Dear Colleagues,

Today, CDC published a study in the Morbidity and Mortality Weekly Report that found the age-adjusted rate of HIV-related deaths among people with HIV in the U.S. fell by nearly half from 2010 to 2017. The age-adjusted HIV-related death rate (the number of HIV-related deaths per 1,000 people with HIV) fell from 9.1 to 4.7.

Reductions were seen across the board – among men and women and all ages. Importantly, racial and ethnic differences in HIV-related death rates also declined. Although Black or African Americans (hereafter referred to as Black persons) and White persons fell by two-thirds, and the HIV-related death rates for Hispanics/Latino persons and White persons were the same in 2017.

HIV-related deaths remain high, particularly among Black persons and persons of multiple races – underscoring the importance of the federal Ending the HIV Epidemic initiative and other efforts to accelerate progress in reducing HIV-related morbidity and mortality, and ultimately ending the HIV epidemic, the United States.

Much of the reduction in HIV-related death rates was likely the result of early testing and diagnoses of people with HIV and helping them to get – and stay on – lifesaving treatment. From 2010 to 2018, the number of Americans who knew their HIV status increased from 82% to an all-time high of 86%. In that same period, the number of people with diagnosed HIV who had a suppressed viral load increased from 46% to nearly 65%. This change is critical, because people who maintain a suppressed or undetectable viral load not only live longer, healthier lives, but also have effectively no risk of sexually transmitting HIV.

The findings of today’s study underscore the need to sustain and scale up Ending the HIV Epidemic: A Plan for America, a federal initiative launched last year with the goal of reducing new HIV infections in the U.S. by 90% by 2030. Despite the progress highlighted in today’s study, there is an urgent need to get more infections diagnosed early and people with HIV into sustained HIV care and treatment. Bold action is needed to continue to reduce and ultimately eliminate racial disparities in new infections, early diagnosis, and viral suppression.

The study can be found here.

Sincerely,

H. Irene Hall, PhD
Director (Acting), Division of HIV/AIDS Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD & TB Prevention
Centers for Disease Control and Prevention