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Highest number of new HIV cases in Europe ever

ECDC and WHO call for better prevention, diagnosis and treatment for vulnerable populations, including migrants and refugees

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With HIV infection diagnosed in over 142 000 people in 2014, the WHO European Region recorded the highest number of newly diagnosed infections in one year since the start of reporting in the 1980s. The [most recent surveillance data released by the European Centre for Disease Prevention and Control \(ECDC\)](#) and the WHO Regional Office for Europe indicate that the growth of the HIV epidemic is driven by the eastern part of the Region, where the number of new diagnoses has more than doubled during the past decade.

Heterosexual transmission is responsible for the increase in eastern Europe, and transmission through drug injection remains substantial. In the countries of the European Union and European Economic Area (EU/EEA), sex between men is the predominant mode of HIV transmission. Two in three new HIV infections are among native-born Europeans, while foreign-born individuals, including migrants, represent only one third of HIV diagnoses.

“Despite all the efforts to fight HIV, this year the European Region has reached over 142 000 new HIV infections, the highest number ever. This is a serious concern”, says **Dr Zsuzsanna Jakab, WHO Regional Director for Europe**. “With all the evidence on HIV prevention and control, including new treatment guidelines, we call on European countries to take bold action and curb the HIV epidemic once and for all.”

“Since 2005, rates of new diagnoses have more than doubled in some EU/EEA countries and decreased by 25% in others. But the overall HIV epidemic persists largely unchanged”, **points out ECDC Acting Director Dr Andrea Ammon**ⁱ. “This means that the HIV response in the EU/EEA has not been effective enough to result in a noticeable decline over the last decade.”

Social exclusion places refugees and migrants at greater risk of HIV infection

During the last decade, the number of migrants diagnosed with HIV in Europe has declined sharplyⁱⁱ, and evidence shows that a significant proportion acquires HIV after arrival in Europe. “Refugees and migrants remain a priority for HIV prevention and care. Conflict and disasters should not affect access to HIV services for people living with HIV. When refugees and migrants are victim of social exclusion in receiving countries, they become more at risk of HIV infection, and this may lead them to engage in risk behaviours, with increased risk for infection. This risk is exacerbated by inadequate access to HIV services and fear of being stigmatized”, stresses Dr Jakab. “We at WHO urge all countries in Europe to offer HIV testing, prevention and treatment services to all refugees and migrants irrespective of their legal status. This is also the safest way to protect the resident population from HIV infection.”

Sex between men main transmission mode in EU/EEA

Despite specific prevention programmes that target men who have sex with men (MSM) in many European countries, sex between men is still the predominant mode of HIV transmission in the EU/EEA. “HIV diagnoses among men who have sex with men have been rising at an alarming rate from 30% in 2005 to 42% in 2014 with increases in all but six EU/EEA countries”, highlights Dr Ammon. “Europe has to scale up

its efforts to reach out to this group – this includes looking at new strategies such as pre-exposure prophylaxis for HIV and access to care for EU citizens residing in other EU countries.” In its [new Guidance, ECDC identifies seven key services](#) that have proven to effectively reduce and prevent HIV infections among MSM.

The obstacle to ending AIDS: late diagnosis

Almost half of HIV infections are diagnosed late throughout the European Region: this increases the risk of ill health, death and onward HIV transmission. The high number of AIDS cases in the East also confirms challenges related to late HIV diagnosis, delayed initiation of antiretroviral therapy (ART) and low treatment coverage.

The number AIDS cases is constantly going down in the EU/EEA. But two thirds of AIDS diagnoses reported in 2014 occurred at the same time or shortly after the HIV diagnosis which means that these people have been diagnosed when their immune system already started to fail. Migrants are more likely to be diagnosed late despite the fact that antiretroviral therapy is widely available for documented migrants. But only half of EU/EEA countries provide free treatment for undocumented migrants.

New global HIV guidelines improve prevention and treatment

In 2015, new WHO global HIV prevention and treatment guidelines were issued, suggesting that ART should be initiated in all people living with HIV, irrespective of their CD4 cell count. There is now strong evidence that early treatment is beneficial both for the health of treated individuals and in preventing onward HIV transmission.

However, early testing, support by trained lay providers and potential use of HIV self-testing should be scaled up in order to make this new opportunity available to infected people. This will ensure earlier diagnoses and treatment initiation, resulting in improved treatment outcomes and less disease and death.

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NOTES TO EDITORS

World AIDS Day was introduced by the World Health Organization (WHO) in 1988 and is observed annually on 1 December to raise awareness of the AIDS pandemic caused by HIV infection.

HIV/AIDS: The human immunodeficiency virus (HIV) is a virus, which attacks the immune system and causes a lifelong severe illness with a long incubation period. The end-stage of the untreated infection, acquired immunodeficiency syndrome (AIDS), results from the destruction of the immune system. AIDS is defined by the presence of one or more “opportunistic” illnesses (other illnesses due to decreased immunity).

The WHO European Region comprises 53 countries, with a population of nearly 900 million people, of which around 508 million live in the EU/EEA (28 EU Member States plus Iceland, Liechtenstein and Norway). The total number of 141 930 newly diagnosed infections includes more than 56 000 diagnoses in 2014 reported to ECDC and the WHO, and more than 85 000 new cases published by the Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS.

LINKS

[ECDC-WHO report HIV/AIDS surveillance in Europe 2014](#)

Links to ECDC resources

- [World AIDS Day 2015](#)
- [European HIV Test Finder](#)
- [ECDC guidance HIV and STI prevention among men who have sex with men](#)
- [Dublin Declaration monitoring - 2014 progress](#)

WHO resources

- [WHO/Europe HIV/AIDS page](#)
- [Guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV](#)
- [Consolidated guidelines on HIV testing services](#)
- [WHO World AIDS Day 2015](#)

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The European Centre for Disease Prevention and Control (ECDC) is an EU agency tasked with identifying assessing and communicating threats to human health posed by infectious diseases. It supports the work of public health authorities in the EU and EEA Member States.

ⁱⁱ Since 2005, rates of HIV diagnoses have more than doubled in Bulgaria, the Czech Republic, Hungary, Malta and Slovakia and have increased by more than 50% in Poland. Rates of new HIV diagnoses decreased in 11 countries between 2005 and 2014, with decreases of more than 25% observed in Austria, Estonia, France, the Netherlands, Portugal and the United Kingdom. (see table 1 of the report)

ⁱⁱ For the whole WHO European Region, new diagnoses decreased by 41% among non-European migrants, i.e. people originating from a country outside the WHO European Region.