Acquired Immunodeficiency Syndrome (AIDS)
Human Immunodeficiency Virus (HIV) Infection

(Last revised August 8, 2011)

I. Identification

A. Clinical Description:
Acquired immunodeficiency syndrome (AIDS) is a severe, life-threatening condition that was first recognized as a distinct syndrome in 1981. AIDS represents the late stage of infection with the human immunodeficiency virus (HIV), most often resulting in progressive deterioration of the immune system and development of opportunistic diseases and/or malignancies. Acute HIV infection occurs during seroconversion (prior to detectable antibody) and results in nonspecific symptoms (fever, malaise, lymphadenopathy and skin rash) in 50% - 80% of acutely infected persons. Acute infection can be detected through assays other than antibody tests. During acute infection, individuals are highly contagious because the concentration of virus in plasma and genital secretions is extremely elevated. Most people infected with HIV develop detectable antibodies within 1-3 months after infection but may remain free of signs or symptoms for several months to years. The severity of HIV-related illness is, in general, directly related to the degree of immune dysfunction.

Over time, the Centers for Disease Control and Prevention (CDC) has revised the case definitions for HIV infection and AIDS. In December 2008, CDC revised the surveillance case definition for HIV infection among adults, adolescents, and children aged less than 18 months and for HIV infection and AIDS among children aged 18 months to less than 13 years. For adults and adolescents (i.e., persons aged ≥ 13 years), case surveillance definitions for HIV infection and AIDS were revised and combined into a single case definition for HIV infection. Included in the revised criteria for the case definition of HIV infection (in adults, adolescents, and children aged 18 months to less than 13 years) is a requirement for laboratory-confirmed evidence of HIV infection.

No vaccine exists for HIV infection, but considerable progress has been made in the development of antiretroviral therapies that slow viral progression and substantially reduce the amount of virus in an infected person, resulting in decreased morbidity and mortality.

B. Reporting Criteria:

Reporting Positive HIV Test Results
Wisconsin Statute 252.15(7) requires that all positive HIV tests be reported to the State Epidemiologist.

Positive HIV test results that are to be reported include:

- Western blot confirmed positive results of HIV screening tests (HIV enzyme immunoassay [EIA], HIV antigen/antibody tests, and FDA-approved HIV rapid [point-of-care] tests),
- positive molecular amplification tests for the detection of HIV nucleic acids, and
- positive HIV viral cultures.
Case reports are submitted on DPH Form F-44338 (Wisconsin HIV Confidential Case Report) and should be sent directly to the state epidemiologist.

**Reporting Confirmed and Suspect AIDS Cases**

Wisconsin Statute 252.05 and Wisconsin Administrative Code: Chapter HFS 145 require that confirmed or suspect cases of AIDS be reported to the State Epidemiologist.

AIDS case reports are submitted on DPH Form F-44264 (AIDS case report) should be submitted directly to the state epidemiologist and not to the local health department.

DPH forwards AIDS and HIV case reports to the appropriate local health agency for HIV Partner Services and sends non-identifying case information to the CDC.

**Reporting HIV viral load tests and CD4+ T-lymphocyte counts**

For persons who have been diagnosed with or who are suspected of having HIV infection, results of the following HIV-related laboratory tests are reportable to the Wisconsin AIDS/HIV Surveillance Program:

- Results of all HIV viral load tests (including undetectable, detected and specific values)
- Results of all CD4+ T-lymphocyte counts (counts and percentages)

**C. Case Definition:**

See the following CDC case definitions and guidelines:


CDC. CDC guidelines for national human immunodeficiency virus case surveillance, including monitoring for human immunodeficiency virus infection and acquired immunodeficiency syndrome. MMWR 1999;48(No. RR-13)

**D. Laboratory and Clinical Criteria for Diagnosis:**

*For HIV diagnosis:*

- HIV: Western blot confirmed (positive/reactive) HIV screening test (HIV enzyme immunoassay [EIA], HIV antigen/antibody tests, and FDA-approved HIV rapid [point-of-care] tests) OR
- positive molecular amplification tests for the detection of HIV nucleic acids, OR
- positive HIV viral culture

*For AIDS diagnosis:*

- laboratory confirmed evidence of HIV infection, **AND**
- CD4+ T-lymphocyte count: a CD4+ T-lymphocyte count of <200/ m L or <14 percent or an AIDS-defining condition (for AIDS-defining condition see
Confidentiality

Wisconsin Statute 252.15(3m), 252.15(5g), 252.15(5j), and 252.15(5m) specify who and under what circumstances a person may know an individual’s HIV test result. Negligent or willful disclosure of an HIV test result to a person not authorized under Wisconsin Statute 252.15 may result in civil and/or criminal penalties. Persons to whom identifying HIV information is disclosed are bound by the same confidentiality restrictions as the person or agency originally disclosing the information.

Personally identifiable information stored in the surveillance system is collected with a guarantee that it will be held in confidence, will be used only for the purposes stated in the assurance on file at the local health department, and will not otherwise be disclosed or released without the consent of the individual in accordance with Section 308(d) of the Public Health Service Act (42 USC 242m).

II. Actions Required / Prevention Measures

- **Wisconsin Disease Surveillance Category III**: Report to the state epidemiologist by individual case report form or other means within 72 hours of the identification of a case or suspected case.
- **Epidemiology Reports Requested**:
  - AIDS: AIDS Case Report (F-44264)
  - HIV: HIV Infection Case Report (F-44338)

III. Contacts for Consultation

- **BCDER / Communicable Diseases / AIDS Program**: 608-267-5287
- **Regional Staff**: Wisconsin Regional Offices
- **Wisconsin State Laboratory of Hygiene**: 608-262-2302
- **Other Contacts**:
  - Wisconsin AIDS/HIV Program
    - [www.dhs.wisconsin.gov/aids-hiv](http://www.dhs.wisconsin.gov/aids-hiv)
    - 608-266-5287
  - Wisconsin HIV/STD/Hepatitis C Information and Referral Center
    - [www.irc-wisconsin.org/](http://www.irc-wisconsin.org/)
    - 800-334-2437
  - CDC-INFO (Information about HIV/AIDS, Viral Hepatitis, STDs, TB, or testing sites)
    - 1-800-232-4636
    - TTY: 1-888-232-6348
- National Prevention Information Network (NPIN)
  www.cdcnpin.org/scripts/index.asp
  800-458-5231

- National HIV/AIDS Clinicians Consultation Center
  www.nccc.ucsf.edu/home
  Warmline: 800-933-3413
  PEPline: 888-448-4911
  Perinatal HIV Hotline: 888-448-8765

- Local Health Departments
  www.dhs.wisconsin.gov/localhealth/

- Local Chapter of American Red Cross
  www.redcross.org/where

- Local hospital infection control professional/infection preventionist
  Contact your local hospital

- AIDS service organizations (ASOs) provide HIV prevention services to high risk populations and direct assistance or referral to care and support services for persons living with HIV. The following table includes location and contact information for regional ASO offices in Wisconsin.

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<th>Wisconsin AIDS Service Organization Offices</th>
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<td>AIDS Resource Center of Wisconsin</td>
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| **Northeastern Region**                     |
| AIDS Resource Center of Wisconsin          | 445 South Adams Street                     |
|                                             | Green Bay WI 54301                         |
|                                             | 920.437.7400                               |
|                                             | 800.675.9400                               |
|                                             | fax 920.437.1040                           |

| AIDS Resource Center of Wisconsin          | 103 Washington Street                      |
|                                             | Appleton WI 54911                         |
|                                             | 920.733.2068                               |
|                                             | 800.773.2068                              |

| **Western Region**                         |
| AIDS Resource Center of Wisconsin          | 505 Dewey Street South Suite 107           |
|                                             | Eau Claire WI 54701                       |
|                                             | 715.836.7710                               |
|                                             | 800.750.2437                               |
|                                             | fax 715.836.9844                           |

| AIDS Resource Center of Wisconsin          | 2519 South Ave                             |
|                                             | La Crosse WI 54601                        |
|                                             | 608.785.9866                               |
|                                             | 800.947.3353                               |
|                                             | fax 608.784.6661                           |

| AIDS Resource Center of Wisconsin          | 1507 Tower Avenue Suite 230                |
|                                             | Superior WI 54880                         |
|                                             | 715.394.4009                               |
|                                             | 877.242.0282                               |
|                                             | fax 715.394.4066                           |

| **Southern Region**                        |
| AIDS Network                               | 600 Williamson Street Suite H              |
|                                             | Madison WI 53703                           |
|                                             | 608.252.6540                               |
|                                             | TTY 608.441.3542                           |
Wisconsin Division of Public Health Disease Surveillance Guidelines

AIDS Network
136 W Grand Avenue Suite 280
Beloit WI 53511
fax 608.252.6559

AIDS Network
101 E Milwaukee Street Suite 409
Janesville WI 53545
608.756.2550

AIDS Resource Center of Wisconsin
121 South Pinckney Street Suite 210
Madison WI 53701
608.258.9103
800.518.9910
fax 608.258.9136

Southeastern Region
AIDS Resource Center of Wisconsin
820 Plankinton Ave
Milwaukee WI 53203
414.273.1991
800.359.9272
fax 414.273.2357

AIDS Resource Center of Wisconsin
1212 57th Street
Kenosha WI 53140
262.657.6644
800.924.6601
fax 262.657.6949

C. Public Health Intervention

Health education
Health education programs should reach individuals at high risk for HIV infection and the general population and should emphasize ways to lower the risk of transmitting HIV through sexual intercourse and injection drug use. Health education programs must be developmentally and culturally tailored to the needs of target populations. For resources regarding HIV-related prevention education, both general information and topics specific to subpopulations, view the website of the Center for AIDS Prevention Studies (CAPS) at the University of California San Francisco – www.caps.ucsf.edu/resources/fact-sheets.

Limiting sexual transmission of HIV
The only sure way to avoid HIV infection through sex is to abstain from sexual intercourse or to engage in mutually monogamous sexual intercourse where both partners are known to be uninfected. In other situations, latex condoms need to be used correctly every time a person has vaginal, anal, or oral sex. Correct and consistent use of latex condoms with water based lubricants can reduce the risk of sexual transmission of HIV. (See the condom fact sheet from the CDC website -- www.cdc.gov/condomeffectiveness/brief.html.)

Limiting transmission of HIV through injection drug activity
Injection drug users should have access to drug treatment and needle exchange programs as well as risk reduction education on safer needle use. Information on needle exchange programs in Wisconsin can be accessed through the Wisconsin HIV, STD, Hepatitis Information and Referral Center by calling 800-334-2437 or by visiting the Center's website at www.irc-wisconsin.org.

Routine HIV counseling and voluntary testing
HIV counseling and voluntary testing and referrals to medical services should be offered routinely in sexually transmitted disease, tuberculosis and drug treatment clinics; in clinics offering prenatal care or family planning services; in facilities offering services to gay men; and in communities where HIV seroprevalence is high. The CDC recommends that, in health care settings, screening for HIV infection should be performed routinely for all patients aged
13--64 years unless the prevalence of undiagnosed HIV infection in the health care setting has been documented to be <0.1%. All pregnant women should be encouraged to undergo voluntary HIV testing as a routine part of prenatal care and all pregnant women found to be infected with HIV should be offered antiretroviral therapy consistent with current national guidelines. Current recommendations for screening of HIV infection in health care settings are available from the CDC website at www.cdc.gov/hiv/topics/testing/healthcare.

Preventing Occupational Exposure to HIV
Care should be taken in handling, using and disposing of needles and other sharp instruments. (The Bloodborne Pathogen Standard of the Occupational Health and Safety Administration and the federal Needlestick Safety and Prevention Act mandate the use of safe needle devices in public and private settings.) Persons sustaining occupational significant exposures to blood, body fluids visibly contaminated with blood, and body fluids considered potentially infectious for HIV (semen and vaginal secretions) should receive immediate medical attention and receive follow-up care consistent with current CDC recommendations for managing occupational exposures. Persons sustaining nonoccupational exposures (e.g. sexual, needlestick, etc.) should receive prompt medical evaluation in agreement with recommendations from the U.S. Department of Health and Human Services. These recommendations are available on the web at www.cdc.gov/mmwr/preview/mmwrhtml/rr5402a1.htm.

HIV Partner Services
All persons identified with HIV infection should be offered HIV Partner Services (PS), formerly known as Partner Counseling and Referral Services (PCRS), that include targeted risk reduction education, referral for medical care and support services, and assistance with notifying and referring sexual and needle-sharing partners for additional services. For additional information regarding HIV PS in Wisconsin, contact the Wisconsin HIV PS Coordinator at 608-267-5288 or visit the website of the Wisconsin AIDS/HIV Program at www.dhs.wisconsin.gov/aids-hiv/Resources/Overviews/AIDS_HIVPartnerServices.htm.

IV. Related References

2. For additional information resources, visit the websites of the Wisconsin AIDS/HIV Program (www.dhs.wisconsin.gov/aids-hiv) and the Wisconsin Hepatitis C Program (www.dhs.wisconsin.gov/communicable/hepatitis).

V. Disease Trends
Complete reports and analyses of HIV case reporting in Wisconsin are located on the DHS website at: www.dhs.wisconsin.gov/aids-hiv/Stats/index.htm.