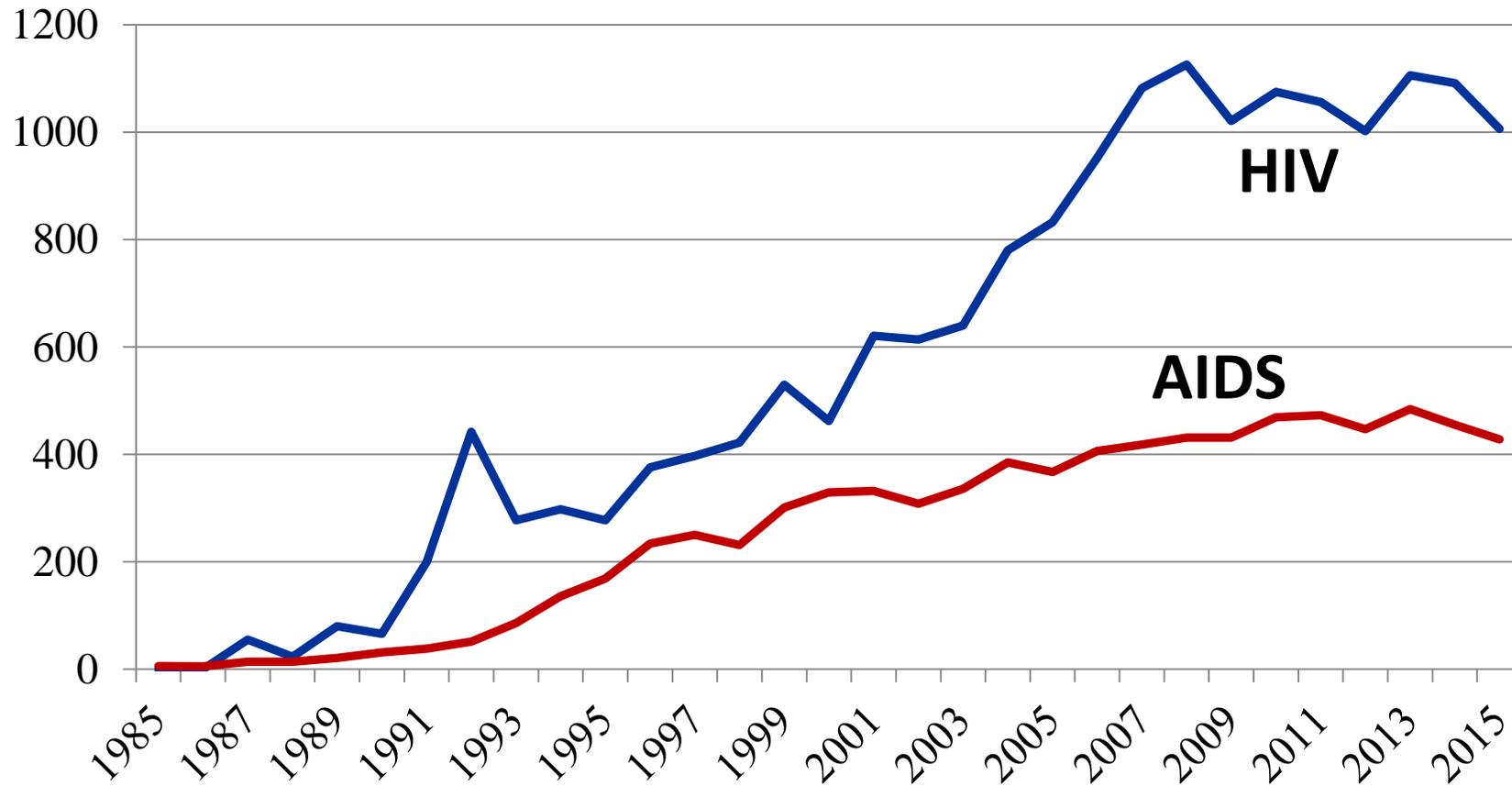


Current Situation of HIV/AIDS and Syphilis in Tokyo

Akifumi Imamura, MD.

*Tokyo Metropolitan
Cancer and Infectious Diseases Center
Komagome Hospital*

Trend of newly registered HIV/AIDS cases in Japan



The number of HIV/AIDS cases (**1434**) by Transmission Category in 2015

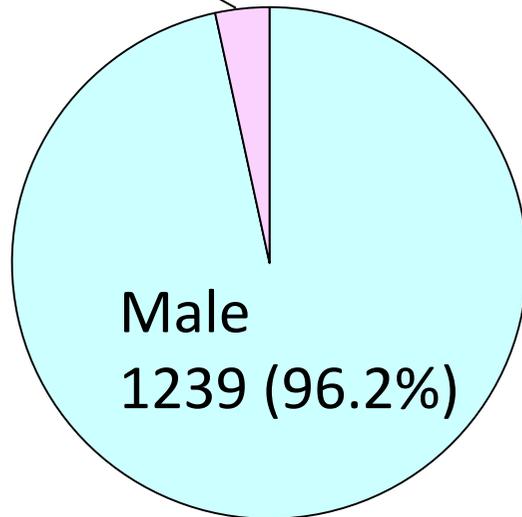
Transmission Category	Cases (%)
Heterosexual sexual contact	291 (20.3%)
Same-sex sexual contact*	941 (65.6%)
Injection Drug User	5 (0.3%)
Mother to Child Transmission	1 (0.1%)
Others	27 (1.9%)
Unknown	169 (11.8%)

* All cases are MSM (men who have sex with men)

The number of HIV/AIDS cases (**1434**) by Nationality, Gender in 2015

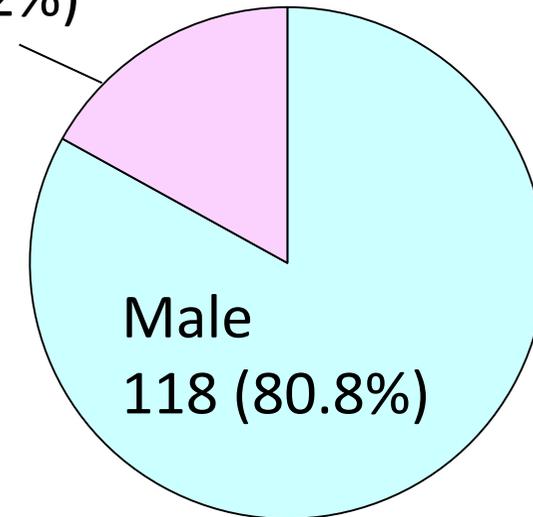
Japanese = **1288**

Female
49 (3.8%)



Non- Japanese = **146**

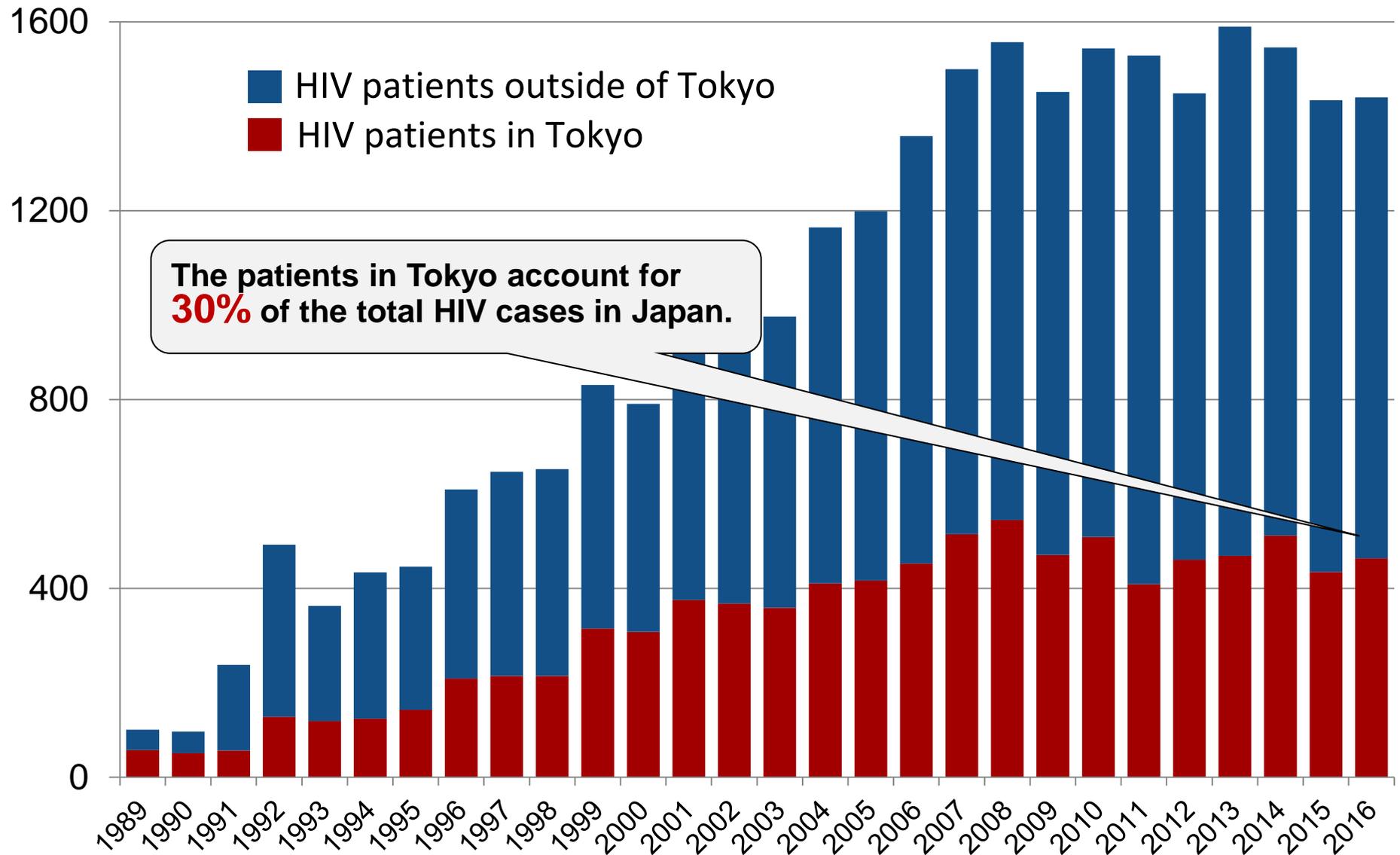
Female
28 (19.2%)



The number of HIV/AIDS infection among Japanese has been still increasing mainly with MSM.

MSM = men who have sex with men

HIV patients in Tokyo and Japan



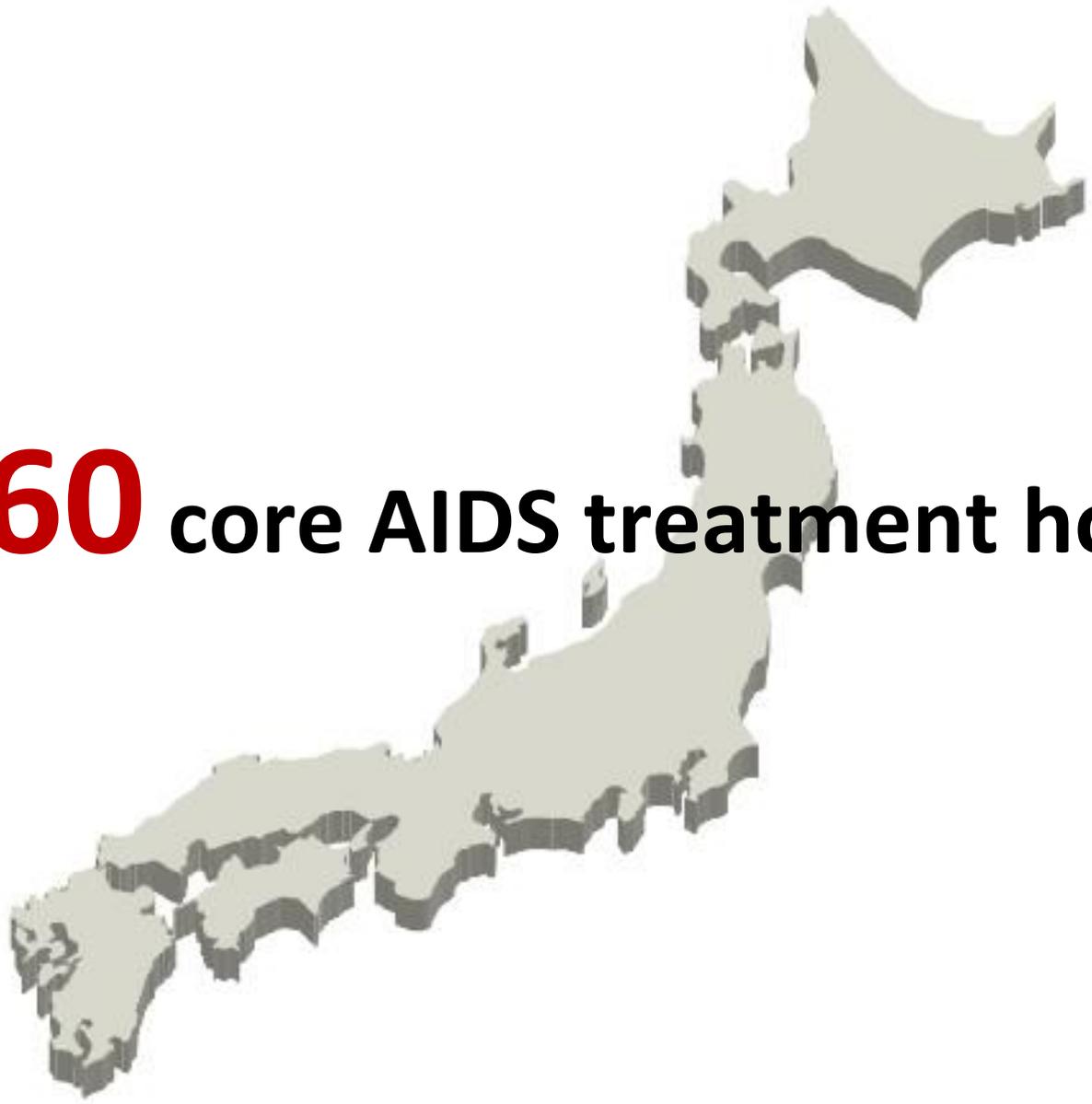
TasP

Treatment as Prevention

“Cascade” Strategy

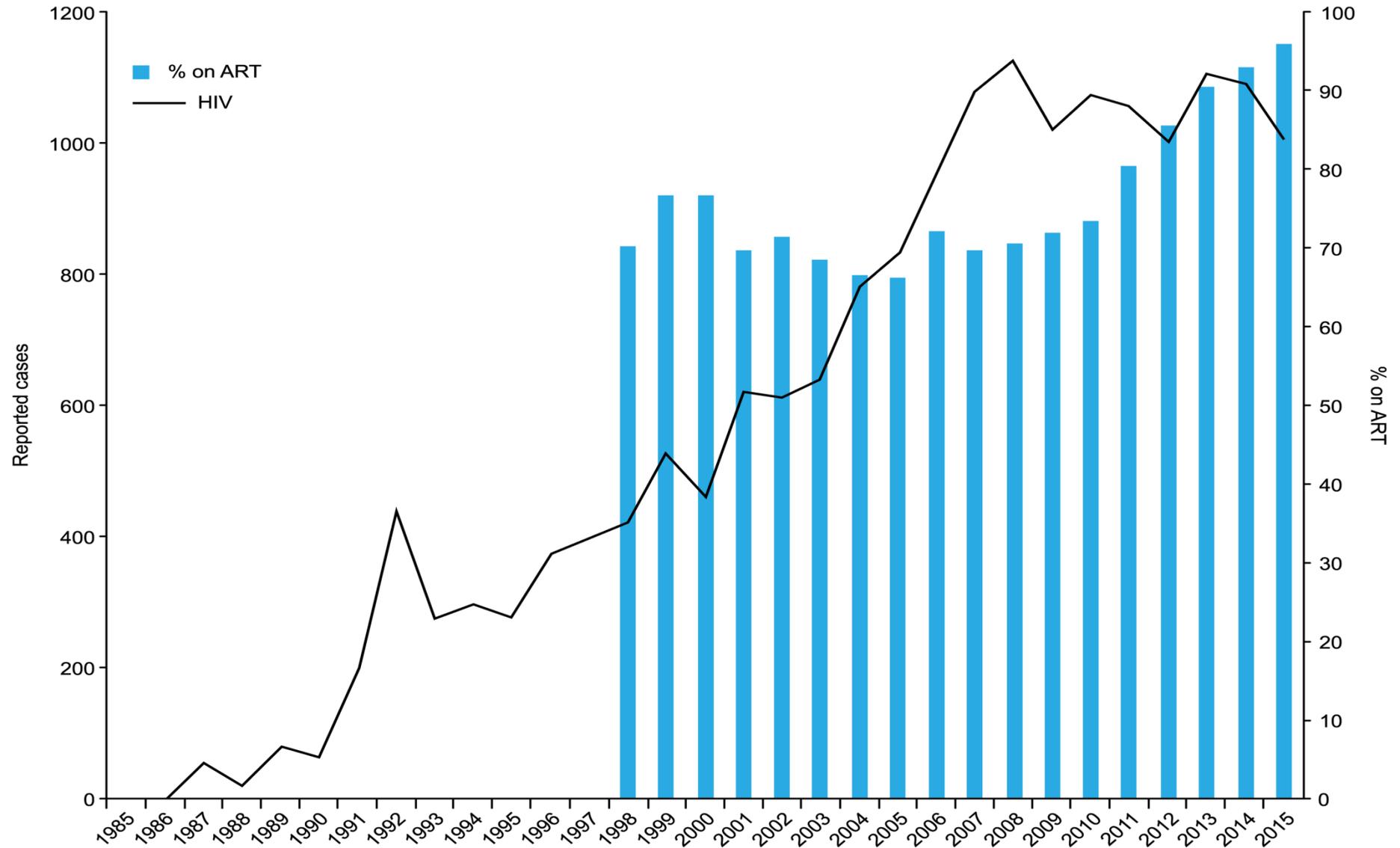
The goal is
achievement of **90–90–90**

- **Diagnostic rate of all patients** **90%**
- **Regular visit at HIV clinic** **90%**
- **Effective treatment** **90%**

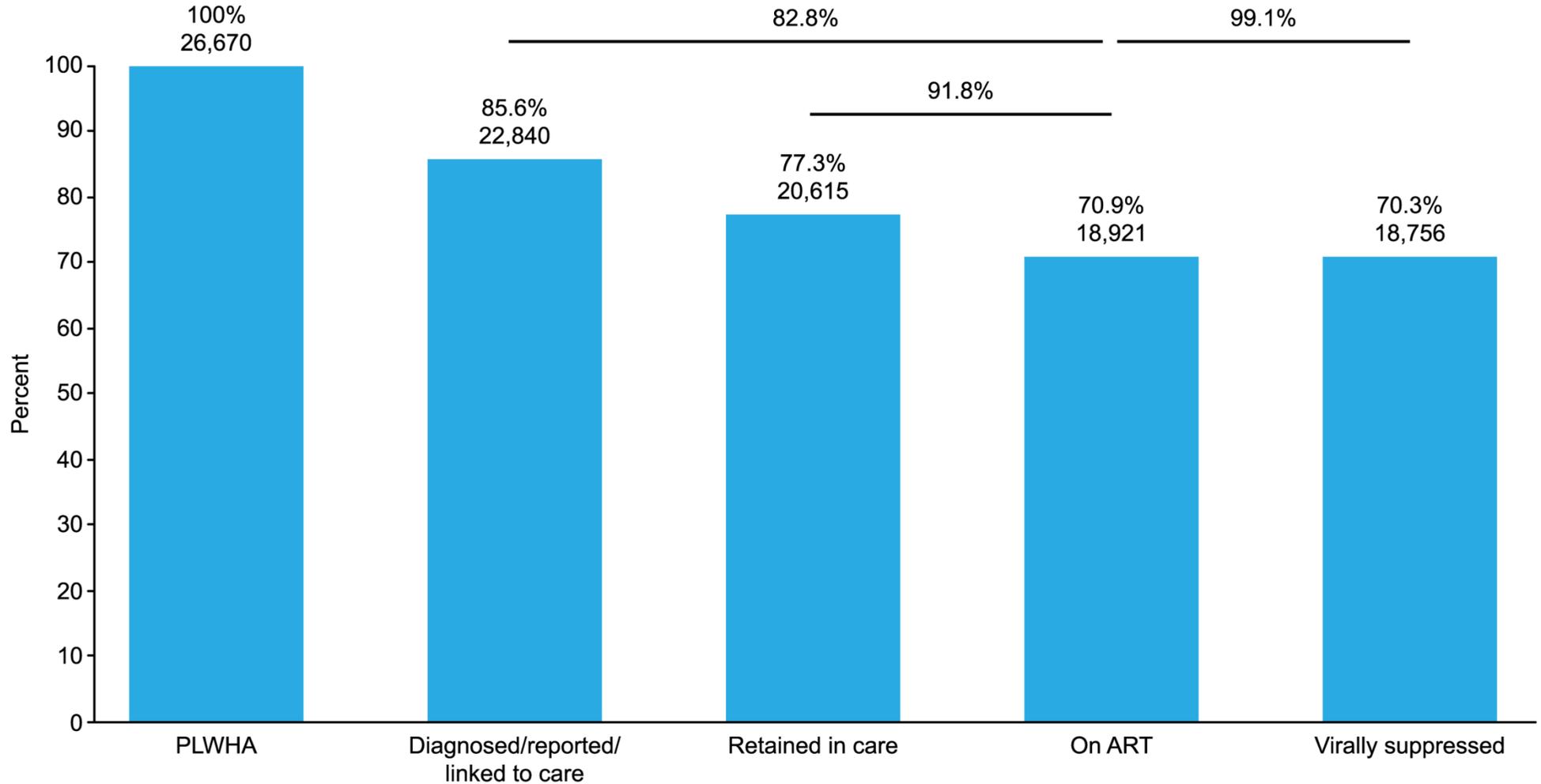


360 core AIDS treatment hospitals

Annually reported new HIV infections and % on ART in AIDS Core Hospitals



HIV Care Cascade in Japan

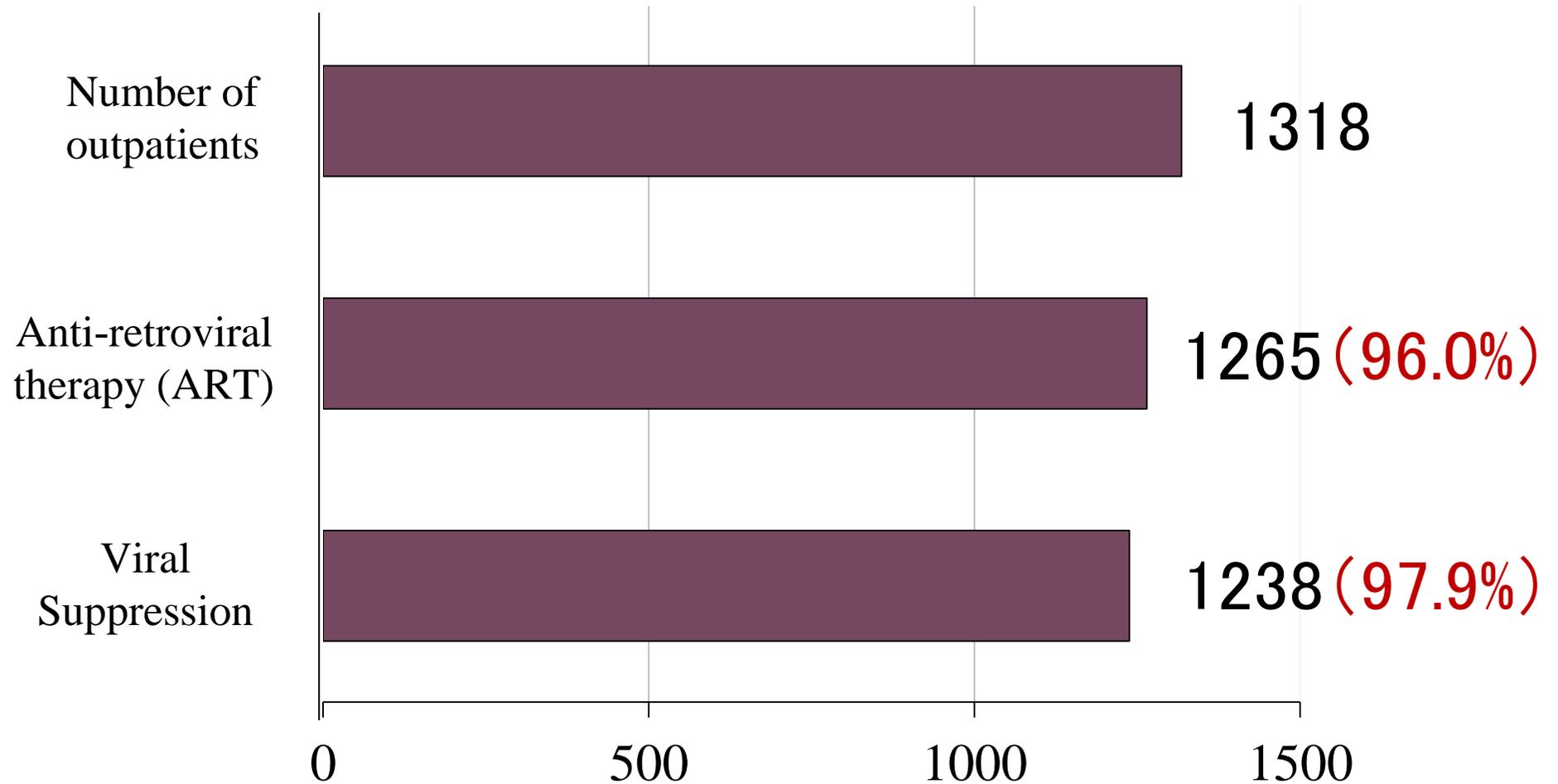


PLWHA: People Living with HIV/AIDS

HIV Care Cascade in Japan

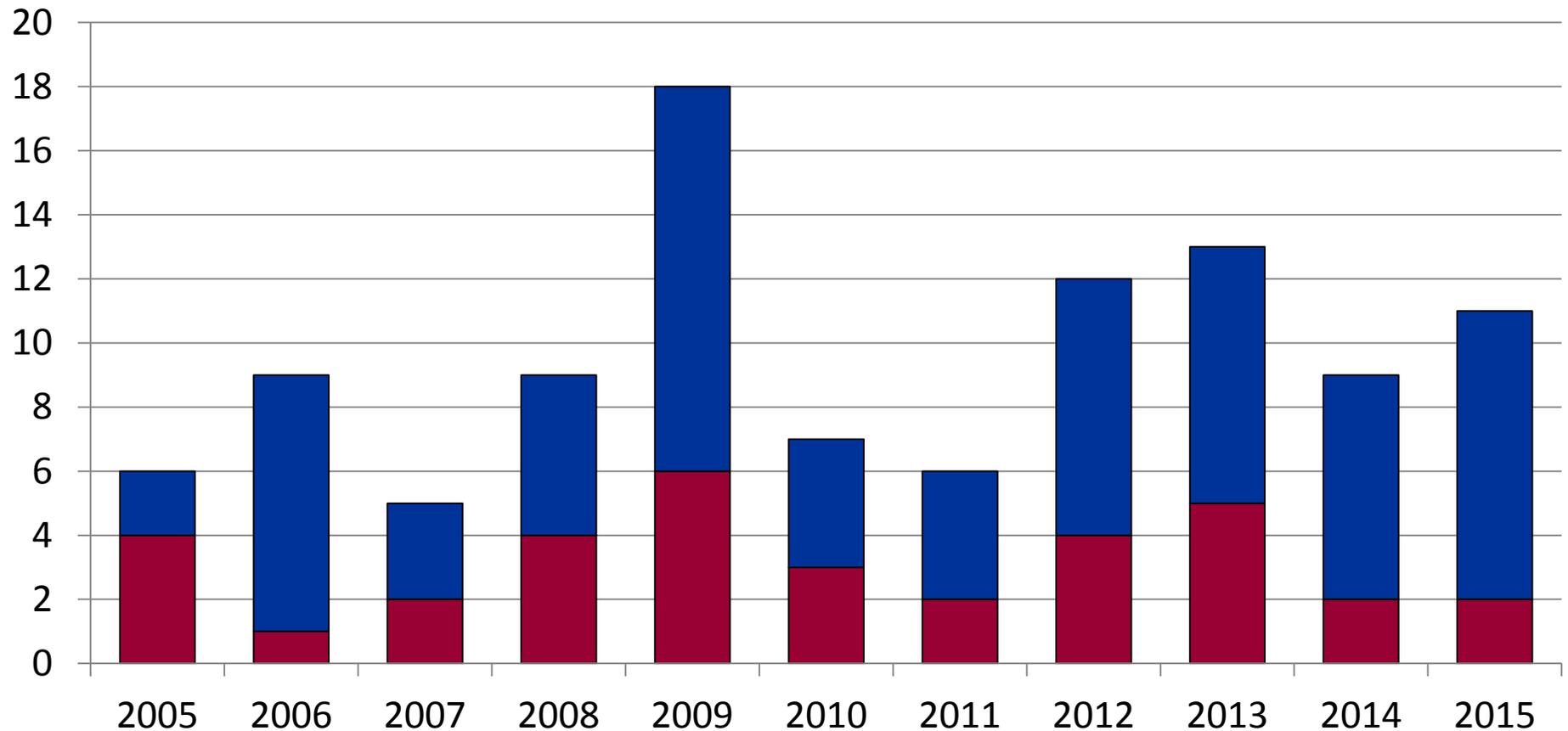
Diagnosed		
<hr/>	=	85.6%
PLWHA (26,670)		
On ART		
<hr/>	=	91.8%
Retained in Care		
Virally suppressed		
<hr/>	=	99.1%
On ART		

Anti-retroviral therapy:ART in Komagome hospital (2015)



Causes of death of HIV outpatients at Komagome hospital

- AIDS-related illness
- Other cause of death



Non-AIDS Comorbidities

Cardiovascular disease

Liver disease

Chronic kidney disease

Osteoporosis

HIV associated neurocognitive disorders (HAND)

Non-AIDS-Defining Malignancies (NADM)

AIDS-defining malignancies (ADM)

Kaposi's sarcoma

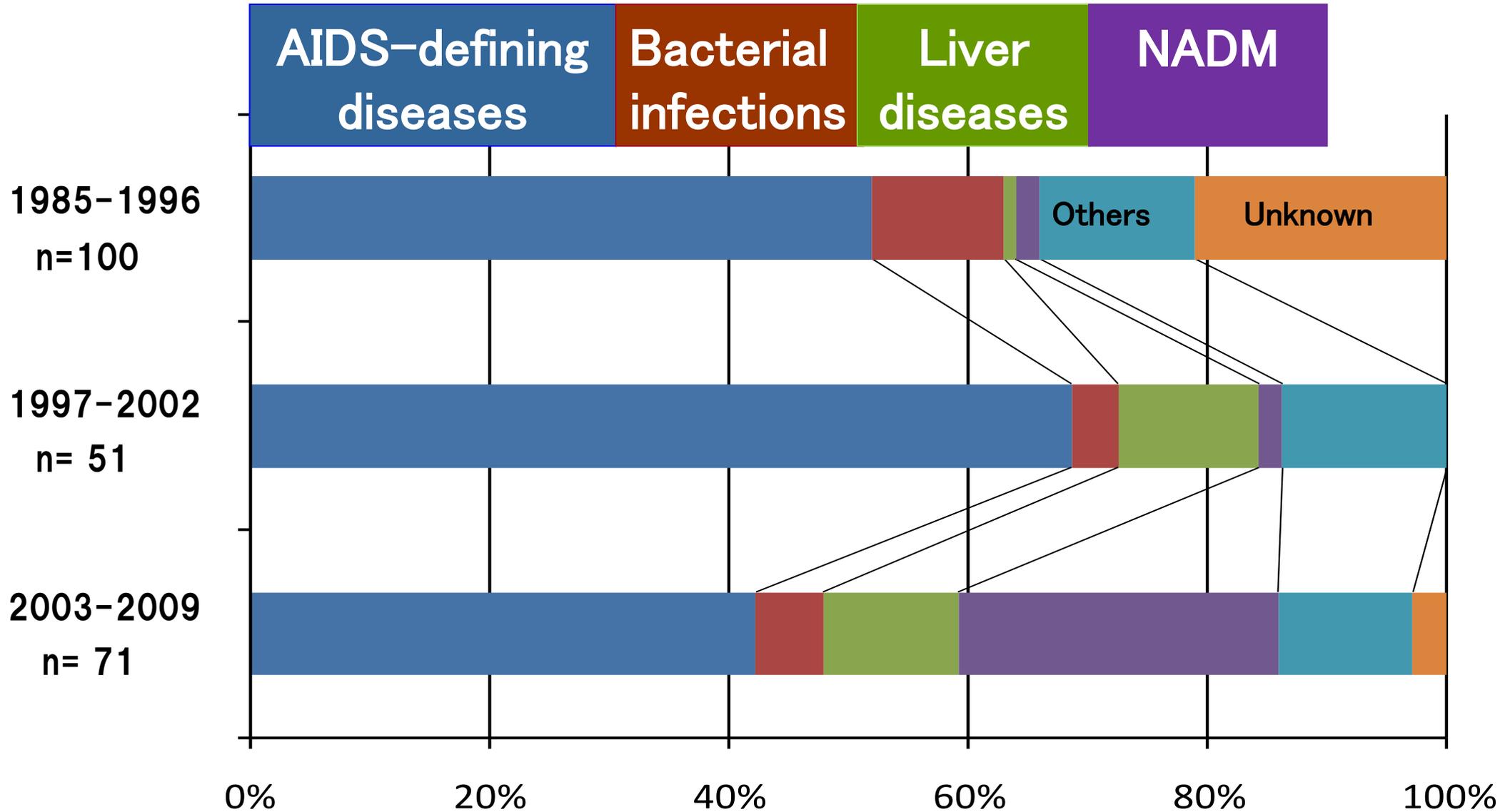
Non-Hodgkin lymphoma

Cervical cancer

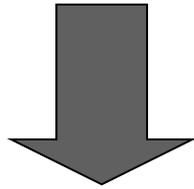
non-AIDS-defining malignancies (NADM)

Other malignancies

Changes in causes of death (Komagome hospital)



**Many of the HIV/AIDS patients
are MSM.**



**Increase of elderly patients
living alone.**

Needs for medical system supporting aging society.

- **Cooperation with other departments
in community**
- **Hospitals possible for long stay**
- **Medical care service at home**

HIV testing medical facility in Tokyo

Testing and Counseling facility (Free of charge, anonymous)

- Public Health Centers
- Minami-Shinjuku Testing and Counseling Office

Hospitals and Clinics

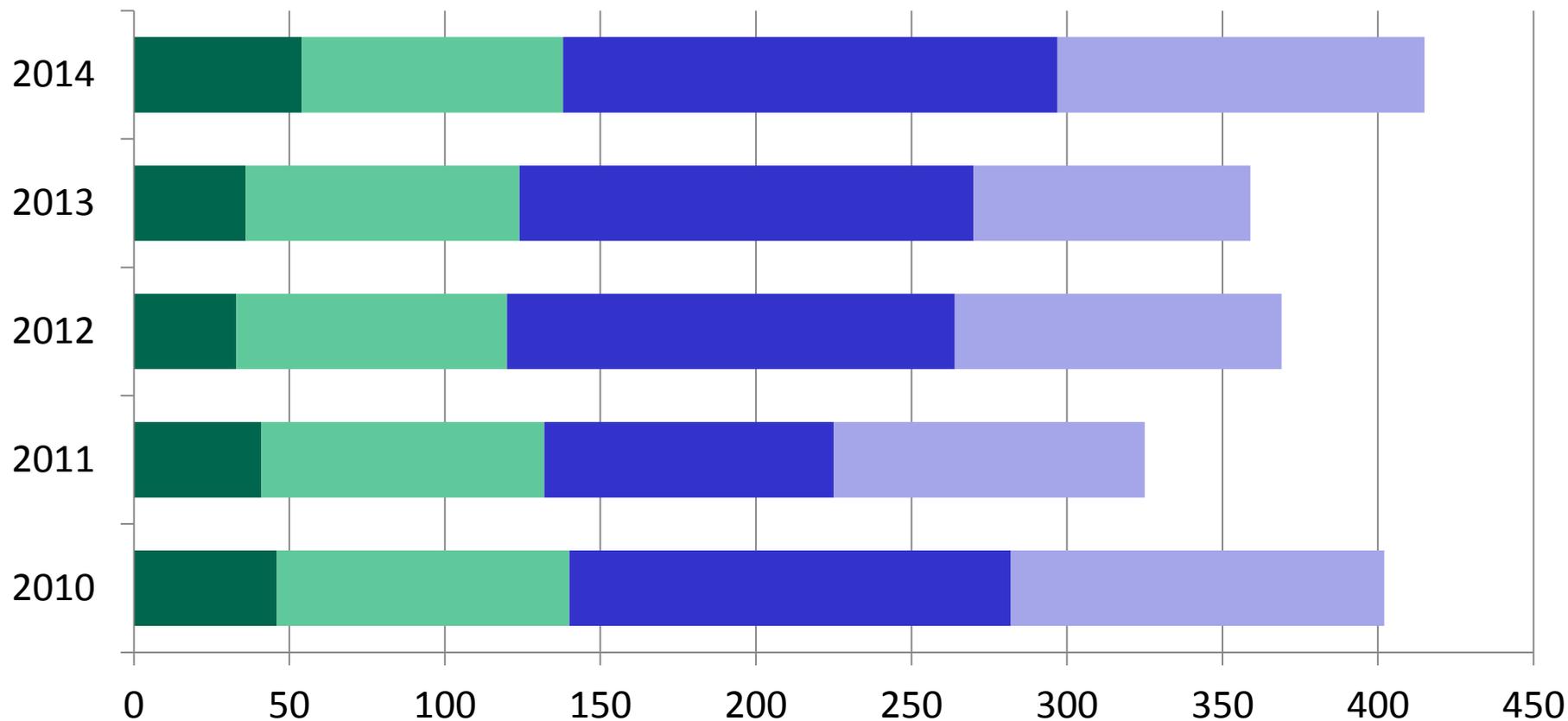
- Core Hospitals (44 Hospitals)
- Other Medical Facilities (Hospitals and Clinics)

Minami-Shinjuku Testing and Counseling Office



- 3 min. walk from south exit of Shinjuku station
- Testing Hours
Mon – Fri: 15:30 – 19:30 Sat, Sun: 13:00 – 16:30
- Free of charge, anonymous
- Reservations possible from mobile phone site

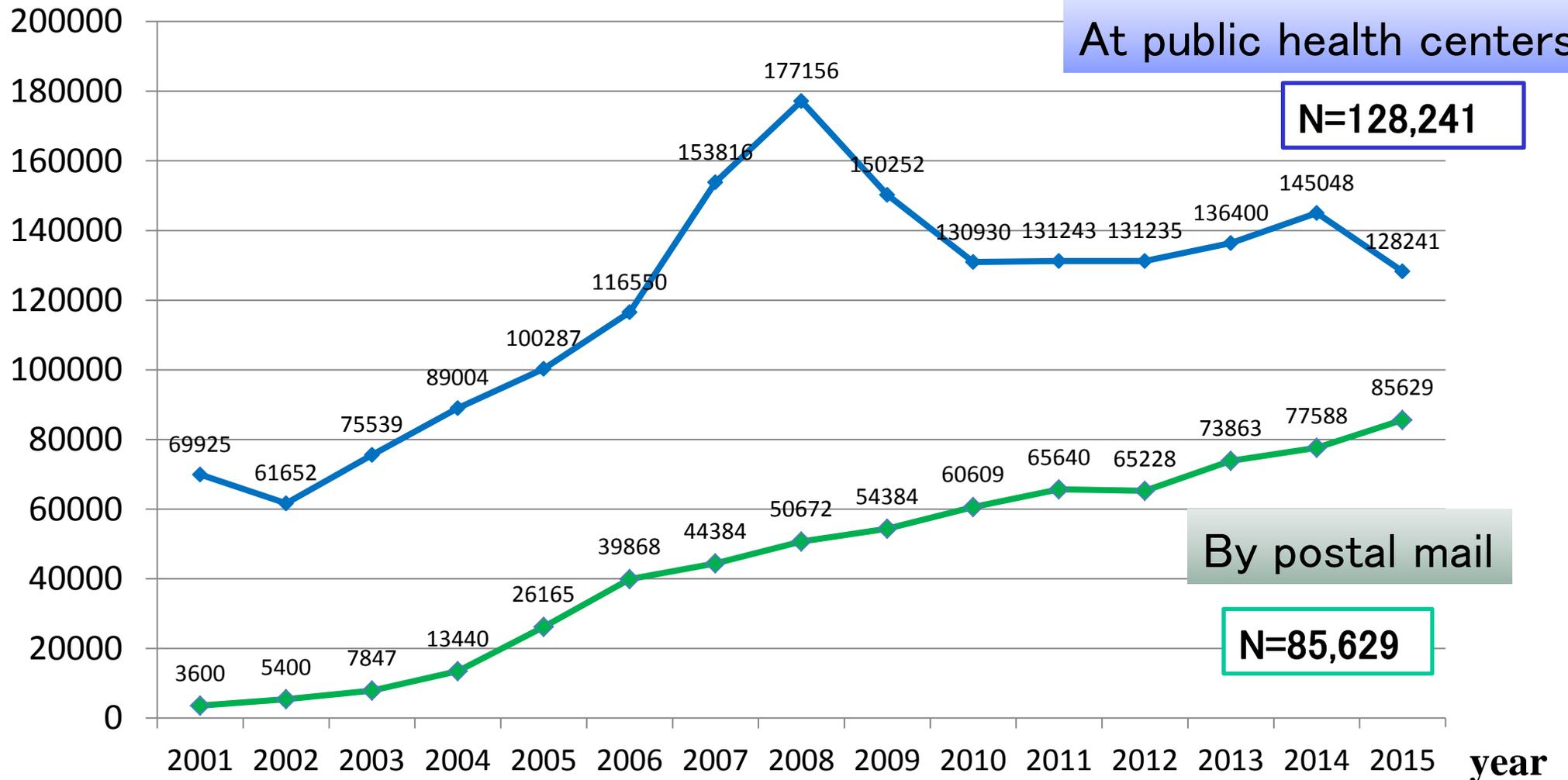
Reported cases according to medical facility in Tokyo



Public Health Centers **Minami-Shinjuku Office** **Core Hospitals** **Other Medical Facilities**

Trend of the number of HIV testing by postal mail and at public health centers

Number of testing



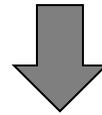
HIV testing by postal mail

- One of the HIV–self testing.
- All procedures from application to checking the result are available at website.
- This service is offered by several companies.
- HIV testing by postal mail is not authorized by the Ministry of Health and Welfare, Japan.

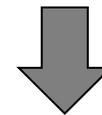
HIV testing by postal mail



Application of the HIV testing through website and the testing kits is delivered.



Taking a blood sample by yourself and return it anonymously.

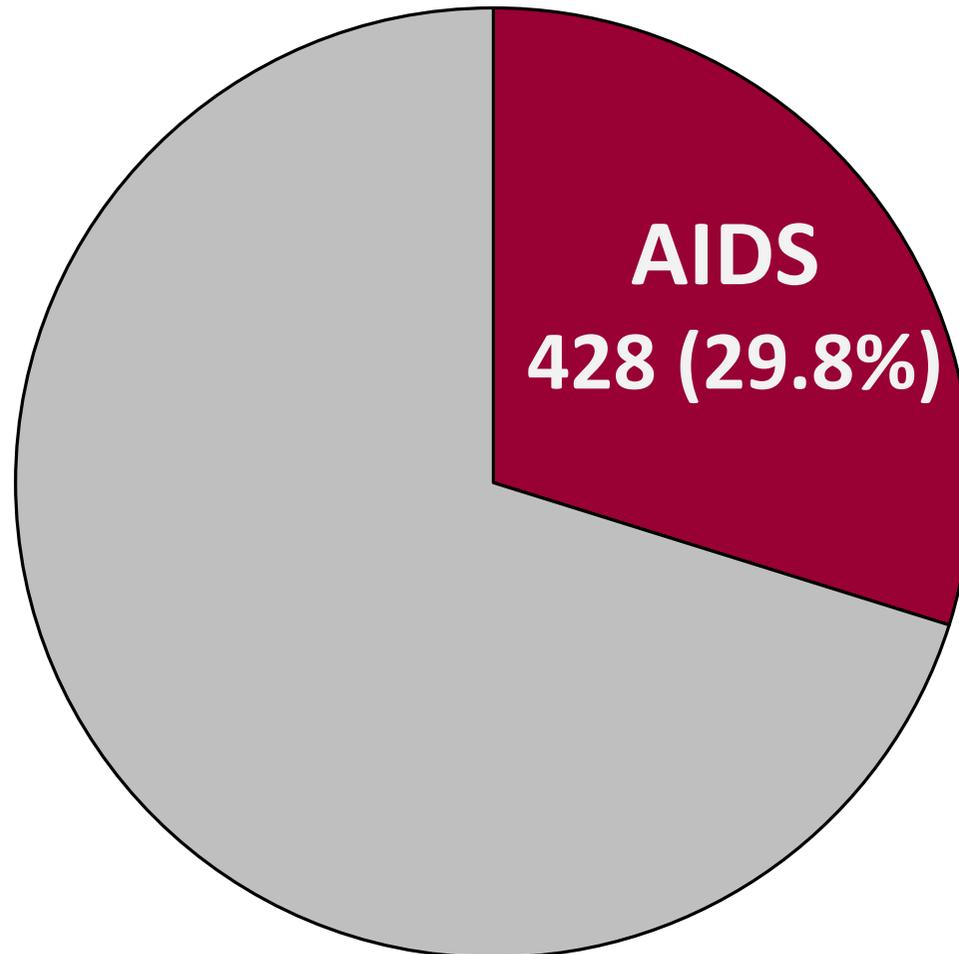


Checking the result at website.

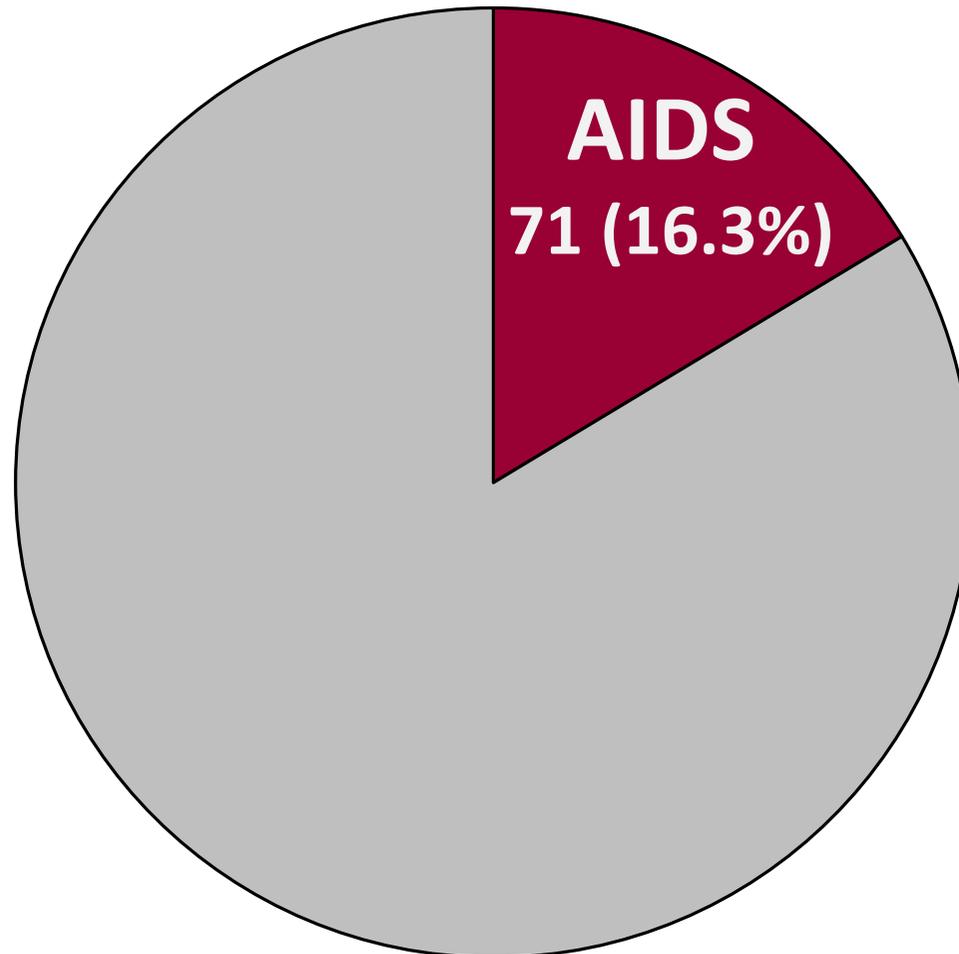
Problems of HIV testing by postal mail

- **Differences in correspondence or support by companies.**
- **Accuracy control is not mandatory.**
- **Possibility of false negative.**
- **Mass examination for sex workers without privacy.**

**The number of HIV/AIDS cases
newly registered in Japan (2015) = 1434**



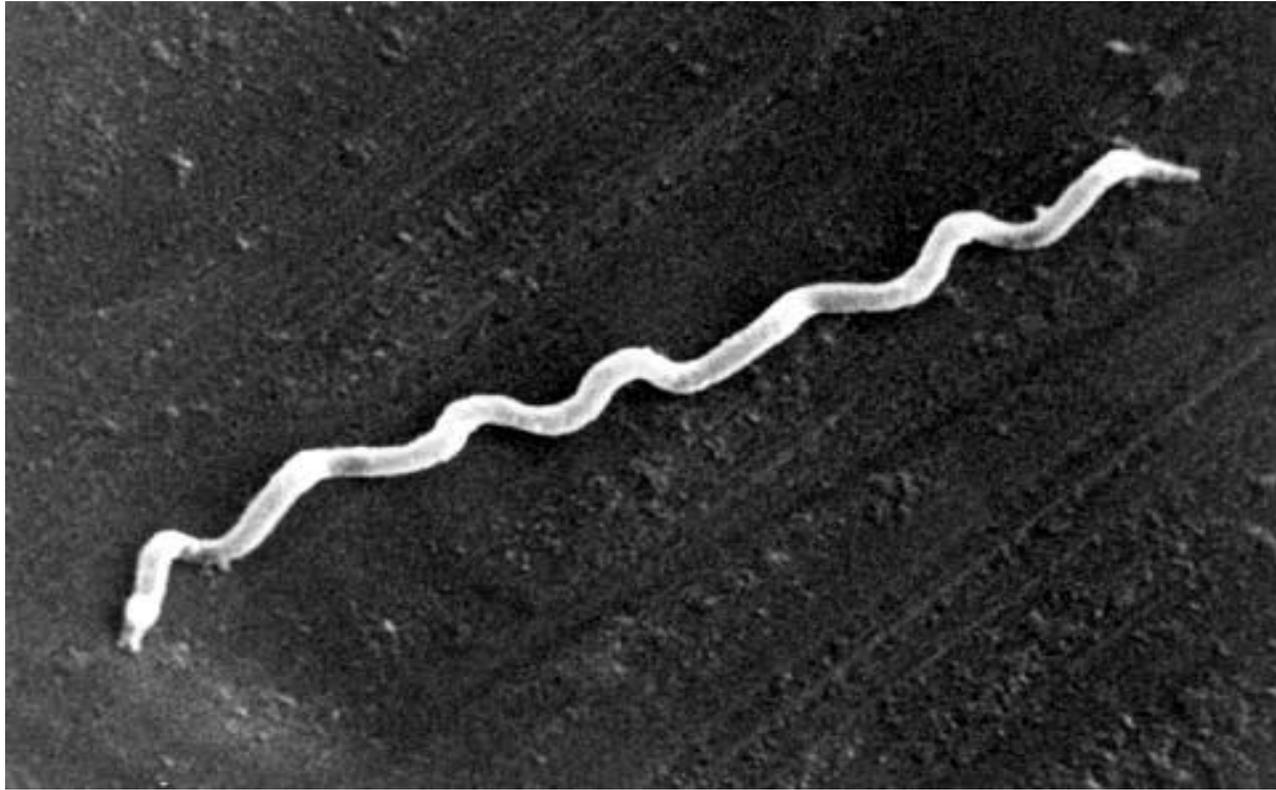
**The number of HIV/AIDS cases newly registered
in Tokyo (2015) = 435**



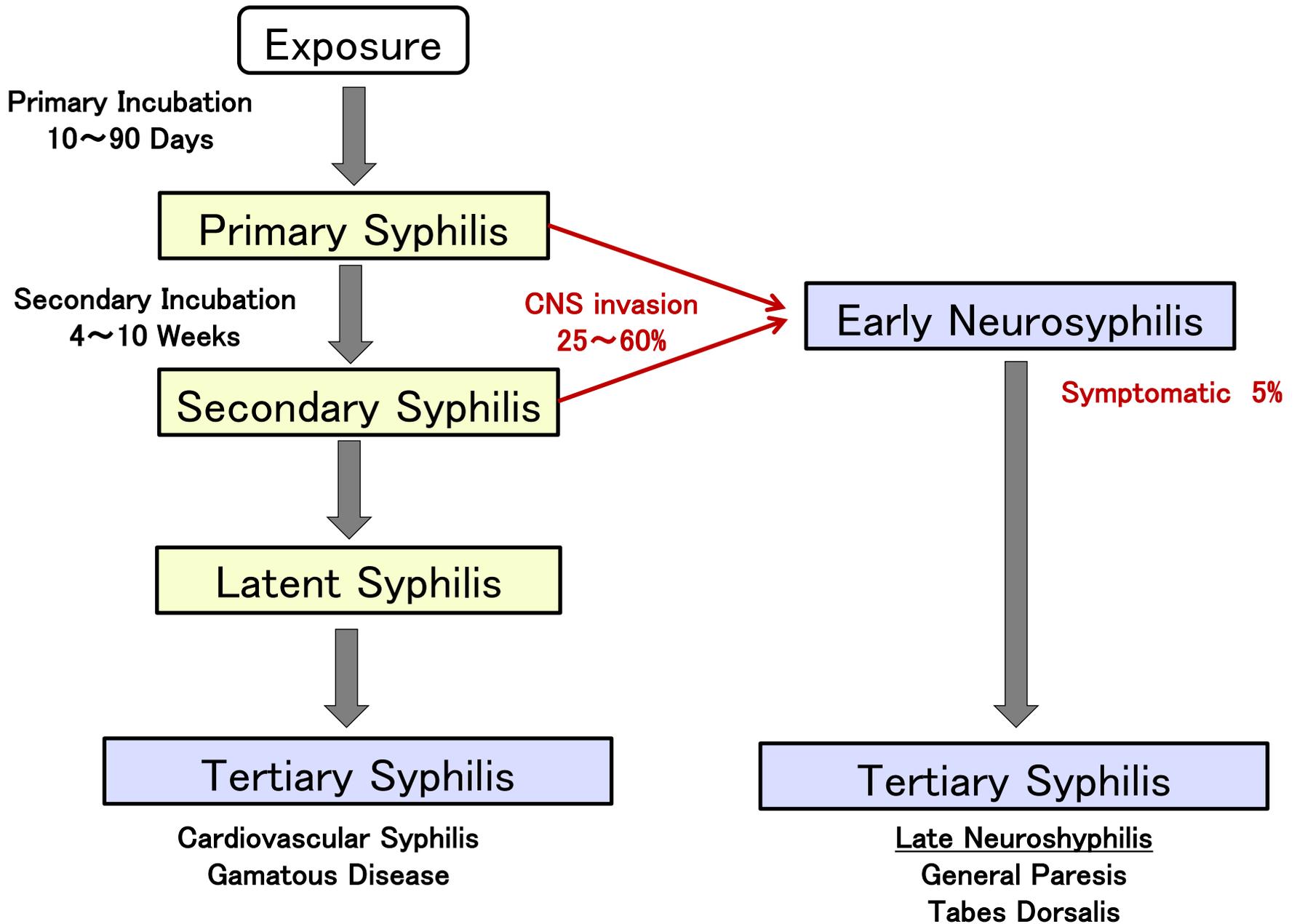
Challenges of recommendation for taking HIV test

- **MSM living in rural areas**
- **MSM in middle and old ages**
- **Infected patients
by heterosexual contact**

MSM: men who have sex with men



Treponema pallidum



Primary syphilis

Hard chancre



Hard chancre (anus)



Secondary syphilis

Typical skin rash



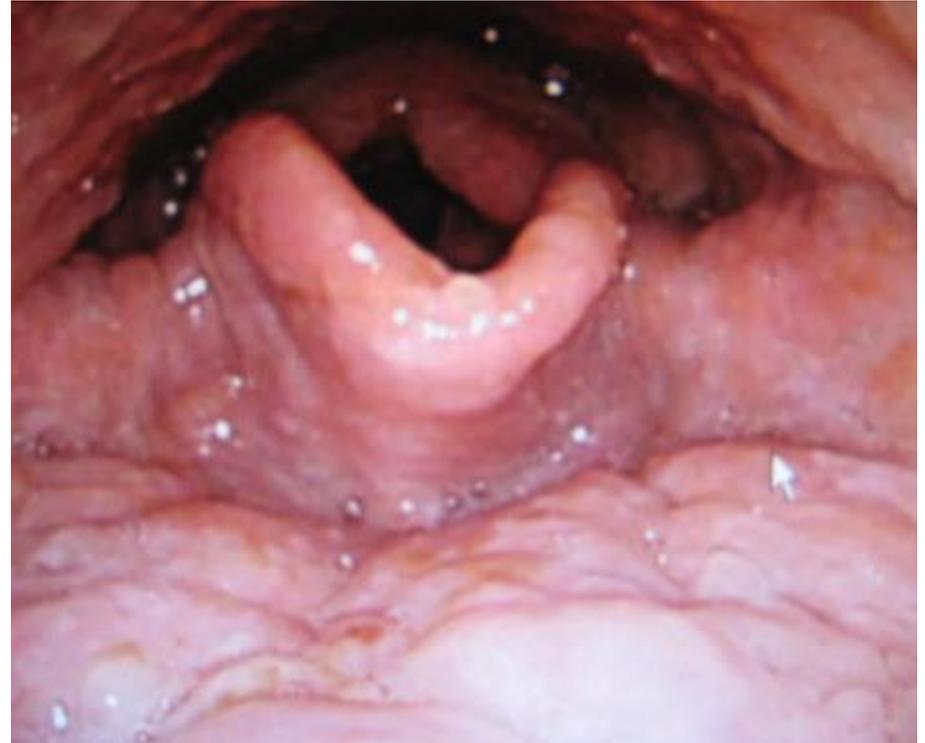
Typical skin rash



Pharyngeal Syphilis



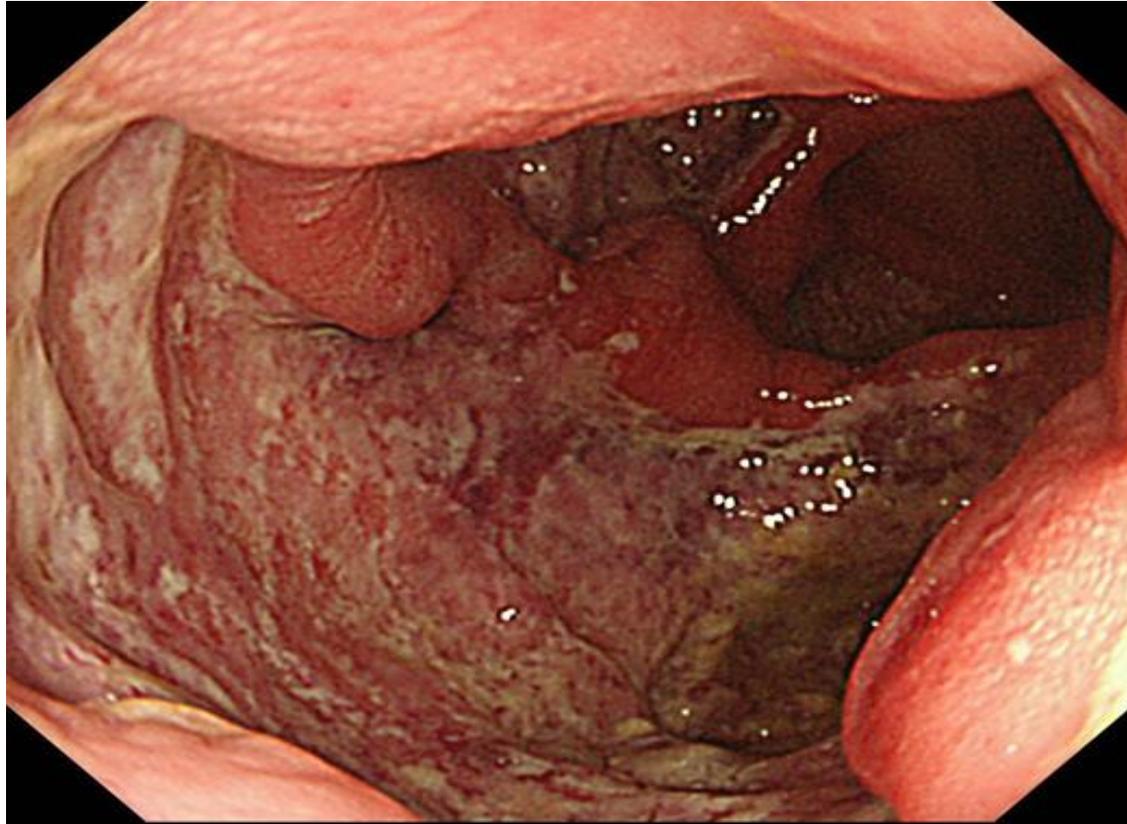
Pharyngeal Syphilis



Pharyngeal Syphilis



Syphilis proctitis/colitis



Alopecia

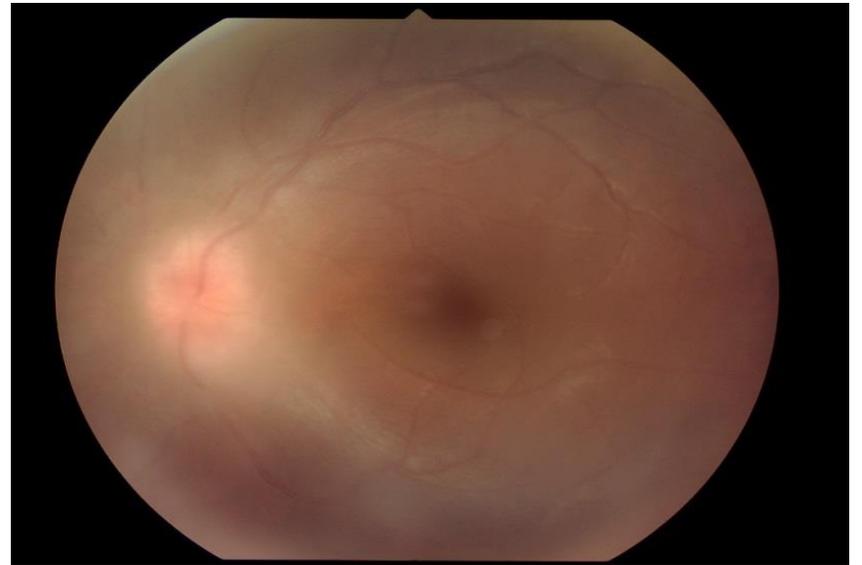


Before treatment



After treatment

Ocular Syphilis



Skin ulcers (Malignant syphilis)



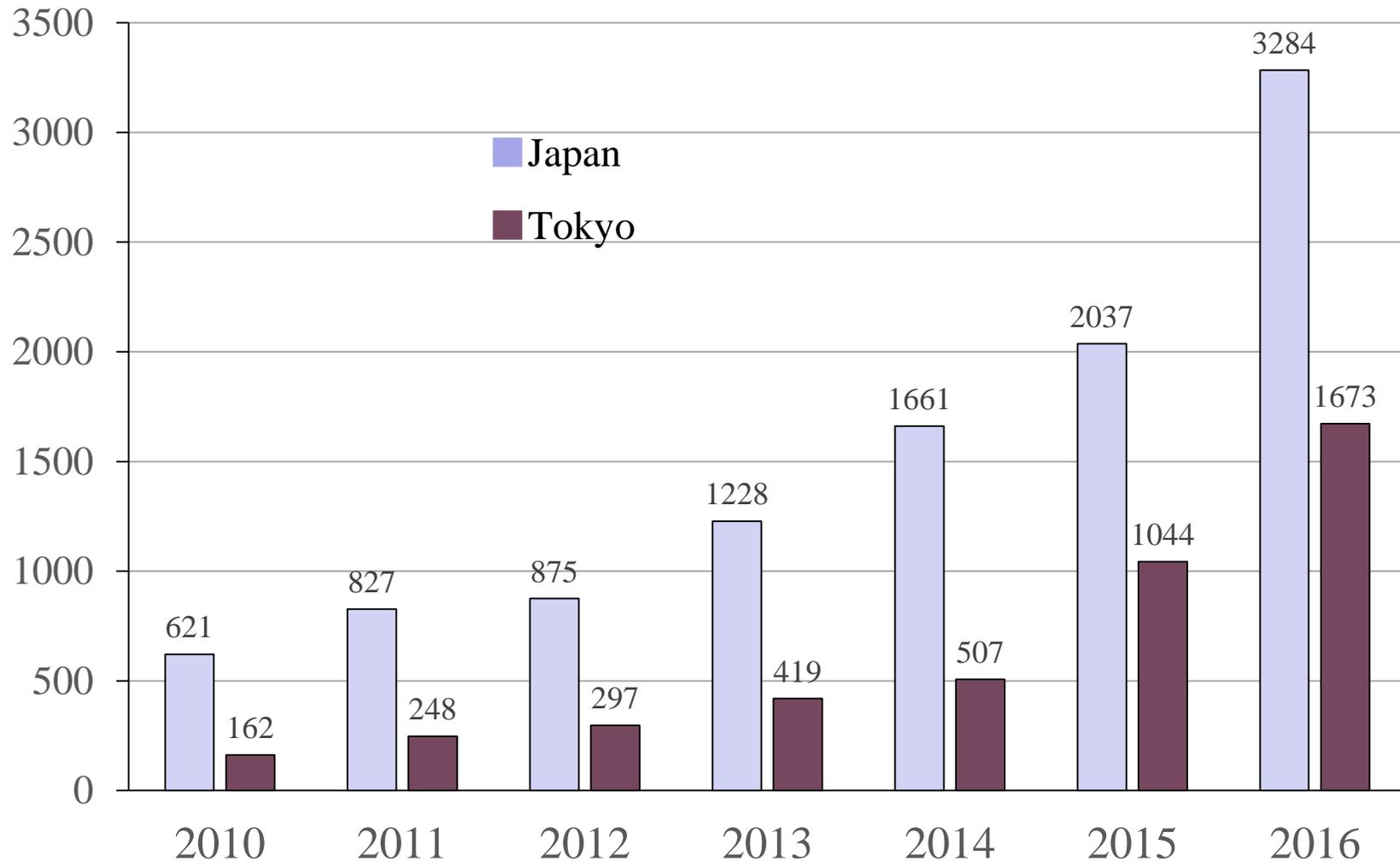
Skin ulcers (Malignant syphilis)



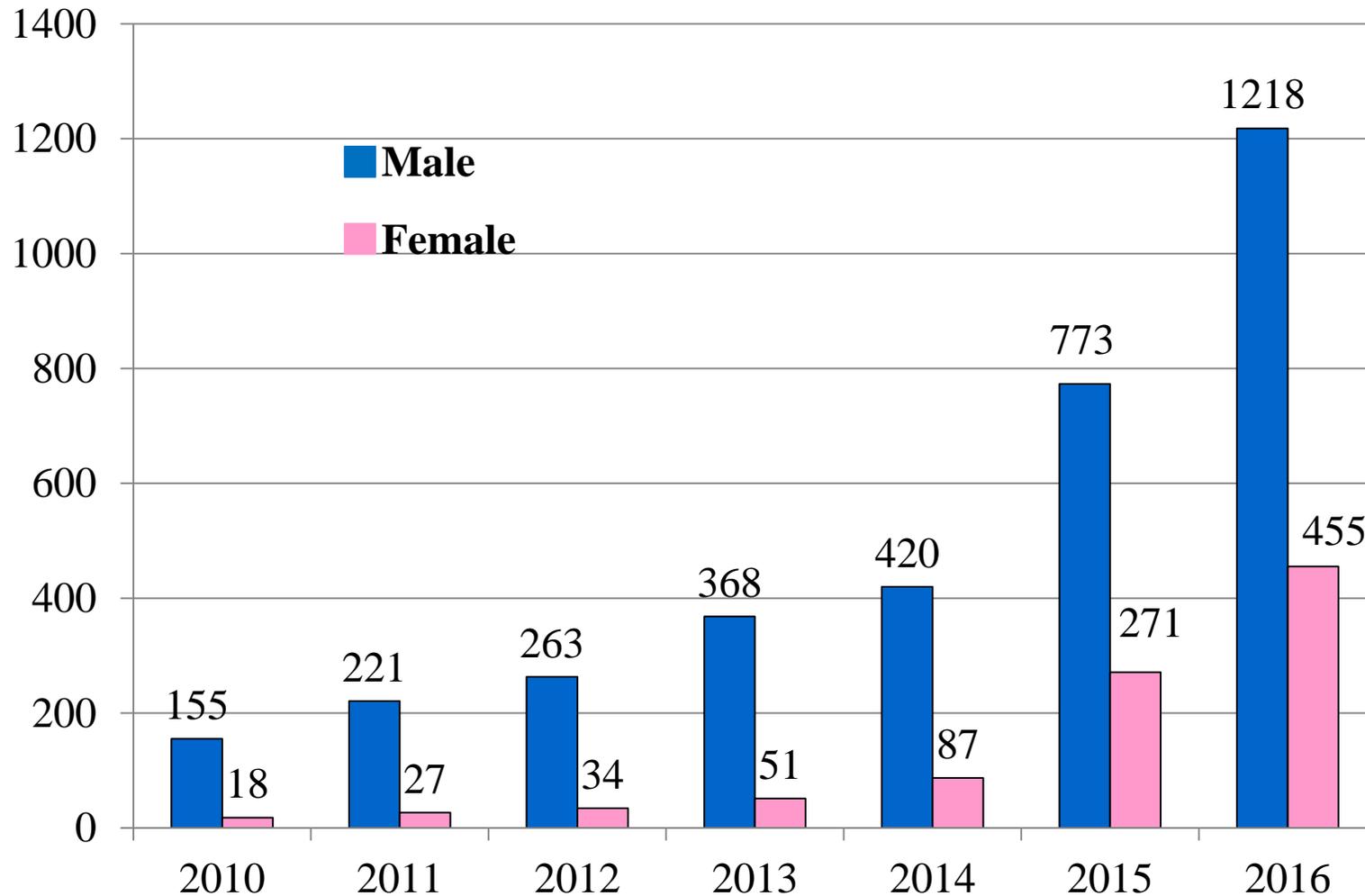
Penile ulcer



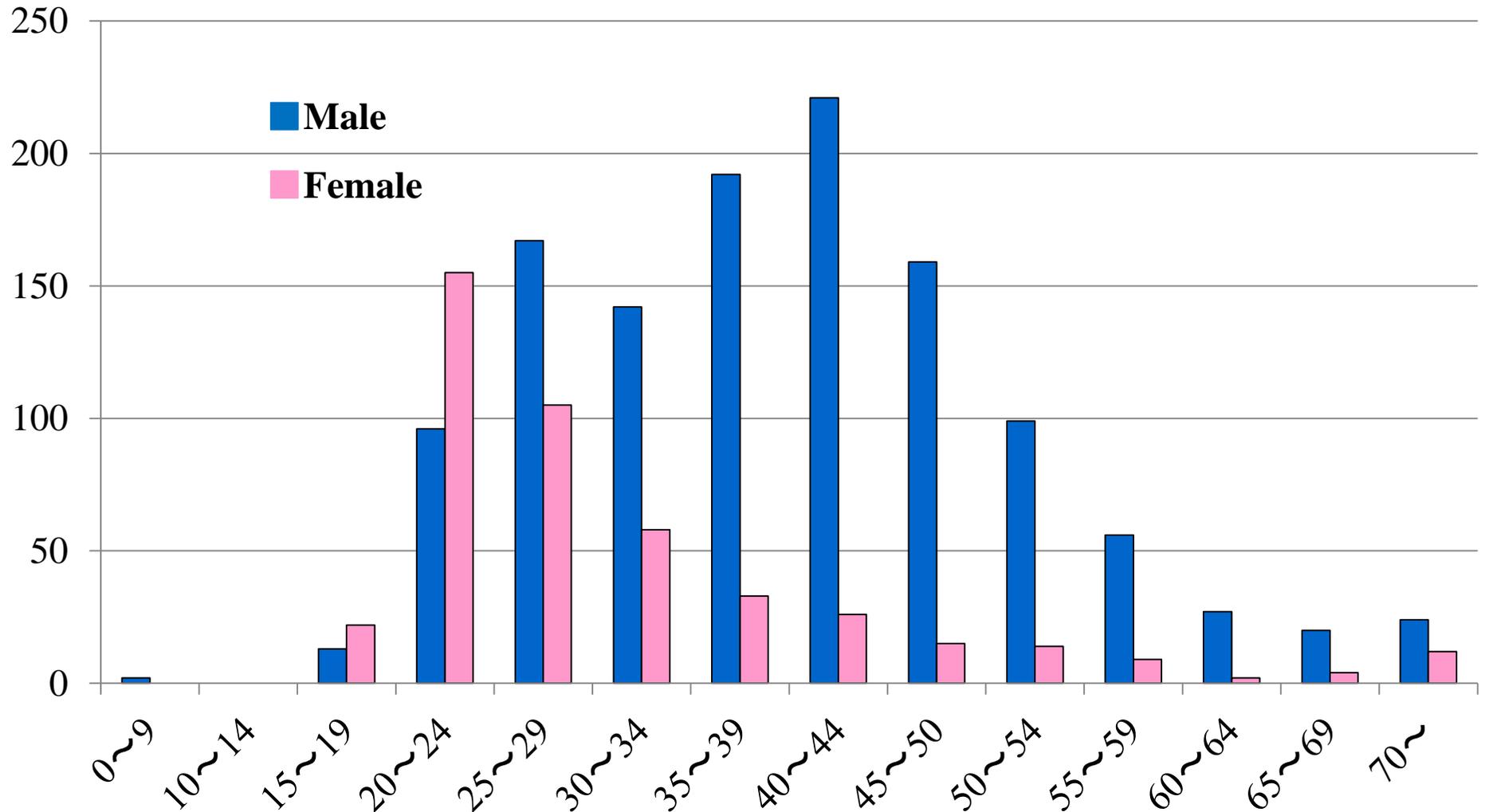
Annual Trends in Number of Syphilis Cases in Japan and Tokyo



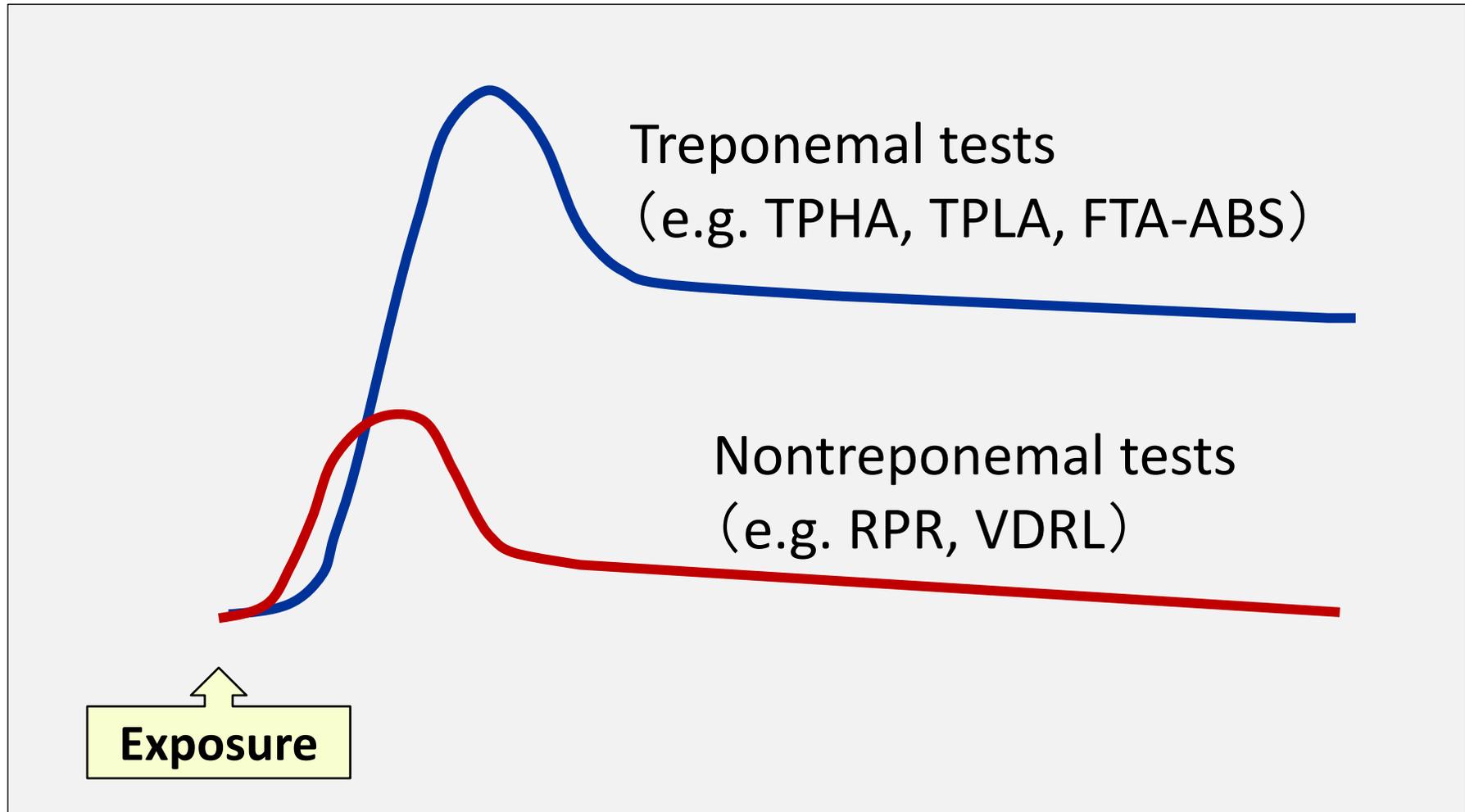
Annual Trends in Number of Syphilis Cases by Gender in Tokyo



Distribution of Reported Syphilis Cases by Age Groups in Tokyo (2016)



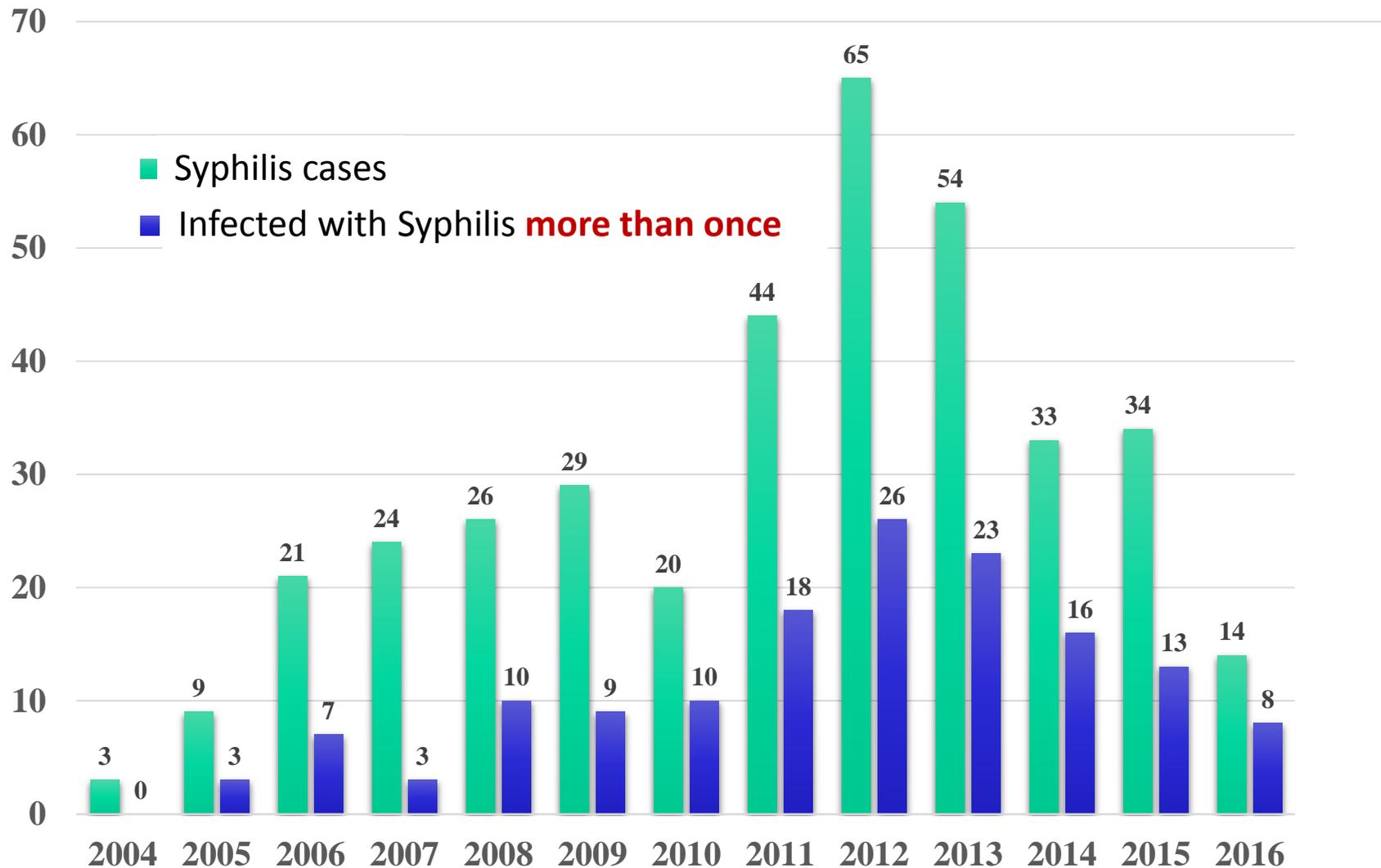
Serologic Tests for Syphilis



Annual Trends in TPLA Positivity Rate among Newly Registered HIV Patients at Komagome Hsp (2006 – 2015)

When HIV was Diagnosed (Year)	Number of Newly Registered HIV Patients	Number of HIV(+) TPLA(+) Patients	TPLA positivity (%)
2006	97	55	43.3
2007	98	49	50.0
2008	103	57	44.7
2009	103	51	50.5
2010	97	62	36.1
2011	94	63	33.0
2012	95	62	34.7
2013	91	49	46.2
2014	84	53	36.9
2015	83	53	36.1

Annual Trends in Number of Syphilis Cases among HIV Patients at Komagome Hsp (2004 – 2016)



Thank you for your attention

