

STATE OF MAINE  
HIV/AIDS ANNUAL  
SURVEILLANCE REPORT  
2009

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Published: March, 2010  
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## Overview

Dear Colleague,

With the continued support received from local and federal partners, the Maine HIV Surveillance Program successfully identified 56 newly diagnosed HIV cases and 35 AIDS cases in 2009. In 2009, the HIV Surveillance Program also participated in communicating recent changes in HIV/AIDS reporting requirements and disseminated data about the scope of Maine's HIV/AIDS epidemic. In addition to surveiling HIV infection and AIDS, the HIV Surveillance Program also participated in an increasing number of HIV Transmission Prevention (HTP) investigations by responding to consults from authorized Maine CDC staff about individuals suspected of intentionally exposing others to HIV.

Other important events that impacted Maine HIV/AIDS surveillance efforts in 2009 include:

- The removal of HIV infection from the list of diseases that constitute the definition of communicable disease of public health significance. This limits the use of HIV infection to restrict international travel into the U.S.,
- The dissemination of updates to guidelines for the use of Antiretroviral Agents in HIV-1 infected Adults, Children ([http://www.aidsinfo.nih.gov/Guidelines/Guideline\\_Detail.aspx?MenuItem=Guidelines&Search=Off&GuidelineID=7&ClassID=1](http://www.aidsinfo.nih.gov/Guidelines/Guideline_Detail.aspx?MenuItem=Guidelines&Search=Off&GuidelineID=7&ClassID=1)) and Pediatric cases (<http://www.aidsinfo.nih.gov/Guidelines/GuidelineDetail.aspx?MenuItem=Guidelines&Search=Off&GuidelineID=8&ClassID=1>) by the Office of AIDS Research Advisory Council,
- The dissemination of guidelines for the use of Antiretroviral Drugs in Pregnant HIV-Infected Women for Maternal Health and Interventions to Reduce Perinatal HIV Transmission in the United States (<http://www.aidsinfo.nih.gov/Guidelines/Guideline>

[Detail.aspx?MenuItem=Guidelines&Search=Off&GuidelineID=9&ClassID=2](#)) by the U.S. Public Health Service and,

- The dissemination of guidelines for the prevention and treatment of opportunistic infections in HIV-infected Adults and Children (<http://www.aidsinfo.nih.gov/Guidelines/Detail.aspx?MenuItem=Guidelines&Search=Off&GuidelineID=211&ClassID=4>) and recommendations for clinicians regarding the treatment of H1N1 influenza in HIV-Infected Adults and Adolescents ([http://www.cdc.gov/h1n1flu/guidance\\_hiv.htm](http://www.cdc.gov/h1n1flu/guidance_hiv.htm)) by the federal CDC.

### *Data Sources and Limitations*

Confirmed HIV and AIDS cases are reported to the Maine CDC through various confidential channels that meet stringent data security and confidentiality guidelines including the use of a secure and confidential telephone and fax lines. Newly diagnosed cases are typically reported to the Maine CDC by healthcare providers, healthcare facilities and diagnostic laboratories via confidential disease reporting telephone lines (207-287-5193 or 1-800-821-5821) or Fax numbers (207-287-3498 or 1800-293-7534) within 48 hours of diagnosis as required by State law. Additional cases may be identified from community health organizations and other tertiary healthcare agencies. The report of a new or previously unreported HIV/AIDS case prompts the completion of an Adult or Pediatric HIV/AIDS Case Report Form filled by healthcare providers or HIV Surveillance Program staff. The role of the HIV/STD Surveillance Program in Maine is to provide systematic continuous monitoring of HIV and AIDS morbidity and mortality among Maine residents. This is done for the purposes of collecting, analyzing and disseminating population level data and reports to the general public. In general, data are disseminated to educators, healthcare providers, HIV/AIDS prevention groups and the public. As part of the HIV, STD and Viral Hepatitis Program, the HIV Surveillance Program also serves as a public resource for various HIV/AIDS concerns.

Because this report is based on data received from the reporting facilities mentioned above. Delays in reporting data may result in changes to the final statistics provided in this or other reports. The completeness and accuracy of data elements obtained from patients and provided by healthcare providers determines the quality of data used in compiling this report. Data included in this entire

report may succumb to all or some of these limitations. Pending epidemiologic investigations may also present limitations to the quality of data disseminated. Additional limitations such as small sample sizes may also present challenges when drawing definite conclusions from data included in this report. Rates presented here have not been standardized/adjusted for demographic factors. 2000 Census data are used to calculate rates. Data included in this report does not account for the latest (2009) mortality records among Mainers living with HIV/AIDS. Restrictions in Maine's Privacy Policy prohibit the release of most data elements not included in this report.

### **Acknowledgements**

The completion of this report was achieved as a result of the support from the various healthcare facilities, laboratories, and private physicians that play an integral role in local HIV/AIDS surveillance by providing timely disease reports. Maine CDC staff also contributed in editing this report.

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## I

### **HIV and AIDS in Maine, 2009**

In 2009, there were 56 confirmed HIV diagnoses reported in the State of Maine. This count corresponds to a rate of 4.3 per 100,000 qualifying Maine as a low morbidity state. Last year's counts were 21% more than the total counts reported in 2008. Despite this observed increase, annual HIV data reported over last decade show that the annual number of HIV diagnoses reported in Maine typically fluctuates within the 46 to 92 range. Twenty-one (38%) of the newly diagnosed HIV cases reported in 2009 were simultaneously diagnosed with AIDS. This may indicate that these individuals were not acutely infected with HIV at the time of diagnosis since AIDS typically presents as the clinical stage of late HIV infection. About 20% of the cases diagnosed last year were foreign-born cases. In fact, most (>90%) racial minority diagnoses reported in 2009 were foreign-born residents. Ten out of the total of 11 foreign-born cases diagnosed in 2009 were black and 7 were female. An unusual case of perinatal HIV transmission was also reported in 2009. Unlike many other states, the State of Maine laws do not require that healthcare providers offer HIV testing to all pregnant females. The age range for 2009 HIV cases was 0-77 years. Additional demographic characteristics of the newly diagnosed HIV cases are presented in Tables 1-3 that follow.

Thirty-five (35) newly diagnosed AIDS cases were reported in 2009. This corresponds to an incidence rate of 2.7 per 100,000 populations. Similar to the newly diagnosed HIV cases, the majority (66%) of 2009 AIDS diagnoses were likely infected through unprotected male-to-male sexual intercourse. Although most (80%) 2009 AIDS cases were diagnosed through immunologic (CD4) tests, the following opportunistic infections were used to make an AIDS diagnosis among some cases: pneumocystis jirovecii pneumonia (formerly PCP), cytomegalovirus disease, toxoplasmosis of the brain, and mycobacterium avium infection.

Table 1. Number and demographic characteristics of HIV, HIV only (nonAIDS), and AIDS cases diagnosed in Maine, 2009.

<i>Mode of HIV Transmission</i>	<b>Maine HIV cases 01/01/09-12/31/09 (Rate 4.3 per 100,000) n (%)</b>	<b>Maine HIV only (non-AIDS) cases 01/01/09-12/31/09 n (%)</b>	<b>Maine AIDS cases 01/01/09-12/31/09 (Rate 2.7 per 100,000) n(%)</b>
Men who have Sex with Men (MSM)	28(50)	16(46)	23(66)
Injection Drug Use (IDU)	5(9)	4(11)	1(3)
MSM & IDU	3(5)	2(6)	2(6)
Heterosexual Contact with at-risk partner*	7(12)	4(11)	5(14)
Heterosexual Contact, no at-risk partner*	12 (21)	8(22)	4(11)
Perinatal Exposure	1(2)	1(3)	0
<b>Total</b>	<b>56(100)</b>	<b>35(100)</b>	<b>35(100)</b>
<b><i>Sex</i></b>			
Female	14(25)	10(29)	4(11)
Male	42(75)	25(71)	31(89)
<b>Total</b>	<b>56(100)</b>	<b>35(100)</b>	<b>35(100)</b>
<b><i>Race</i></b>			
White	43(76)	25(71)	30(86)
Black	12(21)	9(26)	5(14)
Native Hawaiian/ Pacific Islander	0	0	0
American Indian/Alaska native	1(2)	1(3)	0
<b>Total</b>	<b>56(100)</b>	<b>35(100)</b>	<b>35(100)</b>
<b><i>Ethnicity</i></b>			
Hispanic	2(4)	0	5(14)
Non Hispanic	54(96)	35(100)	30(86)
<b>Total</b>	<b>56(100)</b>	<b>35(100)</b>	<b>35(100)</b>
<b><i>Age at HIV/AIDS Diagnosis</i></b>			
Less than 13	1(2)	1(3)	0
13-19	2(4)	2(6)	0
20-29	14(25)	13(37)	2(6)
30-39	14(25)	9(26)	10(29)
40-49	10(17)	4(11)	10(29)
Over 49	15(27)	6(17)	13(37)
<b>Total</b>	<b>56(100)</b>	<b>35(100)</b>	<b>35 (100)</b>
<b><i>Region of Residence at Diagnosis</i></b>			
York (District 1-York County)	11(19)	5(14)	7(21)
Cumberland (District 2-Cumberland County)	25(45)	17(48)	14(41)
Western Maine (District 3- Oxford, Franklin, and Androscoggin Counties)	6(11)	5(14)	2(6)
Mid Coast (District 4- Lincoln, Knox, Waldo, and Sagadahoc. Counties)	2(3)	1(3)	2(6)
Central Maine (District 5- Somerset and Kennebec Counties)	10(18)	6(17)	7(21)
Penquis (District 6- Piscataquis and Penobscot Counties)	1(2)	1(3)	2(6)

Downeast (District 7- Hancock and Washington Counties)	0	0	0
Aroostook (District 8- Aroostook County)	1(2)	0	1(3)
Unknown	0	0	0
<b>Total</b>	<b>56(100)</b>	<b>35(100)</b>	<b>35(100)</b>

\* = at-risk partners include partners who have been diagnosed with HIV/AIDS, are bisexual males, are injection/intravenous drug users, have received contaminated blood or blood products, or are transplant recipients with documented HIV/AIDS.

Table 2. (a) Number of HIV cases diagnosed by county of residence at HIV diagnosis-Maine, 2009.

COUNTY															
ANDROSCOGGIN CO.		AROOSTOOK CO.		CUMBERLAND CO.		FRANKLIN CO.		HANCOCK CO.		KENNEBEC CO.		KNOX CO.		LINCOLN CO.	
n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
6	11	1	2	25	45	0	0	0	0	9	16	1	2	1	2

Table 2. (b) Number of HIV cases diagnosed by county of residence at HIV diagnosis-Maine, 2009.

COUNTY																TOTAL
OXFORD CO.		PENOBSCOT CO.		PISCATAQUIS CO.		SAGADAHOC CO.		SOMERSET CO.		WALDO CO.		WASHINGTON CO.		YORK CO.		MAINE
n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n
0	0	1	2	0	0	0	0	1	2	0	0	0	0	11	19	56

Table 3(a). Number of AIDS cases diagnosed by county of residence at AIDS diagnosis-Maine, 2009.

COUNTY															
ANDROSCOGGIN CO.		AROOSTOOK CO.		CUMBERLAND CO.		FRANKLIN CO.		HANCOCK CO.		KENNEBEC CO.		KNOX CO.		LINCOLN CO.	
n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
2	6	1	3	14	41	0	0	0	0	6	0	1	3	1	3

Table 3 (b). Number of AIDS cases diagnosed by county of residence at AIDS diagnosis-Maine, 2009.

COUNTY																TOTAL
OXFORD CO.		PENOBSCOT CO.		PISCATAQUIS CO.		SAGADAHOC CO.		SOMERSET CO.		WALDO CO.		WASHINGTON CO.		YORK CO.		MAINE
n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n
0	0	2	6	0	0	0	0	1	3	0	0	0	0	7	21	35

*Facility at HIV Diagnosis*

Maine residents newly diagnosed with HIV in 2009 were reported from a variety of local and out-of-state healthcare facilities or agencies. For purposes of this report, these facilities were classified based on the type of medical service sought by a patient at the time of HIV diagnosis (e.g. screening) or the type of facility providing medical care (e.g. inpatient facility). As shown in Figure 1 below, the majority of cases reported were diagnosed in outpatient facilities excluding Health Departments or Public Health Clinics. Screening, Diagnostic, and Referral sites include HIV counseling and testing sites and STD clinics. These facilities primarily screen patients for HIV. Outpatient facilities include private physicians' practices and healthcare facilities serving patients on an outpatient basis at the time medical care was sought. Table 4 (next page) lists the number of newly diagnosed cases reported by each facility in Maine.

**Figure 1: Proportion of HIV Cases Diagnosed in Specific Healthcare Facilities-Maine, 2009**

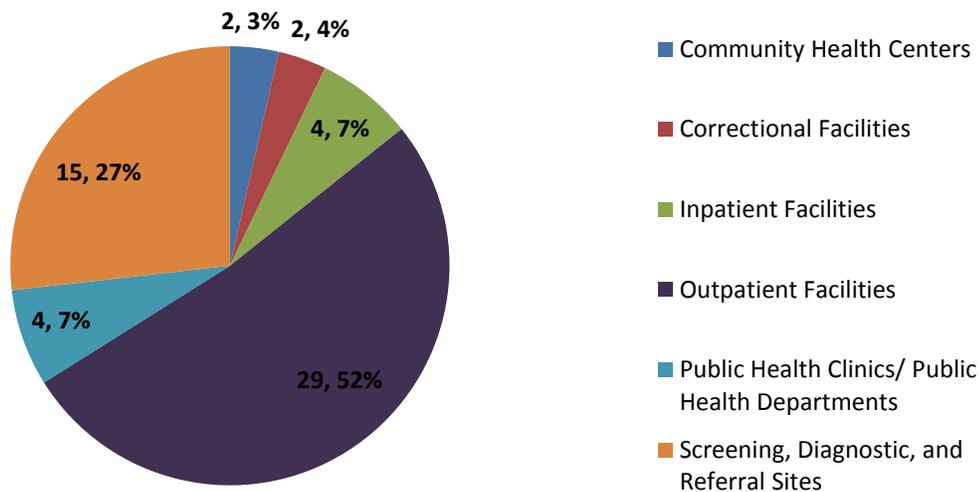


Table 4. Individual Listing of Healthcare Facilities Accounting for 2009 HIV diagnoses.

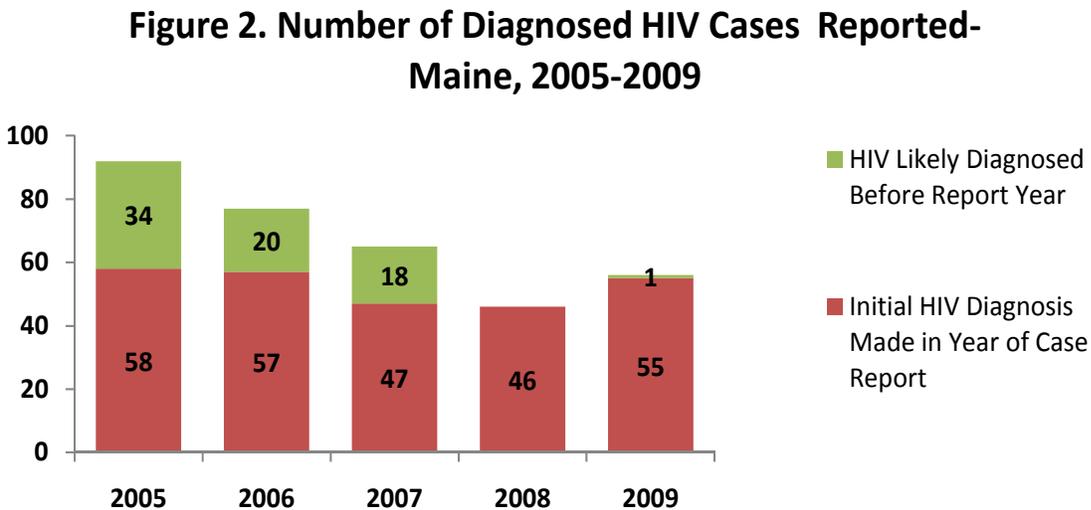
<b>FACILITY NAME</b>	<b>TYPE OF FACILITY</b>	<b>NUMBER OF CASES</b>
CARY MEDICAL CENTER	Outpatient Facility	1
CENTRAL MAINE MEDICAL CENTER	Inpatient Facility	2
CENTRAL MAINE MEDICAL CENTER	Outpatient Facility	2
EASTERN MAINE AIDS NETWORK	Screening Diagnostic and Referral Sites	1
FALMOUTH FAMILY MEDICINE	Outpatient Facility	2
FAMILY HEALTH CENTER OF SOUTHERN MAINE	Outpatient Facility	1
FAMILY MEDICAL INSTITUTE	Outpatient Facility	1
FRANNIE PEABODY CENTER	Screening Diagnostic and Referral Sites	2
HALLOWELL FAMILY PRACTICE	Outpatient Facility	1
HOMELESS HEALTH CLINIC	Public Health Clinics/ Public Health Departments	2
HORIZON	Screening Diagnostic and Referral Sites	1
JUST GUYS	Screening Diagnostic and Referral Sites	1
KENNEBEC COUNTY JAIL	Correctional Facility	1
KENNEBUNK MEDICAL CENTER	Outpatient Facility	1
LEWISTON/AUBURN STD	Screening Diagnostic and Referral Sites	1
MAINE GENERAL MED CTR WATERVILLE	Outpatient Facility	2
MAINE MEDICAL CENTER (INTERNAL MEDICINE, FAMILY MEDICINE)	Outpatient Facility	6
MAINE MEDICAL CENTER - OBGYN	Outpatient Facility/OBS & GYN clinic	2
MAINE MEDICAL CENTER VIROLOGY TREATMENT CENTER	Outpatient Facility/Adult HIV Clinic	2
MERCY HOSPITAL	Inpatient Facility	1
PENOBSCOT BAY MEDICAL CENTER	Outpatient Facility	1
PLANNED PARENTHOOD	Screening Diagnostic and Referral Sites	2
PORTLAND BIOLOGICALS	Screening Diagnostic and Referral Sites	1
PORTLAND PUBLIC HEALTH	Public Health Clinics/ Public Health Departments	2
	Screening Diagnostic and Referral Sites	6
PRIMECARE FAMILY PRACTICE	Outpatient Facility	1
SCARBOROUGH HEALTH CARE	Outpatient Facility	1
SHEEPSMITH VALLEY HEALTH CENTER	Community Health Center	1
SOUTHERN MAINE MEDICAL CENTER	Outpatient Facility	4
ST. MARY'S REGIONAL MEDICAL CENTER	Outpatient Facility	1
SUMMER STREET COMMUNITY CLINIC	Community Health Center	1
TOGUS VA HOSPITAL	Inpatient Facility	1

**Key Points**

- **Fifty-six new HIV diagnoses (42 males and 14 females) were reported in 2009.**
- **The 2009 HIV incidence rate in Maine was 4.3 per 100,000 population.**
- **Most newly diagnosed HIV cases were: men (75%), males who were most likely infected through sexual contact with other males (50%), Whites (76%), and aged 20 to- 39-years old (50%) at time of HIV diagnosis.**
- **The age range for newly diagnosed HIV cases in 2009 was 0-77 years, including one perinatally infected case.**
- **Thirty-five newly diagnosed AIDS cases were reported in 2009.**
- **Most 2009 HIV and AIDS cases were resident in southern Maine counties (Cumberland and York counties).**
- **Most (52%) HIV cases were diagnosed by private physicians in out patient facilities.**

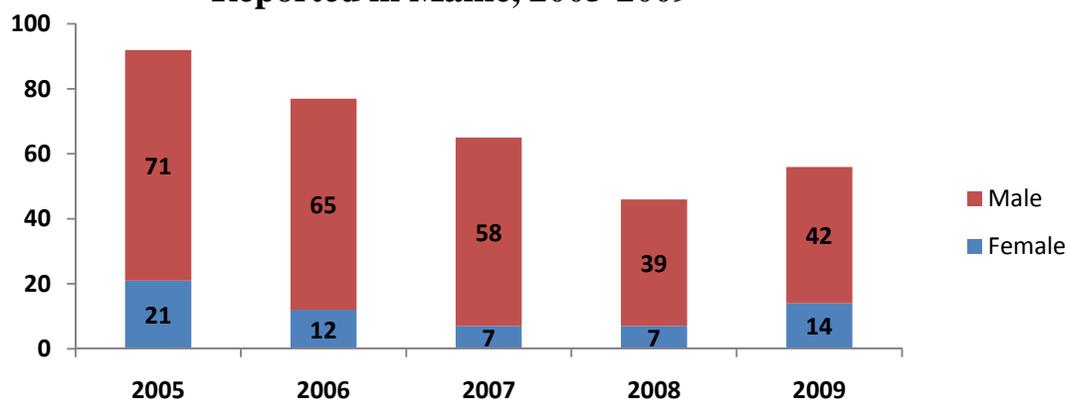
## II HIV in Maine

Since its initiation, HIV surveillance in Maine has undergone several methodological changes. These changes have often been parallel to changes in HIV/AIDS surveillance case definitions, the inclusion of name-based case reporting, and changes in HIV surveillance software. Such changes make trend analysis of HIV data challenging especially when no rigorous data standardization procedures are employed. For example, some cases may be reported several years after their initial HIV diagnosis. Furthermore, with the limited resources available, medical chart review of such cases to determine actual year of HIV diagnosis is often incomplete. As such, this report will focus on HIV cases diagnosed and reported among Maine residents between 2005 and 2009. Numbers will initially be presented in 2 categories- cases initially diagnosed in a specific year and cases with incomplete data suggesting late reporting (Figure 2). For 5 year trend analysis (2005-2009), the number of total cases diagnosed and reported will be analyzed and presented.



The total number of initial HIV diagnoses made in Maine between 2005 and 2009 ranged from 46 to 64, however, total reports of HIV diagnoses ranged from 46 to 92 (Figure 3). The majority of diagnoses were consistently observed among males as shown in Figure 3 below. The total number of diagnosed cases reported in 2009 increased 21 % from 2008 HIV diagnoses. This increase in annual counts could be due to several reasons including changes in reporting practices among facilities, implementation of HIV testing initiatives, or these numbers could represent actual increase in annual counts.

**Figure 3. Sex Distribution of Diagnosed HIV Cases Reported in Maine, 2005-2009**



From 2005 to 2008, the number of diagnosed HIV/AIDS cases reported decreased among both males and females (Figure 3). In 2009, however, the number and rate of diagnosed HIV cases reported among both males and females increased from counts/rates reported in 2008 (Table 5, Figure 3).

Table 5. Number and rate (per 100,000) of reported HIV cases by sex-Maine, 2005-2009.

Sex	Year														
	2005			2006			2007			2008			2009		
	n	Rate, per 100,000	%	n	Rate, per 100,000	%	n	Rate, per 100,000	%	n	Rate Per 100,000	%	n	Rate, per 100,000	%
Male	71			65			58			39			42		
Female	21			12			7			7			14		

<b>Female</b>	21	3.2	23	12	1.8	16	7	1.0	10	7	1.0	16	14	2.1	15
<b>Male</b>	71	11.4	77	65	10.4	84	58	9.5	90	39	6.2	84	42	6.7	85
<b>Total</b>	92	7.2	100	77	6.0	100	65	5.1	100	46	3.6	100	56	4.3	100

Table 6. Number and proportion of HIV cases by mode of HIV transmission and sex-Maine, 2005-2009.

Mode of HIV Transmission	SEX	YEAR									
		2005		2006		2007		2008		2009	
		n	%	n	%	n	n	%	n	%	
<b>Adult MSM &amp; IDU</b>	<b>Male</b>	0	0	1	1	1	2	0	0	3	5
<b>Perinatal Transmission</b>	<b>Male</b>	0	0	0	0	0	0	0	0	1	2
<b>Heterosexual contact with at-risk partner</b>	<b>Female</b>	4	4	6	8	2	3	4	8	5	9
	<b>Male</b>	4	4	3	4	2	3	0	0	2	4
<b>Injection drug use (IDU)</b>	<b>Female</b>	6	7	2	3	1	2	0	0	3	5
	<b>Male</b>	1	1	5	6	2	3	3	7	2	4
<b>Male sexual contact with male (MSM)</b>	<b>Male</b>	53	58	47	61	44	67	30	65	28	50
<b>Heterosexual contact, no at-risk partner reported (NRR)</b>	<b>Female</b>	11	12	4	5	4	6	3	7	6	11
	<b>Male</b>	13	14	9	12	9	15	5	11	6	11
<b>TOTAL</b>		92	100	77	100	65	100	46	100	56	100

Table 7. Estimated number and rate (per 100,000 population) of HIV cases diagnosed by racial categories-Maine, 2005-2009.

Race	Year of HIV Diagnosis														
	2005			2006			2007			2008			2009		
	n	Rate per 100,000	%	n	Rate per 100,000	%	n	Rate per 100,000	%	n	Rate per 100,000	%	n	Rate per 100,000	%
<b>American Indian/ Alaska Native</b>	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	14.1	2
<b>Black/African American</b>	10	147.9	11	11	162.7	14	6	88.8	9	4	59.2	9	12	177.5	21
<b>Native Hawaiian/ Pacific Islander</b>	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0
<b>White</b>	82	6.6	89	66	5.3	86	58	4.8	89	42	3.4	91	43	3.5	76
<b>Unknown</b>	0	NA	0	0	NA	0	1	NA	2	0	NA	0	0	NA	0

Maine’s racial minority populations such as Blacks, American Indians, and Native Hawaiian have consistently had the highest HIV *incidence* rates in the last 5 years (Table 7). These racial groups do not, however, account for the highest number of newly diagnosed HIV cases in any given year.

In 2009, four counties: Androscoggin, Cumberland, York, and Kennebec had annual HIV diagnosis rates higher than the statewide rate (4.3 per 100,000 population). Table 8 below shows the number and rates of new HIV diagnoses based on county of residence at time of HIV diagnosis.

Table 8. Estimated number and rate (per 100,000 population) of HIV diagnoses by county of residence at HIV diagnosis –Maine, 2005-2009.

COUNTY OF RESIDENCE	YEAR OF HIV DIAGNOSIS														
	2005			2006			2007			2008			2009		
	n	Rate per 100,000	%	n	Rate per 100,000	%	n	Rate per 100,000	%	n	Rate per 100,000	%	n	Rate per 100,000	%
ANDROSCOGGIN CO.	9	8.7	10	8	7.7	10	5	4.8	8	7	6.7	15	6	5.8	11
AROOSTOOK CO.	1	1.4	1	1	1.4	1	2	2.7	3	0	0.0	0	1	1.4	2
CUMBERLAND CO.	37	13.9	40	23	8.7	30	21	7.9	32	16	6.0	35	25	9.4	45
FRANKLIN CO.	0	0.0	0	1	3.4	1	0	0.0	0	1	3.4	2	0	0.0	0
HANCOCK CO.	5	9.7	5	5	9.7	6	2	3.9	3	0	0.0	0	0	0.0	0
KENNEBEC CO.	10	8.5	11	7	6.0	9	8	6.8	12	4	3.4	9	9	7.7	16
KNOX CO.	3	7.6	3	4	10.1	5	1	2.5	2	0	0.0	0	1	2.5	2
LINCOLN CO.	0	0.0	0	0	0.0	0	1	3.0	2	1	3.0	2	1	3.0	2
OXFORD CO.	3	5.5	3	4	7.3	5	0	0.0	0	3	5.5	7	0	0.0	0
PENOBSCOT CO.	4	2.8	4	6	4.1	8	5	3.5	8	1	0.7	2	1	0.7	2
PISCATAQUIS CO.	0	0.0	0	2	11.6	3	0	0.0	0	0	0.0	0	0	0.0	0
SAGadahoc CO.	1	2.8	1	1	2.8	1	0	0.0	0	0	0.0	0	0	0.0	0
SOMERSET CO.	0	0.0	0	0	0.0	0	2	3.9	3	1	2.0	2	1	2.0	2
WALDO CO.	3	8.3	3	2	5.5	3	1	2.8	2	0	0.0	0	0	0.0	0
WASHINGTON CO.	3	8.8	3	0	0.0	0	1	2.9	2	0	0.0	0	0	0.0	0
YORK CO.	13	7.0	14	12	6.4	16	16	8.6	25	12	6.4	26	11	5.9	20
UNKNOWN	0	NA	0	1	NA	1	0	NA	0	0	NA	0	0	NA	0
MAINE (STATE OF)	92	7.2	100	77	6.0	100	65	5.1	100	46	3.6	100	56	4.3	100

Table 9. Estimated number of HIV diagnoses by age at HIV diagnoses–Maine, 2005-2009.

Age at HIV Diagnosis	Year of Diagnosis									
	2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%
<13	1	1	1	1	0	0	0	0	1	2
13-19	3	3	0	0	0	0	1	2	2	4
20-29	12	13	19	25	17	26	7	15	14	25
30-39	23	25	15	19	13	20	11	24	14	25
40-49	36	39	27	35	22	34	14	30	10	18
50+	17	18	15	19	13	20	13	28	15	27

Between 2007 and 2008, the highest rates of new HIV diagnoses were observed among those aged 35-49 years old at the time of HIV diagnosis. In 2009, one pediatric HIV case was diagnosed in Maine. This case acquired HIV from a mother who once tested negative for HIV during pregnancy but was later diagnosed with HIV after delivery of her infected child. She was also known to practice behaviors that predispose one to HIV infection. No other HIV cases were diagnosed and reported among children (less than 13 years of age) between 2005-2009.

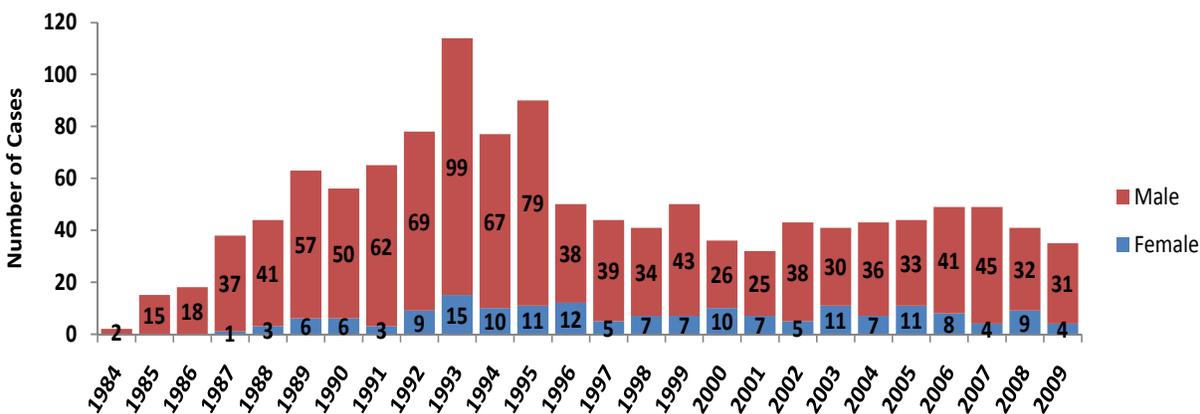
### **Key Points**

- **Between 2005-2009,**
  - **The number of HIV cases reported dropped by 64%**
  - **The number of HIV diagnoses dropped by 50% among females and 69% among males.**
  - **The most common mode of HIV transmission reported was male sexual contact with other males.**
  - **Among females, the most commonly reportable mode of HIV transmission was through sexual contact with at-risk partners.**
  - **Black residents in Maine had the highest rates of newly diagnosed infections while Whites accounted for the greatest numbers of new HIV infections.**
  - **The most frequently reported modes of HIV transmission were: male sexual contact with males (among White and Hispanics) and heterosexual contact with at-risk partners (Blacks).**

### III AIDS in Maine

Since 1984, Maine CDC has been conducting AIDS surveillance activities and disseminating relevant data to the public and community partners. Data collected show specific trends which may be due to several factors. These factors include changes in the HIV/AIDS surveillance case definitions, changes in local surveillance methodologies based on program evaluations, changes in State of Maine AIDS reporting requirements, advancements in laboratory diagnostic techniques for the diagnosis of opportunistic infections, the increased involvement of community partners in HIV and AIDS prevention, and the advent of more effective HIV/AIDS therapeutic regimens. This section provides descriptive data about Maine’s AIDS cases diagnosed and reported since 1984.

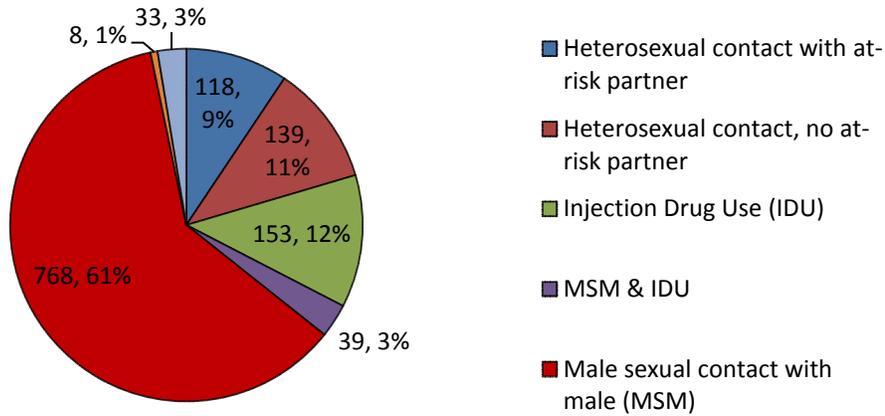
**Figure 4. Sex Distribution of AIDS Cases Diagnosed in Maine, 1984-2009**



Similar to Maine’s annual HIV diagnoses, AIDS cases diagnosed annually have been predominantly male. These individuals typically account for between 70% and 100% of annual AIDS diagnoses (Figure 4). Annual AIDS counts in Maine show a gradual decline since 1995 with

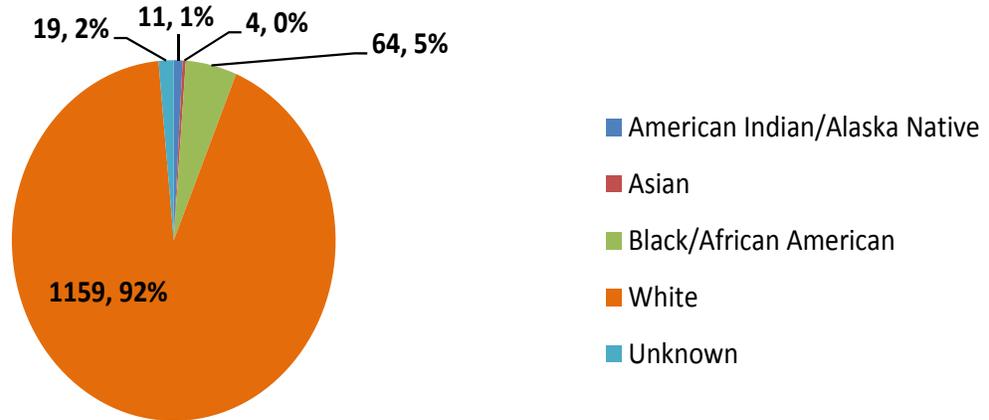
stable counts observed in recent years. The number of females diagnosed with AIDS in Maine declined almost 81% between 2003 and 2009.

**Figure 5. Mode of HIV Transmission for Cumulative AIDS Cases-Maine, 1984-2009**

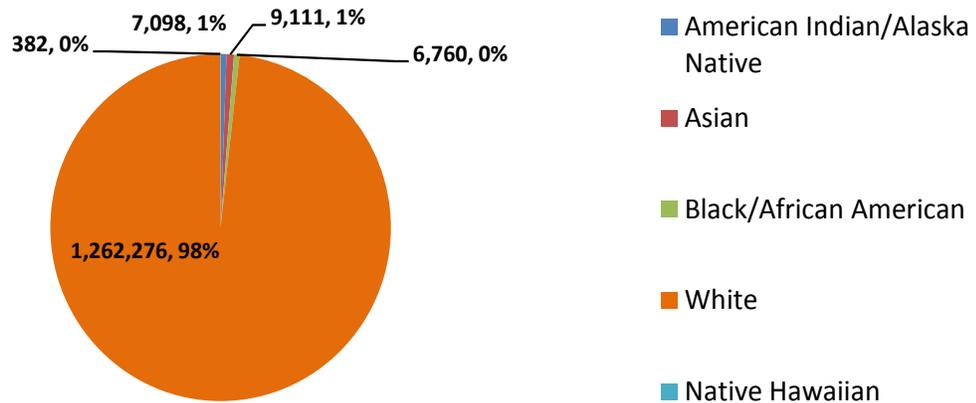


The proportion of annual AIDS diagnoses that identified their most likely mode of HIV transmission as male to male sexual contact (MSM) has been dropping since 1984 and currently stands at 66% of annual diagnoses. Besides MSM, the most commonly reported modes of HIV transmission among annual AIDS diagnoses include injection drug use and heterosexual contact with a partner at-risk for HIV.

**Figure 6. Racial Distribution of Cumulative AIDS Cases-Maine, 1984-2009**



**Figure 7. Racial Distribution of Maine Residents, 2000**



Since 1984, the largest proportion of Maine’s annual AIDS diagnoses has been observed among Whites. Among minority populations, Blacks have the largest proportion of minority AIDS diagnoses reported in recent years. Minority populations are disproportionately affected by HIV

infection and AIDS. These populations comprise less than 5% of the total Maine population yet about 10% of cumulative AIDS cases were among the minority population in Maine (Figures 6-7).

In Maine, most AIDS diagnoses have are reported in individuals aged over 30 years at the time of diagnosis. Most cumulative HIV diagnoses reported in Maine are also within the same age group. Observations in Maine indicate that between 35-45% of cumulative Maine HIV diagnoses are late HIV diagnoses.

**Figure 8. Age (in years) at Diagnosis for Cumulative AIDS Cases-Maine,1984-2009**

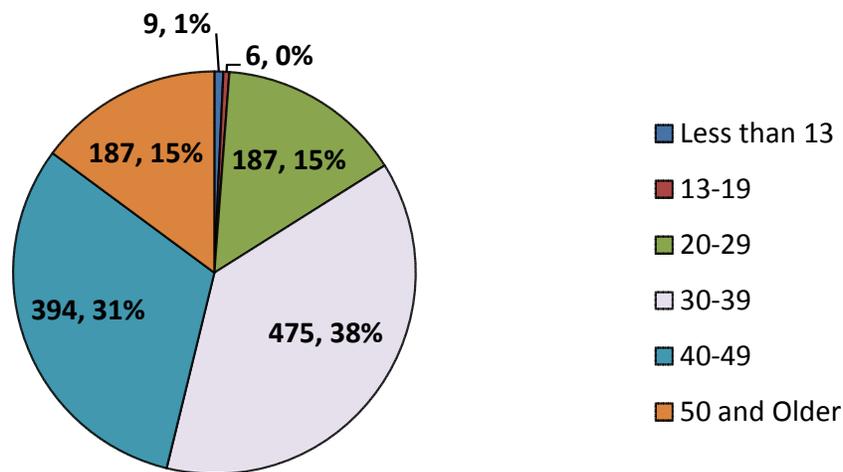


Table 10 (a). Number and rate (per 100,000) of AIDS diagnoses by county of residence at time of AIDS diagnosis-Maine, 1984-1988.

COUNTY OF RESIDENCE AT AIDS DIAGNOSIS	1984			1985			1986			1987			1988		
	n	Rate	%	n	Rate	%	n	Rate	%	n	Rate	%	n	Rate	%
UNKNOWN CO.	0	NA	0	0	NA	0	0	NA	0	0	NA	0	0	NA	0
ANDROSCOGGIN CO.	0	0	0	0	0	0	1	1	6	2	2	5	5	5	11
AROOSTOOK CO.	0	0	0	1	1	7	0	0	0	1	1	3	0	0	0
CUMBERLAND CO.	2	1	100	10	4	67	12	5	67	18	7	47	17	6	39
FRANKLIN CO.	0	0	0	0	0	0	0	0	0	0	0	0	1	3	2
HANCOCK CO.	0	0	0	1	2	7	0	0	0	1	2	3	0	0	0
KENNEBEC CO.	0	0	0	0	0	0	1	1	6	2	2	5	6	5	14
KNOX CO.	0	0	0	1	3	7	1	3	6	0	0	0	2	5	5
LINCOLN CO.	0	0	0	1	3	7	0	0	0	0	0	0	1	3	2
OXFORD CO.	0	0	0	0	0	0	0	0	0	2	4	5	2	4	5
PENOBSCOT CO.	0	0	0	0	0	0	1	1	6	5	3	13	2	1	5
PISCATAQUIS CO.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SAGADAHOC CO.	0	0	0	0	0	0	0	0	0	1	3	3	1	3	2
SOMERSET CO.	0	0	0	0	0	0	0	0	0	1	2	3	1	2	2
WALDO CO.	0	0	0	0	0	0	0	0	0	1	3	3	1	3	2
WASHINGTON CO.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
YORK CO.	0	0	0	1	1	7	2	1	11	4	2	11	5	3	11
MAINE	2	0	100	15	1	100	18	1	100	38	3	100	44	3	100

Table 10 (b). Number and rate (per 100,000) of AIDS diagnoses by county of residence at time of AIDS diagnosis-Maine, 1989-1993.

COUNTY OF RESIDENCE AT AIDS DIAGNOSIS	1989			1990			1991			1992			1993		
	n	Rate	%												
UNKNOWN CO.	0	NA	0												
ANDROSCOGGIN CO.	3	3	5	4	4	7	12	12	18	8	8	10	7	7	6
AROOSTOOK CO.	2	3	3	0	0	0	0	0	0	3	4	4	2	3	2
CUMBERLAND CO.	21	8	33	20	8	36	15	6	23	23	9	29	41	15	36
FRANKLIN CO.	0	0	0	0	0	0	2	7	3	0	0	0	1	3	1
HANCOCK CO.	3	6	5	1	2	2	3	6	5	3	6	4	2	4	2
KENNEBEC CO.	4	3	6	4	3	7	11	9	17	11	9	14	7	6	6
KNOX CO.	2	5	3	1	3	2	0	0	0	1	3	1	6	15	5
LINCOLN CO.	4	12	6	3	9	5	1	3	2	0	0	0	1	3	1
OXFORD CO.	2	4	3	3	5	5	1	2	2	0	0	0	7	13	6
PENOBSCOT CO.	4	3	6	6	4	11	7	5	11	3	2	4	13	9	11
PISCATAQUIS CO.	0	0	0	0	0	0	3	17	5	0	0	0	1	6	1
SAGADAHOC CO.	6	17	10	1	3	2	0	0	0	0	0	0	1	3	1
SOMERSET CO.	0	0	0	1	2	2	0	0	0	5	10	6	2	4	2
WALDO CO.	2	6	3	0	0	0	0	0	0	1	3	1	0	0	0
WASHINGTON CO.	0	0	0	3	9	5	1	3	2	4	12	5	0	0	0
YORK CO.	10	5	16	9	5	16	9	5	14	16	9	21	23	12	20
MAINE	63	5	100	56	4	100	65	5	100	78	6	100	114	9	100

Table 10 (c). Number and rate (per 100,000) of AIDS diagnoses by county of residence at time of AIDS diagnosis-Maine, 1994-1998.

COUNTY OF RESIDENCE AT AIDS DIAGNOSIS	1994			1995			1996			1997			1998		
	n	Rate	%												
UNKNOWN CO.	0	NA	0												
ANDROSCOGGIN CO.	8	8	10	11	11	12	5	5	10	5	5	11	8	8	20
AROOSTOOK CO.	1	1	1	1	1	1	1	1	2	0	0	0	0	0	0
CUMBERLAND CO.	20	8	26	27	10	30	23	9	46	17	6	39	13	5	32
FRANKLIN CO.	1	3	1	0	0	0	0	0	0	1	3	2	1	3	2
HANCOCK CO.	4	8	5	3	6	3	2	4	4	1	2	2	2	4	5
KENNEBEC CO.	10	9	13	8	7	9	1	1	2	5	4	11	2	2	5
KNOX CO.	1	3	1	3	8	3	2	5	4	0	0	0	0	0	0
LINCOLN CO.	1	3	1	3	9	3	2	6	4	0	0	0	0	0	0
OXFORD CO.	2	4	3	2	4	2	1	2	2	0	0	0	1	2	2
PENOBSCOT CO.	8	6	10	11	8	12	5	3	10	5	3	11	8	6	20
PISCATAQUIS CO.	0	0	0	0	0	0	1	6	2	2	12	5	1	6	2

SAGADAHOC CO.	2	6	3	0	0	0	0	0	0	0	0	0	0	0	0
SOMERSET CO.	2	4	3	1	2	1	1	2	2	0	0	0	2	4	5
WALDO CO.	2	6	3	2	6	2	1	3	2	2	6	5	0	0	0
WASHINGTON CO.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
YORK CO.	15	8	19	18	10	20	5	3	10	6	3	14	3	2	7
MAINE	77	6	100	90	7	100	50	4	100	44	3	100	41	3	100

Table 10 (d). Number and rate (per 100,000) of AIDS diagnoses by county of residence at time of AIDS diagnosis-Maine, 1999-2003.

COUNTY OF RESIDENCE AT AIDS DIAGNOSIS	1999			2000			2001			2002			2003		
	n	Rate	%												
UNKNOWN CO.	0	NA	0												
ANDROSCOGGIN CO.	6	6	12	5	5	14	3	3	9	4	4	9	5	5	12
AROOSTOOK CO.	3	4	6	3	4	8	1	1	3	2	3	5	2	3	5
CUMBERLAND CO.	14	5	28	11	4	31	9	3	28	22	8	51	14	5	34
FRANKLIN CO.	0	0	0	1	3	3	0	0	0	0	0	0	0	0	0
HANCOCK CO.	1	2	2	1	2	3	2	4	6	2	4	5	2	4	5
KENNEBEC CO.	4	3	8	3	3	8	2	2	6	4	3	9	4	3	10
KNOX CO.	2	5	4	0	0	0	1	3	3	1	3	2	2	5	5
LINCOLN CO.	1	3	2	0	0	0	1	3	3	0	0	0	1	3	2
OXFORD CO.	0	0	0	0	0	0	1	2	3	0	0	0	2	4	5
PENOBSCOT CO.	6	4	12	8	6	22	4	3	13	2	1	5	4	3	10
PISCATAQUIS CO.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SAGADAHOC CO.	0	0	0	0	0	0	1	3	3	1	3	2	0	0	0
SOMERSET CO.	0	0	0	2	4	6	0	0	0	1	2	2	0	0	0
WALDO CO.	4	11	8	0	0	0	0	0	0	0	0	0	1	3	2
WASHINGTON CO.	1	3	2	0	0	0	2	6	6	1	3	2	1	3	2
YORK CO.	8	4	16	2	1	6	5	3	16	3	2	7	3	2	7
MAINE	50	4	100	36	3	100	32	3	100	43	3	100	41	3	100

Table 10 (e). Number and rate (per 100,000) of AIDS diagnoses by county of residence at time of AIDS diagnosis-Maine, 2004-2009.

COUNTY OF RESIDENCE AT AIDS DIAGNOSIS	2004			2005			2006			2007			2008			2009		
	n	Rate	%															
UNKNOWN CO.	1	NA	2	0	NA	0	1	NA	2	2	NA	4	0	NA	0	0	NA	0
ANDROSCOGGIN CO.	3	3	7	6	6	14	4	4	8	3	3	6	4	4	10	2	2	6
AROOSTOOK CO.	0	0	0	1	1	2	0	0	0	2	3	4	0	0	0	1	1	3
CUMBERLAND CO.	9	3	21	14	5	32	18	7	37	17	6	35	15	6	37	14	5	40
FRANKLIN CO.	0	0	0	0	0	0	1	3	2	0	0	0	0	0	0	0	0	0
HANCOCK CO.	1	2	2	3	6	7	1	2	2	3	6	6	2	4	5	0	0	0
KENNEBEC CO.	3	3	7	5	4	11	3	3	6	5	4	10	1	1	2	6	5	17
KNOX CO.	2	5	5	1	3	2	1	3	2	2	5	4	1	3	2	1	3	3
LINCOLN CO.	1	3	2	0	0	0	1	3	2	2	6	4	1	3	2	1	3	3
OXFORD CO.	1	2	2	1	2	2	3	5	6	0	0	0	1	2	2	0	0	0
PENOBSCOT CO.	8	6	19	1	1	2	4	3	8	3	2	6	1	1	2	2	1	6
PISCATAQUIS CO.	0	0	0	0	0	0	1	6	2	0	0	0	1	6	2	0	0	0
SAGADAHOC CO.	0	0	0	1	3	2	0	0	0	0	0	0	0	0	0	0	0	0
SOMERSET CO.	3	6	7	0	0	0	2	4	4	1	2	2	0	0	0	1	2	3
WALDO CO.	4	11	9	1	3	2	0	0	0	1	3	2	1	3	2	0	0	0
WASHINGTON CO.	0	0	0	2	6	5	0	0	0	2	6	4	1	3	2	0	0	0

YORK CO.	7	4	16	8	4	18	9	5	18	6	3	12	12	6	29	7	4	20
MAINE	43	3	100	44	3	100	49	4	100	49	4	100	41	3	100	35	3	100

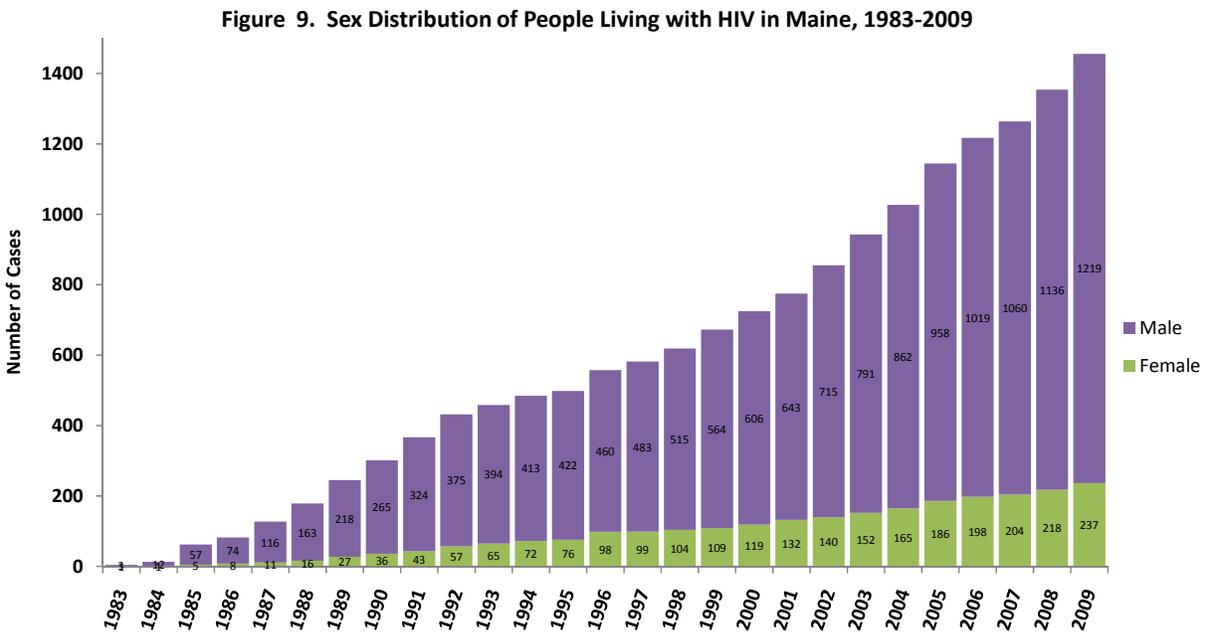
### Key Points

- **After peaking in 1993, the number of newly diagnosed AIDS cases in Maine gradually decreased to current levels of 35 cases reported.**
- **Between 70%-100% of annual AIDS diagnoses are males.**
- **The proportion of annually diagnosed AIDS cases that were most likely infected through male to male sexual contact decline from 100% in 1984 to about 66% in 2009.**
- **Besides male-to-male sexual contact, heterosexual contact with at risk partners is the most frequently reported mode of HIV transmission among Maine’s cumulative AIDS cases.**
- **Since 2000, the highest proportion of Maine’s annual AIDS diagnoses has been among the 40-49 year old age group.**

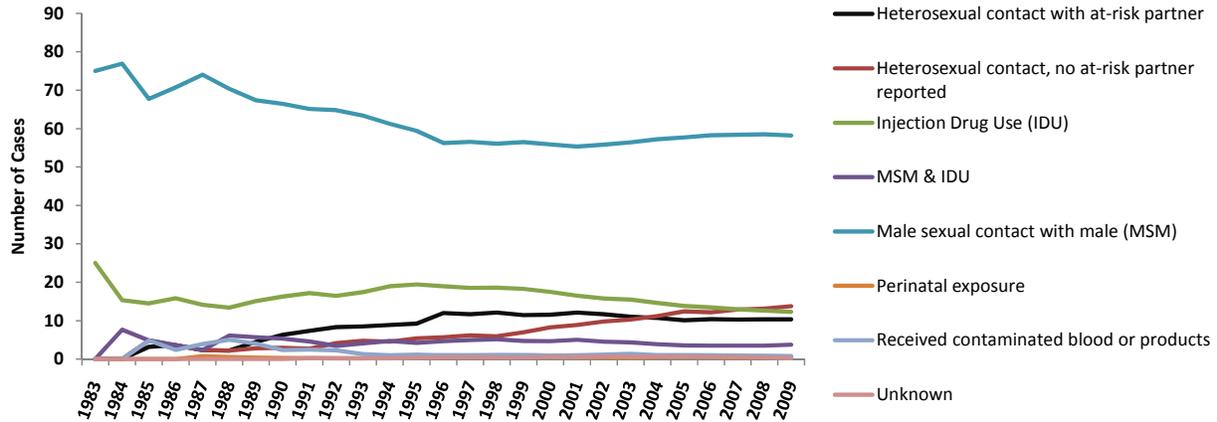
## IV

### People Living With HIV/AIDS in Maine (PLWHA)

Estimates of the annual number of Mainers living with HIV/AIDS were derived from existing Maine CDC records such as annual HIV/AIDS diagnoses and historical data obtained from State of Maine vital records. Records for Mainers diagnosed out-of-state were also considered for periods when residence in Maine was known. Data analyzed depict an annual increase in the number of people living with HIV/AIDS in Maine since 1984. This increase can be attributed to various factors including the presence of new HIV infections, advancements in treatment options for HIV and AIDS defining illnesses, the availability of an extensive network of accessible social, prevention, and counseling services, and availability of HIV testing services. In this section, we present and briefly discuss descriptive data about estimates of the annual prevalence counts of PLWHA in Maine.



**Figure 10. Mode of HIV Transmission among People Living with HIV in Maine, 1983-2009**



The proportion of annual PLWHA in Maine whose most likely mode of HIV transmission was sexual contact with other males has consistently been higher than any other identified modes of HIV transmission. The proportion of annual PLWHA in Maine that were most likely infected with HIV through heterosexual contact with at-risk partners or heterosexual contact without any known at-risk partners reported has been rising since the early 1990s. The proportion of PLWHA infected through contaminated blood, blood products or who are transplants recipients of contaminated tissue has declined to less than 1% in recent years. The number and proportion of PLWHA who were most likely infected through heterosexual contact (with at-risk partners or partners not at-risk) could be increasing due to several factors including: an increase in the number of new annual HIV diagnoses who report that they were most likely infected through heterosexual contact, increase in the prevalence of HIV/AIDS cases, lack of knowledge about a partner’s behavioral risk factors for HIV, and misclassification of mode of HIV transmission or failure of cases to accurately and completely disclose HIV risk behaviors.

Figures 11-12 below show annual trends among different racial groups of people living with HIV/AIDS in Maine. In any given year, Whites represent the largest number of people living with HIV/AIDS in Maine. Among Maine’s minority groups, Blacks constitute the largest annual

proportion of PLWHA, a trend observed since 2000. Unlike other minority groups, the proportion of blacks among those living with HIV/AIDS in Maine has been raising (Figure 12). This raise could be attributed to an increase in HIV diagnoses among foreign-born and U.S. born residents described as black/African Americans.

Figure 11 . Racial Distribution of People Living with HIV in Maine, 1983-2009

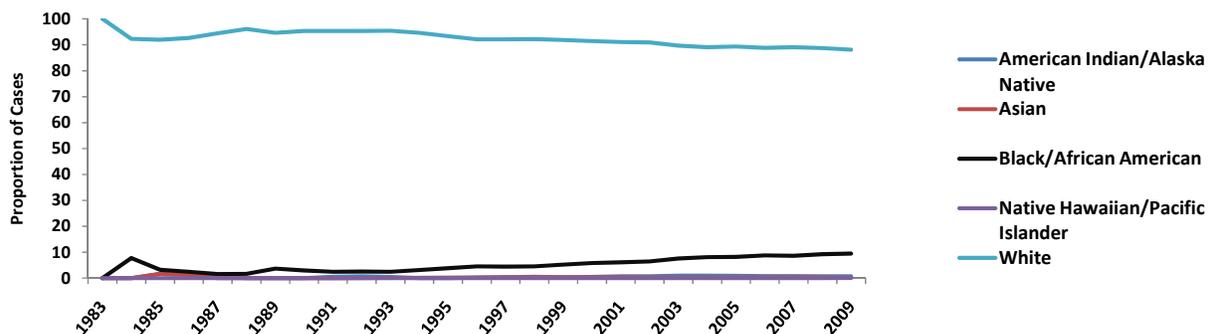


Figure 12 . Racial Distribution of Minority Population Living with HIV in Maine, 1983-2009

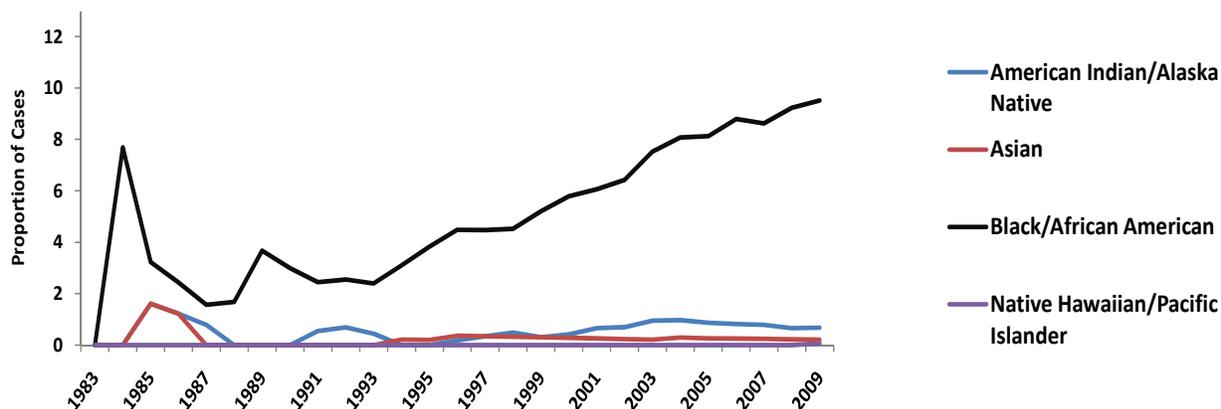
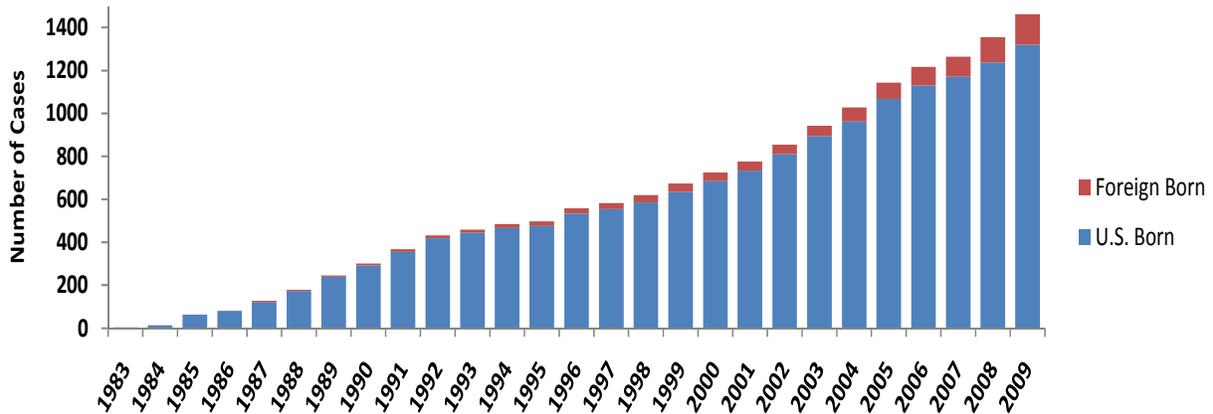
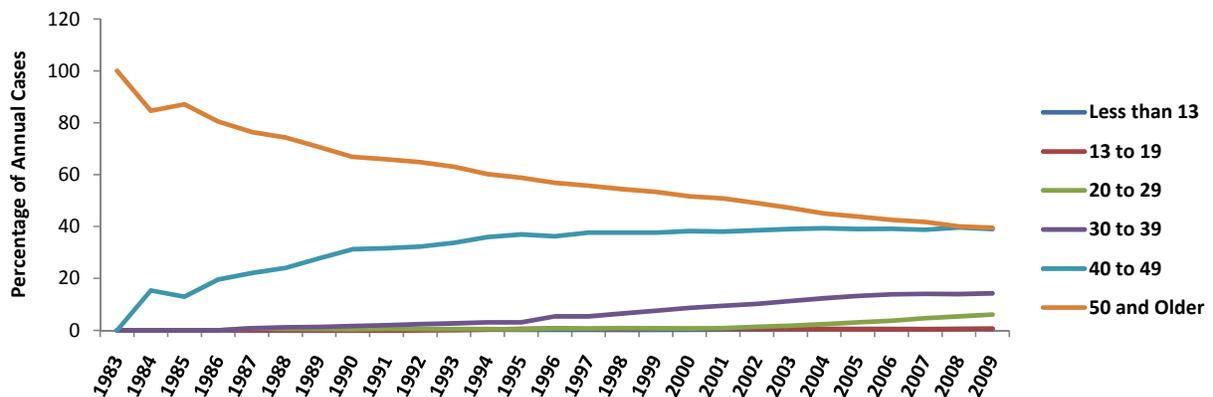


Figure 13 . Country of Birth for People Living with HIV in Maine, 1983-2009



In 2009, foreign-born residents accounted for between 6% and 9% of PLWHA in Maine. This proportion is at its highest level reported since 1986. In 2009, 20% of all newly diagnosed HIV infected cases were known to be foreign-born. Several reasons may account for increases in the number of foreign-born residents living with HIV/AIDS including primary and secondary migration of HIV infected individuals, infection due to high risk behaviors known to spread HIV/AIDS, deficiencies in HIV/AIDS knowledge or prevention messages, lack of access to healthcare, and social-economic situations unique to immigrants (1).

Figure 14. Age Distribution of People Living with HIV in Maine, 1983-2009



During this epidemic the age-group distribution of people living with HIV/AIDS in Maine has changed in two major ways. There has been a general decline in the number and proportion of PLWHA less than 35 years while the proportion of PLWHA aged 40 to 49 has increased. In 2009,

over 80% of PLWHA in Maine were aged 40 years or older (Figure 14). The reasons that may account for the observed age based trends include: increased number new HIV infections and HIV diagnoses among older people. There is also longer survival of HIV infected patients due to widespread use of antiretroviral therapy and the presence of various healthcare options for treatment (2).

### **Key Points**

- **The number of Maine residents living with HIV/AIDS has been rising annually since 1984.**
- **Male to male sexual contact has been consistently reported as the most likely mode of HIV transmission among PLWHA in each year.**
- **In any given year Whites constitute the largest proportion of PLWHA .**
- **Blacks constitute the largest proportion of minority PLWHA.**
- **The number of foreign-born Mainers living with HIV/AIDS has been increasing since 1986 and now constitutes about 6 to 9% of the total HIV/AIDS prevalence in Maine.**
- **The number of PLWHA in Maine aged 0-40 years has been decreasing annually while those aged 41+ shows an increase.**

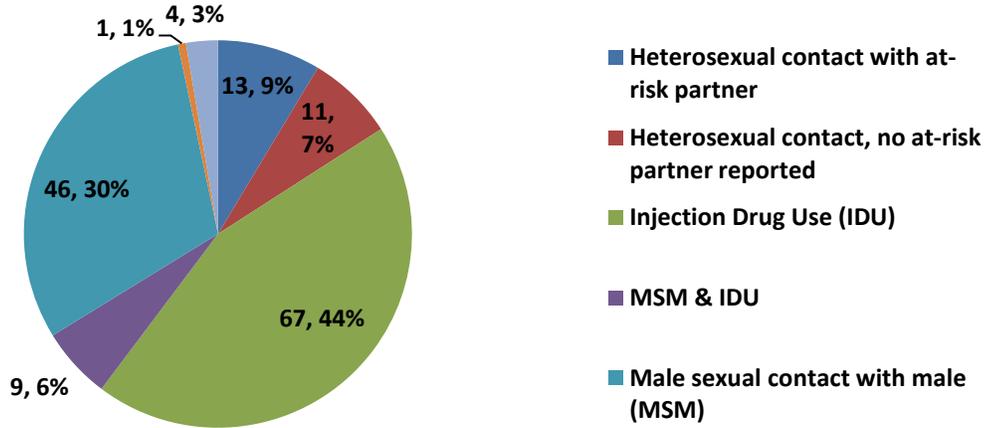
## V

### HIV/AIDS AMONG SELECTED GROUPS IN MAINE

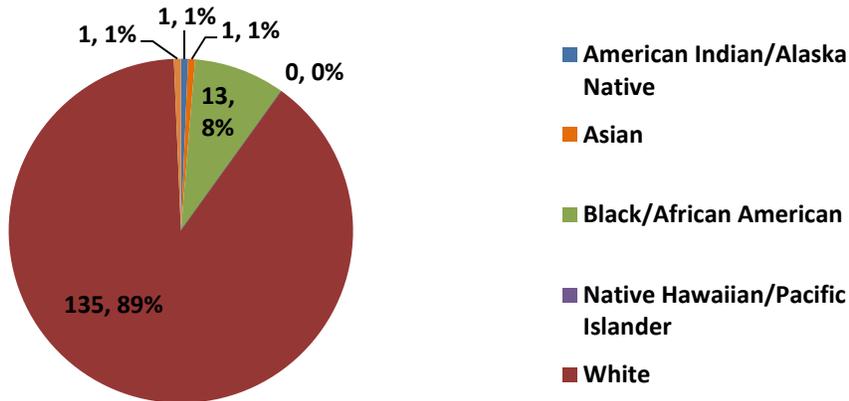
#### **HIV- Hepatitis C coinfection among Mainers**

Under strict security and confidentiality guidelines, the HIV, STD and Viral Hepatitis Program at Maine CDC annually perform database cross- matching between HIV and Hepatitis C case registries statistical software. The sequence of database cross-matching was based on case last name and date of birth for each of the cases in both registries. Over 2,100 unduplicated HIV/AIDS records of Maine residents were matched with 13,000 hepatitis C records. As a result of this matching 156 co-infected individuals were identified representing about 7% of HIV/AIDS cases. In December 2007, 129 (83%) of co-infected Mainers were known to be living. About 78% of cumulative co-infected Mainers were male and almost half (49%) most likely acquired HIV infection through the use of non prescription injection drugs.

**Figure 15. Mode of HIV transmission among cumulative Hepatitis C- HIV coinfectd cases in Maine, 1984-2008**



**Figure 16. Racial Distribution of Cumulative Hep C- HIV coinfectd cases in Maine, 1984-2008**



**Late HIV Testers in Maine**

The time interval between first confirmed positive HIV test result and AIDS diagnosis is often used to estimate whether a newly diagnosed individual tested early or late in the spectrum of HIV infection. For purposes of disease surveillance, late HIV testers in Maine are defined as individuals who are diagnosed with acquired immunodeficiency syndrome (AIDS) within one year of a confirmed positive HIV test result or diagnosis. In 2008, about 50% of all newly diagnosed cases were diagnosed with AIDS within 1 year of HIV diagnosis. Nationally, about 40% of new HIV diagnoses reported each year are late testers. Such individuals may have been infected for long periods of time and thus exposing their partners to HIV for substantially long periods of time. In addition to accounting for new HIV infections, late testers do not fully benefit from the available treatment options for HIV and AIDS.

Table 11. Selected demographic variables for late testers in Maine- 2007-2008

Demographic variable	Year of HIV diagnosis			
	2007		2008*	
	n	%	n	%
<b>Total number of late testers (percentage of annual diagnoses)</b>	<b>25</b>	<b>39</b>	<b>23</b>	<b>50</b>
<i>Sex</i>				
<b>Female</b>	1	4	5	21
<b>Male</b>	24	96	18	79
<b>Total</b>	25	100	23	100
<i>Age at HIV diagnosis</i>				
<b>20-24</b>	1	4	2	9
<b>25-29</b>	2	8	0	0
<b>30-34</b>	2	8	3	13
<b>35-39</b>	5	20	2	9
<b>40-44</b>	3	12	5	21
<b>45-49</b>	6	24	3	13
<b>50-54</b>	5	20	1	4

	55-59	0	0	1	4
	60-64	1	4	2	9
	65+	0	0	4	17
<b>Total</b>		25	100	23	100
<i>Race/ethnicity</i>					
	Black,	4	16	3	13
	Hispanic	0	0	0	0
	White,	21	84	20	87
<b>Total</b>		25	100	23	100
<i>Mode of HIV transmission</i>					
	Adult MSM & IDU	1	4	0	0
	Heterosexual contact with at-risk partner	3	12	3	13
	Injection drug use (IDU)	1	4	2	8
	Male sexual contact with male (MSM)	12	48	12	52
	Heterosexual contact, no at-risk partner reported	8	32	6	26
<b>Total</b>		25	100	23	100

## Key Points

- Among all HIV/AIDS cases reported to Maine CDC since 1984, 156 cases have been diagnosed and reported as being coinfecting with Hepatitis C.
- 82% of Hepatitis C and HIV coinfecting cases were living in Maine as of December, 2007.
- Over 44% of HIV-Hepatitis C coinfecting cases acquired HIV through non prescription injection drug use.
- 89% of HIV-Hepatitis C coinfecting cases are White.
- Foreign-born residents account for about 3.5% of PLWHA.
- The most frequently reported mode of HIV transmission among foreign-born residents is heterosexual contact with partners at-risk of HIV.

- In 2007 and 2008, between 39% and 50 % of Maine's new HIV cases were late HIV testers.

## Appendix-A

### **Online links to Maine State statues pertaining to HIV/AIDS:**

#### **Informed consent:**

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19203-A.html>

#### **Confidentiality:**

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19203.html>

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19203-D.html>

**Counseling and HIV tests:**

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19204-A.html>

**HIV testing after assault:**

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19203-F.html>

**Employment and HIV testing:**

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19204-B.html>

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19203-C.html>

**HIV/ AIDS Reporting:**

<http://www.mainelegislature.org/legis/Statutes/22/title22sec823.html>

**HIV/AIDS Reporting Instructions:**

[http://www.maine.gov/dhhs/boh/ddc/disease\\_reporting.htm](http://www.maine.gov/dhhs/boh/ddc/disease_reporting.htm)

**Revealing HIV tests results:**

<http://www.mainelegislature.org/legis/Statutes/5/title5sec19204-C.html>

## Appendix B-Data Tables

### B.1. AIDS Cases Diagnosed in Maine

Table B1.1 (a) Annual number of AIDS diagnoses by mode of HIV transmission 1984-1995

Mode of HIV Transmission	1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Heterosexual contact with at-risk partner	0	0	0	0	0	0	0	0	2	5	6	10	5	9	4	6	4	5	7	6	7	9	11	12
Heterosexual contact, no at-risk partner	0	0	0	0	0	0	0	0	1	2	1	2	1	2	2	3	6	8	6	5	8	10	10	11
Injection Drug Use (IDU)	0	0	1	7	1	6	0	0	1	2	3	5	4	7	11	17	7	9	19	17	11	14	12	13
MSM & IDU	0	0	1	7	0	0	0	0	4	9	3	5	3	5	2	3	2	3	3	3	4	5	2	2
Male sexual contact with male (MSM)	2	100	12	80	16	89	34	89	31	70	47	75	41	73	42	65	54	69	78	68	45	58	48	53
Perinatal exposure	0	0	0	0	0	0	1	3	0	0	0	0	0	0	0	0	1	1	0	0	1	1	2	2
Received contaminated blood or products	0	0	1	7	1	6	3	8	5	11	3	5	2	4	4	6	4	5	1	1	1	1	5	6
<b>Total</b>	2	100	15	100	18	100	38	100	44	100	63	100	56	100	65	100	78	100	114	100	77	100	90	100

Table B1.1 (b) Annual number of AIDS diagnoses by mode of HIV transmission 1996-2009

Mode of HIV Transmission	1996		1997		1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Heterosexual contact with at-risk partner	12	24	1	2	11	27	7	14	6	17	3	9	3	7	3	7	3	7	7	16	3	6	5	10	3	7	5	14
Heterosexual contact, no at-risk partner	6	12	4	9	3	7	2	4	9	25	5	16	8	19	12	29	9	21	13	30	10	20	11	22	8	20	4	11
Injection Drug Use (IDU)	5	10	14	32	5	12	15	30	6	17	5	16	5	12	5	12	4	9	2	5	8	16	3	6	5	12	1	3
MSM & IDU	1	2	2	5	0	0	0	0	1	3	2	6	1	2	2	5	1	2	0	0	0	0	3	6	0	0	2	6
Male sexual contact with male (MSM)	24	48	23	52	21	51	26	52	14	39	16	50	26	60	18	44	25	58	22	50	28	57	27	55	25	61	23	66
Perinatal exposure	2	4	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0
Received contaminated blood or products	0	0	0	0	1	2	0	0	0	0	1	3	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	50	100	44	100	41	100	50	100	36	100	32	100	43	100	41	100	43	100	44	100	49	100	49	100	41	100	35	100

Table B 1.2 (a). Annual number of AIDS diagnoses by race -Maine, 1984-1996

Race	1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
American Indian/Alaska Native	0	0	1	7	1	6	0	0	0	0	0	0	0	0	1	2	1	1	0	0	0	0	0	0	0	0
Asian	0	0	0	0	0	0	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2
Black/African American	0	0	0	0	1	6	0	0	1	2	4	6	3	5	1	2	0	0	1	1	2	3	5	6	1	2
White	2	100	14	93	15	83	36	95	43	98	59	94	53	95	63	97	77	99	111	97	73	95	82	91	45	90
Unknown	0	0	0	0	1	6	1	3	0	0	0	0	0	0	0	0	0	0	2	2	2	3	3	3	3	6
<b>Total</b>	<b>2</b>	<b>100</b>	<b>15</b>	<b>100</b>	<b>18</b>	<b>100</b>	<b>38</b>	<b>100</b>	<b>44</b>	<b>100</b>	<b>63</b>	<b>100</b>	<b>56</b>	<b>100</b>	<b>65</b>	<b>100</b>	<b>78</b>	<b>100</b>	<b>114</b>	<b>100</b>	<b>77</b>	<b>100</b>	<b>90</b>	<b>100</b>	<b>50</b>	<b>100</b>

Table B 1.2 (b). Annual number of AIDS diagnoses by race-Maine, 1997-2009.

Race	1997		1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
American Indian/Alaska Native	0	0	1	2	1	2	0	0	0	0	0	0	3	7	1	2	0	0	0	0	1	2	0	0	0	0
Asian	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	1	2	0	0	0	0
Black/African American	0	0	3	7	3	6	1	3	2	6	3	7	7	17	2	5	4	9	3	6	8	16	4	10	5	14
White	40	91	37	90	44	88	35	97	29	91	40	93	31	76	39	91	40	91	45	92	39	80	37	90	30	86
Unknown	4	9	0	0	2	4	0	0	1	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total</b>	<b>44</b>	<b>100</b>	<b>41</b>	<b>100</b>	<b>50</b>	<b>100</b>	<b>36</b>	<b>100</b>	<b>32</b>	<b>100</b>	<b>43</b>	<b>100</b>	<b>41</b>	<b>100</b>	<b>43</b>	<b>100</b>	<b>44</b>	<b>100</b>	<b>49</b>	<b>100</b>	<b>49</b>	<b>100</b>	<b>41</b>	<b>100</b>	<b>35</b>	<b>100</b>

Table B 1.3 (a). Annual number of AIDS diagnoses by age group at AIDS diagnosis-Maine, 1984-1997.

Age at AIDS Diagnosis	1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996		1997	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Less than 13	0	0	0	0	1	6	1	3	0	0	0	0	0	0	1	2	1	1	0	0	1	1	2	2	2	4	0	0
13-19	0	0	0	0	0	0	1	3	1	2	0	0	0	0	1	2	1	1	1	1	0	0	0	0	0	0	0	0
20-29	1	50	5	33	4	22	10	26	8	18	22	35	15	27	13	20	13	17	13	11	13	17	13	14	7	14	4	9
30-39	1	50	7	47	9	50	15	39	23	52	21	33	28	50	21	32	32	41	49	43	40	52	40	44	22	44	23	52
40-49	0	0	2	13	3	17	4	11	6	14	14	22	9	16	24	37	26	33	40	35	19	25	23	26	12	24	12	27
50+	0	0	1	7	1	6	7	18	6	14	6	10	4	7	5	8	5	6	11	10	4	5	12	13	7	14	5	11
<b>Total</b>	<b>2</b>	<b>100</b>	<b>15</b>	<b>100</b>	<b>18</b>	<b>100</b>	<b>38</b>	<b>100</b>	<b>44</b>	<b>100</b>	<b>63</b>	<b>100</b>	<b>56</b>	<b>100</b>	<b>65</b>	<b>100</b>	<b>78</b>	<b>100</b>	<b>114</b>	<b>100</b>	<b>77</b>	<b>100</b>	<b>90</b>	<b>100</b>	<b>50</b>	<b>100</b>	<b>44</b>	<b>100</b>

Table B 1.3 (b). Annual number of AIDS diagnoses by age group at AIDS diagnosis-Maine, 1998-2009.

Age at AIDS Diagnosis	1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Less than 13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13-19	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0	0
20-29	5	12	5	10	3	8	4	13	2	5	2	5	3	7	5	11	5	10	6	12	4	10	2	6
30-39	13	32	21	42	13	36	10	31	11	26	12	29	11	26	9	20	11	22	13	27	10	24	10	29
40-49	13	32	15	30	15	42	11	34	17	40	18	44	24	56	17	39	22	45	20	41	18	44	10	29
50+	10	24	9	18	5	14	7	22	13	30	8	20	5	12	13	30	11	22	10	20	9	22	13	37
<b>Total</b>	<b>41</b>	<b>100</b>	<b>50</b>	<b>100</b>	<b>36</b>	<b>100</b>	<b>32</b>	<b>100</b>	<b>43</b>	<b>100</b>	<b>41</b>	<b>100</b>	<b>43</b>	<b>100</b>	<b>44</b>	<b>100</b>	<b>49</b>	<b>100</b>	<b>49</b>	<b>100</b>	<b>41</b>	<b>100</b>	<b>35</b>	<b>100</b>

Table B 1.4 (a). Annual number of AIDS diagnoses by county of residence at AIDS diagnosis-Maine, 1984-1997.

COUNTY OF RESIDENCE AT HIV DIAGNOSIS	1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996		1997	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
UNKNOWN CO.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ANDROSCOGGIN CO.	0	0	0	0	1	6	2	5	5	11	3	5	4	7	12	18	8	10	7	6	8	10	11	12	5	10	5	11
AROOSTOOK CO.	0	0	1	7	0	0	1	3	0	0	2	3	0	0	0	0	3	4	2	2	1	1	1	1	1	2	0	0
CUMBERLAND CO.	2	100	10	67	12	67	18	47	17	39	21	33	20	36	15	23	23	29	41	36	20	26	27	30	23	46	17	39
FRANKLIN CO.	0	0	0	0	0	0	0	0	1	2	0	0	0	0	2	3	0	0	1	1	1	1	0	0	0	0	1	2
HANCOCK CO.	0	0	1	7	0	0	1	3	0	0	3	5	1	2	3	5	3	4	2	2	4	5	3	3	2	4	1	2
KENNEBEC CO.	0	0	0	0	1	6	2	5	6	14	4	6	4	7	11	17	11	14	7	6	10	13	8	9	1	2	5	11
KNOX CO.	0	0	1	7	1	6	0	0	2	5	2	3	1	2	0	0	1	1	6	5	1	1	3	3	2	4	0	0
LINCOLN CO.	0	0	1	7	0	0	0	0	1	2	4	6	3	5	1	2	0	0	1	1	1	1	3	3	2	4	0	0
OXFORD CO.	0	0	0	0	0	0	2	5	2	5	2	3	3	5	1	2	0	0	7	6	2	3	2	2	1	2	0	0
PENOBSCOT CO.	0	0	0	0	1	6	5	13	2	5	4	6	6	11	7	11	3	4	13	11	8	10	11	12	5	10	5	11
PISCATAQUIS CO.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	5	0	0	1	1	0	0	0	0	1	2	2	5
SAGadahoc CO.	0	0	0	0	0	0	1	3	1	2	6	10	1	2	0	0	0	0	1	1	2	3	0	0	0	0	0	0
SOMERSET CO.	0	0	0	0	0	0	1	3	1	2	0	0	1	2	0	0	5	6	2	2	2	3	1	1	1	2	0	0
WALDO CO.	0	0	0	0	0	0	1	3	1	2	2	3	0	0	0	0	1	1	0	0	2	3	2	2	1	2	2	5
WASHINGTON CO.	0	0	0	0	0	0	0	0	0	0	0	0	3	5	1	2	4	5	0	0	0	0	0	0	0	0	0	0
YORK CO.	0	0	1	7	2	11	4	11	5	11	10	16	9	16	9	14	16	21	23	20	15	19	18	20	5	10	6	14
<b>MAINE</b>	<b>2</b>	<b>100</b>	<b>15</b>	<b>100</b>	<b>18</b>	<b>100</b>	<b>38</b>	<b>100</b>	<b>44</b>	<b>100</b>	<b>63</b>	<b>100</b>	<b>56</b>	<b>100</b>	<b>65</b>	<b>100</b>	<b>78</b>	<b>100</b>	<b>114</b>	<b>100</b>	<b>77</b>	<b>100</b>	<b>90</b>	<b>100</b>	<b>50</b>	<b>100</b>	<b>44</b>	<b>100</b>

Table B 1.4 (b). Annual number of AIDS diagnoses by county of residence at AIDS diagnosis-Maine, 1997-2009.

COUNTY OF RESIDENCE AT HIV DIAGNOSIS	1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
UNKNOWN CO.	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	1	2	2	4	0	0	0	0
ANDROSCOGGIN CO.	8	20	6	12	5	14	3	9	4	9	5	12	3	7	6	14	4	8	3	6	4	10	2	6
AROOSTOOK CO.	0	0	3	6	3	8	1	3	2	5	2	5	0	0	1	2	0	0	2	4	0	0	1	3
CUMBERLAND CO.	13	32	14	28	11	31	9	28	22	51	14	34	9	21	14	32	18	37	17	35	15	37	14	40
FRANKLIN CO.	1	2	0	0	1	3	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	0	0	0
HANCOCK CO.	2	5	1	2	1	3	2	6	2	5	2	5	1	2	3	7	1	2	3	6	2	5	0	0
KENNEBEC CO.	2	5	4	8	3	8	2	6	4	9	4	10	3	7	5	11	3	6	5	10	1	2	6	17
KNOX CO.	0	0	2	4	0	0	1	3	1	2	2	5	2	5	1	2	1	2	2	4	1	2	1	3
LINCOLN CO.	0	0	1	2	0	0	1	3	0	0	1	2	1	2	0	0	1	2	2	4	1	2	1	3
OXFORD CO.	1	2	0	0	0	0	1	3	0	0	2	5	1	2	1	2	3	6	0	0	1	2	0	0
PENOBSCOT CO.	8	20	6	12	8	22	4	13	2	5	4	10	8	19	1	2	4	8	3	6	1	2	2	6
PISCATAQUIS CO.	1	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	1	2	0	0
SAGadahoc CO.	0	0	0	0	0	0	1	3	1	2	0	0	0	0	1	2	0	0	0	0	0	0	0	0
SOMERSET CO.	2	5	0	0	2	6	0	0	1	2	0	0	3	7	0	0	2	4	1	2	0	0	1	3
WALDO CO.	0	0	4	8	0	0	0	0	0	0	1	2	4	9	1	2	0	0	1	2	1	2	1	0
WASHINGTON CO.	0	0	1	2	0	0	2	6	1	2	1	2	0	0	2	5	0	0	2	4	1	2	0	0
YORK CO.	3	7	8	16	2	6	5	16	3	7	3	7	7	16	8	18	9	18	6	12	12	29	7	20
MAINE	41	100	50	100	36	100	32	100	43	100	41	100	43	100	44	100	49	100	49	100	41	100	35	100

Table B 2.1 (a). Estimated annual number of people living with HIV/AIDS by sex-Maine, 1983-1996.

Sex	1983		1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Undetermined	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Female	1	25	1	8	5	8	8	10	11	9	16	9	27	11	36	12	43	12	57	13	65	14	72	15	76	15	98	18
Male	3	75	12	92	57	92	74	90	116	91	163	91	218	89	265	88	324	88	375	87	394	86	413	85	422	85	460	82
Total	4	100	13	100	62	100	82	100	127	100	179	100	245	100	301	100	367	100	432	100	459	100	485	100	498	100	558	100

Table B 2.1 (b). Estimated annual number of people living with HIV/AIDS by sex-Maine, 1997-2009.

Sex	1997		1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Undetermined	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	6	0	
Female	99	17	104	17	109	16	119	16	132	17	140	16	152	16	165	16	186	16	198	16	204	16	218	16	237	16
Male	483	83	515	83	564	84	606	84	643	83	715	84	791	84	862	84	958	84	1,019	84	1,060	84	1,136	84	1,219	83
Total	582	100	619	100	673	100	725	100	775	100	855	100	943	100	1,027	100	1,144	100	1,217	100	1,264	100	1,355	100	1,462	100

Table B 2.2 (a). Estimated annual number of people living with HIV/AIDS by mode of HIV transmission-Maine, 1983-1996

Mode of HIV Transmission	1983		1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Heterosexual contact with at-risk partner	0	0	0	0	2	3	3	4	3	2	4	2	11	4	19	6	27	7	36	8	39	9	43	9	46	9	67	12
Heterosexual contact, no at-risk partner reported	0	0	0	0	3	5	3	4	3	2	4	2	7	3	9	3	10	3	18	4	22	5	22	5	27	5	32	6
Injection Drug Use (IDU)	1	25	2	15	9	15	13	16	18	14	24	13	37	15	49	16	63	17	71	16	80	17	92	19	97	19	106	19
MSM & IDU	0	0	1	8	3	5	3	4	3	2	11	6	14	6	16	5	17	5	15	3	19	4	23	5	21	4	26	5
Male sexual contact with male (MSM)	3	75	10	77	42	68	58	71	94	74	126	70	165	67	200	66	239	65	280	65	291	63	297	61	296	59	314	56
Perinatal exposure	0	0	0	0	0	0	0	0	1	1	1	1	1	0	1	0	1	0	1	0	1	0	2	0	3	1	4	1
Received contaminated blood or products	0	0	0	0	3	5	2	2	5	4	9	5	10	4	7	2	9	2	10	2	6	1	5	1	6	1	6	1
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	2	0	3	1

Table B 2.2 (b). Estimated annual number of people living with HIV/AIDS by mode of HIV transmission-Maine, 1997-2009.

Mode of HIV Transmission	1997		1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009			
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%		
Heterosexual contact with at-risk partner	68	12	75	12	77	11	84	12	94	12	100	12	104	11	110	11	116	10	127	10	130	10	140	10	151	10		
Heterosexual contact, no at-risk partner reported	36	6	37	6	47	7	60	8	69	9	84	10	97	10	115	11	142	12	148	12	163	13	178	13	201	14		
Injection Drug Use (IDU)	108	19	115	19	123	18	127	18	128	17	135	16	146	15	150	15	158	14	164	13	164	13	171	13	180	12		
MSM & IDU	29	5	32	5	32	5	34	5	39	5	39	5	41	4	40	4	41	4	43	4	44	3	48	4	55	4		
Male sexual contact with male (MSM)	329	57	347	56	380	56	405	56	429	55	477	56	532	56	588	57	660	58	709	58	738	58	793	59	851	58		
Perinatal exposure	3	1	3	0	4	1	4	1	4	1	4	0	4	0	6	1	7	1	6	0	6	0	6	0	7	0		
Received contaminated blood or products	6	1	7	1	7	1	7	1	8	1	10	1	13	1	11	1	12	1	12	1	12	1	12	1	12	1	12	1
Unknown	3	1	3	0	3	0	4	1	4	1	6	1	6	1	7	1	8	1	8	1	7	1	7	0	5	0		

Table B 2.3 (a). Estimated annual number of people living with HIV/AIDS by Ethnicity-Maine, 1983-1996

Ethnicity	1983		1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Hispanic/Latino	0	0	1	8	4	6	5	6	7	6	8	4	10	4	12	4	15	4	15	3	17	4	24	5	26	5	35	6
Not Hispanic/Latino	4	100	12	92	58	94	77	94	120	94	171	96	235	96	288	96	350	95	413	96	436	95	453	93	464	93	507	91
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	2	1	4	1	6	1	8	1	8	1	16	3

Table B 2.3 (b). Estimated annual number of people living with HIV/AIDS by Ethnicity-Maine, 1997-2009

Ethnicity	1997		1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Hispanic/Latino	36	6	39	6	40	6	40	6	41	5	44	5	51	5	56	5	67	6	70	6	72	6	72	5	75	5
Not Hispanic/Latino	527	91	559	90	606	90	650	90	695	90	765	89	848	90	927	90	1033	90	1103	91	1148	91	1237	91	1337	91
Unknown	19	3	21	3	27	4	35	5	39	5	46	5	44	4	44	4	44	4	44	3	44	3	46	4	50	4

Table B 2.4 (a). Estimated annual number of people living with HIV/AIDS by race-Maine, 1983-1996.

Race	1983		1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
American Indian/Alaska Native	0	0	0	0	1	2	1	1	1	1	0	0	0	0	0	0	2	1	3	1	2	0	0	0	0	0	1	0
Asian	0	0	0	0	1	2	1	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	2	0	
Black/African American	0	0	1	8	2	3	2	2	2	2	3	2	9	4	9	3	9	2	11	3	11	2	15	3	19	4	25	4
Native Hawaiian/Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
White	4	100	12	92	57	92	76	93	120	94	172	96	232	95	287	95	350	95	412	95	438	95	459	95	465	93	514	92
Unknown	0	0	0	0	1	2	2	2	4	3	4	2	4	2	5	2	6	2	6	1	8	2	10	2	13	3	16	3

Table B 2.4 (b). Estimated annual number of people living with HIV/AIDS by race/ethnicity-Maine, 1997-2009.

Race	1997		1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009			
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%		
American Indian/Alaska Native	2	0	3	0	2	0	3	0	5	1	6	1	9	1	10	1	10	1	10	1	10	1	9	1	10	1		
Asian	2	0	2	0	2	0	2	0	2	0	2	0	2	0	3	0	3	0	3	0	3	0	3	0	3	0		
Black/African American	26	4	28	5	35	5	42	6	47	6	55	6	71	8	83	8	93	8	107	9	109	9	125	9	139	10		
Native Hawaiian/Pacific Islander	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
White	536	92	571	92	618	92	663	91	706	91	777	91	846	90	915	89	1022	89	1081	89	1126	89	1202	89	1290	88		
Unknown	16	3	15	2	16	2	15	2	15	2	15	2	15	2	16	1	16	1	16	1	16	1	16	1	16	1	20	1

Table B 2.5 (a) Estimated annual number of HIV/AIDS cases living in Maine by current age in respective year, 1984-1996

Age Group	1983		1984		1985		1986		1987		1988		1989		1990		1991		1992		1993		1994		1995		1996	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Less than 13	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	1	0	1	0
13 to 19	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	3	1	4	1	
20 to 29	0	0	0	0	0	0	0	0	1	1	1	1	1	0	1	0	2	1	2	0	2	0	2	0	2	0	4	1
30 to 39	0	0	0	0	0	0	0	0	1	1	2	1	3	1	5	2	7	2	10	2	12	3	15	3	15	3	30	5
40 to 49	0	0	2	15	8	13	16	20	28	22	43	24	68	28	94	31	116	32	139	32	155	34	174	36	184	37	202	36
50 and Older	4	100	11	85	54	87	66	80	97	76	133	74	173	71	201	67	242	66	280	65	289	63	292	60	293	59	317	57

Table B 2.5 (b) Estimated annual number of HIV/AIDS cases living in Maine by current age in respective year, 1996-2009

Age Group	1997		1998		1999		2000		2001		2002		2003		2004		2005		2006		2007		2008		2009	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Less than 13	1	0	1	0	1	0	1	0	1	0	3	0	3	0	5	0	6	1	6	0	6	0	8	1	8	<1
13 to 19	3	1	3	0	4	1	5	1	5	1	5	1	5	1	5	0	5	0	4	0	4	0	6	0	6	<1
20 to 29	4	1	5	1	5	1	5	1	7	1	12	1	17	2	24	2	35	3	45	4	59	5	72	5	87	6
30 to 39	31	5	40	6	51	8	63	9	73	9	87	10	106	11	127	12	151	13	169	14	178	14	189	14	201	14
40 to 49	219	38	233	38	253	38	277	38	295	38	329	38	368	39	404	39	446	39	476	39	490	39	537	40	565	39
50 and Older	324	56	337	54	359	53	374	52	394	51	419	49	444	47	462	45	501	44	517	42	527	42	543	40	595	40

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