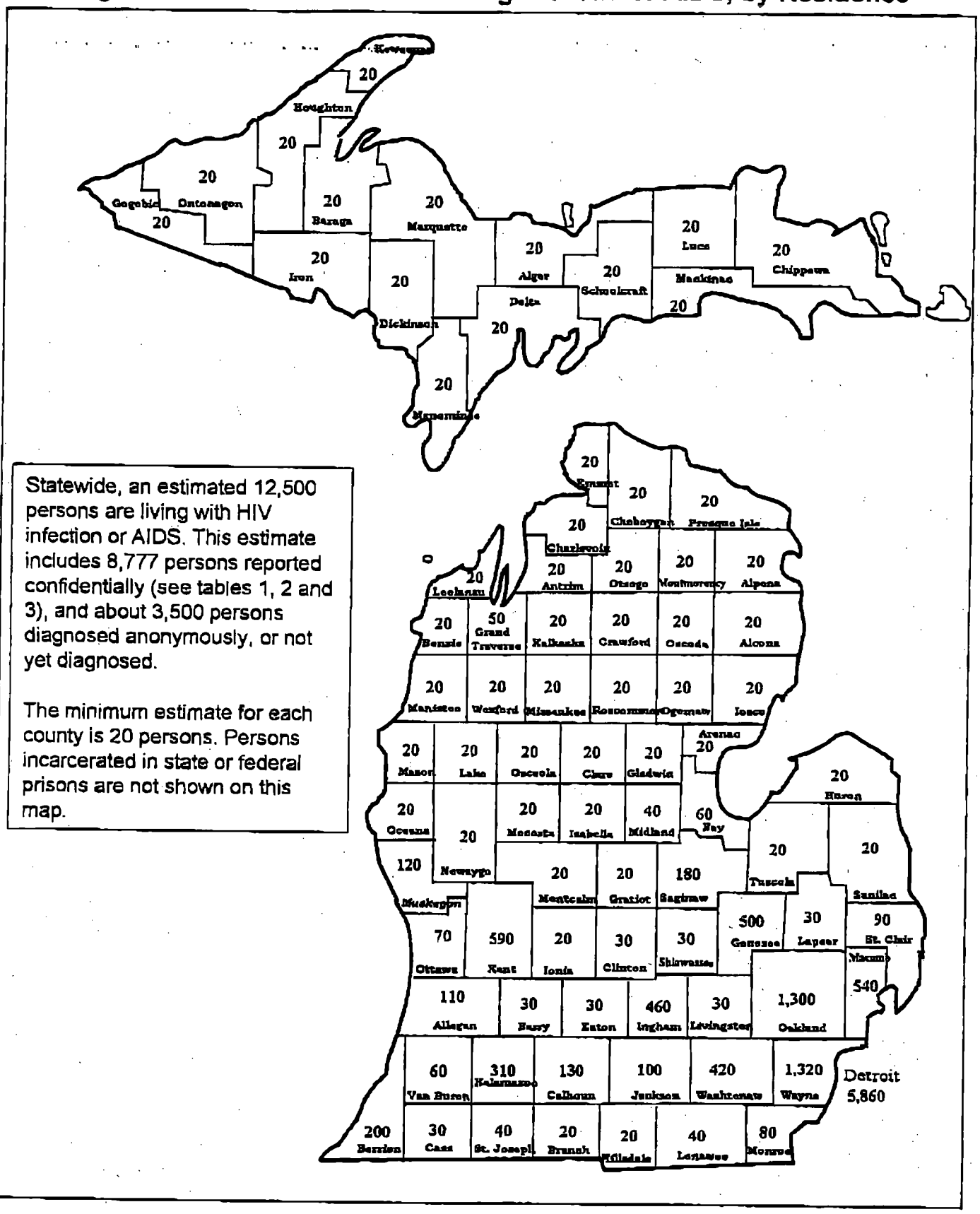


TABLE 2a: Michigan Residents Living with HIV or AIDS by County, as of 7/1/99 and Residents Ever Diagnosed with AIDS, 1981 to 7/1/99

RESIDENCE AT TIME OF DIAGNOSIS	Estimate of HIV Prevalence[1]	Estimated Prevalence Rate[2]	Cumulative AIDS 1981 to Date	Persons Living with AIDS[3]	Persons Living with HIV Not AIDS[3]
TOTAL MICHIGAN	12,500	134.5	10,243	4,171	4,606
Alcona	20	—	2	1	0
Alger	20	—	1	1	0
Allegan	110	121.5	65	36	15
Alpena	20	—	8	2	1
Antrim	20	—	6	3	0
Arenac	20	—	2	0	1
Baraga	20	—	8	5	2
Barry	30	59.9	20	10	5
Bay	70	62.7	45	20	23
Benzie	20	—	2	0	1
Berrien	200	123.9	120	54	66
Branch	20	—	11	2	8
Calhoun	130	95.6	76	33	43
Cass	30	60.6	13	6	11
Charlevoix	20	—	5	4	5
Cheboygan	20	—	4	1	0
Chippewa	20	—	3	2	6
Clare	20	—	6	6	4
Clinton	30	51.8	16	9	5
Crawford	20	—	2	2	0
Delta	20	—	6	5	4
Dickinson	20	—	5	3	2
Eaton	30	32.3	28	11	11
Emmet	20	—	7	3	3
Genesee	500	116.2	310	122	165
Gladwin	20	—	0	0	1
Gogebic	20	—	7	2	1
Grand Traverse	50	77.8	29	12	18
Gratiot	20	—	7	2	3
Hillsdale	20	—	11	3	5
Houghton	20	—	5	1	3
Huron	20	—	6	1	1
Ingham	460	163.2	282	111	153
Ionia	20	—	17	7	6
Iosco	20	—	2	1	3
Iron	20	—	2	0	1
Isabella	20	—	12	4	5
Jackson	100	66.8	70	23	34
Kalamazoo	310	138.8	201	99	71
Kalkaska	20	—	2	0	1
Kent	590	117.9	505	190	193
Keweenaw	20	—	0	0	0

1. This estimate includes all persons living with HIV or AIDS, including those not yet diagnosed. The minimum estimate given is 20 persons (0.1% of the Michigan total rounded up to nearest 10). See page 10 for calculation of this estimate.
2. Rates are calculated per 100,000 population in 1990. Rates are unreliable for counties with the minimum estimated prevalence of 20, and are therefore not listed.
3. Includes reports of HIV infection and AIDS that contain patient name or are otherwise unduplicated.

STATE OF MICHIGAN

JOHN ENGLER, Governor

DEPARTMENT OF COMMUNITY HEALTH
JAMES K. HAVEMAN, JR., Director

COMMUNITY PUBLIC HEALTH
DAVID R. JOHNSON, MD, MPH., Chief Executive and Medical Officer
3423 N. MARTIN L. KING JR. BLVD.
PO BOX 30195
LANSING, MI 48909

To: **HIV/AIDS Reporting Contacts and Local Health Department AIDS Coordinators**

From: **HIV/AIDS Surveillance Section**
Communicable Disease Epidemiology Division
Bureau of Epidemiology

Date: July 1999

Changes in Quarterly Statistics

The HIV/AIDS Quarterly Report has been revised to emphasize persons living with HIV and/or AIDS instead of cumulative AIDS cases which included persons who have died. We have moved this HIV data to the front of the report. In addition, trends are now displayed in line graphs which have been adjusted for reporting delays. The perinatal data presentation has been completely changed to show successes in preventing perinatal transmission. For additional detailed information, please review the technical notes on page ten. The April and October reports will contain a briefer version of this full statistical report.

Highlights from The National HIV/AIDS Surveillance Conference

The National HIV/AIDS Surveillance Conference was held in June. Among the topics discussed were: adding viral load measurements to the HIV infection and AIDS case definitions and increasing perinatal surveillance activity.

In the Fall, CDC will release an expanded case definition for Adult HIV/AIDS. Viral load will be used as a measurement of HIV infection and may be used as a marker for quality of care. CDC is also planning to release guidelines for standardization of viral load test reporting.

The CDC has provided funding for expanded pediatric surveillance activities. More comprehensive data on maternal prenatal care, antiretroviral treatment during pregnancy, neonatal Zidouvidine use and other antiretroviral use will be collected on children born in 1998 and 1999. The surveillance data will be used to enhance HIV perinatal prevention efforts. Currently birth defect data is being collected on all living HIV perinatally exposed and currently HIV-negative children. The birth defect data is being collected on a national level to determine if there are adverse side effects to pediatric antiretroviral therapy.

AIDS PARTNERSHIP MICHIGAN

"Committed to the Relentless Pursuit of an End to AIDS"

FAX TRANSMITTAL FORM

DATE: Sept. 20-99

TIME:

TO: Sarah

FROM: Cynthia Brenden

NUMBER OF PAGES INCLUDING COVER: 13

NOTES: AIDS stats in Michigan

Thanks!

In case of incomplete FAX, please contact _____ **@ (313) 446-9800**

Barbara A. Murray
Executive Director
Lisa Rutledge
President, Board of Directors

2751 East Jefferson, Suite 301
Detroit, Michigan 48207
Office: 313-446-9800
Fax: 313-446-9839

AIDS Hotline: 800-872-AIDS
Client Services: 800-515-3434
http://www.aidspartnership.org
E-Mail: info@aidspartnership.org

Funded by • Ryan White Care Act • Michigan Department of Community Health • Michigan AIDS Fund • Housing Opportunities for Persons with AIDS • United Way Community Services • Mission Health Community Health Improvement Fund • The Jewish Fund • And Donors Who Care

HIV/AIDS Surveillance Section
Communicable Disease Epidemiology Division
Bureau of Epidemiology

TABLE 1: Characteristics of Michigan Residents Living with HIV or AIDS as of July 1, 1999

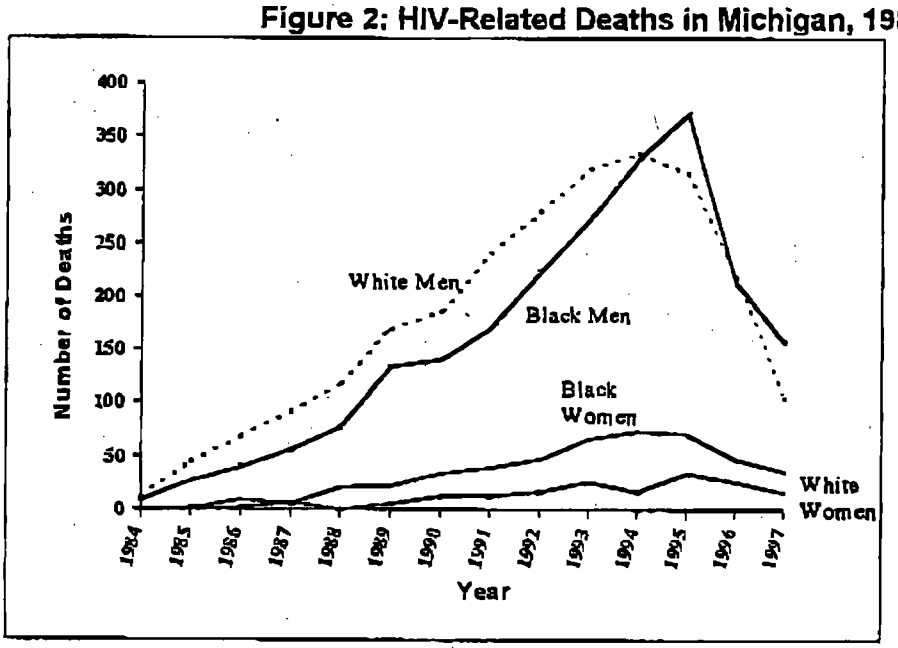
	Estimate of HIV Prevalence[1]	Estimated Prevalence Rate[2]	Reported Living with AIDS[3]		Reported Living with HIV not AIDS[3]	
			Number	Percent[4]	Number	Percent[4]
MICHIGAN TOTAL	12,500	134	4,171	100%	4,606	100%
GENDER						
Male	10,250	227	3,418	82%	3,427	74%
Female	3,250	68	753	18%	1,179	26%
BEHAVIOR						
Male-Male sex	6,750	N/A	2017	54%	1794	49%
Injecting Drug Use	3,130	N/A	918	25%	889	24%
Male-Male Sex/IDU	880	N/A	244	7%	239	6%
Blood Products	250	N/A	80	2%	50	1%
Heterosexual	2,130	N/A	410	11%	638	17%
Perinatal	250	N/A	33	1%	79	2%
Undetermined[4,5]	Not Applicable		469	(11%)	917	(20%)
AGE AT DIAGNOSIS						
0 -12 years	250	14	36	1%	92	2%
13 -19 years	380	39	32	1%	143	3%
20 -24 years	1,630	231	176	4%	603	13%
25 -29 years	2,500	327	514	12%	902	20%
30 -34 years	2,880	355	939	23%	955	21%
35 -39 years	2,750	367	902	22%	844	18%
40 -44 years	2,380	362	773	19%	547	12%
45 -49 years	1,250	239	425	10%	286	6%
50 -54 years	630	148	217	5%	124	3%
55 -59 years	250	64	88	2%	66	1%
60 -64 years	130	32	39	1%	25	1%
65 years and over	130	12	30	1%	16	0%
Unspecified[4]	Not Applicable		0	(0%)	1	(0%)
RACE / ETHNICITY						
White, Non-Hisp.	5,130	68	1,726	41%	1,534	34%
Black, Non-Hisp.	7,880	610	2,279	55%	2,844	63%
Hispanic	500	248	149	4%	135	3%
Asian	130	124	11	0%	4	0%
American Indian	130	234	6	0%	25	1%
Unspecified[4]	Not Applicable		0	(0%)	64	(1%)

1. This estimate includes all persons living in Michigan at diagnosis of HIV or AIDS, including those not reported or not yet diagnosed.The minimum estimate given is 130 persons (rounded up from 1% of the state total). See page 10 for explanation of this estimate.
2. Rates are calculated per 100,000 population in 1990. Rates are unreliable for counties with the minimum estimated prevalence of 20, and are therefore not listed.
3. Includes reports that contain patient name or are otherwise unduplicated. See page 10 for information on anonymous reports.
4. Age, sex, race, and behavior percentages are calculated excluding missing data. The percentages of total cases missing this demographic information are given in parentheses.
5. Includes persons with exposure in the health care setting in the U.S. (2) or other countries (1), and pediatric cases with probable sexual mode of transmission (2).

TABLE 3: Michigan Residents Reported Living with HIV or AIDS: Gender by Race by Behavior

MALES:	White		Black		Hispanic		Other or Unknown		TOTAL	
Male-Male Sex	2,053	73%	1,625	44%	98	44%	35	42%	3,811	56%
Injecting Drug Use	176	6%	866	23%	51	23%	7	8%	1,100	16%
Male-Male Sex/IDU	186	7%	277	7%	15	7%	5	6%	483	7%
Blood Recipient	93	3%	20	1%	1	0%	2	2%	116	2%
Heterosexual	64	2%	227	6%	25	11%	2	2%	318	5%
Perinatal	9	0%	48	1%	2	1%	0	0%	59	1%
Undetermined	243	9%	651	18%	31	14%	33	39%	958	14%
Male Subtotal	2,824	(41%)	3,714	(54%)	223	(3%)	84	(1%)	6,845	100%
FEMALES:	**White**		**Black**		**Hispanic**		**Other or Unknown**		**TOTAL**	
Injecting Drug Use	125	29%	555	39%	20	33%	7	27%	707	37%
Blood Recipient	11	3%	3	0%	0	0%	0	0%	14	1%
Heterosexual	209	48%	480	34%	31	51%	10	38%	730	38%
Perinatal	10	2%	39	3%	3	5%	1	4%	53	3%
Undetermined	81	19%	332	24%	7	11%	8	31%	428	22%
Female Subtotal	436	(23%)	1,409	(73%)	61	(3%)	26	(1%)	1,932	100%
GRAND TOTAL	3,260	37%	5,123	58%	284	3%	110	1%	8,777	100%

Figure 2: HIV-Related Deaths in Michigan, 1984-1997



Mortality Trends

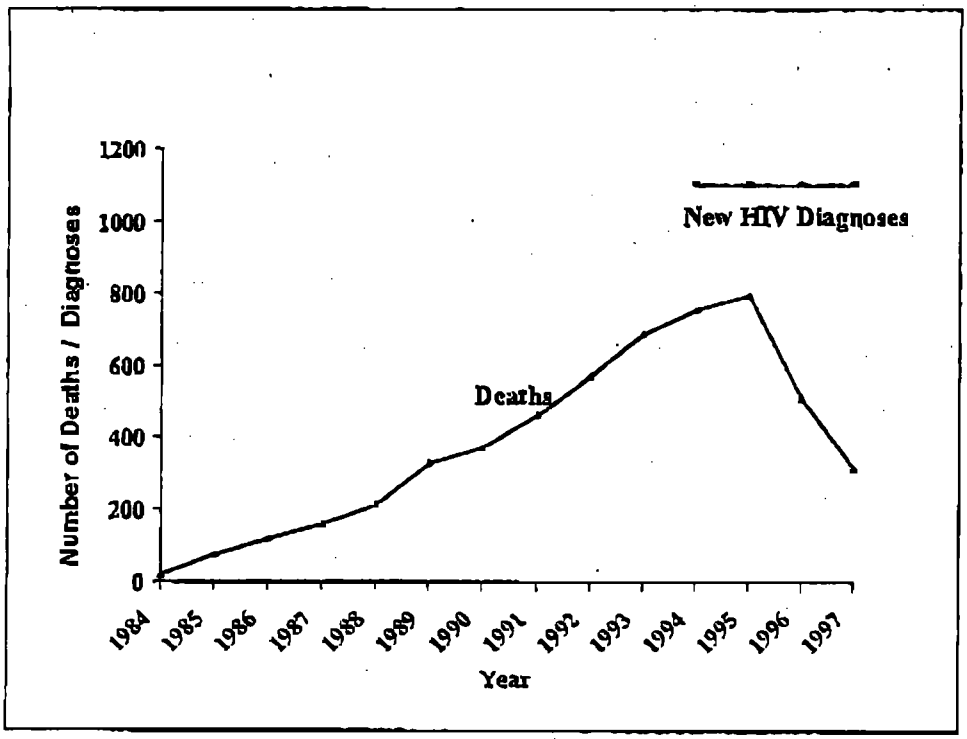
The number of HIV-related deaths in Michigan has declined about 60% between 1995 and 1997. This graph (data from the MDCH Division of Vital Records) shows the decline occurred among all groups: White men, black men, black women, and white women. There were too few deaths among other race or ethnic groups to analyze.

TABLE 4: States and Territories With Most AIDS Cases Ever Reported to CDC, 1981-12/30/98

State	Cases	Rate[1]	State	Cases	Rate[1]	State	Cases	Rate[1]	State	Cases	Rate[1]
1. NY	128,675	715.2	6. PR[2]	22,297	633.1	11. MA	13,809	229.5	16. OH	10,255	94.5
2. CA	110,056	369.8	7. IL	21,684	189.7	12. DC[2]	11,394	1,877.4	17. MI[3]	9,969	107.2
3. FL	70,276	543.2	8. PA	21,040	177.1	13. VA	11,269	182.1	18. NC	8,948	135.0
4. TX	48,350	284.6	9. GA	20,007	308.8	14. LA	11,136	263.9	19. WA	8,651	177.8
5. NJ	38,230	494.6	10. MD	18,716	391.4	15. CT	10,404	316.5	20. MO	8,245	161.1

1 Cumulative Rate per 100,000 Population, 1990 Census. The average U.S. rate was 276.7
2 Abbreviations include PR for Puerto Rico, and DC for District of Columbia
3 Michigan annual rate per 100,000 population ranks 34th among U.S. states and territories as of 12/30/98

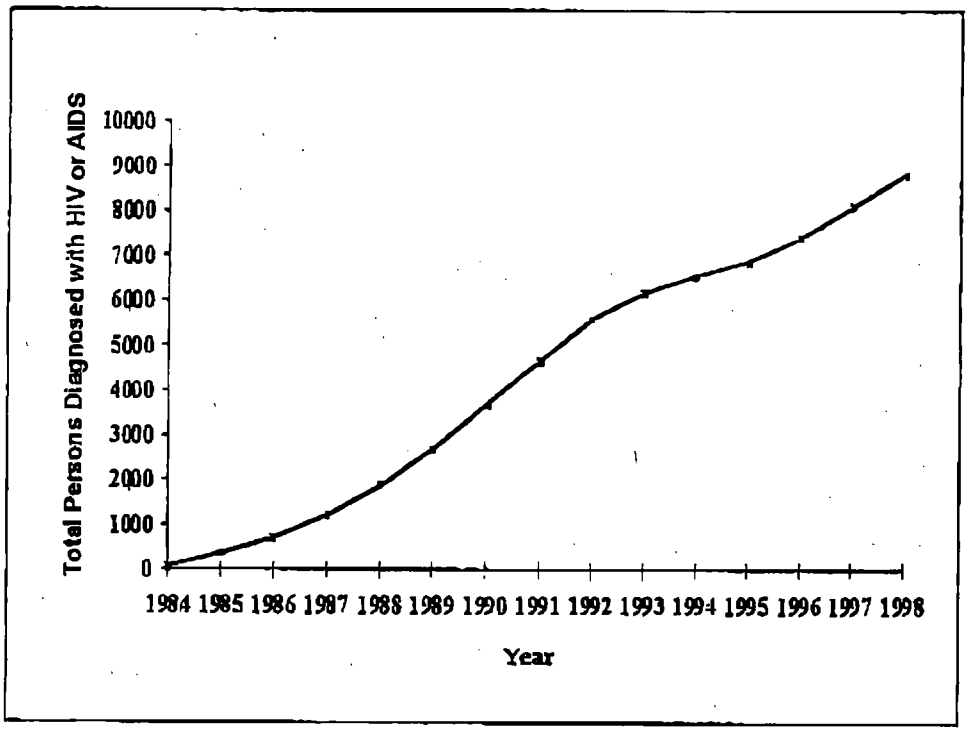
Figure 3: Michigan HIV Deaths, and New HIV Diagnoses, by Year



Deaths and Diagnoses

The numbers of deaths due to HIV infection and AIDS have decreased 60% between 1995 and 1997, primarily due to effective therapies. Meanwhile, however, the number of persons diagnosed with HIV infection each year was unchanged at about 1,100 persons annually from 1994 to 1997.

Figure 4: Reported Number of Michigan Residents Living with HIV or AIDS



Number of Infected Persons Is Increasing

The total number of persons reported with a diagnosis of HIV infection or AIDS is increasing. This is caused by the two factors shown in Figure 3: the number of persons diagnosed each year is not changing, but the number who die has declined. Currently we estimate there are about 12,500 persons living with HIV or AIDS in Michigan. This graph shows about 9,000 who have been diagnosed and reported.

TABLE 2b: Michigan Residents Living with HIV or AIDS by County, as of 7/1/99 and Residents Ever Diagnosed with AIDS, 1981 to 7/1/99

RESIDENCE AT TIME OF DIAGNOSIS	Estimate of HIV Prevalence[1]	Estimated Prevalence Rate[2]	Cumulative AIDS 1981 to Dat	Persons Living with AIDS	Persons Living with HIV Not AIDS[3]
TOTAL MICHIGAN	12,500	134.5	10,243	4,171	4,606
Lake	20	—	7	4	3
Lapeer	30	40.1	10	4	9
Leelanau	20	—	10	4	1
Lenawee	40	43.7	28	10	14
Livingston	30	25.9	24	8	8
Luce	20	—	1	0	0
Mackinac	20	—	2	1	0
Macomb	540	75.3	404	173	126
Manistee	20	—	8	5	3
Marquette	20	—	15	6	7
Mason	20	—	8	6	5
Mecosta	20	—	11	6	3
Menominee	20	—	3	0	3
Midland	40	52.9	23	13	8
Missaukee	20	—	2	0	3
Monroe	80	59.9	52	27	6
Montcalm	20	—	14	6	8
Montmorency	20	—	1	0	0
Muskegon	120	75.5	67	25	38
Newaygo	20	—	19	6	7
Oakland	1,300	120.0	938	405	430
Oceana	20	—	8	5	1
Ogemaw	20	—	3	1	1
Ontonagon	20	—	0	0	0
Osceola	20	—	7	3	0
Oscoda	20	—	1	0	0
Otsego	20	—	7	5	3
Ottawa	70	37.3	71	21	13
Presque Isle	20	—	2	0	0
Roscommon	20	—	8	3	3
Saginaw	180	84.9	116	42	59
Sanilac	20	—	9	4	4
Schoolcraft	20	—	3	1	1
Shiawassee	30	43.0	16	9	6
St. Clair	90	61.8	50	21	29
St. Joseph	40	67.9	32	13	8
Tuscola	20	—	11	5	6
Van Buren	60	85.6	38	19	19
Washtenaw	420	148.4	295	135	125
Wayne	1,320	121.8	971	422	352
City of Detroit	5,860	570.1	4,618	1,775	1,934
Wexford	20	—	4	3	2
PRISONS	660	N/A	397	178	478

1. This estimate includes all persons living with HIV or AIDS, including those not yet diagnosed. The minimum estimate given is 20 persons (0.1% of the Michigan total rounded up to nearest 10). See page 10 for calculation of this estimate.
2. Rates are calculated per 100,000 population in 1990. Rates are unreliable for counties with the minim estimated prevalence of 20, and are therefore not listed.
3. Includes reports of HIV infection and AIDS that contain patient name or are otherwise unduplicated.

TABLE 7: Clinic and Population Based HIV Seroprevalence Survey Data

Type and Location of Site	Percent Positive by Year										
	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998
CLINIC BASED											
Detroit STD[1]	2.4	1.9	1.7	2.0	1.8	1.4	1.4	0.9	1.2	0.8	0.8
Oakland STD #1	2.8	1.3	1.0	0.9	0.8	0.4					
Oakland STD #2	1.5	0.6	0.5	0.6	0.3						
St. Clair STD	0.1	0.0	0.1	0.0	0.0						
Wayne County STD	-	-	0.9	1.0	1.0	0.4	0.9	0.4	0.5		
Macomb STD #1	-	0.8	0.6	0.5	0.6						
Macomb STD #2	-	0.7	0.3	0.2	0.0						
Detroit Drug Treatment Center											
----Injecting Drug Use	5.8	8.1	12.4	7.6	5.4	5.4	5.8	5.4	8.2	5.6	4.0
----Non Injecting Drug Use					3.6	3.3	2.4	2.4	3.7	2.8	2.9
Project Life Drug Treatment Center											
----Injecting Drug Use	-	-	-	-	-	-	2.1	2.0			
----Non Injecting Drug Use	-	-	-	-	-	-	0.0	1.5			
Detroit Medical Center Tuberculosis	-	45.0	41.2	50.0							
Detroit Tuberculosis	-	-	2.2	4.0	8.2	6.7					
Detroit Women's Health #1	-	0.5	0.5	0.5	0.0						
Detroit Women's Health #2	-	0.0	0.1	0.0	0.0						
Oakland Women's Health #1	0.0	0.0	0.1	0.0	0.0						
Oakland Women's Health #2	0.0	0.0	0.0	0.0	0.0						
St. Clair Women's Health	0.0	0.2	0.0	0.0	0.0						
Detroit Adolescent	-	-	0.2	0.8	0.2						
Detroit Medical Center Adolescent	-	-	-	-	-	-	0.0	0.0			
Wayne Youth Home	-	-	-	-	-	-	0.1				
POPULATION BASED											
SCBW[2,3]											
January-June	-	0.08	0.06	0.07	0.07	0.07	0.05	0.04	0.04	0.06	
July-December	0.06	0.07	0.06	0.06	0.05	0.05	0.04	0.04	0.04	0.06	

1. STD = Sexually Transmitted Disease Clinic
2. SCBW = Survey of Child-Bearing Women
3. Rates are estimated from six months data in 1992-95, and three months data in 1996-97.

TECHNICAL NOTES

Reports of HIV infection and AIDS are submitted to state and local health departments under Michigan law by providers making the diagnoses. Confidential case reports have been actively solicited for AIDS since 1986 and for HIV infection since April 1992. HIV reports passively collected between April 1989 and March 1992 are also included in these calculations. Anonymous HIV reports (without name or other unique identifier) are excluded from the calculations because we cannot estimate duplication, update status, or obtain missing data. A total of 933 complete anonymous reports are currently in our database.

TABLES 1, 2, 3 AND FIGURE 1: HIV AND AIDS AMONG MICHIGAN RESIDENTS
The tables describe Michigan residents living with HIV infection or AIDS, by sex, mode of transmission, age, race, and residence. The patient group and estimate of the total number of HIV infected persons are shown in column 2. The numbers of persons reported living with AIDS, and living with HIV infection, are given last. The estimated number living with HIV or AIDS is shown in Figure 1 for each county.

HIV Prevalence Estimates for Michigan
MDCH estimates that there are up to 12,500 HIV-infected persons (including those with AIDS) living in Michigan. This estimate is based in part on statewide maternal antibody seroprevalence survey data. It is supported by national estimates of HIV infection and rates of new AIDS diagnoses and deaths.

Categorical estimates of HIV infection are calculated from the percentages for each group of confidentially reported persons living with HIV and living with AIDS. The larger of these proportions is multiplied by 12,500. For example, 74% of HIV reports and 82% of AIDS reports are among men. Therefore, the upper number of HIV-infected men in Michigan is estimated to be 10,250 (82% X 12,500). Since the higher proportion is always used, and because estimates are rounded to the nearest 10, totals may not equal 12,500. If a given demographic group accounts for 1% or fewer of total reports, the estimate is rounded to 130. If the number of confidential HIV/AIDS reports from any county is 0.1% or fewer of total reports, the estimate is rounded to 20.

TABLES 5: PERSONS EVER DIAGNOSED WITH AIDS
This table describe all Michigan residents who were diagnosed with AIDS, most of whom have died. Table 5 shows gender, race, mode of transmission, and age when diagnosed. Column four of Table 2 (Cumulative AIDS) shows these cases by residence.

FIGURES 2 AND 3: HIV-RELATED DEATHS IN MICHIGAN, 1984-1997
Source: MDCH Division of Vital Records. The number of Michigan residents whose underlying cause of death is HIV or AIDS is shown. Figure 2 shows deaths for black and white men and women. Figure 3 includes total deaths only.

FIGURE 3: HIV INFECTIONS BY YEAR OF DIAGNOSIS
Figure 3 also shows the number of persons diagnosed with HIV infection each year, adjusted for reporting delays. Data before 1994 and after 1997 are unreliable. From 1994 to 1997, the number of persons diagnosed with HIV infection was unchanged at about 1,100 annually.

FIGURE 4: REPORTED NUMBER OF MICHIGAN RESIDENTS WITH HIV INFECTION OR AIDS
The total number of living persons with a diagnosis of HIV infection changes as some persons are newly diagnosed and as some persons die (See Figure 3).

TABLE 6: PERINATAL DATA
Infants born to HIV-infected mothers are described in this analysis. Residence and race are given first. Prevention efforts to identify infected women during pregnancy and to treat with AZT are listed next. Finally, the graph shows the confirmed infection status of these children.

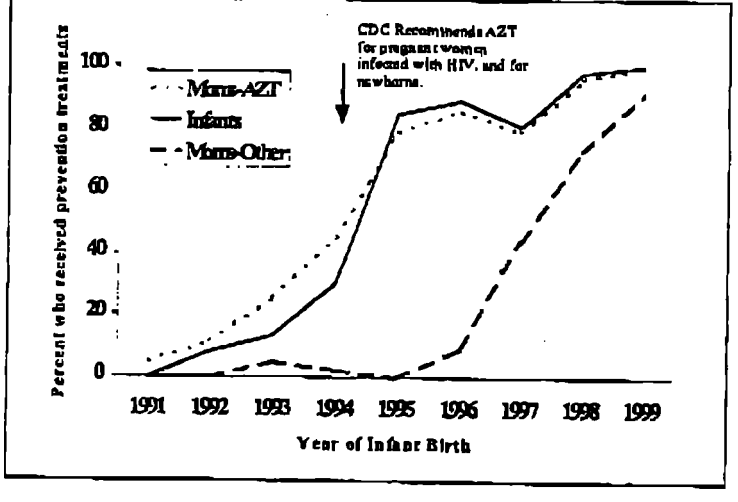
TABLE 7: HIV SEROPREVALENCE SURVEY DATA
Since 1988, blinded HIV seroprevalence surveys have been conducted in selected health clinics throughout Michigan. Each survey is conducted for three months to one year, depending on sample size, and provides recent estimates of HIV prevalence for specific populations. The Survey of Childbearing Women (SCBW) is also blinded, and it measures trends of HIV seroprevalence among women of childbearing age.

Table 6: Michigan Infants Born to HIV-Infected Mothers, by Birth Year

Year of Birth	1991	1992	1993	1994	1995	1996	1997	1998[2]	1999[2]
TOTAL									
Total Infants Reported	60	65	80	56	52	56	70	56	13
Total Mothers Reported	57	57	79	55	52	56	70	56	12
RESIDENCE AT TIME OF BIRTH[1]									
Detroit MSA	29	43	53	43	32	42	51	42	13
Outside the Detroit MSA	31	22	27	13	20	14	19	14	0
RACE OF CHILD									
White	17	11	17	10	10	8	14	11	1
Black	43	52	58	44	42	46	54	43	10
Hispanic, Asian, Am.Indian, Unk.	0	2	5	2	0	2	2	2	2

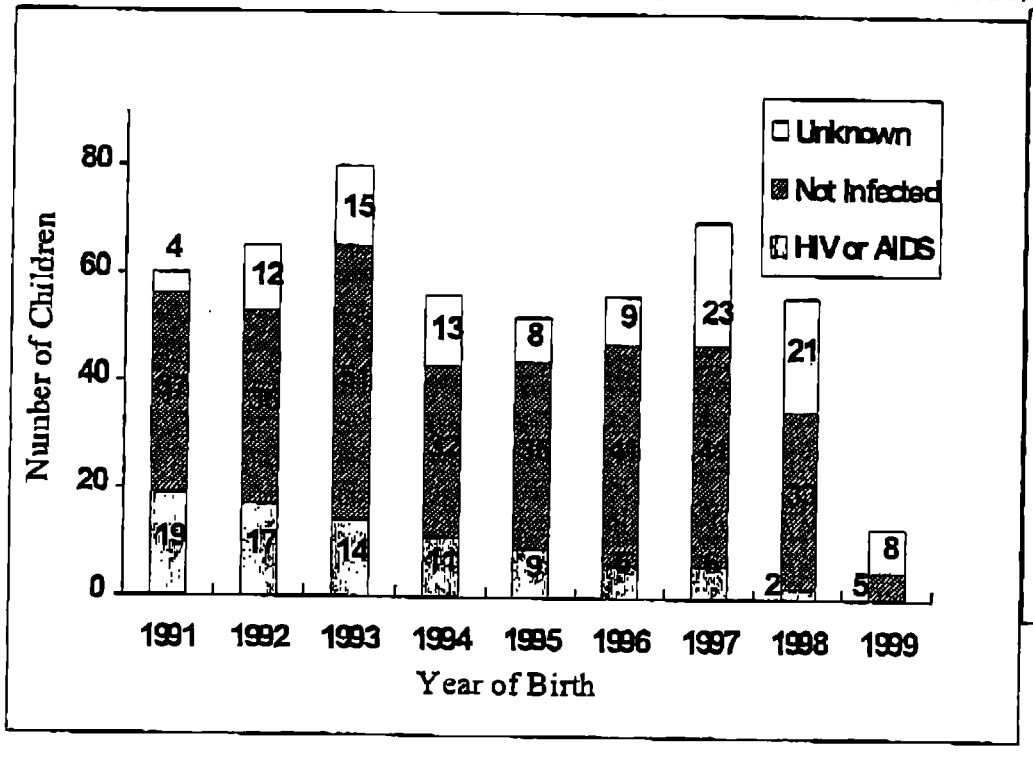
1- Detroit Metropolitan Statistical Area includes Wayne, Oakland, Macomb, Monroe, and St. Clair counties.
2- Data for 1998 and 1999 are incomplete at this time.

Figure 5: Efforts to Prevent HIV Transmission to Infants



The lines show the proportion of persons receiving therapies known to reduce transmission to HIV-infected infants have increased. The number of mothers receiving AZT at any time during pregnancy, labor, and delivery has increase markedly with the July 1994 CDC recommendations to provide this treatment. The number of infants receiving AZT within 72 hours of birth has increased almost as fast. The number of mothers receiving other antiretroviral therapies also increased, although at a later

Figure 6: Confirmed Infection Status Among Infants Born to HIV-Infected Mothers



The bars show the current reported status of children born to HIV-infected mothers. Data for 1998 and 1999 are incomplete. The bottom bar shows the number who are known to be infected with HIV or have AIDS. The middle bar shows the number who are confirmed (through laboratory testing) not to be infected. The upper bar shows the number whose HIV infection status is unknown because the child has been lost to follow up or the status has not yet been reported to surveillance.

TABLE 5: Characteristics of Michigan and U.S. Residents Ever Diagnosed with AIDS, 1981 to Date

	MI AIDS : 1981-7/1/1999			U.S. AIDS : 1981-1/1/1999[1]		
	Cases	Percent	Rate[2]	Cases	Percent	Rate[2]
MICHIGAN TOTAL	10,243	100%	110.2	688,200	100%	276.7
GENDER						
Male	8,656	85%	191.8	574,783	84%	474.1
Female	1,587	15%	33.2	113,414	16%	89.0
Unknown	0	0%	—	3	0%	—
TRANSMISSION						
Male-Male sex	5,174	51%	N/A	326,051	47%	N/A
Injecting Drug Use	2,413	24%	N/A	173,693	25%	N/A
Male-Male Sex/IDU	669	7%	N/A	43,640	6%	N/A
Blood Products[3]	268	3%	N/A	13,905	2%	N/A
Heterosexual[4]	791	8%	N/A	66,490	10%	N/A
Perinatal[5]	90	1%	N/A	7,800	1%	N/A
Undetermined[6]	838	8%	N/A	56,621	8%	N/A
AGE AT DIAGNOSIS						
0 - 4 years	70	1%	10.0	6,574	1%	35.8
5 -12 years	36	0%	3.3	1,887	0%	6.6
13 -19 years	63	1%	6.5	3,423	0%	14.0
20 -24 years	372	4%	52.7	24,437	4%	128.5
25 -29 years	1394	14%	182.4	93,280	14%	437.7
30 -34 years	2176	21%	268.5	156,289	23%	714.9
35 -39 years	2275	22%	303.7	153,907	22%	771.0
40 -44 years	1780	17%	270.9	112,145	16%	636.6
45 -49 years	1034	10%	197.4	64,094	9%	462.0
50 -54 years	541	5%	127.5	33,708	5%	297.0
55 -59 years	244	2%	62.1	18,729	3%	177.8
60 -64 years	141	1%	35.1	10,440	2%	98.3
65 and over	117	1%	10.6	9,284	1%	29.7
Unknown	—	—	—	3	0%	—
RACE/ETHNICITY						
White, Non-Hisp.	4353	42%	57.6	304,094	44%	161.6
Black, Non-Hisp.	5562	54%	430.6	251,408	37%	860.5
Hispanic	287	3%	142.4	124,841	18%	558.5
Asian	18	0%	17.1	4,974	1%	71.4
American Indian	23	0%	41.3	1,940	0%	108.2
Unknown	0	0%	—	943	0%	—

1. U.S. figures are produced by the federal Centers for Disease Control and Prevention every six months. Additional detail is available through the CDC WebPage at www.cdc.gov/nchstp/hiv_aids/stats/hasrlink.htm.
2. Cumulative rates per 100,000 population are calculated using 1990 Census figures. Populations and rates are not available (N/A) for behaviors.
3. Blood products received for coagulation disorder (208 MI; 5,145 U.S.) or transfusion (60 MI; 8,760 U.S.).
4. A heterosexual partner is known to be: an injecting drug user (333 MI; 26,246 U.S.), a bisexual man (48 MI; 3,132 U.S.), a recipient of infected blood products (27 MI; 1,364 U.S.), or HIV positive with unknown behavior history (383 MI; 35,748 U.S.)
5. Perinatal transmission occurs from HIV-infected mothers to infants before or at birth, or from breast milk.
6. Patient risks are under investigation, or no risk was identified. Included are persons with documented (2 MI; 25 U.S.) and probable (1 MI; not available U.S.) exposure in the health care setting, or receipt of donor products other than blood (13 U.S.).

The David Newman Show
11:10 – 11:20 AM
Monday, September 20
Producer: Kevin Collard (will call 5 minutes before interview to prep)
Interviewer: Foster Braun

DETRIOT METRO AREA

- Detroit contains **50%** of Michigan's HIV/AIDS population

  (Michigan has an estimated 12, 500 reported cases total)

- The Detroit epidemic is strikingly similar to the national epidemic
  Minorities, IV drug users, heterosexual transmission, and women are disproportionately impacted

- The highest percentage of reported cases are in the African American community -
  The Latino community is slated to mirror the African American community in the coming years.

  (President Clinton recently declared a "State of Emergency" on HIV/AIDS for communities of color)

- Infection rates are at an all time high.
  Advances in treatment have slowed the death rate, not the infection rate.

  (Hence, the importance of this walk benefiting ASOs with treatment and prevention services)

- Highest number of infections in the 25 – 40 year old age range

- Ryan White FY 99 – 7 million for 8 counties (includes Detroit) according to the Detroit Dep. of Health

THE WALK

- **2 PM**
  Sunday, September 26th
  Hart Plaza, downtown Detroit

- Joining Mayor Archer as an honorary chair

- The Detroit walk is one of 12 across the state on the same day

---

- Importance of raising awareness on the community level

- Importance of community support and participation for all those living with HIV/AIDS

- Raises crucial financial resources to combat HIV/AIDS in the Metro Detroit area

- Benefits over 3 dozen area HIV/AIDS Service Providers

- In 1998, AIDS Walk Michigan raised nearly $450,000 for ASOs in ten communities across the state

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- Downplay the rally at 4 PM. The point is to get people to the Walk.

- **CALL (888) 791-WALK for more information**

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NATIONAL - AFRICAN AMERICAN COMMUNITY

- Every hour seven people are newly infected with HIV, three of those seven are African American;
- AIDS remains the leading killer of African American men age 25 – 44 and the second leading killer of African American women in the same age group.
- African Americans comprise more than 40 percent of all new HIV/AIDS cases
- African American women make up 60 percent of female cases;
- (Hispanics represent over 20 percent of new HIV/AIDS cases and only about 10% of the population)

MICHIGAN - AFRICAN AMERICAN COMMUNITY

- African Americans comprise 55% of HIV/AIDS cases in Michigan – this number is even higher in Detroit
- African American women make up 73% of female cases in Michigan

The Epidemic of Drug-Related AIDS

MICHIGAN

Each year the injection-related AIDS epidemic in Michigan affects more people. In order to slow the spread of AIDS among persons who inject drugs in Michigan and elsewhere, the Clinton Administration urgently needs to end the federal ban on funding clean needle programs.

Health Emergency in Michigan

- Through the end of 1996, some 2,700 Michigan residents age 13 and over had injection-related AIDS or had died from it.
- Over 30 percent of all AIDS cases in Michigan are injection-related.

The crisis among African Americans and Latinos

- Through the end of 1996, some 2,100 African Americans and 90 Latinos living in Michigan had injection-related AIDS or had died from it.
- The rate of injection-related AIDS cases among blacks in Michigan is more than 20 times higher than the rate for whites. The rate among Latinos is 7 times higher than the rate for whites.

The future: thousands of all races at risk in Michigan

For MichiganÕs major metropolitan areas, Dr. Scott Holmberg of the Centers for Disease Control estimates that the number of uninfected persons who inject drugs and who thus are at risk of getting HIV as follows:

Ann Arbor	1,400	Grand Rapids	3,100
Detroit	31,500	TOTAL	

Saving lives and saving tax dollars

Each AIDS illness and death exacts an uncountable cost in human pain and suffering. Each AIDS illness and death has a very countable cost in dollars. Using sophisticated mathematical models, a University of California team of investigators estimates that it costs between $4,000 and $12,000 in clean needle program expenses for each HIV infection averted over a five-year period. This is, of course, far lower than the estimated $119,000 lifetime cost of treating an HIV-infected person.

Lifting the ban on federal funding of clean needle programs will permit communities in Michigan to save many lives that will otherwise be lost. Nationally, ending the ban will save billions of federal health