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The latest HIV data for 2007 has recently been published for the United Kingdom (UK) [1]. During the year, an estimated 6,840 (95% confidence intervals 6,600-7,050) persons (adjusted for reporting delays) were newly diagnosed with HIV in the UK. This represents a 12% decline from a peak of new HIV diagnoses reported in 2005 (7,800). Almost all this decline in new HIV diagnoses was in HIV-infected heterosexuals from sub-Saharan Africa who were probably infected in their country of origin.

In contrast, there was no evidence of a fall in the current high rate of HIV transmission among men who have sex with men (MSM) within the United Kingdom, which has remained at epidemic level. Of the 6,840 HIV infections diagnosed in 2007, an estimated 2,630 (38%) were in MSM. Where probable country of infection was reported (1,519), 82% (1,240) of newly diagnosed MSM in 2007 probably acquired their infection in the UK. In each of the past three years over 2,600 new HIV diagnoses have been made in MSM and these are the highest levels ever reported. Although these increases may be attributed to earlier testing and diagnosis, there has been no change in the median age at which HIV infection was diagnosed in MSM, and little change in the median CD4 count at HIV diagnosis. Other data also indicate an ongoing 3% incidence among MSM attending sexual health services [2]. The consistency of this pattern strongly suggests that new HIV infections are occurring at a similar rate to which infections are being diagnosed in this group (i.e. that transmission of HIV among MSM has stayed high since 2004 and remained at epidemic level).

The recent increases in HIV diagnoses among MSM in the UK are mirrored in data from other European countries [3]. This underlines the need for a European-wide approach to HIV prevention and control among MSM, a key feature of which should be the exchange between major national stakeholders of best practice to promote safer sex and HIV testing among MSM, and to develop standard indicators to monitor the progress of these interventions.

References

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