

HIV/AIDS surveillance in Europe

2018

2017 data

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Abstract

HIV transmission remains a major public health concern and affects more than 2 million people in the WHO European Region, particularly in the eastern part of the Region. This report is the latest in a series published jointly by European Centre for Disease Prevention and Control (ECDC) and the WHO Regional Office for Europe that has been reporting data on HIV and AIDS in the WHO European Region and in the European Union and European Economic Area (EU/EEA) since 2007. It finds that while epidemic patterns and trends vary widely across European countries, nearly 160 000 people were diagnosed with HIV in the European Region in 2017, including 25 000 in the EU/EEA. The increasing trend in new HIV diagnoses continued for the Region overall, despite decreasing rates of new diagnoses in the EU/EEA. The report calls for urgent action for countries and areas (especially in the eastern part) to revamp their political commitment and scale up efforts to implement the *Action plan for the health sector response to HIV in the WHO European Region*.

Keywords

ACQUIRED IMMUNODEFICIENCY SYNDROME –
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Abbreviations

ART	antiretroviral therapy
CI	confidence interval
ECDC	European Centre for Disease Prevention and Control
EECA	eastern Europe and central Asia
EU/EEA	European Union/European Economic Area
MSM	men who have sex with men
PrEP	pre-exposure prophylaxis
TB	tuberculosis
SDGs	(United Nations) Sustainable Development Goals
UNAIDS	Joint United Nations Programme on HIV/AIDS
WHO	World Health Organization

Overview of HIV and AIDS in Europe

This report

The European Centre for Disease Prevention and Control (ECDC) and the World Health Organization (WHO) Regional Office for Europe have jointly carried out the enhanced surveillance of HIV/AIDS in Europe since 2008. Both organizations strive to ensure a high quality of standardized HIV and AIDS surveillance data from the 53 countries of the WHO European Region, including the 28 countries of the European Union (EU) and three countries of the European Economic Area (EEA), referred to in this report as EU/EEA.

This report is the latest in a series published jointly by ECDC and the WHO Regional Office for Europe that has been reporting data on HIV and AIDS in the WHO European Region since 2007. The data presented in the text are augmented by 47 figures and 27 tables: Fig. A–E and Table A in the Overview, Fig. 1.1–2.19 in Chapters 1 and 2, and Tables 1–26 in a discrete section towards the end of the report.

The report has three main sections:

- this Overview, which effectively summarizes and captures the key issues of the report;
- Chapter 1, providing a comprehensive review of HIV and AIDS in the EU/EEA, focusing on HIV diagnoses, trends in HIV diagnoses, AIDS cases and their morbidity and mortality, and HIV testing; and
- Chapter 2, which presents data on HIV and AIDS diagnoses in the WHO European Region, focusing on HIV diagnoses, trends in HIV diagnoses, AIDS cases and

their morbidity and mortality in the Region as a whole and in three geographic areas of the Region.

The data in the report are also augmented by seven annexes:

- Annex 1, which presents the framework for data collection, validation and presentation;
- Annex 2, focusing on completeness of key variables presented for the EU/EEA and the WHO European Region as a whole;
- Annex 3, defining completeness of key variables presented by country and area;
- Annexes 4a and 4b, providing information on country and area HIV and AIDS surveillance systems;
- Annex 5, detailing country-specific notes regarding the reported data and differences in surveillance systems across countries;
- Annex 6, which lists countries and areas with the number of reported diagnoses adjusted for reporting delay; and
- Annex 7, which lists the participating countries and areas and national institutions.

Overview

Although HIV infection is preventable, significant HIV transmission continues across the WHO European Region. In 2017, 159 420 newly diagnosed HIV infections were reported in 50 of the 53 countries of the WHO

Table A. Characteristics of new HIV diagnoses reported in the WHO European Region, the EU/EEA, and West, Centre and East of the WHO European Region, 2017

	WHO European Region ^a	West	Centre	East ^a	EU/EEA
Reporting countries/number of countries ^b	49/53 (50/53)	22/23	15/15	12/15 (13/15)	30/31
Number of new HIV diagnoses	55 018 (159 420)	22 354	6 205	26 459 (130 861)	25 353
Rate of HIV diagnoses per 100 000 population ^c	8.3 (20.0)	6.9	3.2	23.6 (51.1)	6.2
Percentage age 15–24 years	9.3%	11.0%	13.7%	6.9%	11.1%
Percentage age 50+ years	16.1%	20.7%	13.1%	13.0%	19.3%
Male-to-female ratio	2.2	2.9	5.8	1.6	3.1
Percentage new diagnoses CD4 < 350 cells/mm ³	53.1%	48.0%	52.5%	57.2%	48.6%
Transmission mode					
Sex between men	21.2%	39.7%	28.4%	3.9%	38.2%
Heterosexual transmission (men)	25.3%	16.7%	19.4%	33.9%	16.6%
Heterosexual transmission (women)	24.1%	17.5%	7.3%	33.7%	16.5%
Injecting drug use	13.0%	2.7%	2.7%	24.1%	3.7%
Mother-to-child transmission	0.7%	0.5%	0.6%	0.9%	0.5%
Unknown	15.4%	22.5%	41.2%	3.4%	24.2%
Number of new AIDS diagnoses ^d	14 703	2 426	823	11 454	3 130
Rate of AIDS diagnoses per 100 000 population	2.3	0.7	0.4	10.2	0.7

^a Numbers in parentheses include data from the Russian Federation for the WHO European Region and the East.

^b No data received from Germany, the Russian Federation, Turkmenistan and Uzbekistan. All data presented were reported to ECDC/WHO through the European Surveillance System (TESSy), except for data for the Russian Federation, which were obtained through publicly available national sources (1).

^c EU/EEA and West rates are adjusted for reporting delay (Annex 6); the corresponding estimated number of new diagnoses adjusted for reporting delay are 27 055 and 23 976, respectively.

^d No data received from Belgium, Germany, Sweden, the Russian Federation, Turkmenistan and Uzbekistan.

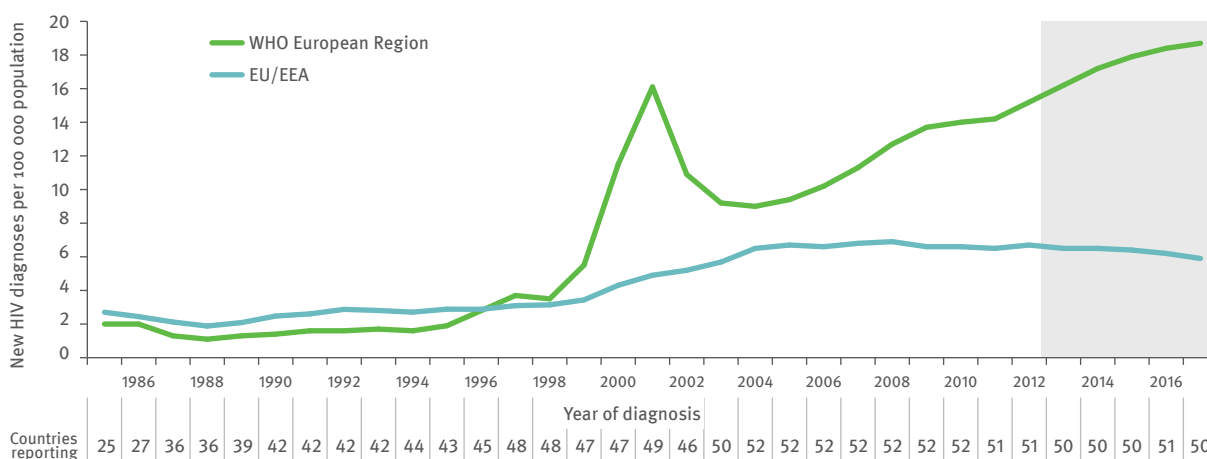
European Region,¹ which corresponds to a rate of 20.0 newly diagnosed infections per 100 000 population (Table A). This number includes 55 018 new diagnoses reported by 49 countries to the joint ECDC and WHO

Regional Office for Europe surveillance system, including 25 353 from the EU/EEA, while information about 104 402 new diagnoses in the Russian Federation was published by the Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS (1) (Fig. A). Over the course of the last three decades, over 2.3 million people have been diagnosed and reported with HIV in the WHO European Region, including over 650 000 people in the EU/EEA (Fig. B).

1 No data were available from Germany (no data export for 2017 due to technical problems), Turkmenistan or Uzbekistan. Liechtenstein is an EEA Member but not a WHO Member State, so its data are included in the totals for the EU/EEA but not for the WHO European Region. No official data were reported by the Russian Federation, but citable data were obtained through publicly available sources (1) and included within the other countries' reported data for the overall number, rate and trend of HIV diagnoses in the European Region (see "HIV and AIDS diagnoses in the WHO European Region" (Chapter 2)) and the East of the Region (see "HIV and AIDS diagnoses in the East" (Chapter 2)). This allows a more complete presentation of the epidemiology of HIV in the WHO European Region. Other regional figures presented in this report (including those by age and gender) are based on data from the 49 countries that provided data to the joint ECDC/WHO European HIV surveillance system.

Carrying on a trend that has persisted over the last decade, rates and overall numbers of people diagnosed with HIV were highest in the East of the Region (51.1 per 100 000 population), lower in the West and the EU/EEA (6.9 and 6.2 per 100 000, respectively) and lowest

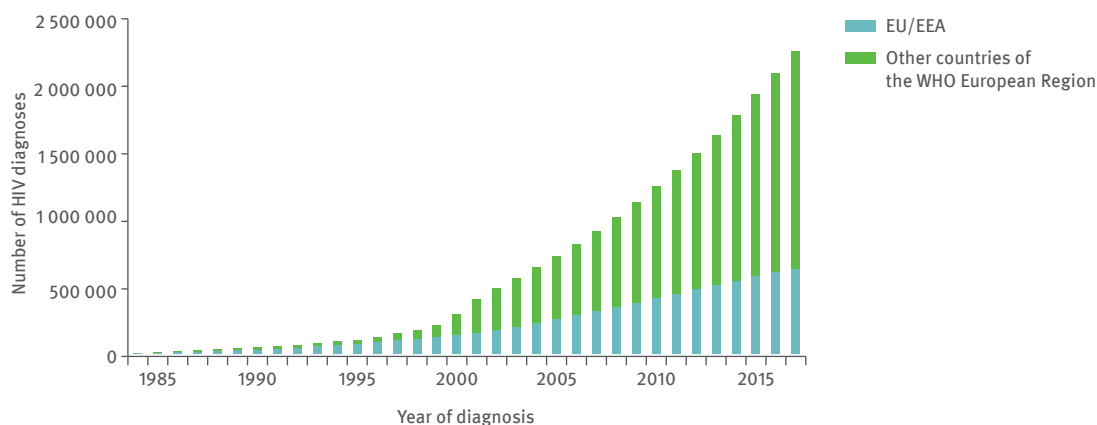
Fig. A. Rate of new HIV diagnoses per 100 000 population, by year of diagnosis and adjusted for reporting delay, in the EU/EEA and WHO European Region, 1985–2017



■ Rates may increase in the coming years due to reporting delays

Note: rates for the EU/EEA and the WHO European Region include data for all countries reporting during the given year, including the Russian Federation (1), and an estimated rate for Germany in 2017. Rates for 2017 presented here therefore are slightly lower than rates presented elsewhere in the report.

Fig. B. Cumulative number of new HIV diagnoses in the EU/EEA and other countries of the WHO European Region, 1984–2017



in the Centre² (3.2 per 100 000) (Table A, Fig. A). The main transmission mode varied by geographical area, illustrating the diversity in the epidemiology of HIV in Europe. Sexual transmission between men was the most common mode in the EU/EEA and heterosexual contact and injecting drug use were the main reported transmission modes in the East of the Region. The rate of new diagnoses in the Region was higher among men than women in all age groups, except among people under 15 years.

Just over half (53%) of those diagnosed with HIV in 2017 in the European Region were diagnosed at a late stage of infection (CD4 cell count < 350 cells/mm³ at diagnosis). This percentage was highest in the East (57%), lower in

the Centre (53%) and lowest in the West (49%), while 49% were diagnosed late in the EU/EEA (Table A, Fig. C).

Linkage to care, measured as having a CD4 count performed and reported, was assessed among the 26 147 new HIV diagnoses in the Region for whom data on date of diagnosis and date of CD4 count were reported. Among those who were linked to care, 86% had evidence of linkage within three months of diagnosis. This percentage was highest in the Centre (96%) and lowest in the East (82%); in the EU/EEA, it was 92% (Fig. D).

In 2017, 14 703 people were diagnosed with AIDS, as reported in 47 countries³ of the WHO European Region, and the rate of new diagnoses was 2.3 per 100 000 population (Table A, see also Table 15 in the Tables section). In the EU/EEA, 3130 people were diagnosed with AIDS

² The grouping of countries into the West (23 countries), Centre (15 countries) and East (15 countries) of the WHO European Region is based on epidemiological considerations and follows the division of countries used in reports published by EuroHIV since 1984: see Annex 1, Figure A1.1 for details.

³ No data were reported by Belgium, Germany, the Russian Federation, Sweden, Turkmenistan or Uzbekistan.

Fig. C. Proportion of people diagnosed late (CD4 cell count < 350 per mm³) by gender, age and transmission, WHO European Region, 2017 (n = 36 596)

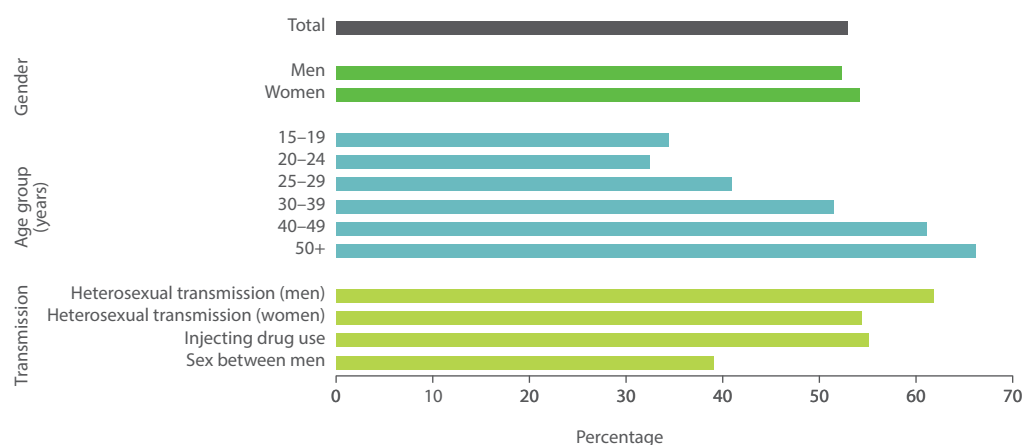
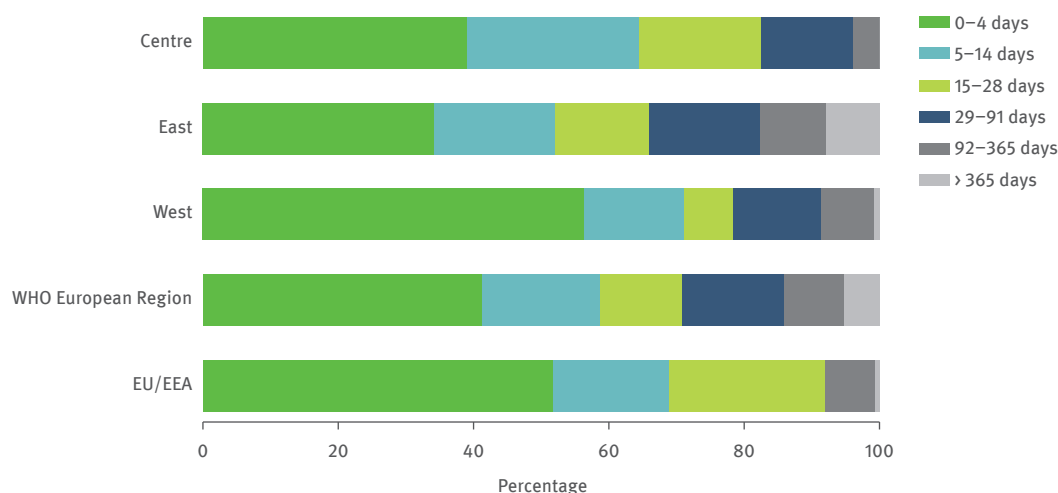


Fig. D. Linkage to care after HIV diagnosis in the EU/EEA, WHO European Region and West, Centre and East, 2017 (n = 26 147)



in 2017, giving a rate of 0.7 per 100 000 population. The number of AIDS cases has continued to decline steadily in the West and the EU/EEA during the last decade, and while it has nearly doubled in the East, it has begun to stabilize and even declined by a slight 7% between 2012 and 2017 (see Fig. 1.12 and 2.4).

European Union and European Economic Area

In 2017, 25 353 people were diagnosed with HIV in 30 of the 31 countries of the EU/EEA, with a rate of 6.2 per 100 000 when adjusted for reporting delay (Table 1, Annex 6). Countries with the highest rates of new HIV diagnoses reported in 2017 were Latvia (18.8; 371 cases) and Estonia (16.6; 219 cases), and the lowest rates were reported by Slovakia (1.3; 70 cases) and Slovenia (1.9; 39 cases). The rate of new HIV diagnoses was higher among men (9.0 per 100 000 population; Table 2) than women (2.8 per 100 000 population; Table 3). The overall male-to-female ratio was 3.1 (Table A). This ratio was highest in Croatia (20.2) and Slovenia (18.5) and was above 1 in all countries in the EU/EEA (Fig. 1.1). The predominant mode of transmission in these countries was sex between men.

Men had higher age-specific rates than women in all age groups except among young people under 15 years, where age-specific rates were similar (Fig. 1.2). The highest overall age-specific rate of HIV diagnoses was observed among 25–29-year-olds (14.4 per 100 000 population), largely because this group has the highest age-specific rate for men at 22.2 per 100 000 population, while rates for women were highest in the 30–39-year age group (6.9 per 100 000 population) (Fig. 1.2).

Sex between men remains the predominant mode of HIV transmission reported in the EU/EEA, accounting for 38% (9694) of all new HIV diagnoses in 2017 and half (50%) of diagnoses where the route of transmission was known (Table 4, Table 8, Fig. 1.5). Among those with known route of HIV transmission, sex between men was the most commonly reported and accounted for more than 60% of new HIV diagnoses in 10 countries (Austria, Croatia, the Czech Republic, Hungary, Ireland, the Netherlands, Poland, Slovakia, Slovenia and Spain) (Fig. 1.5).

Heterosexual contact was the second most common transmission mode among people newly diagnosed in 2017 (33%, equally divided between men and women). Transmission due to injecting drug use accounted for 4% of HIV diagnoses, but the transmission mode was not reported or was reported to be unknown for 24% of new HIV diagnoses (Table A). Forty-one per cent of those diagnosed in the EU/EEA in 2017 were migrants, defined as originating from outside of the country in which they were diagnosed (Fig. 1.6), with 18% originating from countries in sub-Saharan Africa, 8% from countries in Latin America and the Caribbean, 6% from other countries in central and eastern Europe, and 4% from other countries in western Europe.

The trend in reported HIV diagnoses declined slightly between 2008 and 2017. In the earlier part of this period, rates were 6.9 per 100 000, decreasing slightly to 6.5 in more recent years, and 6.2 in 2017 (see Table 1, Fig. 1.8 and Annexes 1, 5 and 6). While the overall EU/EEA trend appears to have declined slightly during the last decade, contrasting trends are seen at national level. Several countries, including Austria, Belgium, Denmark, Estonia, the Netherlands, Norway, Spain and the United Kingdom, have reported a decline in rates of new diagnosis in recent years, even after adjusting for reporting delay. Conversely, since 2008, and taking reporting delay into account, rates of HIV diagnoses have more than doubled in Bulgaria, Cyprus and Lithuania, and have increased by over 50% in the Czech Republic, Hungary, Malta and Poland (Table 1, Annex 6).

Trends differ by gender and age group. Age-specific rates have declined since 2008 in all age groups except for adults over 50 years, with rates among 25–29-year-olds and 30–39-year-olds consistently higher than other groups throughout the period in both women and men (Fig. 1.9a, 1.9b).

Trends by transmission mode show that the number of new HIV diagnoses among men who have sex with men (MSM) in the EU/EEA decreased slightly in 2017 compared to recent years (Fig. 1.11a). Although reporting delay may contribute to this decline, it appears that the drop may be substantial in certain countries, including Belgium, Greece, the Netherlands, Spain and the United Kingdom. Conversely, increases in new diagnoses among MSM have been noted in Bulgaria, Cyprus, Ireland, Malta, Poland and Romania in recent years. Cases attributed to MSM born outside of the reporting country increased between 2008 and 2017, declining slightly between 2015 and 2017 but not to the same extent as observed in EU/EEA-native MSM (Fig. 1.12).

The number of heterosexually acquired cases decreased steadily over the last decade (Fig. 1.11a), with sharper declines among women and foreign-born heterosexual people than among men and non-foreign-born people (Fig. 1.11a, 1.12). The number of HIV diagnoses reported as due to injecting drug use has declined since 2008 in both foreign-born and non-foreign-born groups, but localized outbreaks were seen in 2011–2012, which affected the EU/EEA trend in this group, and smaller local outbreaks were also noted in some countries during the period (Table 5, Fig. 1.10, Fig. 1.11a). Mother-to-child transmission and transmission through nosocomial infection or blood transfusion also decreased steadily between 2008 and 2017; these types of transmission now represent less than 1% of new cases diagnosed (Table 8). The number of cases reported to have an unknown mode of transmission increased from 13% in 2008 to 24% in 2017.

Information on CD4 cell count at the time of HIV diagnosis was provided by 25 countries (Table 14) for 16 858 adults and adolescents diagnosed and reported in those countries (71% of the total). As in previous years, nearly half (49%) of all cases with a CD4 cell count available

were diagnosed several years after being infected, with a count below 350 cells per mm³; 28% of cases were considered to have advanced HIV infection (CD4 < 200 cells/mm³).

When analysing CD4 cell count by transmission mode, the proportion of people presenting several years after being infected (CD4 < 350 cells/mm³) was highest among women (52%), older adults (56% in 40–49-year-olds and 63% in those over 50), men and women infected by heterosexual sex (63% and 53%, respectively), people who acquired HIV through injecting drug use (52%), and migrants from south and south-east Asia (53%) and sub-Saharan Africa (56%) (Table 14, Fig. 1.7). The lowest proportions of late diagnosis, indicated by CD4 counts below 350 cells per mm³ at diagnosis, were observed among younger age groups (33% of 15–19-year-olds and 32% of those aged 20–24 years), men who acquired HIV through sex with another man (37%) and migrants from other western European countries (34%). While many people are still diagnosed late, several years after being infected with HIV, the median CD4 cell count at HIV diagnosis has increased significantly over the past decade, from 330 cells/mm³ (95% confidence interval (CI): 322–338) in 2007 to 391 cells/mm³ (95% CI: 381–400) in 2017. The group with the highest median CD4 cell count at diagnosis is MSM, with 452 cells/mm³ in 2017 (Fig. 1.13).

For 2017, 3130 diagnoses of AIDS were reported by 28 EU/EEA countries,⁴ giving a rate of 0.7 cases per 100 000 population (Table 15). Overall, 89% of these AIDS diagnoses were made within 90 days of the HIV diagnosis, indicating that most AIDS cases in the EU/EEA are due to late diagnosis of HIV infection. This pattern holds for all transmission groups except people who acquired HIV through injecting drug use, where 59% of AIDS diagnoses occur within 90 days of the HIV diagnosis (Fig. 1.14). Fifteen countries reported tuberculosis (TB) (pulmonary and/or extrapulmonary) as an AIDS-defining illness in 14% of those newly diagnosed with AIDS in 2017 (Fig. 1.16). In the EU/EEA, the numbers of AIDS cases and AIDS-related deaths have declined consistently since the mid-1990s.

WHO European Region

With 159 420 people newly diagnosed with HIV in the WHO European Region in 2017, corresponding to a rate of 20.0 per 100 000 population, the annual increase in new HIV diagnoses continued – but at a slower pace than previously (Fig. A). The increase is mainly driven by the continuing upward trend in the East and the Centre, whereas the rate of new diagnoses is declining in the West (Fig. 2.3a).

Of the 159 420 people diagnosed in 2017, 82% were diagnosed in the East (130 861), 14% in the West (22 354) and 4% in the Centre of the Region (6205) (Table A). The rate was also highest in the East (51.1 per 100 000 population), being disproportionately higher than in the West (6.9 per 100 000 population, adjusted for reporting

delay⁵) and the Centre (3.2 per 100 000 population) (Table A).

Rates of newly diagnosed HIV infections for 2017 varied significantly among countries in the WHO European Region, with the highest rates per 100 000 population observed in the Russian Federation (71.1) (1), Ukraine⁶ (37.0), Belarus (26.1) and the Republic of Moldova (20.6), and the lowest in Bosnia and Herzegovina (0.3), Slovakia (1.3) and Slovenia (1.9) (Table 1).

Among the 49 countries that reported to ECDC/WHO for 2017⁷ (the Russian Federation not included), the overall rate for men was 11.9 per 100 000 population (Table 2) and for women 5.1 per 100 000 population (Table 3). The largest proportion of those newly diagnosed in the 49 reporting countries were in the age group 30–39 years (36%), while 9% were young people aged 15–24 years and 16% were 50 years or older at diagnosis. The male-to-female ratio was 2.2, lowest in the East (1.6), higher in the West (2.9) and highest in the Centre (5.8). People most commonly were infected through heterosexual sex (49%), with 11% of these cases originating from countries with generalized HIV epidemics, while 21% were infected through sex between men, 13% through injecting drug use and 0.7% through mother-to-child transmission. Information about transmission mode was unknown or missing for 15% of the new diagnoses (Table A).

When combining data from the Russian Federation⁸ within data reported by the other 49 countries, heterosexual transmission accounted for 56% of new diagnoses with a known mode of HIV transmission, injecting drug use for 30%, sex between men for 14% and mother-to-child transmission for 0.6%.

In the East, when combining data from the Russian Federation within data reported by the other 12 countries on people for whom the mode of HIV transmission was known, heterosexual transmission accounted for 59% of new diagnoses, transmission through injecting drug use for 37%, sex between men for 3% and mother-to-child transmission for 0.5%. In the 12 reporting countries alone, 68% were infected through heterosexual transmission and 24% through injecting drug use, while reported transmission through sex between men remained low (4% of cases) (Tables 4–6, Table 8). Sex between men (30%) and heterosexual sex (26%) were the main reported transmission modes in the Centre, but 40% of those newly diagnosed lacked this information. Sex between men was the predominant mode of transmission in 12 of the 15 countries in the Centre. In the

5 See Annex 1 for methods and Annex 6 for results.

6 Without taking into account data from Crimea, Sevastopol city and parts of the non-government controlled areas of Ukraine; adjusting population denominator data to exclude Crimea and Sevastopol city; and excluding infants born to HIV-positive mothers whose HIV status is undetermined.

7 No data were received from Germany, the Russian Federation, Turkmenistan or Uzbekistan.

8 Among new diagnoses in the Russian Federation with a known mode of HIV transmission, injecting drug use and heterosexual sex both accounted for 49% of the new cases, sex between men for < 2% and mother-to-child transmission for < 1% (1).

4 These were all EU/EEA countries except Sweden and Belgium.

West, sex between men remained the main transmission mode (40% of cases) followed by heterosexual transmission (34% of cases, among whom 41% originated from generalized epidemic countries); information was lacking for 23% of new diagnoses.

The rate of newly diagnosed HIV infections in the 50 countries increased by 37% over the past 10 years, from 14.6 per 100 000 population in 2008 (107 385 cases) to 20.0 per 100 000 population in 2017 (159 420 cases) (Fig. 2.3a). The increase is mainly driven by the continuing upward trend in the East, where the rate increased by 68%, from 30.4 per 100 000 (77 228 cases) to 51.1 per 100 000 (130 861 cases). The rate increased by a much smaller 18% in the 12 officially reporting countries in the East (the Russian Federation not included), from 20.0 in 2008 to 23.6 in 2017. In the Centre, the rate increased by 121%, the largest relative increase among the three geographical areas, from 1.4 to 3.1 per 100 000 population between 2008 and 2017, while in the West it decreased by 27%, from 9.4 to 6.9 per 100 000 population over the same period (Fig. 2.3b).

Analysing the overall regional trend for the 49 countries that reported to ECDC and WHO (not including Germany, the Russian Federation, Turkmenistan or Uzbekistan), the rate for the Region decreased by a slight 5%, from 8.8 in 2008 to 8.4 in 2017. However, when adjusting the 2017 rate for reporting delay, the decline is less evident.

Consistent data on transmission mode were available from 44 countries for the period 2008–2017 (Fig. 2.4). The overall increase in the East was driven by an upsurge in the number of HIV diagnoses with reported sexual transmission, which increased by 69% for heterosexual transmission and eight-fold for transmission through sex between men. The increase was considerably larger among men with heterosexual transmission (a 107% increase) than women with heterosexual transmission (21% increase). Transmission through injecting drug use, while still substantial, decreased by 36% (Fig. 2.10). In the Centre, new diagnoses in people infected through sex between men doubled between 2008 and 2017; this was the predominant mode of transmission in 12 of the 15 countries, while heterosexual transmission increased by 43%. Transmission through injecting drug use has levelled off after an outbreak in Romania during 2011–2013, resulting in an overall increase of 43% in comparison with the 2008 level (Fig. 2.17). In the West, heterosexual transmission continued its steady decline and decreased by 49% over the 10-year period overall and an even steeper decline among heterosexual women; injecting drug use-related transmission decreased by 57% between 2008 and 2017 and is now decreasing again after a peak in 2012 caused by an outbreak in Greece. New diagnoses due to sex between men decreased by 21% in comparison with 2008; not all of this decline can be explained by reporting delay. New diagnoses with unknown transmission mode increased by 51% in the West (Fig. 2.19).

Late HIV diagnosis remains a challenge in the Region. Among people newly diagnosed (> 14 years) for whom

information about CD4 cell count at the time of HIV diagnosis was available, just over half (53%) were late presenters, with CD4 cell counts below 350 cells per mm³, including 32% with advanced HIV infection (CD4 < 200 cells/mm³). The percentage of people newly diagnosed who were late presenters (CD4 < 350/mm³) varied across transmission categories and age groups and was highest for people with reported heterosexual transmission (58%; 62% for men with heterosexual transmission and 54% for women with heterosexual transmission) and injecting drug use (55%), and lowest for men infected through sex with men (39%) (Fig. C). The percentage increased with age, ranging from 34% and 32% among people aged 15–19 and 20–24 years at diagnosis, respectively, to 66% among those aged 50 years or older. By gender, the percentage of late presenters was similar overall (52% for men and 54% for women) which, for men, conceals the difference between MSM (who tend to get diagnosed earlier) and heterosexual men (who tend to get diagnosed later). Additionally, there was variation across the Region, with 57% late presenters in the East, 53% in the Centre and 48% in the West.

In 2017, 14 703 people were newly diagnosed with AIDS in 47 countries of the WHO European Region,⁹ corresponding to a rate of 2.3 per 100 000 population. Overall, 78% of AIDS cases were diagnosed in the East, where the rate per 100 000 was also highest (10.2), 17% in the West (with a rate of 0.7 per 100 000) and 6% in the Centre of the Region (0.4 per 100 000) (Table 15). Twenty per cent of people diagnosed with AIDS presented with TB as an AIDS-defining illness, ranging from 15% of cases in the West and 19% in the Centre to 26% in the East. The rate of new AIDS diagnoses remained largely stable between 2008 and 2017. There was, however, great variation across the Region, with a doubling of the rate in the East for the decade (from 5.1 to 10.2 per 100 000) but also a slight 7% decrease between 2012 and 2017, a stable rate of 0.4 per 100 000 in the Centre and a steady decline, by 67% overall, in the West, from 2.1 to 0.7 per 100 000 (Fig. 2.5).

Conclusions

HIV transmission remains a major public health concern and affects more than 2 million people in the WHO European Region, in particular in the eastern part of the Region. Nearly 160 000 people were diagnosed with HIV in 2017 at a rate of 20.0 per 100 000 population, once again the highest rate ever reported for one year. An increasing majority, 82%, were diagnosed in the East of the Region and 16% in the EU/EEA. Newly diagnosed infections from two countries alone (the Russian Federation and Ukraine) contributed 75% of all cases in the WHO European Region and 92% of cases in the East. The new surveillance data presented in this report indicate, on the one hand, that the increasing trend in new HIV diagnoses continued for the WHO European Region, particularly in the eastern and central parts, but at a slower rate for the decade than previously. On the other

⁹ No data were available from Belgium, Germany, the Russian Federation, Sweden, Turkmenistan or Uzbekistan.

hand, the data confirm stabilizing and even decreasing rates in several EU/EEA countries in more recent years.

The current increasing trends indicate that the Region is not on track to meet the WHO and Joint United Nations Programme on HIV/AIDS (UNAIDS) targets (2–4) outlining the path to attaining United Nations Sustainable Development Goal (SDG) 3.3, which calls to “End the epidemics of AIDS, tuberculosis, malaria, and neglected tropical diseases and combat hepatitis, water-borne and other communicable diseases” (5). Estimated new infections, currently at an historic high, would need to decrease by 78% by 2020 for the Region to achieve the target. Even in the EU/EEA, where the overall trend has declined slightly in recent years, achieving the target would require a decline in estimated new infections of 74% by 2020 (Fig. E).

While epidemic patterns and trends vary widely across European countries, sustained increases have been seen in the number of newly diagnosed infections in certain transmission groups in parts of the Region: MSM in the Centre and East, and heterosexual transmission in the East. Heterosexual transmission has decreased substantially in the EU/EEA and the West, particularly among women, as has the number of cases due to sex between men in selected countries in the EU/EEA and West in recent years. Transmission through injecting drug use has continued to decrease in many countries, although it still accounted for 37% of reported new diagnoses with a known mode of transmission in the East in 2017.

Too many people throughout the WHO European Region are diagnosed late (53%), which is increasing their risk of ill health, death and onward HIV transmission. The high number of AIDS diagnoses in the East confirms that late HIV diagnosis, delayed initiation of antiretroviral treatment (ART) and low treatment coverage remain major challenges. At the same time, the stabilizing AIDS trend observed since 2012 may be the result of the increasing majority of countries in the East that have now implemented so-called treat-all policies, which aim to support

everyone living with HIV to be offered ART regardless of disease stage.

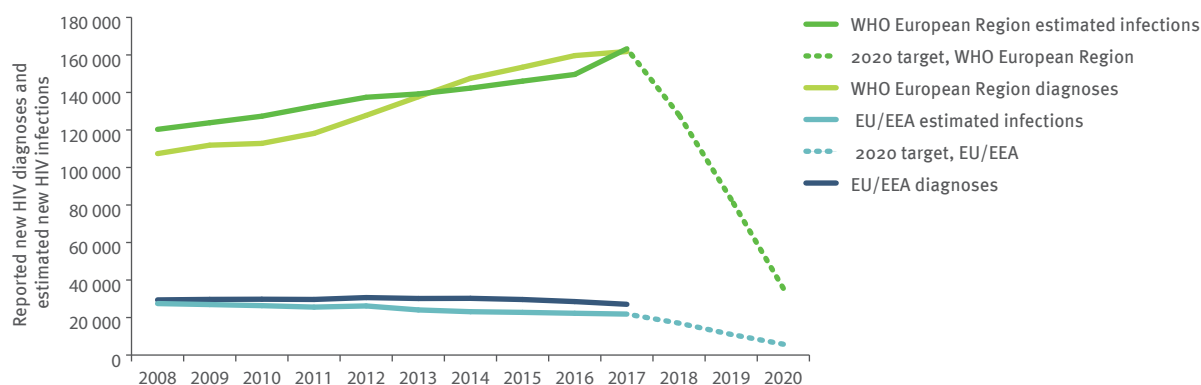
One in five people living with HIV in the Region are unaware of their infection (6) (for more details on estimates, see UNAIDS (7)). New strategies are required to decrease the number of people who are diagnosed late or are unaware of their infection, expanding diversified and user-friendly approaches to more widely available HIV testing. WHO consolidated guidelines on HIV self-testing and partner notification and ECDC guidance on integrated HIV and hepatitis B and C testing recommend implementation of innovative approaches that include self-testing and testing provided by lay providers as part of overall HIV testing services (8–10). Policy-monitoring in the Region, however, indicates that implementation of community-based testing, self-testing and voluntary partner notification are limited or non-existent in many European countries (11). HIV testing services should focus on reaching the most affected population groups in the local epidemic context, be tailored to the specific needs of these groups and support timely linkage to HIV prevention, treatment and care. This will ensure earlier diagnoses and treatment initiation, and result in improved treatment outcomes and reduced morbidity, mortality and HIV incidence in support of the 90–90–90¹⁰ and other regional and global targets (2–4).

Evidence that early initiation of ART is beneficial both to the health of the person being treated and in preventing onward HIV transmission is now solidly confirmed (12–17). Nearly 90% of countries in the WHO European Region have a policy to provide treatment regardless of CD4 count (6,18).

Interventions to control the epidemic should be based on evidence and adapted to national and local epidemiology. From the comprehensive epidemiological data presented in this report, the following can be concluded.

¹⁰ The 90–90–90 targets are that 90% of people living with HIV know their HIV status, 90% of diagnosed people living with HIV receive treatment, and 90% of people on treatment achieve viral suppression.

Fig. E. Estimated new HIV infections and reported new HIV diagnoses in the EU/EEA and WHO European Region, 2008–2017, and target for 2020



Sources: estimated infections, UNAIDS (7); new diagnoses, authors.

- For the countries in the EU/EEA and West, given the predominance of HIV transmission among MSM and increases in some countries, it would appear that current prevention and control interventions need to be scaled up and strengthened and should remain the priority cornerstone of the HIV response. Countries with declines have demonstrated the impact of changing the culture towards more frequent testing for at-risk gay men and linkage to immediate care and ART for those found to be positive (19). Multicomponent interventions and the inclusion of pre-exposure prophylaxis (PrEP) for HIV, self-testing and assisted voluntary partner notification into the package of prevention and control interventions could help to curb this increased trend (8,20,21). The 2011–2012 increase in HIV cases among people who inject drugs and continued reported local outbreaks in a number of countries (22–25) demonstrates the need to maintain or scale up harm-reduction programmes.
- For the countries in the Centre, new diagnoses overall are increasing faster than in any other part of the WHO European Region. There is a very strong gender disparity in the rate of new HIV diagnoses in this part of the Region, with alarming increases among men, particularly MSM, compared with a fairly stable rate among women. Sex between men is the predominant mode of transmission in 12 of the 15 Centre countries. Introduction of PrEP for high-risk groups, HIV testing by lay providers, HIV rapid diagnostic tests, HIV self-testing and voluntary assisted partner notification alongside policies and practices to offer ART to all people living with HIV are needed. Some countries went through a transition to domestic financing of the HIV response after withdrawal of funding from the Global Fund. This has posed sustainability challenges, particularly in relation to financing of HIV prevention programmes. Increased political will and attention, alongside intensified involvement of civil society, is needed to mitigate some of these challenges and prevent the epidemic from accelerating (26).
- For the countries in the East, there is an urgent need to continue the scale up of bold, evidence-based interventions and deliver more effective, integrated services through health systems that better address the social determinants of health. Comprehensive combination-prevention and innovative HIV-testing strategies are needed, with a particular focus on reaching key populations. This can be achieved through user-friendly prevention and testing services, including assisted partner notification, PrEP, HIV testing performed by trained lay providers and self-testing in line with WHO recommendations; these should be integrated into national policies and programmes and implemented (4,8,9,27). Community involvement in the design and delivery of services is essential to reduce the rate of new HIV infections and increase the number of people linked to care and initiated and retained on ART, with the ultimate aim of reducing the high number of AIDS diagnoses and AIDS-related deaths. Innovative HIV prevention interventions should address the risk of heterosexual transmission, particularly in couples

where one partner is engaged in a high-risk behaviour (such as injecting drug use) or is spending longer periods of time abroad. The large number of new diagnoses in people infected through injecting drug use emphasizes that evidence-based policies focused on key populations, including high coverage of harm-reduction programmes for people who inject drugs, remain critical to the HIV response in the eastern part of the Region. Following repeat calls for urgent action, most recently by the WHO Regional Director for Europe during a ministerial policy dialogue on HIV and related comorbidities in eastern Europe and central Asia (EECA) attended by 11 ministers or deputy ministers of health from 11 EECA countries in July 2018 (28), countries in the eastern part of the Region are revamping their political commitment and efforts to implement the action plan for the health sector response to HIV in the WHO European Region, including through the development of roadmaps for accelerating efforts to reach the UNAIDS and WHO 2020 targets (2–4).

To facilitate the sharing of lessons learned in the HIV response across European countries, national health authorities, national and international experts and civil society organizations involved in the provision of HIV prevention, testing, treatment and care services were solicited to share their examples of good practices in the health sector response to HIV. This resulted in 52 examples from 33 Member States being published in the first compendium of good practices from the WHO European Region (29).

Robust surveillance data are critical for monitoring and informing the public health response to the European HIV epidemic in an accurate and timely fashion. The number of countries conducting enhanced HIV surveillance and reporting surveillance data at European level has gradually increased over time. In 2017, 41 countries submitted linked HIV and AIDS data, enabling greater understanding of the clinical status of people diagnosed with HIV. This approach increases possibilities for longer-term monitoring of HIV continuum-of-care outcomes, such as modelling of the undiagnosed fraction, and measurement of linkage to care, treatment and viral suppression following diagnosis. It can also support national and global efforts to monitor progress towards the 90–90–90 and other global and regional targets.

References¹¹

1. Information note 'Spravka' on HIV infection in the Russian Federation as of 31 December 2017. Moscow: Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS; 2018.
2. Global health sector strategy on HIV, 2016–2021 – towards ending AIDS. Geneva: World Health Organization; 2016 (<http://www.who.int/hiv/strategy2016-2021/ghss-hiv/en/>).
3. Ambitious treatment targets: writing the final chapter of the AIDS epidemic. Geneva: UNAIDS; 2014 (http://www.unaids.org/sites/default/files/media_asset/JC2670_UNAIDS_Treatment_Targets_en.pdf).
4. Action plan for the health sector response to HIV in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2017 (<http://www.euro.who.int/en/health-topics/communicable-diseases/hiv/aids/publications/2017/action-plan-for-the-health-sector-response-to-hiv-in-the-who-european-region-2017>).

¹¹ All weblinks in this overview and subsequent chapters were accessed on 12 November 2018.

5. United Nations Sustainable Development Goals. About the Sustainable Development Goals. In: United Nations [website]. New York (NY): United Nations; 2018 (<https://www.un.org/sustainabledevelopment/sustainable-development-goals/>).
6. Monitoring implementation of the Dublin Declaration on Partnership to fight HIV/AIDS in Europe and Central Asia: thematic report on the HIV continuum of care: Stockholm: ECDC; in press.
7. Annex on methods. In: Miles to go. Global AIDS update 2018. Geneva: UNAIDS; 2018:255–64 (http://www.unaids.org/sites/default/files/media_asset/miles-to-go_en.pdf).
8. Guidelines on HIV self-testing and partner notification. Supplement to consolidated guidelines on HIV testing services. Geneva: World Health Organization; 2017 (<http://www.who.int/hiv/pub/self-testing/hiv-self-testing-guidelines/en/>).
9. Consolidated guidelines on HIV testing services. Geneva: World Health Organization; 2016 (<http://www.who.int/hiv/pub/guidelines/hiv-testing-services/en/>).
10. Public health guidance on HIV, hepatitis B and C testing in the EU/EEA. Stockholm: ECDC; 2018 (<https://ecdc.europa.eu/sites/portal/files/documents/HIV-hepatitis-B-and-C-testing-public-health-guidance.pdf>).
11. HIV testing. Monitoring implementation of the Dublin Declaration on Partnership to fight HIV/AIDS in Europe and Central Asia: 2017 progress report. Stockholm: ECDC; 2017 (<https://ecdc.europa.eu/sites/portal/files/documents/HIV%20testing.pdf>).
12. Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection. Recommendations for a public health approach. Second edition. Geneva: World Health Organization; 2016 (http://apps.who.int/iris/bitstream/10665/208825/1/9789241549684_eng.pdf?ua=1).
13. Guidelines on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV. Geneva: World Health Organization; 2016 (http://apps.who.int/iris/bitstream/10665/186275/1/9789241509565_eng.pdf).
14. INSIGHT START Study Group. Initiation of antiretroviral therapy in early asymptomatic HIV infection. *N Engl J Med.* 2016;373(9):795–807.
15. Cohen MS, Chen YQ, McCauley M, Gamble T, Hosseinipour MC, Kumarasamy N et al. Prevention of HIV-1 infection with early antiretroviral therapy. *N Engl J Med.* 2011;365(6):493–505.
16. Guidelines version 9.0. October 2017. Brussels: European AIDS Clinical Society; 2017 (http://www.eacsociety.org/files/guidelines_9.0-english.pdf).
17. Rodger A, Cambiano V, Bruun T, Vernazza P, Collins S, Corbelli CM et al. Risk of HIV transmission through condomless sex in gay couples with suppressive ART: the PARTNER2 study expanded results in gay men. In: *AIDS 2018. 22nd International AIDS Conference, Amsterdam, the Netherlands, 23–27 July 2018* [website]. Geneva: International AIDS Society; 2018 (Abstract WEAX0104LB, 2018; <https://programme.aids2018.org/Abstract/Abstract/13470>).
18. 2017 global AIDS monitoring (GAM). In: *AIDSinfo* [website]. Geneva: UNAIDS; 2017 (www.AIDSinfoonline.org).
19. Brown AE, Mohammed H, Ogaz D, Kirwan PD, Yung M, Nash SG. Fall in new HIV diagnoses among men who have sex with men (MSM) at selected London sexual health clinics since early 2015: testing or treatment or pre-exposure prophylaxis (PrEP)? *Euro Surveill.* 2017;22(25):pii=30553 (<https://doi.org/10.2807/1560-7917.ES.2017.22.25.30553>).
20. HIV and STI prevention among men who have sex with men. ECDC guidance. Stockholm: ECDC; 2014 (<http://ecdc.europa.eu/en/publications/Publications/hiv-sti-prevention-among-men-who-have-sex-with-men-guidance.pdf>).
21. McCormack S, Dunn DT, Desai M, Dolling DI, Gafos M, Gilson R et al. Pre-exposure prophylaxis to prevent the acquisition of HIV-1 infection (PROUD): effectiveness results from the pilot phase of a pragmatic open-label randomised trial. *Lancet* 2017;378:53–60.
22. Hedrich D, Kalamara E, Sfetcu O, Pharris A, Noor A, Wiessing L et al. Human immunodeficiency virus among people who inject drugs: is risk increasing in Europe? *Euro Surveill.* 2013;18(48):pii=20648. (<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20648>).
23. Giese C, Igoe D, Gibbons Z, Hurley C, Stokes S, McNamara S et al. Injection of new psychoactive substance snow blow associated with recently acquired HIV infections among homeless people who inject drugs in Dublin, Ireland, 2016. *Euro Surveill.* 2016;20(40):pii=30036. doi:<http://dx.doi.org/10.2807/1560-7917.ES.2016.20.40.30036>.
24. Public Health England, Health Protection Scotland, Public Health Wales, Public Health Agency Northern Ireland. Shooting up: infections among people who inject drugs in the UK, 2016. London: Public Health England; 2017 (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/567231/Shooting_Up_2017_Update.pdf).
25. HIV in people who inject drugs – joint technical mission to Luxembourg. Stockholm, Lisbon: ECDC/European Monitoring Centre for Drugs and Drug Addiction; 2018 (<http://sante.public.lu/fr/publications/h/hiv-joint-technical-mission/index.html>).
26. Lost in transition. Three case studies of Global Fund withdrawal in south eastern Europe. New York (NY): Open Society Foundations; 2017 (<https://www.opensocietyfoundations.org/publications/lost-transition>).
27. Consolidated guidelines on HIV prevention, diagnosis, treatment and care for key populations. 2016 update. Geneva: World Health Organization; 2016 (<https://www.who.int/hiv/pub/guidelines/keypopulations-2016/en/>).
28. Ministerial policy dialogue on HIV and related comorbidities in eastern Europe and central Asia. In: WHO Regional Office for Europe [website]. Copenhagen: WHO Regional Office for Europe; 2018 (<http://www.euro.who.int/en/media-centre/events/events/2018/07/ministerial-policy-dialogue-on-hiv-and-related-comorbidities-in-eastern-europe-and-central-asia>).
29. Compendium of good practices in the health sector response to HIV in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2018 (<http://www.euro.who.int/en/publications/abstracts/compendium-of-good-practices-in-the-health-sector-response-to-hiv-in-the-who-european-region>).

Обзор эпидемиологической ситуации по ВИЧ/СПИДу в Европе

Данный доклад

Европейский центр профилактики и контроля заболеваний (ECDC) и Европейское региональное бюро Всемирной организации здравоохранения (ВОЗ) совместно осуществляют усиленный эпиднадзор за ВИЧ/СПИДом в Европе с 2008 г. Обе организации стремятся обеспечить высокое качество стандартизированных данных эпиднадзора за ВИЧ/СПИДом, проводимого в 53 странах Европейского региона ВОЗ, включая 28 стран Европейского союза (ЕС) и три страны Европейской экономической зоны (ЕЭЗ), которые упоминаются в настоящем обзоре как ЕС/ЕЭЗ.

Настоящий доклад является новейшей публикацией из серии докладов, выпущенных совместно ECDC и Европейским региональным бюро ВОЗ с целью предоставления данных о ВИЧ-инфекции и СПИДе в Европейском регионе ВОЗ в период с 2007 г. Данные, приведенные в тексте, дополняются 47 рисунками и 27 таблицами: рисунки А–Е и таблица А в кратком обзоре, рисунки 1.1–2.19 в главах 1 и 2 и таблицы 1–26 в отдельном разделе ближе к концу доклада.

Доклад состоит из трех основных разделов:

- краткий обзор, в котором в сжатом виде представлены все ключевые положения доклада;
- Глава 1, содержащая всеобъемлющий обзор эпидемиологической ситуации по ВИЧ/СПИДу в ЕС/ЕЭЗ с акцентом на показателях и динамике заболеваемости ВИЧ-инфекцией и динамике заболеваемости и смертности от СПИДа, а также показателях тестирования на ВИЧ; и

- Глава 2, в которой представлены данные о зарегистрированных случаях ВИЧ-инфекции и СПИДа в Европейском регионе ВОЗ с акцентом на показателях и динамике заболеваемости ВИЧ-инфекцией и динамике заболеваемости и смертности от СПИДа как в Регионе в целом, так и в его трех географических частях.

Данные в докладе также дополнены семью приложениями:

- Приложение 1, в котором излагаются основные принципы сбора, проверки и представления данных;
- Приложение 2, акцент в котором поставлен на полноте ключевых переменных, отражающих эпидемиологическую ситуацию в ЕС/ЕЭЗ и Европейском регионе ВОЗ в целом;
- Приложение 3, в котором анализируется полнота ключевых переменных, представленных в разбивке по странам и частям Региона;
- Приложения 4а и 4б, содержащие информацию о системах эпиднадзора за ВИЧ-инфекцией и СПИДом в странах и частях Региона;
- Приложение 5, содержащее подробные замечания по конкретным странам в отношении предоставленных данных и различий в системах эпиднадзора между странами;
- Приложение 6, в котором перечислены страны и части Региона с числом зарегистрированных диагнозов с поправкой на задержку отчетности; и

Таблица А. Характеристики случаев ВИЧ-инфекции, зарегистрированных в Европейском регионе ВОЗ, в ЕС/ЕЭЗ, в западной, центральной и восточной частях Европейского региона ВОЗ, 2017 г.

	Европейский регион ВОЗ ^а	Запад	Центр	Восток ^а	ЕС/ЕЭЗ
Страны, предоставившие отчетные данные/Число стран ^б	49/53 (50/53)	22/23	15/15	12/15 (13/15)	30/31
Число новых случаев ВИЧ-инфекции	55 018 (159 420)	22 354	6 205	26 459 (130 861)	25 353
Частота случаев на 100 000 населения ^а	8,3 (20,0)	6,9	3,2	23,6 (51,1)	6,2
Процент случаев у людей в возрасте 15–24 лет	9,3%	11,0%	13,7%	6,9%	11,1%
Процент случаев у людей в возрасте старше 50 лет	16,1%	20,7%	13,1%	13,0%	19,3%
Соотношение мужчины/женщины	2,2	2,9	5,8	1,6	3,1
Процент новых случаев с числом CD4 <350 клеток/мм ³	53,1%	48,0%	52,5%	57,2%	48,6%
Путь передачи инфекции					
Сексуальные контакты между мужчинами	21,2%	39,7%	28,4%	3,9%	38,2%
Гетеросексуальные контакты (мужчины)	25,3%	16,7%	19,4%	33,9%	16,6%
Гетеросексуальные контакты (женщины)	24,1%	17,5%	7,3%	33,7%	16,5%
Употребление инъекционных наркотиков	13,0%	2,7%	2,7%	24,1%	3,7%
От матери ребенку	0,7%	0,5%	0,6%	0,9%	0,5%
Путь неизвестен	15,4%	22,5%	41,2%	3,4%	24,2%
Число новых случаев СПИДа ^а	14703	2426	823	11454	3130
Частота случаев СПИДа на 100 000 населения	2,3	0,7	0,4	10,2	0,7

^а Данные по Российской Федерации включены в цифры в скобках для Европейского региона и для восточной его части.

^б Отсутствуют данные Германии, по Российской Федерации, Туркменистану и Узбекистану. Все данные, представленные в ВОЗ и ECDC, были получены через Европейскую систему эпиднадзора (TESSy) – за исключением данных по Российской Федерации, которые были получены через публично доступные национальные источники (1).

^а Показатели для ЕС/ЕЭЗ и Запада скорректированы с учетом задержки отчетности (приложение 6). Расчетное число новых случаев ВИЧ-инфекции с учетом задержки отчетности составляет 27 055 и 23 976, соответственно.

^б Отсутствуют данные Бельгии, Германии, Швеции, по Российской Федерации, Туркменистану и Узбекистану.

- Приложение 7, в котором перечислены участвующие страны, части Региона и национальные учреждения.

Краткий обзор

Несмотря на то, что распространение ВИЧ-инфекции можно остановить с помощью эффективных мер общественного здравоохранения, число случаев передачи ВИЧ в Европейском регионе ВОЗ продолжает оставаться высоким. В 2017 г. в 50 из 53 государств-членов Европейского региона ВОЗ,¹ было зарегистрировано 159 420 новых случаев ВИЧ-инфекции, что соответствует 20,0 впервые диагностированным случаям на 100 000 населения (таблица А). В это число входят 55 018 новых диагностированных случаев, о которых 49 стран сообщили в единую систему эпиднадзора ECDC и Европейского регионального бюро ВОЗ, включая 25 353 случая в ЕС/ЕЭЗ, а информация о 104 402 новых диагностированных случаях в Российской Федерации была опубликована российским Федеральным

научно-методическим центром по профилактике и борьбе со СПИДом (1) (рис. А). В течение последних трех десятилетий в Европейском регионе ВОЗ было выявлено и зарегистрировано более 2,3 млн. случаев ВИЧ-инфекции, в том числе более 650 000 в странах ЕС/ЕЭЗ (рис. В).

Продолжая тенденцию последнего десятилетия, показатели ВИЧ-инфицирования и общее число впервые выявленных случаев ВИЧ-инфекции были самыми высокими на Востоке Региона (51,13 на 100 000 населения), более низкими на Западе и в странах ЕС/ЕЭЗ (6,9 и 6,2 на 100 000 населения, соответственно) и самыми низкими в Центре² (3,2 на 100 000 населения) (таблица А, рис. А). Преобладающие пути передачи ВИЧ различались в зависимости от географической зоны, указывая на неоднородность эпидемиологической ситуации по ВИЧ-инфекции в рамках Европы. Преобладающими путями передачи в странах ЕС/ЕЭЗ были половые контакты между мужчинами, а в восточной части Региона – гетеросексуальные контакты и употребление инъекционных наркотиков. Показатели зарегистрированной заболеваемости ВИЧ-инфекцией в рамках Региона были выше среди мужчин, чем среди женщин во всех возрастных группах, за исключением лиц моложе 15 лет.

Чуть более половины (53%) случаев ВИЧ-инфекции, диагностированных в Регионе в 2017 г., были выявлены на поздней стадии (количество лимфоцитов CD4 < 350 клеток/мм³ на момент постановки диагноза). Этот показатель был самым высоким в странах Востока (57%), несколько ниже в странах Центра

1 Отсутствуют данные по Германии (экспортирование данных за 2017 г. не могло быть выполнено из-за технических проблем), Туркменистану и Узбекистану. Лихтенштейн является членом ЕЭЗ, но не государством-членом ВОЗ, поэтому данные по Лихтенштейну включены в общие цифры по ЕС/ЕЭЗ, но не включены в общие цифры по Европейскому региону ВОЗ. Официальные данные по Российской Федерации отсутствуют, однако, соответствующие данные, полученные через общедоступные источники информации (1), были включены в сводные данные о количестве и частоте диагностированных случаев ВИЧ-инфекции и динамике этих показателей в Европейском регионе ВОЗ (см. раздел "HIV and AIDS diagnoses in the WHO European Region" [Диагностированные случаи ВИЧ-инфекции и СПИДа в Европейском регионе ВОЗ] (Глава 2)) и в восточной части Региона (см. Раздел "HIV and AIDS diagnoses in the East" [Диагностированные случаи ВИЧ-инфекции и СПИДа в восточной части Региона] (Глава 2)). Это позволяет получить более полную картину эпидемиологической ситуации по ВИЧ-инфекции в Европейском регионе ВОЗ. Другие региональные данные, представленные в этом докладе (в том числе в разбивке по возрасту и полу), основаны на данных из 49 стран, предоставивших данные в единую европейскую систему эпиднадзора за ВИЧ-инфекцией ECDC/ВОЗ.

2 Группировка стран Европейского региона ВОЗ на страны Запада (23 страны), Центра (15 стран) и Востока (15 стран) основана на эпидемиологических характеристиках и соответствует разделению стран в предыдущих обзорах, опубликованных EuroHIV в период с 1984 г. Подробнее см. приложение 1, рис. А1.1.

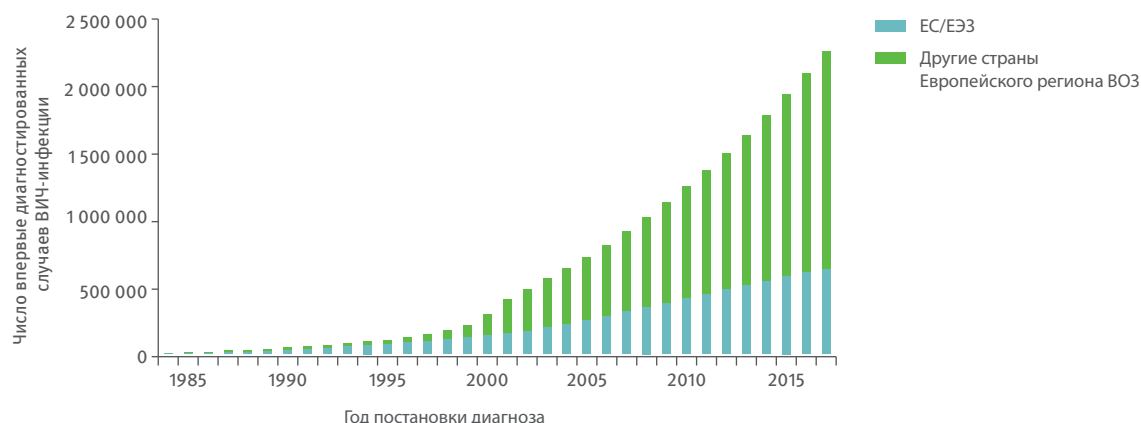
Рисунок А. Частота зарегистрированных новых случаев ВИЧ-инфекции на 100 000 населения, с разбивкой по году постановки диагноза, в ЕС/ЕЭЗ и в Европейском регионе ВОЗ, 1985–2017 гг. – с поправкой на задержки в предоставлении данных



■ В ближайшие годы эти показатели могут увеличиться из-за задержек в предоставлении данных.

Примечание: показатели заболеваемости для ЕС/ЕЭЗ и Европейского региона ВОЗ включают данные по всем странам, предоставившим отчетность за анализируемый год, включая Российскую Федерацию (1), а также расчетные показатели по Германии за 2017 г. Поэтому показатели за 2017 г., представленные здесь, немного ниже, чем показатели, приведенные в других разделах доклада.

Рисунок В. Совокупное число новых случаев ВИЧ-инфекции в ЕС/ЕЭЗ и других странах Европейского Региона ВОЗ, 1984–2017 гг.



(53%) и самым низким в странах Запада и ЕС/ЕЭЗ (49%) (таблица А, рис. С).

На основе выборки 26 147 новых случаев ВИЧ-инфекции, по которым имелась соответствующая информация (дата постановки диагноза и дата определения количества лимфоцитов CD4), была проведена оценка охвата диспансерным наблюдением. Этот показатель определяется как процент впервые выявленных ВИЧ-инфицированных пациентов, начавших получать медицинскую помощь в связи с ВИЧ-инфекцией в течение установленного периода времени. Среди ЛЖВ, взятых на диспансерное наблюдение, у 86% был документально зафиксирован факт взятия на диспансерное наблюдение в течение трех месяцев после постановки диагноза. Этот показатель был самым высоким в Центре (96%), несколько ниже в ЕС/ЕЭЗ (92%) и самым низким на Востоке (82%) (рис. D).

В 2017 г. в 47 государствах-членах³ Европейского региона ВОЗ было зарегистрировано 14 703 новых случая СПИДа и заболеваемость СПИДом по Региону, таким образом, составила 2,3 случая на 100 000 населения (см. таблицу А, а также таблицу 15 в разделе «Таблицы»). В 2017 г. в странах ЕС/ЕЭЗ было зарегистрировано 3130 случаев заболевания СПИДом, что составило 0,7 случая на 100 000 населения. В течение последнего десятилетия число случаев СПИДа продолжало последовательно снижаться на Западе и в ЕС/ЕЭЗ. На Востоке этот показатель почти удвоился в этот же период времени – в последнее время он начал стабилизироваться, а в период с 2012 по 2017 г. он даже снизился на 7% (см. рис. 1.12 и 2.4).

³ Отсутствуют данные по Бельгии, Германии, Российской Федерации, Туркменистану, Узбекистану и Швеции.

Рисунок С. Доля лиц с поздно поставленным диагнозом (число клеток CD4 < 350/мм³) с разбивкой по полу, возрасту и пути передачи, Европейский регион ВОЗ, 2017 г.

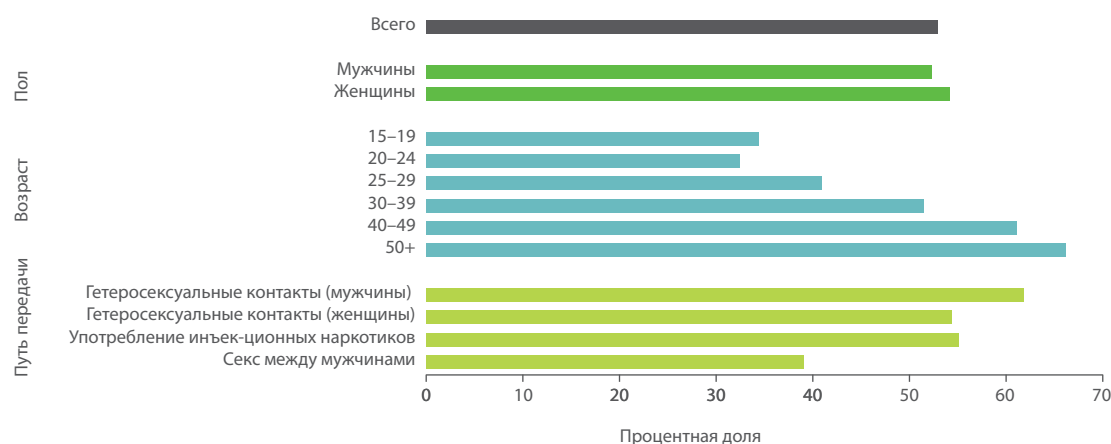
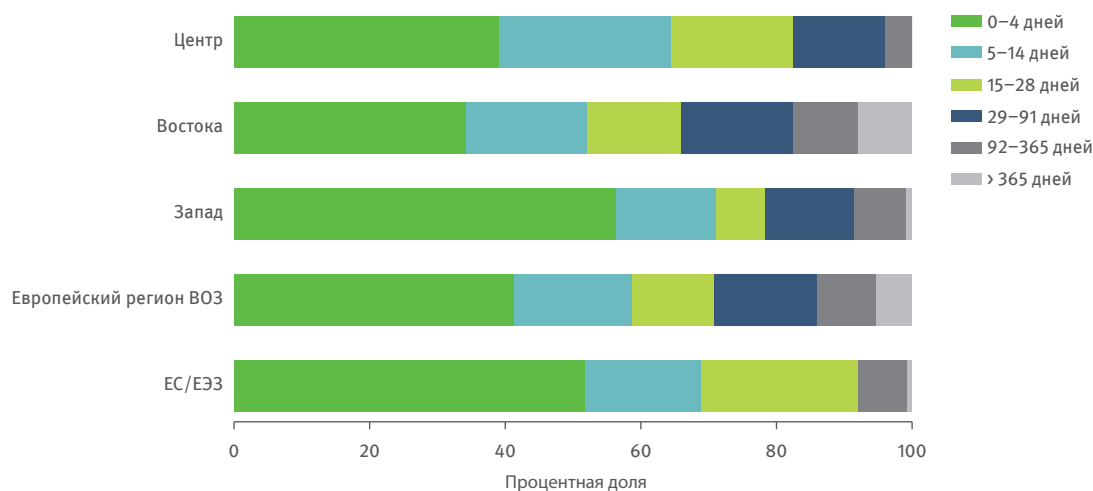


Рисунок D. Впервые выявленные ВИЧ-инфицированные пациенты, начавшие получать медицинскую помощь после постановки диагноза в ЕС/ЕЭЗ, в Европейском регионе ВОЗ, на Западе, в Центре и на Востоке, 2017 г. (n = 26 147)



Европейский союз и Европейская экономическая зона

В 2017 г. в 30 из 31 страны ЕС/ЕЭЗ диагноз ВИЧ-инфекции был установлен у 25 353 человек, что соответствует частоте, равной 6,2 на 100 000 населения с поправкой на задержку отчетности (таблица 1, приложение 6). В 2017 г. самые высокие показатели заболеваемости новыми случаями ВИЧ-инфекции на 100 000 населения были зарегистрированы в Латвии (18,8; 371 случай) и Эстонии (16,6; 219 случаев), а самые низкие – в Словакии (1,3; 70 случаев) и Словении (1,9; 39 случаев). Показатели заболеваемости были выше у мужчин (9,0 на 100 000 населения; таблица 2), чем у женщин (2,8 на 100 000 населения; таблица 3). В целом соотношение случаев ВИЧ-инфицирования у мужчин и женщин составило 3,1 (Таблица А). Это соотношение было самым высоким в Хорватии (20,2) и Словении (18,5) и оно превышало 1 во всех странах ЕС/ЕЭЗ (рис. 1.1). Преобладающим путем передачи ВИЧ-инфекции в этих странах были половые контакты между мужчинами.

У мужчин наблюдаются более высокие по возрасту показатели, чем у женщин, во всех возрастных группах, за исключением молодых людей в возрасте до 15 лет, у которых по возрасту показатели аналогичны (рис. 1.2). Самый высокий общий по возрасту показатель диагностированных случаев ВИЧ-инфекции наблюдался среди 25–29-летних (14,4 на 100 000 населения); в основном из-за самого высокого по возрасту показателя среди мужчин этой группы, равного 22,2 на 100 000 населения, в то время как самый высокий по возрасту показатель у женщин наблюдался в возрастной группе 30–39 лет (6,9 на 100 000 населения) (рис. 1.2).

Половые контакты между мужчинами остаются преобладающим путем передачи ВИЧ в ЕС/ЕЭЗ. В 2017 г. на этот путь пришлось 38% (9694) всех

впервые диагностированных случаев ВИЧ-инфекции и 50% таких случаев с известным путем заражения (таблица 4, таблица 8, рис. 1.5). Среди новых случаев ВИЧ-инфекции с известным путем заражения преобладали случаи инфицирования при половых контактах между мужчинами, на долю которых приходилось более 60% впервые поставленных диагнозов ВИЧ-инфекции в 10 странах (Австрия, Венгрия, Ирландия, Испания, Нидерланды, Польша, Словакия, Словения, Хорватия и Чешская Республика) (рис. 1.5).

Гетеросексуальные контакты были на втором месте в списке наиболее распространенных путей передачи ВИЧ-инфекции среди лиц, впервые диагностированных в 2017 г. (33%, с одинаковой частотой у мужчин и женщин). На заражение ВИЧ при употреблении инъекционных наркотиков приходится 4% впервые диагностированных случаев ВИЧ-инфекции. При этом в 24% случаев ВИЧ-инфицирования путь передачи ВИЧ был либо не указан, либо указан как неизвестный (таблица А). В 2017 г. в ЕС/ЕЭЗ 41% новых случаев ВИЧ-инфекции был диагностирован у мигрантов, родившихся за пределами страны, где был поставлен диагноз (рис. 1.6) (18% у мигрантов из стран Африки к югу от Сахары, 8% – из стран Латинской Америки и Карибского бассейна, 6% – из других стран Центральной и Восточной Европы, 4% – из других стран Западной Европы).

В период с 2008 по 2017 г. наметилась тенденция к незначительному снижению зарегистрированных новых случаев ВИЧ-инфекции. Эти показатели составляли 6,9 на 100 000 в начале этого периода, 6,5 в последующие годы и 6,2 в 2017 г. (см. таблицу 1, рис. 1.8 и приложения 1, 5 и 6). Хотя общая динамика показателей в ЕС/ЕЭЗ, по-видимому, несколько снизилась за последнее десятилетие, на национальном уровне наблюдаются противоположные тенденции. Несколько стран, включая Австрию, Бельгию, Данию, Испанию, Нидерланды, Норвегию, Соединенное Королевство и Эстонию, сообщили о снижении частоты впервые диагностированных случаев в

последние годы, даже с поправкой на задержку отчетности. С другой стороны, с 2008 г. с учетом задержки отчетности показатели диагностированных случаев ВИЧ-инфекции более чем удвоились в Болгарии, на Кипре и в Литве и увеличились более чем на 50% в Венгрии, Мальте, Польше и Чешской Республике (таблица 1, приложение 6).

Тенденции различаются по половому признаку и по возрастным группам. За период с 2008 г. по возрастные показатели снизились во всех возрастных группах, за исключением людей старше 50 лет. При этом среди 25–29-летних и 30–39-летних показатели были последовательно выше, чем в других группах на протяжении всего периода как у женщин, так и мужчин (рис. 1.9a и 1.9b).

Анализ динамики заболеваемости ВИЧ-инфекцией в разбивке по путям передачи показывает, что число впервые диагностированных случаев ВИЧ-инфекции среди мужчин, имеющих половые контакты с мужчинами (МСМ), в ЕС/ЕЭЗ в 2017 г. несколько сократилось по сравнению с предыдущими годами (рис. 1.11a). Хотя задержка отчетности может частично объяснить такое снижение, это снижение, по-видимому, может быть весьма выраженным в некоторых странах, включая Бельгию, Грецию, Испанию, Нидерланды и Соединенное Королевство. И наоборот, в таких странах, как Болгария, Ирландия, Кипр, Мальта, Польша и Румыния в последние годы имело место увеличение числа новых диагнозов ВИЧ-инфекции среди МСМ. Число случаев ВИЧ-инфицирования среди МСМ, родившихся за пределами страны, представляющей данные, увеличилось в период с 2008 по 2017 г., незначительно снизившись в период с 2015 по 2017 г., но не в такой степени, которая наблюдалась среди МСМ в странах ЕС/ЕЭЗ (рис. 1.12).

В течение последнего десятилетия число случаев гетеросексуальной передачи последовательно снижалось (рис. 1.11a), причем более выражено это происходило среди женщин и гетеросексуалов иностранного происхождения, чем среди мужчин и лиц коренного населения (рис. 1.11a, 1.12). Число диагностированных случаев ВИЧ-инфекции, связанных с употреблением инъекционных наркотиков, снизилось с 2008 г. как среди лиц иностранного происхождения, так и среди лиц коренного населения – за исключением локальных вспышек в 2011–2012 гг., повлиявших на тенденцию показателей ЕС/ЕЭЗ в этой группе, и менее широких локальных вспышек, отмеченных в этот период в некоторых странах (табл. 5, рис. 1.10, рис. 1.11a). Показатели передачи ВИЧ от матери ребенку, внутрибольничного инфицирования и инфицирования при переливании крови также последовательно снижались в период между 2008 и 2017 гг., и теперь они составляют менее 1% новых диагностированных случаев ВИЧ-инфекции (таблица 8). Частота случаев с неизвестным путем заражения увеличилась с 13% в 2008 г. до 24% в 2017 г.

От 25 стран была получена информация о количестве лимфоцитов CD4 на момент постановки диагноза ВИЧ-инфекции (таблица 14) у 18 282 взрослых и подростков (71% от общего количества впервые диагностированных случаев ВИЧ-инфекции). Как и в предыдущие годы, почти половина (49%) всех случаев с известным количеством лимфоцитов CD4 была диагностирована через несколько лет после инфицирования, когда число лимфоцитов CD4 было менее 350 клеток/мм³; при этом у 28% пациентов наблюдалась продвинутая стадия ВИЧ-инфекции (CD4 < 200 клеток/мм³).

При анализе количества лимфоцитов CD4 в зависимости от пути передачи ВИЧ процент людей, которым диагноз был поставлен через несколько лет после инфицирования (CD4 < 350 клеток/мм³), был самым высоким среди женщин (52%), людей среднего и пожилого возраста (56% в возрасте 40–49 лет и 63% в возрасте старше 50 лет), мужчин и женщин, инфицированных при гетеросексуальных половых контактах (63% и 53% соответственно), людей, которые были инфицированы ВИЧ при употреблении инъекционных наркотиков (52%), а также мигрантов из Южной и Юго-Восточной Азии (53%) и из стран Африки к югу от Сахары (56%) (табл. 14, рис. 1.7). Самый низкий процент случаев поздней диагностики, о которой свидетельствовал уровень лимфоцитов CD4 менее 350 клеток/мм³ на момент постановки диагноза, был зарегистрирован в более молодых возрастных группах (15–19 лет – 33%, 20–24 года – 32%), среди мужчин, которые заразились при половых контактах с мужчинами (37%), и среди мигрантов из других стран Западной Европы (34%). Хотя у многих людей диагноз ВИЧ-инфекции все еще ставится на поздней стадии, то есть через несколько лет после заражения ВИЧ, медианное количество лимфоцитов CD4 на момент постановки диагноза значительно увеличилось за последнее десятилетие – с 330 клеток/мм³ (95% доверительный интервал (ДИ): 322–338) в 2007 г. до 391 клеток/мм³ (95% ДИ: 381–400) в 2017 г. Группа с наибольшим медианным количеством лимфоцитов CD4 на момент постановки диагноза – это МСМ, среди которых этот показатель в 2017 г. был равен 452 клеткам/мм³ (рис. 1.13).

В 2017 г. в 28 странах ЕС/ЕЭЗ было диагностировано и зарегистрировано 3130 случаев СПИДа⁴, что составило 0,7 случая на 100 000 населения (таблица 15). В целом, 89% этих диагнозов были сделаны в течение 90 дней с момента постановки диагноза ВИЧ-инфекции, свидетельствуя о том, что большинство случаев СПИДа в ЕС/ЕЭЗ – это результат поздней диагностики ВИЧ-инфекции. Эта закономерность характерна для всех групп пациентов, сформированных в зависимости от пути заражения ВИЧ-инфекцией, за исключением людей, зараженных при употреблении инъекционных наркотиков, у которых в течение 90 дней с момента выявления ВИЧ-инфекции диагноз СПИДа ставится 59% пациентов (рис. 1.14). В 2017 г.

4 Все они были странами ЕС/ЕЭЗ, за исключением Швеции и Бельгии.

14 стран сообщили о выявлении туберкулеза (легочного и/или внелегочного) как СПИД-индикаторного заболевания в 14% новых случаев СПИДа (рис. 1.16). С середины 1990-х гг. в странах ЕС/ЕЭЗ наблюдается последовательное снижение числа новых случаев СПИДа и случаев смерти от СПИДа.

Европейский регион ВОЗ

В 2017 г. в Европейском регионе ВОЗ было зарегистрировано 159 420 новых случаев ВИЧ-инфекции (20,0 на 100 000 населения). Таким образом ежегодный рост количества новых диагнозов ВИЧ-инфекции продолжался, но более медленными темпами, чем прежде (рис. А). Этот рост обусловлен главным образом продолжающейся тенденцией к повышению заболеваемости ВИЧ-инфекцией на Востоке и в Центре, в то время как на Западе Региона частота новых случаев ВИЧ-инфекции снижается (рис. 2.3а).

Из 159 420 случаев ВИЧ-инфекции, впервые диагностированных в 2017 г., 82% были выявлены на Востоке (130 861), 14% на Западе (22 354) и 4% в Центре Региона (6205) (таблица А). В восточной части Региона также были зарегистрированы самые высокие показатели заболеваемости ВИЧ-инфекцией (51,1 на 100 000 населения), что значительно выше, чем на Западе (6,9 на 100 000, с поправкой на задержку отчетности⁵) и в Центре Региона (3,2 на 100 000) (таблица А).

Показатели новых диагностированных случаев ВИЧ-инфекции в 2017 г. существенно различались между странами Европейского региона ВОЗ. Самые высокие показатели на 100 000 населения наблюдались в Российской Федерации (71,1) (1), Украине⁶ (37,0), Беларуси (26,1) и Республике Молдова (20,6), а самые низкие – в Боснии и Герцеговине (0,3), Словакии (1,3) и Словении (1,9) (Таблица 1).

Для 49 стран, предоставивших данные в ECDC/ВОЗ за 2017 г.⁷ (Российская Федерация не включена), общий показатель заболеваемости для мужчин составил 11,9 (таблица 2), а для женщин – 5,1 на 100 000 населения (таблица 3). Наибольшая доля лиц с впервые диагностированной ВИЧ-инфекцией в 49 странах, предоставивших данные, приходится на возрастную группу 30–39 лет (36%), 9% – на молодежь в возрасте 15–24 года и 16% – на людей в возрасте 50 лет и старше на момент постановки диагноза. Соотношение случаев ВИЧ-инфекции у мужчин и женщин было равно 2,2 – с самым низким значением в восточной части Региона (1,6), более высоким значением в западной части Региона (2,9) и самым высоким значением в

центральной части Региона (5,8). Распределение случаев ВИЧ-инфекции по путям передачи является следующим: гетеросексуальные контакты – 49%, в том числе 11% у выходцев из стран с генерализованной эпидемией ВИЧ-инфекции; половые контакты между мужчинами – 21%; употребление инъекционных наркотиков – 13%; передача ВИЧ от матери ребенку – 0,7%. По 15% новых случаев ВИЧ-инфекции информация о пути передачи вируса неизвестна или отсутствует (Таблица А).

После того, как данные по Российской Федерации⁸ были объединены с данными, предоставленными другими 49 странами, среди людей с известным путем заражения распределение случаев было следующим: гетеросексуальные контакты – 56%, употребление инъекционных наркотиков – 30%, половые контакты между мужчинами – 14%, передача от матери ребенку – 0,6%.

На Востоке Региона (после того, как данные по Российской Федерации были объединены с данными, предоставленными 12 другими странами) среди людей с известным путем передачи ВИЧ распределение случаев было следующим: гетеросексуальные контакты – 59%, употребление инъекционных наркотиков – 37%, половые контакты между мужчинами – 3%, передача от матери ребенку – 0,5%. В 12 предоставивших данные государствах 68% ВИЧ-позитивных людей заразились при гетеросексуальных контактах, 24% – при употреблении инъекционных наркотиков и 4% – при половых контактах между мужчинами (таблицы 4–6, таблица 8). Основными путями передачи ВИЧ-инфекции в центральной части Региона были половые контакты между мужчинами (30%) и гетеросексуальные контакты (26%). У 40% пациентов с впервые диагностированной ВИЧ-инфекцией информация о пути заражения отсутствовала. Половые контакты между мужчинами были преобладающим путем передачи ВИЧ-инфекции в 12 из 15 стран центральной части Региона. В западной части Региона половые контакты между мужчинами остаются основным путем передачи ВИЧ-инфекции (40% случаев), за которым следуют гетеросексуальные контакты (34%, среди которых 41% приходился на выходцев из стран с генерализованной эпидемией ВИЧ-инфекции). Для 23% пациентов с впервые диагностированной ВИЧ-инфекцией информация о пути заражения отсутствовала.

За последние десять лет в 50 странах показатели впервые диагностированных случаев ВИЧ-инфекции увеличились на 37% (с 14,6 на 100 000 населения в 2008 г. (107 385 случаев), до 20,0 на 100 000 населения в 2017 г. (159 420 случаев) (рис. 2.3а). Увеличение происходило, главным образом, за счет сохранения восходящей тенденции в восточной части Региона, где этот показатель увеличился на 68% – с

⁵ Более подробная информация приведена в приложении 1 и приложении 6.

⁶ Без учета данных по Крыму, городу Севастополю и ряду территорий Украины, не контролируемых государством; с корректировкой знаменателя (численность населения), чтобы исключить Крым и город Севастополь; и за исключением детей, рожденных ВИЧ-инфицированными матерями, чей ВИЧ-статус еще не определен.

⁷ Никаких данных от Германии, Российской Федерации, Туркменистана и Узбекистана получено не было.

⁸ В Российской Федерации новые случаи ВИЧ-инфекции с известным путем заражения распределялись следующим образом: употребление инъекционных наркотиков и гетеросексуальные контакты – 49%, половые контакты между мужчинами – 1,5% и передача от матери ребенку – 0,8% (1).

30,4 на 100 000 (77 228 случаев) до 51,1 на 100 000 (130 861 случай). В 12 странах восточной части Региона (Российская Федерация не входит в их число), официально предоставляющих отчетность, этот показатель увеличился гораздо меньше (на 18%) – с 20,0 в 2008 г. до 23,6 в 2017 г. В период с 2006 по 2015 г. в центральной части Региона этот показатель увеличился на 121% (наибольшее относительное увеличение среди всех трех географических зон) – от 1,4 до 3,1 на 100 000 населения, в то время как в западной части Региона он снизился на 27% – от 9,4 до 6,9 на 100 000 населения (рис. 2.3b).

Анализ общей региональной тенденции для 49 стран, предоставивших отчеты в ECDC и ВОЗ (не включая Германию, Российскую Федерацию, Туркменистан и Узбекистан), показывает, что показатель для всего региона снизился на 5% с 8,8 в 2008 г. до 8,4 в 2017 г.

За период 2007–2017 гг. соответствующие данные о пути передачи инфекции поступили из 44 стран (рис. 2.4). На Востоке общий рост был обусловлен быстрым увеличением числа диагностированных случаев передачи ВИЧ-инфекции половым путем – на 69% для гетеросексуальной передачи и в восемь раз для передачи при половых контактах между мужчинами. Этот рост был значительно выше среди мужчин, зараженных при гетеросексуальных контактах (увеличение на 107%), чем среди женщин, зараженных таким же путем (увеличение на 21%). Частота случаев передачи инфекции при употреблении инъекционных наркотиков снизилась на 36%, хотя она продолжает оставаться на достаточно высоком уровне (рис. 2.10). В Центре в период с 2008 по 2017 г. число впервые выявленных ВИЧ-позитивных лиц, инфицированных при половых контактах между мужчинами, увеличилось почти втрое, и этот путь заражения преобладает в 11 из 15 стран; в то же время число случаев передачи ВИЧ-инфекции при гетеросексуальных контактах увеличилась на 43%. Уровень передачи ВИЧ при употреблении инъекционных наркотиков стабилизировался после вспышки, наблюдавшейся в Румынии в 2011–2013 гг., и повысился в целом на 43% по сравнению с уровнем 2008 г. (рис. 2.17). На Западе частота передачи ВИЧ при гетеросексуальных контактах продолжала последовательно снижаться и за 10-летний период в целом уменьшилась на 49% с еще более выраженным снижением среди гетеросексуальных женщин. В период с 2008 по 2017 г. частота заражения ВИЧ при употреблении инъекционных наркотиков снизилась на 57% и после пика в 2012 г., вызванного вспышкой в Греции, в настоящее время опять снижается. Число впервые диагностированных случаев передачи инфекции при половых контактах между мужчинами снизилось на 21% по сравнению с 2008 г. Это снижение не всегда можно объяснить задержкой отчетности. Число новых диагнозов ВИЧ-инфекции с неизвестным путем передачи увеличилось на Западе на 51% (рис. 2.19).

Поздняя диагностика ВИЧ-инфекции остается в Регионе проблемой, требующей неотложного решения. Среди впервые выявленных инфицированных

(старше 14 лет) с имеющейся информацией о количестве лимфоцитов CD4 на момент постановки диагноза, у чуть более половины (53%) диагноз был поставлен поздно; число лимфоцитов CD4 было менее 350 клеток/мм³, включая 32% пациентов с продвинутой стадией ВИЧ-инфекции (CD4 < 200 клеток/мм³). Процентная доля людей с впервые выявленной ВИЧ-инфекцией на поздней стадии (CD4 < 350/мм³) варьировалась в зависимости от пути передачи и возрастной группы, и была самой высокой у инфицированных при гетеросексуальных половых контактах (58%; 62% для мужчин и 54% для женщин) и при употреблении инъекционных наркотиков (55%) и самой низкой у мужчин, инфицированных при половых контактах с мужчинами (39%) (рис. С). Эта доля повышается с увеличением возраста на момент постановки диагноза: от 34% и 32% у людей в возрасте 15–19 и 20–24 лет до 66% у людей в возрасте 50 лет и старше. Каких-либо значительных различий в частоте случаев поздней диагностики у мужчин и женщин выявлено не было (соответственно 52% и 54%). Однако общий показатель для мужчин не позволяет увидеть различие в частоте случаев поздней диагностики у MSM (у которых, как правило, диагноз ставится раньше) и у гетеросексуальных мужчин (у которых, это, как правило, происходит позже). Показатели поздней диагностики различались и в рамках Региона – 57% на Востоке, 53% в Центре и 48% на Западе.

В 2017 г. в 47 государствах-членах Европейского региона ВОЗ⁹ было зарегистрировано 14 703 новых случая СПИДа, и заболеваемость СПИДом, таким образом, составила 2,3 случая на 100 000 населения. В целом 78% случаев СПИДа были диагностированы на Востоке, где показатель на 100 000 человек также был самым высоким (10,2), 17% на Западе (0,7 на 100 000) и 6% в Центре Региона (0,4 на 100 000) (таблица 15). Туберкулез был СПИД-индикаторным заболеванием у 20% людей с диагнозом СПИДа. В рамках Региона этот показатель варьировался следующим образом: 15% на Западе, 19% в Центре и 26% на Востоке. В период с 2008 по 2017 г. частота новых диагнозов СПИДа оставалась в основном стабильной. Однако в этот же период времени были отмечены очень большие различия в показателях в рамках Региона: их увеличение на 100% на Востоке (от 5,1 до 10,2 на 100 000) с небольшим снижением в период с 2012 по 2017 г., их стабилизация в Центре (0,4 на 100 000) и их устойчивое снижение на Западе (от 2,1 до 0,7 на 100 000) (рис. 2.5).

Выводы

Эпидемия ВИЧ-инфекции, которая затрагивает более 2 миллионов человек в Европейском регионе ВОЗ, особенно в восточной его части, остается одной из важнейших нерешенных проблем здравоохранения. В 2017 г. ВИЧ-инфекция была диагностирована почти у 160 000 человек или у 20,0 человек на 100 000 населения, продолжая сохраняться на самом высоком

⁹ Отсутствуют данные по Бельгии, Германии, Российской Федерации, Туркменистану, Узбекистану и Швеции.

уровне за всю историю регистрации случаев ВИЧ-инфицирования в течение года. Подавляющая доля случаев (82%) была диагностирована в восточной части Региона и 16% в странах ЕС/ЕЭЗ. На случаи ВИЧ-инфекции, впервые диагностированные в двух странах (Российская Федерация и Украина), приходится 75% всех случаев в Европейском регионе ВОЗ и 92% случаев на Востоке Региона. Новые данные эпиднадзора, представленные в этом обзоре, указывают, с одной стороны, на продолжающееся увеличение числа новых диагностированных случаев ВИЧ-инфекции в Европейском регионе и особенно в его восточной и центральной частях, несмотря на снижение темпов роста показателей за последнее десятилетие по сравнению с предыдущими. С другой стороны, данные подтверждают стабилизацию и даже снижение показателей в ряде стран ЕС/ЕЭЗ в последние годы.

Нынешние тенденции указывают на то, что Регион не сможет обеспечить достижение поставленных ВОЗ и Объединенной программой ООН по ВИЧ/СПИДу (ЮНЭЙДС) целевых показателей (2–4), намеченных в качестве вех на пути к достижению Цели устойчивого развития ООН (ЦУР) 3.3, которая призывает «положить конец эпидемиям СПИДа, туберкулеза, малярии и тропических болезней, которым не уделяется должного внимания, и обеспечить борьбу с гепатитом, заболеваниями, передаваемыми через воду, и другими инфекционными заболеваниями» (5). Расчетное количество новых инфекций, которое в настоящее время достигло исторического максимума, должно сократиться к 2020 г. на 78%, чтобы Регион смог достичь этой цели. Даже в ЕС/ЕЭЗ, где общая тенденция к повышению частоты новых случаев ВИЧ-инфекции несколько снизилась в последние годы, для достижения установленного целевого показателя расчетное количество новых случаев должно быть снижено на 74% к 2020 г. (рис. Е).

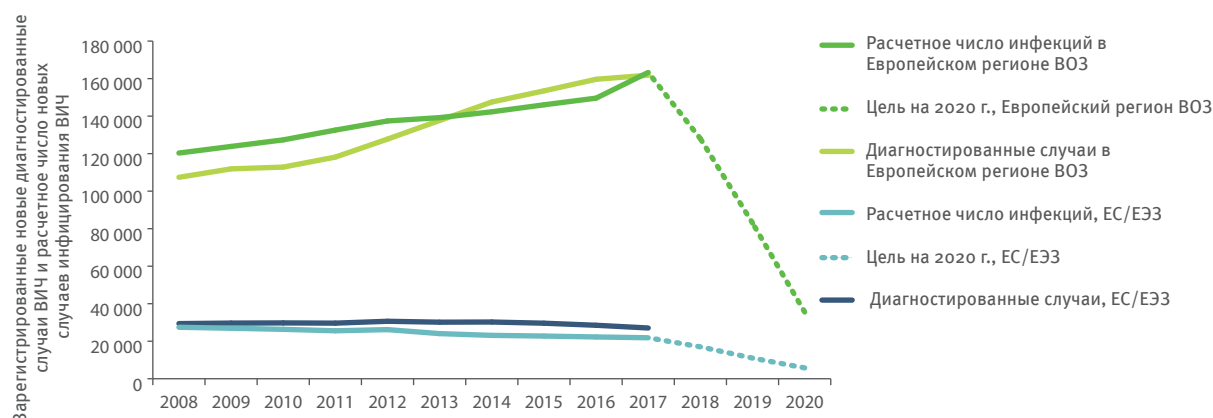
Хотя эпидемические модели и тенденции в разных странах Европы широко варьируются, в некоторых

частях Региона наблюдается устойчивое увеличение числа случаев вновь диагностированных инфекций, связанных с определенными путями передачи, например, среди мужчин, имеющих половые контакты с мужчинами, на Западе и в Центре и среди гетеросексуалов на Востоке Региона. В последние годы частота случаев передачи ВИЧ-инфекции при гетеросексуальных контактах существенно сократилась в ЕС/ЕЭЗ и на Западе, особенно среди женщин, равно как и частота случаев передачи ВИЧ-инфекции при половых контактах между мужчинами в отдельных странах ЕС/ЕЭЗ и на Западе. Во многих странах продолжала снижаться частота передачи ВИЧ при употреблении инъекционных наркотиков. Однако, в 2017 г. на этот путь заражения в восточной части Региона по-прежнему приходилось 37% новых зарегистрированных случаев с известным путем заражения.

У слишком большого числа людей во всем Европейском регионе диагноз ВИЧ-инфекции устанавливается на поздней стадии (53%), что повышает риск развития заболеваний, летального исхода и дальнейшего распространения ВИЧ-инфекции. Большое число диагностированных случаев СПИДа в восточной части Региона указывает на сохранение таких серьезных проблем, как поздняя диагностика ВИЧ-инфекции, отсроченное начало АРТ и низкий охват лечением. В то же время тенденция к стабилизации показателей заболеваемости СПИДом, наблюдаемая с 2012 года, может быть результатом растущего большинства стран Востока, которые в настоящее время проводят так называемую политику «Лечить всех», согласно которой АРТ предлагается всем людям, живущим с ВИЧ, независимо от стадии заболевания.

Каждый пятый человек, живущий с ВИЧ в Регионе, не знает о своей инфекции (6) (более подробные данные приведены в докладе UNAIDS (7)). Для уменьшения числа людей с поздно диагностированной ВИЧ-инфекцией или людей, которые не знают о том,

Рисунок Е. Расчетное число новых инфекций и новые диагностированные случаи в ЕС/ЕЭЗ и в Европейском регионе ВОЗ, 2007–2017 гг., и цель на 2020 г.



Источники: оценочное число новых случаев ВИЧ-инфекции – ЮНЭЙДС (7); новые диагностированные случаи ВИЧ-инфекции – авторы.

что они инфицированы, необходимы новые стратегии по расширению разнообразных и удобных для пользователей подходов к повышению доступности тестирования на ВИЧ. Руководство ВОЗ по само-тестированию на ВИЧ и информированию партнеров и руководство ECDC по комплексному тестированию на ВИЧ-инфекцию и гепатиты В и С содержат рекомендации о внедрении инновационных подходов, которые включают самотестирование и тестирование, проводимое поставщиками услуг, не имеющими медицинского образования (8–10). Однако результаты мониторинга политики в рамках Региона свидетельствуют о том, что во многих европейских странах внедрение таких подходов, как тестирование на уровне общин, самотестирование и оказание помощи в добровольном информировании полового партнера о наличии ВИЧ-инфекции, ограничено или вообще отсутствует (11). Услуги по тестированию на ВИЧ должны быть ориентированы на охват наиболее пострадавших групп населения с учетом местных эпидемиологических особенностей, быть адаптированы к конкретным потребностям этих групп, а также содействовать своевременному охвату таких групп диспансерным наблюдением, включающим такие составляющие, как профилактика, диагностика и лечение ВИЧ-инфекции и оказание помощи ЛЖВ. Это обеспечит раннюю диагностику и начало лечения и приведет к улучшению результатов лечения и снижению ВИЧ ассоциированной заболеваемости и смертности в поддержку достижения целей «90-90-90»¹⁰ и других региональных и глобальных целей (2–4).

В настоящее время уже имеются убедительные доказательства того, что раннее начало АРТ полезно как для здоровья человека, получающего лечение, так и для предотвращения дальнейшей передачи ВИЧ (12–17). Почти 90% стран Европейского региона ВОЗ имеют политику предоставления лечения независимо от количества лимфоцитов CD4 (6,18).

Меры по противодействию эпидемии ВИЧ-инфекции должны основываться на научных данных и они должны быть адаптированы к национальной и местной эпидемиологической ситуации. На основании данных эпиднадзора, приведенных в этом докладе, можно сделать следующие выводы:

- Что касается стран ЕС/ЕЭЗ и западной части Региона, то ввиду повышения частоты ВИЧ-инфицирования среди МСМ в некоторых странах и преобладания передачи ВИЧ среди МСМ существующие мероприятия по профилактике и борьбе с ВИЧ-инфекцией должны быть расширены и укреплены, оставаясь приоритетным направлением противодействия ВИЧ-инфекции. Страны со снижением показателей продемонстрировали влияние изменения культуры поведения, выражающееся в более частом прохождении тестов

мужчинами гомосексуальной ориентации из групп риска и немедленном обращении выявленных ВИЧ-позитивных лиц за медицинской помощью и антиретровирусным лечением (19). Многокомпонентные вмешательства и включение в пакет мероприятий по противодействию ВИЧ-инфекции таких новых стратегий, как доконтактная профилактика ВИЧ-инфекции, самотестирование и оказание помощи в информировании полового партнера о наличии ВИЧ-инфекции, могут способствовать преодолению этой восходящей тенденции (8,20,21). Увеличение в 2011–2012 гг. числа случаев ВИЧ-инфекции у людей, употребляющих инъекционные наркотики, и продолжающиеся местные вспышки в ряде стран (22–25) свидетельствует о необходимости поддерживать или расширять программы снижения вреда.

- В странах, расположенных в Центре, число новых случаев ВИЧ-инфекции в целом растет быстрее, чем в любой другой части Европы. В этой части Региона наблюдаются большие различия в частоте новых случаев ВИЧ-инфекции между мужчинами и женщинами. Среди мужчин, особенно среди МСМ, наблюдается тревожный рост этого показателя по сравнению с довольно стабильной динамикой среди женщин. Половые контакты между мужчинами являются преобладающим путем передачи ВИЧ-инфекции в 12 из 15 стран в центральной части Региона. Для улучшения ситуации помимо стратегий и практических мер, направленных на охват АРВ-терапией всех людей, живущих с ВИЧ, необходимо следующее: внедрение услуг доконтактной профилактики для групп высокого риска; тестирование на ВИЧ, проводимое работниками, не имеющими медицинского образования; экспресс-тестирование на ВИЧ; самотестирование на ВИЧ; и оказание профессиональной помощи в добровольном уведомлении полового партнера. Некоторые страны перешли на внутреннее финансирование мер противодействия ВИЧ-инфекции после прекращения финансирования со стороны Глобального фонда для борьбы со СПИДом, туберкулезом и малярией. Это создает проблемы устойчивости, особенно в отношении финансирования программ профилактики ВИЧ-инфекции. Для смягчения некоторых из этих проблем и предотвращения ускорения темпов распространения эпидемии необходимы более активная политическая воля и внимание наряду с более активным участием гражданского общества (26).
- В странах восточной части Региона существует настоятельная необходимость расширить масштабы смелых и научно-обоснованных мер и обеспечить предоставление гражданам эффективных, высококачественных и комплексных услуг с помощью хорошо функционирующих систем здравоохранения, одной из задач которых является улучшение социальных детерминант здоровья. Имеется необходимость в комплексных стратегиях комбинированной профилактики и во внедрении инновационных способов тестирования на ВИЧ,

¹⁰ Цели «90-90-90» заключаются в том, что 90% людей, живущих с ВИЧ, должны знать свой ВИЧ-статус, 90% людей с диагностированной ВИЧ-инфекцией должны получать лечение и у 90% людей, проходящих лечение, должна быть неопределяемая вирусная нагрузка.

уделяя особое внимание охвату ключевых групп населения. Это может быть достигнуто с помощью удобных для пользователя услуг по профилактике ВИЧ-инфекции и тестированию на ВИЧ, включая оказание профессиональной помощи в добровольном уведомлении полового партнера, доконтактную профилактику, тестирование на ВИЧ, проводимое обученными поставщиками услуг, не имеющими медицинского образования, и само-тестирование в соответствии с рекомендациями ВОЗ. Все эти виды услуг должны быть интегрированы в национальную политику и программы и внедрены в практику (4, 8, 9, 27). Участие общественных организаций в разработке и предоставлении лечебно-профилактических услуг имеет решающее значение для сокращения числа новых случаев инфицирования ВИЧ и увеличения числа людей, охваченных диспансерным наблюдением и получающих АРТ, с конечной целью снижения большого количества случаев СПИДа, в том числе с летальным исходом. Инновационные мероприятия по профилактике ВИЧ-инфекции должны быть направлены на снижение риска гетеросексуальной передачи, особенно среди пар, где один из партнеров склонен к поведению высокого риска (например, употребляет инъекционные наркотики) или в течение длительных периодов времени находится за границей. Большое количество новых диагностированных случаев ВИЧ-инфекции у людей, зараженных при употреблении инъекционных наркотиков, указывает на то, что основанная на фактических данных политика, направленная на ключевые группы населения и предусматривающая широкий охват людей, употребляющих инъекционные наркотики, программами снижения вреда, по-прежнему имеет решающее значение для эффективного противодействия ВИЧ-инфекции в восточной части Региона. После ряда призывов к принятию срочных мер, самым недавним из которых был призыв директора Европейского регионального бюро ВОЗ в ходе министерского диалога по вопросам политики в отношении ВИЧ-инфекции и сочетанных заболеваний в Восточной Европе и Центральной Азии (ВЕЦА) с участием 11 министров или заместителей министров здравоохранения из 11 стран ВЕЦА в июле 2018 г. (28), страны восточной части Региона активизировали усилия по осуществлению Плана действий сектора здравоохранения по борьбе с ВИЧ-инфекцией в Европейском регионе ВОЗ, в том числе путем разработки дорожных карт для ускорения усилий по достижению целевых показателей ЮНЭЙДС и стратегии ВОЗ Здоровье-2020 (2–4).

Для содействия обмену накопленным опытом в рамках Европейского региона ВОЗ национальным органам здравоохранения, национальным и международным экспертам и организациям гражданского общества, занимающимся оказанием услуг по профилактике, диагностике и лечению ВИЧ-инфекции, было предложено поделиться информацией о своих успешных мерах и программах по борьбе с ВИЧ-инфекцией.

Благодаря этой инициативе был подготовлен первый сборник примеров передовой практики в сфере противодействия ВИЧ-инфекции в 33 государствах-членах Европейского региона ВОЗ (29).

Надежные эпидемиологические данные имеют решающее значение для мониторинга ситуации и принятия службами общественного здравоохранения информированных решений относительно своевременных и эффективных мер противодействия эпидемии ВИЧ-инфекции в Европейском регионе ВОЗ. Постепенно увеличивается число стран, которые проводят расширенный эпиднадзор за ВИЧ-инфекцией и сообщают собранные эпидемиологические данные на европейский уровень. В 2017 г. 41 страна предоставила связанные данные о случаях ВИЧ-инфекции и СПИДа, что позволяет лучше понять клинический статус людей с диагностированной ВИЧ-инфекцией. Этот подход расширяет возможности долгосрочного мониторинга результатов оказания медицинской помощи при ВИЧ-инфекции, например, путем моделирования доли недиагностированных случаев инфекции и количественной оценки таких параметров, как охват людей с диагностированной ВИЧ-инфекцией диспансерным наблюдением и АРВ-терапией и подавление вирусной нагрузки. Он может также внести вклад в национальные и глобальные усилия по мониторингу достижения целей «90-90-90» и других глобальных и региональных целей.

Библиография¹¹

1. Справка «ВИЧ-инфекция в Российской Федерации на 31 декабря 2017 г.» Москва: Федеральный научно-методический центр по профилактике и борьбе со СПИДом, Российская Федерация, 2018 г.
2. Глобальная стратегия сектора здравоохранения по борьбе с ВИЧ-инфекцией на 2016-2021 годы: на пути к ликвидации СПИДа Женева: Всемирная организация здравоохранения; 2016 г. (<http://www.who.int/hiv/strategy2016-2021/ghss-hiv/ru/>)
3. Ambitious treatment targets: writing the final chapter of the AIDS epidemic. Geneva: UNAIDS; 2014 (http://www.unaids.org/sites/default/files/media_asset/JC2670_UNAIDS_Treatment_Targets_en.pdf).
4. План действий сектора здравоохранения по борьбе с ВИЧ-инфекцией в Европейском регионе ВОЗ (на англ. яз.). Копенгаген: Европейское региональное бюро ВОЗ, 2017 г. (<http://www.euro.who.int/en/health-topics/communicable-diseases/hiv/aids/publications/2017/action-plan-for-the-health-sector-response-to-hiv-in-the-who-european-region-2017>).
5. Цели устойчивого развития Организации Объединенных Наций. About the Sustainable Development Goals. Источник: Организация Объединенных Наций [веб-сайт]. Нью-Йорк: Организация Объединенных Наций, 2018 г. (<https://www.un.org/sustainabledevelopment/sustainable-development-goals/>).
6. Monitoring implementation of the Dublin Declaration on Partnership to fight HIV/AIDS in Europe and Central Asia: thematic report on the HIV continuum of care. Stockholm: ECDC; in press.
7. Annex on methods. In: Miles to go. Global AIDS update 2018. UNAIDS; 2018:255–64 (http://www.unaids.org/sites/default/files/media_asset/miles-to-go_en.pdf).
8. Руководство самотестированию на ВИЧ и информированию партнеров. Дополнение к сводному руководству по услугам тестирования на ВИЧ. Женева: Всемирная организация здравоохранения; 2017 г. (http://www.euro.who.int/__data/assets/pdf_file/0003/380496/hiv-self-testing-2018-rus.pdf?ua=1).
9. Сводное руководство по услугам тестирования на ВИЧ. Женева: Всемирная организация здравоохранения; 2016 г. (http://www.euro.who.int/__data/assets/pdf_file/0004/317659/Consolidated-guidelines-HIV-testing-services-2015-ru.pdf).
10. Public health guidance on HIV, hepatitis B and C testing in the EU/EEA. Stockholm: ECDC; 2018 (<https://ecdc.europa.eu/sites/portal/>)

¹¹ Все веб-ссылки, приведенные в этом обзоре и последующих главах, были доступны по состоянию на 12 ноября 2018 г.

- files/documents/HIV-hepatitis-B-and-C-testing-public-health-guidance.pdf).
11. HIV testing. Monitoring implementation of the Dublin Declaration on Partnership to fight HIV/AIDS in Europe and Central Asia: 2017 progress report. Stockholm: ECDC; 2017 (<https://ecdc.europa.eu/sites/portal/files/documents/HIV%20testing.pdf>).
 12. Сводное руководство по использованию антиретровирусных препаратов для лечения и профилактики ВИЧ-инфекции. Рекомендации с позиций общественного здравоохранения. Второе издание. Женева: Всемирная организация здравоохранения; 2016 г. (<http://www.who.int/hiv/pub/arv/arv-2016/ru/>)
 13. Руководство о времени назначения антиретровирусной терапии и по доконтактной профилактике ВИЧ-инфекции. Женева: Всемирная организация здравоохранения; 2016 г. (http://www.euro.who.int/_data/assets/pdf_file/0008/310301/Guideline-when-start-ATP-HIV-ru.pdf?ua=1)
 14. INSIGHT START Study Group. Initiation of antiretroviral therapy in early asymptomatic HIV infection. *N Engl J Med.* 2016;373(9):795–807.
 15. Cohen MS, Chen YQ, McCauley M, Gamble T, Hosseinipour MC, Kumarasamy N et al. Prevention of HIV-1 infection with early antiretroviral therapy. *N Engl J Med.* 2011;365(6):493–505.
 16. Guidelines version 9.0. October 2017. Brussels: European AIDS Clinical Society; 2017 (http://www.eacsociety.org/files/guidelines_9.0-english.pdf).
 17. Rodger A, Cambiano V, Bruun T, Vernazza P, Collins S, Corbelli CM et al. Risk of HIV transmission through condomless sex in gay couples with suppressive ART: the PARTNER2 study expanded results in gay men. In: *AIDS 2018. 22nd International AIDS Conference, Amsterdam, the Netherlands, 23–27 July 2018* [website]. Geneva: International AIDS Society; 2018 (Abstract WEA0104LB, 2018; <https://programme.aids2018.org/Abstract/Abstract/13470>).
 18. 2017 global AIDS monitoring (GAM). In: *AIDSinfo* [website]. New York (NY): UNAIDS; 2017 (www.AIDSinfoonline.org).
 19. Brown AE, Mohammed H, Ogaz D, Kirwan PD, Yung M, Nash SG. Fall in new HIV diagnoses among men who have sex with men (MSM) at selected London sexual health clinics since early 2015: testing or treatment or pre-exposure prophylaxis (PrEP)? *Euro Surveill.* 2017;22(25):pii=30553 (<https://doi.org/10.2807/1560-7917.ES.2017.22.25.30553>).
 20. HIV and STI prevention among men who have sex with men. ECDC guidance. Stockholm: ECDC; 2014 (<http://ecdc.europa.eu/en/publications/Publications/hiv-sti-prevention-among-men-who-have-sex-with-men-guidance.pdf>).
 21. McCormack S, Dunn DT, Desai M, Dolling DI, Gafos M, Gilson R et al. Pre-exposure prophylaxis to prevent the acquisition of HIV-1 infection (PROUD): effectiveness results from the pilot phase of a pragmatic open-label randomised trial. *Lancet* 2017;378:53–60.
 22. Hedrich D, Kalamara E, Sfetcu O, Pharris A, Noor A, Wiessing L et al. Human immunodeficiency virus among people who inject drugs: is risk increasing in Europe? *Euro Surveill.* 2013;18(48):pii=20648. (<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20648>).
 23. Giese C, Igoe D, Gibbons Z, Hurley C, Stokes S, McNamara S et al. Injection of new psychoactive substance snow blow associated with recently acquired HIV infections among homeless people who inject drugs in Dublin, Ireland, 2016. *Euro Surveill.* 2016;20(40):pii=30036. doi:<http://dx.doi.org/10.2807/1560-7917.ES.2016.20.40.30036>.
 24. Public Health England, Health Protection Scotland, Public Health Wales, Public Health Agency Northern Ireland. Shooting up: infections among people who inject drugs in the UK, 2016. London: Public Health England; 2017 (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/567231/Shooting_Up_2017_Update.pdf).
 25. HIV in people who inject drugs – joint technical mission to Luxembourg. Stockholm, Lisbon: ECDC/European Monitoring Centre for Drugs and Drug Addiction; 2018 (<http://sante.public.lu/fr/publications/h/hiv-joint-technical-mission/index.html>).
 26. Lost in transition. Three case studies of Global Fund withdrawal in south eastern Europe. New York (NY): Open Society Foundations; 2017 (<https://www.opensocietyfoundations.org/publications/lost-transition>).
 27. Consolidated guidelines on HIV prevention, diagnosis, treatment and care for key populations. 2016 update. Geneva: World Health Organization; 2016 (<https://www.who.int/hiv/pub/guidelines/keypopulations-2016/en/>).
 28. Министерский диалог по вопросам политики в отношении ВИЧ-инфекции и сочетанных заболеваний в Восточной Европе и Центральной Азии. Источник: Европейское региональное бюро ВОЗ [веб-сайт]. Копенгаген: Европейское региональное бюро ВОЗ, 2018 г. (<http://www.euro.who.int/ru/media-centre/events/events/2018/07/ministerial-policy-dialogue-on-hiv-and-related-comorbidities-in-eastern-europe-and-central-asia>).
 29. Сборник примеров передовой практики здравоохранения в сфере противодействия ВИЧ-инфекции в Европейском регионе ВОЗ. Копенгаген: Европейское региональное бюро ВОЗ, 2018 г. (<http://www.euro.who.int/en/publications/abstracts/compendium-of-good-practices-in-the-health-sector-response-to-hiv-in-the-who-european-region>).

1. HIV and AIDS in the EU/EEA

HIV diagnoses

In 2017, 25 353 new HIV diagnoses were reported in the 30 countries of the EU/EEA, with a rate of 6.2 per 100 000 when adjusted for reporting delay (Table 1, Annex 6). The highest rates were reported by Latvia (18.8; 371 cases) and Estonia (16.6; 219 cases), and the lowest by Slovakia (1.3; 70 cases) and Slovenia (1.9; 39 cases).

More men than women were diagnosed with HIV in 2017 (19 032 and 6178, respectively), resulting in an overall male–female ratio of 3 : 1 (Tables 2 and 3, Fig. 1.1). This ratio was highest in Croatia (20.2) and Slovenia (18.5) and was above 1 in all countries in the EU/EEA (Fig. 1.1). The predominant mode of transmission in these countries was sex between men. The overall rate of new diagnoses in men was 9.0 per 100 000 population (Table 2) and for women 2.8 per 100 000 population (Table 3).

Men had higher age-specific rates than women in all age groups except among people under 15 years, where age-specific rates were similar (Fig. 1.2). The highest overall age-specific rate of HIV diagnoses was observed among 25–29-year-olds (14.4 per 100 000 population), largely

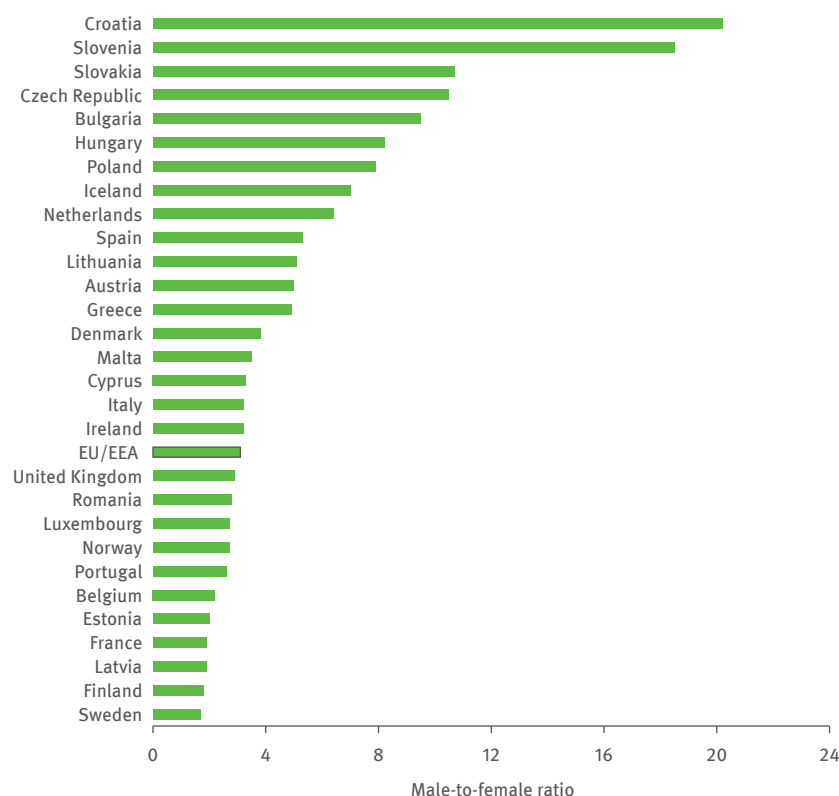
because this age group has the highest age-specific rate for men at 22.2 per 100 000 population, while rates for women were highest in the 30–39 age group (6.9 per 100 000 population) (Fig. 1.2).

The median age at diagnosis was lower for MSM (34 years) than for cases attributed to injecting drug use (37 years) or heterosexual transmission (39 years overall, 37 in women and 41 in men). The 30–39 age group accounted for most HIV diagnoses overall (32%) and in all transmission groups (Fig. 1.3). Thirty-four per cent of cases attributed to sex between men are diagnosed before age 30, while half (48%) of HIV infections due to sex between men and women are diagnosed at 40 years or above, and nearly one quarter (24%) at 50 or above.

Data on transmission mode provide information on the groups that are most affected by HIV in the EU/EEA (Tables 4–12(a,b), Fig. 1.5).

- Sex between men remains the predominant mode of HIV transmission reported in the EU/EEA, accounting for 38% (9694) of all new HIV diagnoses in 2017 and half (50%) of diagnoses where the route of transmission was known (Table 4, Table 8, Fig. 1.5). Sex between men was the most commonly reported route of transmission among those for whom route of

Fig. 1.1. Male-to-female ratio in new HIV diagnoses, by country, EU/EEA, 2017 (n = 25 210)



Note: Germany did not report data for 2017.

transmission was known, accounting for more than 60% of new HIV diagnoses in 10 countries (Austria, Croatia, the Czech Republic, Hungary, Ireland, the Netherlands, Poland, Slovakia, Slovenia and Spain) (Fig. 1.5).

- Sex between men and women is the second most commonly reported mode of transmission in the EU/EEA, accounting for 33% (8402) of HIV diagnoses and 44% of diagnoses where the route of transmission was known (Table 6, Table 8, Fig. 1.5). These proportions are divided roughly equally between men and women. Heterosexual transmission is the most commonly reported known mode of transmission in 10 EU/EEA countries (Estonia, Finland, France, Italy, Latvia, Luxembourg, Norway, Portugal, Romania and Sweden). More than one third (37%; 1982) of newly diagnosed cases due to heterosexual transmission are among migrants originating from countries with generalized HIV epidemics. The highest proportions of these were observed in Ireland (58%), France (52%) and Sweden (51%) (Table 10).
- Four per cent (929 cases) of new HIV diagnoses overall and 5% with known route of HIV transmission were attributed to injecting drug use (Table 5, Table 8, Fig. 1.5). Injecting drug use was the probable route

of transmission for one quarter or more of the cases reported in Lithuania (62%), Iceland (33%) and Latvia (33%) (Fig. 1.5).

- Of the remainder, 136 diagnoses (less than 1%) were reported as being due to vertical transmission during pregnancy, childbirth or breastfeeding (Table 7); 82 of these cases (60%) were born outside of the country in which the case was later reported. Fifty-nine diagnoses were reported to be due to contaminated transfusion of blood and its products, and 10 to hospital-acquired infections (Table 8). Nearly all of these nosocomial and transfusion-related cases were reported to have been acquired outside of the country where the case was reported (Table 12a).
- Transmission mode was reported as unknown for 6123 diagnoses (24%), with wide variation among countries: less than 5% of diagnoses were reported as unknown in Bulgaria, Croatia, Cyprus, the Czech Republic, Norway, Portugal and Romania, and over 60% in Iceland and Poland (Table 8).

Young people aged 15 to 24 years comprised 12% of the EU/EEA population and 12% of HIV diagnoses in 2017. Romania and Hungary reported more than 15% of their HIV diagnoses in this age group (Fig. 1.4). Thirty-nine

Fig. 1.2. Age- and gender-specific rates of new HIV diagnoses per 100 000 population, EU/EEA, 2017 (n = 25 210)

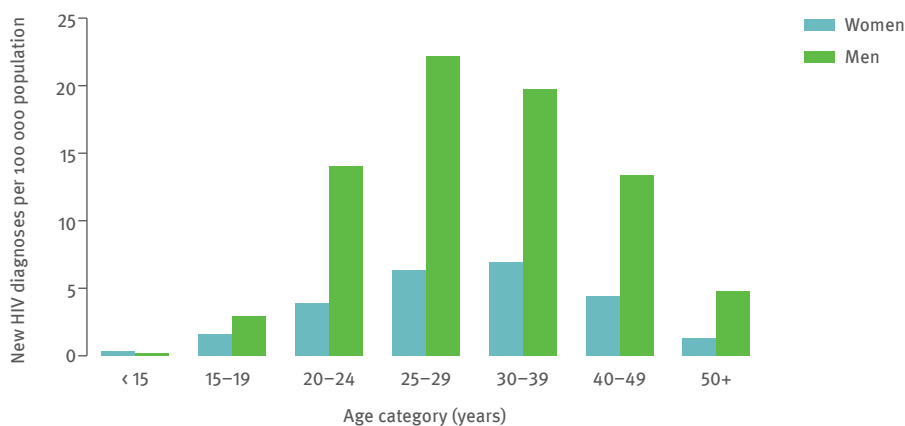
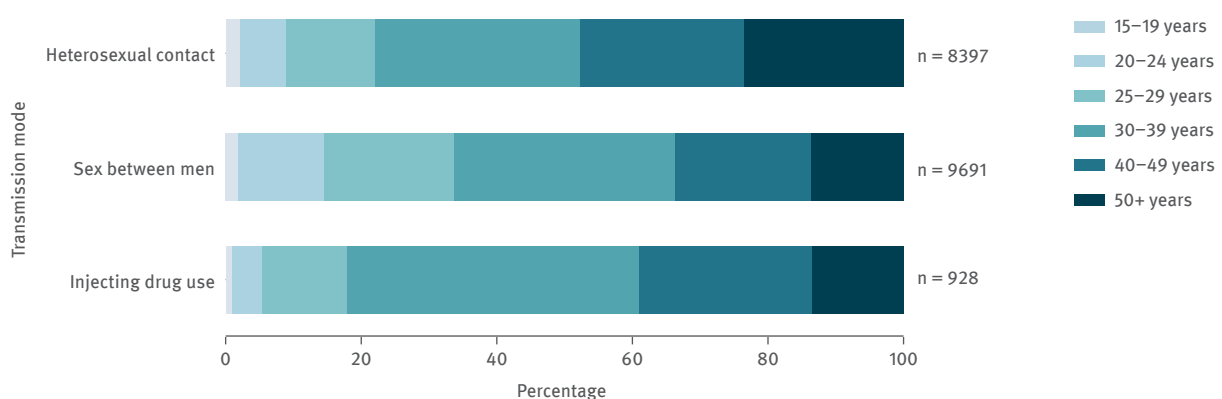


Fig. 1.3. New HIV diagnoses, by age group (in years) and transmission mode, EU/EEA, 2017



per cent of the EU/EEA population is considered to consist of older adults (50 years and above), who contributed 19% of new HIV diagnoses reported in 2017. In the Netherlands, Portugal and Slovenia, older adults comprised more than 25% of those newly diagnosed with HIV (Table 9).

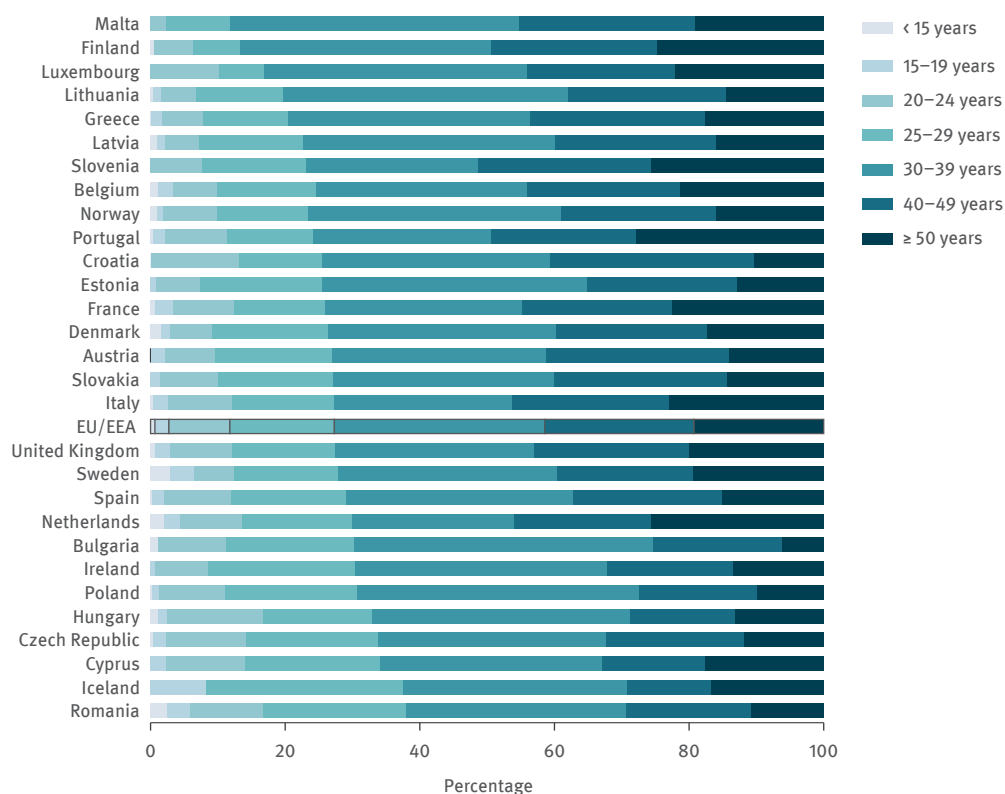
Twenty-eight EU/EEA countries provided information on the country of birth, country of nationality or region of origin for 21 184 (84%) HIV diagnoses in 2017 (Fig. 1.6). In the EU/EEA, 8711 diagnoses (41% of those with known information on region of origin) were made among people originating from outside of the reporting country. Of these, 3723 (18% of those with known information on region of origin), irrespective of transmission mode, were among people originating from countries with generalized HIV epidemics (Fig. 1.6, Table 11). An additional 23% of new diagnoses with known region of origin (4988 cases) were among people born outside of the reporting country, but did not originate from a country experiencing a generalized epidemic, including 8% from countries in Latin America and the Caribbean (1709 cases), 6% from other countries in central and eastern Europe (1310 cases) and 4% from other countries in western Europe (828 cases). Countries with at least half of their new HIV diagnoses among people originating from outside of the reporting country were Belgium, Denmark, Cyprus,

Finland, France, Iceland, Ireland, Luxembourg, Malta, Norway, Sweden and the United Kingdom.

About 4% of people diagnosed with HIV in the EU/EEA in 2017 were reported to have been previously diagnosed with HIV in another country prior to their 2017 diagnosis in the reporting country (data not shown). The proportion of 2017 diagnoses that had previously been diagnosed was higher than the EU/EEA average in some countries, including Cyprus (29%), the Czech Republic (13%), Denmark (41%), Iceland (29%), Ireland (34%), France (7%), Malta (33%), Norway (24%) and Sweden (34%).

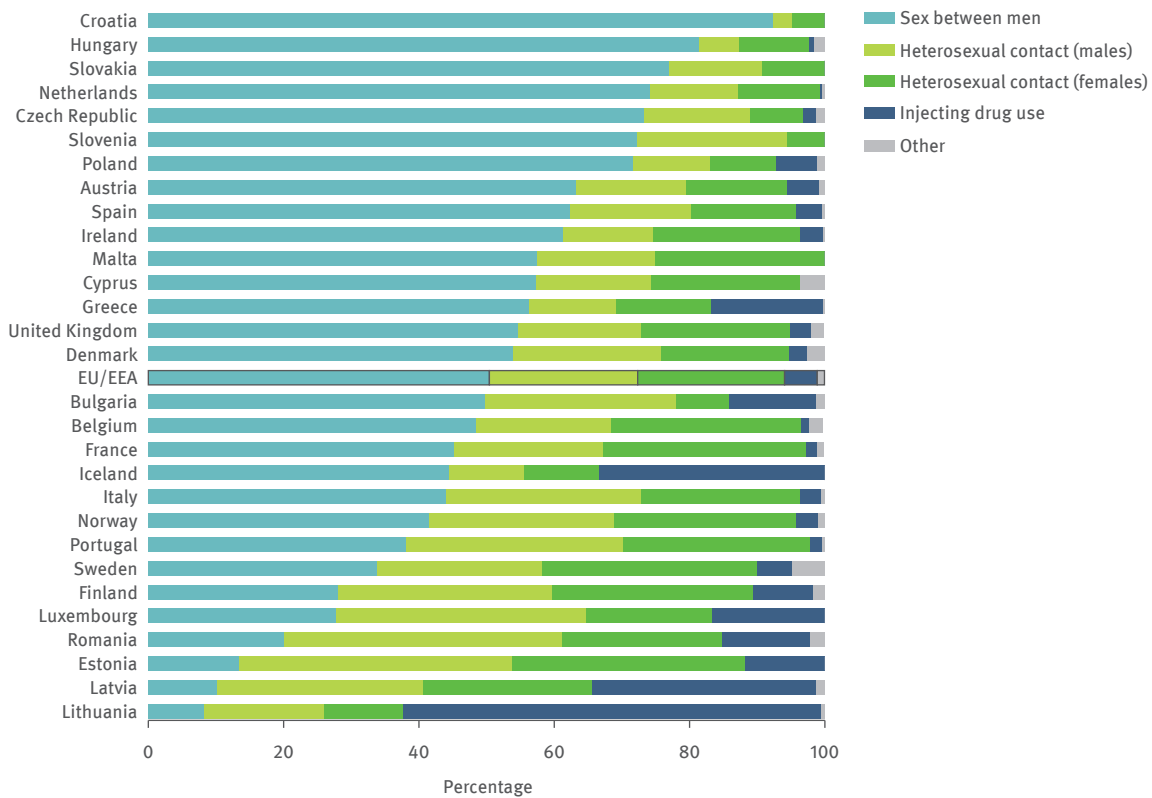
Information on CD4 cell count at the time of HIV diagnosis was provided by 25 countries (Table 14) for 16 585 (72%) adults and adolescents diagnosed in those countries. All countries reporting such data were able to provide CD4 cell counts for 50% or more of their reported cases, apart from Estonia, Lithuania and France, which provided data for 36%, 40% and 45% of new diagnoses, respectively. Nearly half (49%) of all cases with a CD4 cell count available were considered to have been diagnosed several years after being infected, with a count of below 350 cells per mm³, including 28% of cases considered to have advanced HIV infection (CD4 < 200 cells/mm³). The proportion of those diagnosed late, with a CD4 count below 350 cells per mm³, was above 60%

Fig. 1.4. Percentage of new HIV diagnoses, by country and age group, EU/EEA, 2017 (n = 25 255)



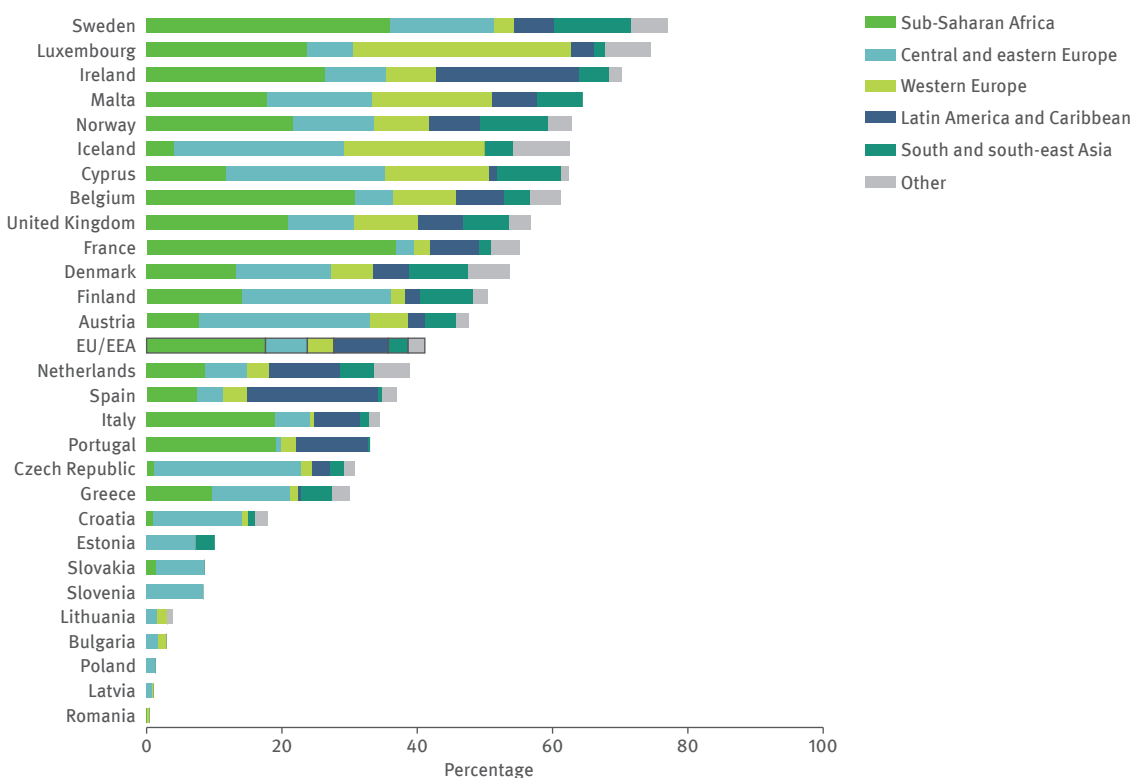
Note: Germany did not report data for 2017, and no cases were reported by Liechtenstein.

Fig. 1.5. Percentage of new HIV diagnoses with known mode of transmission, by transmission route and country, EU/EEA, 2017 (n = 19 230)



Note: Germany did not report data for 2017, and no cases were reported by Liechtenstein; unknown route of transmission is excluded from proportions presented here.

Fig. 1.6. Percentage of new HIV diagnoses among migrants out of all reported cases with known information on region of origin, by country of report, EU/EEA, 2017 (n = 21 184)



Note: Germany did not report data for 2017, and no cases were reported among people born abroad in Hungary and Liechtenstein.

among cases with known CD4 cell count at diagnosis in Lithuania (66%) and Latvia (62%).

Among all cases diagnosed where a CD4 cell count was available, 20% (3349) had a CD4 cell count of between 350 and 500 cells per mm³ and 32% (5277) of above 500 cells per mm³ (data not shown), indicating more recent infection. When analysing CD4 cell count by transmission mode, higher proportions of people presenting at a later stage of HIV infection (CD4 < 350 cells/mm³) were observed among women (52%), older adults (56% in 40–49-year-olds and 63% in people over 50), men and women infected by heterosexual sex (63% and 53%, respectively), people who acquired HIV through injecting drug use (52%), and migrants from south and south-east Asia (53%) and sub-Saharan Africa (56%) (Fig. 1.7, Table 14).

The lowest proportions of late diagnosis, indicated by CD4 counts below 350 cells per mm³ at diagnosis, were observed among younger age groups (33% of 15–19-year-olds and 32% of those aged 20–24 years), men who acquired HIV through sex with another man (37%) and migrants from other western European countries (34%).

CD4 count and date were used as a proxy for linkage to care and, among cases where CD4 data were reported and it was possible to calculate linkage to care, 92% of

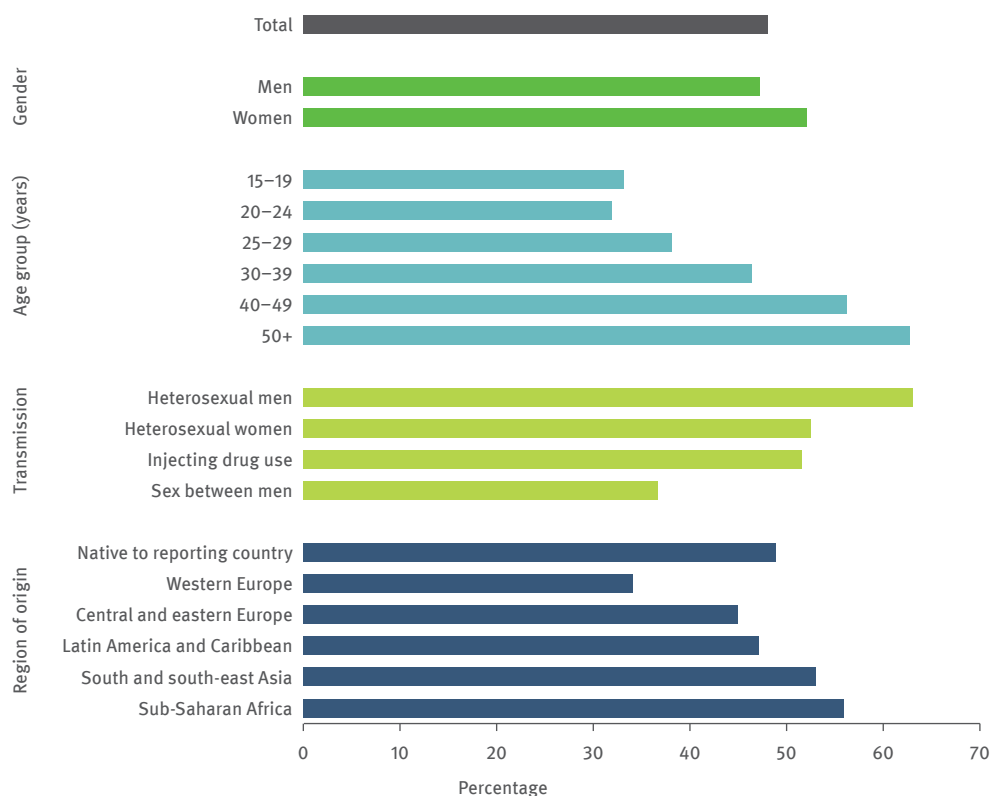
those diagnosed in 2017 were linked to care within three months of HIV diagnosis.

Trends in HIV diagnoses

The trend in reported HIV diagnoses for the period 2008–2017 has declined slightly in recent years. Rates in the earlier part of this period were 6.9 per 100 000, decreasing slightly to 6.5 in more recent years, and 6.2 in 2017 (27 055 cases when adjusted for reporting delay; see: Table 1, Fig. 1.8, and Annexes 1 (for reporting delay adjustment methods), 5 (for country comments) and 6 (results)).

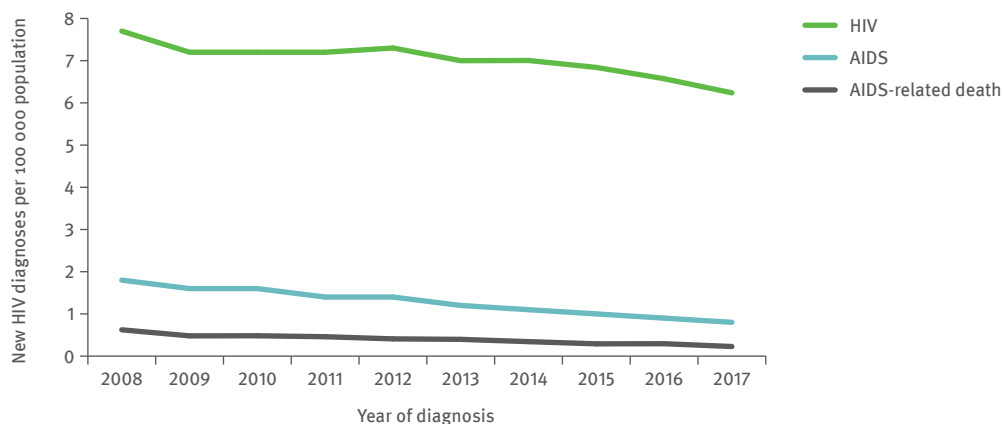
While the overall EU/EEA trend appears to have declined slightly during the last decade, trends at national level are contrasting. Several countries, including Austria, Belgium, Denmark, Estonia, the Netherlands, Norway, Spain and the United Kingdom, have reported a decline in rates of new diagnoses, even after adjusting for reporting delay. Conversely, since 2008, and taking reporting delay into account, rates of HIV diagnoses have more than doubled in Bulgaria, Cyprus and Lithuania, and have increased by over 50% in the Czech Republic, Hungary, Malta and Poland (Table 1, Annex 6). Reporting delay affects some countries more than others: decreases in the rates of new HIV diagnoses may therefore be overestimated and increases in rates underestimated.

Fig. 1.7. Percentage of people diagnosed late (CD4 cell count < 350 per mm³) by demographic, EU/EEA, 2017



Note: cases with unknown CD4 count are excluded from proportions presented here.

Fig. 1.8. People diagnosed with HIV, AIDS and deaths reported per 100 000 population, EU/EEA, 2008–2017



Note: rates exclude countries not reporting consistently over the period: Belgium and Sweden (AIDS and AIDS-deaths), Italy (AIDS deaths) and Germany (AIDS, AIDS deaths and HIV).

Trends differ by gender and age group. Age-specific rates have declined since 2008 in all age groups except for adults over 50 years, with rates among 25–29-year-olds and 30–39-year-olds consistently higher than other groups throughout the period in both women and men. Age-specific rates in women have declined more markedly in women under 40 years, while rates among women 40 years and older have been stable. Among men, rates among 20–29-year-olds peaked in 2015 and have declined since. Rates in men aged 30–49 years have declined during the period. Rates in males aged 15–19 years and men over 50 have remained stable (Fig. 1.9a, 1.9b).

The median age at HIV diagnosis increased from 35 years in 2008 to 37 years in 2017 overall (from 33 to 37 years among women and 36 to 37 in men). A larger proportion of diagnoses is being reported in older age groups; 13% of people diagnosed in 2008 were over 50 years at HIV diagnosis, rising to 19% in 2017. In women, 11% of diagnoses in 2007 and 19% in 2017 were made in those aged 50 years or above, while in men, 14% of diagnoses in

2008 and 19% in 2017 were made in men of 50 or above (data not shown).

HIV diagnoses among people born outside of the reporting country comprised 44% of all new diagnoses in 2008, decreasing slightly to 37% in 2013 and increasing to 41% in 2017 (Fig. 1.10). New diagnoses among people originating from sub-Saharan Africa decreased from 24% of all new diagnoses in 2008 to 18% in 2017, while new diagnoses among people originating from other countries in central and eastern Europe increased from 4% to 6% of all new diagnoses. The proportion of people originating from other regions has remained stable.

Since 2008, most EU/EEA countries have consistently reported data on transmission mode. Data from Estonia and Poland were excluded from EU/EEA presentation of trends (Fig. 1.11a, 1.11b, 1.12), as more than 50% of the data on transmission mode were missing. Data from Spain and Italy were also excluded because coverage by the surveillance system has been gradually expanding on a national basis over the last decade. Germany did not report data for 2017. Data on transmission mode

Fig. 1.9a. Age-specific trends in new HIV diagnoses in men, 2008–2017

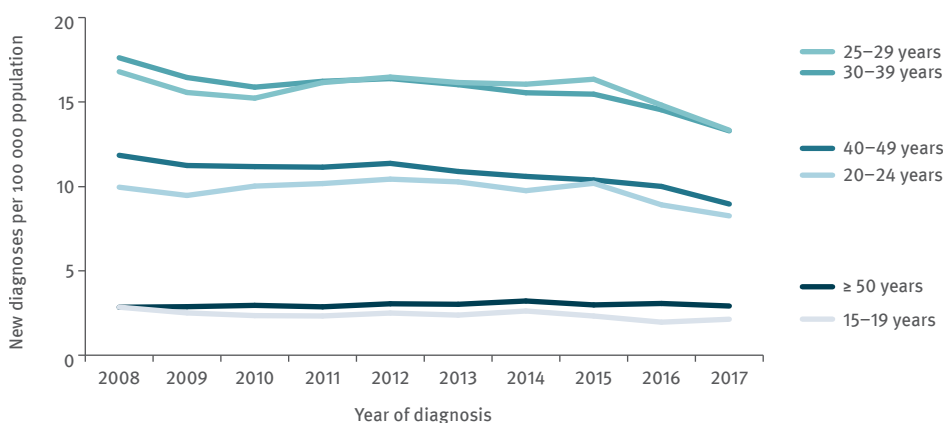


Fig. 1.9b. Age-specific trends in new HIV diagnoses in women, 2008–2017

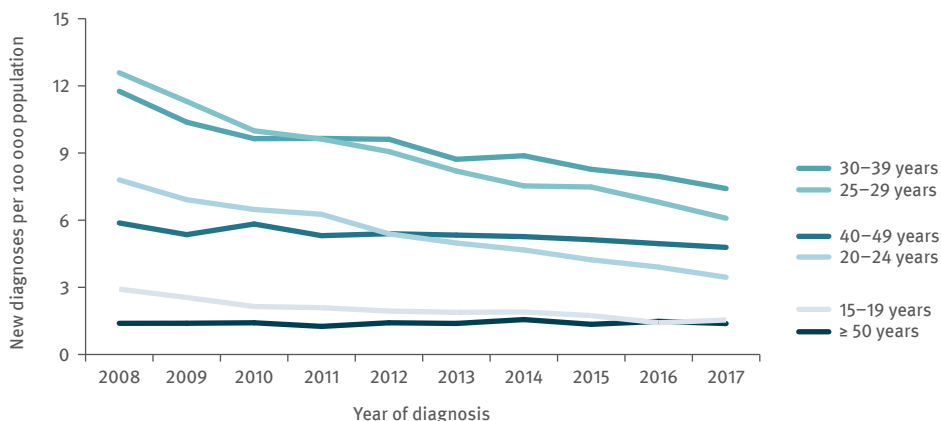
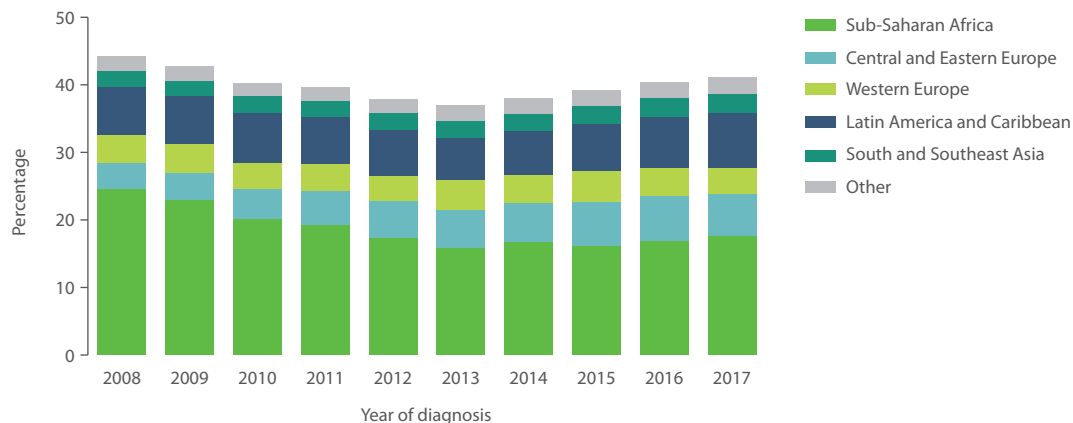
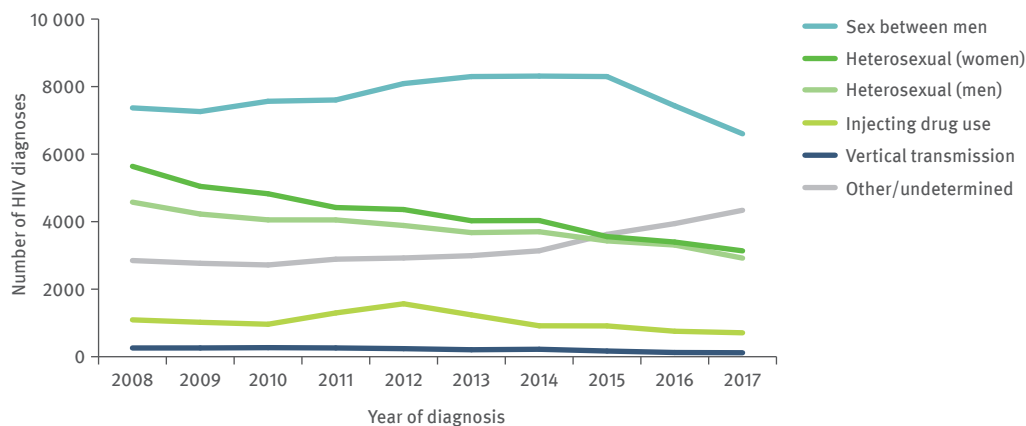


Fig. 1.10. Percentage of new diagnoses among people born abroad, by year of diagnosis and region of origin, EU/EEA, 2008–2017



Note: data from 27 EU/EEA countries included. HIV diagnoses reported by Estonia and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Italy and Spain excluded due to increasing national coverage during the period

Fig. 1.11a. HIV diagnoses, by year of diagnosis and transmission mode, adjusted for reporting delay, EU/EEA, 2008–2017



Note: data from 26 EU/EEA countries included. HIV diagnoses reported by Estonia and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Germany, Italy and Spain excluded due to incomplete reporting during a portion of the period.

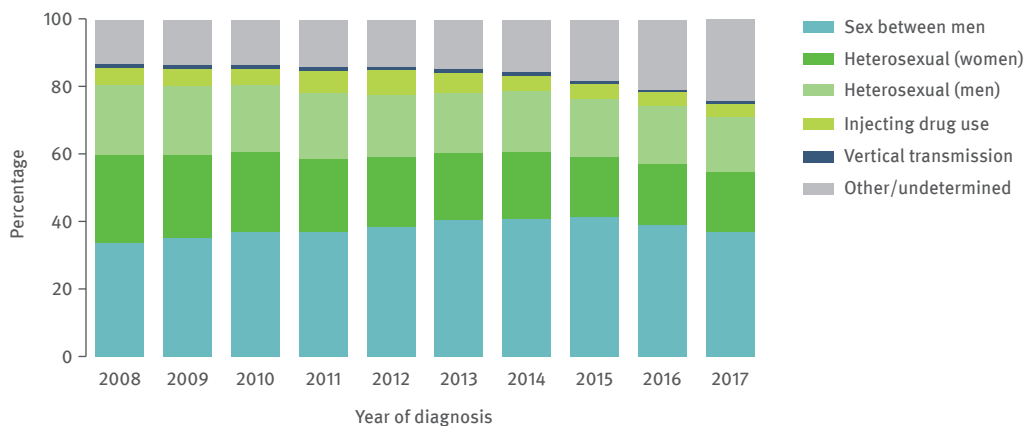
from those countries consistently reporting indicate the trends below.

- The proportion of all HIV diagnoses attributed to sex between men increased from 34% of cases in 2008 to 41% in 2014 and 2015, then decreased to 37% in 2017. The number of HIV diagnoses reported among MSM in countries reporting consistently increased from 7369 cases in 2008 and peaked at 8297 in 2013. Although fewer cases were reported in 2017 (6294), reporting delay probably plays a partial role in this decline. Most of the decline appears to be due to fewer diagnoses among MSM in Belgium, Greece, the Netherlands, Spain and the United Kingdom. Increases were observed in many EU/EEA countries between 2008 and 2017 (Table 4), with substantial increases noted in Bulgaria, Cyprus, Ireland, Malta, Poland and Romania in recent years. Cases attributed to MSM born outside of the reporting country increased over the period, declining slightly between 2015 and 2017 but not to

the same extent as observed in EU/EEA-native MSM (Fig. 1.12).

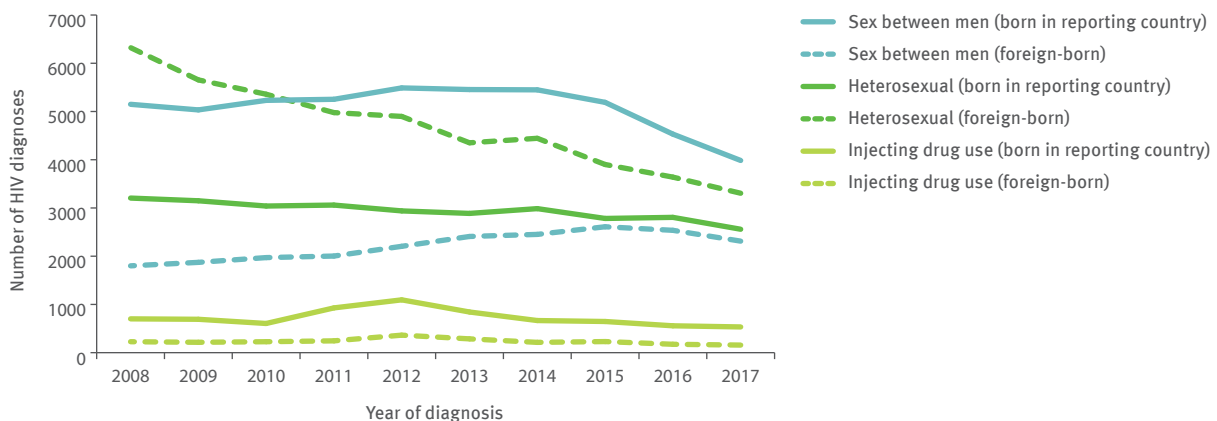
- The number of heterosexually acquired cases decreased steadily in women, from 5638 in 2008 to 2949 in 2017, and in men, from 4577 to 2747 during the same period (Fig. 1.11a). The proportion of all HIV diagnoses attributed to heterosexually acquired infection in women decreased from 26% of cases in 2008 to 17% in 2017, and to heterosexually acquired infection in men from 21% to 16% over the same period (Fig. 1.11b). The number of cases among women and foreign-born heterosexuals between 2008 and 2017 decreased at a greater rate than cases among men and non-foreign-born people (Fig. 1.11a, 1.12). The decline in foreign-born cases is mainly due to sharp decreases among migrants originating from countries with generalized HIV epidemics (6291 in 2008 and 3723 in 2017). Despite the overall decline in heterosexually

Fig. 1.11b. Percentage of HIV diagnoses, by year of diagnosis and transmission mode, adjusted for reporting delay, EU/EEA, 2008–2017



Note: data from 26 EU/EEA countries included. HIV diagnoses reported by Estonia and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Germany, Italy and Spain excluded due to incomplete reporting during a portion of the period.

Fig. 1.12. New HIV diagnoses, by year of diagnosis, transmission and migration status, EU/EEA, 2008–2017



Note: data from 26 EU/EEA countries included. HIV diagnoses reported by Estonia and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Germany, Italy and Spain excluded due to incomplete reporting during a portion of the period.

acquired cases during this period, new diagnoses in Estonia and Lithuania increased substantially.

- The number of HIV diagnoses reported among people who inject drugs has also declined since 2007 (from 1091 cases to 689) in both foreign-born and non-foreign-born people (Fig. 1.11a, 1.12). A temporary increase in overall numbers for the EU/EEA was observed in 2011 and 2012 due to localized outbreaks reported in Greece and Romania, but the overall downward trend in the number of reported cases continued for the EU/EEA in 2017 (Table 5). Although diagnoses attributed to injecting drug use nearly tripled between 2015 and 2017 in Lithuania, other countries, such as Austria, Belgium, Estonia, France, Italy, Portugal and Spain, have seen a sharp decrease in the rate of HIV diagnoses due to injecting drug use over the last decade.
- The number of diagnoses reported to be due to vertical transmission of HIV decreased from 258 in 2008 to 115 in 2017 (Fig. 1.11a). Throughout the period, between two thirds and three quarters of these cases originated from outside the reporting country.
- The number of HIV diagnoses reported to be due to nosocomial infection has remained stable over the period, with 12 cases in 2008 and nine in 2017. The number of cases reported to be due to contaminated transfusion of blood and its products decreased from 78 in 2008 to 48 in 2017. A large and growing proportion of these cases was among people who had migrated to the EU/EEA and were later diagnosed in the reporting country (50% in 2008 to 77% in 2017 among nosocomial cases, and 78% in 2008 to 86% in 2017 among transfusion-related cases).
- The number of cases with an unknown mode of transmission increased from 2848 in 2008 to 4178 in 2017 (13% of cases in 2008 and 24% in 2017). This increase is affected by reporting delay and will probably decrease slightly in future reporting.

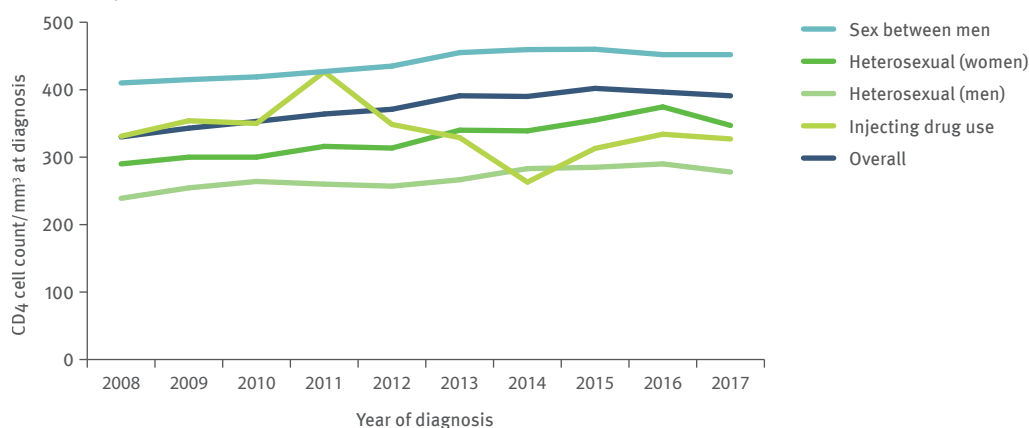
- Reporting delays differ significantly among transmission categories for some countries. When standardized adjustments for reporting delay are introduced, they increase the number of reported HIV cases in all transmission categories by between 8% and 19%, depending on the category. Fig. 1.9a, 1.11a and 1.12 show these adjusted trends.
- While many people are still diagnosed late, several years after being infected with HIV, the median CD4 cell count at HIV diagnosis has increased significantly over the past decade, from 330 (95% CI: 322–338) cells/mm³ in 2008 to 391 (95% CI: 381–400) cells/mm³ in 2017. The group with the highest median CD4 cell count at diagnosis is MSM, with 452 cells/mm³ in 2017. This has also improved over the last decade, however, indicating earlier diagnosis (Fig. 1.13). Median CD4 count at diagnosis was lower in cases attributed to heterosexual transmission but similarly increased over the period (from 290 cells/mm³ in 2008 to 347 cells/mm³ in 2017 in women, and 239 cells/mm³ in 2008 to 278 cells/mm³ in 2017 in men).

AIDS cases, morbidity and mortality

Despite improvements in early diagnosis of HIV, 3130 diagnoses of AIDS were reported by 28 EU/EEA countries¹² in 2017, giving a rate of 0.7 cases per 100 000 population (Table 15). The highest rate was reported by Latvia (6.0 per 100 000 population; 118 cases). Overall, 89% of AIDS diagnoses were made within 90 days of the HIV diagnosis. The only group where more than half of AIDS cases (59%) occurred after the immediate HIV diagnosis was among people whose HIV infection was attributed to injecting drug use (Fig. 1.14).

¹² This included all EU/EEA countries except Belgium, Germany and Sweden.

Fig. 1.13. Median CD4 cell count per mm³ at HIV diagnosis, by year of diagnosis and transmission group, EU/EEA, 2008–2017



Note: excludes countries with > 60% incomplete data on CD4 cell count during any year over the period (Bulgaria, Croatia, Estonia, Germany, Hungary, Italy, Ireland, Latvia, Lithuania, Malta, Norway, Poland, Portugal and Sweden). Acute infections are excluded from this analysis.

The rate of reported AIDS cases has halved in the last decade, from 1.6 per 100 000 reported in 2008 (Fig. 1.8). This decline is noted in men and women and in all transmission groups, but appears greatest among cases attributed to heterosexual transmission and injecting drug use (Tables 16–22, Fig. 1.15). Despite the general EU/EEA-wide decline, an increase has been reported in the rate of AIDS diagnoses since 2008 in Bulgaria, the Czech Republic and Hungary.

The most common AIDS-indicative diseases diagnosed in 2017 in the EU/EEA were *Pneumocystis pneumonia* (21%), pulmonary and/or extrapulmonary TB (14%), wasting syndrome due to HIV (11%) and oesophageal candidiasis (10%) (Table 23). Seventeen countries reported TB (pulmonary and/or extrapulmonary) as an AIDS-defining illness in people newly diagnosed with AIDS in 2017. Fourteen per cent of people diagnosed with AIDS in these countries presented with TB as an AIDS-defining illness, ranging from 6% of cases in Finland to more than 35% in Romania (Fig. 1.16).

Twenty-seven EU/EEA countries (all but Belgium, Germany, Italy and Sweden, which did not report consistently over the period) reported data on deaths of people diagnosed with AIDS. Overall, 772 were reported to have died due to AIDS-related causes during 2017 (Table 24), although these data are affected by underreporting due to the challenges in many countries in linking to death registries. Nevertheless, AIDS-related death reports have consistently been decreasing since 2008, when 2147 deaths were reported in countries reporting consistently over time, although delays in reporting and underreporting may affect the latest figures (Table 25, Fig. 1.8). From the beginning of the HIV epidemic to the end of 2017, the cumulative total of people diagnosed with AIDS in the EU/EEA is 358 722 (Table 15). The cumulative total of cases reported as known to have died due to AIDS-related causes by the end of 2017 was 188 638 (Table 24).

HIV testing

Fourteen countries reported data on HIV tests performed, excluding unlinked anonymous testing and testing of

Fig. 1.14. Percentage of AIDS diagnoses within 90 days of HIV diagnosis, EU/EEA, 2017 (n = 1671)

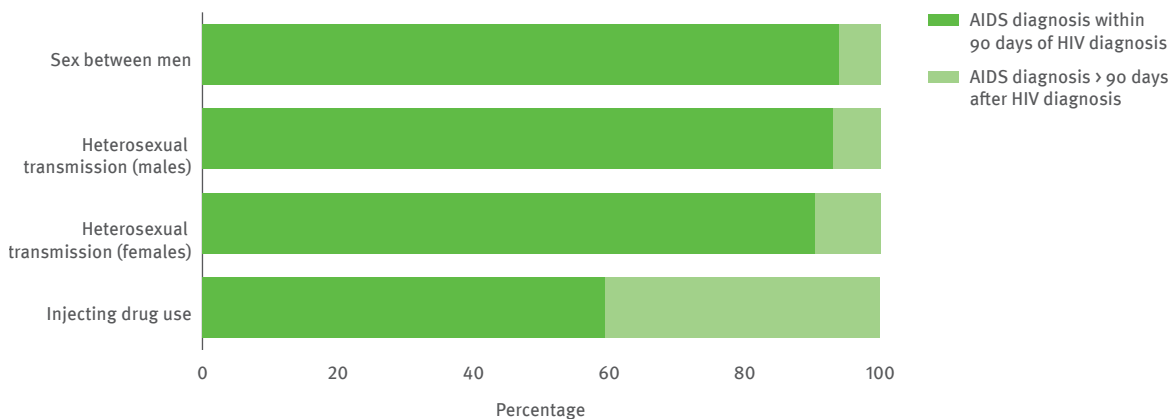
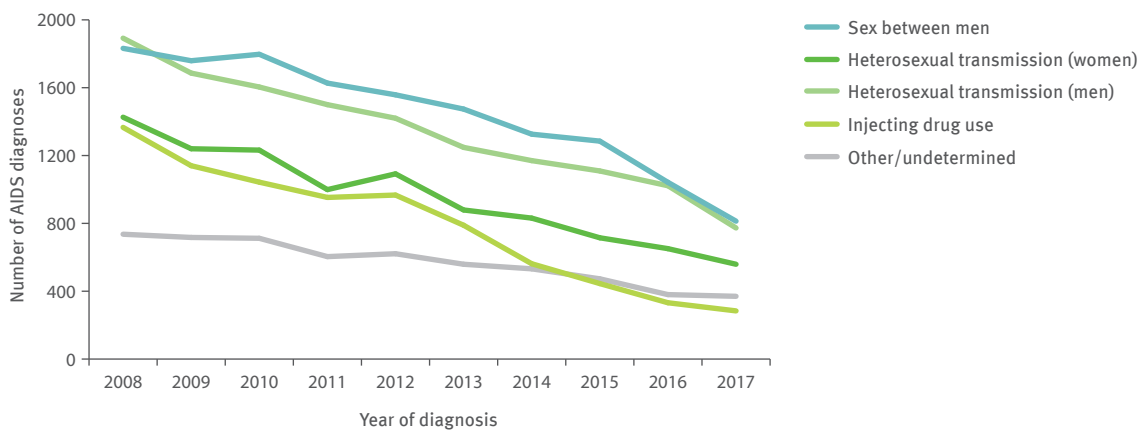
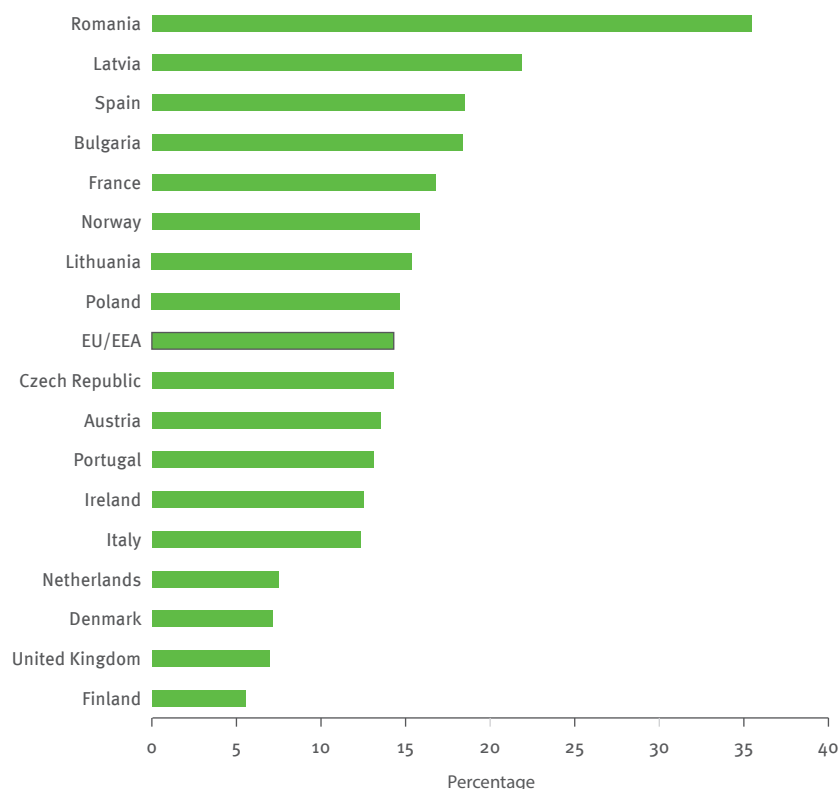


Fig. 1.15. AIDS diagnoses, by transmission mode, EU/EEA, 2008–2017



Note: data from Germany, Belgium and Sweden excluded due to inconsistent reporting during the period.

Fig. 1.16. Percentage of people diagnosed with AIDS with TB as an AIDS-defining illness, EU/EEA, 2017 (n = 2825)

Note: countries that did not report AIDS (Belgium, Germany and Sweden) or reported no cases of TB as an AIDS-defining illness (Croatia, Cyprus, Estonia, Greece, Hungary, Iceland, Ireland, Luxembourg, Norway, Slovakia and Slovenia) are excluded.

blood donations. The number of tests increased by 12% in countries reporting consistently since 2008 (Table 26). Changes in overall testing activity do not appear to explain the decrease in cases reported, particularly among MSM, in some European countries. It is important to note that numbers provided are collected in a heterogeneous manner and comparison between country rates should be undertaken with caution, but the numbers can provide an indication of large changes in overall testing policy or provision to support the interpretation of HIV cases notified.

Conclusions

HIV surveillance data for 2017 contribute to demonstrating important changes in the epidemiology of HIV in EU/EEA countries over the past decade. Rates of AIDS and AIDS-related deaths in the EU/EEA as a whole have decreased significantly over the past decade, reflecting greater access to treatment and better case management, and sustained progress towards the SDG of ending the AIDS epidemic and decreasing AIDS-related deaths. There is a clear decline in the rate of new HIV diagnoses per 100 000 population, with an adjusted rate of 6.2 reported in 2017. While the notification rate is lower than in previous years, it is expected to be revised upwards in future reporting cycles due to reporting delay, which is common for HIV generally and for certain countries in the EU/EEA in particular. Despite the evidence of some

progress in reducing the number of new HIV diagnoses in the EU/EEA overall, rates continue to increase in about one third of EU/EEA countries.

There appears to be evidence of a true decrease in HIV diagnoses among MSM in select EU/EEA countries that seems to be driving the overall decline observed in the EU/EEA. This is significant because MSM still account for the largest number of new HIV diagnoses in the EU/EEA; until recently, this was the only population in the EU/EEA in which HIV cases were increasing during most of the last decade. The decline at EU/EEA level is driven by substantial declines in specific EU/EEA countries – Austria, Belgium, Denmark, Estonia, the Netherlands, Norway, Spain and the United Kingdom. Reasons for the decrease may include successful programmes to offer more frequent and targeted HIV testing to promote earlier diagnosis, rapid linkage to care and immediate initiation of ART for those found to be positive, which results in higher rates of viral suppression and a decline in HIV incidence (1,2). A trend toward earlier diagnosis is evident in the mean CD4 count data at diagnosis, which has increased significantly over the last decade in all people diagnosed, including MSM; this indicates improvements in case ascertainment, which could be a result of more effective testing policies. In addition to more frequent testing and linkage to care, the use of formal and informal PrEP may also have played a role in the decline of HIV diagnoses observed in at least some of these settings (2,3).

The positive trend described above is countered, however, by the prevailing situation in other EU/EEA countries where HIV continues to increase among MSM. Substantial increases have been reported in Bulgaria, Cyprus, Ireland, Malta, Poland and Romania in recent years. Overall in the EU/EEA and even in some settings with declines in rates among MSM, new HIV diagnoses in migrant MSM have not declined at the same rate as those who are not foreign-born. There is an urgent need for significant scaling up of more effective combination-prevention programmes for this at-risk population. This includes promoting the uptake of regular, easy-to-access HIV testing, accompanied by immediate linkage to care and treatment for those found positive, and condoms, peer support and possible PrEP for some populations of high-risk HIV-negative men (4).

The substantial decrease in the number of HIV infections transmitted through heterosexual contact, particularly among women, represents an important epidemiological trend observed over the past decade. Heterosexual transmission nevertheless remains the second most common mode of HIV transmission reported in the EU/EEA and is the most common transmission mode in some countries. Part of the declining trend in heterosexual cases is probably influenced by the decline (since 2008) in the number of heterosexually acquired cases in migrants originating from countries with generalized HIV epidemics (5). Migrants (or people originating from outside of the reporting country) again constituted a considerable proportion (41%) of new HIV diagnoses in the EU/EEA in 2017. It is important to recognize the emerging evidence that a significant proportion of migrants, even those originating from high HIV-endemic areas, acquire HIV after arrival in the EU/EEA (6–8). This indicates the need for targeted prevention directed at this vulnerable group from the moment of their arrival. Despite the overall declines, heterosexual transmission increased substantially in Estonia and Lithuania.

Transmission among people who inject drugs continues to decline and remains at a low level in most EU/EEA countries, thanks to well-established harm-reduction programmes throughout most of the Region, but sudden increases have been observed since 2016 in Lithuania. Outbreaks have been observed in recent years in Romania and Greece – countries with previously very low levels of HIV among people who inject drugs (9,10) – and, more recently, localized outbreaks have been reported in Ireland, Luxembourg and United Kingdom (Scotland) (11–13). This reinforces the importance of maintaining adequate scale and coverage of harm-reduction services and recognizing that trends can change quickly in this at-risk group in the absence of effective prevention delivered at scale (14).

It is estimated that 120 000 people were living with undiagnosed HIV in the EU/EEA in 2015, implying that about 15% of those living with HIV are not aware of their status (15). Estimates also indicate that it takes 2.9 years from HIV infection to diagnosis in the EU/EEA, with variation by geographical area within the EU from 2.2 to 3.6 years (16). In addition to the clinical and personal

benefits for the person diagnosed, early diagnosis and treatment can also benefit sexual and injecting partners by inhibiting onward HIV transmission. Nearly half of those diagnosed (49%) have a CD4 cell count of below 350 cells per mm³ at diagnosis, including 28% of cases with advanced HIV infection (CD4 < 200 cells/mm³), indicating the need to improve testing programmes to diagnose people living with HIV at an earlier stage. This is a clear indication that they were infected many years previously and suggests problems with access to, and uptake of, HIV testing for those most at risk in these countries.

One of the subgroups to emerge with the highest rate of late diagnosis is older adults (people aged over 50 years), particularly older men reported as having acquired HIV heterosexually. The trend during the last decade has been towards increasing median age at HIV diagnosis, particularly among women. In 2017, nearly one in five new HIV diagnoses was of a person over 50 years. This may be the result of stigma, or low or inaccurate risk perception among older adults or the health-care providers who serve them (17).

To address the high proportion of people diagnosed late, it is essential to diversify HIV testing through augmenting routine testing for health conditions associated with HIV (indicator condition-guided testing), increasing HIV testing during screening for other sexually transmitted infections, and continuing to expand community-based testing, self-testing/home-sampling and partner notification. New European guidance on setting-based approaches for HIV and viral hepatitis testing, including best practices for effective implementation, can help countries seeking to implement more effective testing programmes (18). Testing provides not only a gateway to HIV treatment for people found to be positive, but can also serve as an entry point for high-risk HIV-negative people to effective prevention, including PrEP.

Despite clear evidence of the benefits of introducing ART early for the health of HIV-positive people (19,20) and the fact that this should serve as an incentive for people to know their HIV status, many continue to be diagnosed with HIV years after becoming infected and having reached an advanced stage of illness. Overall, 89% of AIDS diagnoses were made within 90 days of the HIV diagnosis, indicating that most AIDS cases in the EU/EEA are due to late diagnosis of HIV infection. The only group where half of AIDS cases occurred after the immediate HIV diagnosis was among people whose HIV infection was attributed to injecting drug use, possibly indicating that AIDS diagnoses in this group are associated with lack of engagement with effective ART.

Once tested, rapid linkage to high-quality care (including ART) is essential. Ninety-two per cent of people diagnosed in 2017 who had evidence of linkage to care were linked to care within three months of HIV diagnosis. Timely linkage to care following HIV diagnosis is crucial, as delayed access can result in poor patient outcomes (21). Once linked to care, there is evidence that high proportions of people diagnosed with HIV in

the EU/EEA have access to ART and achieve viral suppression (22).

Recent years have seen a worrying trend of reduced data completeness on the HIV transmission route, with about one quarter of cases reported in 2017 lacking this important information. While this proportion may have been affected by the earlier reporting deadline and by reporting changes in several countries that have temporarily affected data completeness, the trend has been evident in recent years. Information on probable route of transmission is crucial to better inform HIV prevention interventions and programme planning. Greater efforts to improve collaboration with clinicians and follow up with other data providers may improve the transmission data. Meanwhile, statistical adjustments for missing data are being explored (23).

The changing epidemiology of HIV infections observed in the EU/EEA over the last decade suggests that some progress has been achieved, particularly on reducing infections attributed to heterosexual transmission and injecting drug use and, more recently, the decline of HIV resulting from sex between men in some EU/EEA countries. These epidemiological trends also indicate, however, that it is crucial to sustain, and in some places strengthen, evidence-based HIV prevention interventions tailored to the local epidemiological context and targeting those most at risk.

Programmes on the prevention and control of HIV infection adapted to key populations and maintained to scale remain important in EU/EEA countries. For most EU/EEA countries, this means a strong focus on MSM, including intra-European and other migrant MSM. Other migrants, both those from countries with generalized HIV epidemics and others, are also a key vulnerable population that needs specific prevention and control efforts in most EU/EEA countries. Given the increasing evidence of post-migration HIV acquisition, it is important that migrant-sensitive services for prevention and HIV testing, combined with policies that promote and ensure linkage and access to care, are delivered in all EU/EEA countries.

Harm-reduction programmes among people who inject drugs and their sexual partners are crucial and should be maintained and scaled up where service coverage is low, particularly when patterns of drug use change. Finally, strengthening the offer and effectiveness of HIV testing programmes to increase the frequency of testing in high-risk individuals will help to decrease late diagnosis and, ultimately, the proportion of people living with undiagnosed HIV in the EU/EEA.

References

- Brown AE, Mohammed H, Ogaz D, Kirwan PD, Yung M, Nash SG et al. Fall in new HIV diagnoses among men who have sex with men (MSM) at selected London sexual health clinics since early 2015: testing or treatment or pre-exposure prophylaxis (PrEP)? *Euro Surveill.* 2017;22(25):pii=30553 (<http://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2017.22.25.30553>).
- Nwokolo N, Whitlock G, MacOwan A. Not just PrEP: other reasons for London's HIV decline. *Lancet HIV* 2017;4(4):e153 ([http://www.thelancet.com/journals/lanhiv/article/PIIS2352-3018\(17\)30044-9/fulltext](http://www.thelancet.com/journals/lanhiv/article/PIIS2352-3018(17)30044-9/fulltext)).
- Evidence brief: pre-exposure prophylaxis for HIV prevention in Europe. Stockholm: ECDC; 2016 (<https://ecdc.europa.eu/sites/portal/files/media/en/publications/Publications/pre-exposure-prophylaxis-hiv-prevention-europe.pdf>).
- HIV and STI prevention among men who have sex with men. ECDC guidance. Stockholm: ECDC; 2014 (<http://ecdc.europa.eu/en/publications/Publications/hiv-sti-prevention-among-men-who-have-sex-with-men-guidance.pdf>).
- Hernando V, Alvarez-del Arco D, Alejos B, Monge S, Amato-Gauci AJ, Noori T et al. HIV infection in migrant populations in the European Union and European Economic Area in 2007–2012: an epidemic on the move. *J Acquir Immune Defic Syndr.* 2016;70(2):204–11.
- Rice BD, Elford J, Yin Z, Delpech VC. A new method to assign country of HIV infection among heterosexuals born abroad and diagnosed with HIV. *AIDS* 2012;26(15):1961–6.
- Fakoya I, Alvarez-del Arco D, Woode-Owusu M, Monge S, Rivero-Montesdeoca Y, Delpech V et al. A systematic review of post-migration acquisition of HIV among migrants from countries with generalised HIV epidemics living in Europe: implications for effectively managing HIV prevention programmes and policy. *BMC Public Health* 2016;15:561 (<http://www.biomedcentral.com/content/pdf/s12889-015-1852-9.pdf>).
- Fakoya I, Alvarez-Del Arco D, Monge S, Copas AJ, Gennotte A-F et al. HIV testing history and access to treatment among migrants living with HIV in Europe. *J Int AIDS Soc.* 2018;21(Suppl. 4):e25123 (<https://onlinelibrary.wiley.com/doi/epdf/10.1002/jia2.25123>).
- Hedrich D, Kalamara E, Sfetcu O, Pharris A, Noor A, Wiessing L et al. Human immunodeficiency virus among people who inject drugs: is risk increasing in Europe? *Euro Surveill.* 2013;18(48):pii=20648 (<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20648>).
- Paraskevis D, Nikolopoulos G, Tsiara C, Paraskeva D, Antoniadou A, Lazanas M et al. HIV-1 outbreak among injecting drug users in Greece, 2011: a preliminary report. *Euro Surveill.* 2011;16(36):pii=19962 (<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=19962>).
- Giese C, Igoe D, Gibbons Z, Hurley C, Stokes S, McNamara S et al. Injection of new psychoactive substance snow blow associated with recently acquired HIV infections among homeless people who inject drugs in Dublin, Ireland, 2016. *Euro Surveill.* 2016;20(40):pii=30036. doi:<http://dx.doi.org/10.2807/1560-7917.ES.2016.20.40.30036>.
- Public Health England, Health Protection Scotland, Public Health Wales, Public Health Agency Northern Ireland. Shooting up: infections among people who inject drugs in the UK, 2016. London: Public Health England; 2017 (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/567231/Shooting_Up_2017_Update.pdf).
- HIV in people who inject drugs – joint technical mission to Luxembourg. Stockholm, Lisbon: ECDC/European Monitoring Centre for Drugs and Drug Addiction; 2018 (<http://sante.public.lu/fr/publications/h/hiv-joint-technical-mission/index.html>).
- ECDC, European Monitoring Centre for Drugs and Drug Addiction. Prevention of infections among people who inject drugs. Stockholm: ECDC; 2011 (http://ecdc.europa.eu/en/publications/Publications/111012_Guidance_Infectious_diseases_IDU_brief.pdf).
- Pharris A, Quinten C, Noori T, Amato-Gauci AJ, van Sighem A, the ECDC HIV/AIDS Surveillance and Dublin Declaration Monitoring Networks. Estimating HIV incidence and number of undiagnosed individuals living with HIV in the European Union/European Economic Area, 2015. *Euro Surveill.* 2016;21(48):pii=30417 (<http://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2016.21.48.30417>).
- van Sighem A, Pharris A, Quinten C, Noori T, Amato-Gauci AJ, the ECDC HIV/AIDS Surveillance and Dublin Declaration Monitoring Networks. Reduction in undiagnosed HIV infection in the European Union/European Economic Area, 2012 to 2016. *Euro Surveill.* 2017;22(48):pii=17-00771 (<https://doi.org/10.2807/1560-7917.ES.2017.22.48.17-00771>).
- Tavoschi L, Gomes Dias J, Pharris A, on behalf of the HIV Surveillance Network. New HIV diagnoses among adults aged 50 years or older in 31 European countries, 2004–15: an analysis of surveillance data. *Lancet HIV* 2017;4(11):e514–21.
- INSIGHT START Study Group. Initiation of antiretroviral therapy in early asymptomatic HIV infection. *N Engl J Med.* 2016;373(9):795–807.
- Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection. Recommendations for a public health approach. Second edition. Geneva: World Health Organization; 2017 (http://apps.who.int/iris/bitstream/10665/208825/1/9789241549684_eng.pdf?ua=1).
- Public health guidance on HIV, hepatitis B and C testing in the EU/EEA. Stockholm: ECDC; 2018 (<https://ecdc.europa.eu/sites/portal/files/documents/HIV-hepatitis-B-and-C-testing-public-health-guidance.pdf>).
- Croxford S, Yin Z, Burns F, Copas A, Town K, Desai S et al. Linkage to HIV care following diagnosis in the WHO European Region: a systematic review and meta-analysis, 2006–2017.

- PLoS One 2018;13(2):e0192403 (<https://doi.org/10.1371/journal.pone.0192403>).
22. Monitoring implementation of the Dublin Declaration on Partnership to fight HIV/AIDS in Europe and central Asia: thematic report on the HIV continuum of care. Stockholm: ECDC; in press.
 23. Rosinska M, Pantazis N, Janiec J, Pharris A, Amato-Gauci AJ, Quinten C et al. Potential adjustment methodology for missing data and reporting delay in the HIV Surveillance System, European Union/European Economic Area, 2015. Euro Surveill. 2018;23(23):pii=1700359 (<https://doi.org/10.2807/1560-7917.ES.2018.23.23.1700359>).

2. HIV and AIDS in the WHO European Region

HIV and AIDS diagnoses in the WHO European Region

HIV diagnoses

In 2017, 159 420 people were newly diagnosed with HIV in the WHO European Region, corresponding to a rate of 20.0 per 100 000 population (Table A). This number includes 55 018 new diagnoses reported by 49 countries¹³ to the joint ECDC and WHO Regional Office for Europe surveillance system and 104 402 cases from the Russian Federation (1).¹⁴ It brings the cumulative number of reported HIV diagnoses in the Region since reporting began in the 1980s to 2 332 391 (1 174 313 people reported to ECDC and the WHO Regional Office for Europe (Table 1, Fig. B)¹⁵ and 1 220 659 from the Russian Federation¹⁶) (1). As in previous years, most (82%) of the 159 420 people newly diagnosed with HIV in 2017 were from the East of the Region (130 861), 14% from the West (22 354) and 4% from the Centre (6205). The rate was also highest in the East (51.1 per 100 000 population), eight times higher than in the West (6.9 per 100 000, adjusted for reporting delay; see Annex 1 for methods and Annex 6 for results) and 16 times higher than in the Centre (3.2 per 100 000) (Table A). Two countries (the Russian Federation and Ukraine) continue to bear a large share of the burden in Europe, contributing 75% of newly diagnosed HIV infections in the Region and 92% in the East.

In the 49 countries that provided data to ECDC/WHO,¹³ the 55 018 new diagnoses resulted in a rate of 8.4 per 100 000 population (not adjusted for reporting delay¹⁷) (Table 1), which is 9% higher than the 2016 rate reported in the 2017 HIV/AIDS surveillance in Europe report. In these 49 countries, 48% of new diagnoses (26 459) were reported in the East, with a rate of 23.6 per 100 000, 41% in the West and 11% in the Centre. For men, the rate was 11.9 per 100 000 population (Table 2) and for women it was 5.1 per 100 000 population (Table 3).

¹³ No data were received from Germany (no data export for 2017 due to technical problems), the Russian Federation, Turkmenistan or Uzbekistan. Liechtenstein is an EU Member State but not a WHO Member State, so its data are included in the totals for the EU/EEA but not for the WHO European Region.

¹⁴ The cited data source from the Russian Federation enabled the inclusion of Russian Federation data within the other countries' reported data for the overall number, rate and trend of HIV diagnoses in the WHO European Region (see "HIV and AIDS diagnoses in the WHO European Region" (below)) and the East of the Region (see "HIV and AIDS diagnoses in the East" (below)). This allows a more complete presentation of the epidemiology of HIV in the WHO European Region. Other regional figures presented in this report (including those by age and gender) are based on data from the 49 countries that provided data to the joint ECDC/WHO European HIV surveillance system.

¹⁵ This does not include the 62 581 cases officially reported to ECDC/WHO by the Russian Federation in 2010.

¹⁶ This is minus the 62 581 cases officially reported to ECDC/WHO by the Russian Federation in 2010.

¹⁷ When adjusting the 2017 rate to take into account reporting delay (which is common in some countries, particularly in the western part of the Region), it increases from 8.4 to 8.7 per 100 000 population (56 720 cases) (see Annex 1 for methods and Annex 6 for results).

Rates of newly diagnosed HIV infections varied widely across countries in the WHO European Region in 2017. The highest rates per 100 000 population (> 15.0) were observed in the Russian Federation (71.1) (1) followed by Ukraine (37.0),¹⁸ Belarus (26.1), Republic of Moldova (20.6), Latvia (18.8), Estonia (16.6), Kazakhstan (16.6) and Georgia (16.1). The lowest rates (< 3.0) were reported by Bosnia and Herzegovina (0.3), Slovakia (1.3), Slovenia (1.9), Serbia (2.1), the former Yugoslav Republic of Macedonia (2.1), Hungary (2.3), the Czech Republic (2.4), Croatia (2.5) and Finland (2.9) (Table 1).

The largest proportion of people newly diagnosed in the 49 reporting countries¹³ were in the age group 30–39 years (36%), while 9% were young people aged 15–24 years and 16% were 50 years or older at diagnosis (Table A, Table 9). The male-to-female ratio was 2.2, lowest in the East (1.6), higher in the West (2.9) and highest in the Centre (5.8). The highest male-to-female ratios (> 15.0) at country level among countries with more than 10 new cases were observed in Montenegro (25.0), Croatia (20.2), Slovenia (18.5) and Serbia (17.10), and the lowest (≤ 1.5) in the Republic of Moldova (1.3), Kyrgyzstan (1.4), Kazakhstan (1.5) and Ukraine (1.5) (see the "HIV diagnoses" section in Chapter 1 and "HIV diagnoses in the East" and "Trends in HIV diagnoses in the East" below).

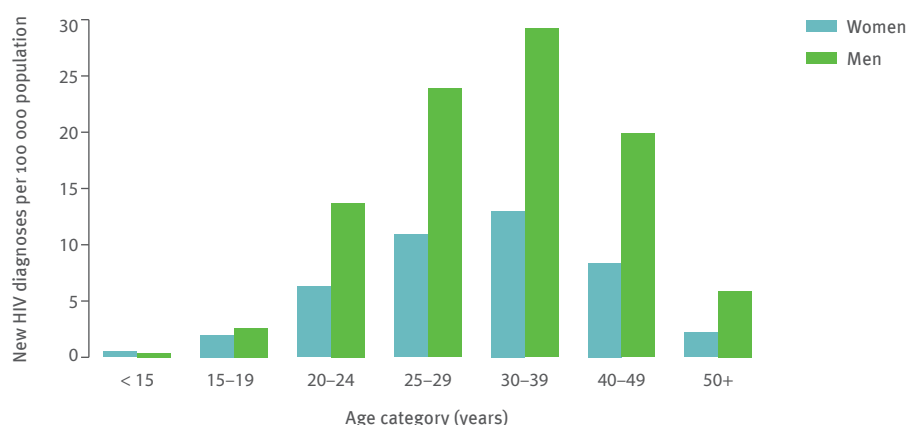
Men had higher age-specific rates than women in all age groups except among people under 15 years. The highest age-specific rate of new HIV diagnoses was observed among 30–39-year-olds (21.2 per 100 000 population) – considerably higher among men (29.2 per 100 000 population) than among women (13.0 per 100 000 population) (Fig. 2.1).

Data on transmission mode (Table A, Tables 4–8, the Russian Federation not included) provide information about risk exposure among people newly diagnosed with HIV and indicate the following for 2017.

- Heterosexual contact remained the main reported mode of HIV transmission in the WHO European Region, accounting for half (49%) of people newly diagnosed in 2017 (27 204) and 58% of new HIV diagnoses with a known mode of transmission (Table 6). Among those, 11% originated from countries with generalized epidemics (data not shown).
- Sex between men was the second most common transmission mode, accounting for 21% of new diagnoses overall (11 673) and 25% of new HIV diagnoses with a known mode of transmission (Table 4).

¹⁸ Without taking into account data from Crimea, Sevastopol city and parts of the non-government controlled areas of Ukraine; adjusting population denominator data to exclude Crimea and Sevastopol city; and excluding infants born to HIV-positive mothers whose HIV status is undetermined.

Fig. 2.1. Age- and gender-specific rates of new HIV diagnoses per 100 000 population, WHO European Region, 2017 (n = 54 828)



Note: no data from Germany, Russian Federation, Turkmenistan and Uzbekistan.

- Injecting drug use accounted for 13% of new diagnoses (7147) and 15% of new HIV diagnoses with a known mode of transmission (Table 5).
- One per cent (0.7%, 397) was infected through mother-to-child transmission (0.9% of those with a known mode of transmission) (Table 7) and 0.2% (105) through other transmission routes (nosocomial infection, transfusion or use of other blood products) (Table 8).
- Transmission mode was reported as unknown or missing for 15% (8492 cases) (Table 8). Reporting completeness regarding mode of transmission mode varies greatly across the Region, with information lacking for 3% of new diagnoses in the East, 41% in the Centre and 23% in the West.

When combining data from the Russian Federation (see “HIV diagnoses in the East” below) within data reported by the other 49 countries for the WHO European Region, heterosexual transmission accounted for 56% of new diagnoses among people for whom the mode of HIV transmission was known, transmission through injecting drug use 30%, sex between men 14% and mother-to-child transmission 0.6%.

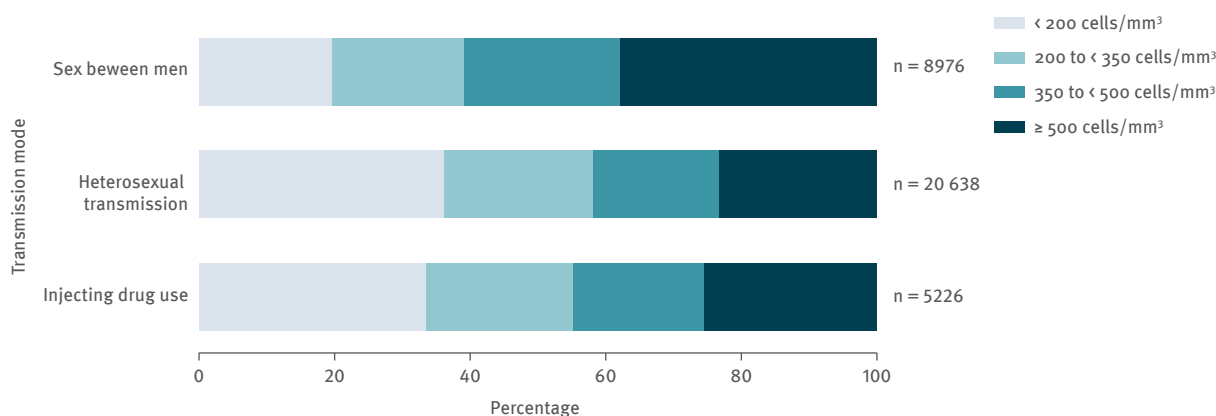
Information about country of birth, country of nationality or region of origin was provided by 46 countries for 54 791 people newly diagnosed in 2017. Among people with known origin (50 677), 19% (9753) originated from outside of the reporting country, including 14% (7032) from outside the WHO European Region and 5% (2721) from a European country other than the country of report (Table 11).

Information about probable country of infection was reported by 37 countries for 30 201 people newly diagnosed. Among people for whom the probable country of infection was known (19 599), 19% (3654) were infected abroad, including 6% in sub-Saharan Africa, 5% in central and eastern Europe, 3% in western Europe, 3% in south and south-east Asia and 2% in Latin America (Table 13).

Forty countries provided information about CD4 cell count at the time of HIV diagnosis in 2017. Information was reported for 36 441 people over 14 years at diagnosis (covering 66% of all new diagnoses and 77% of diagnoses in the 40 reporting countries) (Table 14). Just over half (53%) of people newly diagnosed were late presenters, with CD4 cell counts below 350 per mm³ blood at the time of HIV diagnosis, including 32% with advanced HIV infection (CD4 < 200/mm³). Twenty per cent had a CD4 cell count of between 350 and 500 cells per mm³ and 29% had a count above 500 per mm³ (data not shown). The percentage of people newly diagnosed who were late presenters (CD4 < 350/mm³) varied across the Region and was highest in the East (57%), lower in the Centre (53%) and lowest in the West (48%). The countries with the highest percentages of late presenters (≥ 60%, in countries with more than five cases) were Kyrgyzstan (68%), Lithuania (66%), Serbia (66%), Tajikistan (63%), Latvia (62%), Montenegro (62%) and Romania (60%), and those with the lowest percentages (< 45%) were the Czech Republic (33%), the former Yugoslav Republic of Macedonia (38%), Cyprus (41%), the United Kingdom (41%) and Belgium (42%).

The percentage of late presenters was higher than the regional average of 53% in 15 countries (seven in the East, five in the Centre and three in the West). The percentage also varied across transmission categories and was highest for people with reported heterosexual transmission (58%, 62% for men and 54% for women) and through injecting drug use (55%), and lowest for men infected through sex with men (39%) (Table 14, Fig. 2.2, Fig. C). The percentage of people diagnosed at or below 350 CD4 cells per mm³ increased with age, ranging from 34% and 32% among people aged 15–19 and 20–24 years at diagnosis, respectively, to 66% among people aged 50 or above. By gender, overall, the percentage of late presenters was similar (52% for men and 54% for women), which is confounded by transmission mode and conceals, for men, the difference between MSM (who tend to get diagnosed earlier) and men with reported

Fig. 2.2. New HIV diagnoses, by CD4 cell count per mm³ at diagnosis and transmission mode, WHO European Region, 2017 (n = 33 840)



Note: no data from Andorra, Belarus, Germany, Hungary, Iceland, Latvia, Monaco, Norway, Poland, Russian Federation, San Marino, Turkey, Turkmenistan and Uzbekistan.

heterosexual transmission (who tend to get diagnosed later) (Fig. C).

Trends in HIV diagnoses

The rate of newly diagnosed HIV infections in the WHO European Region¹⁹ increased by 37% for the period 2008–2017, from 14.6 per 100 000 population (107 385 cases) to 20.0 per 100 000 population (159 420 cases) (Fig. 2.3a). The increase is mainly driven by an upward trend in the East, where the rate increased by 68%, from 30.4 in 2008 (77 228 cases) to 51.1 in 2017 (130 861 cases).

In the 49 countries that reported to ECDC and WHO,²³ the regional rate decreased by a slight 5%, from 8.8 in 2008 (52 435 cases) to 8.4 in 2017 (55 018 cases) (not adjusted for reporting delay²⁰) (Fig. 2.3b): in the East, the rate increased by 18%, from 20.0 (22 278 cases) to 23.6 (26 459 cases); in the Centre, by 129% – the largest relative increase across the three geographical areas – from 1.4 (2627 cases) to 3.2 (6205 cases); and in the West, the rate decreased by 27%, from 9.4 (27 530 cases) to 6.9 (23 976 cases, adjusted for reporting delay²¹).

Forty-four countries have consistently reported data on transmission mode for the period 2008–2017 (Fig. 2.4). Data from Estonia, Poland and Turkey were excluded because more than 50% of the data on transmission mode were missing for the period; data from Spain and Italy were excluded because coverage of the national surveillance system increased over this time period; and data from Germany, the Russian Federation,

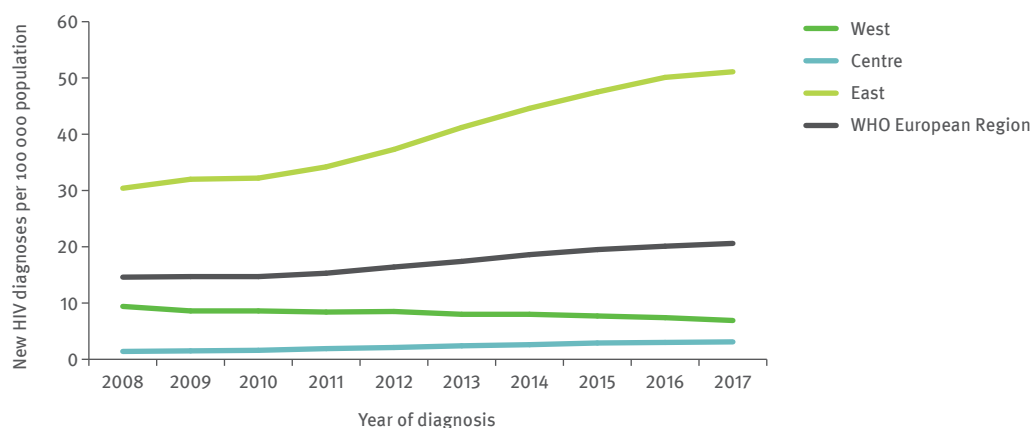
Turkmenistan and Uzbekistan were not consistently reported during the period. Data on transmission mode from the countries with consistent data indicate that:

- the number of new diagnoses in people with reported heterosexual transmission increased by 13% in the Region, from 21 094 in 2008 to 23 735 in 2017, while the percentage of all new HIV diagnoses attributed to heterosexual contact increased from 47% of cases in 2008 to 54% in 2017;
- the number of new diagnoses in people infected through sex between men decreased by 2%, from 7945 in 2008 to 7779 in 2017, and the percentage of all new HIV diagnoses attributed to sex between men remained stable at 18%;
- the number of new diagnoses in people infected through injecting drug use decreased by 38%, from 11 034 in 2008 to 6893 in 2017, while the percentage of all HIV diagnoses attributed to injecting drug use decreased from 25% in 2008 to 16% in 2017;
- the number of new diagnoses in children infected through mother-to-child transmission decreased by 47%, from 673 in 2008 to 360 in 2017, representing 1.4% of all new HIV diagnoses in 2008 and 0.8% in 2017;
- of the new diagnoses in people infected by other means, nosocomial infections decreased by 76% from a peak of 98 cases in 2008, which was related to a localized outbreak in central Asia, to 24 in 2017 (with another peak of 104 cases in 2012); new diagnoses attributed to transfusion of blood and its products decreased by 34%, from 87 in 2008 to 57 in 2017; and
- the number of new diagnoses for which information about transmission mode was unknown or missing increased by 39%, from 3672 in 2008 to 5086 in 2017 – representing 8% of all new HIV diagnoses in 2008 and 12% in 2017.

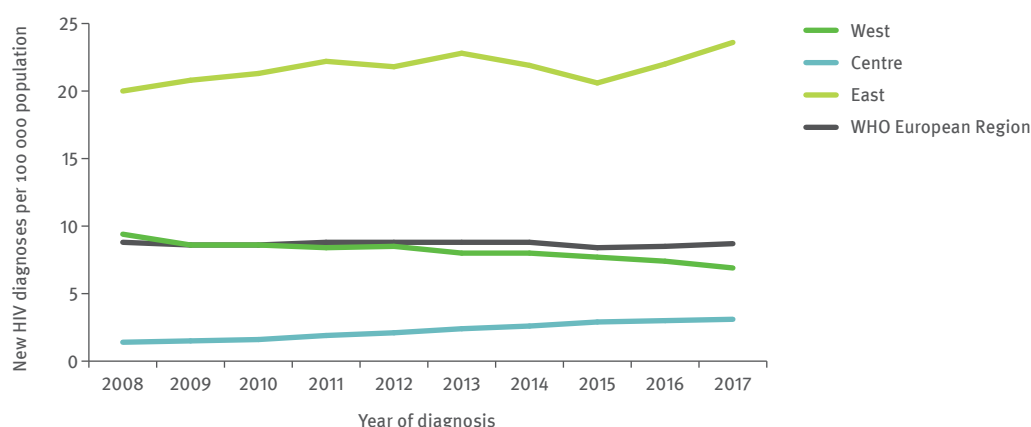
¹⁹ No data were received from Turkmenistan and Uzbekistan; data from the Russian Federation were derived from the Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS (1–3).

²⁰ When adjusting the 2017 regional rate for reporting delay, the trend for the decade remains stable at 8.8 in 2008 and 8.7 in 2017; see Annex 1 for methods and Annex 6 for results.

²¹ See Annex 1 for methods and Annex 6 for results (see also “HIV and AIDS diagnoses in the West” below and Fig. 2.3b).

Fig. 2.3a. New HIV diagnoses per 100 000 population, by year of diagnosis, WHO European Region,^a 2008–2017

^a In 50 countries (data from Germany, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period), data from the Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS (1–3).

Fig. 2.3b. Rate of new HIV diagnoses, by year of diagnosis, WHO European Region,^a 2008–2017

^a In 49 reporting countries (no data from Russian Federation, and data from Germany, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period).

AIDS cases, morbidity and mortality

In 2017, 14 703 people in 47 countries of the WHO European Region²² were diagnosed with AIDS, which corresponds to a rate of 2.3 per 100 000 population (Table 15). Of the 14 703 people who had an AIDS diagnosis in 2017, 78% (11 454) were diagnosed in the East, 17% (2426) in the West and 6% (823) in the Centre of the Region. The rate was also highest in the East (10.2 per 100 000 population), more than 10 times higher than in the West (0.7 per 100 000) and more than 20 times higher than in the Centre (0.4 per 100 000 population).

At country level, the rate of new AIDS diagnoses varied widely, with the highest rates (≥ 3.0) reported in Ukraine (21.9), the Republic of Moldova (6.9), Georgia (6.6), Latvia (6.0), Armenia (4.9) and Belarus (4.6), and the

lowest rates (< 0.3) reported in Bosnia and Herzegovina (0.1), the former Yugoslav Republic of Macedonia (0.1), Turkey (0.1)²³ and Slovakia (0.2). Andorra, Iceland, Malta, Monaco and San Marino reported zero cases.

Twenty per cent of people diagnosed with AIDS presented with TB as an AIDS-defining illness, ranging from 15% of cases in the West and 19% in the Centre to 26% in the East.

The overall rate of new AIDS diagnoses in the Region increased between 2008 and 2017 by 10%, from 2.1 per 100 000 population (13 328 cases) to 2.3 per 100 000 (14 703 cases), in the 47 countries with consistent AIDS

²² No data were available from Belgium, Germany, the Russian Federation, Sweden, Turkmenistan or Uzbekistan.

²³ AIDS data for Turkey only include people diagnosed with AIDS at the time of HIV diagnosis and are therefore not comparable with AIDS data from other countries.

data²⁴ (Fig. 2.5). Since there are reporting delays in some countries, this decrease is expected to even out over the coming years.

AIDS trends varied greatly across the three geographical areas. In the East, the rate doubled, from 5.1 in 2008 to 10.2 in 2017. In the Centre, the rate remained stable at 0.4 per 100 000 population, while in the West, the steady downward trend continued, with a 67% decrease from 2.1 in 2008 to 0.7 in 2017 (Fig. 2.5).

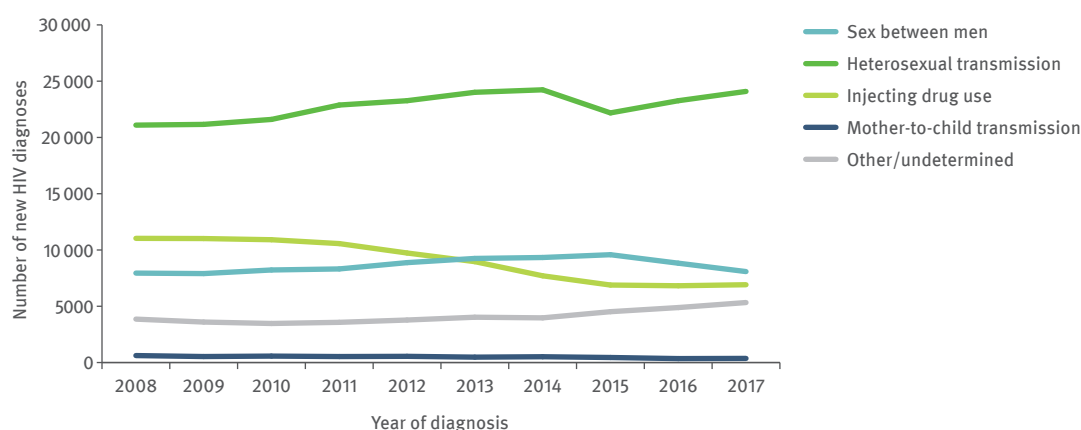
Information about AIDS-related deaths, or deaths among people previously diagnosed with AIDS for countries and years where cause of death (AIDS or non-AIDS related) was unknown or could not be reported, was provided by

47 countries in the WHO European Region²⁵ and included 4933 people who were reported to have died during 2017. This represented a 14% decrease compared with the 5718 deaths reported in the same countries in 2008. Of the 4933 deaths in 2017, 84% were reported from the East of the Region, 11% from the West and 5% from the Centre (Table 24). It is important to note that delays in reporting and underreporting have a significant impact on these numbers at European level, particularly when the death occurs long after HIV or AIDS diagnosis. The numbers presented here should therefore not be interpreted as being representative of the true AIDS mortality burden in the European Region. According to a country survey from 2006, only about one third of countries in the WHO European Region were able to match their

²⁴ Data from Belgium, Germany, the Russian Federation, Sweden, Turkmenistan and Uzbekistan are excluded or not available.

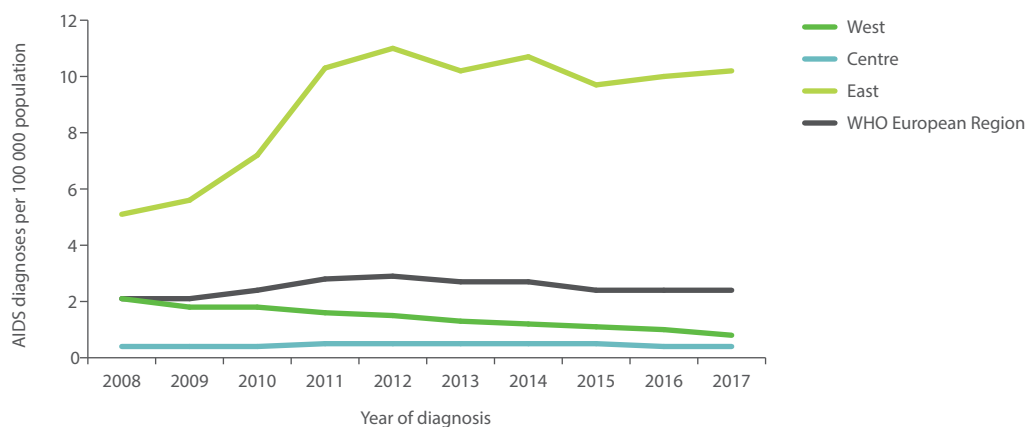
²⁵ No data were received from Italy, the Russian Federation, Sweden, Turkmenistan and Uzbekistan.

Fig. 2.4. New HIV diagnoses, by transmission mode and year of diagnosis, WHO European Region, 2008–2017



Note: data from Russian Federation, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period; data from Estonia, Poland and Turkey excluded due to incomplete reporting on transmission mode during the period; data from Italy and Spain excluded due to increasing coverage of national surveillance during the period.

Fig. 2.5. AIDS diagnoses per 100 000 population, by geographical area and year of diagnosis, WHO European Region, 2008–2017



Note: data from Belgium, Russian Federation, Sweden, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

HIV/AIDS registries with their national mortality or vital statistics registries (4).

HIV and AIDS diagnoses in the East

HIV diagnoses in the East

In 2017, 130 861 people were newly diagnosed with HIV across 13 countries²⁶ in the East of the WHO European Region, giving a rate of 51.1 per 100 000 population. This number includes 26 459 new diagnoses reported to the joint WHO/ECDC surveillance system by 12 countries²⁷ and 104 402 cases from the Russian Federation (1), continuing the alarming trend of previous years by once again being the highest number and rate ever observed in the East – a slight 2% increase compared with the rate of 50.2 reported for 2016 in the 2017 HIV surveillance in Europe report (5). For the 12 countries that reported to WHO/ECDC, the rate was 23.6 per 100 000 population.

At country level, the highest rates (> 20.0) for 2017 were observed in the Russian Federation (71.1 per 100 000 population) (1), Ukraine (37.0),²⁸ Belarus (26.1) and the Republic of Moldova (20.6), while the lowest (< 10.0) reported by Azerbaijan (5.8) and Lithuania (9.1).

In the 12 East countries that reported to WHO/ECDC, most people newly diagnosed (40%) were in the age group 30–39 years, while only 7% were young people aged 15–24 years; 13% were 50 years or older at the time of diagnosis (Table A, Table 9). The male-to-female ratio was 1.6, the lowest of the three geographical areas, corresponding to 39% of new diagnoses being in women in the East in 2017. The male-to-female ratio was highest (> 2.0) in Lithuania (5.1), Georgia (3.5) and Armenia (2.5), and lowest (< 1.5) in the Republic of Moldova (1.3) and Kyrgyzstan (1.4) (Fig. 2.6). Among people infected with reported heterosexual transmission, the male-to-female ratio was ≥ 1.5 in three countries (Armenia (2.0), Georgia (1.6) and Lithuania (1.5)), suggesting that more men than women were reported as infected through heterosexual contact in these countries. As this pattern differs from other countries where more heterosexual cases tend to be in women, it cannot be excluded that some of these men may in fact have been infected through injecting drug use or sex with other men, but were misclassified into the heterosexual category.

Heterosexual contact and injecting drug use remain the main reported modes of HIV transmission in the East of the Region. Reported transmission related to sex between men remains low, although it is increasing.

When combining data for the Russian Federation within data reported by the 12 East countries that provided data

²⁶ No data were received from Turkmenistan and Uzbekistan.

²⁷ No data were received from the Russian Federation, Turkmenistan and Uzbekistan.

²⁸ Without taking into account data from Crimea, Sevastopol city and parts of the non-government controlled areas of Ukraine; adjusting population denominator data to exclude Crimea and Sevastopol city; and excluding infants born to HIV-positive mothers whose HIV status is undetermined.

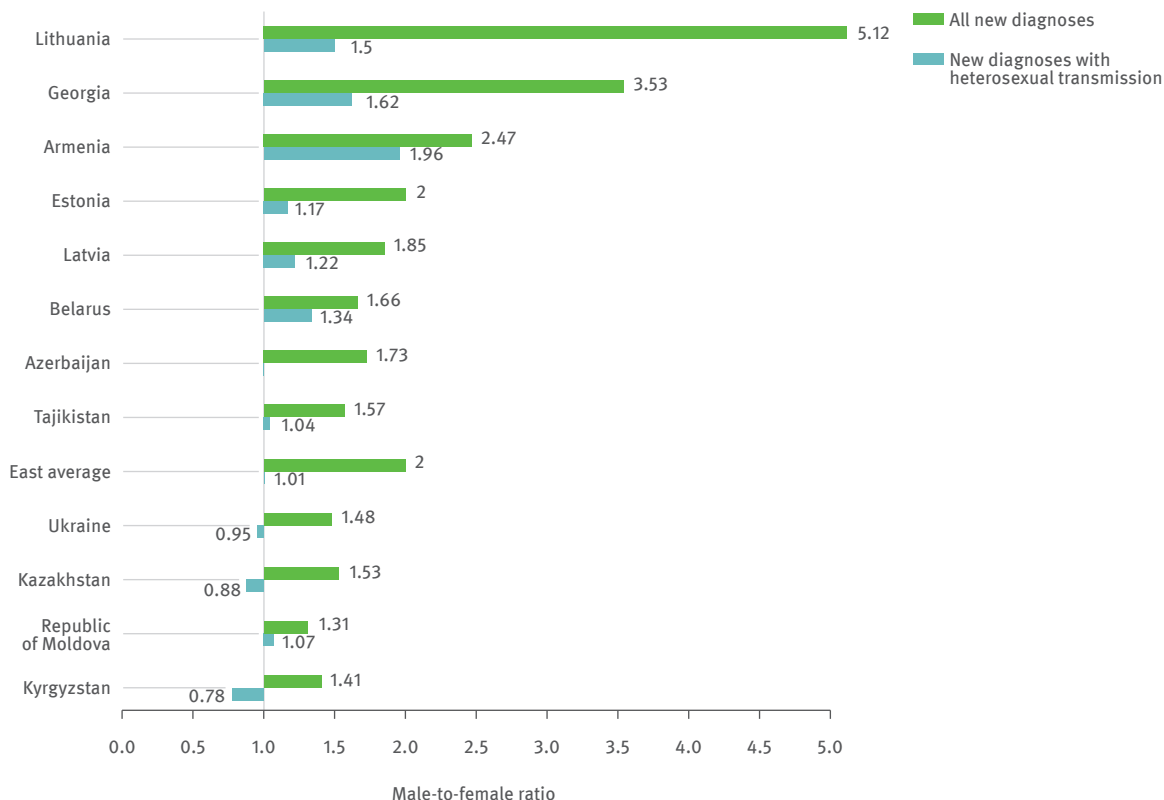
to WHO/ECDC, among people for whom the mode of HIV transmission was known, heterosexual sex accounted for 59% of new diagnoses, transmission through injecting drug use for 37%, sex between men for 3% and mother-to-child transmission for 0.5% of new diagnoses in 2017.

In the 12 reporting countries alone, 2017 data by mode of transmission suggest the following (Table A, Tables 4–8, Fig. 2.7).

- Sixty-eight per cent of those newly diagnosed and 70% of new HIV diagnoses with a known mode of transmission were infected heterosexually (17 882), making it the main reported transmission mode in all East countries except Lithuania, where the number of people infected through injecting drug use has tripled in just two years and become the leading mode of HIV transmission, primarily due to injecting drug use-related transmission in prison settings or among former inmates with a history of drug injection (Table 6).
- Twenty-four per cent of those newly diagnosed and 25% of new HIV diagnoses with a known mode of transmission were infected through injecting drug use (6375) (Table 5). Transmission through injecting drug use accounted for 20% or more of new diagnoses with a known transmission mode in eight countries (Lithuania (62%), Latvia (33%), Kazakhstan (31%), Kyrgyzstan (27%), Ukraine (25%), Georgia (24%), Tajikistan (22%) and Belarus (20%).
- Four per cent were infected through sex between men (1036) (Table 4), but three countries (Estonia, Georgia and Latvia) reported that sex between men accounted for 10% or more of new diagnoses with a known transmission mode.
- One per cent (0.9%) was infected through mother-to-child transmission (242) (Table 7) and 0.1% (21) through other transmission routes (nosocomial infection, transfusion or use of other blood products).
- Transmission mode was reported as unknown or missing for only 3% of those newly diagnosed across the 12 East countries (903), but at country level, transmission mode information was lacking for more than 15% of cases in five countries: Estonia (46%), Latvia (36%), the Republic of Moldova (23%), Azerbaijan (18%) and Lithuania (16%).

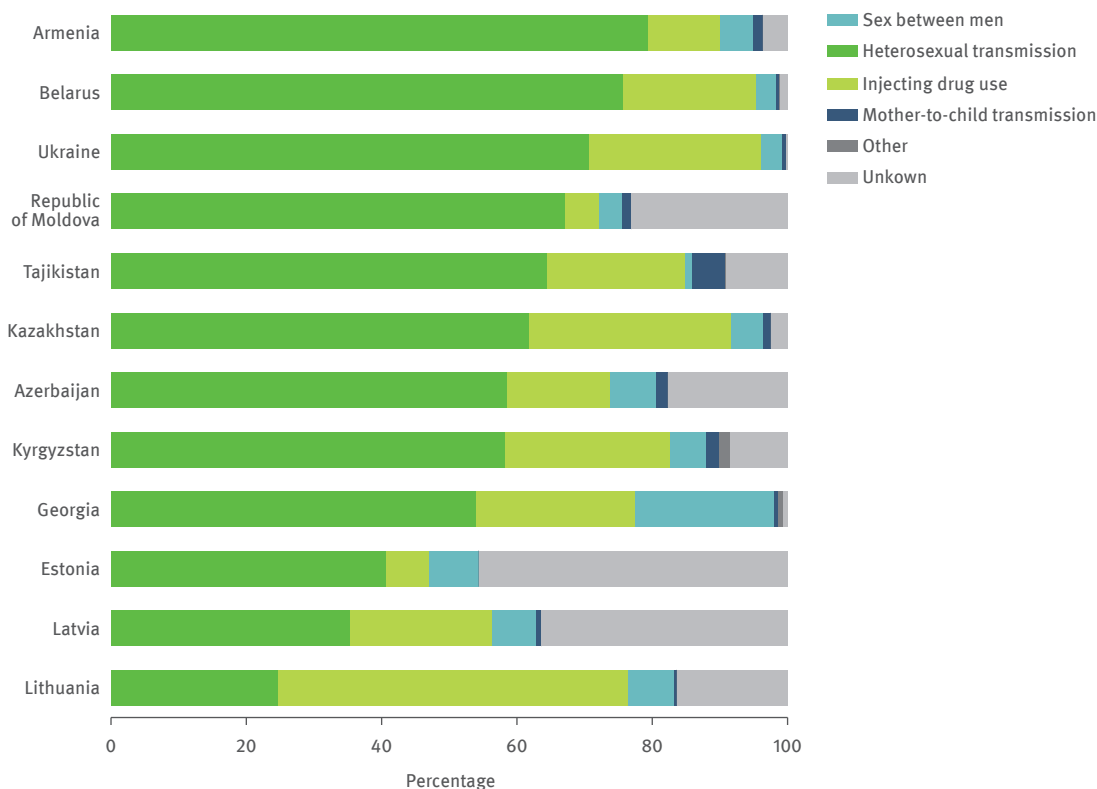
Analysing the new diagnoses by age group and transmission mode for the 12 reporting countries in the East (Fig. 2.8) shows that 30–39-year-olds accounted for most HIV diagnoses across all transmission groups (50% of people infected through injecting drug use, 38% with reported heterosexual transmission and 35% through sex between men). People in the younger age groups tended to be infected through sex between men: among MSM, 48% of adults (aged 15–49) were under 30 years at diagnosis compared with only 14% and 21% among those infected through injecting drug use and heterosexual sex, respectively. People aged 50 years and above were more frequently infected through heterosexual sex (16%

Fig. 2.6. Male-to-female ratio in all new HIV diagnoses and new diagnoses with heterosexual transmission, by country, East, 2017 (n = 26 459; 5751)



Note: no data were received from the Russian Federation, Turkmenistan and Uzbekistan.

Fig. 2.7. New HIV diagnoses, by country and transmission mode, East, 2017 (n = 26 459)



Note: no data were received from the Russian Federation, Turkmenistan and Uzbekistan.

compared with 7% and 5% for injecting drug use and MSM, respectively) (Fig. 2.8).

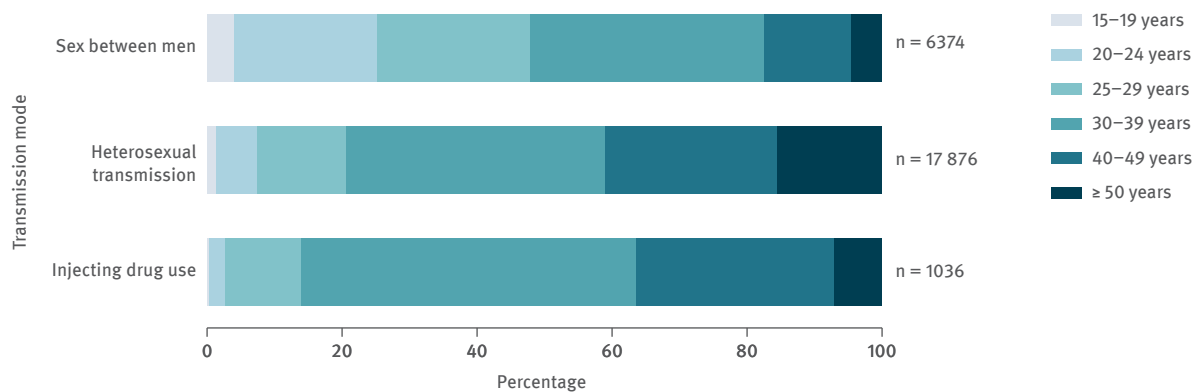
Eleven countries in the East provided information about CD4 cell count at the time of HIV diagnosis for 19 472 people above 14 years (covering 74% of the 26 459 new diagnoses reported by the 12 East countries and 81% of new diagnoses in the 11 countries with data on CD4 cells (Table 14)). Fifty-seven per cent of these people were late presenters with CD4 cell counts below 350 per mm³, including 35% with advanced HIV infection (CD4 < 200/mm³) at the time of HIV diagnosis. The percentage of people diagnosed with a CD4 count of less than 350/mm³ was higher than 50% in all 11 countries except Kazakhstan (46%). The percentage of late presenters varied across transmission categories; it was highest for people infected heterosexually (59%) and through injecting drug use (55%), and lowest for men infected through sex with men (43%) (Fig. 2.9).

Nine countries provided information on the probable source of infection for 6611 people with reported heterosexual transmission (Table 10), covering 37% of the heterosexually acquired cases reported by the 12 East

countries. Among those for whom the probable source of infection was known (which was only 1855 cases), 73% had a heterosexual partner from a non-generalized epidemic country (other than the reporting country) and 24% had sexual contact with a person who injected drugs. Although these data are scarce, they suggest ongoing heterosexual transmission outside the reporting country and related to partners with a history of injecting drug use.

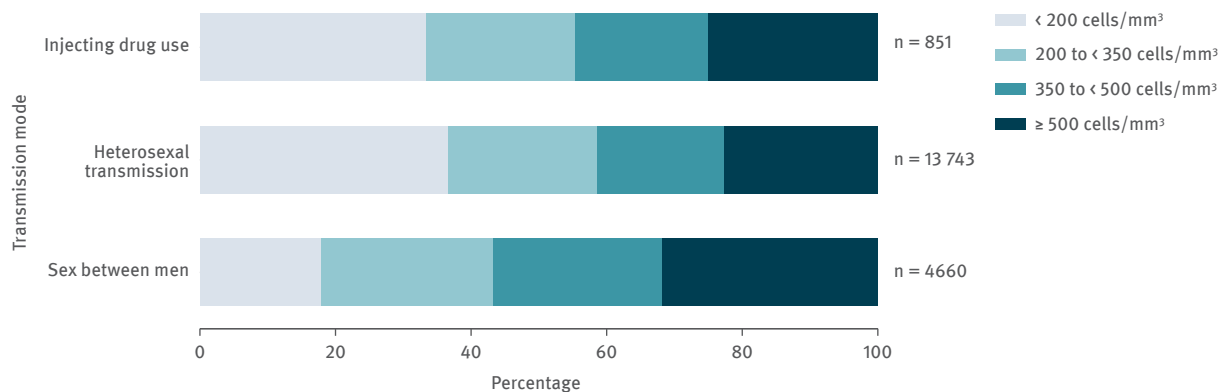
Nine countries in the East provided information about the probable country of infection for 9571 people newly diagnosed in 2017 (covering 36% of all new diagnoses reported by the 12 East countries) (Table 13). Among the 8263 cases for whom the probable country of infection was known, only 8% (620 cases) were infected abroad, including 7% in central and eastern Europe. These data suggest that most of those newly diagnosed with HIV in the East of the Region are infected in the reporting country and that those infected abroad are infected in neighbouring countries of central and eastern Europe.

Fig. 2.8. New HIV diagnoses, by age group and transmission mode, East, 2017 (n = 25 286)



Note: no data were received from the Russian Federation, Turkmenistan and Uzbekistan.

Fig. 2.9. New HIV diagnoses, by CD4 cell count per mm³ at diagnosis and transmission mode, East, 2017 (n = 19 254)



Note: no data were received from from Belarus, Turkmenistan, Ukraine and Uzbekistan.

Trends in HIV diagnoses in the East

The increasing trend in newly diagnosed HIV infections continued in the East²⁹ over the last decade, with a 68% increase in the rate of new diagnoses per 100 000 population, from 30.4 in 2008 (77 228 cases) to 51.1 in 2017 (130 861 cases) (Fig. 2.3a).

In the 12 East countries that reported to WHO/ECDC, the rate increased by a more modest 18%, from 20.0 in 2008³⁰ (22 278 cases) to 23.6 in 2017 (26 459 cases) (Fig. 2.3b). The rate more than doubled between 2008 and 2017 in four countries (Armenia, Belarus, Lithuania and Tajikistan), whereas the increase remained more moderate (< 30% increase) in another five countries (Azerbaijan, Kazakhstan, Latvia, the Republic of Moldova and Ukraine). In Estonia, the only country that has seen a sustained decrease in new diagnoses over the decade, the rate continued the steady decline that began after the 2001 peak in new diagnoses and which sustained through to 2017 (Table 1).

The number of newly diagnosed women increased by 16% across the 12 countries, from 8913 in 2008 to 10 329 in 2017, and the number of newly diagnosed men increased by 23%, from 13 082 to 16 130 (Tables 2 and 3).

Information about mode of transmission for the period 2008–2017 (Fig. 2.10) from the 11 countries with consistent data³¹ suggests the following.

- The number of new diagnoses in people with reported heterosexual transmission increased by 69%, from 10 505 in 2008 to 17 793 in 2017. The increase was considerably larger among men with heterosexual transmission (a 107% increase) than women with heterosexual transmission (21% increase). At the same time, the percentage of all new HIV diagnoses attributed to heterosexual contact increased from 48% of cases in 2008 to 68% in 2017.
- The number of new diagnoses in people infected through injecting drug use decreased by 36%, from 10 006 in 2008 to 6361 in 2017, but the number tripled in just three years in Lithuania and more than doubled over the decade in Belarus, despite a small decline in 2016–2017 that followed a peak in 2015 (Table 5). The percentage of all new HIV diagnoses attributed to injecting drug use decreased from 46% in 2008 to 24% in 2017.
- The number of new diagnoses in people infected through sex between men increased eight-fold, from 126 in 2008 to 1020 in 2017. This is by far the highest relative increase across the various transmission

modes and geographical areas. It is clearly visible on the logarithmic scale of Fig. 2.10, which enables easier comparison of rates of change regardless of starting point. The percentage of all new HIV diagnoses attributed to sex between men, while increasing, nevertheless remained low at 0.6% in 2008 and 4% in 2017.

- The number of children infected through mother-to-child transmission decreased by 30%, from 348 in 2008 to 242 in 2017, representing 1.6% of new HIV diagnoses in 2008 and 0.9% in 2017.
- The number of new diagnoses for which the mode of transmission was unknown increased by 22%, from 658 in 2008 to 803 in 2017. The percentage of new HIV diagnoses with unknown mode of transmission remained low and stable at 3% in both 2008 and 2017.

When combining data from the Russian Federation (1,2) within data from the 11 reporting countries with consistent data on mode of transmission in the East, the percentage of new HIV diagnoses with reported heterosexual transmission, among those with a known transmission mode, increased from 42% in 2008 to 59% in 2017, while the percentage acquired through injecting drug use decreased from 55% in 2008 to 37% in 2017.

Further analysis of the increase in new diagnoses attributed to heterosexual transmission in the East by gender and age groups (Fig. 2.11, no data from the Russian Federation) reveals continuing increases in older age groups for both men and women (it is highest in those aged ≥ 50 years, followed by the 40–49 and 30–39 age groups). Heterosexual transmission has nevertheless continued to decrease among young women of 15–24 and 25–29 years, by 59% and 36%, respectively. The number of new diagnoses among all men with reported heterosexual transmission doubled over the decade, while it increased only by 21% among women.

AIDS cases, morbidity and mortality in the East

In 2017, 11 454 people were diagnosed with AIDS from the 12 countries in the East that provided AIDS data, giving a rate of 10.2 per 100 000 population. The highest rates (> 5.0) were reported in Ukraine (21.9), the Republic of Moldova (6.9), Georgia (6.6) and Latvia (6.0) (Table 15).

The AIDS rate doubled between 2008 and 2017, from 5.1 per 100 000 population (5685 cases) to 10.2 (11 454 cases) in the 12 countries (Fig. 2.5). The rate of new AIDS diagnoses increased in all countries in the East except Estonia, most noticeably in Tajikistan and the Republic of Moldova, where the rate tripled, and in Azerbaijan and Ukraine, where it more than doubled. By mode of transmission, both in men infected through sex between men and in people infected heterosexually, the rate of new AIDS diagnoses increased four-fold between 2017 and 2008. AIDS cases in people infected through injecting drug use remained stable in comparison with 2007 but decreased by 40% in comparison with 2011 (Fig. 2.12).

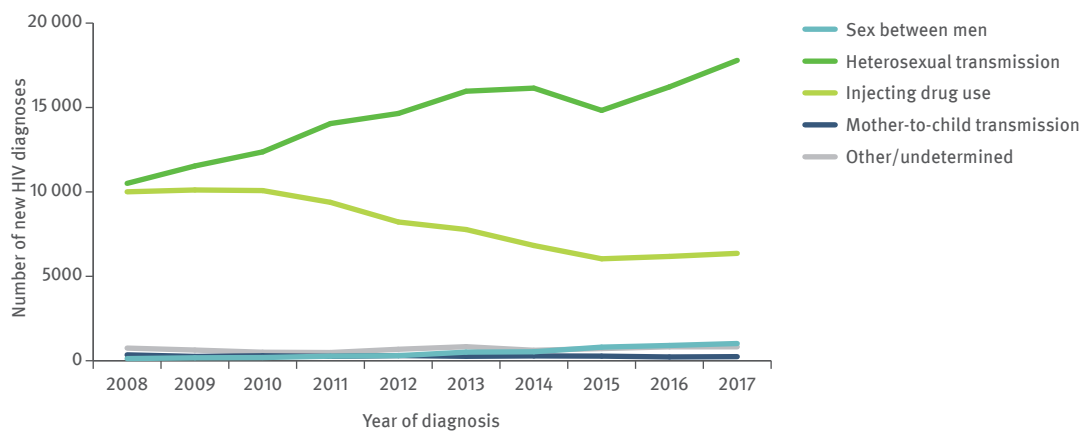
²⁹ No data were received from Turkmenistan and Uzbekistan; data from the Russian Federation were derived from the Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS (1–3).

³⁰ The drop in new diagnoses starting from 2014–2015 (Fig. 2.2b) is caused mainly by a decrease reported by Ukraine, which is partly related to a lack of data from parts of Ukraine since then.

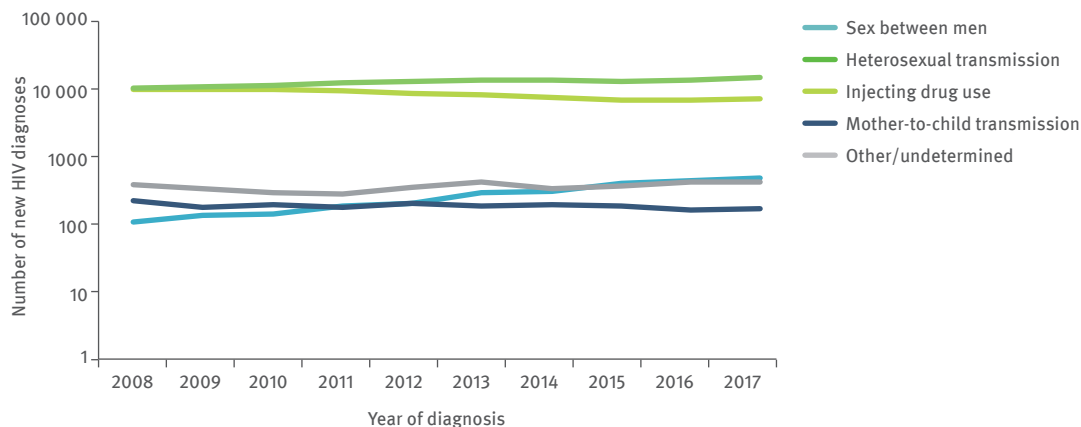
³¹ Data from the Russian Federation, Turkmenistan and Uzbekistan are not included due to inconsistent reporting during the period; data from Estonia were excluded due to incomplete reporting on transmission mode during the period.

Fig. 2.10. New HIV diagnoses, by transmission mode and year of diagnosis, East, 2008–2017

Arithmetic scale



Logarithmic scale



Note: data from the Russian Federation, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period; data from Estonia excluded due to incomplete reporting on transmission mode during the period.

The trend for more recent years, however, is that the AIDS rate has slowly been stabilizing and has even declined by a slight 7% since 2012.

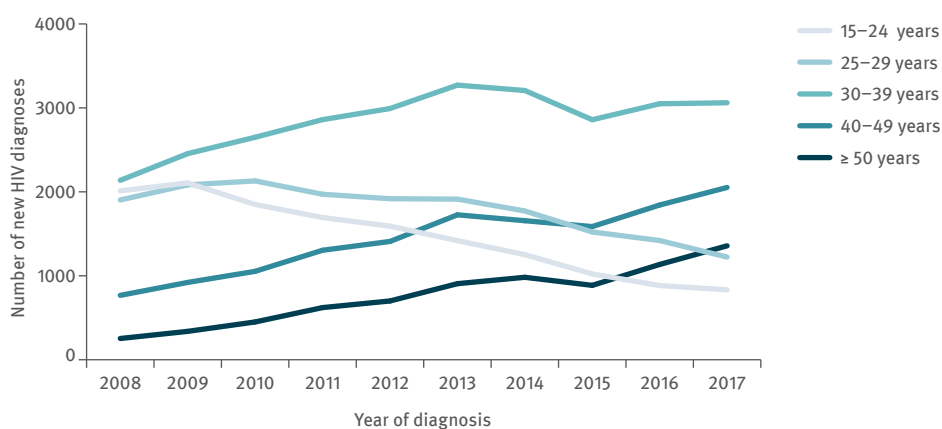
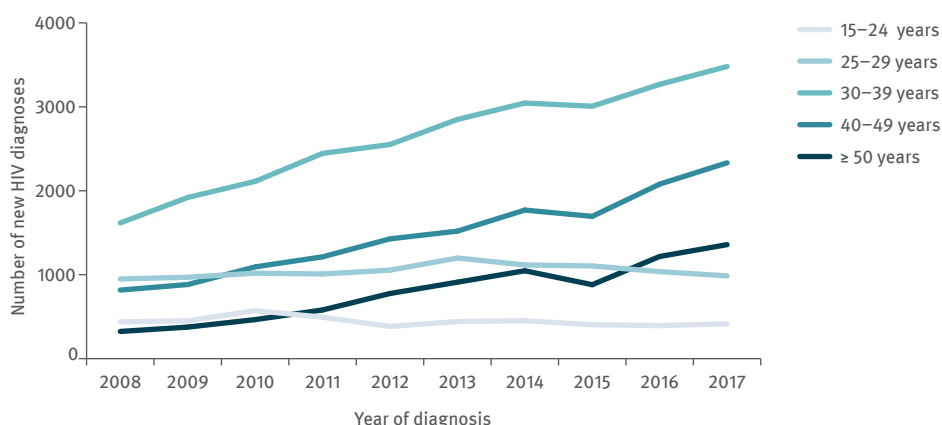
The most common AIDS-indicative diseases diagnosed in 2017 were wasting syndrome due to HIV (17% of all disease events reported), pulmonary TB (13%) and oesophageal candidiasis (9%) (Table 23). By transmission mode, pulmonary TB, wasting syndrome due to HIV and oesophageal candidiasis were the most common AIDS-defining diseases among people infected through heterosexual sex (the three diseases together accounting for 37% of reported events). The most common AIDS-defining diseases reported among people with AIDS infected through injecting drug use were extrapulmonary TB, pulmonary TB and wasting syndrome due to HIV (together accounting for 50% of reported events). Among the few AIDS cases infected through sex between men, *Pneumocystis pneumonia*, wasting syndrome due to HIV and pulmonary TB were the most common diseases (Fig. 2.13).

AIDS-related mortality remains high in the East, with 4120 reported AIDS-related deaths or deaths among people previously diagnosed with AIDS where cause of death (AIDS or non-AIDS related) was unknown or could not be reported in the 12 countries for 2017, comprising 84% of all deaths reported in the Region. This is a 22% increase in comparison with 2008 but a slight 11% decrease compared with 2012, which had the highest number of deaths reported for the decade (Table 25).

HIV and AIDS diagnoses in the Centre

HIV diagnoses in the Centre

The HIV epidemic in the Centre remains at a relatively low level compared to other parts of the Region, but the number of new diagnoses is increasing more rapidly here than elsewhere, notably in people infected through sex between men. A total of 6205 people were newly diagnosed with HIV in 2017 from the 15 countries in the

Fig. 2.11. Age-specific trends by gender in new HIV diagnoses with heterosexual transmission, East, 2008–2017**Females East, heterosexual transmission****Males East, heterosexual transmission**

Note: data from Estonia, Russian Federation, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

Centre of the WHO European Region, giving a rate of 3.2 per 100 000 population (Table 1). The highest rates (> 3.0) were reported by Cyprus (10.0), Montenegro (4.1), Poland (3.5), Turkey (3.5), Bulgaria (3.4), Romania (3.3) and Albania (3.2), and the lowest (< 2.0) by Bosnia and Herzegovina (0.3), Slovakia (1.3) and Slovenia (1.9).

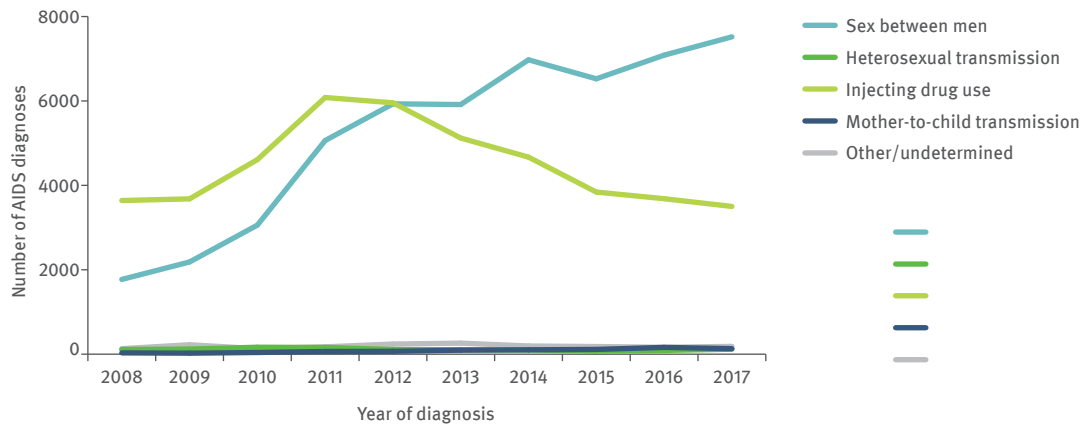
The most affected age group in 2017 was 30–39-year-olds (35% of cases), while 14% of cases were diagnosed in young people aged 15–24 years – the largest percentage of young people among the three geographical areas (Table A, Table 9). The male-to-female ratio was 5.8, higher than in both the West and the East, reflecting that the central part of the Region is seeing a high number of young MSM among newly diagnosed cases compared with other parts of the Region. The highest male-to-female ratios (> 15.0) were observed in Montenegro (25.0), Croatia (20.2), Slovenia (18.5) and Serbia (16.8) (Fig. 2.14).

All 15 countries provided information on the transmission mode, and the 2017 data (Table A, Tables 4–7) indicate the following.

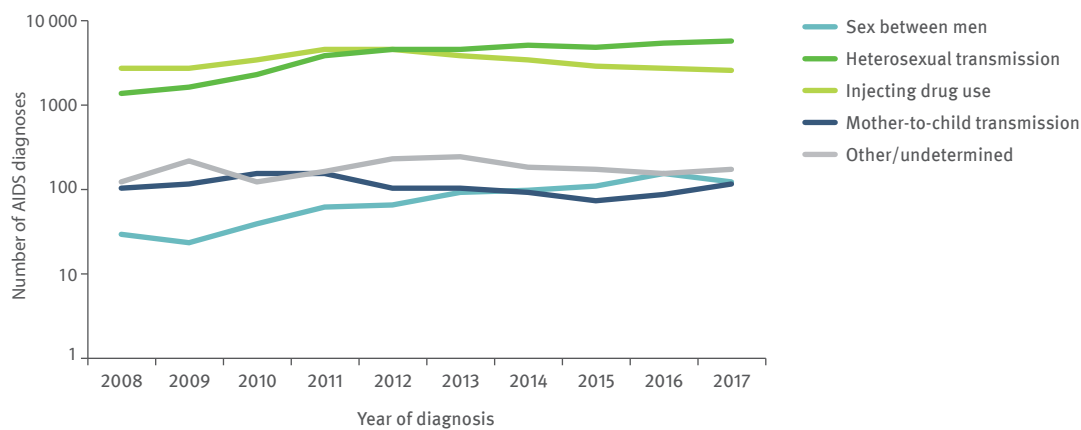
- Twenty-eight per cent of those newly diagnosed and 48% of new HIV diagnoses with a known route of transmission were infected through sex between men (1765) (Table 4). Sex between men was the predominant reported mode of transmission in 12 countries in 2017 (Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, the Czech Republic, Hungary, Montenegro, Serbia, Slovakia, Slovenia, Poland and the former Yugoslav Republic of Macedonia) (Fig. 2.15).
- Twenty-seven per cent of those newly diagnosed and 45% of new HIV diagnoses with a known route of transmission were infected through heterosexual transmission (1658) (Table 6), which was the main reported mode of transmission in three countries (Albania, Romania and Turkey) (Fig. 2.15).
- Three per cent of those newly diagnosed and 5% of new HIV diagnoses with a known route of transmission

Fig. 2.12. AIDS diagnoses, by transmission mode and year of diagnosis, East, 2008–2017

Arithmetic scale

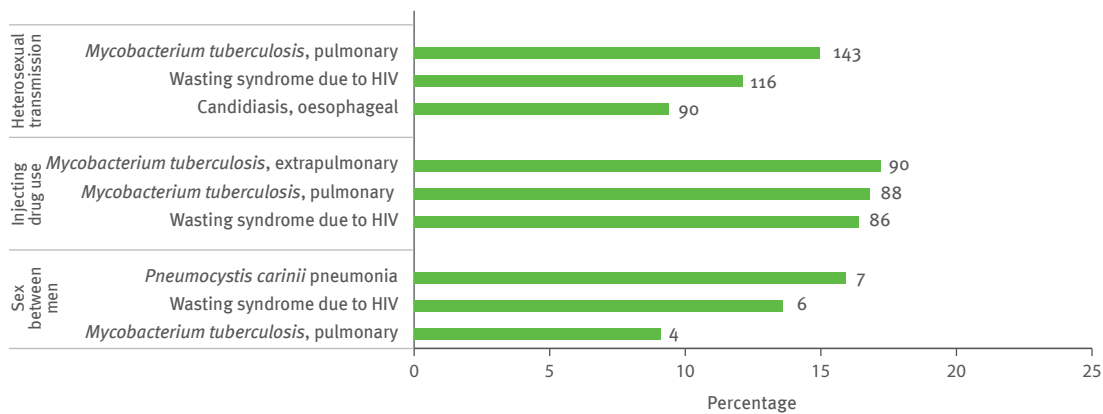


Logarithmic scale

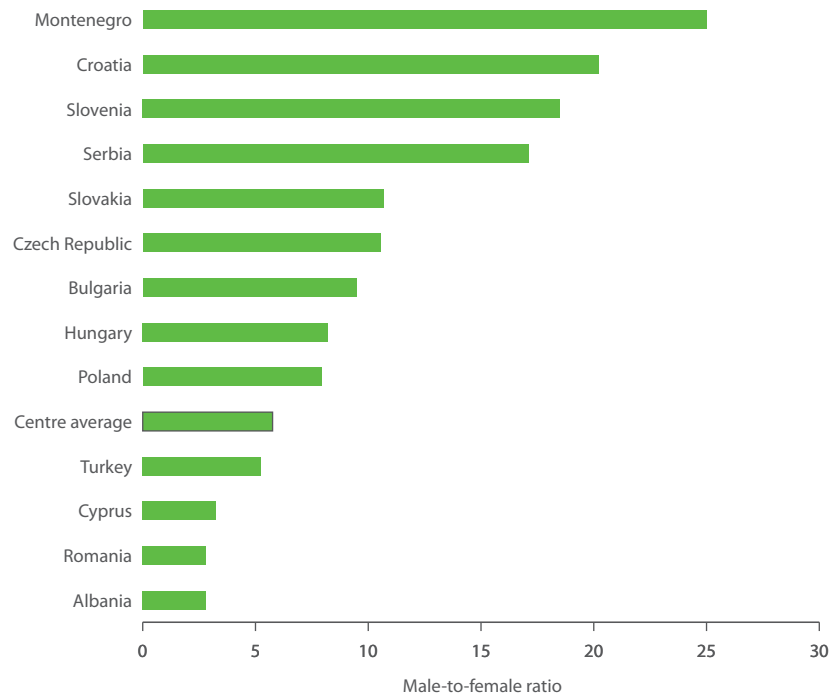


Note: data from the Russian Federation, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

Fig. 2.13. Distribution of the three most common AIDS-defining illnesses per transmission mode, East, 2017



Note: no data from the Russian Federation, Turkmenistan and Uzbekistan.

Fig. 2.14. Male-to-female ratio in new HIV diagnoses, by country, Centre, 2017

were infected through injecting drug use (169) (Table 5).

- One per cent (0.6) was infected through mother-to-child transmission (35) (Table 7).
- Transmission mode was unknown for 41% of those newly diagnosed (2556) (Table 8). The two countries with the highest number of new HIV diagnoses in 2017 (Turkey and Poland – together accounting for 67% of all new HIV diagnoses reported in the Centre in 2017) also had the highest percentage of new HIV diagnoses with an unknown transmission mode (Poland 66% and Turkey 54%).

Twelve of 15 countries provided information about CD4 cell count at HIV diagnosis for 1504 people aged over 14 years (covering 24% of new diagnoses in the 15 Centre countries and 86% in the 12 countries with CD4 cell data) (Table 14). Fifty-three per cent were late presenters, with CD4 cell counts below 350 per mm³ at HIV diagnosis, including 34% with advanced HIV infection (CD4 < 200/mm³). In all, 20% had a CD4 cell count of between 350 and 500 cells per mm³ and 28% had a CD4 cell count above 500 per mm³. The proportion diagnosed with CD4 counts of less than 350/mm³ was above 50% in five countries: Serbia (66%), Montenegro (62%), Romania (60%), Albania (59%) and Croatia (58%). The percentage of late presenters varied across transmission categories and was highest for those infected heterosexually (61%) and through injecting drug use (59%), and lowest for men infected through sex with men (43%) (Table 14, Fig. 2.16).

Trends in HIV diagnoses in the Centre

The rate of new HIV diagnoses increased by 121% between 2008 and 2017 in the 15 countries of the Centre, from 1.4 per 100 000 population (2627 cases) to 3.1 (6205 cases) (Fig. 2.3a, b). Rates increased in all countries, particularly in the former Yugoslav Republic of Macedonia (10-fold) and Turkey (five-fold), but it also more than doubled in Bulgaria, Cyprus and Montenegro.

Information on trends by reported mode of HIV transmission for the period 2008–2017 in the 13 countries with consistent data³² (Fig. 2.17) indicates the following.

- The number of new diagnoses in those infected through sex between men doubled, from 470 to 953. The percentage of new HIV diagnoses attributed to sex between men also increased, from 34% in 2008 to 47% in 2017.
- The number of new diagnoses in those infected through heterosexual transmission increased by 43%, from 550 to 789. The percentage of new HIV diagnoses attributed to heterosexual transmission remained stable at 39%.
- The number of new diagnoses in those infected through injecting drug use increased by 47%, from 87 to 128. The 2011–2013 outbreak in Romania that caused higher numbers of cases during this period has levelled off, as evidenced by the decrease in new diagnoses since 2013. The percentage of new

³² Data from Poland and Turkey were excluded due to incomplete reporting on transmission mode over the period.

Fig. 2.15. New HIV diagnoses, by country and transmission mode, Centre, 2017 (n = 6383)

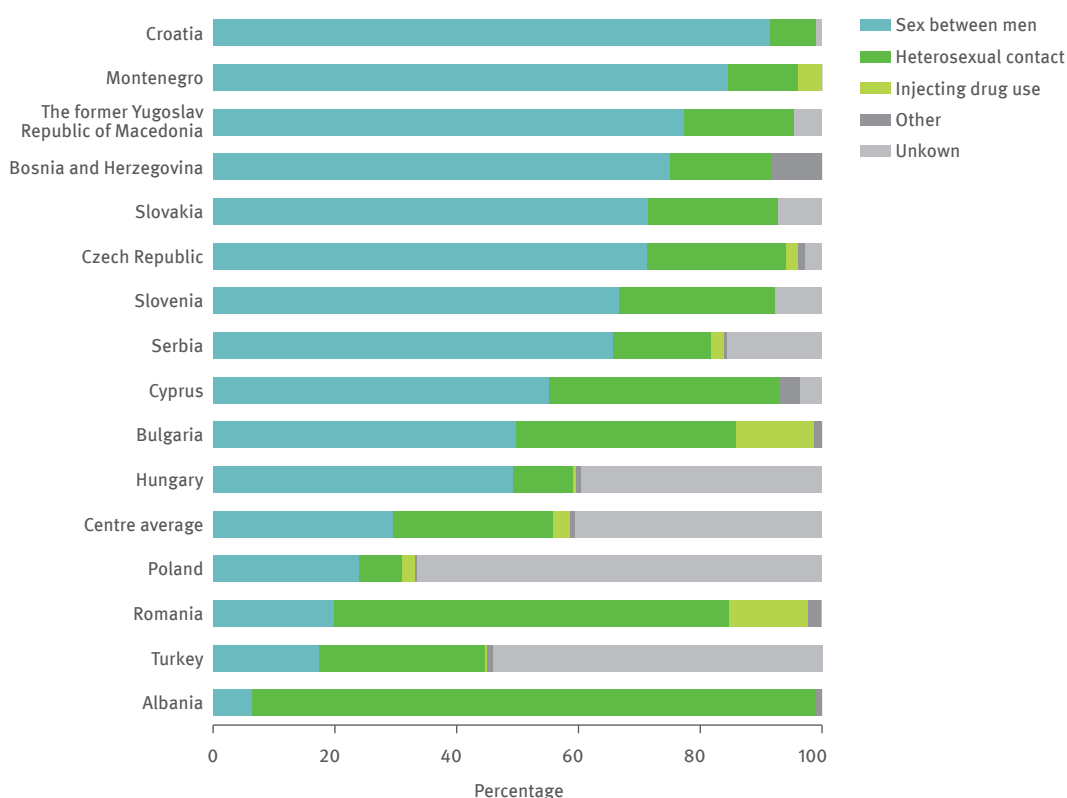
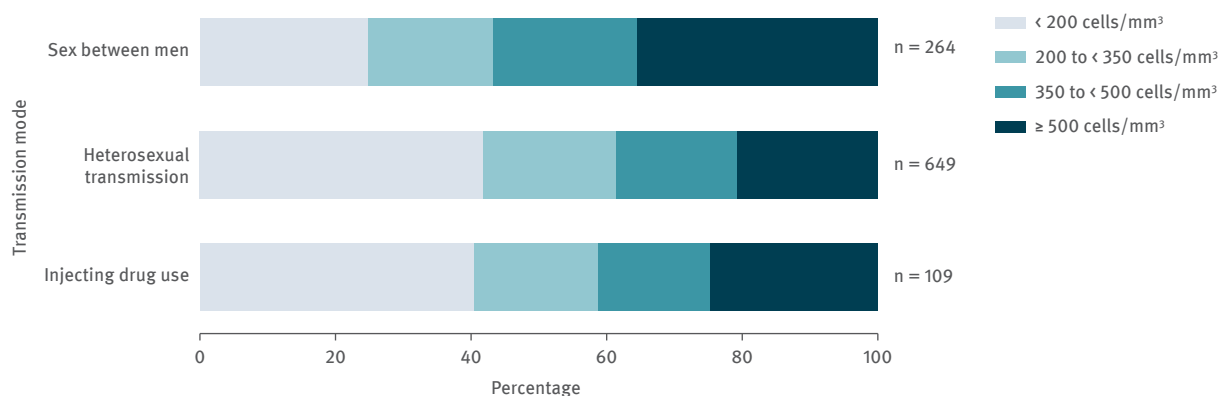


Fig. 2.16. New HIV diagnoses, by CD4 cell count per mm³ at diagnosis and transmission mode, Centre, 2017 (n = 1501)



Note: no data from Hungary, Poland and Turkey.

diagnoses attributed to injecting drug use remained stable at 6%.

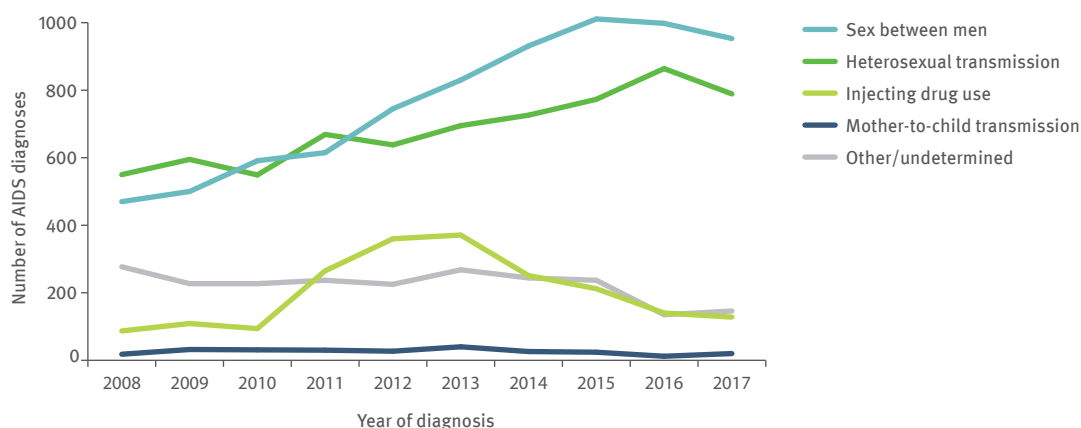
- The number of new diagnoses as a result of mother-to-child transmission was similar in 2008 (18) and 2017 (20), but with slightly higher numbers during 2009–2013.
- The number of new diagnoses reported with unknown transmission mode, although still high at 41% in the 15 countries in 2017, decreased by 49% from 273 to 138 in the 13 countries with consistent data on

transmission mode. The percentage of new diagnoses with missing information about transmission mode decreased from 19% in 2008 to 7% in 2017 in the 13 countries included in the trend assessment.

AIDS cases, morbidity and mortality in the Centre

In 2017, 823 people were diagnosed with AIDS in the 15 reporting countries in the Centre, corresponding to a rate of 0.4 per 100 000 population (Table 15). The highest rates (> 1.0) were reported by Montenegro (2.1),

Fig. 2.17. New HIV diagnoses, by transmission mode and year of diagnosis, Centre, 2008–2017



Note: data from Poland and Turkey excluded due to incomplete reporting on transmission mode during the period.

Cyprus (1.9), Romania (1.4) and Albania (1.1). AIDS rates remained below 0.8 per 100 000 population in other countries in the Centre. Contrary to the distribution of transmission modes for new HIV diagnoses in the Centre (where sex between men is the predominant mode), more AIDS diagnoses are reported in people infected through heterosexual contact (41% of new diagnoses) compared with sex between men (25% of new diagnoses).

The rate of new AIDS diagnoses remained stable at 0.4 per 100 000 between 2008 and 2017, with almost no change during the period (Fig. 2.5). Trends were more heterogeneous at country level. Of the 12 countries reporting more than 10 AIDS cases in 2017, the rate increased by more than 50% in five (Bulgaria, the Czech Republic, Hungary, Montenegro and Serbia) and decreased by 40% or more in one (Poland) (Table 15). In terms of the mode of transmission, new AIDS diagnoses increased mostly among men infected through sex between men (by 65% for the decade) but have stabilized or started to decline in all transmission groups since 2014 (Fig. 2.18).

The most common AIDS-indicative diseases diagnosed in 2017 were wasting syndrome due to HIV (19% of all recorded disease events), *Pneumocystis pneumonia* (13%) and pulmonary TB (12%) (Table 23).

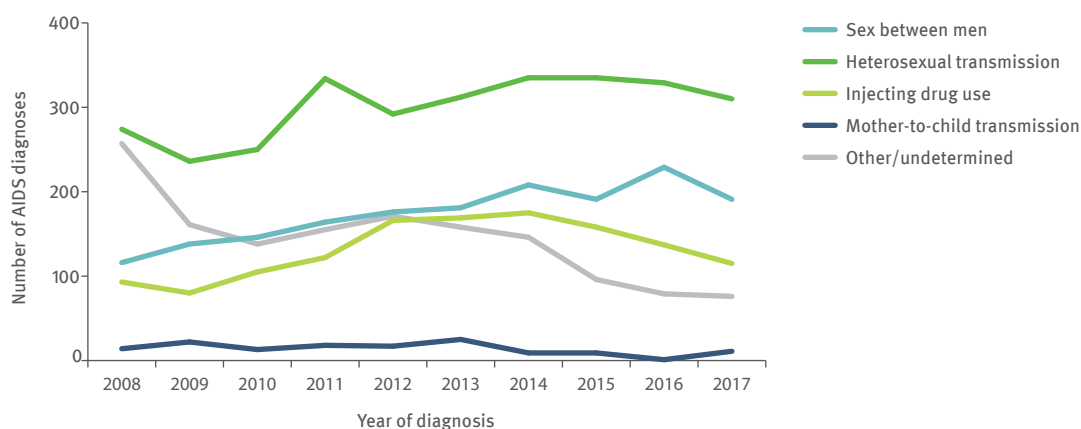
Mortality also remained stable in the Centre, with 261 deaths reported by the 15 countries in 2008 and 291 in 2017, with little variation over the decade (and slightly higher numbers during 2011–2015) (Table 24). As mentioned in the “AIDS cases, morbidity and mortality” section above, these numbers do not represent the true burden of AIDS-related mortality due to underreporting of deaths in countries that do not match their HIV/AIDS registries with the national mortality registry.

HIV and AIDS diagnoses in the West

HIV diagnoses in the West

The epidemiological pattern of HIV infection in the West largely mirrors that of the EU/EEA, as described in

Fig. 2.18. New AIDS diagnoses, by transmission mode and year of diagnosis, Centre, 2008–2017



Note: data from Turkey excluded due to incomplete reporting on transmission mode during the period.

Chapter 1. In 2017, 22 354 people were newly diagnosed with HIV in the 22 reporting countries³³ in the West of the WHO European Region, giving a rate of 6.4 per 100 000 population (not adjusted for reporting delay) (Table A, Table 1). When adjusting the 2017 West rate for reporting delay,³⁴ it increases to 6.9 per 100 000 population (23 976 cases).

In 2017, the highest proportion of newly diagnosed HIV infections (30%) were in 30–39-year-olds, 11% were aged 15–24 years and the male-to-female ratio was 2.9 (Table A). Sexual transmission between men remained the main transmission mode in 2017, followed by heterosexual transmission, together accounting for 74% of all new diagnoses and 94.5% of all cases with a known route of transmission.

In the 17 countries reporting information on CD4 cell count at HIV diagnosis for 15 433 people over 14 years (covering 69% of all new diagnoses from the 22 reporting countries in the West and 70% of new diagnoses from the 17 countries reporting information on CD4 cell counts), 48% were late presenters with CD4 cell counts below 350 per mm³ at HIV diagnosis, including 28% with advanced HIV infection (CD4 < 200/mm³) (Table 14). Late presentation varied by transmission category and was more common in people infected heterosexually (57%) or through injecting drug use (52%) and less common in men infected through sex with men (39%) (Table 14).

Information about transmission mode (Table A, Tables 4–7) suggests the following.

- Forty per cent of all people newly diagnosed and 51% of those with a known mode of transmission were infected through sex between men (8872) (Table 4).
- Thirty-four per cent of all people newly diagnosed and 44% of those with a known mode of transmission were infected heterosexually (7664) (Table 6). Of these, 60% were born abroad and 41% originated from generalized epidemic countries (data not shown).
- Three per cent of all people newly diagnosed were infected through injecting drug use (603) (Table 5).
- Mother-to-child transmission accounted for 0.5% of all new diagnoses and 0.7% of those with a known route of transmission (120 cases) (Table 7). Of these, 78% were born abroad and 62% originated from countries with a generalized epidemic (data not shown).
- Transmission mode was unknown for 23% of all new diagnoses (5032).

Information about country of birth, country of nationality or region of origin was provided by 20 countries for 22 350 new diagnoses in 2017 (covering nearly 100% of all new diagnoses). Region of origin was unknown for 15% (3406). Among 18 944 people with known origin (85%), 47% (8950) originated from outside of the reporting country, including 36% (6783) from outside the WHO

European Region and 11% (2167) from a European country other than the country of report (Table 11).

Trends in HIV diagnoses in the West

The crude rate of new diagnoses in the 22 reporting countries declined by 32% between 2008 and 2017, from 9.4 per 100 000 population (27 530) to 6.4 (22 354) (not adjusted for reporting delay³⁵). After adjusting the 2017 rate for reporting delay, the decline was 27% (from 9.4 to 6.9 per 100 000 population, with 23 976 cases in 2017). HIV rates increased (by 10% or more in countries with >10 cases in both 2008 and 2017) in only three countries, Iceland, Ireland and Malta, and decreased (by 10% or more) in 14 (Table 1), not taking into account the impact of reporting delays in several countries. Information about trends by reported transmission mode during the period 2008–2017 in the 20 countries with consistent data³⁶ (Fig. 2.19) suggests the following.

- New diagnoses of people infected through sex between men decreased by 21%, from 7349 to 5806. The percentage of new diagnoses attributed to sex between men increased from 34% in 2008 to 37% in 2017.
- New diagnoses of people with reported heterosexual transmission decreased by 49%, from 10 039 to 5153, with the steepest decline among women and foreign-born heterosexuals, the latter being mainly due to sharp declines among migrants originating from countries with generalized HIV epidemics (data not shown; see also Fig. 1.11 and 1.12 and the “Trends in HIV diagnoses” section of Chapter 1). The percentage of new diagnoses attributed to heterosexual contact decreased from 47% of cases in 2008 to 33% in 2017.
- New diagnoses of people infected through injecting drug use decreased by 57%, from 941 in 2008 to 404 in 2017, representing 4% of new HIV diagnoses in 2008 and 3% in 2017.
- New diagnoses of children infected through mother-to-child transmission decreased by 60%, from 253 in 2008 to 102 in 2017.
- The number of new diagnoses with missing information about transmission mode increased by 51%, from 2741 to 4145, corresponding to 13% of new diagnoses in 2008 to 26% in 2017. Delays in the reporting of probable mode of transmission to national and European surveillance systems intensify the increase.

AIDS cases, morbidity and mortality in the West

Twenty of the 23 countries in the West³⁷ reported that 2426 people were diagnosed with AIDS in 2017, giving a rate of 0.7 per 100 000 population (Table 15). The steady decline in new AIDS diagnoses that began in the late

³³ Due to technical problems, no data export for 2017 was available from Germany.

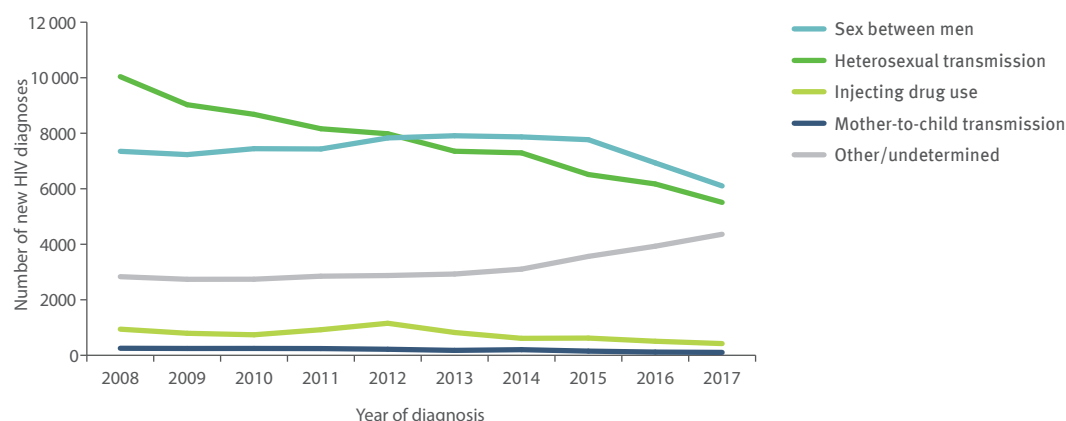
³⁴ See Annex 1 for methods and Annex 6 for results.

³⁵ See Annex 1 for methods and Annex 6 for results.

³⁶ Data from Italy and Spain were excluded due to increasing coverage of national surveillance over the period; data from Germany were excluded due to lack of data for 2017.

³⁷ No data were available from Belgium, Germany or Sweden.

Fig. 2.19. New HIV diagnoses, by transmission mode and year of diagnosis, West, 2008–2017



Note: data from Germany excluded due to lack of data for 2017, data from Italy and Spain excluded due to increasing coverage of national surveillance during the period.

1990s continued through to 2017, with a 59% decrease in the rate of new AIDS cases over the decade from 2.1 per 100 000 population (6516 cases) in 2008 to 0.7 (2426 cases) in 2017 (Fig. 2.5). New AIDS diagnoses decreased in all transmission groups, but most notably among people who inject drugs (an 84% decline) (Fig. 2.20).

The most common AIDS-indicative diseases diagnosed in the West in 2017 were *Pneumocystis pneumonia* (24% of all disease events reported), oesophageal candidiasis (11%) and Kaposi’s sarcoma (9%) (Table 23).

In the West, 552 people were reported to have died in 2017 in the 19 countries for which consistent data were available³⁸ (Table 24). The number of AIDS-related deaths has continued to decline during the decade from 2026 in 2008 to 552 in 2017, representing a 73% decrease. As mentioned in the “AIDS cases, morbidity and mortality” section above, these numbers do not reflect the true burden of AIDS-related mortality in the

³⁸ No data were available from Belgium, Germany, Italy and Sweden.

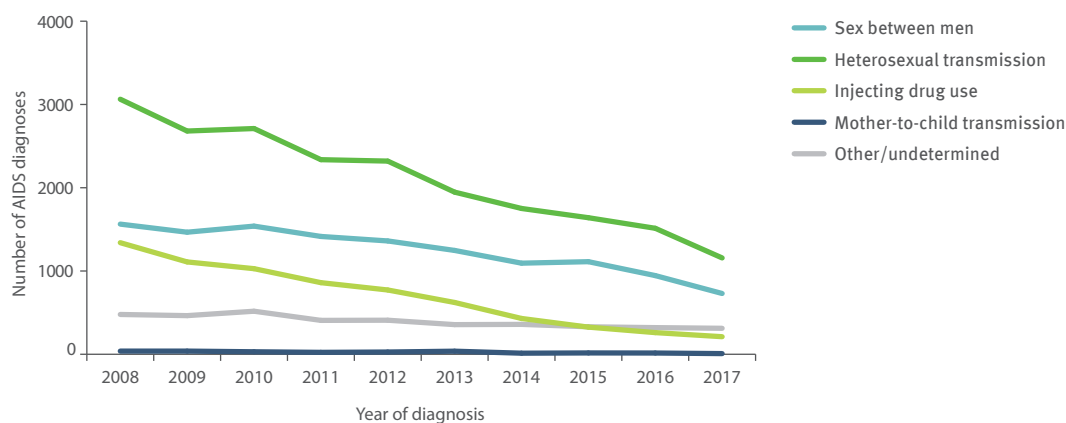
West of the Region due to reporting delays and, particularly, underreporting of deaths in countries without the ability to link their HIV/AIDS registries with their vital statistics registries.

HIV testing

Data on the number of HIV tests can support the interpretation of trends in newly diagnosed HIV infections. A total of 24 153 146 HIV tests (excluding unlinked anonymous tests and screening of blood donations) were reported by 30 countries (12 East, 10 Centre and 8 West) for 2017. Countries in the East tended to report higher testing rates than those in the West and Centre, but rates varied greatly across countries from all parts of the Region, and more data were available from countries in the Centre and East than the West (Table 26).

The overall number of tests performed in the Region increased by 34%, from 17 551 854 in 2008 to 23 436 301 in 2017 in 28 countries with data for both 2008 and 2017. Increases in large countries with high testing

Fig. 2.20. New AIDS diagnoses, by transmission mode and year of diagnosis, West, 2008–2017



Note: data from Belgium, Germany and Sweden excluded due to inconsistent reporting during the period.

numbers, such as Belarus, France, Kazakhstan, Turkey and Ukraine, had a considerable impact on the overall increase. The number of tests more than doubled in eight countries, but information about testing yield or coverage among key populations at higher risk of HIV infection is not available here.

The number of HIV tests from the 12 reporting countries in the East of the Region increased by 46%, from 5 818 930 in 2008 to 8 506 795 in 2017 (Table 27). Information about the types of populations tested is not available, however, and increasing numbers of HIV tests do not necessarily generate higher testing yields if large numbers of HIV tests are performed among people at low risk of HIV infection. It is nevertheless possible that increased testing activity has contributed to the observed increase in new diagnoses. This is supported by improved estimates of the first of the three UNAIDS and WHO 90–90–90 targets: at the end of 2017, an estimated 74% of people living with HIV knew their status, up from 66% in 2015 (for more details on estimates, see UNAIDS (6)).

The rate of new HIV diagnoses in the Centre more than doubled during the last decade, while the number of HIV tests increased by 42% (from 6 010 936 in 2008 to 8 506 941 in 2017) in the 10 countries for which consistent data were available.³⁹ While it is difficult to make assessments based on these crude numbers, it appears less likely that increased testing has substantially contributed to the observed increase in new diagnoses.

The number of HIV tests conducted in the West is not reported separately here. Contrary to countries in the East and Centre, many in the West do not systematically collect data on the number of HIV tests performed. This results in data that are too sparse to allow for meaningful interpretation.

Conclusions

HIV infection continues to affect the health and well-being of more than 2 million people in the WHO European Region and to be of serious public health concern, particularly in the central and eastern parts of the Region. New surveillance data for 2017 show that the increasing trend in new HIV diagnoses continued for the WHO European Region, but at a slower rate for the last decade than previously. The slowing rate of increase appears to be due mainly to fewer new diagnoses among women than men, with some variation across the Region.

Nearly 160 000 people were diagnosed with HIV infection in 2017, at a rate of 20.0 diagnoses per 100 000 population – once again the highest rate ever reported for the Region. The vast (and increasing) majority of people newly diagnosed (82%) were from the East, with a soaring rate of 51.1 per 100 000 population, while 14% were diagnosed in the West with a rate of 6.4 per 100 000 population, and 4% in the Centre with a rate of

3.2 per 100 000 population. Two countries (the Russian Federation and Ukraine) continued to have a major influence on the overall epidemiology of HIV in the WHO European Region in 2017, contributing 75% of newly diagnosed infections in the Region and 92% in the East.

The 2017 HIV surveillance data also confirm the great variation of epidemic patterns and trends across the WHO European Region. Overall, among the 160 000 new diagnoses for whom the mode of HIV transmission was known, heterosexual transmission accounted for just over half, injecting drug use for a third and sex between men for 15%. These overall numbers conceal a complex mix of transmission patterns, trends and country contexts in which transmission through sex between men tends to predominate in the western and central parts of the Region, heterosexual transmission remains substantial across large parts of the Region – particularly among migrants, travellers and partners of people who inject drugs – and injecting drug use remains an important risk factor, mainly in the eastern part of the Region.

The increase in new diagnoses in the East of the Region continued, with 2017 continuing the trend of recent years in becoming the year with the highest number and rate ever recorded. The relative burden of new diagnoses reported in the East is high and increasing, reaching 82% in 2017. The rate of increase appears to be levelling off, however, with a 68% increase for the decade (compared with a doubling for the decade identified in last year's report) and a slight 2% increase for the last year. The rate increased more slowly for the decade among women than men.⁴⁰

In terms of modes of HIV transmission, the overall increase is mainly the result of sustained increases among people with reported heterosexual transmission in all countries, meaning that this mode dominates, with 59% of new diagnoses in 2017 for whom the mode of HIV transmission was known. Transmission through injecting drug use continued to decrease during the decade but still accounted for 37% of new diagnoses in the East with a known transmission mode. Transmission through sex between men remains low in absolute terms but increased nearly eight-fold over the decade – the largest increase in any transmission category and any geographical area of the Region. Limited available data on the probable source of infection among people infected through heterosexual contact suggests ongoing heterosexual transmission occurring outside of the reporting countries and related to partners with a history of injecting drug use. There is also some evidence to suggest that a proportion of men reported as heterosexually infected may in fact be men who have sex with men or people with a history of drug injection who may have been misclassified as heterosexually infected (7). While most new diagnoses (61%) were in men and new diagnoses increased more rapidly among men than women, the

³⁹ The 10 countries are Albania, the Czech Republic, Montenegro, Poland, Romania, Serbia, Slovenia, Slovakia, the former Yugoslav Republic of Macedonia and Turkey.

⁴⁰ A drop in new diagnoses reported by Ukraine from 2014–2015 onwards is affecting the trend for the East and is partly related to a lack of data from parts of Ukraine since then.

proportion of new diagnoses among women was much higher in the East than elsewhere in the Region.

Following repeat calls for urgent action, most recently by the WHO Regional Director for Europe during a ministerial policy dialogue on HIV and related comorbidities in EECA (8), countries in the East of the Region are revamping their political commitment and scaling up efforts to implement the evidence-based actions and interventions outlined in the WHO action plan for the health sector response to HIV in the WHO European Region (9), unanimously endorsed by all 53 Member States during the 66th Regional Committee for Europe in September 2016. Country-specific roadmaps for accelerating and scaling up efforts to reach the UNAIDS and WHO 2020 targets are being prepared as a follow-up action from the ministerial policy dialogue with the goal of strengthening political commitment and reinforcing a common agenda among key policy-makers, partners, funders and implementers. The recommended actions and interventions of the action plan include: comprehensive HIV combination-prevention strategies for people at risk of heterosexual and drug-injection-related transmission, including harm-reduction interventions for people who use drugs; condom and lubricant programming; diversified HIV testing services (use of rapid diagnostic tests, HIV testing provided by lay providers and HIV self-testing); assisted voluntary partner notification (10,11); PrEP; prevention and management of co-infections; and a treat-all approach (12,13). Further interventions aimed at reducing stigma and discrimination and eliminating laws and policies that hamper access to, and uptake of, crucial HIV prevention and treatment services for key populations are needed to facilitate further progress in the reduction of HIV transmission (14).

The rate of new diagnoses is increasing more rapidly in the central part of the Region than anywhere else in the WHO European Region, with a strong gender disparity and very steep increases among men (both MSM and heterosexual men) compared with a fairly stable rate among women. Sexual transmission prevails in all countries, with sex between men being the predominant mode of transmission in 12 of the 15 Centre countries and reported heterosexual transmission prevailing in three. Drug-injection-related transmission remains low but recent outbreaks (15) suggest that HIV prevention services for people who inject drugs continue to be important and must be retained with sufficient coverage among people who inject drugs to prevent outbreaks. The percentage of young people among the new diagnoses is also higher in this part of the Region than elsewhere. HIV prevention, diagnostics and treatment interventions should accommodate the needs of key populations, particularly MSM, with relevant evidence-based interventions, including: condom and lubricant programming; diversified HIV testing services; assisted voluntary partner notification; PrEP; prevention and management of co-infections (particularly sexually transmitted infections); and rapid HIV treatment initiation. Services should be patient-centred and provided in a friendly environment, preferably with the involvement

of civil society along the entire HIV continuum of services, ranging from HIV prevention, to adherence, to ART.

In the western part of the Region, there is a clear decline in the overall rate of new HIV diagnoses for the decade, resulting primarily from decreases in new diagnoses among MSM in specific countries (Austria, Belgium, Denmark, the Netherlands, Norway, Spain and the United Kingdom) and from declines among people infected heterosexually, particularly women and people originating from countries with generalized HIV epidemics. Continued strong HIV combination prevention, including the use of formal and informal PrEP, implementation of diversified and user-friendly HIV testing services with more frequent testing to facilitate earlier diagnosis, early linkage to care and rapid initiation of ART, and a strong focus on interventions designed to reach MSM (16,17) have all contributed to the observed declines. While a certain proportion of migrants, even those originating from HIV-endemic areas, are known to acquire HIV after arrival in the EU/EEA (18–20), the extent to which the observed decreases can be explained by lower incidence of HIV in the migrant populations, reduced testing-seeking or opportunities, changed migration patterns or a combination of factors, is unclear.

Across the WHO European Region where migrations occur widely in various forms, the public health challenge of ensuring access to health services for migrant populations, including HIV services, and promoting cross-border collaboration and sharing of data remains essential to a robust and people-centred public health response.

As in previous years, it remains a major concern that over half (53%) of those newly diagnosed with HIV are only detected once their CD4 cell counts have fallen to below 350 per mm³. Importantly, the 2017 data provide once again information about variations in late presentation by geography, transmission mode and age, and confirm that the proportion diagnosed at a late stage of infection was highest in the East, among people infected heterosexually (particularly men) and through injecting drug use, and among people in older age groups.

Late presentation reflects insufficient access to, and uptake of, HIV testing and counselling by those most at risk, as well as poor linkage to care after a positive HIV diagnosis. HIV testing strategies need to be reconsidered and diversified, including through innovative approaches that involve community-based organizations and focus on the most affected population groups. Multiple entry points to HIV testing should be available through, for example, HIV self-testing, HIV testing performed by lay providers and civil society, home sampling, routine indicator condition-guided HIV testing offered in the health system and assisted partner notifications. HIV testing should also be available in settings such as prisons, drug-dependence programmes, sexual and reproductive health clinics and migrant health services, depending on the local context. Support for timely linkage to HIV treatment and care is essential for reducing late presentation and progressing toward the UNAIDS

and WHO 90–90–90 targets (21), improving treatment outcomes and reducing further HIV transmission.

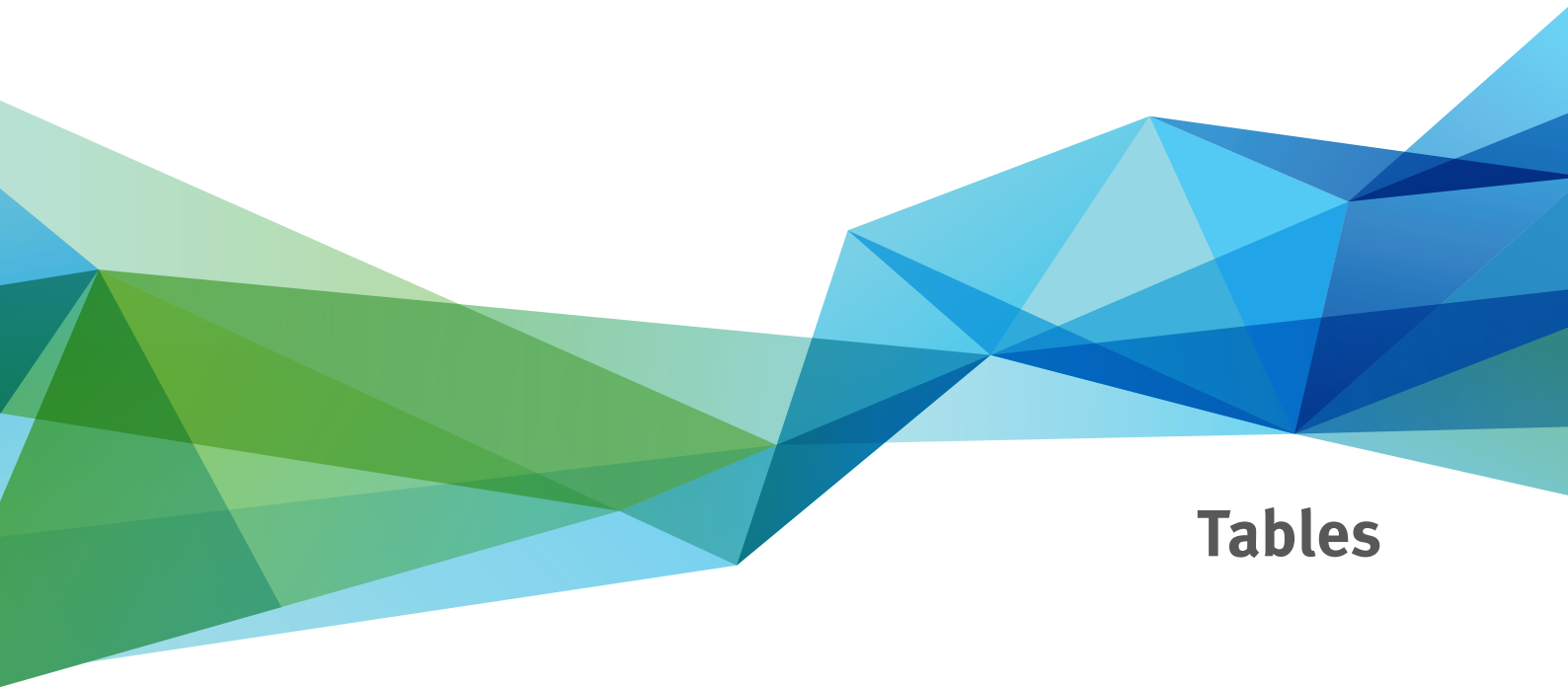
AIDS trends varied greatly across the three geographical areas. While the rate continued its steady decline in the West, it remained stable in the Centre and, while still soaring and doubling over the decade in the East of the Region, the AIDS rate has begun to stabilize and has even declined by a slight 7% in the East since 2012. The high number of AIDS cases is indicative of late HIV diagnosis, delayed initiation of life-saving HIV treatment and low treatment coverage. However, increasing implementation of a treat-all approach and having policies in place in most countries in the East to support everyone living with HIV to be offered ART regardless of disease stage has helped stabilize AIDS trends and will, ultimately, help prevent people from dying and reduce AIDS-related deaths in line with global and regional targets (9,22,23).

To help address the ongoing transmission of HIV in Europe, countries are urged to implement the action plan for the health sector response to HIV in the WHO European Region as part of an urgent, accelerated and innovative response to HIV that aims to meet the regional targets for 2020 and end the AIDS epidemic in Europe by 2030, in line with the SDGs (24). From December 2017 to April 2018, the WHO Regional Office for Europe collected examples of good practices in implementation of the action plan solicited from national health authorities, national and international experts and civil society organizations involved in HIV prevention, testing, treatment and care, and published 52 examples from 33 Member States in the first compendium of good practices from the WHO European Region (25). Other recently published documents also share experiences of successful HIV, viral hepatitis and tuberculosis interventions and good practices (26), as well as principles and actions for stronger intersectoral collaboration (27) aiming to reach the SDGs and improving health outcomes and quality of life for people at risk of, or living with, the three diseases.

References

- Information note 'Spravka' on HIV infection in the Russian Federation as of 31 December 2017. Moscow: Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS; 2018.
- Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS. HIV-infection Bulletin No. 41. Moscow: Federal Service for Surveillance of Consumer Rights Protection and Human Well-being; 2016.
- Information note 'Spravka' on HIV infection in the Russian Federation as of 31 December 2016. Moscow: Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS; 2017.
- EuroHIV. EuroHIV 2006 survey on HIV and AIDS surveillance in the WHO European Region. Saint-Maurice: Institut de veille sanitaire; 2007.
- ECDC/WHO Regional Office for Europe. HIV/AIDS surveillance in Europe 2017–2016 data. Stockholm: ECDC; 2017 (<https://ecdc.europa.eu/en/publications-data/hivaids-surveillance-europe-2017-2016-data>).
- Annex on methods. In: Miles to go. Global AIDS update 2018. Geneva: UNAIDS; 2018:255–64 (http://www.unaids.org/sites/default/files/media_asset/miles-to-go_en.pdf).
- Čakalo JI, Božičević I, Vitek CR, Mandel JS, Salyuk TO, Rutherford GW. Misclassification of men with reported HIV infection in Ukraine. *AIDS Behav.* 2015;19:1938–40.
- Ministerial policy dialogue on HIV and related comorbidities in eastern Europe and central Asia. In: WHO Regional Office for Europe [website]. Copenhagen: WHO Regional Office for Europe; 2018 (<http://www.euro.who.int/en/media-centre/events/events/2018/07/ministerial-policy-dialogue-on-hiv-and-related-comorbidities-in-eastern-europe-and-central-asia>).
- Action plan for the health sector response to HIV in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2016 (<http://www.euro.who.int/en/health-topics/communicable-diseases/hivaids/publications/2017/action-plan-for-the-health-sector-response-to-hiv-in-the-who-european-region-2017>).
- Consolidated guidelines on HIV testing services. Geneva: World Health Organization; 2015 (<http://www.who.int/hiv/pub/guidelines/hiv-testing-services/en/>).
- Guidelines on HIV self-testing and partner notification. Supplement to consolidated guidelines on HIV testing services. Geneva: World Health Organization; 2016 (<http://www.who.int/hiv/pub/self-testing/hiv-self-testing-guidelines/en/>).
- Consolidated guidelines on the use of antiretroviral drugs for treating and preventing HIV infection. Recommendations for a public health approach. Second edition. Geneva: World Health Organization; 2016 (http://apps.who.int/iris/bitstream/10665/208825/1/9789241549684_eng.pdf?ua=1).
- INSIGHT START Study Group. Initiation of antiretroviral therapy in early asymptomatic HIV infection. *N Engl J Med.* 2015;373(9):795–807.
- Consolidated guidelines on HIV prevention, diagnosis, treatment and care for key populations. Geneva: World Health Organization; 2014 (<https://www.who.int/hiv/pub/guidelines/keypopulations-2016/en/>).
- Hedrich D, Kalamara E, Sfetcu O, Pharris A, Noor A, Wiessing L et al. Human immunodeficiency virus among people who inject drugs: is risk increasing in Europe? *Euro Surveill.* 2013;18(48):pii=20648 (<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20648>).
- HIV and STI prevention among men who have sex with men. ECDC guidance. Stockholm: ECDC; 2014 (<http://ecdc.europa.eu/en/publications/Publications/hiv-sti-prevention-among-men-who-have-sex-with-men-guidance.pdf>).
- United Nations Population Fund, Global Forum on MSM and HIV, United Nations Development Programme, World Health Organization, United States Agency for International Development, the US President's Emergency Plan for AIDS Relief, the Bill & Melinda Gates Foundation. Implementing comprehensive HIV and STI programmes with men who have sex with men. New York (NY): United Nations Population Fund; 2015 (<https://www.unfpa.org/publications/implementing-comprehensive-hiv-and-sti-programmes-men-who-have-sex-men>).
- Rice BD, Elford J, Yin Z, Delpech VC. A new method to assign country of HIV infection among heterosexuals born abroad and diagnosed with HIV. *AIDS* 2012;26(15):1961–6.
- Fakoya I, Alvarez-del Arco D, Woode-Owusu M, Monge S, Rivero-Montesdeoca Y, Delpech V et al. A systematic review of post-migration acquisition of HIV among migrants from countries with generalised HIV epidemics living in Europe: implications for effectively managing HIV prevention programmes and policy. *BMC Public Health* 2015;15:561.
- Fakoya I, Alvarez-Del Arco D, Monge S, Copas AJ, Gennotte A-F, et al. HIV testing history and access to treatment among migrants living with HIV in Europe. *J Int AIDS Soc.* 2018;21(Suppl. 4):e25123 (<https://onlinelibrary.wiley.com/doi/epdf/10.1002/jia2.25123>).
- Ambitious treatment targets: writing the final chapter of the AIDS epidemic. Geneva: UNAIDS; 2014 (http://www.unaids.org/sites/default/files/media_asset/JC2670_UNAIDS_Treatment_Targets_en.pdf).
- Global health sector strategy for HIV 2016–2021. Geneva: World Health Organization; 2016 (<http://www.who.int/hiv/strategy2016-2021/ghss-hiv/en/>).
- On the fast-track to end AIDS. 2016–2021 strategy. Geneva: UNAIDS; 2015 (http://www.unaids.org/sites/default/files/media_asset/20151027_UNAIDS_PCB37_15_18_EN_rev1.pdf).
- United Nations General Assembly resolution A/RES/70/1. Transforming our world: the 2030 Agenda for Sustainable Development. New York (NY): United Nations; 2015 (<https://sustainabledevelopment.un.org/post2015/transformingourworld>).
- Compendium of good practices in the health sector response to HIV in the WHO European Region. Copenhagen: WHO Regional Office for Europe; 2018 (<http://www.euro.who.int/en/publications/abstracts/compendium-of-good-practices-in-the-health-sector-response-to-hiv-in-the-who-european-region>).

26. European Commission Staff Working Document on Combatting HIV/AIDS, viral hepatitis and tuberculosis. Brussels: European Commission; 2018 (https://ec.europa.eu/health/sites/health/files/communicable_diseases/docs/swd_2018_387_en.pdf).
27. United Nations common position on ending HIV, TB and viral hepatitis through intersectoral collaboration. Copenhagen: WHO Regional Office for Europe; 2018 (http://www.euro.who.int/__data/assets/pdf_file/0005/382559/ibc-health-common-position-paper-eng.pdf?ua=1).



Tables

Table 1. New HIV diagnoses and rates per 100 000 population, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of start of reporting	2008		2009		2010		2011		2012	
			N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA												
West	Austria	1980	381	4.6	337	4.0	352	4.2	351	4.2	357	4.2
West	Belgium	1985	1 092	10.2	1 112	10.3	1 182	10.9	1 170	10.6	1 226	11.1
Centre	Bulgaria	1986	123	1.6	171	2.3	163	2.2	201	2.7	157	2.1
Centre	Croatia	1985	73	1.7	55	1.3	71	1.7	74	1.7	73	1.7
Centre	Cyprus	1986	37	4.8	38	4.8	41	5.0	54	6.4	58	6.7
Centre	Czech Republic	1985	148	1.4	156	1.5	180	1.7	153	1.5	212	2.0
West	Denmark	1990	285	5.2	236	4.3	275	5.0	266	4.8	201	3.6
East	Estonia	1988	545	40.7	411	30.8	376	28.2	366	27.5	315	23.8
West	Finland	1980	147	2.8	172	3.2	184	3.4	172	3.2	156	2.9
West	France	2003	5 768	9.0	5 462	8.5	5 548	8.6	5 419	8.3	5 671	8.7
West	Germany ^c	1993	2 824	3.4	2 857	3.5	2 695	3.3	2 661	3.3	2 952	3.7
West	Greece	1984	623	5.6	619	5.6	648	5.8	965	8.7	1 157	10.4
Centre	Hungary	1985	145	1.4	140	1.4	182	1.8	162	1.6	219	2.2
West	Iceland	1983	10	3.2	15	4.7	24	7.6	23	7.2	19	5.9
West	Ireland ^d	1985	404	9.1	395	8.7	330	7.3	328	7.2	349	7.6
West	Italy	2004	2 486	6.7	3 845	6.7	4 018	6.8	3 895	6.6	4 155	7.0
East	Latvia	1987	358	16.3	275	12.7	274	12.9	299	14.4	339	16.6
	Liechtenstein	1985	0	0.0	1	2.8	4	11.1	1	2.8	0	0.0
East	Lithuania	1988	95	3.0	180	5.7	153	4.9	166	5.4	160	5.3
West	Luxembourg ^d	1983	61	12.6	66	13.4	61	12.1	59	11.5	67	12.8
West	Malta	2001	28	6.9	19	4.6	18	4.3	21	5.1	30	7.2
West	Netherlands	1980	1 345	8.2	1 242	7.5	1 253	7.6	1 202	7.2	1 126	6.7
West	Norway	1984	299	6.3	282	5.9	258	5.3	269	5.5	242	4.9
Centre	Poland	1985	832	2.2	961	2.5	955	2.5	1 113	2.9	1 101	2.9
West	Portugal	1985	2 238	21.2	2 034	19.3	1 937	18.3	1 737	16.4	1 695	16.1
Centre	Romania	1987	577	2.8	575	2.8	577	2.8	819	4.1	909	4.5
Centre	Slovakia	1985	53	1.0	53	1.0	28	0.5	49	0.9	50	0.9
Centre	Slovenia	1985	48	2.4	48	2.4	35	1.7	55	2.7	47	2.3
West	Spain	2003	3 630	13.0	3 768	11.5	3 884	11.8	3 641	11.1	3 893	10.3
West	Sweden	1983	392	4.3	403	4.4	420	4.5	461	4.9	441	4.7
West	United Kingdom	1981	7 176	11.7	6 596	10.6	6 327	10.1	6 148	9.8	6 211	9.8
	Total EU/EEA		32 223	6.9	32 524	6.6	32 453	6.6	32 300	6.5	33 588	6.7
Non-EU/EEA												
Centre	Albania	1993	52	1.7	64	2.2	43	1.5	78	2.7	81	2.8
West	Andorra	2004	4	4.8	2	2.4	6	7.1	2	2.4	2	2.4
East	Armenia ^d	1988	136	4.7	149	5.2	149	5.2	182	6.3	229	7.9
East	Azerbaijan	1987	434	4.9	455	5.1	459	5.1	548	6.0	517	5.6
East	Belarus	1981	881	9.3	1 072	11.3	1 069	11.3	1 196	12.6	1 223	12.9
Centre	Bosnia and Herzegovina ^d	1986	9	0.2	6	0.2	1	0.0	27	0.7	25	0.7
East	Georgia	1989	358	8.2	391	9.1	460	10.9	429	10.3	543	13.2
West	Israel	1981	394	5.6	388	5.3	418	5.6	447	5.9	480	6.2
East	Kazakhstan	1987	2 317	14.5	2 077	12.8	1 982	12.1	1 998	12.0	2 004	11.8
East	Kyrgyzstan	1987	553	10.5	696	13.0	567	10.5	614	11.2	701	12.5
West	Monaco	1987	0	0.0	0	0.0	0	0.0	0	0.0	1	2.6
Centre	Montenegro	1989	11	1.8	14	2.2	15	2.4	9	1.4	14	2.2
East	Republic of Moldova	1987	793	19.3	704	17.2	703	17.2	721	17.7	757	18.6
East	Russian Federation ^e	2010	–	–	–	–	62 581	43.7	–	–	–	–
West	San Marino	1985	4	13.2	1	3.3	6	19.3	8	25.4	5	15.7
Centre	Serbia	1984	122	1.3	137	1.5	151	1.7	134	1.5	135	1.5
Centre	Serbia excluding Kosovo ^f	1984	118	1.7	131	1.9	148	2.2	128	1.8	131	1.8
Centre	Kosovo ^f	1999	4	0.2	6	0.3	3	0.1	6	0.3	4	0.2
West	Switzerland	1985	763	10.0	654	8.5	605	7.7	560	7.1	621	7.7
East	Tajikistan	1991	364	5.0	446	6.0	1 002	13.1	987	12.6	828	10.4
Centre	The former Yugoslav Republic of Macedonia	1993	4	0.2	6	0.3	5	0.2	1	0.0	15	0.7
Centre	Turkey	1985	393	0.6	470	0.7	489	0.7	699	1.0	1 068	1.4
East	Turkmenistan	1990	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Ukraine	1987	15 444	33.4	16 268	35.4	16 617	36.3	17 305	38.0	16 850	37.2
East	Uzbekistan	1981	3 061	11.0	4 055	14.4	3 795	13.3	–	–	–	–
	Total non-EU/EEA		26 097	11.1	28 055	11.8	91 123	23.8	25 945	12.2	26 099	12.2
WHO European Region												
	West		30 354	8.1	30 505	7.6	30 449	7.5	29 805	7.4	31 057	7.5
	Centre		2 627	1.4	2 894	1.5	2 936	1.5	3 628	1.9	4 164	2.2
	East		25 339	18.2	27 179	19.5	90 187	31.8	24 811	22.2	24 466	21.8
	Total WHO European Region		58 320	8.3	60 578	8.3	123 572	14.1	58 244	8.2	59 687	8.4

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d The following countries use "date of statistics" instead of "date of diagnosis" for presenting surveillance data in their national reports; the numbers displayed here may therefore not fully align with the numbers in their national statistics. These are, for 2017: Armenia (358), Bosnia and Herzegovina (14), Ireland (495) and Luxembourg (101).

	2013		2014		2015		2016		2017		Cumulative total ^b	Country, territory or area ^a
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
												EU/EEA
	294	3.5	279	3.3	300	3.5	269	3.1	270	3.1	9 543	Austria
	1 124	10.1	1 055	9.4	1 015	9.0	908	8.0	890	7.9	30 618	Belgium
	200	2.7	247	3.4	227	3.2	202	2.8	241	3.4	2 747	Bulgaria
	85	2.0	92	2.2	117	2.8	109	2.6	106	2.5	1 538	Croatia
	54	6.2	56	6.5	80	9.4	80	9.4	85	10.0	1 148	Cyprus
	235	2.2	232	2.2	266	2.5	286	2.7	254	2.4	3 160	Czech Republic
	233	4.2	256	4.5	277	4.9	244	4.3	242	4.2	7 591	Denmark
	325	24.6	291	22.1	270	20.5	229	17.4	219	16.6	9 711	Estonia
	157	2.9	181	3.3	174	3.2	180	3.3	158	2.9	3 911	Finland
	5 564	8.5	5 683	8.6	5 284	7.9	5 420	8.1	5 211	7.8	83 306	France
	3 236	4.0	3 501	4.3	3 699	4.6	3 419	4.2	–	–	60 688	Germany ^c
	896	8.1	776	7.1	777	7.2	644	6.0	628	5.8	16 669	Greece
	240	2.4	271	2.7	271	2.7	228	2.3	223	2.3	3 567	Hungary
	11	3.4	11	3.4	12	3.6	28	8.4	24	7.2	385	Iceland
	342	7.4	377	8.2	483	10.4	510	10.8	483	10.2	8 838	Ireland ^d
	3 832	6.4	3 823	6.3	3 598	5.9	3 649	6.0	3 443	5.7	44 139	Italy
	340	16.8	347	17.3	393	19.8	365	18.5	371	18.8	7 343	Latvia
	0	0.0	1	2.7	0	0.0	2	5.3	0	0.0	67	Liechtenstein
	177	6.0	141	4.8	157	5.4	214	7.4	263	9.1	3 012	Lithuania
	69	12.8	83	15.1	67	11.9	71	12.3	59	10.2	1 641	Luxembourg ^d
	36	8.5	40	9.4	61	14.2	63	14.5	45	10.4	432	Malta
	1 083	6.5	938	5.6	920	5.4	798	4.7	716	4.2	26 129	Netherlands
	233	4.6	267	5.2	221	4.3	220	4.2	213	4.1	6 291	Norway
	1 098	2.9	1 132	3.0	1 278	3.4	1 313	3.5	1 325	3.5	22 798	Poland
	1 660	15.8	1 331	12.8	1 343	12.9	1 313	12.7	1 068	10.3	57 913	Portugal
	961	4.8	855	4.3	821	4.1	705	3.6	661	3.3	23 063	Romania
	83	1.5	86	1.6	86	1.6	88	1.6	70	1.3	869	Slovakia
	46	2.2	51	2.5	50	2.4	57	2.8	39	1.9	836	Slovenia
	4 331	9.3	4 396	9.5	4 181	9.0	3 963	8.5	3 249	7.0	48 636	Spain
	457	4.8	473	4.9	447	4.6	429	4.4	434	4.4	12 569	Sweden
	5 983	9.4	6 185	9.6	6 043	9.3	5 280	8.1	4 363	6.7	155 267	United Kingdom
	33 385	6.5	33 457	6.5	32 918	6.4	31 286	6.1	25 353	5.8	654 425	Total EU/EEA
												Non-EU/EEA
	120	4.1	79	2.7	96	3.3	127	4.3	94	3.2	1 101	Albania
	5	6.2	6	7.6	3	3.8	2	2.6	6	7.8	83	Andorra
	238	8.2	333	11.5	295	10.1	303	10.4	354	12.1	2 907	Armenia ^d
	514	5.5	604	6.4	727	7.6	556	5.7	570	5.8	6 755	Azerbaijan
	1 533	16.2	1 811	19.1	2 305	24.3	2 391	25.2	2 468	26.1	24 686	Belarus
	2	0.1	23	0.6	15	0.4	24	0.7	12	0.3	281	Bosnia and Herzegovina ^d
	482	11.9	542	13.6	683	17.3	719	18.3	631	16.1	6 762	Georgia
	464	5.9	452	5.7	409	5.1	363	4.4	405	4.9	9 592	Israel
	2 131	12.4	2 342	13.4	2 478	14.0	2 899	16.1	3 019	16.6	32 563	Kazakhstan
	503	8.8	649	11.2	653	11.1	764	12.8	840	13.9	8 019	Kyrgyzstan
	0	0.0	1	2.6	1	2.6	0	0.0	3	7.8	40	Monaco
	10	1.6	20	3.2	19	3.0	34	5.4	26	4.1	254	Montenegro
	706	17.3	833	20.5	816	20.1	833	20.5	836	20.6	11 858	Republic of Moldova
	–	–	–	–	–	–	–	–	–	–	62 581	Russian Federation ^a
	1	3.1	3	9.2	2	6.1	2	6.0	1	3.0	90	San Marino
	153	1.7	136	1.5	184	2.1	179	2.0	181	2.1	3 778	Serbia
	150	2.1	130	1.8	181	2.6	168	2.4	178	2.5	3 665	Serbia excluding Kosovo ^f
	3	0.2	6	0.3	3	0.2	11	0.6	3	0.2	113	Kosovo ^f
	576	7.1	517	6.3	536	6.4	531	6.3	443	5.2	35 969	Switzerland
	871	10.7	1 009	12.1	1 157	13.5	1 043	11.9	1 208	13.5	9 956	Tajikistan
	15	0.7	30	1.4	25	1.2	30	1.4	44	2.1	201	The former Yugoslav Republic of Macedonia
	1 313	1.7	1 838	2.4	2 107	2.7	2 438	3.1	2 844	3.5	15 990	Turkey
	–	–	–	–	–	–	–	–	–	–	2	Turkmenistan
	17 844	39.6	15 796	35.2	13 000	30.4	14 262	33.5	15 680	37.0	262 469	Ukraine
	–	–	–	–	–	–	–	–	–	–	24 018	Uzbekistan
	27 481	12.7	27 024	12.4	25 511	11.7	27 500	12.5	29 665	13.4	519 955	Total non-EU/EEA
												WHO European Region
	30 587	7.2	30 634	7.2	29 853	7.0	28 306	6.6	22 354	6.4	620 340	West
	4 615	2.4	5 148	2.7	5 642	2.9	5 900	3.0	6 205	3.2	81 331	Centre
	25 664	22.8	24 698	21.9	22 934	20.6	24 578	22.0	26 459	23.6	472 642	East
	60 866	8.4	60 480	8.3	58 429	8.0	58 784	8.0	55 018	8.4	1 174 313	Total WHO European Region

^a No official data were reported by the Russian Federation, except for 2010. Information about new and cumulative HIV diagnoses was obtained from the Federal Scientific and Methodological Centre for Prevention and Control of AIDS (number (year)): 54 950 (2008), 58 209 (2009), 58 303 (2010), 62 509 (2011), 70 887 (2012), 79 810 (2013), 89 808 (2014), 98 232 (2015), 103 438 (2016), 104 402 (2017), and cumulative 1 220 659 as of 31 December 2017. References (1,2,4), Chapter 2.

^f For the purposes of this publication, all references to "Kosovo" in the tables and annexes, should be understood/read as "Kosovo (in accordance with Security Council resolution 1244 (1999))".

Table 2. HIV diagnoses in males and rates per 100 000 population, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	2008		2009		2010		2011		2012	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA											
West	Austria	291	7.2	262	6.5	286	7.0	278	6.8	285	7.0
West	Belgium	748	14.3	735	14.0	787	14.8	782	14.5	835	15.3
Centre	Bulgaria	102	2.8	133	3.7	132	3.7	163	4.5	123	3.4
Centre	Croatia	70	3.4	49	2.4	68	3.3	63	3.0	70	3.4
Centre	Cyprus	24	6.3	26	6.7	34	8.5	39	9.5	49	11.7
Centre	Czech Republic	121	2.4	130	2.5	159	3.1	139	2.7	185	3.6
West	Denmark	204	7.5	179	6.6	201	7.3	192	7.0	146	5.3
East	Estonia	315	50.6	243	39.1	230	37.0	226	36.5	209	33.8
West	Finland	105	4.0	106	4.1	130	5.0	112	4.2	111	4.2
West	France	3 748	12.1	3 600	11.6	3 656	11.7	3 589	11.4	3 820	12.1
West	Germany ^b	2 337	5.8	2 386	5.9	2 289	5.7	2 238	5.7	2 498	6.4
West	Greece	518	9.5	523	9.6	570	10.4	823	15.1	979	18.0
Centre	Hungary	110	2.3	107	2.2	142	3.0	122	2.6	186	3.9
West	Iceland	7	4.4	6	3.7	17	10.6	12	7.5	13	8.1
West	Ireland	258	11.6	258	11.5	241	10.7	239	10.5	251	11.1
West	Italy	1 818	10.1	2 893	10.3	3 028	10.6	2 924	10.2	3 268	11.4
East	Latvia	231	22.9	170	17.1	170	17.5	196	20.7	218	23.3
	Liechtenstein	0	0.0	1	5.7	2	11.3	1	5.6	0	0.0
East	Lithuania	65	4.4	131	8.9	125	8.6	134	9.5	114	8.2
West	Luxembourg	49	20.5	46	18.8	43	17.2	44	17.3	47	18.0
West	Malta	17	8.4	10	4.9	16	7.8	17	8.2	23	11.1
West	Netherlands	1 134	14.0	1 029	12.6	1 057	12.9	1 027	12.5	945	11.4
West	Norway	182	7.7	183	7.6	173	7.1	190	7.7	166	6.6
Centre	Poland	611	3.3	733	4.0	711	3.9	914	5.0	921	5.0
West	Portugal	1 524	30.1	1 372	27.1	1 293	25.5	1 207	23.9	1 194	23.7
Centre	Romania	325	3.2	344	3.5	357	3.6	564	5.7	660	6.8
Centre	Slovakia	48	1.8	48	1.8	25	1.0	46	1.8	44	1.7
Centre	Slovenia	45	4.6	40	4.0	31	3.1	48	4.7	44	4.3
West	Spain	2 893	21.0	3 022	18.7	3 192	19.8	3 003	18.6	3 293	17.7
West	Sweden	245	5.4	263	5.7	250	5.4	291	6.2	265	5.6
West	United Kingdom	4 580	15.2	4 437	14.6	4 319	14.1	4 397	14.2	4 497	14.4
	Total EU/EEA	22 725	10.0	23 465	9.8	23 734	9.8	24 020	10.0	25 459	10.4
Non-EU/EEA											
Centre	Albania	35	2.3	45	3.0	28	1.9	55	3.7	58	3.9
West	Andorra	4	9.6	2	4.8	6	14.4	2	4.8	2	4.9
East	Armenia	104	7.6	96	7.1	98	7.3	115	8.5	159	11.8
East	Azerbaijan	350	8.0	377	8.5	365	8.2	410	9.0	356	7.7
East	Belarus	454	10.3	562	12.7	563	12.8	621	14.1	659	15.0
Centre	Bosnia and Herzegovina	7	0.4	6	0.3	1	0.1	23	1.3	23	1.3
East	Georgia	252	12.3	276	13.6	327	16.3	305	15.4	394	20.1
West	Israel	250	7.1	267	7.4	287	7.8	296	7.9	350	9.2
East	Kazakhstan	1 640	21.2	1 392	17.8	1 252	15.8	1 207	15.0	1 167	14.3
East	Kyrgyzstan	309	11.9	514	19.5	399	14.9	422	15.5	406	14.7
West	Monaco	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Montenegro	8	2.6	12	3.9	15	4.9	8	2.6	13	4.2
East	Republic of Moldova	438	22.2	400	20.3	341	17.4	377	19.2	375	19.1
East	Russian Federation	–	–	–	–	36 172	54.5	–	–	–	–
West	San Marino	2	13.6	1	6.7	6	39.7	6	39.2	2	12.9
Centre	Serbia	102	2.3	127	2.9	134	3.0	116	2.6	123	2.8
Centre	Serbia excluding Kosovo ^d	98	2.9	122	3.7	132	4.0	111	3.2	120	3.4
Centre	Kosovo ^d	4	0.4	5	0.5	2	0.2	5	0.6	3	0.3
West	Switzerland	550	14.6	468	12.3	444	11.5	422	10.8	462	11.7
East	Tajikistan	283	7.7	330	8.8	791	20.5	692	17.6	535	13.3
Centre	The former Yugoslav Republic of Macedonia	3	0.3	6	0.6	5	0.5	0	0.0	10	1.0
Centre	Turkey	271	0.8	342	1.0	350	1.0	531	1.5	819	2.2
East	Turkmenistan	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Ukraine	8 641	40.5	9 089	42.8	9 521	45.0	9 472	45.0	9 400	44.9
East	Uzbekistan	1 830	13.3	2 248	16.1	2 062	14.5	–	–	–	–
	Total non-EU/EEA	15 533	13.6	16 560	14.4	53 167	29.1	15 080	14.8	15 313	14.8
WHO European Region											
	West	21 464	11.7	22 048	11.2	22 291	11.3	22 091	11.2	23 452	11.7
	Centre	1 882	2.1	2 148	2.3	2 192	2.4	2 831	3.1	3 328	3.6
	East	14 912	22.4	15 828	23.7	52 416	39.3	14 177	26.8	13 992	26.3
	Total WHO European Region	38 258	11.2	40 024	11.3	76 899	18.1	39 099	11.4	40 772	11.7

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	2013		2014		2015		2016		2017		Cumulative total ^a	Country, territory or area ^a
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
EU/EEA												
	249	6.0	221	5.3	263	6.3	224	5.3	224	5.3	7 276	Austria
	787	14.3	737	13.4	698	12.6	648	11.6	598	10.7	19 447	Belgium
	161	4.5	201	5.7	194	5.5	169	4.9	218	6.3	2 176	Bulgaria
	77	3.7	83	4.0	111	5.4	104	5.1	101	5.0	1 356	Croatia
	46	10.9	49	11.7	72	17.5	65	15.8	65	15.8	847	Cyprus
	211	4.1	209	4.0	248	4.8	262	5.1	232	4.5	2 715	Czech Republic
	178	6.4	196	7.0	205	7.3	191	6.7	192	6.8	5 560	Denmark
	200	32.5	182	29.6	167	27.2	139	22.5	146	23.7	6 498	Estonia
	102	3.8	138	5.1	131	4.9	121	4.5	101	3.7	2 827	Finland
	3 728	11.7	3 820	12.0	3 536	11.0	3 575	11.1	3 390	10.5	53 760	France
	2 656	6.7	2 842	7.2	2 943	7.4	2 704	6.7	–	–	48 154	Germany ^c
	808	15.1	674	12.7	687	13.0	532	10.2	520	10.0	13 800	Greece
	191	4.1	214	4.5	196	4.2	171	3.6	148	3.2	2 712	Hungary
	8	5.0	9	5.5	10	6.1	22	13.2	21	12.6	281	Iceland
	257	11.3	273	12.0	373	16.3	395	16.9	367	15.7	5 082	Ireland
	2 995	10.4	3 036	10.3	2 787	9.4	2 809	9.5	2 623	8.9	33 493	Italy
	203	21.9	236	25.7	264	29.0	230	25.4	241	26.7	4 985	Latvia
	0	0.0	1	5.4	0	0.0	2	10.7	0	0.0	41	Liechtenstein
	125	9.1	90	6.6	115	8.5	165	12.4	220	16.5	2 402	Lithuania
	56	20.9	52	18.9	53	18.8	57	19.7	43	14.9	1 208	Luxembourg
	30	14.3	36	16.9	53	24.7	51	23.4	35	16.1	335	Malta
	936	11.3	799	9.6	779	9.3	684	8.1	619	7.4	21 060	Netherlands
	158	6.2	199	7.8	145	5.6	157	6.0	155	5.9	4 274	Norway
	937	5.1	933	5.1	1 084	5.9	1 146	6.2	1 172	6.4	17 897	Poland
	1 174	23.5	948	19.1	989	20.1	942	19.2	768	15.7	41 824	Portugal
	676	6.9	597	6.1	592	6.1	508	5.3	487	5.0	13 732	Romania
	71	2.7	75	2.8	76	2.9	81	3.1	64	2.4	757	Slovakia
	40	3.9	46	4.5	43	4.2	55	5.4	37	3.6	737	Slovenia
	3 706	16.1	3 743	16.4	3 595	15.7	3 348	14.7	2 736	12.0	39 992	Spain
	293	6.1	273	5.7	276	5.7	269	5.5	273	5.5	8 438	Sweden
	4 502	14.3	4 628	14.6	4 614	14.4	4 000	12.4	3 236	10.0	109 309	United Kingdom
	25 561	10.3	25 540	10.2	25 299	10.1	23 826	9.4	19 032	9.0	472 975	Total EU/EEA
Non-EU/EEA												
	82	5.6	61	4.1	67	4.5	104	7.0	69	4.7	798	Albania
	4	10.1	6	15.4	3	7.8	2	5.3	3	7.9	69	Andorra
	161	11.9	215	15.8	206	15.0	211	15.3	252	18.3	2 019	Armenia
	329	7.1	375	7.9	495	10.3	354	7.3	361	7.4	4 937	Azerbaijan
	802	18.2	1 052	23.8	1 395	31.6	1 490	33.8	1 540	35.0	14 818	Belarus
	2	0.1	20	1.1	14	0.8	22	1.3	12	0.7	237	Bosnia and Herzegovina
	363	18.8	391	20.5	520	27.6	553	29.5	492	26.3	5 034	Georgia
	346	8.9	325	8.3	289	7.2	252	6.2	292	7.1	6 356	Israel
	1 203	14.4	1 334	15.8	1 443	16.8	1 684	19.3	1 824	20.7	21 065	Kazakhstan
	292	10.4	369	12.9	364	12.5	446	15.1	491	16.4	5 170	Kyrgyzstan
	0	0.0	1	5.3	1	5.3	0	0.0	3	15.8	26	Monaco
	10	3.2	17	5.5	17	5.5	32	10.3	25	8.1	221	Montenegro
	381	19.5	454	23.2	460	23.5	472	24.2	474	24.4	6 840	Republic of Moldova
	–	–	–	–	–	–	–	–	–	–	36 172	Russian Federation
	0	0.0	3	18.9	2	12.5	2	12.4	1	6.1	71	San Marino
	139	3.2	119	2.7	178	4.1	164	3.8	171	4.0	3 047	Serbia
	137	4.0	113	3.3	176	5.1	153	4.5	168	4.9	2 964	Serbia excluding Kosovo ^d
	2	0.2	6	0.7	2	0.2	11	1.2	3	0.3	83	Kosovo ^d
	421	10.5	385	9.5	408	9.9	412	9.9	341	8.1	22 924	Switzerland
	527	12.8	576	13.7	687	16.0	626	14.3	738	16.5	6 622	Tajikistan
	15	1.4	29	2.8	24	2.3	28	2.7	44	4.2	176	The former Yugoslav Republic of Macedonia
	1 072	2.9	1 497	4.0	1 770	4.6	2 065	5.3	2 389	6.0	12 633	Turkey
	–	–	–	–	–	–	–	–	–	–	1	Turkmenistan
	10 011	48.1	8 991	43.4	7 519	38.0	8 389	42.5	9 351	47.6	155 814	Ukraine
	–	–	–	–	–	–	–	–	–	–	16 234	Uzbekistan
	16 160	15.5	16 220	15.4	15 862	15.0	17 308	16.3	18 873	17.6	321 284	Total non-EU/EEA
WHO European Region												
	23 394	11.3	23 344	11.2	22 840	10.9	21 397	10.2	16 541	9.7	445 566	West
	3 730	4.0	4 150	4.4	4 686	4.9	4 976	5.2	5 234	5.4	60 041	Centre
	14 597	27.4	14 265	26.7	13 635	25.8	14 759	27.8	16 130	30.3	288 611	East
	41 721	11.8	41 759	11.7	41 161	11.5	41 132	11.5	37 905	11.9	794 218	Total WHO European Region

Table 3. HIV diagnoses in females and rates per 100 000 population, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	2008		2009		2010		2011		2012	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA											
West	Austria	89	2.1	75	1.8	66	1.5	73	1.7	72	1.7
West	Belgium	339	6.2	374	6.8	393	7.1	388	6.9	389	6.9
Centre	Bulgaria	21	0.5	38	1.0	31	0.8	38	1.0	34	0.9
Centre	Croatia	3	0.1	6	0.3	3	0.1	11	0.5	3	0.1
Centre	Cyprus	13	3.3	12	2.9	7	1.7	15	3.5	9	2.0
Centre	Czech Republic	27	0.5	26	0.5	21	0.4	14	0.3	27	0.5
West	Denmark	81	2.9	57	2.1	74	2.7	74	2.6	54	1.9
East	Estonia	230	32.1	168	23.5	146	20.5	140	19.7	106	15.0
West	Finland	42	1.6	66	2.4	54	2.0	60	2.2	45	1.6
West	France	1999	6.1	1842	5.5	1880	5.6	1827	5.5	1829	5.4
West	Germany ^b	462	1.1	455	1.1	396	0.9	416	1.0	452	1.1
West	Greece	105	1.9	96	1.7	78	1.4	142	2.5	177	3.1
Centre	Hungary	9	0.2	15	0.3	9	0.2	12	0.2	14	0.3
West	Iceland	3	1.9	9	5.7	7	4.4	11	6.9	6	3.8
West	Ireland	146	6.5	137	6.0	89	3.9	89	3.9	98	4.2
West	Italy	668	3.5	952	3.2	986	3.2	971	3.2	887	2.9
East	Latvia	127	10.7	105	9.0	104	9.0	103	9.1	121	10.9
	Liechtenstein	0	0.0	0	0.0	2	11.0	0	0.0	0	0.0
East	Lithuania	30	1.7	49	2.9	28	1.7	32	1.9	46	2.8
West	Luxembourg	11	4.5	19	7.6	18	7.1	15	5.8	18	6.8
West	Malta	11	5.4	9	4.4	2	1.0	4	1.9	7	3.3
West	Netherlands	211	2.5	213	2.6	196	2.3	175	2.1	181	2.1
West	Norway	117	4.9	99	4.1	85	3.5	79	3.2	76	3.1
Centre	Poland	149	0.8	161	0.8	156	0.8	159	0.8	159	0.8
West	Portugal	713	13.0	662	12.0	644	11.7	530	9.6	501	9.1
Centre	Romania	252	2.4	231	2.2	220	2.1	255	2.5	249	2.4
Centre	Slovakia	5	0.2	5	0.2	3	0.1	3	0.1	6	0.2
Centre	Slovenia	3	0.3	8	0.8	4	0.4	7	0.7	3	0.3
West	Spain	737	5.2	746	4.5	692	4.1	638	3.8	600	3.1
West	Sweden	146	3.2	139	3.0	170	3.6	169	3.6	175	3.7
West	United Kingdom	2 594	8.3	2 152	6.8	1 996	6.3	1 747	5.4	1 708	5.3
	Total EU/EEA	9 343	3.9	8 926	3.5	8 560	3.4	8 197	3.2	8 052	3.1
Non-EU/EEA											
Centre	Albania	17	1.1	19	1.3	15	1.0	23	1.6	23	1.6
West	Andorra	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Armenia	32	2.1	53	3.5	51	3.3	67	4.4	70	4.6
East	Azerbaijan	84	1.9	78	1.7	94	2.1	138	3.0	161	3.5
East	Belarus	427	8.4	510	10.0	506	10.0	575	11.3	564	11.1
Centre	Bosnia and Herzegovina	2	0.1	0	0.0	0	0.0	4	0.2	2	0.1
East	Georgia	106	4.6	115	5.1	133	6.0	124	5.7	149	6.9
West	Israel	144	4.0	121	3.3	131	3.5	151	3.9	130	3.3
East	Kazakhstan	677	8.2	685	8.2	730	8.6	791	9.2	837	9.6
East	Kyrgyzstan	182	6.8	182	6.7	168	6.1	192	6.9	295	10.4
West	Monaco	0	0.0	0	0.0	0	0.0	0	0.0	1	5.2
Centre	Montenegro	3	1.0	2	0.6	0	0.0	1	0.3	1	0.3
East	Republic of Moldova	355	16.6	304	14.3	362	17.1	344	16.3	382	18.1
East	Russian Federation	–	–	–	–	26 409	34.4	–	–	–	–
West	San Marino	2	12.8	0	0.0	0	0.0	2	12.3	3	18.3
Centre	Serbia	20	0.4	10	0.2	17	0.4	18	0.4	12	0.3
Centre	Serbia excluding Kosovo ^d	20	0.6	9	0.3	16	0.5	17	0.5	11	0.3
Centre	Kosovo ^d	0	0.0	1	0.1	1	0.1	1	0.1	1	0.1
West	Switzerland	203	5.2	180	4.6	160	4.0	132	3.3	150	3.7
East	Tajikistan	81	2.2	116	3.1	211	5.6	295	7.6	293	7.4
Centre	The former Yugoslav Republic of Macedonia	1	0.1	0	0.0	0	0.0	0	0.0	4	0.4
Centre	Turkey	122	0.3	128	0.4	139	0.4	166	0.4	249	0.7
East	Turkmenistan	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Ukraine	6 582	26.5	7 002	28.3	6 915	28.0	7 697	31.4	7 301	29.9
East	Uzbekistan	1 231	8.8	1 807	12.8	1 733	12.1	–	–	–	–
	Total non-EU/EEA	10 271	8.5	11 312	9.5	37 774	19.2	10 720	9.9	10 627	9.6
WHO European Region											
	West	8 823	4.6	8 403	4.1	8 117	3.9	7 693	3.7	7 559	3.6
	Centre	647	0.7	661	0.7	625	0.7	726	0.8	795	0.8
	East	10 144	14.0	11 174	15.4	37 590	25.1	10 498	17.9	10 325	17.5
	Total WHO European Region	19 614	5.5	20 238	5.4	46 332	10.3	18 917	5.2	18 679	5.1

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	2013		2014		2015		2016		2017		Cumulative total ^a	Country, territory or area ^a
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
												EU/EEA
	44	1.0	58	1.3	37	0.8	45	1.0	45	1.0	2 263	Austria
	337	5.9	316	5.6	312	5.5	258	4.5	278	4.8	10 838	Belgium
	39	1.0	46	1.2	33	0.9	33	0.9	23	0.6	571	Bulgaria
	8	0.4	9	0.4	6	0.3	5	0.2	5	0.2	182	Croatia
	8	1.8	7	1.6	8	1.8	15	3.4	20	4.6	301	Cyprus
	24	0.4	23	0.4	18	0.3	24	0.4	22	0.4	445	Czech Republic
	55	1.9	60	2.1	72	2.5	53	1.8	50	1.7	2 030	Denmark
	125	17.8	109	15.6	103	14.7	90	12.9	73	10.4	3 201	Estonia
	55	2.0	43	1.6	43	1.5	59	2.1	57	2.0	1 084	Finland
	1 814	5.4	1 837	5.4	1 708	5.0	1 801	5.2	1 767	5.1	29 247	France
	578	1.4	657	1.6	753	1.8	710	1.7	–	–	11 722	Germany ^b
	88	1.6	100	1.8	90	1.6	111	2.0	106	1.9	2 820	Greece
	17	0.3	20	0.4	26	0.5	21	0.4	18	0.4	361	Hungary
	3	1.9	2	1.2	2	1.2	6	3.6	3	1.8	104	Iceland
	85	3.7	104	4.5	110	4.7	115	4.8	116	4.9	2 553	Ireland
	837	2.7	787	2.5	811	2.6	840	2.7	820	2.6	10 642	Italy
	137	12.5	111	10.2	129	12.0	135	12.7	130	12.2	2 358	Latvia
	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	23	Liechtenstein
	52	3.2	51	3.2	42	2.7	49	3.1	43	2.8	610	Lithuania
	13	4.8	31	11.3	14	5.0	14	4.9	16	5.6	428	Luxembourg
	6	2.8	4	1.9	8	3.7	11	5.1	10	4.6	96	Malta
	147	1.7	139	1.6	141	1.7	114	1.3	97	1.1	5 069	Netherlands
	75	3.0	68	2.7	76	3.0	63	2.4	58	2.2	2 017	Norway
	148	0.8	186	0.9	175	0.9	140	0.7	148	0.8	4 279	Poland
	486	8.8	383	7.0	354	6.5	371	6.8	300	5.5	16 080	Portugal
	285	2.8	258	2.5	229	2.3	197	1.9	174	1.7	9 331	Romania
	12	0.4	11	0.4	10	0.4	7	0.3	6	0.2	112	Slovakia
	6	0.6	4	0.4	7	0.7	2	0.2	2	0.2	98	Slovenia
	625	2.6	653	2.8	586	2.5	615	2.6	513	2.2	8 644	Spain
	163	3.4	198	4.1	171	3.5	160	3.3	161	3.3	4 122	Sweden
	1 476	4.5	1 544	4.7	1 414	4.3	1 270	3.8	1 117	3.4	45 818	United Kingdom
	7 748	3.0	7 819	3.0	7 488	2.8	7 334	2.8	6 178	2.8	177 449	Total EU/EEA
												Non-EU/EEA
	38	2.6	18	1.2	29	2.0	23	1.6	25	1.7	303	Albania
	1	2.4	0	0.0	0	0.0	0	0.0	3	7.6	14	Andorra
	77	5.0	118	7.7	89	5.8	92	5.9	102	6.6	888	Armenia
	185	3.9	229	4.8	232	4.8	202	4.1	209	4.2	1 818	Azerbaijan
	731	14.4	759	15.0	910	17.9	901	17.8	928	18.3	9 868	Belarus
	0	0.0	3	0.2	1	0.1	2	0.1	0	0.0	41	Bosnia and Herzegovina
	119	5.6	151	7.2	163	7.9	166	8.1	139	6.8	1 728	Georgia
	116	2.9	125	3.1	120	3.0	109	2.6	113	2.7	3 124	Israel
	928	10.5	1 008	11.2	1 035	11.3	1 215	13.1	1 195	12.7	11 498	Kazakhstan
	211	7.4	280	9.6	289	9.8	318	10.6	349	11.5	2 780	Kyrgyzstan
	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	14	Monaco
	0	0.0	3	0.9	2	0.6	2	0.6	1	0.3	33	Montenegro
	325	15.4	379	17.9	356	16.9	361	17.1	362	17.2	5 000	Republic of Moldova
	–	–	–	–	–	–	–	–	–	–	26 409	Russian Federation
	1	6.0	0	0.0	0	0.0	0	0.0	0	0.0	19	San Marino
	14	0.3	17	0.4	6	0.1	15	0.3	10	0.2	731	Serbia
	13	0.4	17	0.5	5	0.1	15	0.4	10	0.3	701	Serbia excluding Kosovo ^{cd}
	1	0.1	0	0.0	1	0.1	0	0.0	0	0.0	30	Kosovo ^d
	151	3.7	124	3.0	122	2.9	112	2.6	99	2.3	10 317	Switzerland
	344	8.5	433	10.4	470	11.1	417	9.6	470	10.6	3 334	Tajikistan
	0	0.0	0	0.0	1	0.1	1	0.1	0	0.0	18	The former Yugoslav Republic of Macedonia
	241	0.6	341	0.9	337	0.8	373	0.9	455	1.1	3 355	Turkey
	–	–	–	–	–	–	–	–	–	–	1	Turkmenistan
	7 722	31.8	6 683	27.7	5 481	23.9	5 873	25.7	6 329	27.8	104 747	Ukraine
	–	–	–	–	–	–	–	–	–	–	7 783	Uzbekistan
	11 204	10.3	10 671	9.7	9 643	8.6	10 182	9.1	10 789	9.8	193 823	Total non-EU/EEA
												WHO European Region
	7 156	3.3	7 233	3.3	6 944	3.2	6 837	3.1	5 729	3.2	169 065	West
	840	0.9	946	1.0	888	0.9	860	0.9	909	0.9	20 161	Centre
	10 956	18.6	10 311	17.4	9 299	15.9	9 819	16.8	10 329	17.6	182 023	East
	18 952	5.1	18 490	5.0	17 131	4.6	17 516	4.7	16 967	5.1	371 249	Total WHO European Region

Table 4. New HIV diagnoses in men infected through sex between men, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of diagnosis										Cumulative total ^b
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	171	155	173	173	179	160	137	156	152	158	3 692
West	Belgium	387	391	432	430	435	464	393	403	375	306	7 839
Centre	Bulgaria	17	28	32	47	59	72	97	111	96	120	748
Centre	Croatia	53	42	61	47	65	70	79	99	95	97	1 015
Centre	Cyprus	9	9	22	27	31	35	39	51	47	47	505
Centre	Czech Republic	95	107	131	113	155	180	171	210	213	181	2 145
West	Denmark	133	108	112	113	82	116	132	126	121	123	3 163
East	Estonia	0	0	1	2	1	9	3	18	9	16	152
West	Finland	49	43	48	36	47	43	55	53	48	32	1 207
West	France	1 499	1 442	1 515	1 430	1 625	1 614	1 677	1 479	1 360	1 239	21 343
West	Germany ^c	1 575	1 646	1 584	1 458	1 695	1 727	1 894	1 867	1 725	–	28 716
West	Greece	345	354	399	362	356	394	400	445	310	292	8 074
Centre	Hungary	93	87	126	106	149	163	175	133	118	110	2 019
West	Iceland	2	2	5	0	1	0	0	0	8	4	117
West	Ireland	105	138	134	145	173	155	181	252	275	249	2 875
West	Italy	718	1 190	1 258	1 282	1 581	1 515	1 552	1 459	1 389	1 324	15 135
East	Latvia	21	14	18	20	18	27	28	33	24	24	394
	Liechtenstein	0	0	0	0	0	0	1	0	0	0	3
East	Lithuania	9	11	7	12	11	31	12	28	27	18	250
West	Luxembourg	30	27	26	31	32	32	27	21	24	15	616
West	Malta	0	4	6	4	8	16	25	45	38	23	184
West	Netherlands	876	797	807	791	736	755	628	588	531	474	15 333
West	Norway	92	87	85	97	76	98	115	70	87	88	2 081
Centre	Poland	64	86	167	318	353	280	336	358	401	318	3 502
West	Portugal	478	447	469	497	526	501	414	518	475	391	10 266
Centre	Romania	50	61	68	107	92	96	135	125	137	132	1 192
Centre	Slovakia	33	35	21	32	28	58	53	55	60	50	562
Centre	Slovenia	34	29	28	35	35	27	34	35	46	26	542
West	Spain	1 737	1 787	1 919	1 862	2 020	2 235	2 453	2 316	2 155	1 742	23 629
West	Sweden	106	115	102	106	137	147	119	118	136	128	4 088
West	United Kingdom	2 682	2 727	2 738	2 843	3 033	3 043	3 126	3 037	2 467	1 967	70 088
	Total EU/EEA	11 463	11 969	12 494	12 526	13 739	14 063	14 491	14 209	12 949	9 694	231 475
Non-EU/EEA												
Centre	Albania	7	6	5	15	9	11	9	13	11	6	121
West	Andorra	4	1	3	1	1	3	5	2	2	2	34
East	Armenia	3	5	0	4	4	13	10	12	15	17	91
East	Azerbaijan	2	2	7	5	13	11	11	34	16	38	152
East	Belarus	5	9	14	29	31	41	53	58	71	72	416
Centre	Bosnia and Herzegovina	1	3	0	12	21	2	16	10	18	9	114
East	Georgia	5	7	27	24	44	69	66	159	130	130	705
West	Israel	125	142	145	159	156	171	151	139	128	145	2 453
East	Kazakhstan	14	20	20	26	20	37	45	80	120	143	563
East	Kyrgyzstan	0	0	0	0	3	14	17	20	35	45	136
West	Monaco	0	0	0	0	0	0	1	1	0	2	18
Centre	Montenegro	6	6	11	5	8	6	13	14	25	22	141
East	Republic of Moldova	2	12	6	5	4	4	9	10	18	29	115
East	Russian Federation ^d	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	4	0	0	0	0	0	0	21
Centre	Serbia	72	84	81	68	86	97	84	134	114	119	1 353
Centre	Serbia excluding Kosovo ^e	68	84	81	67	84	96	79	132	111	119	1 333
Centre	Kosovo ^e	4	0	0	1	2	1	5	2	3	0	20
West	Switzerland	265	250	245	211	228	198	220	208	233	168	5 301
East	Tajikistan	0	0	0	1	1	0	3	3	12	12	32
Centre	The former Yugoslav Republic of Macedonia	0	3	5	1	7	13	26	21	18	34	136
Centre	Turkey	0	2	32	59	142	187	281	350	403	494	2 134
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	65	94	90	143	152	262	277	368	436	492	2 537
East	Uzbekistan	0	1	0	–	–	–	–	–	–	–	29
	Total non-EU/EEA	576	647	691	772	930	1 139	1 297	1 636	1 805	1 979	16 602
WHO European Region												
	West	11 379	11 853	12 205	12 035	13 127	13 387	13 705	13 303	12 039	8 872	226 273
	Centre	534	588	790	992	1 240	1 297	1 548	1 719	1 802	1 765	16 229
	East	126	175	190	271	302	518	534	823	913	1 036	5 572
	Total WHO European Region	12 039	12 616	13 185	13 298	14 669	15 202	15 787	15 845	14 754	11 673	248 074

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d No official data were reported by the Russian Federation. Latest available data on the number of new HIV diagnoses in men infected through sex between men was obtained from the Federal Scientific and Methodological Centre for Prevention and Control of AIDS (number (year)): 278 (2008), 370 (2009), 360 (2010), 385 (2011), 302 (2012), 383 (2013), 559 (2014), 695 (2015). Reference (4), Chapter 2.^e (in accordance with Security Council resolution 1244 (1999)).

Table 5. New HIV diagnoses in people infected through injecting drug use, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country*	Year of diagnosis										Cumulative total**
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	46	37	47	49	50	28	29	27	18	12	2 024
West	Belgium	21	15	17	19	16	18	15	16	4	7	762
Centre	Bulgaria	54	74	56	63	40	33	48	28	22	31	557
Centre	Croatia	1	0	2	4	0	0	0	2	0	0	67
Centre	Cyprus	1	0	0	0	0	0	3	1	2	0	15
Centre	Czech Republic	8	4	5	9	6	6	10	6	7	5	125
West	Denmark	13	14	8	10	11	13	11	8	9	6	553
East	Estonia	36	85	118	110	86	81	67	55	30	14	4 169
West	Finland	7	13	8	8	7	3	7	7	6	10	404
West	France	143	131	129	120	128	108	100	76	58	43	1 962
West	Germany ^c	115	91	79	77	80	99	111	136	127	–	3 690
West	Greece	10	18	29	319	523	270	120	94	98	86	1 900
Centre	Hungary	2	0	0	0	0	1	1	2	3	1	30
West	Iceland	0	5	9	12	3	1	1	0	9	3	65
West	Ireland	40	30	23	18	16	22	30	47	21	14	1 650
West	Italy	213	281	268	186	216	179	142	118	103	94	2 512
East	Latvia	100	78	86	90	94	77	74	88	62	78	3 345
	Liechtenstein	0	0	0	1	0	0	0	0	0	0	5
East	Lithuania	44	118	108	90	68	64	38	44	84	136	1 785
West	Luxembourg	5	2	1	1	5	6	17	14	19	9	212
West	Malta	2	0	0	0	0	3	0	0	1	0	10
West	Netherlands	8	9	8	6	7	5	1	2	1	2	784
West	Norway	12	11	11	10	11	8	7	8	8	7	634
Centre	Poland	60	69	47	72	49	46	50	51	36	27	6 352
West	Portugal	370	277	221	145	134	115	60	61	42	18	19 136
Centre	Romania	8	19	23	179	305	318	180	165	103	86	1 440
Centre	Slovakia	3	1	2	1	1	0	1	3	1	0	17
Centre	Slovenia	0	0	0	0	1	2	2	1	1	0	20
West	Spain	287	312	253	235	206	187	154	117	141	105	3 561
West	Sweden	22	24	23	15	22	13	14	15	26	20	1 267
West	United Kingdom	171	139	145	127	119	124	136	184	133	115	6 280
	Total EU/EEA	1 802	1 857	1 726	1 976	2 204	1 830	1 429	1 376	1 175	929	65 333
Non-EU/EEA												
Centre	Albania	0	1	0	0	1	0	1	0	0	0	5
West	Andorra	0	0	0	0	0	0	0	0	0	0	11
East	Armenia	36	46	49	41	44	32	42	36	35	38	655
East	Azerbaijan	288	293	276	319	218	205	184	179	153	87	3 063
East	Belarus	195	212	223	254	247	201	376	790	600	485	8 812
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	20
East	Georgia	202	223	215	190	235	169	176	165	206	148	2 853
West	Israel	41	42	40	41	78	71	44	39	25	32	1 257
East	Kazakhstan	1 491	1 250	1 100	922	793	730	779	827	896	900	16 677
East	Kyrgyzstan	294	466	347	355	255	188	183	172	200	204	3 725
West	Monaco	0	0	0	0	0	0	0	0	0	0	8
Centre	Montenegro	0	0	0	0	1	0	0	0	0	1	6
East	Republic of Moldova	136	62	59	61	40	20	61	38	40	42	2 882
East	Russian Federation ^d	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	11
Centre	Serbia	10	10	6	9	5	11	5	4	1	4	979
Centre	Serbia excluding Kosovo ^e	10	9	6	9	5	11	5	4	1	4	977
Centre	Kosovo ^e	–	1	–	–	–	–	–	–	–	–	2
West	Switzerland	30	26	20	21	24	13	8	10	12	20	2 885
East	Tajikistan	211	262	682	472	292	239	242	250	195	246	3 841
Centre	The former Yugoslav Republic of Macedonia	0	0	0	0	0	0	0	0	0	0	2
Centre	Turkey	0	1	0	6	6	4	10	13	8	14	144
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	7 009	7 105	6 934	6 588	5 933	5 847	4 670	3 449	3 707	3 997	121 038
East	Uzbekistan	1 561	612	1 850	–	–	–	–	–	–	–	11 390
	Total non-EU/EEA	11 504	10 611	11 801	9 279	8 172	7 730	6 781	5 972	6 078	6 218	180 264
WHO European Region												
West	West	1 556	1 477	1 339	1 419	1 656	1 286	1 007	979	861	603	51 578
Centre	Centre	147	179	141	343	415	421	311	276	184	169	9 779
East	East	11 603	10 812	12 047	9 492	8 305	7 853	6 892	6 093	6 208	6 375	184 235
	Total WHO European Region	13 306	12 468	13 527	11 254	10 376	9 560	8 210	7 348	7 253	7 147	245 592

* Country-specific comments are in Annex 5.

** Cumulative total is the total number of cases reported by the country since the start of reporting.

^c Due to technical problems no data export for 2017 from Germany was available.^d No official data were reported by the Russian Federation. Latest available data on the number of new HIV diagnoses in people infected through injecting drug use was obtained from the Federal Scientific and Methodological Centre for Prevention and Control of AIDS (number (year)): 17099 (2008), 16370 (2009), 16673 (2010), 17418 (2011), 18546 (2012), 20637 (2013), 23566 (2014), 23737 (2015). Reference (4), Chapter 2.^e (in accordance with Security Council resolution 1244 (1999)).

Table 6. New HIV diagnoses in people infected through heterosexual contact, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of diagnosis										Cumulative total ^b
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	144	129	104	108	111	85	89	93	73	78	3 005
West	Belgium	421	447	465	475	500	418	403	359	337	306	11 249
Centre	Bulgaria	52	68	71	89	58	70	94	87	84	87	1 364
Centre	Croatia	16	12	7	21	7	13	12	13	13	8	383
Centre	Cyprus	22	27	15	23	23	16	10	26	27	32	566
Centre	Czech Republic	43	43	38	26	41	45	45	45	53	58	761
West	Denmark	122	105	141	132	96	90	102	126	100	93	3 343
East	Estonia	3	17	173	146	170	188	162	144	116	89	1 568
West	Finland	59	91	94	88	71	67	70	79	83	70	1 592
West	France	2 498	2 275	2 216	2 062	2 190	2 170	2 184	1 762	1 591	1 432	33 503
West	Germany ^c	511	506	444	511	481	584	771	961	865	–	13 679
West	Greece	170	131	123	152	157	124	142	128	141	139	3 586
Centre	Hungary	17	23	18	19	24	24	28	22	28	22	487
West	Iceland	6	8	10	6	0	0	0	0	9	2	111
West	Ireland	190	166	127	126	135	134	126	126	144	142	3 269
West	Italy	1 154	1 861	1 882	1 822	1 771	1 697	1 663	1 637	1 739	1 578	20 217
East	Latvia	164	133	131	144	112	125	132	150	138	131	2 037
	Liechtenstein	0	1	3	0	0	0	0	0	1	0	13
East	Lithuania	29	39	29	38	51	55	72	63	67	65	672
West	Luxembourg	26	32	32	27	28	26	33	26	25	30	671
West	Malta	24	9	10	13	15	10	9	15	21	17	182
West	Netherlands	364	350	355	302	305	253	236	261	208	161	7 857
West	Norway	185	170	157	155	142	123	140	138	120	115	3 320
Centre	Poland	69	84	108	93	102	90	108	112	108	94	1 767
West	Portugal	1 337	1 264	1 200	1 061	1 007	1 000	816	727	750	612	26 549
Centre	Romania	303	318	313	351	356	371	403	432	457	428	6 725
Centre	Slovakia	8	9	4	12	14	21	18	23	18	15	207
Centre	Slovenia	4	6	7	8	4	9	5	9	9	10	139
West	Spain	1 277	1 269	1 264	1 110	1 134	1 152	1 096	1 012	1 000	933	15 275
West	Sweden	194	194	222	260	227	218	229	211	202	212	5 657
West	United Kingdom	3 821	3 226	2 995	2 774	2 576	2 238	2 264	1 973	1 837	1 443	66 898
	Total EU/EEA	13 233	13 013	12 758	12 154	11 908	11 416	11 462	10 760	10 364	8 402	236 652
Non-EU/EEA												
Centre	Albania	43	52	34	60	66	101	62	77	115	87	910
West	Andorra	0	1	2	1	1	1	0	0	0	2	23
East	Armenia	86	83	86	127	162	176	263	231	240	281	1 978
East	Azerbaijan	101	117	131	191	244	272	376	438	334	334	2 867
East	Belarus	656	823	789	881	919	1 265	1 349	1 416	1 671	1 868	14 909
Centre	Bosnia and Herzegovina	8	3	1	14	4	0	7	4	6	2	123
East	Georgia	134	152	204	205	247	236	291	347	372	341	3 024
West	Israel	200	177	206	206	197	172	197	199	189	167	4 832
East	Kazakhstan	666	733	794	987	1 112	1 266	1 390	1 440	1 745	1 868	13 743
East	Kyrgyzstan	162	173	186	181	307	276	392	404	421	490	3 338
West	Monaco	0	0	0	0	1	0	0	0	0	1	13
Centre	Montenegro	4	6	3	4	5	1	4	3	9	3	84
East	Republic of Moldova	588	574	606	613	664	325	618	576	548	561	7 385
East	Russian Federation ^d	–	–	–	–	–	–	–	–	–	–	0
West	San Marino	0	0	0	4	3	0	0	0	0	0	23
Centre	Serbia	27	26	38	42	29	22	34	28	35	29	850
Centre	Serbia excluding Kosovo ^e	27	23	35	37	28	20	33	28	30	27	792
Centre	Kosovo ^e	–	3	3	5	1	2	1	0	5	2	58
West	Switzerland	278	253	222	210	219	223	174	181	163	131	6 950
East	Tajikistan	139	169	293	434	388	497	617	720	667	779	4 965
Centre	The former Yugoslav Republic of Macedonia	3	2	0	0	7	2	4	4	10	8	53
Centre	Turkey	273	217	195	263	376	428	495	583	646	775	5 619
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	7 780	8 541	9 122	10 248	10 440	11 472	10 648	9 043	10 018	11 075	131 296
East	Uzbekistan	716	955	852	–	–	–	–	–	–	–	4 711
	Total non-EU/EEA	11 864	13 057	13 764	14 671	15 391	16 735	16 921	15 694	17 189	18 802	207 696
WHO European Region												
	West	12 981	12 664	12 271	11 605	11 367	10 785	10 744	10 014	9 597	7 664	231 804
	Centre	892	896	852	1 025	1 116	1 213	1 329	1 468	1 618	1 658	20 038
	East	11 224	12 509	13 396	14 195	14 816	16 153	16 310	14 972	16 337	17 882	192 493
	Total WHO European Region	25 097	26 069	26 519	26 825	27 299	28 151	28 383	26 454	27 552	27 204	444 335

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d No official data were reported by the Russian Federation. Latest available data on the number of new HIV diagnoses in people infected through heterosexual contact was obtained from the Federal Scientific and Methodological Centre for Prevention and Control of AIDS (number (year)): 10191 (2008), 10925 (2009), 12641 (2010), 13251 (2011), 14664 (2012), 16668 (2013), 19084 (2014), 20496 (2015). Reference (4), Chapter 2.^e (in accordance with Security Council resolution 1244 (1999)).

Table 7. New HIV diagnoses in people infected through mother-to-child transmission, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of diagnosis										Cumulative total ^b
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	1	2	1	2	0	0	1	0	1	0	56
West	Belgium	9	7	11	18	10	7	9	12	8	5	432
Centre	Bulgaria	0	1	4	2	0	5	1	1	0	3	24
Centre	Croatia	1	0	0	1	0	0	1	0	0	0	14
Centre	Cyprus	0	0	0	0	1	0	0	1	0	0	4
Centre	Czech Republic	0	0	0	0	2	0	1	0	2	0	9
West	Denmark	4	0	3	3	4	5	5	4	1	5	111
East	Estonia	8	3	3	3	4	2	5	1	0	0	54
West	Finland	1	2	1	1	2	2	2	3	2	0	31
West	France	29	34	41	36	49	36	48	42	25	18	535
West	Germany ^c	16	11	20	15	20	21	25	26	21	–	408
West	Greece	1	0	3	4	0	0	1	0	3	1	69
Centre	Hungary	0	2	0	0	1	1	1	2	1	2	17
West	Iceland	0	0	0	0	0	0	0	0	0	0	1
West	Ireland	7	5	9	3	5	3	2	5	3	0	85
West	Italy	7	19	14	25	16	13	14	16	9	12	194
East	Latvia	8	2	4	2	7	10	4	3	6	3	75
	Liechtenstein	0	0	0	0	0	0	0	0	0	0	1
East	Lithuania	0	0	0	1	0	1	2	0	1	1	7
West	Luxembourg	0	1	0	0	1	0	2	0	0	0	13
West	Malta	0	0	0	0	0	0	0	0	2	0	2
West	Netherlands	23	20	24	14	18	9	11	9	2	2	340
West	Norway	4	4	1	4	7	1	3	2	2	2	85
Centre	Poland	12	12	11	7	4	4	3	8	1	3	217
West	Portugal	16	14	15	10	5	9	7	3	3	3	448
Centre	Romania	14	23	27	22	19	24	18	18	6	14	740
Centre	Slovakia	0	0	0	0	0	0	0	0	0	0	0
Centre	Slovenia	0	0	0	1	0	0	0	0	0	0	7
West	Spain	11	15	16	11	7	18	4	3	8	6	136
West	Sweden	10	9	13	22	14	7	7	15	10	14	249
West	United Kingdom	130	133	111	113	93	86	88	47	45	42	2 777
	Total EU/EEA	312	319	332	320	289	264	265	221	162	136	7 141
Non-EU/EEA												
Centre	Albania	1	2	0	3	3	6	3	1	1	1	33
West	Andorra	0	0	0	0	0	0	0	0	0	0	1
East	Armenia	0	3	3	2	3	5	7	4	1	5	45
East	Azerbaijan	5	5	11	9	14	10	18	16	10	10	119
East	Belarus	17	15	22	23	16	16	15	26	20	13	304
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	1
East	Georgia	12	4	13	7	9	3	5	6	4	3	99
West	Israel	16	11	7	8	7	9	9	4	4	6	255
East	Kazakhstan	44	22	21	18	30	36	22	25	24	34	347
East	Kyrgyzstan	25	16	19	20	33	10	14	25	17	16	207
West	Monaco	0	0	0	0	0	0	0	0	0	0	1
Centre	Montenegro	1	0	0	0	0	0	0	0	0	0	4
East	Republic of Moldova	17	8	10	16	9	13	19	14	10	11	176
East	Russian Federation ^d	–	–	–	–	–	–	–	–	–	–	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	1
Centre	Serbia	1	4	0	1	1	4	1	1	2	0	50
Centre	Serbia excluding Kosovo ^e	1	2	0	1	0	4	1	0	2	0	46
Centre	Kosovo ^e	0	2	0	0	1	0	0	1	0	0	4
West	Switzerland	2	4	7	4	2	3	1	4	4	4	179
East	Tajikistan	3	11	14	26	37	47	57	56	53	60	373
Centre	The former Yugoslav Republic of Macedonia	0	0	0	0	0	0	0	0	0	0	2
Centre	Turkey	7	7	0	5	12	11	22	23	15	12	154
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	217	169	177	136	149	111	122	98	77	86	2 150
East	Uzbekistan	57	96	73	–	–	–	–	–	–	–	363
	Total non-EU/EEA	425	377	377	278	325	284	315	303	242	261	4 864
WHO European Region												
	West	287	291	297	293	260	229	239	195	153	120	6 409
	Centre	37	51	42	42	43	55	51	55	28	35	1 276
	East	413	354	370	263	311	264	290	274	223	242	4 319
	Total WHO European Region	737	696	709	598	614	548	580	524	404	397	12 004

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d No official data were reported by the Russian Federation. Latest available data on the number of new HIV diagnoses in children infected through mother-to-child transmission was obtained from the Federal Scientific and Methodological Centre for Prevention and Control of AIDS (number (year)): 690 (2008), 619 (2009), 563 (2010), 548 (2011), 507 (2012), 438 (2013), 416 (2014), 423 (2015). Reference (4), Chapter 2.^e (in accordance with Security Council resolution 1244 (1999)).

Table 8. HIV diagnoses in 2017, by country of report, transmission mode and sex, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	MSM		Injecting drug users			Heterosexual			Mother-to-child transmission		
		Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b
EU/EEA												
West	Austria	157	158	3	9	12	37	41	78	0	0	0
West	Belgium	306	306	2	5	7	178	126	306	3	2	5
Centre	Bulgaria	120	120	2	29	31	19	68	87	2	1	3
Centre	Croatia	97	97	0	0	0	5	3	8	0	0	0
Centre	Cyprus	47	47	0	0	0	18	14	32	0	0	0
Centre	Czech Republic	181	181	0	5	5	19	39	58	0	0	0
West	Denmark	123	123	1	5	6	43	50	93	3	2	5
East	Estonia	16	16	3	11	14	41	48	89	0	0	0
West	Finland	32	32	2	8	10	34	36	70	0	0	0
West	France	1 192	1 239	13	30	43	823	604	1 432	8	10	18
West	Germany ^c	–	–	–	–	–	–	–	–	–	–	–
West	Greece	290	292	10	76	86	73	66	139	0	1	1
Centre	Hungary	110	110	0	1	1	14	8	22	1	1	2
West	Iceland	4	4	1	2	3	1	1	2	0	0	0
West	Ireland	249	249	2	12	14	88	54	142	0	0	0
West	Italy	1 324	1 324	17	77	94	707	871	1 578	7	5	12
East	Latvia	24	24	11	67	78	59	72	131	2	1	3
	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	18	18	11	125	136	26	39	65	1	0	1
West	Luxembourg	15	15	5	4	9	10	20	30	0	0	0
West	Malta	23	23	0	0	0	10	7	17	0	0	0
West	Netherlands	474	474	0	2	2	78	83	161	2	0	2
West	Norway	88	88	1	6	7	57	58	115	0	2	2
Centre	Poland	318	318	3	24	27	43	51	94	2	1	3
West	Portugal	391	391	2	16	18	283	329	612	2	1	3
Centre	Romania	132	132	12	74	86	156	272	428	6	8	14
Centre	Slovakia	50	50	0	0	0	6	9	15	0	0	0
Centre	Slovenia	26	26	0	0	0	2	8	10	0	0	0
West	Spain	1 742	1 742	22	83	105	435	498	933	3	3	6
West	Sweden	128	128	5	15	20	120	92	212	7	7	14
West	United Kingdom	1 967	1 967	27	88	115	790	648	1 443	24	18	42
	Total EU/EEA	9 644	9 694	155	774	929	4 175	4 215	8 402	73	63	136
Non-EU/EEA												
Centre	Albania	6	6	0	0	0	25	62	87	0	1	1
West	Andorra	2	2	0	0	0	2	0	2	0	0	0
East	Armenia	17	17	1	37	38	95	186	281	4	1	5
East	Azerbaijan	38	38	1	86	87	167	167	334	6	4	10
East	Belarus	72	72	113	372	485	800	1 068	1 868	6	7	13
Centre	Bosnia and Herzegovina	9	9	0	0	0	0	2	2	0	0	0
East	Georgia	130	130	3	145	148	130	211	341	0	3	3
West	Israel	145	145	10	22	32	82	85	167	3	3	6
East	Kazakhstan	143	143	145	755	900	996	872	1 868	17	17	34
East	Kyrgyzstan	45	45	29	175	204	276	214	490	10	6	16
West	Monaco	2	2	0	0	0	0	1	1	0	0	0
Centre	Montenegro	22	22	0	1	1	1	2	3	0	0	0
East	Republic of Moldova	29	29	4	38	42	271	290	561	5	6	11
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	0
Centre	Serbia	119	119	2	2	4	7	22	29	0	0	0
Centre	Serbia excluding Kosovo ^d	119	119	2	2	4	7	20	27	0	0	0
Centre	Kosovo ^d	0	0	0	0	0	0	2	2	0	0	0
West	Switzerland	168	168	6	14	20	61	69	131	1	3	4
East	Tajikistan	12	12	12	234	246	381	398	779	31	29	60
Centre	The former Yugoslav Republic of Macedonia	34	34	0	0	0	0	8	8	0	0	0
Centre	Turkey	494	494	4	10	14	141	634	775	6	6	12
East	Turkmenistan	–	–	–	–	–	–	–	–	–	–	–
East	Ukraine	492	492	605	3 392	3 997	5 671	5 404	11 075	42	44	86
East	Uzbekistan	–	–	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	1 979	1 979	935	5 283	6 218	9 106	9 695	18 802	131	130	261
WHO European Region												
	West	8 822	8 872	129	474	603	3 912	3 739	7 664	63	57	120
	Centre	1 765	1 765	23	146	169	456	1 202	1 658	17	18	35
	East	1 036	1 036	938	5 437	6 375	8 913	8 969	17 882	124	118	242
	Total WHO European Region	11 623	11 673	1 090	6 057	7 147	13 281	13 910	27 204	204	193	397

^a Country-specific comments are in Annex 5.^b Totals include transgender and persons with unknown gender and may, therefore, not equal the sum of the columns or may differ slightly from the totals presented for 2017 in tables 4–7.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	Nosocomial			Haemophilic/transfusion			Unknown			Total ^b	Country, territory or area ^a
	Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b		
											EU/EEA
	1	1	2	0	0	0	4	16	20	270	Austria
	0	0	0	7	1	8	88	158	258	890	Belgium
	0	0	0	0	0	0	0	0	0	241	Bulgaria
	0	0	0	0	0	0	0	1	1	106	Croatia
	0	0	0	2	1	3	0	3	3	85	Cyprus
	2	0	2	0	1	1	1	6	7	254	Czech Republic
	0	0	0	1	0	1	2	12	14	242	Denmark
	0	0	0	0	0	0	29	71	100	219	Estonia
	0	0	0	2	0	2	19	25	44	158	Finland
	0	0	0	4	4	8	919	1550	2 471	5 211	France
	-	-	-	-	-	-	-	-	-	-	Germany
	0	0	0	0	0	0	23	87	110	628	Greece
	0	0	0	0	0	0	3	28	88	223	Hungary
	0	0	0	0	0	0	1	14	15	24	Iceland
	0	0	0	0	1	1	26	51	77	483	Ireland
	0	0	0	3	1	4	86	345	431	3 443	Italy
	0	0	0	0	0	0	58	77	135	371	Latvia
	0	0	0	0	0	0	0	0	0	0	Liechtenstein
	0	0	0	0	0	0	5	38	43	263	Lithuania
	0	0	0	0	0	0	1	4	5	59	Luxembourg
	0	0	0	0	0	0	0	5	5	45	Malta
	0	0	0	0	0	0	17	60	77	716	Netherlands
	0	0	0	0	0	0	0	1	1	213	Norway
	0	1	1	0	1	1	100	776	881	1 325	Poland
	0	0	0	1	0	1	12	31	43	1 068	Portugal
	0	0	0	0	0	0	0	1	1	661	Romania
	0	0	0	0	0	0	0	5	5	70	Slovakia
	0	0	0	0	0	0	0	3	3	39	Slovenia
	0	0	0	3	3	6	50	407	457	3 249	Spain
	0	0	0	3	1	4	26	30	56	434	Sweden
	2	3	5	12	7	19	262	505	772	4 363	United Kingdom
	5	5	10	38	21	59	1 732	4 310	6 123	25 353	Total EU/EEA
											Non-EU/EEA
	0	0	0	0	0	0	0	0	0	94	Albania
	0	0	0	0	0	0	1	1	2	6	Andorra
	0	0	0	0	0	0	2	11	13	354	Armenia
	0	0	0	0	0	0	35	66	101	570	Azerbaijan
	0	0	0	1	0	1	8	21	29	2 468	Belarus
	0	0	0	0	1	1	0	0	0	12	Bosnia and Herzegovina
	0	0	0	3	2	5	3	1	4	631	Georgia
	0	0	0	0	0	0	18	37	55	405	Israel
	0	0	0	0	0	0	37	37	74	3 019	Kazakhstan
	7	6	13	0	0	0	27	45	72	840	Kyrgyzstan
	0	0	0	0	0	0	0	0	0	3	Monaco
	0	0	0	0	0	0	0	0	0	26	Montenegro
	0	0	0	0	0	0	82	111	193	836	Republic of Moldova
	-	-	-	-	-	-	-	-	-	-	Russian Federation
	0	0	0	0	0	0	0	1	1	1	San Marino
	0	0	0	1	0	1	0	28	28	181	Serbia
	0	0	0	1	0	1	0	27	27	178	Serbia excluding Kosovo ^d
	0	0	0	0	0	0	0	1	1	3	Kosovo ^d
	0	0	0	1	0	1	30	87	119	443	Switzerland
	0	2	2	0	0	0	46	63	109	1 208	Tajikistan
	0	0	0	0	0	0	0	2	2	44	The former Yugoslav Republic of Macedonia
	2	6	8	2	2	4	300	1 237	1 537	2 844	Turkey
	-	-	-	-	-	-	-	-	-	-	Turkmenistan
	0	0	0	0	0	0	11	19	30	15 680	Ukraine
	-	-	-	-	-	-	-	-	-	-	Uzbekistan
	9	14	23	8	5	13	600	1 767	2 369	29 665	Total non-EU/EEA
											WHO European Region
	3	4	7	37	18	55	1 585	3 427	5 033	22 354	West
	4	7	11	5	6	11	404	2 090	2 556	6 205	Centre
	7	8	15	4	2	6	343	560	903	26 459	East
	14	19	33	46	26	72	2 332	6 077	8 492	55 018	Total WHO European Region

Table 9. HIV diagnoses in 2017, by country of report, age and sex, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	< 15 years			15–19 years			20–24 years			25–29 years		
		Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b
EU/EEA													
West	Austria	0	0	0	2	4	6	5	15	20	6	41	47
West	Belgium	4	6	10	10	9	20	18	39	58	45	83	130
Centre	Bulgaria	2	1	3	0	0	0	2	22	24	6	40	46
Centre	Croatia	0	0	0	0	0	0	0	14	14	1	12	13
Centre	Cyprus	0	0	0	2	0	2	2	8	10	4	13	17
Centre	Czech Republic	1	0	1	0	5	5	1	29	30	3	47	50
West	Denmark	3	1	4	0	3	3	4	11	15	5	37	42
East	Estonia	0	0	0	2	0	2	6	8	14	10	30	40
West	Finland	1	0	1	0	0	0	3	6	9	7	4	11
West	France	16	18	34	56	83	139	128	342	476	222	472	705
West	Germany ^c	–	–	–	–	–	–	–	–	–	–	–	–
West	Greece	0	1	1	4	6	10	7	30	38	14	66	80
Centre	Hungary	1	1	2	1	1	2	0	24	24	2	25	27
West	Iceland	0	0	0	0	2	2	0	0	0	2	5	7
West	Ireland	0	0	0	1	2	3	5	33	38	15	91	106
West	Italy	8	6	14	31	46	77	115	215	330	140	377	517
East	Latvia	3	1	4	1	3	4	4	15	19	21	36	57
	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	1	0	1	1	2	3	4	10	14	8	26	34
West	Luxembourg	0	0	0	0	0	0	2	4	6	1	3	4
West	Malta	0	0	0	0	0	0	1	0	1	1	3	4
West	Netherlands	10	4	14	3	15	18	10	56	66	11	105	116
West	Norway	0	2	2	2	0	2	2	15	17	12	17	29
Centre	Poland	1	2	3	1	13	14	8	118	126	27	227	254
West	Portugal	2	2	4	5	14	19	17	82	99	29	107	136
Centre	Romania	7	9	16	11	12	23	23	49	72	37	103	140
Centre	Slovakia	0	0	0	0	1	1	1	5	6	1	11	12
Centre	Slovenia	0	0	0	0	0	0	0	3	3	0	6	6
West	Spain	3	4	7	14	46	60	35	290	325	69	486	555
West	Sweden	7	6	13	7	8	15	6	20	26	22	45	67
West	United Kingdom	19	10	29	28	68	96	75	331	406	132	535	669
	Total EU/EEA	89	74	163	182	343	526	484	1794	2 286	853	3 053	3 921
Non-EU/EEA													
Centre	Albania	0	1	1	0	1	1	2	6	8	2	8	10
West	Andorra	0	0	0	0	0	0	0	0	0	0	0	0
East	Armenia	5	1	6	2	0	2	10	11	21	11	24	35
East	Azerbaijan	10	4	14	4	1	5	24	21	45	36	70	106
East	Belarus	6	8	14	15	8	23	62	76	138	125	187	312
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	3	3	0	0	0
East	Georgia	0	3	3	2	5	7	11	48	59	9	74	83
West	Israel	2	2	4	3	5	8	3	22	25	8	40	48
East	Kazakhstan	19	21	40	21	18	39	89	120	209	208	271	479
East	Kyrgyzstan	17	13	30	8	5	13	34	31	65	60	67	127
West	Monaco	0	0	0	0	0	0	0	0	0	0	0	0
Centre	Montenegro	0	0	0	0	0	0	0	3	3	0	8	8
East	Republic of Moldova	5	6	11	16	5	21	43	36	79	68	73	141
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	0	0
Centre	Serbia	0	0	0	0	1	1	1	18	19	0	31	31
Centre	Serbia excluding Kosovo ^d	0	0	0	0	1	1	1	18	19	0	31	31
Centre	Kosovo ^d	0	0	0	0	0	0	0	0	0	0	0	0
West	Switzerland	2	2	5	1	2	3	5	24	29	12	43	56
East	Tajikistan	57	67	124	5	9	14	41	33	74	82	99	181
Centre	The former Yugoslav Republic of Macedonia	0	0	0	0	0	0	0	7	7	0	14	14
Centre	Turkey	8	10	18	12	58	70	40	339	379	87	448	535
East	Turkmenistan	–	–	–	–	–	–	–	–	–	–	–	–
East	Ukraine	52	48	100	106	59	165	445	334	779	890	958	1 848
East	Uzbekistan	–	–	–	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	183	186	370	195	177	372	810	1 132	1 942	1 598	2 415	4 014
WHO European Region													
West	West	77	64	142	167	313	481	441	1 535	1 984	753	2 560	3 329
Centre	Centre	20	24	44	27	92	119	80	648	728	170	993	1 163
East	East	175	172	347	183	115	298	773	743	1 516	1 528	1 915	3 443
	Total WHO European Region	272	260	533	377	520	898	1 294	2 926	4 228	2 451	5 468	7 935

^a Country-specific comments are in Annex 5.^b Totals include persons with unknown gender and may, therefore, not equal the sum of the columns.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	30–39 years			40–49 years			50+ years			Unknown age			Total ^b	Country, territory or area ^a
	Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b		
														EU/EEA
	13	73	86	11	61	73	8	30	38	0	0	0	270	Austria
	86	184	278	59	142	202	56	133	189	0	2	3	890	Belgium
	7	100	107	3	43	46	3	12	15	0	0	0	241	Bulgaria
	1	35	36	2	30	32	1	10	11	0	0	0	106	Croatia
	7	21	28	3	10	13	2	13	15	0	0	0	85	Cyprus
	9	77	86	5	47	52	3	27	30	0	0	0	254	Czech Republic
	21	61	82	12	42	54	5	37	42	0	0	0	242	Denmark
	30	56	86	17	32	49	8	20	28	0	0	0	219	Estonia
	28	31	59	10	29	39	8	31	39	0	0	0	158	Finland
	618	882	1 524	401	755	1 164	326	838	1 169	0	0	0	5 211	France
	–	–	–	–	–	–	–	–	–	–	–	–	–	Germany ^c
	33	192	225	24	139	163	24	86	111	0	0	0	628	Greece
	7	56	64	3	23	26	4	18	22	0	0	56	223	Hungary
	1	7	8	0	3	3	0	4	4	0	0	0	24	Iceland
	54	127	181	29	61	90	12	53	65	0	0	0	483	Ireland
	228	685	913	142	659	801	156	635	791	0	0	0	3 443	Italy
	42	97	139	29	60	89	30	29	59	0	0	0	371	Latvia
	0	0	0	0	0	0	0	0	0	0	0	0	0	Liechtenstein
	13	98	111	6	56	62	10	28	38	0	0	0	263	Lithuania
	7	16	23	4	9	13	2	11	13	0	0	0	59	Luxembourg
	5	13	18	2	9	11	1	7	8	0	3	3	45	Malta
	27	146	173	19	127	146	17	166	183	0	0	0	716	Netherlands
	25	55	80	12	37	49	5	29	34	0	0	0	213	Norway
	59	478	539	29	198	227	19	107	127	4	29	35	1 325	Poland
	88	195	283	66	163	229	93	205	298	0	0	0	1 068	Portugal
	49	167	216	27	96	123	20	51	71	0	0	0	661	Romania
	2	21	23	1	17	18	1	9	10	0	0	0	70	Slovakia
	0	10	10	1	9	10	1	9	10	0	0	0	39	Slovenia
	169	922	1 091	137	585	722	86	402	488	0	1	1	3 249	Spain
	60	81	141	37	51	88	22	62	84	0	0	0	434	Sweden
	345	938	1 287	277	723	1 003	241	631	873	0	0	0	4 363	United Kingdom
	2 034	5 824	7 897	1 368	4 216	5 597	1 164	3 693	4 865	4	35	98	25 353	Total EU/EEA
														Non-EU/EEA
	6	18	24	7	17	24	8	18	26	0	0	0	94	Albania
	2	2	4	1	0	1	0	1	1	0	0	0	6	Andorra
	31	88	119	24	66	90	19	62	81	0	0	0	354	Armenia
	63	119	182	54	94	148	18	52	70	0	0	0	570	Azerbaijan
	366	714	1 080	208	381	589	146	166	312	0	0	0	2 468	Belarus
	0	4	4	0	2	2	0	3	3	0	0	0	12	Bosnia and Herzegovina
	40	167	207	44	126	170	33	68	101	0	1	1	631	Georgia
	39	94	133	35	71	106	22	57	79	1	1	2	405	Israel
	410	774	1 184	282	419	701	166	201	367	0	0	0	3 019	Kazakhstan
	108	194	302	75	133	208	47	48	95	0	0	0	840	Kyrgyzstan
	0	1	1	0	1	1	0	1	1	0	0	0	3	Monaco
	1	9	10	0	4	4	0	1	1	0	0	0	26	Montenegro
	116	185	301	58	89	147	56	80	136	0	0	0	836	Republic of Moldova
	–	–	–	–	–	–	–	–	–	–	–	–	–	Russian Federation
	0	0	0	0	1	1	0	0	0	0	0	0	1	San Marino
	3	66	69	1	34	35	5	21	26	0	0	0	181	Serbia
	3	65	68	1	32	33	5	21	26	0	0	0	178	Serbia excluding Kosovo ^d
	0	1	1	0	2	2	0	0	0	0	0	0	3	Kosovo ^d
	35	110	145	22	76	98	22	84	107	0	0	0	443	Switzerland
	169	269	438	84	197	281	32	64	96	0	0	0	1 208	Tajikistan
	0	15	15	0	6	6	0	1	1	0	1	1	44	The former Yugoslav Republic of Macedonia
	165	757	922	71	404	475	72	372	444	0	1	1	2 844	Turkey
	–	–	–	–	–	–	–	–	–	–	–	–	–	Turkmenistan
	2 370	4 152	6 522	1 517	2 681	4 198	949	1 119	2 068	0	0	0	15 680	Ukraine
	–	–	–	–	–	–	–	–	–	–	–	–	–	Uzbekistan
	3 924	7 738	11 662	2 483	4 802	7 285	1 595	2 419	4 015	1	4	5	29 665	Total non-EU/EEA
														WHO European Region
	1 884	4 815	6 735	1 300	3 744	5 057	1 106	3 503	4 617	1	7	9	22 354	West
	316	1 834	2 153	153	940	1 093	139	672	812	4	31	93	6 205	Centre
	3 758	6 913	10 671	2 398	4 334	6 732	1 514	1 937	3 451	0	1	1	26 459	East
	5 958	13 562	19 559	3 851	9 018	12 882	2 759	6 112	8 880	5	39	103	55 018	Total WHO European Region

Table 10. HIV diagnoses in people infected through heterosexual contact, by country and transmission subcategory, cases diagnosed in 2017, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Case from a generalized epidemic country		Partner from a generalized epidemic country		Partner from a non-generalized epidemic country		Partner injecting drug user		Bisexual partner		Other		Unknown		Total N
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	
EU/EEA																
West	Austria	18	23.1	1	1.3	0	0.0	1	1.3	0	0.0	0	0.0	58	74.4	78
West	Belgium	142	46.4	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	164	53.6	306
Centre	Bulgaria															
Centre	Croatia	0	0.0	0	0.0	0	0.0	0	0.0	1	12.5	0	0.0	7	87.5	8
Centre	Cyprus	6	18.8	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	26	81.3	32
Centre	Czech Republic	3	5.2	1	1.7	6	0.0	1	1.7	1	1.7	0	0.0	46	79.3	58
West	Denmark	27	29.0	29	31.2	33	35.5	1	1.1	1	1.1	0	0.0	2	2.2	93
East	Estonia	0	0.0	0	0.0	0	0.0	4	4.5	0	0.0	0	0.0	85	95.5	89
West	Finland	13	18.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	57	81.4	70
West	France	750	52.4	180	12.6	31	2.2	8	0.6	4	0.3	0	0.0	459	32.1	1 432
West	Germany ^b	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
West	Greece	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Centre	Hungary	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
West	Iceland	1	50.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1	50.0	2
West	Ireland	82	57.7	17	12.0	0	0.0	1	0.7	1	0.7	0	0.0	41	28.9	142
West	Italy	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
East	Latvia	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
	Liechtenstein	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
East	Lithuania	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
West	Luxembourg	7	23.3	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	23	76.7	30
West	Malta	8	47.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	9	52.9	17
West	Netherlands	26	16.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	135	83.9	161
West	Norway	0	0.0	43	37.4	58	50.4	0	0.0	0	0.0	0	0.0	14	12.2	115
Centre	Poland	0	0.0	0	0.0	1	1.1	0	0.0	0	0.0	0	0.0	93	98.9	94
West	Portugal	143	23.4	21	3.4	124	20.3	2	0.3	0	0.0	0	0.0	322	52.6	612
Centre	Romania	1	0.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	427	99.8	428
Centre	Slovakia	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Centre	Slovenia	0	0.0	0	0.0	0	0.0	0	0.0	1	10.0	0	0.0	9	90.0	10
West	Spain	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
West	Sweden	107	50.5	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	105	49.5	212
West	United Kingdom	648	44.9	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	795	55.1	1 443
	Total EU/EEA	1 982	36.5	292	5.4	253	4.7	18	0.3	9	0.2	0	0.0	2 878	53.0	5 432
Non-EU/EEA																
Centre	Albania	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
West	Andorra	0	0.0	0	0.0	2	100.0	0	0.0	0	0.0	0	0.0	0	0.0	2
East	Armenia	0	0.0	0	0.0	261	92.9	10	3.6	0	0.0	0	0.0	10	3.6	281
East	Azerbaijan	1	0.3	0	0.0	77	23.1	34	10.2	1	0.3	0	0.0	221	66.2	334
East	Belarus	1	0.1	0	0.0	112	6.0	53	2.8	0	0.0	0	0.0	1 702	91.1	1 868
Centre	Bosnia and Herzegovina	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
East	Georgia	0	0.0	47	13.8	0	0.0	34	10.0	0	0.0	0	0.0	260	76.2	341
West	Israel	58	34.7	32	19.2	0	0.0	2	1.2	1	0.6	0	0.0	74	44.3	167
East	Kazakhstan	0	0.0	0	0.0	340	18.2	194	10.4	1	0.1	0	0.0	1 333	71.4	1 868
East	Kyrgyzstan	0	0.0	0	0.0	0	0.0	72	14.7	5	1.0	0	0.0	413	84.3	490
West	Monaco	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Centre	Montenegro	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
East	Republic of Moldova	0	0.0	0	0.0	458	81.6	0	0.0	0	0.0	0	0.0	103	18.4	561
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Centre	Serbia	0	0.0	0	0.0	2	6.9	0	0.0	1	3.4	0	0.0	26	89.7	29
Centre	Serbia excluding Kosovo ^c	0	0.0	0	0.0	1	3.7	0	0.0	1	3.7	0	0.0	25	92.6	27
Centre	Kosovo ^c	0	0.0	0	0.0	1	50.0	0	0.0	0	0.0	0	0.0	1	50.0	2
West	Switzerland	27	20.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	104	79.4	131
East	Tajikistan	0	0.0	0	0.0	114	14.6	36	4.6	0	0.0	0	0.0	629	80.7	779
Centre	The former Yugoslav Republic of Macedonia	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
Centre	Turkey	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
East	Turkmenistan	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
East	Ukraine	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
East	Uzbekistan	–	–	–	–	–	–	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	87	1.3	79	1.2	1 366	19.9	435	6.3	9	0.1	0	0.0	4 875	71.2	6 851
WHO European Region																
	West	2 057	41.0	323	6.4	248	4.9	15	0.3	7	0.1	0	0.0	2 363	47.1	5 013
	Centre	10	1.5	1	0.2	9	1.4	1	0.2	4	0.6	0	0.0	634	96.2	659
	East	2	0.0	47	0.7	1 362	20.6	437	6.6	7	0.1	0	0.0	4 756	71.9	6 611
	Total WHO European Region	2 069	16.8	371	3.0	1 619	13.2	453	3.7	18	0.1	0	0.0	7 753	63.1	12 283

^a Country-specific comments are in Annex 5. Countries that do not report on the optional variable "transmission partner" are excluded and, thus, regional totals may not equal those presented in Table 6.

^b Due to technical problems no data export for 2017 from Germany was available.

^c (in accordance with Security Council resolution 1244 (1999)).

Table 11. HIV diagnoses, by country of report and region of origin, cases diagnosed in 2017, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Country of report		Western Europe		Central and eastern Europe		Sub-Saharan Africa	
		N	%	N	%	N	%	N	%
EU/EEA									
West	Austria	141	52.2	15	5.6	68	25.2	21	7.8
West	Belgium	266	29.9	64	7.2	39	4.4	211	23.7
Centre	Bulgaria	234	97.1	3	1.2	4	1.7	0	0.0
Centre	Croatia	87	82.1	1	0.9	14	13.2	1	0.9
Centre	Cyprus	32	37.6	13	15.3	20	23.5	10	11.8
Centre	Czech Republic	176	69.3	4	1.6	55	21.7	3	1.2
West	Denmark	112	46.3	15	6.2	34	14.0	32	13.2
East	Estonia	99	45.2	0	0.0	8	3.7	0	0.0
West	Finland	70	44.3	3	1.9	31	19.6	20	12.7
West	France	1 324	25.4	67	1.3	79	1.5	1 090	20.9
West	Germany ^b	–	–	–	–	–	–	–	–
West	Greece	430	68.5	8	1.3	70	11.1	60	9.6
Centre	Hungary	–	–	–	–	–	–	–	–
West	Iceland	9	37.5	5	20.8	6	25.0	1	4.2
West	Ireland	117	24.2	29	6.0	35	7.2	104	21.5
West	Italy	2 249	65.3	24	0.7	174	5.1	652	18.9
East	Latvia	365	98.4	1	0.3	3	0.8	0	0.0
	Liechtenstein	–	–	–	–	–	–	–	–
East	Lithuania	253	96.2	4	1.5	4	1.5	0	0.0
West	Luxembourg	15	25.4	19	32.2	4	6.8	14	23.7
West	Malta	16	35.6	8	17.8	7	15.6	8	17.8
West	Netherlands	419	58.5	22	3.1	43	6.0	59	8.2
West	Norway	74	34.7	16	7.5	24	11.3	43	20.2
Centre	Poland	809	61.1	0	0.0	11	0.8	0	0.0
West	Portugal	692	64.8	23	2.2	8	0.7	198	18.5
Centre	Romania	653	98.8	2	0.3	0	0.0	1	0.2
Centre	Slovakia	64	91.4	0	0.0	5	7.1	1	1.4
Centre	Slovenia	33	84.6	0	0.0	3	7.7	0	0.0
West	Spain	1 974	60.8	110	3.4	119	3.7	236	7.3
West	Sweden	97	22.4	13	3.0	65	15.0	152	35.0
West	United Kingdom	1 663	38.1	359	8.2	377	8.6	806	18.5
	Total EU/EEA	12 473	49.6	828	3.3	1 310	5.2	3 723	14.8
Non-EU/EEA									
Centre	Albania	94	100.0	0	0.0	0	0.0	0	0.0
West	Andorra	2	33.3	4	66.7	0	0.0	0	0.0
East	Armenia	354	100.0	0	0.0	0	0.0	0	0.0
East	Azerbaijan	559	98.1	0	0.0	10	1.8	1	0.2
East	Belarus	2 464	99.8	0	0.0	2	0.1	1	0.0
Centre	Bosnia and Herzegovina	12	100.0	0	0.0	0	0.0	0	0.0
East	Georgia	629	99.7	0	0.0	2	0.3	0	0.0
West	Israel	133	32.8	5	1.2	104	25.7	78	19.3
East	Kazakhstan	2 864	94.9	0	0.0	136	4.5	0	0.0
East	Kyrgyzstan	796	94.8	1	0.1	35	4.2	1	0.1
West	Monaco	–	–	–	–	–	–	–	–
Centre	Montenegro	26	100.0	0	0.0	0	0.0	0	0.0
East	Republic of Moldova	836	100.0	0	0.0	0	0.0	0	0.0
East	Russian Federation	–	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–	–
Centre	Serbia	179	98.9	0	0.0	2	1.1	0	0.0
Centre	Serbia excluding Kosovo ^c	176	98.9	0	0.0	2	1.1	0	0.0
Centre	Kosovo ^c	3	100.0	0	0.0	0	0.0	0	0.0
West	Switzerland	191	43.1	53	12.0	18	4.1	50	11.3
East	Tajikistan	1 204	99.7	0	0.0	1	0.1	0	0.0
Centre	The former Yugoslav Republic of Macedonia	44	100.0	0	0.0	0	0.0	0	0.0
Centre	Turkey	2 384	83.8	35	1.2	175	6.2	63	2.2
East	Turkmenistan	–	–	–	–	–	–	–	–
East	Ukraine	15 680	100.0	0	0.0	0	0.0	0	0.0
East	Uzbekistan	–	–	–	–	–	–	–	–
	Total non-EU/EEA	28 451	95.9	98	0.3	485	1.6	194	0.7
WHO European Region									
West	West	9 994	44.7	862	3.9	1 305	5.8	3 835	17.2
Centre	Centre	4 827	80.7	58	1.0	289	4.8	79	1.3
East	East	26 103	98.7	6	0.0	201	0.8	3	0.0
	Total WHO European Region	40 924	74.7	926	1.7	1 795	3.3	3 917	7.1

^a Country-specific comments are in Annex 5. Countries that do not report on the variables "country of birth", "country of nationality" or "region of origin" are excluded and therefore regional totals may not equal those presented in Table 1.

^b Due to technical problems no data export for 2017 from Germany was available.

^c (in accordance with Security Council resolution 1244 (1999)).

	Latin America and Caribbean		South and south-east Asia		Other		Unknown		Total	Country, territory or area ^a
	N	Rate	N	%	N	%	N	%		
										EU/EEA
	7	2.6	12	4.4	5	1.9	1	0.4	270	Austria
	48	5.4	26	2.9	31	3.5	205	23.0	890	Belgium
	0	0.0	0	0.0	0	0.0	0	0.0	241	Bulgaria
	0	0.0	1	0.9	2	1.9	0	0.0	106	Croatia
	1	1.2	8	9.4	1	1.2	0	0.0	85	Cyprus
	7	2.8	5	2.0	4	1.6	0	0.0	254	Czech Republic
	13	5.4	21	8.7	15	6.2	0	0.0	242	Denmark
	0	0.0	3	1.4	0	0.0	109	49.8	219	Estonia
	3	1.9	11	7.0	3	1.9	17	10.8	158	Finland
	216	4.1	52	1.0	124	2.4	2 259	43.4	5 211	France
	–	–	–	–	–	–	–	–	–	Germany ^b
	2	0.3	28	4.5	16	2.5	14	2.2	628	Greece
	–	–	–	–	–	–	–	–	–	Hungary
	0	0.0	1	4.2	2	8.3	0	0.0	24	Iceland
	83	17.2	18	3.7	7	1.4	90	18.6	483	Ireland
	233	6.8	45	1.3	51	1.5	15	0.4	3 443	Italy
	0	0.0	0	0.0	0	0.0	2	0.5	371	Latvia
	–	–	–	–	–	–	–	–	–	Liechtenstein
	0	0.0	0	0.0	2	0.8	0	0.0	263	Lithuania
	2	3.4	1	1.7	4	6.8	0	0.0	59	Luxembourg
	3	6.7	3	6.7	0	0.0	0	0.0	45	Malta
	72	10.1	34	4.7	36	5.0	31	4.3	716	Netherlands
	15	7.0	20	9.4	7	3.3	14	6.6	213	Norway
	0	0.0	0	0.0	0	0.0	505	38.1	1 325	Poland
	110	10.3	3	0.3	0	0.0	34	3.2	1 068	Portugal
	0	0.0	0	0.0	0	0.0	5	0.8	661	Romania
	0	0.0	0	0.0	0	0.0	0	0.0	70	Slovakia
	0	0.0	0	0.0	0	0.0	3	7.7	39	Slovenia
	609	18.7	20	0.6	66	2.0	115	3.5	3 249	Spain
	25	5.8	48	11.1	23	5.3	11	2.5	434	Sweden
	260	6.0	259	5.9	123	2.8	516	11.8	4 363	United Kingdom
	1 709	6.8	619	2.5	522	2.1	3 946	15.7	25 130	Total EU/EEA
										Non-EU/EEA
	0	0.0	0	0.0	0	0.0	0	0.0	94	Albania
	0	0.0	0	0.0	0	0.0	0	0.0	6	Andorra
	0	0.0	0	0.0	0	0.0	0	0.0	354	Armenia
	0	0.0	0	0.0	0	0.0	0	0.0	570	Azerbaijan
	0	0.0	1	0.0	0	0.0	0	0.0	2 468	Belarus
	0	0.0	0	0.0	0	0.0	0	0.0	12	Bosnia and Herzegovina
	0	0.0	0	0.0	0	0.0	0	0.0	631	Georgia
	14	3.5	9	2.2	62	15.3	0	0.0	405	Israel
	0	0.0	1	0.0	18	0.6	0	0.0	3 019	Kazakhstan
	0	0.0	7	0.8	0	0.0	0	0.0	840	Kyrgyzstan
	–	–	–	–	–	–	–	–	–	Monaco
	0	0.0	0	0.0	0	0.0	0	0.0	26	Montenegro
	0	0.0	0	0.0	0	0.0	0	0.0	836	Republic of Moldova
	–	–	–	–	–	–	–	–	–	Russian Federation
	–	–	–	–	–	–	–	–	–	San Marino
	0	0.0	0	0.0	0	0.0	0	0.0	181	Serbia
	0	0.0	0	0.0	0	0.0	0	0.0	178	Serbia excluding Kosovo ^c
	0	0.0	0	0.0	0	0.0	0	0.0	3	Kosovo ^c
	23	5.2	13	2.9	11	2.5	84	19.0	443	Switzerland
	0	0.0	0	0.0	3	0.2	0	0.0	1 208	Tajikistan
	0	0.0	0	0.0	0	0.0	0	0.0	44	The former Yugoslav Republic of Macedonia
	6	0.2	36	1.3	61	2.1	84	3.0	2 844	Turkey
	–	–	–	–	–	–	–	–	–	Turkmenistan
	0	0.0	0	0.0	0	0.0	0	0.0	15 680	Ukraine
	–	–	–	–	–	–	–	–	–	Uzbekistan
	43	0.1	67	0.2	155	0.5	168	0.6	29 661	Total non-EU/EEA
										WHO European Region
	1 738	7.8	624	2.8	586	2.6	3 406	15.2	22 350	West
	14	0.2	50	0.8	68	1.1	597	10.0	5 982	Centre
	0	0.0	12	0.0	23	0.1	111	0.4	26 459	East
	1 752	3.2	686	1.3	677	1.2	4 114	7.5	54 791	Total WHO European Region

Table 12. HIV diagnoses, by geographical area, transmission mode and country or subcontinent of origin, in cases reported in 2017**Table 12a.** EU/EEA and non-EU/EEA countries

Transmission mode	Country of report		Western Europe		Central and eastern Europe		Sub-Saharan Africa	
	N	%	N	%	N	%	N	%
EU/EEA								
Sex between men	6 153	63.5	548	5.7	510	5.3	228	2.4
Injecting drug use	708	76.2	38	4.1	121	13.0	7	0.8
Heterosexual contact	3 777	45.0	158	1.9	480	5.7	2 932	34.9
Mother-to-child	48	35.3	5	3.7	5	3.7	64	47.1
Haemophiliac/transfusion recipient	13	22.0	2	3.4	12	20.3	24	40.7
Nosocomial infection	3	30.0	0	0.0	2	20.0	2	20.0
Other/undetermined	1 771	28.9	77	1.3	180	2.9	466	7.6
Total EU-EEA	12 473	49.2	828	3.3	1 310	5.2	3 723	14.7
Non-EU/EEA								
Sex between men	1 839	92.9	37	1.9	31	1.6	0	0.0
Injecting drug use	6 137	98.7	3	0.0	69	1.1	0	0.0
Heterosexual contact	18 372	97.7	20	0.1	211	1.1	108	0.6
Mother-to-child	247	94.6	0	0.0	3	1.1	7	2.7
Haemophiliac/transfusion recipient	10	76.9	0	0.0	1	7.7	1	7.7
Nosocomial infection	22	95.7	0	0.0	0	0.0	0	0.0
Other/undetermined	1 824	77.0	38	1.6	170	7.2	78	3.3
Total non-EU/EEA	28 451	95.9	98	0.3	485	1.6	194	0.7

Table 12b. West, Centre, East of the WHO European Region

Transmission mode	Country of report		Western Europe		Central and eastern Europe		Sub-Saharan Africa	
	N	%	N	%	N	%	N	%
West								
Sex between men	5 589	63.0	566	6.4	474	5.3	226	2.5
Injecting drug use	360	59.7	39	6.5	149	24.7	7	1.2
Heterosexual contact	2 987	39.0	171	2.2	481	6.3	3 023	39.4
Mother-to-child	25	20.8	5	4.2	5	4.2	71	59.2
Haemophiliac/transfusion recipient	12	21.8	2	3.6	9	16.4	25	45.5
Nosocomial infection	2	28.6	0	0.0	0	0.0	2	28.6
Other/undetermined	1 019	20.3	79	1.6	187	3.7	481	9.6
Total West	9 994	44.7	862	3.9	1 305	5.8	3 835	17.2
Centre								
Sex between men	1 384	78.4	19	1.1	58	3.3	2	0.1
Injecting drug use	155	91.7	0	0.0	4	2.4	0	0.0
Heterosexual contact	1 452	87.6	6	0.4	82	4.9	15	0.9
Mother-to-child	30	85.7	0	0.0	1	2.9	0	0.0
Haemophiliac/transfusion recipient	5	45.5	0	0.0	4	36.4	0	0.0
Nosocomial infection	8	72.7	0	0.0	2	18.2	0	0.0
Other/undetermined	1 793	70.1	33	1.3	138	5.4	62	2.4
Total Centre	4 827	77.8	58	0.9	289	4.7	79	1.3
East								
Sex between men	1 019	98.4	0	0.0	9	0.9	0	0.0
Injecting drug use	6 330	99.3	2	0.0	37	0.6	0	0.0
Heterosexual contact	17 710	99.0	1	0.0	128	0.7	2	0.0
Mother-to-child	240	99.2	0	0.0	2	0.8	0	0.0
Haemophiliac/transfusion recipient	6	100.0	0	0.0	0	0.0	0	0.0
Nosocomial infection	15	100.0	0	0.0	0	0.0	0	0.0
Other/undetermined	783	86.7	3	0.3	25	2.8	1	0.1
Total East	26 103	98.7	6	0.0	201	0.8	3	0.0
Total WHO European Region	40 924	74.4	1 852	1.7	3 590	3.3	7 834	7.1

	Latin America and Caribbean		South and south-east Asia		Other		Unknown		Total	Transmission mode
	N	%	N	%	N	%	N	%		
										EU/EEA
	1 144	11.8	317	3.3	270	2.8	524	5.4	9 694	Men who have sex with men
	9	1.0	9	1.0	9	1.0	28	3.0	929	Injecting drug use
	396	4.7	202	2.4	171	2.0	286	3.4	8 402	Heterosexual contact
	0	0.0	4	2.9	4	2.9	6	4.4	136	Mother-to-child
	3	5.1	4	6.8	0	0.0	1	1.7	59	Haemophiliac/transfusion recipient
	0	0.0	3	30.0	0	0.0	0	0.0	10	Nosocomial infection
	157	2.6	80	1.3	68	1.1	3 324	54.3	6 123	Other/undetermined
	1 709	6.7	619	2.4	522	2.1	4 169	16.4	25 353	Total EU-EEA
										Non-EU/EEA
	24	1.2	11	0.6	19	1.0	18	0.9	1 979	Men who have sex with men
	2	0.0	0	0.0	5	0.1	2	0.0	6 218	Injecting drug use
	12	0.1	24	0.1	37	0.2	18	0.1	18 802	Heterosexual contact
	0	0.0	0	0.0	2	0.8	2	0.8	261	Mother-to-child
	0	0.0	0	0.0	1	7.7	0	0.0	13	Haemophiliac/transfusion recipient
	0	0.0	0	0.0	0	0.0	1	4.3	23	Nosocomial infection
	5	0.2	32	1.4	91	3.8	130	5.5	2 368	Other/undetermined
	43	0.1	67	0.2	155	0.5	171	0.6	29 664	Total non-EU/EEA

	Latin America and Caribbean		South and south-east Asia		Other		Unknown		Total	Transmission mode
	N	%	N	%	N	%	N	%		
										West
	1 162	13.1	312	3.5	277	3.1	266	3.0	8 872	Men who have sex with men
	11	1.8	9	1.5	9	1.5	19	3.2	603	Injecting drug use
	403	5.3	209	2.7	187	2.4	203	2.6	7 664	Heterosexual contact
	0	0.0	4	3.3	5	4.2	5	4.2	120	Mother-to-child
	3	5.5	3	5.5	0	0.0	1	1.8	55	Haemophiliac/transfusion recipient
	0	0.0	3	42.9	0	0.0	0	0.0	7	Nosocomial infection
	159	3.2	84	1.7	108	2.1	2 915	57.9	5 032	Other/undetermined
	1 738	7.8	624	2.8	586	2.6	3 409	15.3	22 353	Total West
										Centre
	6	0.3	14	0.8	10	0.6	272	15.4	1 765	Men who have sex with men
	0	0.0	0	0.0	0	0.0	10	5.9	169	Injecting drug use
	5	0.3	10	0.6	9	0.5	79	4.8	1 658	Heterosexual contact
	0	0.0	0	0.0	1	2.9	3	8.6	35	Mother-to-child
	0	0.0	1	9.1	1	9.1	0	0.0	11	Haemophiliac/transfusion recipient
	0	0.0	0	0.0	0	0.0	1	9.1	11	Nosocomial infection
	3	0.1	25	1.0	47	1.8	455	17.8	2 556	Other/undetermined
	14	0.2	50	0.8	68	1.1	820	13.2	6 205	Total Centre
										East
	0	0.0	2	0.2	2	0.2	4	0.4	1 036	Men who have sex with men
	0	0.0	0	0.0	5	0.1	1	0.0	6 375	Injecting drug use
	0	0.0	7	0.0	12	0.1	22	0.1	17 882	Heterosexual contact
	0	0.0	0	0.0	0	0.0	0	0.0	242	Mother-to-child
	0	0.0	0	0.0	0	0.0	0	0.0	6	Haemophiliac/transfusion recipient
	0	0.0	0	0.0	0	0.0	0	0.0	15	Nosocomial infection
	0	0.0	3	0.3	4	0.4	84	9.3	903	Other/undetermined
	0	0.0	12	0.0	23	0.1	111	0.4	26 459	Total East
	3 504	3.2	1 372	1.2	1 354	1.2	8 680	7.9	55 017	Total WHO European Region

Table 13. New HIV diagnoses, by country of report and probable region of infection, in 2017, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Country of report		Western Europe		Central and eastern Europe		Sub-Saharan Africa	
		N	%	N	%	N	%	N	%
EU/EEA									
West	Austria	26	9.6	3	1.1	3	1.1	3	1.1
West	Belgium	174	19.6	23	2.6	13	1.5	83	9.3
Centre	Bulgaria	–	–	–	–	–	–	–	–
Centre	Croatia	–	–	–	–	–	–	–	–
Centre	Cyprus	39	45.9	15	17.6	5	5.9	9	10.6
Centre	Czech Republic	13	5.1	4	1.6	15	5.9	1	0.4
West	Denmark	110	45.5	16	6.6	25	10.3	29	12.0
East	Estonia	101	46.1	3	1.4	3	1.4	0	0.0
West	Finland	28	17.7	8	5.1	40	25.3	18	11.4
West	France	1 150	22.1	0	0.0	0	0.0	0	0.0
West	Germany ^b	–	–	–	–	–	–	–	–
West	Greece	–	–	–	–	–	–	–	–
Centre	Hungary	–	–	–	–	–	–	–	–
West	Iceland	9	37.5	5	20.8	5	20.8	1	4.2
West	Ireland	93	19.3	28	5.8	12	2.5	50	10.4
West	Italy	–	–	–	–	–	–	–	–
East	Latvia	219	59.0	2	0.5	5	1.3	0	0.0
	Liechtenstein	–	–	–	–	–	–	–	–
East	Lithuania	0	0.0	4	1.5	6	2.3	0	0.0
West	Luxembourg	19	32.2	1	1.7	0	0.0	0	0.0
West	Malta	16	35.6	0	0.0	0	0.0	0	0.0
West	Netherlands	411	57.4	21	2.9	11	1.5	18	2.5
West	Norway	0	0.0	20	9.4	19	8.9	53	24.9
Centre	Poland	0	0.0	0	0.0	2	0.2	0	0.0
West	Portugal	659	61.7	23	2.2	3	0.3	125	11.7
Centre	Romania	653	98.8	2	0.3	0	0.0	1	0.2
Centre	Slovakia	0	0.0	6	8.6	5	7.1	0	0.0
Centre	Slovenia	25	64.1	1	2.6	3	7.7	0	0.0
West	Spain	–	–	–	–	–	–	–	–
West	Sweden	77	17.7	38	8.8	58	13.4	141	32.5
West	United Kingdom	1 915	43.9	230	5.3	170	3.9	491	11.3
	Total EU/EEA	5 737	32.9	453	2.6	403	2.3	1 023	5.9
Non-EU/EEA									
Centre	Albania	89	94.7	5	5.3	0	0.0	0	0.0
West	Andorra	–	–	–	–	–	–	–	–
East	Armenia	142	40.1	0	0.0	198	55.9	0	0.0
East	Azerbaijan	293	51.4	0	0.0	133	23.3	1	0.2
East	Belarus	2 424	98.2	4	0.2	37	1.5	1	0.0
Centre	Bosnia and Herzegovina	7	58.3	0	0.0	0	0.0	0	0.0
East	Georgia	1	0.2	0	0.0	0	0.0	0	0.0
West	Israel	207	51.1	4	1.0	60	14.8	52	12.8
East	Kazakhstan	2 864	94.9	0	0.0	136	4.5	0	0.0
East	Kyrgyzstan	763	90.8	1	0.1	67	8.0	1	0.1
West	Monaco	–	–	–	–	–	–	–	–
Centre	Montenegro	–	–	–	–	–	–	–	–
East	Republic of Moldova	836	100.0	0	0.0	0	0.0	0	0.0
East	Russian Federation	–	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–	–
Centre	Serbia	0	0.0	0	0.0	2	1.1	0	0.0
Centre	Serbia excluding Kosovo ^c	0	0.0	0	0.0	2	1.1	0	0.0
Centre	Kosovo ^c	–	–	–	–	–	–	–	–
West	Switzerland	154	34.8	30	6.8	9	2.0	36	8.1
East	Tajikistan	–	–	–	–	–	–	–	–
Centre	The former Yugoslav Republic of Macedonia	44	100.0	0	0.0	0	0.0	0	0.0
Centre	Turkey	2 384	83.8	0	0.0	0	0.0	0	0.0
East	Turkmenistan	–	–	–	–	–	–	–	–
East	Ukraine	–	–	–	–	–	–	–	–
East	Uzbekistan	–	–	–	–	–	–	–	–
	Total non-EU/EEA	10 208	80.1	44	0.3	642	5.0	91	0.7
WHO European Region									
	West	5 048	33.6	450	3.0	428	2.8	1 100	7.3
	Centre	3 254	58.0	33	0.6	32	0.6	11	0.2
	East	7 643	79.9	14	0.1	585	6.1	3	0.0
	Total WHO European Region	15 945	52.8	497	1.6	1 045	3.5	1 114	3.7

^a Country-specific comments are in Annex 5. Countries that do not report on the variables "country of birth", "country of nationality" or "region of origin" are excluded and therefore regional totals may not equal those presented in Table 1.

^b Due to technical problems no data export for 2017 from Germany was available.

^c (in accordance with Security Council resolution 1244 (1999)).

	Latin America and Caribbean		South and south-east Asia		Other		Unknown		Total	Country, territory or area ^a
	N	Rate	N	%	N	%	N	%		
	0	0.0	5	1.9	0	0.0	230	85.2	270	EU/EEA
	10	1.1	14	1.6	12	1.3	561	63.0	890	Austria
	–	–	–	–	–	–	–	–	–	Belgium
	–	–	–	–	–	–	–	–	–	Bulgaria
	–	–	–	–	–	–	–	–	–	Croatia
	1	1.2	5	5.9	1	1.2	10	11.8	85	Cyprus
	2	0.8	4	1.6	3	1.2	212	83.5	254	Czech Republic
	7	2.9	32	13.2	11	4.5	12	5.0	242	Denmark
	0	0.0	3	1.4	0	0.0	109	49.8	219	Estonia
	1	0.6	23	14.6	3	1.9	37	23.4	158	Finland
	0	0.0	0	0.0	0	0.0	4 061	77.9	5 211	France
	–	–	–	–	–	–	–	–	–	Germany ^b
	–	–	–	–	–	–	–	–	–	Greece
	–	–	–	–	–	–	–	–	–	Hungary
	0	0.0	1	4.2	0	0.0	3	12.5	24	Iceland
	58	12.0	19	3.9	14	2.9	209	43.3	483	Ireland
	–	–	–	–	–	–	–	–	–	Italy
	0	0.0	1	0.3	0	0.0	144	38.8	371	Latvia
	–	–	–	–	–	–	–	–	–	Liechtenstein
	0	0.0	0	0.0	0	0.0	253	96.2	263	Lithuania
	1	1.7	0	0.0	0	0.0	38	64.4	59	Luxembourg
	0	0.0	0	0.0	0	0.0	29	64.4	45	Malta
	24	3.4	19	2.7	13	1.8	199	27.8	716	Netherlands
	15	7.0	40	18.8	8	3.8	58	27.2	213	Norway
	0	0.0	0	0.0	0	0.0	1 323	99.8	1 325	Poland
	45	4.2	1	0.1	1	0.1	211	19.8	1 068	Portugal
	0	0.0	0	0.0	0	0.0	5	0.8	661	Romania
	0	0.0	0	0.0	1	1.4	58	82.9	70	Slovakia
	0	0.0	1	2.6	1	2.6	8	20.5	39	Slovenia
	–	–	–	–	–	–	–	–	–	Spain
	18	4.1	63	14.5	21	4.8	18	4.1	434	Sweden
	108	2.5	227	5.2	83	1.9	1 139	26.1	4 363	United Kingdom
	290	1.7	458	2.6	172	1.0	8 927	51.1	17 463	Total EU/EEA
										Non-EU/EEA
	0	0.0	0	0.0	0	0.0	0	0.0	94	Albania
	–	–	–	–	–	–	–	–	–	Andorra
	0	0.0	0	0.0	0	0.0	14	4.0	354	Armenia
	0	0.0	2	0.4	1	0.2	140	24.6	570	Azerbaijan
	0	0.0	2	0.1	0	0.0	0	0.0	2 468	Belarus
	0	0.0	0	0.0	0	0.0	5	41.7	12	Bosnia and Herzegovina
	0	0.0	0	0.0	0	0.0	630	99.8	631	Georgia
	8	2.0	9	2.2	12	3.0	53	13.1	405	Israel
	0	0.0	1	0.0	0	0.0	18	0.6	3 019	Kazakhstan
	0	0.0	8	1.0	0	0.0	0	0.0	840	Kyrgyzstan
	–	–	–	–	–	–	–	–	–	Monaco
	–	–	–	–	–	–	–	–	–	Montenegro
	0	0.0	0	0.0	0	0.0	0	0.0	836	Republic of Moldova
	–	–	–	–	–	–	–	–	–	Russian Federation
	–	–	–	–	–	–	–	–	–	San Marino
	0	0.0	0	0.0	0	0.0	179	98.9	181	Serbia
	0	0.0	0	0.0	0	0.0	176	98.9	178	Serbia excluding Kosovo ^c
	–	–	–	–	–	–	–	–	–	Kosovo ^c
	13	2.9	17	3.8	5	1.1	179	40.4	443	Switzerland
	–	–	–	–	–	–	–	–	–	Tajikistan
	0	0.0	0	0.0	0	0.0	0	0.0	44	The former Yugoslav Republic of Macedonia
	0	0.0	0	0.0	0	0.0	460	16.2	2 844	Turkey
	–	–	–	–	–	–	–	–	–	Turkmenistan
	–	–	–	–	–	–	–	–	–	Ukraine
	–	–	–	–	–	–	–	–	–	Uzbekistan
	21	0.2	39	0.3	18	0.1	1 675	13.1	12 738	Total non-EU/EEA
										WHO European Region
	308	2.1	470	3.1	183	1.2	7 037	46.8	15 024	West
	3	0.1	10	0.2	6	0.1	2 257	40.3	5 606	Centre
	0	0.0	17	0.2	1	0.0	1 308	13.7	9 571	East
	311	1.0	497	1.6	190	0.6	10 602	35.1	30 201	Total WHO European Region

Table 14. Percentage of new HIV diagnoses (2017) among people > 14 years reported with information about CD4 cell count, by CD4 cell count level (< 200 and < 350 cells per mm³ blood) and by transmission mode in cases with CD4 < 350, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Number of cases with CD4 cell count	Completeness (%) CD4 ^b	CD4 < 200 (%)		CD4 < 350 (%)		CD4 < 350 mm ³ (%)		
				N	%	N	%	Heterosexual ^b	Injecting drug user ^b	MSM ^a
EU/EEA										
West	Austria	261	96.7	78	29.9	125	47.9	60.8	58.3	38.3
West	Belgium	599	68.3	137	22.9	251	41.9	49.0	0.0	36.8
Centre	Bulgaria	184	77.3	43	23.4	88	47.8	60.3	27.8	43.7
Centre	Croatia	102	96.2	38	37.3	59	57.8	75.0	–	55.9
Centre	Cyprus	75	88.2	16	21.3	31	41.3	56.7	–	26.8
Centre	Czech Republic	230	90.9	49	21.3	75	32.6	48.1	–	27.4
West	Denmark ^d	129	92.1	32	24.8	60	46.5	52.9	–	39.4
East	Estonia	78	35.6	22	28.2	42	53.8	62.0	14.3	75.0
West	Finland	124	79.0	38	30.6	60	48.4	58.5	33.3	40.7
West	France	2 374	45.9	637	26.8	1 144	48.2	55.3	43.8	37.3
West	Germany ^c	–	–	–	–	–	–	–	–	–
West	Greece	431	68.7	155	36.0	245	56.8	68.2	55.4	49.4
Centre	Hungary	–	–	–	–	–	–	–	–	–
West	Iceland	–	–	–	–	–	–	–	–	–
West	Ireland ^d	155	49.1	44	28.4	82	52.9	63.6	–	44.0
West	Italy	2 701	78.8	977	36.2	1 511	55.9	61.9	63.2	46.0
East	Latvia	213	58.0	80	37.6	132	62.0	67.8	28.2	84.6
	Liechtenstein	–	–	–	–	–	–	–	–	–
East	Lithuania	104	39.7	39	37.5	69	66.3	70.8	46.7	76.5
West	Luxembourg	46	78.0	17	37.0	23	50.0	70.8	11.1	30.0
West	Malta	31	73.8	9	29.0	17	54.8	57.1	–	42.9
West	Netherlands	637	90.7	161	25.3	287	45.1	57.9	–	38.2
West	Norway	–	–	–	–	–	–	–	–	–
Centre	Poland	–	–	–	–	–	–	–	–	–
West	Portugal	901	84.7	280	31.1	464	51.5	57.7	69.2	39.9
Centre	Romania	607	94.1	234	38.6	364	60.0	63.6	65.1	44.9
Centre	Slovakia	58	82.9	21	36.2	27	46.6	45.5	–	45.7
Centre	Slovenia	33	84.6	12	36.4	15	45.5	44.4	–	47.8
West	Spain	2 726	84.1	749	27.5	1 307	47.9	57.8	51.9	41.5
West	Sweden	326	77.4	85	26.1	153	46.9	58.9	31.3	30.4
West	United Kingdom	3 460	79.8	737	21.3	1 424	41.2	52.4	48.9	31.0
	Total EU/EEA	16 585	71.7	4 690	28.3	8 055	48.6	57.6	51.2	38.9
Non-EU/EEA										
Centre	Albania	58	62.4	25	43.1	34	58.6	60.0	–	–
West	Andorra	–	–	–	–	–	–	–	–	–
East	Armenia	281	80.7	104	37.0	154	54.8	54.3	66.7	35.7
East	Azerbaijan	229	41.2	78	34.1	119	52.0	49.7	75.9	16.7
East	Belarus	–	–	–	–	–	–	–	–	–
Centre	Bosnia and Herzegovina	4	33.3	2	50.0	2	50.0	–	–	–
East	Georgia	546	87.1	187	34.2	285	52.2	56.8	63.3	29.3
West	Israel	231	57.9	57	24.7	108	46.8	59.8	42.9	35.2
East	Kazakhstan	2 206	74.1	444	20.1	1 007	45.6	49.0	39.1	42.4
East	Kyrgyzstan	351	43.3	120	34.2	237	67.5	70.1	63.4	60.0
West	Monaco	–	–	–	–	–	–	–	–	–
Centre	Montenegro	26	100.0	12	46.2	16	61.5	–	–	54.5
East	Republic of Moldova	638	77.3	191	29.9	340	53.3	52.2	52.6	57.1
East	Russian Federation	–	–	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–	–	–
Centre	Serbia	125	69.1	58	46.4	82	65.6	66.7	–	63.1
Centre	Serbia excluding Kosovo ^e	123	69.1	57	46.3	81	65.9	68.8	–	63.1
Centre	Kosovo ^e	2	66.7	1	50.0	1	50.0	–	–	–
West	Switzerland	301	68.7	83	27.6	142	47.2	56.2	50.0	38.3
East	Tajikistan	918	84.7	342	37.3	574	62.5	62.0	63.4	66.7
Centre	The former Yugoslav Republic of Macedonia	34	79.1	7	20.6	13	38.2	–	–	34.5
Centre	Turkey	–	–	–	–	–	–	–	–	–
East	Turkmenistan	–	–	–	–	–	–	–	–	–
East	Ukraine	13 908	89.3	5 194	37.3	8 172	58.8	59.8	57.9	43.0
East	Uzbekistan	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	19 856	82.7	6 904	34.8	11 285	56.8	58.4	55.7	42.3
WHO European Region										
	West	15 433	71.1	4 276	27.7	7 403	48.0	57.1	52.0	38.5
	Centre	1 536	85.8	517	33.7	806	52.5	61.3	58.7	43.2
	East	19 472	82.3	6 801	34.9	11 131	57.2	58.5	55.4	43.2
	Total WHO European Region	36 441	77.3	11 594	31.8	19 340	53.1	58.2	55.2	39.4

^a Country-specific comments are in Annex 5.^b There is some variation by country, territory or area for CD4 cell count completeness by transmission group and numbers of cases by transmission group (MSM, heterosexual, injecting drug users), so percentages based on five or fewer cases are censored.^c Due to technical problems no data export for 2017 from Germany was available.^d People who were previously diagnosed HIV positive abroad are excluded in numbers reported for Denmark and Ireland and the data presented in the table are therefore not comparable with other countries.^e (in accordance with Security Council resolution 1244 (1999)).

Table 15. AIDS diagnoses and rates per 100 000 population, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of start of reporting	2008		2009		2010		2011		2012	
			N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA												
West	Austria	1982	100	1.2	95	1.1	83	1.0	80	1.0	100	1.2
West	Belgium	1983	134	1.3	142	1.3	120	1.1	98	0.9	106	1.0
Centre	Bulgaria	1987	29	0.4	30	0.4	32	0.4	40	0.5	65	0.9
Centre	Croatia	1986	25	0.6	22	0.5	21	0.5	26	0.6	28	0.7
Centre	Cyprus	1986	12	1.5	8	1.0	11	1.3	12	1.4	11	1.3
Centre	Czech Republic	1986	32	0.3	24	0.2	28	0.3	29	0.3	36	0.3
West	Denmark	1980	40	0.7	36	0.7	44	0.8	59	1.1	41	0.7
East	Estonia	1992	61	4.6	38	2.8	26	2.0	38	2.9	36	2.7
West	Finland	1983	28	0.5	24	0.5	31	0.6	24	0.4	19	0.4
West	France	1980	1 072	1.7	957	1.5	986	1.5	862	1.3	830	1.3
West	Germany ^b	1981	590	0.7	629	0.8	514	0.6	506	0.6	490	0.6
West	Greece	1981	112	1.0	104	0.9	103	0.9	103	0.9	123	1.1
Centre	Hungary	1986	23	0.2	23	0.2	28	0.3	32	0.3	48	0.5
West	Iceland	1985	2	0.6	0	0.0	1	0.3	2	0.6	1	0.3
West	Ireland	1983	36	0.8	35	0.8	38	0.8	47	1.0	38	0.8
West	Italy	1982	1 342	2.3	1 206	2.0	1 149	1.9	1 055	1.8	1 073	1.8
East	Latvia	1990	103	4.7	101	4.7	132	6.2	112	5.4	142	6.9
	Liechtenstein	1989	0	0.0	0	0.0	0	0.0	1	2.8	1	2.7
East	Lithuania	1988	54	1.7	37	1.2	33	1.1	21	0.7	38	1.3
West	Luxembourg	1983	9	1.9	5	1.0	8	1.6	12	2.3	8	1.5
West	Malta	1986	9	2.2	1	0.2	6	1.4	5	1.2	6	1.4
West	Netherlands	1999	315	1.9	309	1.9	318	1.9	266	1.6	290	1.7
West	Norway	1983	18	0.4	18	0.4	22	0.5	19	0.4	25	0.5
Centre	Poland	1986	180	0.5	131	0.3	173	0.5	184	0.5	157	0.4
West	Portugal	1985	841	8.0	720	6.8	751	7.1	635	6.0	607	5.8
Centre	Romania	1985	347	1.7	278	1.4	255	1.3	328	1.6	332	1.7
Centre	Slovakia	1985	1	0.0	4	0.1	2	0.0	4	0.1	7	0.1
Centre	Slovenia	1986	11	0.5	18	0.9	7	0.3	15	0.7	12	0.6
West	Spain	1981	1 567	3.4	1 434	3.1	1 447	3.1	1 285	2.8	1 163	2.5
West	Sweden	1982	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	1981	805	1.3	634	1.0	652	1.0	409	0.6	434	0.7
	Total EU/EEA		7 898	1.6	7 063	1.4	7 021	1.4	6 309	1.2	6 267	1.3
Non-EU/EEA												
Centre	Albania	1993	32	1.1	34	1.1	26	0.9	46	1.6	49	1.7
West	Andorra	2004	3	3.6	0	0.0	0	0.0	1	1.2	0	0.0
East	Armenia	1988	83	2.9	84	2.9	94	3.3	87	3.0	134	4.6
East	Azerbaijan	1995	59	0.7	99	1.1	250	2.8	195	2.1	235	2.5
East	Belarus	1991	351	3.7	532	5.6	475	5.0	590	6.2	598	6.3
Centre	Bosnia and Herzegovina	1986	5	0.1	2	0.1	6	0.2	7	0.2	4	0.1
East	Georgia	1989	232	5.3	284	6.6	339	8.0	395	9.5	359	8.7
West	Israel	1981	53	0.7	53	0.7	40	0.5	55	0.7	51	0.7
East	Kazakhstan	1993	179	1.1	208	1.3	252	1.5	237	1.4	239	1.4
East	Kyrgyzstan	1999	36	0.7	75	1.4	130	2.4	90	1.6	88	1.6
West	Monaco	1985	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Montenegro	1990	6	1.0	8	1.3	7	1.1	2	0.3	7	1.1
East	Republic of Moldova	1989	92	2.2	262	6.4	306	7.5	439	10.8	183	4.5
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	1986	0	0.0	0	0.0	0	0.0	1	3.2	2	6.3
Centre	Serbia	1985	42	0.4	53	0.5	50	0.4	60	0.6	56	0.5
Centre	Serbia excluding Kosovo ^d	1985	39	0.4	52	0.6	49	0.5	53	0.6	54	0.6
Centre	Kosovo ^d	2005	3	0.1	1	0.0	1	0.0	7	0.4	2	0.1
West	Switzerland	1980	164	2.1	155	2.0	165	2.1	134	1.7	95	1.2
East	Tajikistan	1998	55	0.8	75	1.0	106	1.4	149	1.9	182	2.3
Centre	The former Yugoslav Republic of Macedonia	1989	9	0.4	2	0.1	6	0.3	8	0.4	10	0.5
Centre	Turkey	1985	55	0.1	67	0.1	60	0.1	81	0.1	95	0.1
East	Turkmenistan	2002	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Ukraine	1988	4 380	9.5	4 437	9.6	5 861	12.8	9 189	20.2	10 073	22.2
East	Uzbekistan	1992	184	0.7	129	0.5	220	0.8	–	–	–	–
	Total non-EU/EEA		6 020	2.5	6 559	2.7	8 393	3.5	11 766	5.5	12 460	5.8
WHO European Region												
West	West		7 240	1.7	6 557	1.6	6 478	1.5	5 658	1.4	5 502	1.3
Centre	Centre		809	0.4	704	0.4	712	0.4	874	0.5	917	0.5
East	East		5 869	4.2	6 361	4.6	8 224	5.9	11 542	10.3	12 307	11.0
	Total WHO European Region		13 918	1.9	13 622	1.8	15 414	2.1	18 074	2.5	18 726	2.6

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	2013		2014		2015		2016		2017		Cumulative total ^b	Country, territory or area ^a
	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
												EU/EEA
	67	0.8	82	1.0	73	0.9	61	0.7	56	0.6	3 175	Austria
	100	0.9	118	1.1	95	0.8	–	–	–	–	4 841	Belgium
	71	1.0	64	0.9	45	0.6	42	0.6	49	0.7	665	Bulgaria
	17	0.4	23	0.5	16	0.4	22	0.5	20	0.5	481	Croatia
	9	1.0	11	1.3	13	1.5	22	2.6	16	1.9	328	Cyprus
	33	0.3	32	0.3	38	0.4	44	0.4	52	0.5	596	Czech Republic
	38	0.7	30	0.5	40	0.7	24	0.4	28	0.5	2 989	Denmark
	26	2.0	18	1.4	18	1.4	41	3.1	20	1.5	513	Estonia
	20	0.4	20	0.4	18	0.3	30	0.5	18	0.3	703	Finland
	705	1.1	638	1.0	595	0.9	482	0.7	392	0.6	71 655	France
	429	0.5	370	0.5	299	0.4	120	0.1	–	–	31 119	Germany ^c
	140	1.3	126	1.2	137	1.3	136	1.3	112	1.0	4 094	Greece
	42	0.4	51	0.5	43	0.4	53	0.5	52	0.5	944	Hungary
	1	0.3	0	0.0	0	0.0	4	1.2	0	0.0	71	Iceland
	28	0.6	33	0.7	20	0.4	14	0.3	16	0.3	1 277	Ireland
	1 075	1.8	927	1.5	860	1.4	827	1.4	690	1.1	69 734	Italy
	133	6.6	171	8.5	132	6.6	114	5.8	118	6.0	1 888	Latvia
	0	0.0	1	2.7	0	0.0	0	0.0	0	0.0	12	Liechtenstein
	44	1.5	37	1.3	35	1.2	48	1.7	54	1.9	552	Lithuania
	11	2.0	9	1.6	9	1.6	11	1.9	6	1.0	323	Luxembourg
	1	0.2	4	0.9	2	0.5	5	1.2	0	0.0	114	Malta
	264	1.6	212	1.3	241	1.4	202	1.2	115	0.7	7 148	Netherlands
	28	0.6	45	0.9	22	0.4	22	0.4	14	0.3	1 172	Norway
	162	0.4	148	0.4	128	0.3	102	0.3	101	0.3	3 567	Poland
	495	4.7	352	3.4	317	3.1	337	3.3	234	2.3	22 102	Portugal
	356	1.8	395	2.0	349	1.8	321	1.6	283	1.4	9 859	Romania
	6	0.1	4	0.1	8	0.1	10	0.2	9	0.2	105	Slovakia
	11	0.5	16	0.8	11	0.5	10	0.5	7	0.3	257	Slovenia
	852	1.8	664	1.6	597	1.8	500	1.5	406	1.2	87 286	Spain
	–	–	–	–	–	–	–	–	–	–	2 168	Sweden
	345	0.5	365	0.6	398	0.6	312	0.5	262	0.4	28 984	United Kingdom
	5 509	1.1	4 966	1.0	4 559	0.9	3 916	0.8	3 130	0.7	358 722	Total EU-EEA
												Non-EU/EEA
	65	2.2	50	1.7	65	2.2	58	2.0	33	1.1	562	Albania
	2	2.5	1	1.3	3	3.8	0	0.0	0	0.0	13	Andorra
	144	5.0	172	5.9	162	5.6	162	5.5	144	4.9	1 476	Armenia
	189	2.0	200	2.1	193	2.0	161	1.7	168	1.7	2 041	Azerbaijan
	547	5.8	474	5.0	490	5.2	512	5.4	439	4.6	5 985	Belarus
	7	0.2	7	0.2	7	0.2	7	0.2	4	0.1	152	Bosnia and Herzegovina
	303	7.5	268	6.7	270	6.8	270	6.9	258	6.6	3 730	Georgia
	47	0.6	68	0.9	42	0.5	38	0.5	26	0.3	1 658	Israel
	259	1.5	246	1.4	268	1.5	352	2.0	361	2.0	3 223	Kazakhstan
	67	1.2	85	1.5	125	2.1	72	1.2	59	1.0	938	Kyrgyzstan
	0	0.0	1	2.6	0	0.0	0	0.0	0	0.0	51	Monaco
	7	1.1	7	1.1	11	1.8	14	2.2	13	2.1	135	Montenegro
	234	5.7	300	7.4	293	7.2	366	9.0	278	6.9	3 289	Republic of Moldova
	–	–	–	–	–	–	–	–	–	–	–	Russian Federation
	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	23	San Marino
	49	0.5	49	0.5	49	0.5	61	0.6	62	0.7	1 974	Serbia
	46	0.5	48	0.5	46	0.5	56	0.6	56	0.6	1 902	Serbia excluding Kosovo ^d
	3	0.2	1	0.1	3	0.2	5	0.3	6	0.0	72	Kosovo ^d
	102	1.3	77	0.9	61	0.7	61	0.7	51	0.6	9 926	Switzerland
	190	2.3	225	2.7	282	3.3	233	2.7	247	2.8	1 813	Tajikistan
	10	0.5	16	0.8	6	0.3	9	0.4	2	0.1	166	The former Yugoslav Republic of Macedonia
	96	0.1	125	0.2	118	0.2	99	0.1	120	0.1	1 576	Turkey
	–	–	–	–	–	–	–	–	–	–	1	Turkmenistan
	9 362	20.8	9 844	21.9	8 468	19.8	8 852	20.8	9 308	21.9	10 2207	Ukraine
	–	–	–	–	–	–	–	–	–	–	651	Uzbekistan
	11 680	5.4	12 215	5.6	10 913	5.0	11 327	5.1	11 573	5.2	14 1590	Total non-EU/EEA
												WHO European Region
	4 750	1.1	4 142	1.0	3 829	0.9	3 186	0.8	2 426	0.7	35 0626	West
	941	0.5	998	0.5	907	0.5	874	0.4	823	0.4	2 1367	Centre
	11 498	10.2	12 040	10.7	10 736	9.7	11 183	10.0	11 454	10.2	12 8307	East
	17 189	2.4	17 180	2.4	15 472	2.2	15 243	2.1	14 703	2.3	50 0300	Total WHO European Region

Table 16. AIDS diagnoses in males and rates per 100 000 population, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	2008		2009		2010		2011		2012		2013	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA													
West	Austria	81	2.0	67	1.7	64	1.6	61	1.5	79	1.9	48	1.2
West	Belgium	85	1.6	91	1.7	69	1.3	58	1.1	65	1.2	70	1.3
Centre	Bulgaria	20	0.5	22	0.6	21	0.6	38	1.1	47	1.3	53	1.5
Centre	Croatia	24	1.2	20	1.0	20	1.0	25	1.2	26	1.3	14	0.7
Centre	Cyprus	10	2.6	8	2.1	8	2.0	7	1.7	9	2.1	5	1.2
Centre	Czech Republic	25	0.5	18	0.4	21	0.4	20	0.4	28	0.5	27	0.5
West	Denmark	33	1.2	25	0.9	34	1.2	40	1.5	35	1.3	29	1.0
East	Estonia	44	7.1	26	4.2	21	3.4	31	5.0	25	4.0	19	3.1
West	Finland	25	1.0	15	0.6	22	0.8	17	0.6	16	0.6	17	0.6
West	France	726	2.3	680	2.2	673	2.2	630	2.0	571	1.8	507	1.6
West	Germany ^b	490	1.2	509	1.3	428	1.1	425	1.1	388	1.0	341	0.9
West	Greece	98	1.8	82	1.5	84	1.5	87	1.6	102	1.9	120	2.2
Centre	Hungary	21	0.4	17	0.4	26	0.5	27	0.6	45	1.0	38	0.8
West	Iceland	2	1.2	0	0.0	1	0.6	1	0.6	1	0.6	1	0.6
West	Ireland	27	1.2	27	1.2	27	1.2	34	1.5	29	1.3	20	0.9
West	Italy	992	3.5	909	3.2	849	3.0	803	2.8	783	2.7	811	2.8
East	Latvia	77	7.6	67	6.7	86	8.9	80	8.4	102	10.9	90	9.7
	Liechtenstein	0	0.0	0	0.0	0	0.0	1	5.6	1	5.5	0	0.0
East	Lithuania	45	3.0	28	1.9	27	1.9	15	1.1	28	2.0	31	2.3
West	Luxembourg	5	2.1	3	1.2	4	1.6	8	3.1	5	1.9	10	3.7
West	Malta	9	4.4	1	0.5	4	1.9	3	1.5	5	2.4	1	0.5
West	Netherlands	255	3.1	260	3.2	253	3.1	211	2.6	231	2.8	218	2.6
West	Norway	11	0.5	13	0.5	20	0.8	17	0.7	23	0.9	19	0.7
Centre	Poland	139	0.8	99	0.5	132	0.7	142	0.8	120	0.7	131	0.7
West	Portugal	619	12.2	521	10.3	526	10.4	468	9.3	431	8.6	344	6.9
Centre	Romania	188	1.9	164	1.6	146	1.5	203	2.1	207	2.1	242	2.5
Centre	Slovakia	0	0.0	3	0.1	2	0.1	4	0.2	7	0.3	6	0.2
Centre	Slovenia	9	0.9	16	1.6	7	0.7	12	1.2	11	1.1	10	1.0
West	Spain	1 190	5.3	1 100	4.8	1 129	4.9	994	4.3	891	3.9	665	2.9
West	Sweden	–	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	501	1.7	431	1.4	427	1.4	282	0.9	303	1.0	248	0.8
	Total EU/EEA	5 751	2.4	5 222	2.2	5 131	2.1	4 744	2.0	4 614	1.9	4 135	1.7
Non-EU/EEA													
Centre	Albania	23	1.5	32	2.2	18	1.2	35	2.4	34	2.3	50	3.4
West	Andorra	3	7.2	0	0.0	0	0.0	1	2.4	0	0.0	1	2.5
East	Armenia	62	4.5	57	4.2	73	5.4	65	4.8	96	7.1	103	7.6
East	Azerbaijan	51	1.2	83	1.9	231	5.2	171	3.8	209	4.5	162	3.5
East	Belarus	231	5.2	326	7.4	291	6.6	365	8.3	375	8.5	369	8.4
Centre	Bosnia and Herzegovina	4	0.2	2	0.1	6	0.3	4	0.2	4	0.2	6	0.3
East	Georgia	177	8.6	209	10.3	243	12.1	277	14.0	248	12.7	219	11.4
West	Israel	34	1.0	34	0.9	24	0.7	37	1.0	37	1.0	36	0.9
East	Kazakhstan	132	1.7	129	1.6	180	2.3	160	2.0	181	2.2	190	2.3
East	Kyrgyzstan	24	0.9	61	2.3	111	4.1	69	2.5	65	2.3	49	1.7
West	Monaco	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Montenegro	4	1.3	6	2.0	7	2.3	2	0.6	7	2.3	7	2.3
East	Republic of Moldova	59	3.0	166	8.4	179	9.1	269	13.7	93	4.7	128	6.5
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0.0	0	0.0	0	0.0	1	6.5	2	12.9	0	0.0
Centre	Serbia	32	0.6	46	0.8	43	0.8	50	0.9	51	1.0	41	0.8
Centre	Serbia excluding Kosovo ^d	29	0.7	45	1.0	42	1.0	45	1.0	50	1.1	39	0.9
Centre	Kosovo ^d	3	0.3	1	0.1	1	0.1	5	0.6	1	0.1	2	0.2
West	Switzerland	116	3.1	111	2.9	123	3.2	96	2.5	66	1.7	70	1.7
East	Tajikistan	47	1.3	66	1.8	91	2.4	116	2.9	136	3.4	138	3.4
Centre	The former Yugoslav Republic of Macedonia	5	0.5	2	0.2	6	0.6	5	0.5	8	0.8	9	0.9
Centre	Turkey	48	0.1	60	0.2	46	0.1	66	0.2	83	0.2	77	0.2
East	Turkmenistan	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	–	–
East	Ukraine	3 060	14.3	3 019	14.2	3 988	18.9	6 141	29.2	6 498	31.0	6 013	28.9
East	Uzbekistan	141	1.0	92	0.7	163	1.1	–	–	–	–	–	–
	Total non-EU/EEA	4 253	3.7	4 501	3.9	5 823	5.0	7 930	7.6	8 193	7.8	7 668	7.3
WHO European Region													
West		5 302	2.6	4 879	2.5	4 761	2.3	4 274	2.1	4 063	2.0	3 576	1.7
Centre		552	0.6	515	0.6	509	0.5	640	0.7	687	0.7	716	0.8
East		4 150	6.2	4 329	6.5	5 684	8.5	7 759	14.7	8 056	15.2	7 511	14.1
	Total WHO European Region	10 004	2.8	9 723	2.7	10 954	3.0	12 673	3.7	12 806	3.7	11 803	3.3

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	2014		2015		2016		2017		Cumulative total ^b	Country, territory or area ^a
	N	Rate	N	Rate	N	Rate	N	Rate		
										EU/EEA
	57	1.4	56	1.3	43	1.0	46	1.1	2 414	Austria
	77	1.4	59	1.1	–	–	–	–	3 254	Belgium
	52	1.5	39	1.1	39	1.1	39	1.1	517	Bulgaria
	21	1.0	15	0.7	21	1.0	19	0.9	429	Croatia
	10	2.4	9	2.2	17	4.1	9	2.2	250	Cyprus
	23	0.4	30	0.6	38	0.7	43	0.8	485	Czech Republic
	24	0.9	28	1.0	19	0.7	25	0.9	2 544	Denmark
	13	2.1	11	1.8	24	3.9	15	2.4	370	Estonia
	14	0.5	13	0.5	25	0.9	10	0.4	566	Finland
	432	1.4	408	1.3	319	1.0	278	0.9	56 220	France
	313	0.8	245	0.6	96	0.2	–	–	26 616	Germany ^c
	103	1.9	113	2.1	102	2.0	83	1.6	3 420	Greece
	41	0.9	37	0.8	45	1.0	36	0.8	814	Hungary
	0	0.0	0	0.0	4	2.4	0	0.0	62	Iceland
	23	1.0	15	0.7	11	0.5	11	0.5	978	Ireland
	709	2.4	675	2.3	636	2.2	508	1.7	53 758	Italy
	110	12.0	89	9.8	90	10.0	73	8.1	1 312	Latvia
	1	5.4	0	0.0	0	0.0	0	0.0	11	Liechtenstein
	29	2.1	26	1.9	41	3.1	46	3.5	448	Lithuania
	6	2.2	5	1.8	9	3.1	5	1.7	248	Luxembourg
	4	1.9	2	0.9	5	2.3	0	0.0	100	Malta
	176	2.1	201	2.4	157	1.9	94	1.1	5 764	Netherlands
	36	1.4	15	0.6	15	0.6	11	0.4	912	Norway
	115	0.6	97	0.5	90	0.5	89	0.5	2 824	Poland
	270	5.4	230	4.7	241	4.9	170	3.5	17 460	Portugal
	281	2.9	241	2.5	228	2.4	209	2.2	5 850	Romania
	3	0.1	7	0.3	10	0.4	9	0.3	92	Slovakia
	15	1.5	11	1.1	8	0.8	7	0.7	227	Slovenia
	534	2.8	482	2.9	408	2.4	321	1.9	69 566	Spain
	–	–	–	–	–	–	–	–	1 773	Sweden
	248	0.8	299	0.9	235	0.7	188	0.6	22 828	United Kingdom
	3 740	1.5	3 458	1.4	2 976	1.2	2 344	1.1	282 112	Total EU-EEA
										Non-EU/EEA
	36	2.4	50	3.4	50	3.4	24	1.6	436	Albania
	1	2.6	2	5.2	0	0.0	0	0.0	10	Andorra
	125	9.2	128	9.3	115	8.4	111	8.1	1 105	Armenia
	162	3.4	150	3.1	125	2.6	114	2.3	1 709	Azerbaijan
	308	7.0	278	6.3	311	7.1	274	6.2	3 793	Belarus
	7	0.4	7	0.4	6	0.3	4	0.2	126	Bosnia and Herzegovina
	201	10.6	196	10.4	197	10.5	194	10.4	2 762	Georgia
	46	1.2	26	0.7	21	0.5	16	0.4	1 188	Israel
	183	2.2	179	2.1	232	2.7	224	2.5	2 245	Kazakhstan
	58	2.0	89	3.1	55	1.9	36	1.2	715	Kyrgyzstan
	1	5.3	0	0.0	0	0.0	0	0.0	40	Monaco
	4	1.3	11	3.6	14	4.5	12	3.9	115	Montenegro
	184	9.4	179	9.2	210	10.8	173	8.9	1 999	Republic of Moldova
	–	–	–	–	–	–	–	–	–	Russian Federation
	0	0.0	0	0.0	0	0.0	0	0.0	21	San Marino
	43	0.8	46	0.9	57	1.1	56	1.3	1 526	Serbia
	42	1.0	44	1.0	52	1.2	50	1.2	1 471	Serbia excluding Kosovo ^d
	1	0.1	2	0.2	5	0.6	6	0.0	55	Kosovo ^d
	61	1.5	49	1.2	41	1.0	38	0.9	7 389	Switzerland
	154	3.7	186	4.3	171	3.9	169	3.8	1 327	Tajikistan
	13	1.3	5	0.5	6	0.6	2	0.2	123	The former Yugoslav Republic of Macedonia
	99	0.3	92	0.2	86	0.2	103	0.3	1 311	Turkey
	–	–	–	–	–	–	–	–	0	Turkmenistan
	6 119	29.5	5 328	26.9	5 462	27.7	5 612	28.6	67 288	Ukraine
	–	–	–	–	–	–	–	–	494	Uzbekistan
	7 805	7.3	7 001	6.6	7 159	6.7	7 162	6.7	95 722	Total non-EU/EEA
										WHO European Region
	3 135	1.6	2 923	1.5	2 387	1.2	1 804	1.1	27 7131	West
	763	0.8	697	0.7	715	0.7	661	0.7	15 125	Centre
	7 646	14.3	6 839	12.9	7 033	13.3	7 041	13.2	85 567	East
	11 544	3.3	10 459	3.0	10 135	2.9	9 506	3.0	377 823	Total WHO European Region

Table 17. AIDS diagnoses in females and rates per 100 000 population, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	2008		2009		2010		2011		2012		2013	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA													
West	Austria	19	0.4	28	0.7	19	0.4	19	0.4	21	0.5	19	0.4
West	Belgium	49	0.9	51	0.9	51	0.9	39	0.7	41	0.7	30	0.5
Centre	Bulgaria	9	0.2	8	0.2	11	0.3	2	0.1	18	0.5	18	0.5
Centre	Croatia	1	0.0	2	0.1	1	0.0	1	0.0	2	0.1	3	0.1
Centre	Cyprus	2	0.5	0	0.0	3	0.7	5	1.2	2	0.5	4	0.9
Centre	Czech Republic	7	0.1	6	0.1	7	0.1	9	0.2	8	0.1	6	0.1
West	Denmark	7	0.3	11	0.4	10	0.4	19	0.7	6	0.2	9	0.3
East	Estonia	17	2.4	12	1.7	5	0.7	7	1.0	11	1.6	7	1.0
West	Finland	3	0.1	9	0.3	9	0.3	7	0.3	3	0.1	3	0.1
West	France	342	1.0	275	0.8	309	0.9	231	0.7	256	0.8	193	0.6
West	Germany ^b	100	0.2	120	0.3	86	0.2	81	0.2	102	0.2	88	0.2
West	Greece	14	0.2	22	0.4	19	0.3	16	0.3	21	0.4	20	0.4
Centre	Hungary	2	0.0	6	0.1	2	0.0	5	0.1	3	0.1	4	0.1
West	Iceland	0	0.0	0	0.0	0	0.0	1	0.6	0	0.0	0	0.0
West	Ireland	9	0.4	8	0.4	11	0.5	13	0.6	9	0.4	8	0.3
West	Italy	350	1.2	297	1.0	300	1.0	252	0.8	290	0.9	264	0.9
East	Latvia	26	2.2	34	2.9	46	4.0	32	2.8	40	3.6	43	3.9
	Liechtenstein	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Lithuania	9	0.5	9	0.5	6	0.4	6	0.4	10	0.6	13	0.8
West	Luxembourg	4	1.6	2	0.8	4	1.6	4	1.6	3	1.1	1	0.4
West	Malta	0	0.0	0	0.0	2	1.0	2	1.0	1	0.5	0	0.0
West	Netherlands	60	0.7	49	0.6	65	0.8	55	0.7	59	0.7	46	0.5
West	Norway	7	0.3	5	0.2	2	0.1	2	0.1	2	0.1	9	0.4
Centre	Poland	41	0.2	32	0.2	41	0.2	42	0.2	37	0.2	31	0.2
West	Portugal	222	4.0	199	3.6	225	4.1	167	3.0	176	3.2	151	2.7
Centre	Romania	159	1.5	114	1.1	109	1.0	125	1.2	125	1.2	114	1.1
Centre	Slovakia	1	0.0	1	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Slovenia	2	0.2	2	0.2	0	0.0	3	0.3	1	0.1	1	0.1
West	Spain	377	1.6	334	1.4	318	1.4	291	1.2	272	1.1	187	0.8
West	Sweden	–	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	304	1.0	202	0.6	224	0.7	127	0.4	131	0.4	96	0.3
	Total EU/EEA	2 143	0.8	1 838	0.7	1 885	0.7	1 563	0.6	1 650	0.7	1 368	0.5
Non-EU/EEA													
Centre	Albania	9	0.6	2	0.1	8	0.5	11	0.8	15	1.0	15	1.0
West	Andorra	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1	2.4
East	Armenia	21	1.4	27	1.8	21	1.4	22	1.4	38	2.5	41	2.7
East	Azerbaijan	8	0.2	16	0.4	19	0.4	24	0.5	26	0.6	27	0.6
East	Belarus	120	2.4	206	4.1	184	3.6	225	4.4	223	4.4	178	3.5
Centre	Bosnia and Herzegovina	1	0.1	0	0.0	0	0.0	3	0.2	0	0.0	1	0.1
East	Georgia	55	2.4	75	3.3	96	4.3	118	5.4	111	5.2	84	4.0
West	Israel	19	0.5	19	0.5	16	0.4	18	0.5	14	0.4	11	0.3
East	Kazakhstan	47	0.6	79	0.9	72	0.8	77	0.9	58	0.7	69	0.8
East	Kyrgyzstan	9	0.3	14	0.5	19	0.7	21	0.8	23	0.8	18	0.6
West	Monaco	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Montenegro	2	0.6	2	0.6	0	0.0	0	0.0	0	0.0	0	0.0
East	Republic of Moldova	33	1.5	96	4.5	127	6.0	170	8.0	90	4.3	106	5.0
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Serbia	10	0.2	7	0.1	7	0.1	10	0.2	5	0.1	8	0.1
Centre	Serbia excluding Kosovo ^d	10	0.2	7	0.2	7	0.2	8	0.2	4	0.1	7	0.2
Centre	Kosovo ^d	0	0.0	0	0.0	0	0.0	2	0.2	1	0.1	1	0.1
West	Switzerland	48	1.2	43	1.1	42	1.1	38	0.9	29	0.7	32	0.8
East	Tajikistan	8	0.2	9	0.2	15	0.4	33	0.9	46	1.2	52	1.3
Centre	The former Yugoslav Republic of Macedonia	4	0.4	0	0.0	0	0.0	0	0.0	2	0.2	1	0.1
Centre	Turkey	7	0.0	7	0.0	14	0.0	15	0.0	12	0.0	19	0.0
East	Turkmenistan	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	–	–
East	Ukraine	1 320	5.3	1 418	5.7	1 873	7.6	3 048	12.4	3 575	14.6	3 349	13.8
East	Uzbekistan	43	0.3	37	0.3	57	0.4	–	–	–	–	–	–
	Total non-EU/EEA	1 764	1.5	2 057	1.7	2 570	2.1	3 833	3.5	4 267	3.9	4 012	3.6
WHO European Region													
West		1 934	0.9	1 674	0.8	1 712	0.8	1 382	0.6	1 436	0.7	1 168	0.5
Centre		257	0.3	189	0.2	203	0.2	231	0.2	230	0.2	225	0.2
East		1 716	2.4	2 032	2.8	2 540	3.5	3 783	6.4	4 251	7.2	3 987	6.8
	Total WHO European Region	3 907	1.0	3 895	1.0	4 455	1.2	5 396	1.5	5 917	1.6	5 380	1.5

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	2014		2015		2016		2017		Cumulative total ^b	Country, territory or area ^a
	N	Rate	N	Rate	N	Rate	N	Rate		
										EU/EEA
	25	0.6	17	0.4	18	0.4	10	0.2	761	Austria
	40	0.7	35	0.6	–	–	–	–	1 581	Belgium
	12	0.3	6	0.2	3	0.1	10	0.3	148	Bulgaria
	2	0.1	1	0.0	1	0.0	1	0.0	52	Croatia
	1	0.2	4	0.9	5	1.1	7	1.6	78	Cyprus
	9	0.2	8	0.1	6	0.1	9	0.2	111	Czech Republic
	6	0.2	12	0.4	5	0.2	3	0.1	445	Denmark
	5	0.7	7	1.0	17	2.4	5	0.7	143	Estonia
	6	0.2	5	0.2	5	0.2	8	0.3	137	Finland
	206	0.6	183	0.5	159	0.5	110	0.3	15 390	France
	57	0.1	54	0.1	24	0.1	–	–	4 503	Germany ^c
	22	0.4	24	0.4	34	0.6	27	0.5	671	Greece
	10	0.2	6	0.1	8	0.2	16	0.3	130	Hungary
	0	0.0	0	0.0	0	0.0	0	0.0	9	Iceland
	10	0.4	5	0.2	3	0.1	5	0.2	297	Ireland
	218	0.7	185	0.6	191	0.6	182	0.6	15 976	Italy
	61	5.6	43	4.0	24	2.3	45	4.2	576	Latvia
	0	0.0	0	0.0	0	0.0	0	0.0	1	Liechtenstein
	8	0.5	9	0.6	7	0.4	8	0.5	104	Lithuania
	3	1.1	4	1.4	2	0.7	1	0.3	74	Luxembourg
	0	0.0	0	0.0	0	0.0	0	0.0	14	Malta
	36	0.4	40	0.5	45	0.5	21	0.2	1 384	Netherlands
	9	0.4	7	0.3	7	0.3	3	0.1	260	Norway
	33	0.2	31	0.2	12	0.1	12	0.1	743	Poland
	82	1.5	87	1.6	96	1.8	64	1.2	4 641	Portugal
	114	1.1	108	1.1	93	0.9	74	0.7	4 009	Romania
	1	0.0	1	0.0	0	0.0	0	0.0	13	Slovakia
	1	0.1	0	0.0	2	0.2	0	0.0	30	Slovenia
	130	0.7	115	0.7	92	0.5	85	0.5	17 716	Spain
	–	–	–	–	–	–	–	–	395	Sweden
	117	0.4	99	0.3	77	0.2	73	0.2	6 147	United Kingdom
	1 224	0.5	1 096	0.4	936	0.4	779	0.4	76 539	Total EU-EEA
										Non-EU/EEA
	14	1.0	15	1.0	8	0.6	9	0.6	126	Albania
	0	0.0	1	2.5	0	0.0	0	0.0	3	Andorra
	47	3.0	34	2.2	47	3.0	33	2.1	371	Armenia
	38	0.8	43	0.9	36	0.7	54	1.1	332	Azerbaijan
	166	3.3	212	4.2	201	4.0	165	3.3	2 192	Belarus
	0	0.0	0	0.0	1	0.1	0	0.0	24	Bosnia and Herzegovina
	67	3.2	74	3.6	73	3.6	64	3.1	968	Georgia
	22	0.5	16	0.4	17	0.4	10	0.2	470	Israel
	63	0.7	89	1.0	120	1.3	137	1.5	978	Kazakhstan
	27	0.9	36	1.2	17	0.6	23	0.8	220	Kyrgyzstan
	0	0.0	0	0.0	0	0.0	0	0.0	11	Monaco
	3	0.9	0	0.0	0	0.0	1	0.3	20	Montenegro
	116	5.5	114	5.4	156	7.4	105	5.0	1 290	Republic of Moldova
	–	–	–	–	–	–	–	–	–	Russian Federation
	0	0.0	0	0.0	0	0.0	0	0.0	2	San Marino
	6	0.1	3	0.1	4	0.1	6	0.1	448	Serbia
	6	0.1	2	0.0	4	0.1	6	0.1	431	Serbia excluding Kosovo ^d
	0	0.0	1	0.1	0	0.0	0	0.0	17	Kosovo ^d
	16	0.4	12	0.3	19	0.4	12	0.3	2 534	Switzerland
	71	1.7	96	2.3	62	1.4	78	1.8	486	Tajikistan
	3	0.3	1	0.1	2	0.2	0	0.0	36	The former Yugoslav Republic of Macedonia
	26	0.1	26	0.1	13	0.0	17	0.0	265	Turkey
	–	–	–	–	–	–	–	–	1	Turkmenistan
	3 725	15.4	3 140	13.7	3 390	14.8	3 696	16.2	34 919	Ukraine
	–	–	–	–	–	–	–	–	157	Uzbekistan
	4 410	4.0	3 912	3.5	4 166	3.7	4 410	4.0	45 853	Total non-EU/EEA
										WHO European Region
	1 005	0.5	901	0.4	794	0.4	614	0.4	73 421	West
	235	0.2	210	0.2	158	0.2	162	0.2	6 233	Centre
	4 394	7.4	3 897	6.7	4 150	7.1	4 413	7.5	42 737	East
	5 634	1.5	5 008	1.4	5 102	1.4	5 189	1.6	122 391	Total WHO European Region

Table 18. AIDS diagnoses in men infected through sex with men, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of diagnosis										Cumulative total ^b
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	29	33	31	33	31	22	24	21	19	19	1 063
West	Belgium	30	41	36	34	31	33	38	34	–	–	1 531
Centre	Bulgaria	4	4	5	2	8	12	9	12	11	15	114
Centre	Croatia	12	17	19	18	22	11	18	12	21	17	281
Centre	Cyprus	4	4	5	3	2	4	5	5	10	6	136
Centre	Czech Republic	8	11	10	15	15	16	13	19	24	28	293
West	Denmark	16	12	15	13	13	11	10	11	7	8	1 742
East	Estonia	1	0	0	0	1	0	1	0	1	1	29
West	Finland	11	6	6	6	2	4	6	7	5	3	308
West	France	262	264	251	240	194	202	153	157	128	104	28 436
West	Germany ^c	273	281	257	219	216	195	171	127	56	–	18 191
West	Greece	59	51	63	55	51	53	42	63	52	45	2 177
Centre	Hungary	16	13	23	24	37	30	37	33	41	29	654
West	Iceland	1	0	0	0	0	0	0	0	1	0	44
West	Ireland	8	10	13	17	15	6	12	10	7	7	405
West	Italy	299	293	254	265	260	305	268	282	247	181	12 325
East	Latvia	3	7	10	7	4	10	7	5	4	10	126
	Liechtenstein	0	0	0	0	0	0	1	0	0	0	2
East	Lithuania	7	1	0	2	2	5	3	3	9	7	90
West	Luxembourg	0	2	2	6	3	7	3	3	6	2	139
West	Malta	1	0	0	1	0	1	1	0	2	0	44
West	Netherlands	153	153	146	129	143	139	102	118	92	50	3 524
West	Norway	6	7	9	9	10	15	18	4	4	2	514
Centre	Poland	28	26	29	45	25	48	40	30	31	20	714
West	Portugal	108	83	85	88	87	60	57	66	74	43	2 921
Centre	Romania	10	15	13	13	7	16	25	18	23	25	239
Centre	Slovakia	0	1	1	3	3	2	2	2	7	5	57
Centre	Slovenia	7	10	7	7	9	7	10	10	6	3	150
West	Spain	327	318	400	364	354	269	232	209	169	144	13 628
West	Sweden	–	–	–	–	–	–	–	–	–	–	1 085
West	United Kingdom	226	181	196	142	156	110	127	133	108	98	15 184
	Total EU/EEA	1 909	1 844	1 886	1 760	1 701	1 593	1 435	1 394	1 165	872	106 146
Non-EU/EEA												
Centre	Albania	6	6	1	5	6	6	8	8	3	1	60
West	Andorra	2	0	0	1	0	1	1	1	0	0	7
East	Armenia	3	0	1	2	2	4	7	1	2	4	28
East	Azerbaijan	1	1	4	1	1	3	1	1	2	0	18
East	Belarus	0	0	2	6	3	3	4	3	4	6	34
Centre	Bosnia and Herzegovina	0	0	5	2	4	3	6	4	4	1	43
East	Georgia	6	3	10	12	11	16	21	24	18	21	167
West	Israel	5	8	6	8	7	10	13	4	2	5	328
East	Kazakhstan	0	0	1	1	0	4	1	2	2	2	17
East	Kyrgyzstan	0	0	0	0	0	0	0	0	0	0	1
West	Monaco	0	0	0	0	0	0	1	0	0	0	22
Centre	Montenegro	2	4	5	1	4	3	3	8	9	11	65
East	Republic of Moldova	0	2	2	2	0	0	3	2	1	8	25
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	1	2	0	0	0	0	0	11
Centre	Serbia	17	26	22	22	31	20	27	28	35	28	486
Centre	Serbia excluding Kosovo ^d	15	25	22	21	30	19	27	26	35	28	476
Centre	Kosovo ^d	2	1	0	1	1	1	0	2	0	0	10
West	Switzerland	50	45	62	37	33	32	24	23	22	19	3 353
East	Tajikistan	0	0	0	0	0	0	0	0	2	3	5
Centre	The former Yugoslav Republic of Macedonia	2	1	1	4	3	3	5	2	4	2	45
Centre	Turkey	11	2	3	0	0	12	15	12	17	14	151
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	10	10	10	31	45	50	55	72	116	69	496
East	Uzbekistan	0	0	0	–	–	–	–	–	–	–	1
	Total non-EU/EEA	115	108	135	136	152	170	195	195	243	194	5 363
WHO European Region												
	West	1 866	1 788	1 832	1 668	1 608	1 475	1 303	1 273	1 001	730	106 982
	Centre	127	140	149	164	176	193	223	203	246	205	3 488
	East	31	24	40	64	69	95	103	113	161	131	1 037
	Total WHO European Region	2 024	1 952	2 021	1 896	1 853	1 763	1 629	1 589	1 408	1 066	111 507

^a Country-specific comments are in Annex 5.^b Cumulative total is the total number of cases reported by the country since the start of reporting.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

Table 19. AIDS diagnoses in people infected through injecting drug use, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of diagnosis										Cumulative total ^b
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	29	19	15	13	27	14	20	17	10	8	892
West	Belgium	9	5	3	4	1	3	7	1	–	–	287
Centre	Bulgaria	4	7	10	17	39	29	26	11	14	17	177
Centre	Croatia	0	0	1	1	1	0	0	1	0	2	26
Centre	Cyprus	0	0	0	0	0	0	1	0	0	0	4
Centre	Czech Republic	6	2	4	1	2	3	2	3	4	2	45
West	Denmark	6	3	4	4	4	5	1	0	1	1	252
East	Estonia	41	26	14	20	15	9	6	4	17	3	265
West	Finland	1	2	3	0	4	2	0	0	1	1	57
West	France	86	57	60	61	45	39	26	29	16	12	13 884
West	Germany ^c	54	48	35	41	40	31	23	17	5	–	4 350
West	Greece	3	7	3	9	22	41	45	30	25	17	317
Centre	Hungary	0	0	0	0	0	0	0	2	2	1	11
West	Iceland	0	0	0	0	0	0	0	0	2	0	7
West	Ireland	11	8	6	10	3	1	0	0	0	1	375
West	Italy	318	275	228	194	179	178	113	96	83	78	35 017
East	Latvia	60	49	70	57	70	62	73	51	36	38	960
	Liechtenstein	0	0	0	1	0	0	0	0	0	0	7
East	Lithuania	35	20	20	9	22	19	16	15	19	23	253
West	Luxembourg	0	0	0	1	0	1	1	1	0	1	45
West	Malta	0	0	0	0	0	0	1	0	0	0	4
West	Netherlands	7	13	8	8	3	4	1	4	4	1	372
West	Norway	2	1	3	0	1	1	0	0	1	0	156
Centre	Poland	74	55	70	62	59	46	32	34	23	23	1 583
West	Portugal	271	232	232	159	159	107	62	44	35	24	9 427
Centre	Romania	3	5	14	28	59	82	107	102	94	65	575
Centre	Slovakia	0	0	0	0	0	0	0	0	0	0	1
Centre	Slovenia	0	0	0	0	0	0	1	0	0	0	7
West	Spain	548	456	429	364	297	195	130	84	62	51	50 404
West	Sweden	–	–	–	–	–	–	–	–	–	–	242
West	United Kingdom	26	15	22	12	12	9	14	10	10	5	1 500
	Total EU/EEA	1 594	1 305	1 254	1 076	1 064	881	708	556	464	374	121 502
Non-EU/EEA												
Centre	Albania	0	0	0	1	0	0	1	0	0	0	3
West	Andorra	1	0	0	0	0	0	0	0	0	0	2
East	Armenia	30	33	41	33	42	24	34	22	30	18	430
East	Azerbaijan	40	64	183	148	160	123	110	92	76	50	1 239
East	Belarus	191	265	208	266	242	193	150	139	130	116	2 508
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	18
East	Georgia	134	168	184	191	160	142	120	99	110	86	1 870
West	Israel	12	7	4	7	10	15	12	9	6	4	258
East	Kazakhstan	122	116	174	147	153	158	148	154	174	170	2 017
East	Kyrgyzstan	27	53	102	58	55	38	40	73	30	23	583
West	Monaco	0	0	0	0	0	0	0	0	0	0	19
Centre	Montenegro	0	0	0	0	1	0	0	0	0	0	4
East	Republic of Moldova	55	103	95	101	17	22	42	46	39	31	853
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	6
Centre	Serbia	6	11	6	12	5	9	5	5	0	5	659
Centre	Serbia excluding Kosovo ^d	6	11	6	12	5	9	5	5	0	5	658
Centre	Kosovo ^d	0	0	0	0	0	0	0	0	0	0	1
West	Switzerland	19	14	11	18	6	10	4	2	4	7	3 318
East	Tajikistan	38	51	61	73	87	58	74	96	84	71	732
Centre	The former Yugoslav Republic of Macedonia	0	0	0	0	0	0	0	0	0	0	9
Centre	Turkey	1	4	2	2	1	1	2	0	2	1	64
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	2 868	2 732	3 458	4 979	4 933	4 273	3 856	3 050	2 939	2 872	47 465
East	Uzbekistan	116	70	131	–	–	–	–	–	–	–	380
	Total non-EU/EEA	3 660	3 691	4 660	6 036	5 872	5 066	4 598	3 787	3 624	3 454	62 437
WHO European Region												
	West	1 403	1 162	1 066	905	813	656	460	344	265	211	121 191
	Centre	94	84	107	124	167	170	177	158	139	116	3 186
	East	3 757	3 750	4 741	6 082	5 956	5 121	4 669	3 841	3 684	3 501	59 555
	Total WHO European Region	5 254	4 996	5 914	7 111	6 936	5 947	5 306	4 343	4 088	3 828	183 932

^a Country-specific comments are in Annex 5.

^b Cumulative total is the total number of cases reported by the country since the start of reporting.

^c Due to technical problems no data export for 2017 from Germany was available.

^d (in accordance with Security Council resolution 1244 (1999)).

Table 20. AIDS diagnoses in people infected through heterosexual contact, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of diagnosis										Cumulative total ^b
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	36	37	30	28	35	25	35	26	20	25	910
West	Belgium	79	87	76	52	68	54	65	50	–	–	2 531
Centre	Bulgaria	15	19	14	20	15	20	25	22	17	17	338
Centre	Croatia	10	4	1	6	4	6	5	2	1	1	149
Centre	Cyprus	7	4	5	9	6	4	3	8	11	9	163
Centre	Czech Republic	14	11	13	13	14	12	16	16	15	21	221
West	Denmark	16	18	23	40	22	21	17	27	14	16	803
East	Estonia	17	10	7	9	16	10	8	14	16	12	167
West	Finland	11	12	12	15	10	12	9	6	16	11	255
West	France	597	512	534	444	493	374	370	337	268	200	20 811
West	Germany ^c	152	158	120	156	130	124	112	90	36	–	4 207
West	Greece	45	36	31	34	42	31	33	37	45	31	1 086
Centre	Hungary	5	8	4	7	6	10	12	7	10	19	188
West	Iceland	0	0	1	2	1	0	0	0	0	0	15
West	Ireland	13	15	12	17	20	17	17	8	7	6	366
West	Italy	605	527	559	503	513	500	449	421	426	350	17 759
East	Latvia	25	32	36	34	55	37	59	58	51	49	563
	Liechtenstein	0	0	0	0	1	0	0	0	0	0	3
East	Lithuania	6	15	11	9	13	15	17	16	18	18	170
West	Luxembourg	9	2	6	5	4	2	5	4	3	3	118
West	Malta	5	1	6	3	5	0	2	1	3	0	41
West	Netherlands	113	117	128	93	109	86	77	82	81	45	2 374
West	Norway	10	10	10	9	12	11	27	17	16	11	441
Centre	Poland	34	24	53	45	37	35	34	33	18	15	699
West	Portugal	443	391	419	381	348	314	227	199	219	150	8 997
Centre	Romania	135	121	117	166	149	144	173	174	176	169	2 732
Centre	Slovakia	1	1	1	1	3	4	2	3	3	3	38
Centre	Slovenia	1	0	0	3	1	3	0	0	4	4	49
West	Spain	542	498	446	416	377	272	211	196	173	148	16 144
West	Sweden	–	–	–	–	–	–	–	–	–	–	665
West	United Kingdom	510	394	383	240	248	207	198	216	168	127	10 701
	Total EU/EEA	3 456	3 064	3 058	2 760	2 757	2 350	2 208	2 070	1 835	1 460	93 704
Non-EU/EEA												
Centre	Albania	26	28	24	39	40	55	40	52	55	31	480
West	Andorra	0	0	0	0	0	1	0	2	0	0	4
East	Armenia	46	45	42	50	84	103	121	129	123	113	933
East	Azerbaijan	14	31	42	44	68	57	84	93	76	105	730
East	Belarus	145	254	246	305	348	344	309	333	367	312	3 266
Centre	Bosnia and Herzegovina	5	2	1	4	0	3	1	2	3	2	76
East	Georgia	77	104	134	180	184	139	123	145	138	145	1 578
West	Israel	34	35	27	38	31	21	42	28	29	17	921
East	Kazakhstan	48	45	65	80	77	82	90	95	158	166	990
East	Kyrgyzstan	6	17	24	26	27	24	39	40	35	30	287
West	Monaco	0	0	0	0	0	0	0	0	0	0	7
Centre	Montenegro	4	4	2	1	2	1	3	1	5	2	54
East	Republic of Moldova	31	101	146	321	118	139	211	208	275	189	1 943
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	5
Centre	Serbia	13	9	12	17	9	9	11	11	8	17	449
Centre	Serbia excluding Kosovo ^d	12	9	11	11	9	7	10	11	6	12	416
Centre	Kosovo ^d	1	0	1	6	0	2	1	0	2	5	33
West	Switzerland	74	76	84	69	50	53	32	33	25	17	2 723
East	Tajikistan	14	22	41	61	69	90	108	144	120	137	834
Centre	The former Yugoslav Republic of Macedonia	4	1	3	3	6	6	10	4	3	0	91
Centre	Turkey	32	28	26	37	35	41	58	39	28	29	689
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	1 342	1 509	2 264	3 944	4 873	4 875	5 806	5 250	5 708	6 243	45 737
East	Uzbekistan	51	40	68	–	–	–	–	–	–	–	183
	Total non-EU/EEA	1 966	2 351	3 251	5 219	6 021	6 043	7 088	6 609	7 156	7 555	61 980
WHO European Region												
	West	3 294	2 926	2 907	2 545	2 518	2 125	1 928	1 780	1 549	1 157	91 884
	Centre	306	264	276	371	327	353	393	374	357	339	6 416
	East	1 822	2 225	3 126	5 063	5 932	5 915	6 975	6 525	7 085	7 519	57 381
	Total WHO European Region	5 422	5 415	6 309	7 979	8 777	8 393	9 296	8 679	8 991	9 015	155 681

^a Country-specific comments are in Annex 5.

^b Cumulative total is the total number of cases reported by the country since the start of reporting.

^c Due to technical problems no data export for 2017 from Germany was available.

^d (in accordance with Security Council resolution 1244 (1999)).

Table 21. AIDS diagnoses in people infected through mother-to-child transmission, by country and year of diagnosis (2008–2017) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	Year of diagnosis										Cumulative total ^b
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	1	2	0	1	0	0	0	0	1	0	13
West	Belgium	5	2	0	1	2	1	1	3	–	–	143
Centre	Bulgaria	0	0	2	1	0	3	0	0	0	0	7
Centre	Croatia	0	0	0	1	0	0	0	0	0	0	4
Centre	Cyprus	0	0	0	0	0	0	0	0	0	0	2
Centre	Czech Republic	0	0	0	0	0	0	0	0	1	0	1
West	Denmark	0	0	1	0	0	1	0	0	0	1	26
East	Estonia	0	0	0	0	0	0	0	0	0	0	2
West	Finland	0	1	0	0	0	0	1	0	0	0	8
West	France	9	10	5	8	10	10	3	5	4	3	788
West	Germany ^c	0	0	1	3	2	1	1	0	0	–	118
West	Greece	0	0	1	0	0	0	0	0	0	0	24
Centre	Hungary	0	1	0	0	1	0	0	1	0	2	7
West	Iceland	0	0	0	0	0	0	0	0	0	0	0
West	Ireland	3	1	1	0	0	1	0	0	0	0	36
West	Italy	2	5	3	3	4	7	2	0	1	0	739
East	Latvia	5	1	0	2	1	2	0	0	2	1	21
	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	0	0	0	0	0	1	0	0	0	0	1
West	Luxembourg	0	0	0	0	1	0	0	0	0	0	4
West	Malta	0	0	0	0	0	0	0	0	0	0	1
West	Netherlands	4	3	8	4	3	5	3	3	1	0	102
West	Norway	0	0	0	0	0	1	0	0	0	1	8
Centre	Poland	5	7	1	3	1	0	1	1	0	0	69
West	Portugal	4	2	1	1	1	3	1	1	2	1	124
Centre	Romania	7	13	8	12	11	16	8	6	0	8	315
Centre	Slovakia	0	0	0	0	0	0	0	0	0	0	0
Centre	Slovenia	0	0	0	0	0	0	0	0	0	0	2
West	Spain	8	8	3	3	3	4	1	2	4	1	986
West	Sweden	–	–	–	–	–	–	–	–	–	–	22
West	United Kingdom	6	4	4	2	3	3	2	5	2	0	52
	Total EU/EEA	59	60	39	45	43	59	24	27	18	18	3 625
Non-EU/EEA												
Centre	Albania	0	0	0	1	2	4	0	0	0	1	10
West	Andorra	0	0	0	0	0	0	0	0	0	0	0
East	Armenia	0	2	1	1	0	4	7	2	0	2	24
East	Azerbaijan	0	2	1	1	3	3	2	0	1	0	15
East	Belarus	12	10	13	12	4	3	9	10	5	2	123
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	0
East	Georgia	10	4	11	8	1	3	2	0	0	1	64
West	Israel	1	1	1	1	1	1	0	0	0	0	39
East	Kazakhstan	3	14	6	4	2	5	1	5	3	7	55
East	Kyrgyzstan	2	0	0	3	4	1	0	5	1	2	19
West	Monaco	0	0	0	0	0	0	0	0	0	0	0
Centre	Montenegro	0	0	0	0	0	0	0	0	0	0	1
East	Republic of Moldova	6	1	3	3	1	9	8	2	4	5	60
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	0
Centre	Serbia	2	1	1	0	1	1	0	1	0	0	28
Centre	Serbia excluding Kosovo ^d	2	1	1	0	0	1	0	0	0	0	26
Centre	Kosovo ^d	0	0	0	0	1	0	0	1	0	0	2
West	Switzerland	0	1	2	0	1	1	0	0	0	1	110
East	Tajikistan	0	0	1	7	6	15	10	4	6	5	55
Centre	The former Yugoslav Republic of Macedonia	0	0	1	0	1	1	0	0	0	0	6
Centre	Turkey	0	2	0	0	1	0	1	3	0	1	17
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	0
East	Ukraine	73	86	129	118	88	59	60	48	67	93	1 286
East	Uzbekistan	6	3	8	–	–	–	–	–	–	–	22
	Total non-EU/EEA	115	127	178	159	116	110	100	80	87	120	1 934
WHO European Region												
West	West	43	40	31	27	31	39	15	19	15	8	3 343
Centre	Centre	14	24	13	18	18	25	10	12	1	12	469
East	East	117	123	173	159	110	105	99	76	89	118	1 747
	Total WHO European Region	174	187	217	204	159	169	124	107	105	138	5 559

^a Country-specific comments are in Annex 5.

^b Cumulative total is the total number of cases reported by the country since the start of reporting.

^c Due to technical problems no data export for 2017 from Germany was available.

^d (in accordance with Security Council resolution 1244 (1999)).

Table 22. AIDS diagnoses in 2017, by country of report, transmission mode and sex, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^a	MSM		Injecting drug users			Heterosexual			Mother-to-child transmission		
		Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b
EU/EEA												
West	Austria	19	19	2	6	8	7	18	25	0	0	0
West	Belgium	–	–	–	–	–	–	–	–	–	–	–
Centre	Bulgaria	15	15	5	12	17	5	12	17	0	0	0
Centre	Croatia	17	17	0	2	2	1	0	1	0	0	0
Centre	Cyprus	6	6	0	0	0	6	3	9	0	0	0
Centre	Czech Republic	28	28	1	1	2	8	13	21	0	0	0
West	Denmark	8	8	0	1	1	3	13	16	0	1	1
East	Estonia	1	1	0	3	3	4	8	12	0	0	0
West	Finland	3	3	1	0	1	6	5	11	0	0	0
West	France	101	104	1	11	12	88	111	200	3	0	3
West	Germany ^c	–	–	–	–	–	–	–	–	–	–	–
West	Greece	43	45	4	13	17	21	10	31	0	0	0
Centre	Hungary	29	29	0	1	1	15	4	19	1	1	2
West	Iceland	0	0	0	0	0	0	0	0	0	0	0
West	Ireland	7	7	0	1	1	5	1	6	0	0	0
West	Italy	181	181	21	57	78	140	210	350	0	0	0
East	Latvia	10	10	9	29	38	25	24	49	1	0	1
	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	7	7	3	20	23	5	13	18	0	0	0
West	Luxembourg	2	2	1	0	1	0	3	3	0	0	0
West	Malta	0	0	0	0	0	0	0	0	0	0	0
West	Netherlands	50	50	0	1	1	18	27	45	0	0	0
West	Norway	2	2	0	0	0	3	8	11	0	1	1
Centre	Poland	20	20	1	22	23	8	7	15	0	0	0
West	Portugal	43	43	3	21	24	58	92	150	0	1	1
Centre	Romania	25	25	6	59	65	54	115	169	6	2	8
Centre	Slovakia	5	5	0	0	0	0	3	3	0	0	0
Centre	Slovenia	3	3	0	0	0	0	4	4	0	0	0
West	Spain	144	144	12	39	51	65	83	148	0	1	1
West	Sweden	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	98	98	0	5	5	65	61	127	0	0	0
	Total EU/EEA	867	872	70	304	374	610	848	1460	11	7	18
Non-EU/EEA												
Centre	Albania	1	1	0	0	0	9	22	31	0	1	1
West	Andorra	0	0	0	0	0	0	0	0	0	0	0
East	Armenia	4	4	1	17	18	28	85	113	2	0	2
East	Azerbaijan	0	0	0	50	50	48	57	105	0	0	0
East	Belarus	6	6	23	93	116	141	171	312	0	2	2
Centre	Bosnia and Herzegovina	1	1	0	0	0	0	2	2	0	0	0
East	Georgia	21	21	2	84	86	58	87	145	0	1	1
West	Israel	5	5	2	2	4	8	9	17	0	0	0
East	Kazakhstan	2	2	33	137	170	94	72	166	2	5	7
East	Kyrgyzstan	0	0	1	22	23	18	12	30	2	0	2
West	Monaco	0	0	0	0	0	0	0	0	0	0	0
Centre	Montenegro	11	11	0	0	0	1	1	2	0	0	0
East	Republic of Moldova	8	8	9	22	31	76	113	189	1	4	5
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	0
Centre	Serbia	28	28	3	2	5	3	14	17	0	0	0
Centre	Serbia excluding Kosovo ^d	28	28	3	2	5	3	9	12	0	0	0
Centre	Kosovo ^d	0	0	0	0	0	0	5	5	0	0	0
West	Switzerland	19	19	3	4	7	8	8	17	0	1	1
East	Tajikistan	3	3	4	67	71	60	77	137	2	3	5
Centre	The former Yugoslav Republic of Macedonia	2	2	0	0	0	0	0	0	0	0	0
Centre	Turkey	14	14	0	1	1	6	23	29	1	0	1
East	Turkmenistan	–	–	–	–	–	–	–	–	–	–	–
East	Ukraine	69	69	474	2 398	2 872	3 166	3 077	6 243	44	49	93
East	Uzbekistan	–	–	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	194	194	555	2 899	3 454	3 724	3 830	7 555	54	66	120
WHO European Region												
West	West	725	730	50	161	211	495	659	1 157	3	5	8
Centre	Centre	205	0	16	100	116	116	223	339	8	4	12
East	East	131	0	559	2 942	3 501	3 723	3 796	7 519	54	64	118
	Total WHO European Region	1 061	1 066	625	3 203	3 828	4 334	4 678	9 015	65	73	138

^a Country-specific comments are in Annex 5.^b Totals include persons with unknown gender and may, therefore, not equal the sum of the columns or may differ slightly from the totals presented for 2017 in tables 18–21.^c Due to technical problems no data export for 2017 from Germany was available.^d (in accordance with Security Council resolution 1244 (1999)).

	Nosocomial			Haemophilic/transfusion			Unknown			Total ^b	Country, territory or area ^a
	Female	Male	Total ^b	Female	Male	Total ^b	Female	Male	Total ^b		
	0	0	0	0	0	0	1	3	4	56	EU/EEA
	-	-	-	-	-	-	-	-	-	-	Austria
	0	0	0	0	0	0	0	0	0	49	Belgium
	0	0	0	0	0	0	0	0	0	20	Bulgaria
	0	0	0	1	0	1	0	0	0	16	Croatia
	0	0	0	0	0	0	0	1	1	52	Cyprus
	0	0	0	0	0	0	0	2	2	28	Czech Republic
	0	0	0	0	0	0	1	3	4	20	Denmark
	0	0	0	0	0	0	1	2	3	20	Estonia
	0	0	0	1	1	2	17	54	71	18	Finland
	-	-	-	-	-	-	-	-	-	392	France
	0	0	0	0	1	1	2	16	18	-	Germany ^c
	0	0	0	0	0	0	0	1	1	112	Greece
	0	0	0	0	0	0	0	0	0	52	Hungary
	0	0	0	0	0	0	0	0	0	0	Iceland
	0	0	0	0	0	0	0	2	2	16	Ireland
	0	0	0	0	0	0	21	60	81	690	Italy
	0	0	0	0	0	0	10	10	20	118	Latvia
	0	0	0	0	0	0	0	0	0	0	Liechtenstein
	0	0	0	0	0	0	0	6	6	54	Lithuania
	0	0	0	0	0	0	0	0	0	6	Luxembourg
	0	0	0	0	0	0	0	0	0	0	Malta
	0	0	0	0	0	0	3	16	19	115	Netherlands
	0	0	0	0	0	0	0	0	0	14	Norway
	0	0	0	0	1	1	3	39	42	101	Poland
	0	0	0	0	0	0	3	13	16	234	Portugal
	4	1	5	2	1	3	2	6	8	283	Romania
	0	0	0	0	0	0	0	1	1	9	Slovakia
	0	0	0	0	0	0	0	0	0	7	Slovenia
	0	0	0	1	0	1	7	54	61	406	Spain
	-	-	-	-	-	-	-	-	-	-	Sweden
	0	1	1	0	3	3	8	20	28	262	United Kingdom
	4	2	6	5	7	12	79	309	388	3 130	Total EU/EEA
											Non-EU/EEA
	0	0	0	0	0	0	0	0	0	33	Albania
	0	0	0	0	0	0	0	0	0	0	Andorra
	0	0	0	0	0	0	2	5	7	144	Armenia
	0	0	0	0	0	0	6	7	13	168	Azerbaijan
	0	0	0	0	0	0	1	2	3	439	Belarus
	0	0	0	0	1	1	0	0	0	4	Bosnia and Herzegovina
	0	0	0	2	1	3	2	0	2	258	Georgia
	0	0	0	0	0	0	0	0	0	26	Israel
	0	0	0	0	0	0	8	8	16	361	Kazakhstan
	0	2	2	0	0	0	2	0	2	59	Kyrgyzstan
	0	0	0	0	0	0	0	0	0	0	Monaco
	0	0	0	0	0	0	0	0	0	13	Montenegro
	0	0	0	0	0	0	19	26	45	278	Republic of Moldova
	-	-	-	-	-	-	-	-	-	-	Russian Federation
	0	0	0	0	0	0	0	0	0	0	San Marino
	0	0	0	0	0	0	0	11	11	62	Serbia
	0	0	0	0	0	0	0	11	11	56	Serbia excluding Kosovo ^d
	0	0	0	0	0	0	0	1	1	6	Kosovo ^d
	0	0	0	0	0	0	1	6	7	51	Switzerland
	0	0	0	0	0	0	12	19	31	247	Tajikistan
	0	0	0	0	0	0	0	0	0	2	The former Yugoslav Republic of Macedonia
	0	0	0	0	0	0	10	65	75	120	Turkey
	-	-	-	-	-	-	-	-	-	-	Turkmenistan
	0	0	0	0	0	0	12	19	31	9 308	Ukraine
	-	-	-	-	-	-	-	-	-	-	Uzbekistan
	0	2	2	2	2	4	75	169	244	11 573	Total non-EU/EEA
											WHO European Region
	0	1	1	2	5	7	64	248	312	2 426	West
	4	1	5	3	3	6	15	125	140	823	Centre
	0	2	2	2	1	3	75	105	180	11 454	East
	4	4	8	7	9	16	154	478	632	14 703	Total WHO European Region

Table 23. The most common AIDS-indicative diseases diagnosed in 2017,^a ordered by frequency

Diseases	Men		Women		Children		Total	
	N	%	N	%	N	%	N	%
EU/EEA								
<i>Pneumocystis carinii</i> pneumonia	600	21.2	195	21.2	3	7.1	798	21.0
Wasting syndrome due to HIV	323	11.4	89	9.7	10	23.8	422	11.1
Candidiasis; oesophageal	296	10.4	88	9.6	2	4.8	386	10.2
<i>Mycobacterium tuberculosis</i> ; pulmonary in an adult or an adolescent (aged 13 years or over)	253	8.9	78	8.5	3	7.1	334	8.8
Kaposi's sarcoma	237	8.4	30	3.3	0	0.0	267	7.0
Toxoplasmosis of brain in a patient over 1 month of age	135	4.8	74	8.0	1	2.4	210	5.5
Cytomegalovirus disease (other than liver, spleen or nodes) in a patient over 1 month of age	148	5.2	56	6.1	4	9.5	208	5.5
<i>Mycobacterium tuberculosis</i> ; extrapulmonary	138	4.9	56	6.1	0	0.0	194	5.1
Encephalopathy; HIV-related	99	3.5	38	4.1	8	19.0	145	3.8
Progressive multifocal leukoencephalopathy	81	2.9	19	2.1	2	4.8	102	2.7
Non-EU/EEA								
Wasting syndrome due to HIV	293	15.4	172	18.8	20	18.2	485	16.6
<i>Mycobacterium tuberculosis</i> ; pulmonary in an adult or an adolescent (aged 13 years or over)	250	13.2	88	9.6	11	10.0	349	11.9
Candidiasis; oesophageal	178	9.4	96	10.5	7	6.4	281	9.6
<i>Mycobacterium tuberculosis</i> ; extrapulmonary	142	7.5	51	5.6	6	5.5	199	6.8
<i>Pneumocystis carinii</i> pneumonia	123	6.5	59	6.4	12	10.9	194	6.6
Encephalopathy; HIV-related	76	4.0	35	3.8	4	3.6	115	3.9
Pneumonia; recurrent in an adult or an adolescent (aged 13 years or over)	62	3.3	18	2.0	3	2.7	83	2.8
Kaposi's sarcoma	53	2.8	11	1.2	1	0.9	65	2.2
Toxoplasmosis of brain in a patient over 1 month of age	26	1.4	16	1.7	1	0.9	43	1.5
Herpes simplex: chronic ulcer(s) (over one month's duration); or bronchitis, pneumonitis or oesophagitis in a patient over 1 month of age	28	1.5	8	0.9	3	2.7	39	1.3
West								
<i>Pneumocystis carinii</i> pneumonia	506	24.1	157	22.4	2	28.6	665	23.7
Candidiasis; oesophageal	242	11.5	67	9.6	0	0.0	309	11.0
Kaposi's sarcoma	210	10.0	30	4.3	0	0.0	240	8.5
Wasting syndrome due to HIV	171	8.1	46	6.6	0	0.0	217	7.7
<i>Mycobacterium tuberculosis</i> ; pulmonary in an adult or an adolescent (aged 13 years or over)	132	6.3	55	7.8	2	28.6	189	6.7
Cytomegalovirus disease (other than liver, spleen or nodes) in a patient over 1 month of age	130	6.2	52	7.4	2	28.6	184	6.5
<i>Mycobacterium tuberculosis</i> ; extrapulmonary	116	5.5	52	7.4	0	0.0	168	6.0
Toxoplasmosis of brain in a patient over 1 month of age	101	4.8	64	9.1	1	14.3	166	5.9
Progressive multifocal leukoencephalopathy	61	2.9	15	2.1	0	0.0	76	2.7
Encephalopathy; HIV-related	55	2.6	20	2.9	0	0.0	75	2.7
Centre								
Wasting syndrome due to HIV	158	18.4	48	22.4	10	26.3	216	19.4
<i>Pneumocystis carinii</i> pneumonia	117	13.6	29	13.6	2	5.3	148	13.3
<i>Mycobacterium tuberculosis</i> ; pulmonary in an adult or an adolescent (aged 13 years or over)	109	12.7	18	8.4	1	2.6	128	11.5
Candidiasis; oesophageal	86	10.0	20	9.3	2	5.3	108	9.7
Encephalopathy; HIV-related	51	5.9	20	9.3	8	21.1	79	7.1
Pneumonia; recurrent in an adult or an adolescent (aged 13 years or over)	38	4.4	8	3.7	4	10.5	50	4.5
Kaposi's sarcoma	47	5.5	3	1.4	0	0.0	50	4.5
<i>Mycobacterium tuberculosis</i> ; extrapulmonary	28	3.3	7	3.3	0	0.0	35	3.1
Cytomegalovirus disease (other than liver, spleen or nodes) in a patient over 1 month of age	22	2.6	5	2.3	3	7.9	30	2.7
Lymphoma(s); not specified	17	2.0	7	3.3	2	5.3	26	2.3
East								
Wasting syndrome due to HIV	287	16.2	167	18.1	20	18.7	474	16.9
<i>Mycobacterium tuberculosis</i> ; pulmonary in an adult or an adolescent (aged 13 years or over)	262	14.8	93	10.1	11	10.3	366	13.0
Candidiasis; oesophageal	146	8.2	97	10.5	7	6.5	250	8.9
<i>Mycobacterium tuberculosis</i> ; extrapulmonary	136	7.7	48	5.2	6	5.6	190	6.8
<i>Pneumocystis carinii</i> pneumonia	100	5.6	68	7.4	11	10.3	179	6.4
Encephalopathy; HIV-related	69	3.9	33	3.6	4	3.7	106	3.8
Pneumonia; recurrent in an adult or an adolescent (aged 13 years or over)	47	2.6	16	1.7	2	1.9	65	2.3
Toxoplasmosis of brain in a patient over 1 month of age	42	2.4	18	2.0	1	0.9	61	2.2
Kaposi's sarcoma	33	1.9	8	0.9	1	0.9	42	1.5
Herpes simplex: chronic ulcer(s) (over one month's duration); or bronchitis, pneumonitis or oesophagitis in a patient over 1 month of age	13	0.7	10	1.1	4	3.7	27	1.0

^a Numbers and percentages relate to AIDS indicative disease events reported; some people diagnosed with AIDS have more than one event reported at the time of diagnosis.

Table 24. AIDS-related deaths,^a by geographic area, country and year of death (2008–2017) and cumulative totals in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area ^b	Year of diagnosis										Cumulative total ^c
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	17	11	21	19	13	15	15	14	15	12	1 169
West	Belgium	26	27	19	31	29	37	33	21	–	–	2 061
Centre	Bulgaria	9	2	14	17	16	14	13	8	9	10	183
Centre	Croatia	7	7	9	6	9	8	5	15	3	2	199
Centre	Cyprus	0	3	1	4	2	1	4	3	2	1	97
Centre	Czech Republic	14	12	9	14	15	12	14	10	17	13	259
West	Denmark	3	9	3	6	2	4	0	1	2	1	2 017
East	Estonia	8	0	2	7	5	2	2	2	2	4	116
West	Finland	6	6	10	6	13	8	5	6	5	9	231
West	France	232	178	209	172	155	132	121	99	116	91	36 684
West	Germany ^d	130	130	114	122	84	105	99	64	47	–	14 735
West	Greece	29	23	38	43	44	40	22	31	24	30	1 700
Centre	Hungary	4	9	10	12	9	7	15	11	11	8	388
West	Iceland	0	0	0	1	1	0	0	0	0	0	39
West	Ireland	3	5	5	4	1	0	0	1	1	1	417
West	Italy	704	649	599	595	598	647	572	531	0	0	42 835
East	Latvia	58	69	57	80	88	107	72	38	37	31	819
	Liechtenstein	0	0	0	0	0	0	0	0	0	0	6
East	Lithuania	13	13	10	7	8	13	10	7	23	4	166
West	Luxembourg	4	3	1	5	7	3	2	4	4	1	147
West	Malta	0	0	0	1	2	0	1	1	3	0	65
West	Netherlands	57	61	46	56	41	39	38	50	79	64	1 255
West	Norway	3	3	0	1	1	2	3	2	0	2	632
Centre	Poland	69	43	48	66	52	40	32	33	24	17	1 329
West	Portugal	347	326	337	302	254	268	197	165	178	134	10 550
Centre	Romania	144	120	134	215	187	199	237	195	187	170	4 561
Centre	Slovakia	0	2	1	1	3	0	0	4	2	1	46
Centre	Slovenia	6	1	1	1	2	7	4	5	3	1	104
West	Spain	860	541	454	425	364	307	227	172	164	87	48 806
West	Sweden	–	–	–	–	–	–	–	–	–	–	1 323
West	United Kingdom	254	214	253	129	132	160	144	108	86	78	15 795
	Total EU/EEA	3 007	2 467	2 405	2 348	2 137	2 177	1 887	1 601	1 044	772	188 638
Non-EU/EEA												
Centre	Albania	3	13	11	11	12	10	13	12	12	4	162
West	Andorra	1	0	0	0	0	0	0	3	0	0	4
East	Armenia	31	39	23	26	36	45	50	62	53	74	521
East	Azerbaijan	43	27	45	43	49	37	50	36	29	18	630
East	Belarus	177	151	146	158	188	129	169	125	118	67	1 921
Centre	Bosnia and Herzegovina	0	1	0	0	0	2	1	4	2	0	64
East	Georgia	55	42	59	82	64	63	48	52	107	80	869
West	Israel	23	17	18	31	30	31	32	23	20	11	768
East	Kazakhstan	135	135	190	199	171	173	144	164	186	209	2 230
East	Kyrgyzstan	15	21	26	19	19	6	8	38	13	27	275
West	Monaco	0	0	0	0	0	0	0	0	0	0	18
Centre	Montenegro	1	2	4	2	1	1	2	6	1	3	51
East	Republic of Moldova	65	54	72	127	11	23	38	45	55	50	854
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0	0	0	0	0	0	0	0	0	8
Centre	Serbia	23	21	25	29	21	18	9	13	13	14	1 155
Centre	Serbia excluding Kosovo ^e	21	21	25	27	17	17	9	12	10	14	1 110
Centre	Kosovo ^e	2	0	0	2	4	1	0	1	3	0	45
West	Switzerland	34	41	23	13	3	4	5	5	1	2	5 900
East	Tajikistan	27	26	41	52	77	95	77	93	103	135	752
Centre	The former Yugoslav Republic of Macedonia	1	0	1	4	0	3	0	0	0	2	66
Centre	Turkey	0	0	0	0	0	10	11	4	4	4	107
East	Turkmenistan	0	0	0	0	0	–	–	–	–	–	1
East	Ukraine	2 710	2 591	3 096	3 736	3 870	3 514	3 426	3 032	3 253	3 298	45 008
East	Uzbekistan	124	40	66	–	–	–	–	–	–	–	323
	Total non-EU/EEA	3 468	3 221	3 846	4 532	4 552	4 164	4 083	3 717	3 970	3 998	61 672
WHO European Region												
	West	2 733	2 244	2 150	1 962	1 774	1 802	1 516	1 301	745	529	187 063
	Centre	281	236	268	382	329	332	360	323	290	250	8 771
	East	3 461	3 208	3 833	4 536	4 586	4 207	4 094	3 694	3 979	3 997	54 485
	Total WHO European Region	6 475	5 688	6 251	6 880	6 689	6 341	5 970	5 318	5 014	4 776	250 319

^a This table includes deaths reported as due to AIDS and excludes deaths reported as not due to AIDS-related cases. In countries and years for which cause of death (AIDS or non-AIDS related) was unknown or could not be reported, deaths among people (ever) diagnosed with AIDS were included.

^b Country-specific comments are in Annex 5.

^c Cumulative total is the total number of cases reported by country since the start of reporting.

^d Due to technical problems no data export for 2017 from Germany was available.

^e (in accordance with Security Council resolution 1244 (1999)).

Table 25. AIDS-related deaths,^a by sex, transmission mode and year of death (2008–2017) and cumulative totals^b**Table 25a. EU/EEA and non-EU/EEA countries**

Transmission mode	2008			2009			2010			2011		
	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c
EU/EEA												
Men who have sex with men		326	326		273	273		318	318		296	296
Injecting drug use	178	729	907	107	509	616	91	440	531	97	401	498
Heterosexual contact	238	385	623	228	317	545	212	368	580	200	348	548
Mother-to-child	5	7	12	4	3	7	10		10	4	8	12
Haemophilic/transfusion recipient	7	26	33	4	10	14	4	18	22	8	14	22
Nosocomial infection	18	21	39	14	21	35	13	21	34	28	19	47
Other/undetermined	62	145	207	52	119	171	42	136	178	63	114	177
Total EU/EEA	508	1 639	2 147	409	1 252	1 661	372	1 301	1 673	400	1 200	1 600
Non-EU/EEA												
Men who have sex with men		22	22		22	22		21	21		18	18
Injecting drug use	55	286	342	51	257	308	49	316	365	44	333	377
Heterosexual contact	103	141	244	110	120	230	133	134	267	163	199	362
Mother-to-child	4	4	8	3	2	5	2	3	5	3	8	11
Haemophilic/transfusion recipient		1	1			0	1	1	2			0
Nosocomial infection			0	1	1	2			0			0
Other/undetermined	3	14	17	7	16	23	9	15	24	10	18	28
Total non-EU/EEA	165	468	634	172	418	590	194	490	684	220	576	796
Total WHO European Region	673	2 107	2 781	581	1 670	2 251	566	1 791	2 357	620	1 776	2 396

Transmission mode	2016			2017			Cumulative total ^d			
	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Unkown	Total
EU/EEA										
Men who have sex with men		208	208		173	174	0	40 029	4	34 361
Injecting drug use	51	219	270	38	149	187	9 298	39 678	0	46 300
Heterosexual contact	130	240	370	110	187	297	9 675	14 572	2	23 103
Mother-to-child	2	2	4	1	4	5	539	620	3	999
Haemophilic/transfusion recipient	7	4	11	3	4	7	1 262	3 315	0	3 541
Nosocomial infection	10	15	25	12	8	20	660	958	0	1 604
Other/undetermined	17	92	109	18	64	82	1 516	5 688	1	6 872
Total EU/EEA	217	780	997	182	589	772	22 950	104 860	10	116 780
Non-EU/EEA										
Men who have sex with men		16	16		21	21	0	2 534	0	2 154
Injecting drug use	25	237	262	38	234	272	1 546	6 074	1	7 349
Heterosexual contact	164	223	387	148	211	359	2 210	2 899	0	5 016
Mother-to-child	4	1	5	2	3	5	99	94	1	181
Haemophilic/transfusion recipient	1	1	2			0	62	187	0	202
Nosocomial infection		2	2		1	1	5	12	0	17
Other/undetermined	15	28	43	16	24	40	166	457	1	594
Total non-EU/EEA	209	508	717	204	494	698	4 088	12 257	3	15 513
Total WHO European Region	426	1 288	1 714	386	1 083	1 470	27 038	117 111	13	132 287

^a This table includes deaths reported as due to AIDS and excludes deaths reported as not due to AIDS-related cases. In countries and years for which cause of death (AIDS or non-AIDS related) was unknown or could not be reported, deaths among people (ever) diagnosed with AIDS were included.

^b Data from Belgium, Germany, Italy, Russian Federation, Sweden, Turkmenistan, Ukraine and Uzbekistan excluded due to inconsistent reporting or lack of data on deaths by transmission mode during the period. Therefore, totals by gender and overall differ from totals presented in Table 24.

^c Yearly totals include people diagnosed whose gender was unknown.

^d Cumulative total is the total number of cases reported by the country since the start of reporting.

	2012			2013			2014			2015			Transmission mode
	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c	
		257	258		242	242		221	222		206	207	EU/EEA
	98	356	454	82	355	437	56	287	343	60	201	261	Men who have sex with men
	169	296	465	184	307	491	167	257	425	125	237	362	Injecting drug use
	4	5	9	5	4	9	2	2	4	5	1	6	Heterosexual contact
	8	19	27	8	14	22	7	14	21	6	8	14	Mother-to-child
	25	21	46	18	16	34	16	22	38	12	22	34	Haemophilic/transfusion recipient
	40	127	167	54	99	153	31	99	130	22	79	101	Nosocomial infection
	344	1081	1426	351	1037	1388	279	902	1183	230	754	985	Other/undetermined
													Total EU/EEA
		19	19		22	22		26	26		18	18	Non-EU/EEA
	33	326	359	36	271	307	25	241	266	39	268	307	Men who have sex with men
	128	154	282	104	165	269	134	191	325	126	183	309	Injecting drug use
	5	3	8	7	5	12	3	2	5	4	1	5	Heterosexual contact
			0			0			0			0	Mother-to-child
			0			0	1	1	2		3	3	Haemophilic/transfusion recipient
	1	13	14	12	28	40	12	21	33	13	30	43	Nosocomial infection
	167	515	682	159	491	650	175	482	657	182	503	685	Other/undetermined
	511	1596	2108	510	1528	2038	454	1384	1840	412	1257	1670	Total non-EU/EEA
													Total WHO European Region

Table 25. AIDS-related deaths,^a by sex, transmission mode and year of death (2008–2017) and cumulative totals^b**Table 25b. West, Centre, East of the WHO European Region**

Transmission mode	2008			2009			2010			2011		
	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c
West												
Men who have sex with men		309	309		257	257		290	290		262	262
Injecting drug use	168	663	831	102	453	555	78	401	479	76	339	415
Heterosexual contact	218	354	572	216	286	502	194	319	513	154	269	423
Mother-to-child	5	5	10	3		3	5		5	2	3	5
Haemophilic/transfusion recipient	6	17	23	1	6	7	2	7	9	4	9	13
Nosocomial infection			0	1		1			0			0
Other/undetermined	31	97	128	26	87	113	23	99	122	23	73	96
Total West	428	1 445	1 873	349	1 089	1 438	302	1 116	1 418	259	955	1 214
Centre												
Men who have sex with men		33	33		36	36		46	46		45	45
Injecting drug use	8	36	44	5	25	30	8	20	28	13	37	50
Heterosexual contact	25	50	75	26	42	68	27	53	80	54	86	140
Mother-to-child	1	3	4	2	4	6	6		6	2	7	9
Haemophilic/transfusion recipient	1	10	11	3	4	7	3	12	15	4	5	9
Nosocomial infection	18	21	39	13	21	34	13	21	34	28	19	47
Other/undetermined	30	45	75	22	33	55	19	40	59	36	46	82
Total Centre	83	198	281	71	165	236	76	192	268	137	245	382
East												
Men who have sex with men		6	6		2	2		3	3		7	7
Injecting drug use	57	316	374	51	288	339	54	335	389	52	358	410
Heterosexual contact	98	122	220	96	109	205	124	130	254	155	192	347
Mother-to-child	3	3	6	2	1	3	1	3	4	3	6	9
Haemophilic/transfusion recipient			0			0			0			0
Nosocomial infection			0	1	1	2			0			0
Other/undetermined	4	17	21	11	15	26	9	12	21	14	13	27
Total East	162	464	627	161	416	577	188	483	671	224	576	800
Total WHO European Region	673	2 107	2 781	581	1 670	2 251	566	1 791	2 357	620	1 776	2 396

Transmission mode	2016			2017			Cumulative total ^d			
	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Unkown	Total
West										
Men who have sex with men		163	163		141	142	0	41 111	4	35 136
Injecting drug use	40	150	190	27	99	126	9 850	40 234	0	47 171
Heterosexual contact	98	177	275	71	131	202	9 567	14 169	2	22 543
Mother-to-child		2	2		2	2	512	544	3	866
Haemophilic/transfusion recipient	1	1	2	1		1	1 078	3 032	0	3 076
Nosocomial infection			0			0	7	6	0	12
Other/undetermined	11	55	66	8	42	50	1 067	5 037	1	5 756
Total West	150	548	698	107	415	523	22 081	104 133	10	114 580
Centre										
Men who have sex with men		50	50		39	39	0	1 305	0	1 232
Injecting drug use	12	50	62	12	41	53	304	1 180	0	1 450
Heterosexual contact	34	67	101	31	64	95	786	1 348	0	2 097
Mother-to-child	2		2	1	2	3	86	126	1	211
Haemophilic/transfusion recipient	6	3	9	2	4	6	244	466	0	661
Nosocomial infection	10	15	25	12	8	20	653	952	0	1 592
Other/undetermined	6	35	41	5	27	32	475	851	1	1 315
Total Centre	70	220	290	63	185	248	2 548	6 228	2	8 558
East										
Men who have sex with men		11	11		14	14	0	146	0	146
Injecting drug use	24	256	280	37	243	280	690	4 335	1	5 025
Heterosexual contact	162	219	381	156	203	359	1 532	1 952	0	3 477
Mother-to-child	4	1	5	2	3	5	40	44	0	83
Haemophilic/transfusion recipient	1	1	2			0	2	4	0	6
Nosocomial infection		2	2		1	1	5	12	0	17
Other/undetermined	15	30	45	21	19	40	140	257	0	395
Total East	206	520	726	216	483	699	2 409	6 750	1	9 149
Total WHO European Region	426	1 288	1 714	386	1 083	1 470	27 038	117 111	13	132 287

^a This table includes deaths reported as due to AIDS and excludes deaths reported as not due to AIDS-related cases. In countries and years for which cause of death (AIDS or non-AIDS related) was unknown or could not be reported, deaths among people (ever) diagnosed with AIDS were included.

^b Data from Belgium, Germany, Italy, Russian Federation, Sweden, Turkmenistan, Ukraine and Uzbekistan excluded due to inconsistent reporting or lack of data on deaths by transmission mode during the period. Therefore, totals by gender and overall differ from totals presented in Table 24.

^c Yearly totals include people diagnosed whose gender was unknown.

^d Cumulative total is the total number of cases reported by the country since the start of reporting.

	2012			2013			2014			2015			Transmission mode
	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c	Female	Male	Total ^c	
		232	233		215	215		191	192		165	166	West
	72	273	345	60	273	333	41	212	253	45	151	196	Men who have sex with men
	139	253	392	137	239	376	117	179	297	85	167	252	Injecting drug use
	3	2	5		1	1	1		1	1		1	Heterosexual contact
		7	7	4	6	10	1	5	6	4	4	8	Mother-to-child
			0			0			0			0	Haemophilic/transfusion recipient
	13	68	81	15	63	78	10	53	63	14	48	62	Nosocomial infection
	227	835	1 063	216	797	1 013	170	640	812	149	535	685	Other/undetermined
													Total West
		38	38		36	36		51	51		55	55	Centre
	17	46	63	11	43	54	8	50	58	12	47	59	Men who have sex with men
	24	52	76	37	78	115	52	78	130	42	83	125	Injecting drug use
	4	3	7	7	3	10	2	2	4	5	1	6	Heterosexual contact
	8	12	20	4	8	12	6	9	15	2	4	6	Mother-to-child
	25	21	46	18	16	34	16	22	38	12	22	34	Haemophilic/transfusion recipient
	24	55	79	32	39	71	20	44	64	6	32	38	Nosocomial infection
	102	227	329	109	223	332	104	256	360	79	244	323	Other/undetermined
													Total Centre
		6	6		13	13		5	5		4	4	East
	42	363	405	47	310	357	32	266	298	42	271	313	Men who have sex with men
	134	145	279	114	155	269	132	191	323	124	170	294	Injecting drug use
	2	3	5	5	5	10	2	2	4	3	1	4	Heterosexual contact
			0			0			0			0	Mother-to-child
			0			0	1	1	2		3	3	Haemophilic/transfusion recipient
	4	17	21	19	25	44	13	23	36	15	29	44	Nosocomial infection
	182	534	716	185	508	693	180	488	668	184	478	662	Other/undetermined
													Total East
	511	1 596	2 108	510	1 528	2 038	454	1 384	1 840	412	1 257	1 670	Total WHO European Region

Table 26. Number of HIV tests performed, excluding unlinked anonymous testing and testing of blood donations, by country and year (2008–2017) and number of tests per 1000 population in 2017, in EU/EEA and other countries of the WHO European Region

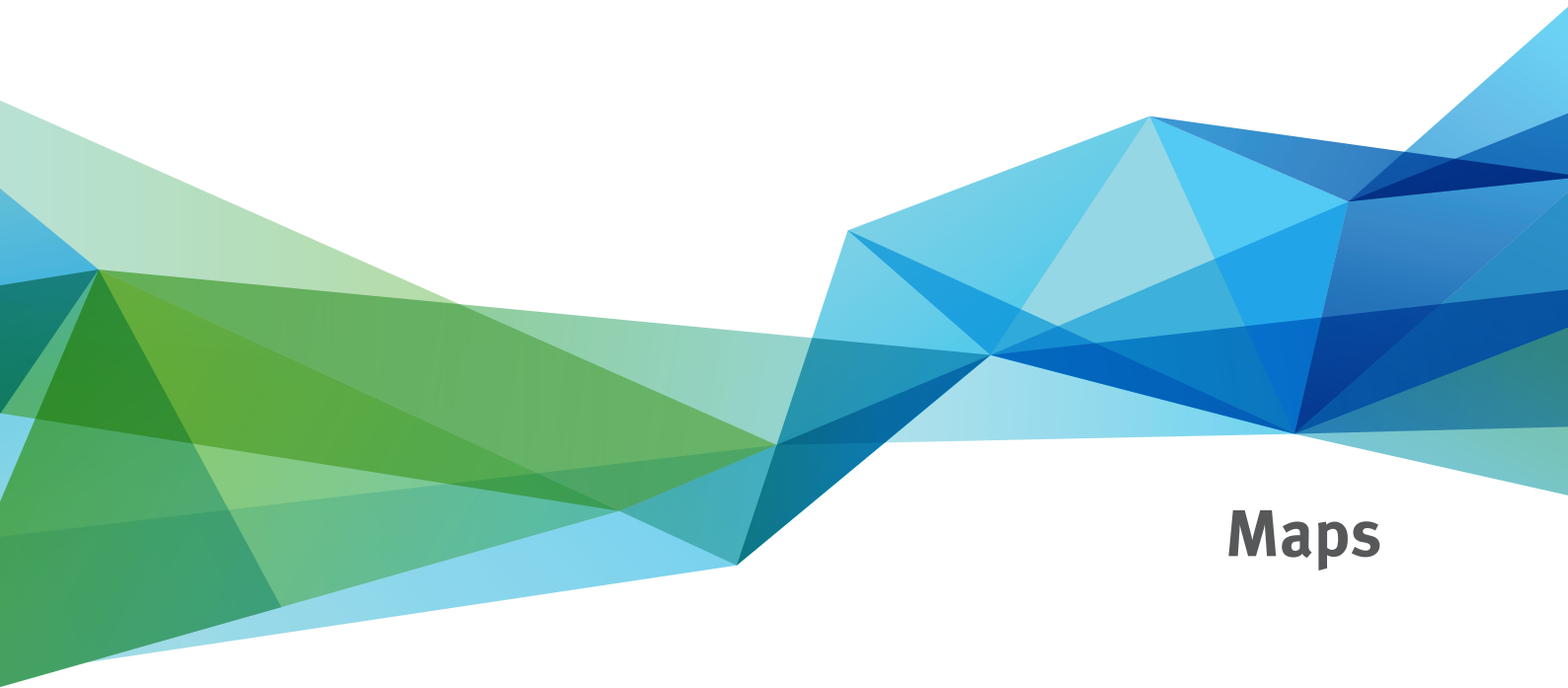
Area	Country, territory or area ^a	Number of HIV tests										Tests/1000 population
		2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	
EU/EEA												
West	Austria	751 749	–	–	–	–	–	–	–	–	–	–
West	Belgium	619 418	635 150	651 095	679 655	703 160	695 485	697 530	692 559	726 085	714 255	63.1
Centre	Bulgaria	110 000	140 000	160 000	180 000	190 000	210 000	230 000	290 000	320 000	–	–
Centre	Croatia	38 996	–	–	–	–	–	–	–	–	–	–
Centre	Cyprus	42 294	48 158	48 385	49 074	54 120	50 235	–	–	52 385	–	–
Centre	Czech Republic	342 223	347 135	353 507	334 569	349 205	341 583	349 448	345 274	350 234	351 650	33.3
West	Denmark	279 135	112 185	168 923	137 877	134 709	137 537	151 970	153 050	163 779	158 331	27.7
East	Estonia	74 357	78 735	78 054	85 025	73 367	82 279	82 266	87 587	90 136	102 863	78.2
West	Finland	186 822	190 380	–	–	–	–	–	–	–	–	–
West	France	5 051 821	5 023 833	5 009 580	5 213 049	5 242 541	5 218 563	5 253 834	5 370 787	5 430 106	5 604 096	83.9
West	Germany	–	–	–	–	–	–	–	–	–	–	–
West	Greece ^b	33 558	35 171	31 070	31 918	34 622	32 241	22 455	20 412	20 079	–	–
Centre	Hungary	83 408	91 181	89 137	84 464	93 060	95 861	93 289	91 793	–	–	–
West	Iceland	9 522	7 794	7 318	–	–	–	–	–	–	–	–
West	Ireland	–	184 980	180 055	184 521	175 488	150 597	168 028	178 267	192 956	223 609	47.3
West	Italy	–	–	–	–	–	–	–	–	–	–	–
East	Latvia	72 444	59 331	58 826	58 799	60 491	58 302	60 614	65 552	79 715	82 608	42.0
	Liechtenstein	–	–	–	–	–	–	–	–	–	–	–
East	Lithuania	162 381	100 799	178 554	102 234	101 042	102 161	108 781	105 486	104 132	113 917	39.4
West	Luxembourg	13 366	–	–	–	–	–	–	–	71 200	100 529	174.5
West	Malta	–	–	–	–	–	–	–	–	–	–	–
West	Netherlands	–	–	–	–	–	–	–	–	–	–	–
West	Norway	–	–	–	–	–	–	–	–	–	–	–
Centre	Poland	181 118	213 138	229 783	317 286	358 953	313 341	272 102	318 458	440 365	430 266	11.3
West	Portugal ^b	–	–	315 381	266 853	235 455	228 321	236 832	259 751	252 715	251 396	24.3
Centre	Romania	282 248	285 948	291 915	306 679	293 204	302 898	332 422	346 032	360 893	338 898	17.2
Centre	Slovakia	66 926	132 990	109 261	110 025	110 506	114 574	126 187	127 109	104 876	111 340	20.5
Centre	Slovenia	31 183	37 105	36 977	38 110	33 602	33 457	35 498	34 366	35 788	37 315	18.1
West	Spain	–	–	–	–	–	–	–	–	–	–	–
West	Sweden	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	–	–	–	–	–	–	–	–	–	–	–
Non-EU/EEA												
Centre	Albania	2 458	2 143	2 168	3 260	3 140	3 063	4 156	5 442	5 582	7 149	2.4
West	Andorra	–	2 810	2 678	2 590	2 062	2 310	2 378	2 212	2 340	2 591	33.7
East	Armenia	60 701	60 103	60 731	68 449	71 957	83 431	94 122	117 012	99 270	119 628	40.8
East	Azerbaijan	322 525	340 048	353 772	365 090	514 434	482 282	612 860	714 621	500 469	657 704	66.9
East	Belarus	430 175	459 032	517 625	621 780	683 125	770 136	1 157 072	1 249 712	1 464 386	1 514 635	160.0
Centre	Bosnia and Herzegovina	–	–	–	–	–	–	–	–	–	–	–
East	Georgia	18 792	17 562	25 370	21 799	15 562	18 091	86 290	78 261	119 868	207 175	53.0
West	Israel	271 641	278 887	286 995	274 294	233 516	–	–	–	–	–	–
East	Kazakhstan	1 643 938	1 758 026	1 786 289	1 897 476	2 026 174	2 127 136	2 190 757	2 388 347	2 587 065	2 742 741	150.7
East	Kyrgyzstan	268 134	325 855	297 959	381 295	470 355	370 160	410 331	376 284	331 609	376 431	62.3
West	Monaco	–	–	–	–	–	–	–	–	–	–	–
Centre	Montenegro	4 229	5 812	6 492	6 914	6 781	6 970	6 571	6 607	6 324	5 606	8.9
East	Republic of Moldova	355 711	204 702	207 018	207 830	212 964	146 105	133 476	146 762	124 010	160 947	39.7
East	Russian Federation ^c	–	–	25 209 546	–	–	–	–	–	–	–	–
West	San Marino	3 825	4 181	5 090	3 961	3 845	4 004	3 427	1 548	3 600	3 685	110.3
Centre	Serbia	44 806	48 729	52 868	57 275	65 366	67 079	56 282	63 189	68 426	80 918	–
Centre	Serbia excluding Kosovo ^d	44 555	47 734	51 727	56 086	64 031	65 829	56 282	61 877	65 827	76 367	10.9
Centre	Kosovo ^d	251	995	1 141	1 189	1 335	1 250	–	1 312	2 599	4 551	2.6
West	Switzerland	–	–	–	–	–	–	–	–	–	–	–
East	Tajikistan	129 330	214 207	280 281	438 532	447 636	514 701	634 791	597 426	509 092	612 123	68.6
Centre	The former Yugoslav Republic of Macedonia	10 426	11 842	18 721	17 811	18 105	24 562	27 430	28 601	30 211	36 248	17.4
Centre	Turkey	5 045 319	4 475 874	5 010 334	5 693 965	5 952 148	6 515 931	6 663 547	7 203 959	6 263 020	7 107 551	88.0
East	Turkmenistan	–	–	–	–	–	–	–	–	–	–	–
East	Ukraine	2 280 442	2 347 084	2 319 946	2 392 970	2 343 099	2 941 748	1 853 626	1 695 926	1 697 479	1 816 023	42.8
East	Uzbekistan	796 371	987 464	1 506 724	–	–	–	–	–	–	–	–

^a Country-specific comments are in Annex 5.

^b HIV tests in Greece refer only to those performed in reference centres and do not include all tests carried out in public hospitals or private laboratories. Number of tests in Portugal refer only to those requested at public primary health-care centres and do not include those requested in hospitals and private sector.

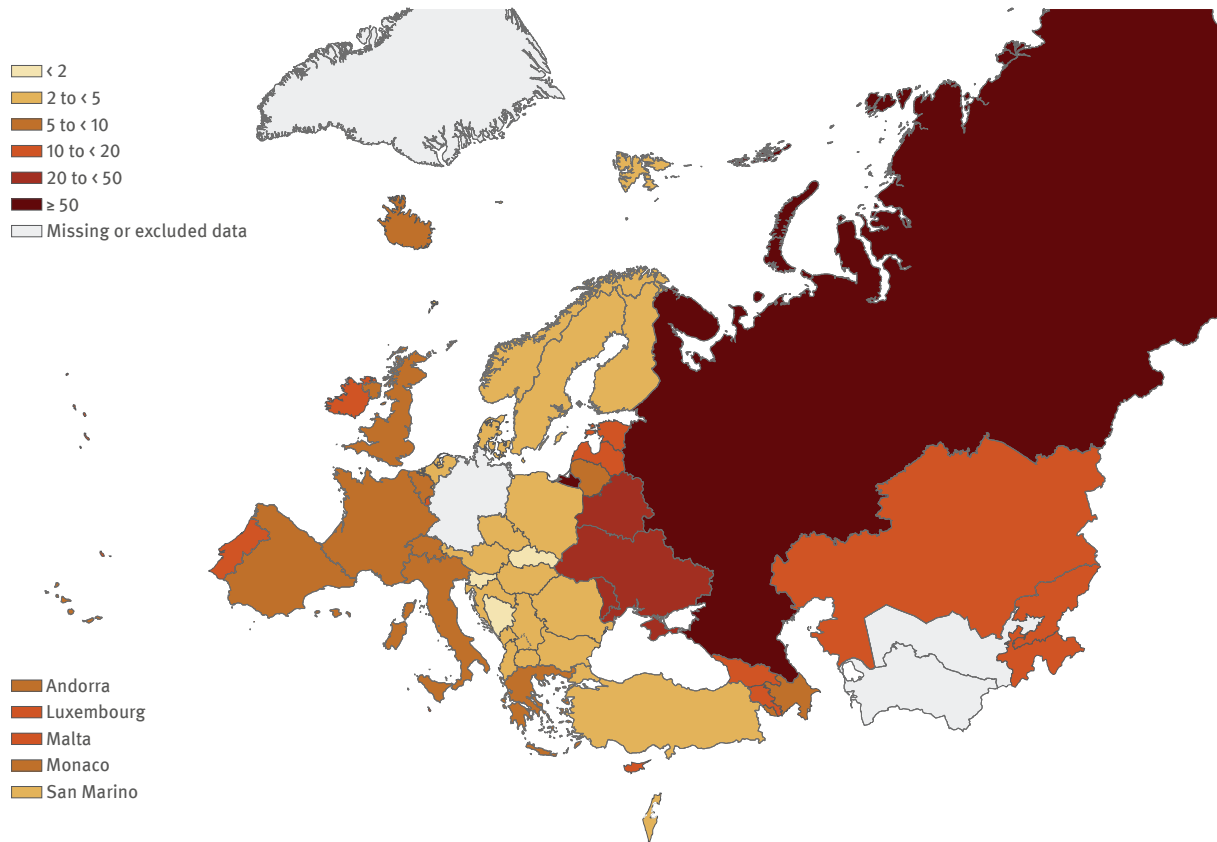
^c Number of HIV tests in the Russian Federation: 23 711 866 (2008), 25 509 617 (2009), 25 071 010 (2010), 24 734 075 (2011), 26 037 319 (2012), 26 826 067 (2013), 27 982 810 (2014), 28 336 911 (2015), 30 752 828 (2016), 33 870 850 (2017). Sources: Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS. Information notes "Spravka" on HIV infection in the Russian Federation as of 31 December 2016 and 2017 and HIV-infection Bulletin number 41.

^d (in accordance with Security Council resolution 1244 (1999)).



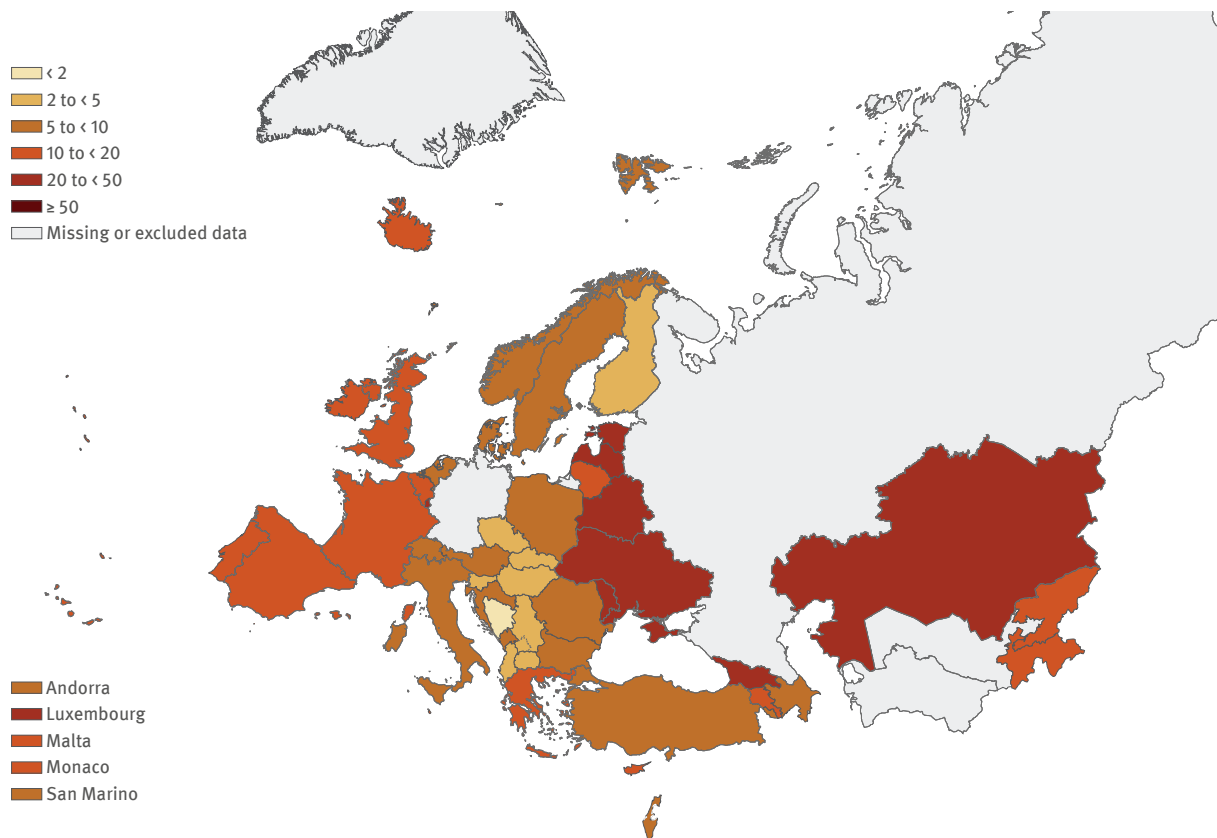
Maps

Map 1. New HIV diagnoses per 100 000 population, 2017

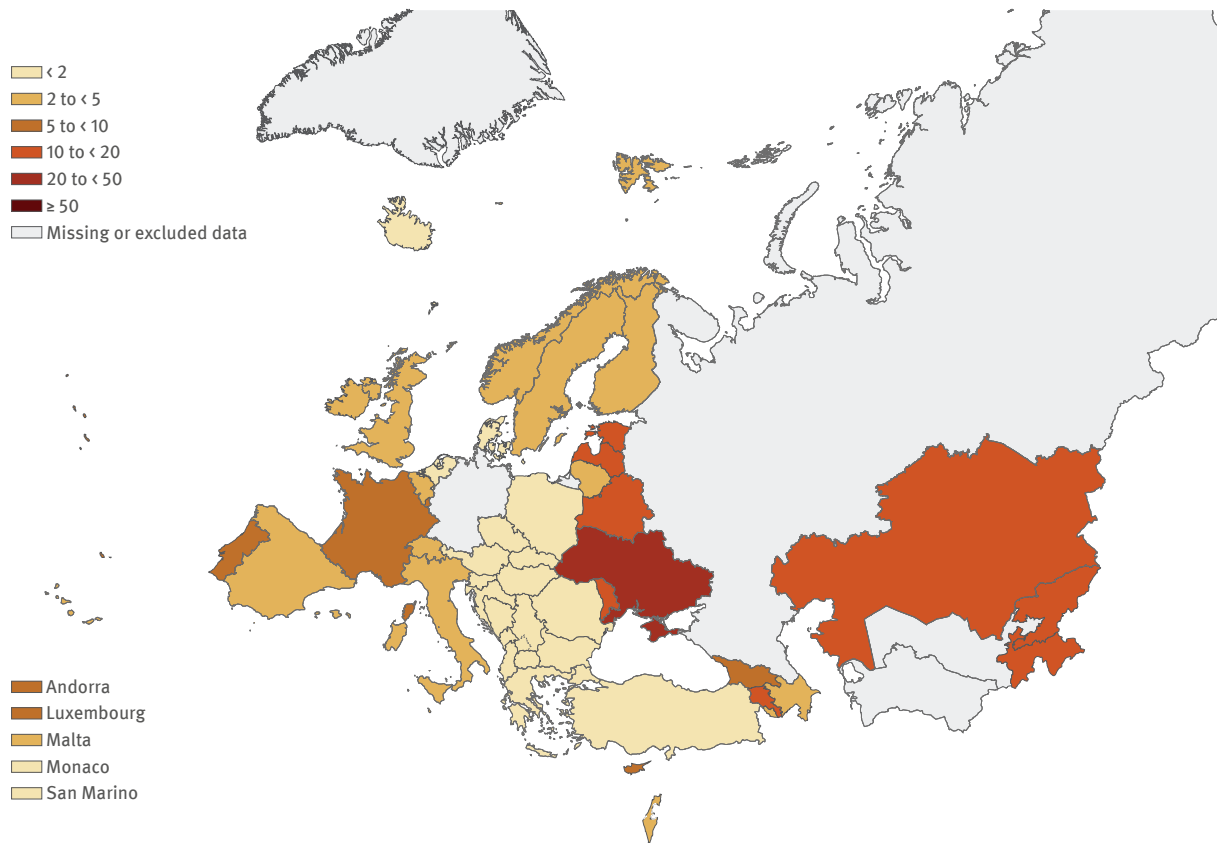


Note: all data presented were reported to ECDC/WHO through the European Surveillance System (TESSy), except for data for the Russian Federation (source for data from the Russian Federation: Information note "Spravka" on HIV infection in the Russian Federation as of 31 December 2017. Moscow: Russian Federal Scientific and Methodological Centre for Prevention and Control of AIDS; 2018).

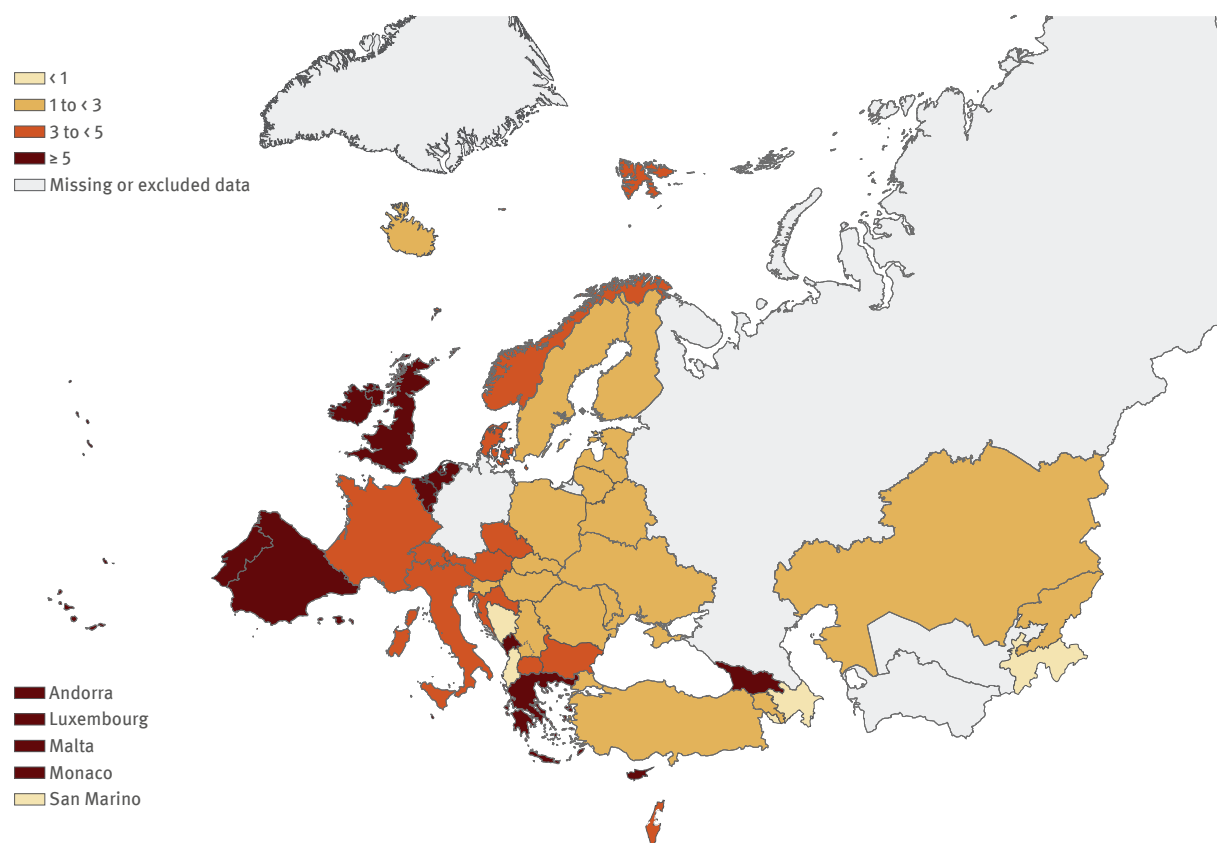
Map 2. New HIV diagnoses in men per 100 000 male population, 2017



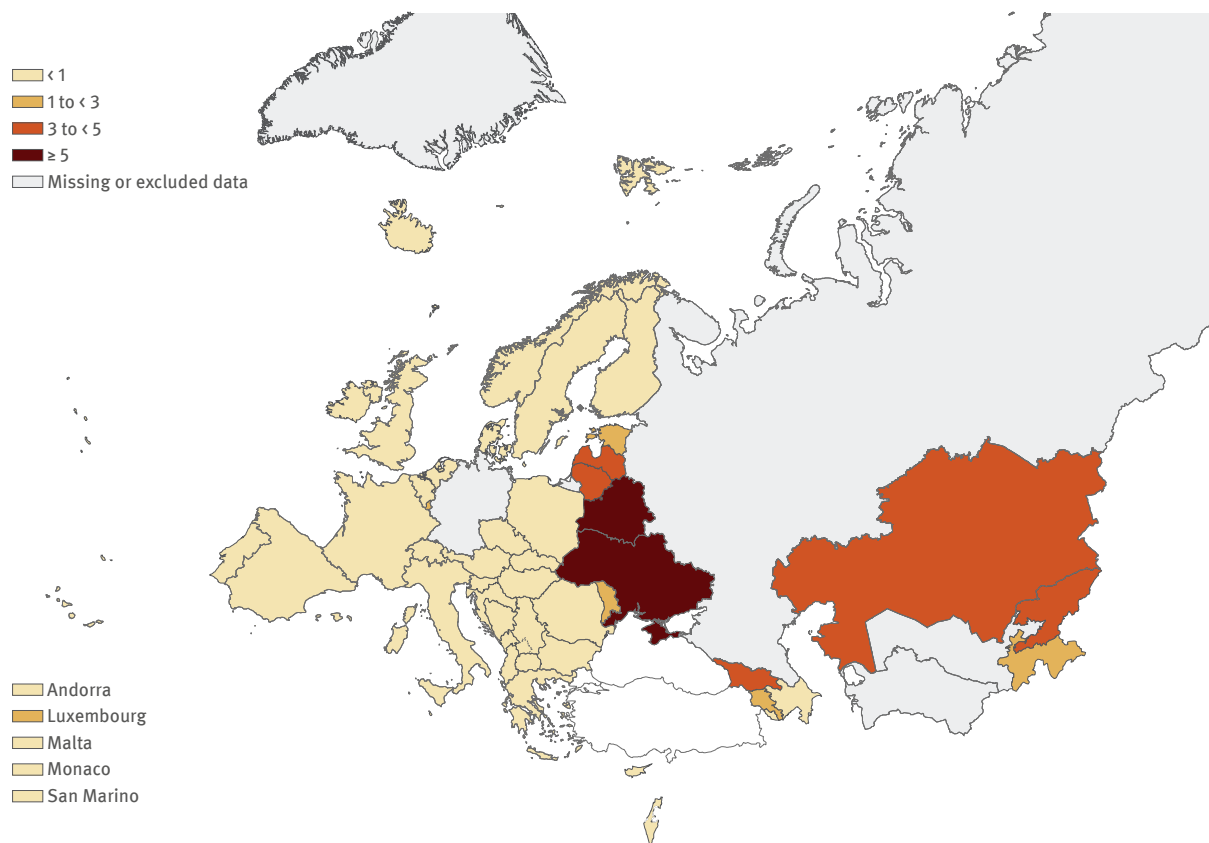
Map 3. New HIV diagnoses in women per 100 000 female population, 2017



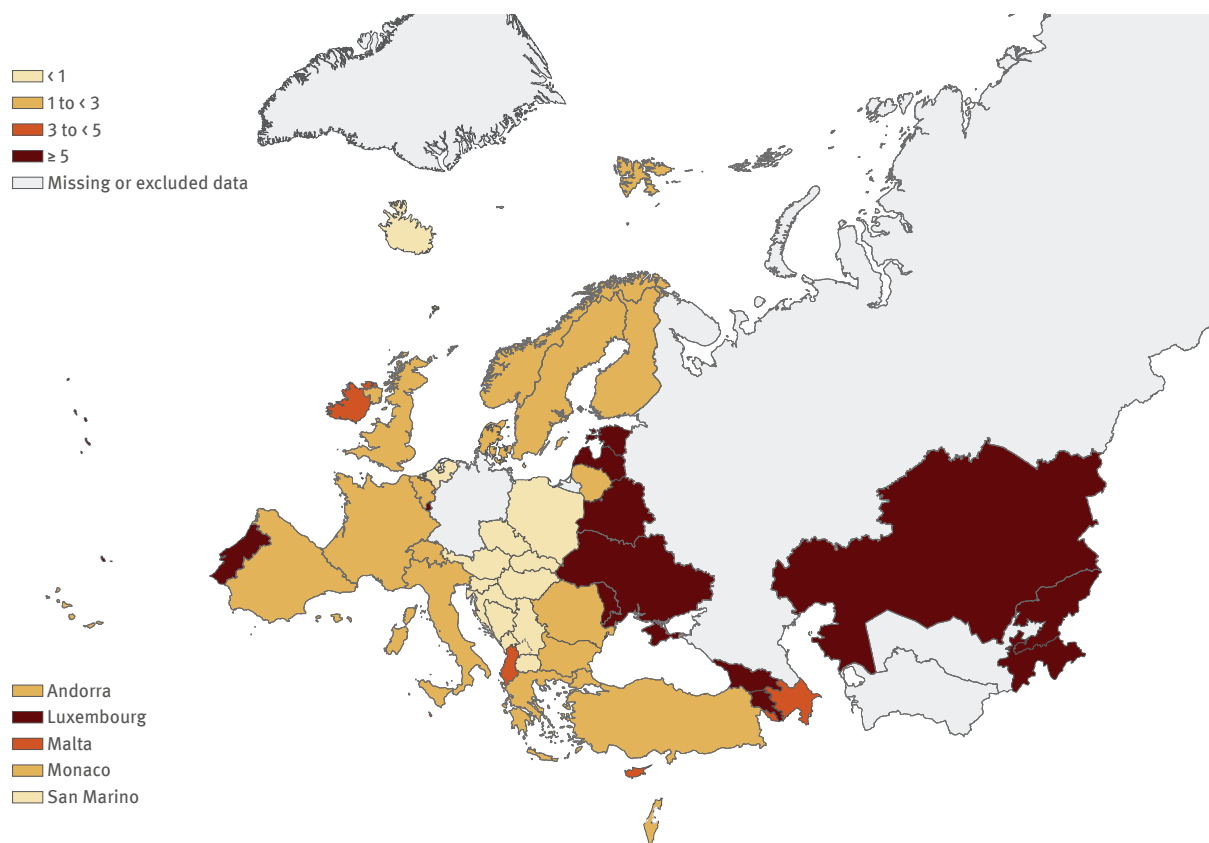
Map 4. New HIV diagnoses in men who have sex with men per 100 000 male population, 2017



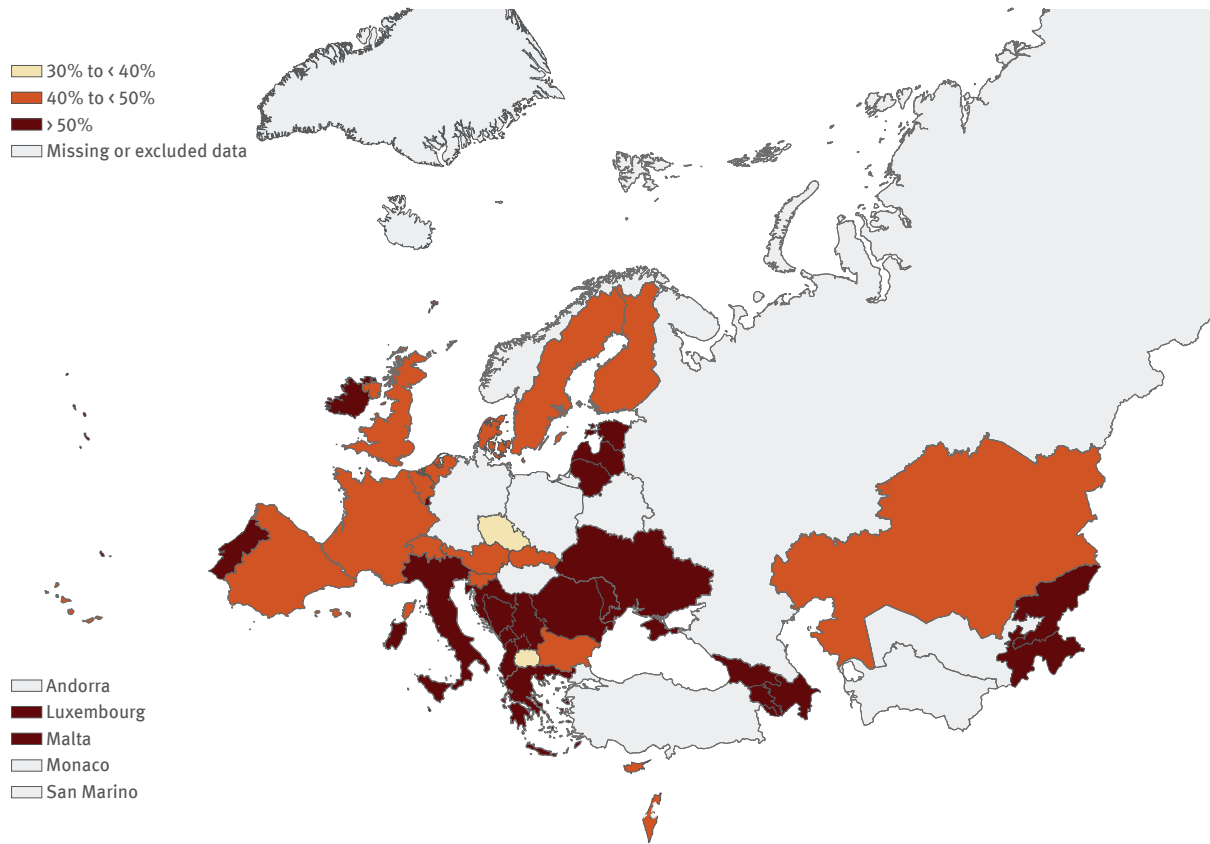
Map 5. New HIV diagnoses acquired through injecting drug use per 100 000 population, 2017



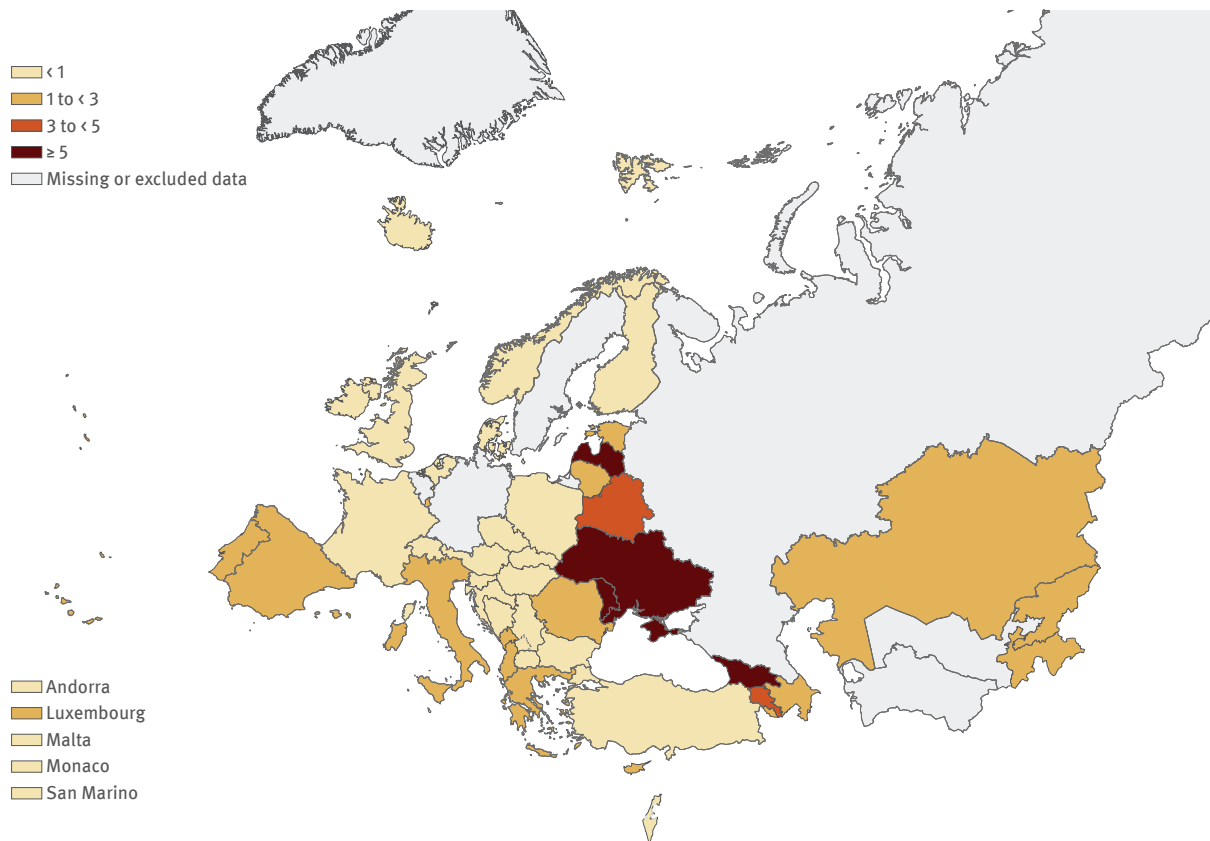
Map 6. New HIV diagnoses acquired through heterosexual transmission per 100 000 population, 2017

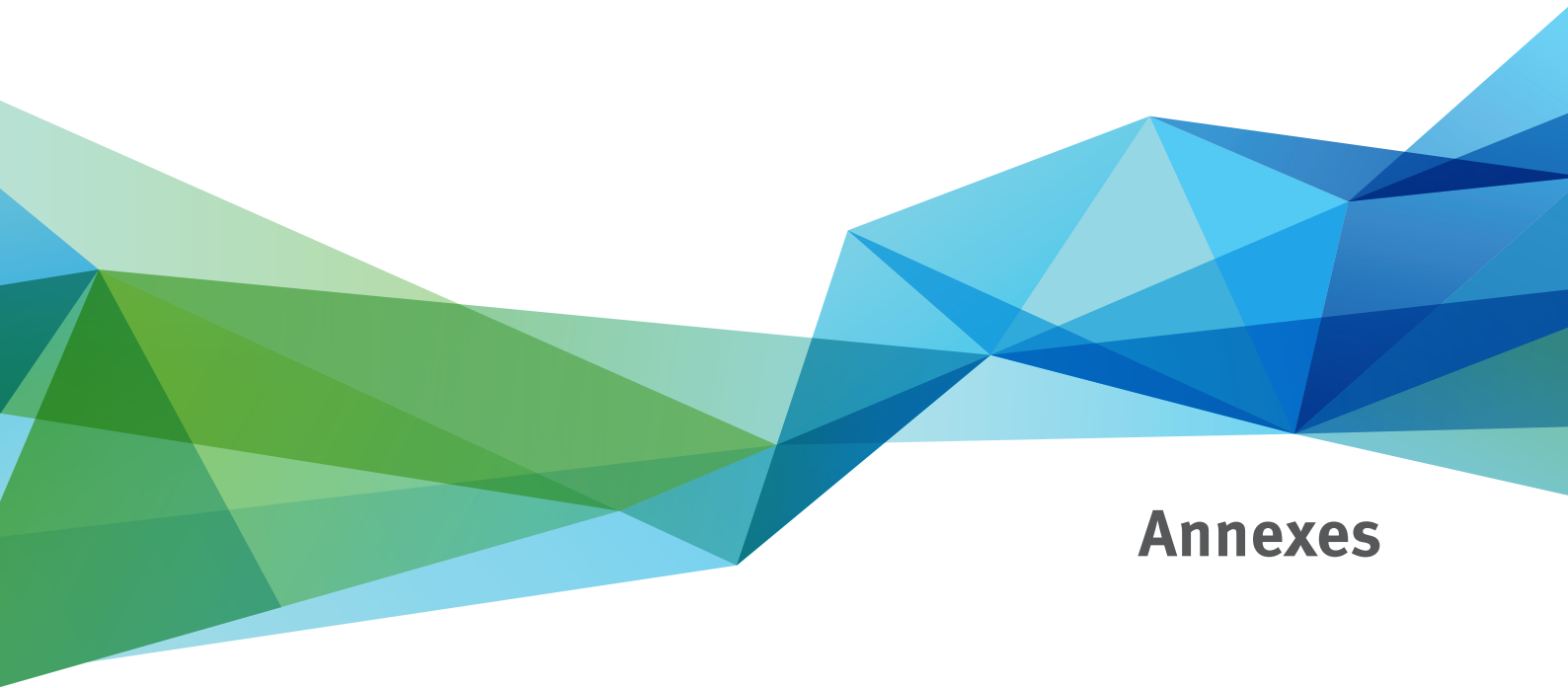


Map 7. Percentage of adult (> 14 years) HIV diagnoses with CD4 < 350 cells/mm³ at diagnosis, 2017



Map 8. AIDS diagnoses reported per 100 000 population, 2017





Annexes

Annex 1. Framework for data collection, validation and presentation

Reporting

The Member States' Coordinating Competent Bodies in European Union (EU) and European Economic Area (EEA) (jointly referred to as EU/EEA) countries have nominated national operational contact points for HIV/AIDS surveillance to work on reporting surveillance data to the joint European Centre for Disease Prevention and Control (ECDC) and World Health Organization (WHO) Regional Office for Europe database for HIV/AIDS surveillance. For non-EU/EEA countries, nominations for national HIV/AIDS surveillance focal points were received directly by the WHO Regional Office for Europe via the respective ministries of health.

Data are submitted directly by reporting countries through a web-based platform to a joint database known as The European Surveillance System (TESSy). Four types of data are collected: HIV (case-based and aggregate), AIDS (case-based and aggregate), HIVAIDS (case-based data that link HIV and AIDS diagnoses) and number of HIV tests performed (aggregate). AIDS-related deaths are reported as part of case-based AIDS or HIVAIDS data. All new HIV diagnoses, irrespective of whether the case is diagnosed simultaneously with AIDS and reported as a new AIDS diagnosis, are classified as HIV cases.

Implementation of WHO and EU case definitions for HIV and AIDS surveillance means that only confirmed cases are reported at European level (1,2). It is recognized that the HIV and AIDS case definitions currently used in a number of countries may differ across the WHO European Region, but the EU and WHO case definitions are compatible for surveillance purposes. A built-in set of validation rules ensures verification of the data within the database during the data-uploading process, improving data quality and allowing each country to test their datasets prior to submission. Further validation checks are carried out by ECDC and the WHO Regional Office in collaboration with the countries before the data are considered of sufficient quality to be used for analysis.

The Russian Federation, Turkmenistan and Uzbekistan did not report any HIV data through this system for 2017, and Germany's 2017 data were delayed and not included due to a temporary data-extraction issue. HIV data for the Russian Federation were obtained through publicly available national sources, on the assumption that the data have been validated to the same standard as for the other countries, and then incorporated with the data reported by other countries to the extent possible to enable a more complete presentation of the epidemiology of HIV and AIDS in the WHO European Region (that is, for the overall number, rate and trend of HIV diagnoses in the European Region and the East and for new diagnoses by mode of transmission, as described within

the text). Germany, Belgium, the Russian Federation, Sweden, Turkmenistan and Uzbekistan did not report any AIDS data for 2017 (or prior years for some of the countries, see Table 15).

Completeness of key variables is presented for the EU/EEA and the WHO European Region as a whole in Annex 2 and by country in Annex 3.

Surveillance systems – data sources

To describe the national source of data and specify the national surveillance system from which the reported data originate, information on the country data source is included as a compulsory part of reporting; this is detailed in Annex 4a and 4b. Some cross-country data comparisons are hampered by differences in surveillance systems as the quality and coverage of national surveillance differ for some years of reporting. Particularly in the early part of the period covered in this report (2008–2017), some countries did not have national HIV/AIDS data. These issues are detailed in Annex 5 and should be taken into account when interpreting and comparing trends across countries.

Data collection and validation

Data collection 2017

The 2017 data submission for HIV and AIDS surveillance took place between 15 March and 3 October 2018. Data presented in this report were extracted from the joint database on 4 October 2018.

Individual country datasets

Data were uploaded, validated and approved in the joint database for HIV/AIDS surveillance by the reporting countries. Once the data were submitted, individual datasets were reviewed by ECDC and the Regional Office and validated by countries. The HIVAIDS record type was used for the first time in 2014 to collect case-based joined HIV and AIDS data (Annex 4a and 4b). Forty-one countries used the joined record type for combined HIVAIDS 2017 reporting, and an additional two used it for HIV-only reporting, an increase on the 33 countries that used it when first implemented in 2014. Of the 41, 28 uploaded all historical data in the new format, allowing for retrospective updates of missing variables or de-duplication of cases. Three countries (Italy, Spain and Switzerland) uploaded all historical data in the older separate HIV and AIDS formats while the rest uploaded only 2017 data, or data for a few years, in either the old separate HIV and AIDS formats or new record type. One country (San Marino) reported aggregated HIV data. Ukraine reported aggregated AIDS data, while all other countries reported case-based AIDS data.

Reporting of aggregated HIV and AIDS data has an impact on the data presentation and analysis and the epidemiological overview of HIV/AIDS in Europe because fewer variables are available from the aggregated datasets, reducing the amount of data that can be presented in certain tables and figures.

Data re-coding and adjustments

Dates used for data presentation

HIV and AIDS data are presented in this report by date of diagnosis. If countries could not provide this date or preferred to present their data by the date of statistics to avoid discrepancies with their national surveillance reports, this date was used instead. This was the case for eight countries: Azerbaijan, Belarus, Georgia, Kazakhstan, Kyrgyzstan, Turkey, Tajikistan and Ukraine.

Region of origin

Where available, countries were encouraged to provide data on the specific country of origin or nationality of the case. This information was used first and, if absent, the variable “region of origin” was used to group cases into region of origin, presented in Table 11 (stratified by reporting country) and Table 12 (all countries stratified by mode of transmission).

Origin of reported cases

Cases originating from countries outside of the reporting country, including those from outside of Europe or from countries with generalized HIV epidemics, are occasionally separated from other cases for the analyses presented here. This approach has been taken to inform epidemiological understanding and guide public health resource allocation and prevention efforts. To compare the impact of the epidemic on all transmission modes, cases reported as originating from regions or countries of sub-Saharan Africa were used as a proxy for countries with generalized HIV epidemics (in Tables 11, 12 and in selected figures). As most of the cases originating from sub-Saharan Africa were reported from west European countries within the EU/EEA, this information is presented in detail in Chapter 1.

Reporting delay

Reporting delays refer to the time delay between HIV/AIDS diagnosis and the report of this event at national level, identified by date of notification. Due to delays in reporting, HIV trends analysed at European level are often biased downwards for the most recent year (2017) and, to a lesser extent, for the two to three years prior to the reporting period. To provide a more precise picture of trends, surveillance data should be corrected to describe the trends in HIV diagnoses more accurately.

This report applies a statistical approach, as described by Heisterkamp et al. (3) and adapted by Rosinska et al. (4), to adjust the surveillance data for reporting delays. Annual reporting delay probabilities were estimated

using historical data from 2006 to 2016. Countries were excluded from reporting delay adjustment when:

- they showed an inconsistent and non-stationary pattern in their reporting delay distribution during the period 2008–2017; or
- they reported aggregated data during the period 2008–2017.

Adjusting for reporting delay can help to indicate HIV trends in recent years more precisely. Adjustments also provide insight into the timeliness of data collection and reporting from subnational to national and European levels.

Adjustment for reporting delays was applied to the graphs showing trends where noted. The list of countries with the number of reported diagnoses adjusted for reporting delay are presented in Annex 6.

Data presentation

Geographical presentation

Data are presented for the WHO European Region and the EU/EEA. The EU comprises 28 Member States and the EEA comprises an additional three countries (Iceland, Liechtenstein and Norway) which are included in the overview of the EU/EEA.

The tables are presented for EU/EEA countries, non-EU/EEA countries and as totals. The 53 countries of the WHO European Region are also subdivided into three geographical areas, based on epidemiological considerations and in accordance with the division used in previous reports on HIV/AIDS surveillance in Europe: West (23 countries), Centre (15 countries) and East (15 countries) (Fig. A1.1). The division reflects similarities in epidemiological dynamics such as epidemic levels, trends over time and transmission patterns. Of the EU/EEA countries, 19 Member States are classified as being in the West, nine in the Centre and three in the East.

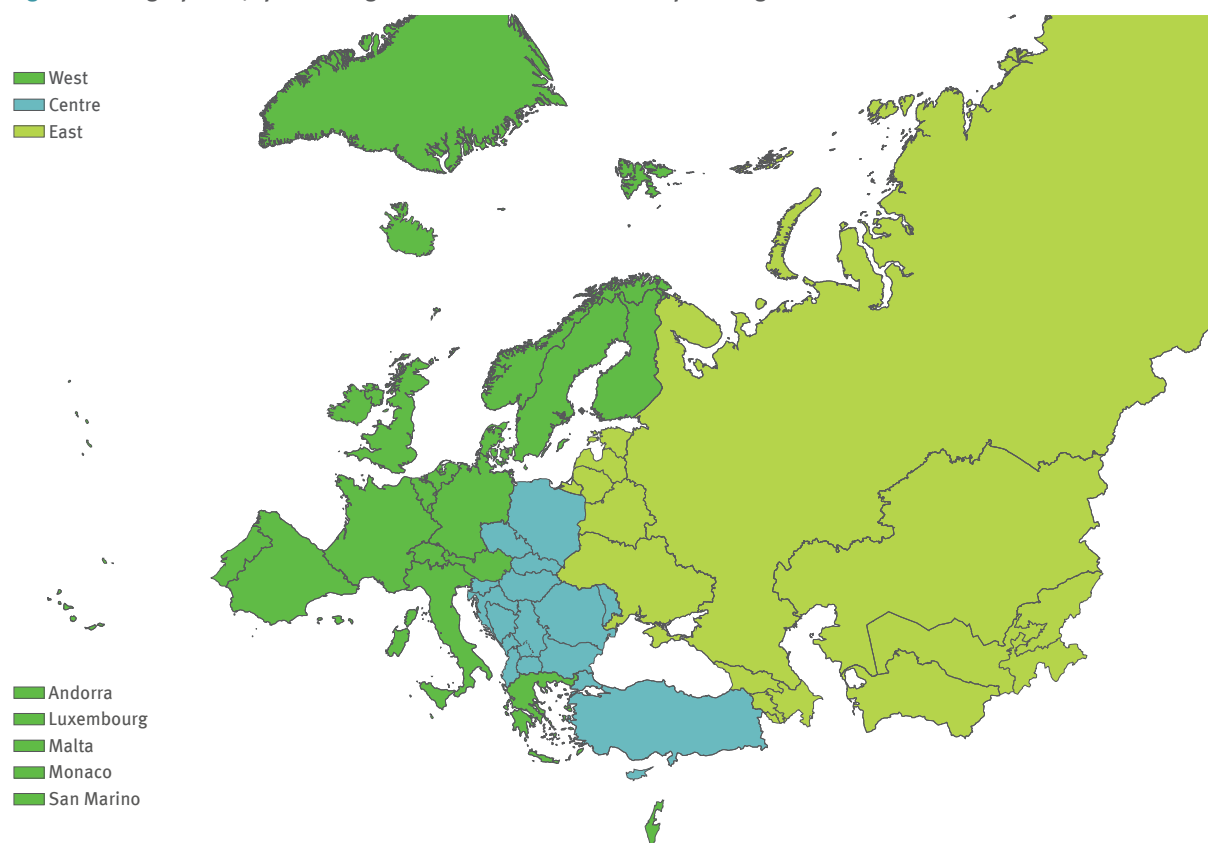
Liechtenstein is not a WHO Member State so its data are included in the totals for the EU/EEA but not for the WHO European Region. Totals for West, Centre and East therefore may not always equal the EU/EEA and non-EU/EEA totals. Data from Serbia include HIV cases notified in Kosovo¹ in all figures while these are stratified in tables to allow separate epidemiological presentation of the reported data.

Population data and rates

Data are presented in absolute numbers and rates as cases per 100 000 population.

The population estimates up to 2017 were derived from Eurostat for all EU/EEA countries and from the United Nations Population Division for non-EU/EEA countries (5).

¹ For the purposes of this publication, all references, including in the bibliography, to “Kosovo” should be understood/read as “Kosovo (in accordance with Security Council resolution 1244 (1999))”.

Fig. A1.1. Geographical/epidemiological division of the WHO European Region

The countries covered by the report are grouped as follows:

- West, 23 countries: Andorra, Austria,^a Belgium,^a Denmark,^a Finland,^a France,^a Germany,^a Greece,^a Iceland, Ireland,^a Israel, Italy,^a Luxembourg,^a Malta,^a Monaco, Netherlands,^a Norway, Portugal,^a San Marino, Spain,^a Sweden,^a Switzerland, United Kingdom.^a
 - Centre, 15 countries: Albania, Bosnia and Herzegovina, Bulgaria,^a Croatia,^a Cyprus,^a Czech Republic,^a Hungary,^a Montenegro, Poland,^a Romania,^a Serbia, Slovakia,^a Slovenia,^a the former Yugoslav Republic of Macedonia, Turkey.
 - East, 15 countries: Armenia, Azerbaijan, Belarus, Estonia,^a Georgia, Kazakhstan, Kyrgyzstan, Latvia,^a Lithuania,^a Republic of Moldova, Russian Federation, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.
- ^a Countries constituting the European Union as of 1 July 2014.

The Eurostat data are from 10 August 2017 (6) and the United Nations population data from August 2017.

The population data used for HIV and AIDS in Spain and for HIV in Italy were adjusted according to the extent of subnational coverage for the relevant years. The population data used for Ukraine were adjusted to exclude the areas from which no surveillance data were reported in 2014–2017 (7).

Rates for data presented by gender and age were calculated using relevant male and female population denominators from the sources described above. For maps presenting figures for men who have sex with men, rates were calculated using the male population.

Data are presented by year but also as cumulative totals per country. The cumulative total includes all data reported by that particular country since the beginning of national reporting and is not limited to the selected number of years presented.

Trend data

Only countries reporting consistently were included for presentation of the overall trends; these are noted in the footnotes to the trend graphs.

When presenting HIV trends for 2008–2017 by transmission mode, countries reporting transmission mode inconsistently or incompletely (such as Estonia, Poland and Turkey) were excluded from relevant figures reporting trends by transmission mode. Countries with varying geographic coverage of the national surveillance system over time (Spain and Italy) or that did not report for part of the period (Germany) were also excluded from graphs showing HIV trends.

When presenting trends for AIDS deaths, only countries reporting consistently were included (Belgium, Germany, Italy, the Russian Federation, Sweden, Turkmenistan, Ukraine and Uzbekistan were not included in the presentation of trends for AIDS deaths in Table 25 or the description in the text).

Data limitations

Surveillance systems are not identical across Europe, and differences in testing policies and data-collection methods could affect the results and introduce bias into comparisons between countries. Factors such as underreporting and reporting delay may influence the country figures and rankings presented in the report.

The data in the report are to be considered as provisional because they are subject to regular updates (such as detection and deletion of duplicate cases, and inclusion of new information about cases already reported). The limitations described below, the country comments in Annex 5 and the information on HIV and AIDS case reporting systems available in Annex 4 and 5 should be taken into account when interpreting the data presented here.

Official reports of newly diagnosed HIV cases do not represent true incidence. Newly reported HIV diagnoses include recently infected individuals as well as those who were infected several years ago but only recently tested for HIV. These reports are also influenced by several factors, such as the uptake of HIV testing, patterns of reporting, the long incubation period and a slow progression of the disease. To better interpret trends in HIV case-reporting data, the total numbers of HIV tests performed annually for diagnostic purposes (excluding unlinked anonymous tests and screening of blood donations) are presented to help provide some background on HIV testing patterns.

Although the table in Annex 6 adjusts for reporting delay for those countries where this is possible, no overall regional adjustments are made for underreporting or under-ascertainment bias. Few European countries have evaluated their surveillance systems for underreporting and published the results (8,9). Previous estimates

of underreporting range from 0% to 25% for AIDS cases (8), while national estimates of underreporting for HIV can range from 10% (Iceland and Italy) to around 40% (Germany and the UK) (9) (Françoise Cazein, Santé publique France, personal communication to ECDC, 8 November 2012). Estimates on the underreporting of AIDS-related deaths are not available, but according to a country survey from 2006, only about a third of countries were able to link HIV and AIDS surveillance death registries with national statistics or death certificate information, which results in underreporting of AIDS-related deaths (8).

References

1. WHO case definitions of HIV for surveillance and revised clinical staging and immunological classification of HIV-related disease in adults and children. Geneva: World Health Organization; 2007 (<http://www.who.int/hiv/pub/vct/hivstaging/en/index.html>).
2. Decision 2002/253/EC laying down case definitions for reporting communicable diseases to the Community network under Decision No 2119/98/EC of the European Parliament and of the Council. OJ L 27.09.12:6–7 (<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=CONSLEG:2002D0253:20120927:EN:PDF>).
3. Heisterkamp SH, Jager JC, Ruitenberg EJ, van Druen JAM, Downs AM. Correcting reported Aids incidence: a statistical approach. *Stat Med.* 1989;8:963–76.
4. Rosinska M, Pantazis N, Janiec J, Pharris A, Amato-Gauci AJ, Quinten C et al. Potential adjustment methodology for missing data and reporting delay in the HIV Surveillance System, European Union/ European Economic Area, 2015. *Euro Surveill.* 2018;23(23):pii=1700359 (<https://doi.org/10.2807/1560-7917.ES.2018.23.23.1700359>).
5. World population prospects: the 2017 revision, DVD Edition. New York (NY): United Nations, Department of Economic and Social Affairs, Population Division; 2017.
6. Eurostat [online database]. Brussels: Eurostat; undated (<http://ec.europa.eu/eurostat/data/database>).
7. Total resident population. In: State Statistics Service of Ukraine documents publishing [online database]. Kyiv: State Statistics Service of Ukraine; 2018 (https://ukrstat.org/en/operativ/operativ2007/ds/nas_rik/nas_e/nas_rik_e.html).
8. EuroHIV. Completeness of AIDS case reporting in Europe. HIV/AIDS surveillance in Europe, quarterly report 1996. Paris: Institut de médecine et d'épidémiologie africaines; 1996:30–3.
9. EuroHIV. EuroHIV 2006 survey on HIV and AIDS surveillance in the WHO European Region. Saint-Maurice: Institut de veille sanitaire; 2007 (http://invs.santepubliquefrance.fr/publications/2007/eurohiv_2006/HIV_AIDS_Web.pdf).

Annex 2

Completeness of variables for data reported in 2016 and 2017

	2016				2017			
	Number of countries	Completeness %	Minimal	Maximal	Number of countries	Completeness %	Minimal	Maximal
EU/EEA Countries								
Age	31	99.7	86.0	100.0	29	99.6	74.9	100.0
Gender	31	99.6	84.2	100.0	29	99.4	74.4	100.0
Date of diagnosis	31	100.0	100.0	100.0	29	100.0	100.0	100.0
Date of notification	29	84.8	80.9	100.0	27	84.1	80.2	100.0
Transmission	31	79.1	41.7	100.0	29	75.8	33.5	100.0
Date of AIDS diagnosis	29	30.4	2.5	100.0	26	24.9	3.3	83.2
Date of death	25	1.7	0.4	100.0	23	1.5	0.4	8.0
Country of birth	25	58.0	2.3	100.0	23	52.1	34.7	100.0
Region of origin	25	81.4	59.6	100.0	24	77.5	50.2	100.0
CD4 cell count ^a	26	64.6	22.9	97.4	25	66.3	35.6	96.7
Probable country of infection	24	31.8	2.8	100.0	23	33.8	0.2	99.2
WHO European Region								
Age	52	99.8	50.0	100.0	51	99.8	74.9	100.0
Gender	52	99.8	84.2	100.0	51	99.7	74.4	100.0
Date of diagnosis	52	100.0	100.0	100.0	51	100.0	100.0	100.0
Date of notification	49	91.9	80.9	100.0	48	92.7	80.2	100.0
Transmission	51	85.2	41.7	100.0	50	84.6	33.5	100.0
Date of AIDS	47	28.0	2.5	100.0	44	25.3	3.2	100.0
Date of death	43	9.3	0.4	100.0	40	5.1	0.4	99.3
Country of birth	43	52.1	2.3	100.0	41	47.8	34.7	100.0
Region of origin	45	89.4	50.0	100.0	43	88.6	50.2	100.0
CD4 cell count ^a	46	67.8	4.3	97.4	42	67.2	33.3	100.0
Probable country of infection	36	32.0	2.8	100.0	38	35.6	0.2	100.0

^a CD4 completeness is calculated on all new diagnoses; Table 14 (see Tables section) completeness calculations are restricted to new diagnoses in countries reporting the variables CD4Cells or FirstCD4Count.

Annex 3

Completeness by country and variable, 2017

Area	Country, territory or area ^a	Date of diagnosis	Date of notification	Age	Gender	Transmission	CD4 cell count	Country of birth ^b
EU/EEA								
West	Austria	100.0	100.0	100.0	100.0	92.6	96.7	99.6
West	Belgium	100.0	100.0	99.7	100.0	71.0	67.8	77.0
Centre	Bulgaria	100.0	100.0	100.0	100.0	100.0	77.2	100.0
Centre	Croatia	100.0	100.0	100.0	100.0	99.1	96.2	100.0
Centre	Cyprus	100.0	100.0	100.0	100.0	96.5	88.2	100.0
Centre	Czech Republic	100.0	100.0	100.0	100.0	97.2	90.9	100.0
West	Denmark	100.0	100.0	100.0	100.0	94.2	54.1	100.0
East	Estonia	100.0	100.0	100.0	100.0	54.3	35.6	50.2
West	Finland	100.0	100.0	100.0	100.0	72.2	79.1	89.2
West	France	100.0	100.0	100.0	100.0	52.6	45.7	56.6
West	Germany	–	–	–	–	–	–	–
West	Greece	100.0	99.5	100.0	100.0	82.5	68.8	97.8
Centre	Hungary	100.0	100.0	74.9	99.7	60.5	0.0	0.0
West	Iceland	100.0	100.0	100.0	100.0	37.5	0.0	100.0
West	Ireland	100.0	100.0	100.0	100.0	84.1	64.2	81.4
West	Italy	100.0	80.2	100.0	100.0	87.5	78.7	99.6
East	Latvia	100.0	100.0	100.0	100.0	63.6	57.7	99.5
	Liechtenstein	–	–	–	–	–	–	–
East	Lithuania	100.0	100.0	100.0	100.0	83.7	39.9	100.0
West	Luxembourg	100.0	100.0	100.0	100.0	91.5	78.0	100.0
West	Malta	100.0	100.0	93.3	100.0	88.9	73.3	100.0
West	Netherlands	100.0	100.0	100.0	100.0	89.2	89.0	95.7
West	Norway	100.0	100.0	100.0	100.0	99.5	0.0	93.4
Centre	Poland	100.0	100.0	97.4	100.0	33.5	0.0	61.9
West	Portugal	100.0	100.0	100.0	100.0	96.0	84.7	96.8
Centre	Romania	100.0	100.0	100.0	100.0	99.8	94.3	99.2
Centre	Slovakia	100.0	100.0	100.0	100.0	92.9	82.9	100.0
Centre	Slovenia	100.0	100.0	100.0	100.0	92.3	84.6	92.3
West	Spain	100.0	0.0	100.0	100.0	85.9	84.0	96.5
West	Sweden	100.0	100.0	100.0	100.0	87.1	77.6	97.5
West	United Kingdom	100.0	100.0	100.0	100.0	82.3	79.5	88.2
Non-EU/EEA								
Centre	Albania	100.0	100.0	100.0	100.0	100.0	61.7	100.0
West	Andorra	100.0	100.0	–	–	–	–	–
East	Armenia	100.0	100.0	100.0	100.0	96.3	80.5	100.0
East	Azerbaijan	100.0	100.0	100.0	100.0	82.3	41.4	100.0
East	Belarus	100.0	100.0	100.0	100.0	98.8	0.0	100.0
Centre	Bosnia and Herzegovina	100.0	100.0	100.0	100.0	100.0	33.3	100.0
East	Georgia	100.0	100.0	99.8	100.0	99.4	87.0	100.0
West	Israel	100.0	100.0	99.5	100.0	86.4	57.5	100.0
East	Kazakhstan	100.0	100.0	100.0	100.0	97.5	74.3	100.0
East	Kyrgyzstan	100.0	100.0	100.0	100.0	91.4	44.0	100.0
West	Monaco	–	–	–	–	–	–	–
Centre	Montenegro	100.0	100.0	100.0	100.0	100.0	100.0	100.0
East	Republic of Moldova	100.0	100.0	100.0	100.0	76.9	77.5	100.0
East	Russian Federation	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–
Centre	Serbia	100.0	100.0	100.0	100.0	84.5	69.1	100.0
Centre	Serbia excluding Kosovo ^c	100.0	100.0	100.0	100.0	84.8	69.1	100.0
Centre	Kosovo ^c	–	–	–	–	–	–	–
West	Switzerland	100.0	100.0	99.6	100.0	73.1	68.4	81.0
East	Tajikistan	100.0	100.0	100.0	100.0	91.0	85.3	100.0
Centre	The former Yugoslav Republic of Macedonia	100.0	100.0	97.7	100.0	95.5	77.3	100.0
Centre	Turkey	100.0	100.0	100.0	100.0	46.0	0.0	97.1
East	Turkmenistan	–	–	–	–	–	–	–
East	Ukraine	100.0	100.0	100.0	100.0	99.8	89.2	100.0
East	Uzbekistan	–	–	–	–	–	–	–

^a Completeness not computed on countries, territories or areas with fewer than five diagnoses reported in 2017 (Liechtenstein, Monaco and San Marino, and Kosovo^c).

^b Completeness provided is based on country of birth, region of origin or, for Italy and Switzerland, country of nationality.

^c (in accordance with Security Council resolution 1244 (1999)).

Annex 4a

HIV surveillance system overview: data source information

Country	HIV data source	Record ^a type for 2017 reporting	Period	Legal ^b	Coverage ^c	Comments
EU/EEA						
Austria	AT-HIV	HIVAIDS	1980–2017	V	Co	
Belgium	BE-HIV/AIDS	HIVAIDS	1978–2017	V	Co	
Bulgaria	BG-HIV	HIVAIDS	1986–2017	C	Co	HIV aggregate record type used through 2006; HIV record type 2007–2013
Cyprus	CY-HIV/AIDS	HIVAIDS	1986–2017	C	Co	
Croatia	HR-CNIPH	HIVAIDS	1985–2017	C	Co	HIV record type used prior to 2016
Czech Republic	CZ-HIV/AIDS	HIVAIDS	1985–2017	C	Co	
Denmark	DK-HIV	HIVAIDS	1990–2017	C	Co	HIV record type used 1990–2013
Estonia	EE-NAKIS	HIVAIDS	1988–2017	C	Co	Data source EE-HIV used 1988–2012; HIV aggregate record type used through 2006; HIV record type prior to 2015
Finland	FI-NIDR	HIVAIDS	1980–2017	C	Co	HIV record type used prior to 2016
France	FR-HIVAIDS	HIVAIDS	2003–2017	C	Co	Although compulsory, HIV diagnoses are not exhaustively reported; underreporting was estimated at 30% in 2014
Germany	DE-SURVNET@RKI7.3-HIV		1993–2016	C	Co	Data source DE-HIV-Pre-IFSG used 1993–2001; HIV record type used to report data up to 2016
Greece	EL-HIV/AIDS	HIVAIDS	1981–2017	C	Co	
Hungary	HU-HIV/AIDS	HIVAIDS	1985–2017	C	Co	
Iceland	IS-SUBJECT_TO_REGISTRATION	HIVAIDS	1983–2017	C	Co	HIV record type used prior to 2017
Ireland	IE-CIDR	HIVAIDS	1981–2017	C	Co	Data source IE-HIV/AIDS used for years 1981–2011; HIV aggregate used for reporting through 2002; HIV record type 2003–2011
Italy	IT-COA-ISS	HIV	2004–2017	C	Co	See country comments about historical coverage; HIV aggregate record type used through 2009
Latvia	LV-HIV/AIDS	HIVAIDS	1987–2017	C	Co	HIV record type used 1987–2013; HIVAIDS record type used from 2014
Liechtenstein	CH-SFOPH-LI	HIV	1985–2017	V	NS/unk	Cases reported through Switzerland's surveillance system using another data source
Lithuania	LT-AIDS_CENTRE	HIVAIDS	1988–2017	C	Co	
Luxembourg	LU-HIVAIDS	HIVAIDS	1983–2017	V	Co	
Malta	MT-DISEASE_SURVEILLANCE	HIVAIDS	1986–2017	C	Co	HIV record type used in years 1986–2014
Netherlands	NL-HIV/AIDS	HIVAIDS	1980–2017	V	Co	
Norway	NO-MSIS_B	HIVAIDS	1980–2017	C	Co	HIV record type used in years 1980–2013
Poland	PL-HIV	HIVAIDS	1984–2017	C	Co	
Portugal	PT-HIVAIDS	HIVAIDS	1983–2017	C	Co	
Romania	RO-RSS	HIVAIDS	1985–2017	C	Co	
Slovakia	SK-EPIIS	HIVAIDS	1985–2017	C	Co	HIV record type used in years 1985–2013
Slovenia	SI-HIVAIDS	HIVAIDS	1985–2017	C	Co	
Spain	ES-HIV	HIV	2003–2017	C	Co	See country comments about historical coverage
Sweden	SE-SmiNet	HIVAIDS	1983–2017	C	Co	Data source SE-SweHIVReg used 1983–2009; HIV record type used prior to 2014
United Kingdom	UK-HIVAIDS	HIVAIDS	1981–2017	V	Co	
Non-EU/EEA						
Albania	AL-NioPH	HIVAIDS	1993–2017	C	Co	
Andorra	AD-MoHWFH	HIVAIDS	2004–2017	V	Co	
Armenia	AM-NAC	HIVAIDS	1988–2017	V	Co	
Azerbaijan	AZ-AIDS-CENTER-NEW	HIVAIDS	1987–2017	V	Se	
Belarus	BY-NAC	HIVAIDS	1981–2017	C	Co	HIVAIDS record type used only for HIV reporting (no linked HIV and AIDS reporting); HIV record type used in years 1981–2013
Bosnia and Herzegovina	BA-FMoH-MoHSWRS	HIVAIDS	1986–2017	C	Co	HIV record type used in years 1993–2013
Georgia	GE-IDACIRC	HIVAIDS	1989–2017	C	Co	
Israel	IL-MOH	HIVAIDS	1981–2017	C	Co	
Kazakhstan	KZ-RCfAPC	HIVAIDS	1987–2017	NS/unk	NS/unk	
Kyrgyzstan	KG-HIV KG 2008	HIVAIDS	1987–2017	V	Co	HIV record type used in years 1987–2000
Montenegro	ME-IOPH	HIVAIDS	1989–2017	C	Co	
Monaco	MC-MoSH-GEN	HIV	1985–2017	C	Co	
Republic of Moldova	MD-NAC	HIVAIDS	1987–2017	V	Other	
Russian Federation	RU-MOH	-	2010	C	Co	
San Marino	SM-AIDS/HIV	HIVAGGR	1985–2017	C	Co	
Serbia ^d	RS-NAC	HIVAIDS	1984–2017	C	Co	HIV aggregate record type used in years 1984–2001
Switzerland	CH-FOPH	HIV	1985–2017	C	Co	
Tajikistan	TJ-RHAC	HIVAIDS	1991–2017	C	Co	
The former Yugoslav Republic of Macedonia	MK-NHASS	HIVAIDS	1993–2017	C	Co	HIV record type used in years 1993–2016
Turkey	TR-MOH	HIV	1984–2017	C	Co	
Turkmenistan	TM-NAC	-	1981–2012	V	Co	
Ukraine	UA-NAC	HIVAIDS	1987–2017	V	Other	HIVAIDS record type used only for HIV reporting (no linked HIV and AIDS reporting); HIVAGGR record type used in years 1987–2015.
Uzbekistan	UZ-RAC	-	1981–2010	V	Co	Did not report data 2011–2017; used HIV record type in years 1981–2010

^a Type: HIVAIDS (HIV and AIDS joined case-based record type); HIV (HIV case-based record type); AIDS (AIDS case-based record type); HIVAGGR (HIV aggregate record type); AIDSAGGR (AIDS aggregate record type).

^b Legal: voluntary reporting (V); compulsory reporting (C); not-specified/unknown (NS/unk).

^c Coverage: sentinel system (Se); comprehensive (Co); not-specified/unknown (NS/unk).

^d HIV data from Kosovo (in accordance with Security Council resolution 1244 (1999)) were reported through data source XK-HIVAIDS for 1986–2017; HIVAIDS record type used for all years.

Annex 4b

AIDS surveillance system overview: data source information

Country	HIV data source	Record ^a type for 2017 reporting	Period	Legal ^b	Coverage ^c	Comments
EU/EEA						
Austria	AT-AIDS	HIVAIDS	1980-2017	V	Co	
Belgium	BE-HIV/AIDS		1978-2015	V	Co	Did not report 2016 or 2017 data
Bulgaria	BG-AIDS	HIVAIDS	1986-2017	C	Co	AIDS record type was used for cases prior to 2014
Cyprus	CY-HIV/AIDS	HIVAIDS	1986-2017	C	Co	
Croatia	HR-CNIPH	HIVAIDS	1985-2017	C	Co	AIDS record type used prior to 2016
Czech Republic	CZ-HIV/AIDS	HIVAIDS	1985-2017	C	Co	
Denmark	DK-HIV	HIVAIDS	1980-2017	C	Co	AIDS record type from data source DK-MIS used 1980-2013
Estonia	EE-NAKIS	HIVAIDS	1988-2017	C	Co	AIDS record type used prior to 2015
Finland	FI-NIDR	AIDS	1980-2017	C	Co	AIDS record type used prior to 2016
France	FR-HIVAIDS; FR-AIDS	HIVAIDS	2003-2017	C	Co	Additional data from record type AIDS used for the years 1978-2016. Although compulsory, AIDS diagnoses are not exhaustively reported. Underreporting was estimated 41% in 2007-2009. Did not report 2017 data, AIDS record type used through 2016
Germany	DE-AIDS		1970-2016	V	Co	Did not report 2017 data, AIDS record type used through 2016
Greece	EL-HIV/AIDS	HIVAIDS	1981-2017	C	Co	
Hungary	HU-HIV/AIDS	HIVAIDS	1985-2017	C	Co	
Iceland	IS-SUBJECT_TO_REGISTRATION	HIVAIDS	1983-2017	C	Co	
Ireland	IE-CIDR	HIVAIDS	1981-2017	V	Co	Data source IE-HIV/AIDS and AIDS record type used for years 1981-2011
Italy	IT-COA-ISS	AIDS	1982-2017	C	Co	
Latvia	LV-AIDS	HIVAIDS	1990-2017	C	Co	Same data source in AIDS record type used for 1990-2013
Liechtenstein	CH-SFOPH-LI	AIDS	1985-2017	V	NS/unk	Cases reported through Switzerland's surveillance system
Lithuania	LT-AIDS_CENTRE	HIVAIDS	1988-2017	C	Co	
Luxembourg	LU-HIVAIDS	HIVAIDS	1983-2017	V	Co	
Malta	MT-DISEASE_SURVEILLANCE	HIVAIDS	1986-2017	C	Co	Same data source and AIDS record type used 1986-2014
Netherlands	NL-HIV/AIDS	HIVAIDS	1980-2017	V	Co	
Norway	NO-MSIS_B	HIVAIDS	1980-2017	C	Co	Data source NO-MSIS-A and record type AIDS used in years 1980-2013
Poland	PL-HIV	HIVAIDS	1984-2017	C	Co	
Portugal	PT-HIVAIDS	HIVAIDS	1983-2017	C	Co	
Romania	RO-RSS	HIVAIDS	1985-2017	C	Co	
Slovakia	SK-EPIS	HIVAIDS	1985-2017	C	Co	AIDS record type used in years 1985-2013
Slovenia	SI-HIVAIDS	HIVAIDS	1985-2017	C	Co	
Spain	ES-AIDS	AIDS	1981-2017	C	Co	See country comments about coverage
Sweden			1983-2007	V	Co	AIDS surveillance discontinued in 2008
United Kingdom	UK-HIVAIDS	HIVAIDS	1981-2017	V	Co	
Non-EU/EEA						
Albania	AL-NioPH	HIVAIDS	1993-2017	C	Co	
Andorra	AD-MoHWFH	HIVAIDS	2004-2017	V	Co	
Armenia	AM-NAC	HIVAIDS	1988-2017	V	Se	
Azerbaijan	AZ-AIDS-CENTER-NEW	HIVAIDS	1995-2017	V	Co	
Belarus	BY-NAC	AIDS	1991-2017	C	Co	
Bosnia and Herzegovina	BA-FMoH-MoHSWRS	HIVAIDS	1986-2017	C	Co	AIDS record type used in years 1986-2013
Georgia	GE-IDACIRC	HIVAIDS	1989-2017	C	Co	
Israel	IL-MOH	HIVAIDS	1981-2017	C	Co	
Kazakhstan	KZ-RCfAPC	HIVAIDS	1993-2017	NS	NS	
Kyrgyzstan	KG-HIV KG 2008	HIVAIDS	1999-2017	V	Co	AIDS record type used in years 1987-2000
Montenegro	ME-IOPH	HIVAIDS	1990-2017	C	Co	
Monaco	MC-MoSH-GEN	HIV	1985-2017	C	Co	
Republic of Moldova	MD-NAC	HIVAIDS	1989-2017	V	Co	
Russian Federation	-	-	-	-	-	
San Marino	SM-AIDS/HIV	AIDS	1986-2017	C	Co	
Serbia ^d	RS-NAC	HIVAIDS	1985-2017	C	Co	AIDS record type used in years 1985-2001
Switzerland	CH-FOPH	AIDS	1980-2017	C	Co	
Tajikistan	TJ-RHAC	HIVAIDS	1998-2017	C	Co	
The former Yugoslav Republic of Macedonia	MK-NHASS	HIVAIDS	1989-2017	C	Co	AIDS record type used in years 1993-2016
Turkey	TR-MOH	AIDS	1985-2017	C	Co	
Turkmenistan	TM-NAC	-	2002-2012	V	Co	
Ukraine	UA-NAC	AIDSAGGR	1988-2017	V	Co	HIVAIDS record type used only for HIV reporting (i.e. no linked HIV and AIDS reporting).
Uzbekistan	UZ-RAC	-	1992-2010	V	Co	Did not report data 2011-2017; used AIDS record type in years 1992-2010

^a Type: HIVAIDS (HIV and AIDS joined case-based record type); HIV (HIV case-based record type); AIDS (AIDS case-based record type); HIVAGGR (HIV aggregate record type); AIDSAGGR (AIDS aggregate record type).

^b Legal: voluntary reporting (V); compulsory reporting (C); not-specified/unknown (NS/unk).

^c Coverage: sentinel system (Se); comprehensive (Co); not-specified/unknown (NS/unk).

^d HIV data from Kosovo (in accordance with Security Council resolution 1244 (1999)) were reported through data source XK-HIVAIDS for 1986-2017; HIVAIDS record type used for all years.

Annex 5

Country-specific comments regarding national HIV and AIDS reporting

Country	Comments
EU/EEA	
Austria	
Belgium	Due to a temporary data merger issue, information on AIDS diagnoses for 2016 and 2017 were not available but will be reported to TESSy in the future.
Bulgaria	Case-based reporting of HIV is available from 2007 onwards.
Croatia	
Cyprus	Population rates presented in this report may differ slightly from rates presented in the national report due to the use of different Eurostat population extracts.
Czech Republic	Foreigners with short-term stays in the Czech Republic are not included in cases notified.
Denmark	
Estonia	The surveillance system was modified substantially in 2008. Previously, the probable mode of HIV transmission was not reported by Estonia (from 2003 to 2007, Estonia supplied partial information on people who inject drugs only).
Finland	
France	Case-based data reported through TESSy are not exhaustive because of reporting delays (cases reported several months or years after the diagnosis) and underreporting (cases that are diagnosed but never reported). The most recent estimates of underreporting in France are 41% in 2007–2009 for AIDS and 30% in 2015 for HIV. To assess the real numbers and trends of HIV and AIDS diagnoses in France, it is essential to use adjusted data, which take into account reporting delays, underreporting and missing data (incomplete reports). Adjusted data for 2017 was not available at the time of the production of this report. The French HIV/AIDS reporting system was changed in 2016 to report AIDS and HIV diagnoses online, and physicians should report HIV diagnoses spontaneously, without waiting for the laboratory report. The use of this new tool by laboratories and physicians has increased over time, but clinicians are less compliant than laboratories. In 2016–2017, therefore, the proportion of missing data on variables (such as route of transmission) is increased.
Germany	Due to technical problems, no data export for 2017 HIV or AIDS data was possible. These data will be reported when available and included in future reports.
Greece	
Hungary	
Iceland	
Ireland	HIV was made a notifiable disease in September 2011. The HIV reporting system was modified substantially in 2012. AIDS cases and deaths among AIDS cases are now only reported if at the time of HIV diagnosis. HIV diagnoses include a growing proportion of "previous-positive" people, who are transferring their HIV care when moving to Ireland and tested positive and notified within the Irish system when moving to the country. There was a change in the implementation of the case definition in 2015 (requiring confirmatory testing on a single sample rather than two samples) which resulted in more people being notified to the surveillance system.
Italy	New HIV diagnoses were reported by 10 of the 21 Italian regions between 2004 and 2006, 11 regions in 2007, 12 in 2008, 18 in 2009, and all of the 21 regions of Italy since 2012. Between 2004 and 2011, population denominators are based on the annual resident population in the regions reporting cases. From 2012, the coverage of the surveillance system is national, so the total Italian population is used as a denominator. AIDS deaths are not reported after 2014 due to lack of updated data from the national mortality register.
Latvia	Population rates presented in this report may differ slightly from rates presented in the national report due to the use of different Eurostat population extracts.
Liechtenstein	Liechtenstein, with only 35 000 inhabitants, has small numbers of communicable diseases. Public health authorities therefore refrain from collecting data due limited public health added value. In 1970, Liechtenstein adopted the Swiss Law of Epidemiology. Since then, all communicable disease data are reported to officials in Switzerland, as demanded by the Federal Office of Public Health. These data are reported through Switzerland to TESSy but may not represent all cases diagnosed in Liechtenstein.
Lithuania	
Luxembourg	HIV tests reported through 2010 include only tests performed at two major public laboratories, so underestimate the total number of HIV tests performed during those years. From 2011, tests reported include all laboratories in the country.
Malta	A new HIV reporting system started in 2004.
Netherlands	HIV surveillance is based on the ATHENA cohort, which includes 98% of people who entered HIV care in the Netherlands. Data collection started from 1996 onwards and HIV diagnoses before 1996 are incomplete.
Norway	
Poland	
Portugal	The PT-HIV database is now fully case-based, containing details of cases diagnosed from 1983. In 2013 and 2014, the Portuguese HIV/AIDS programme implemented a strategy to address underreporting and reporting delay, resulting in significant increases of the number of reported cases diagnosed between 1983 and 2012.
Romania	
Slovakia	
Slovenia	
Spain	HIV reporting has existed since the 1980s in some of the 19 Autonomous Regions of Spain. For 2003–2011, data are available only for nine regions: Asturias, Balearic Islands, Basque Country, Canary Islands, Catalonia, Ceuta, Extremadura, La Rioja and Navarre. Since 2004, data are available for 10 regions (+ Galicia). Since 2007, data are available for 11 regions (+Madrid). Since 2008, data are available for 14 regions (+ Aragón, Castilla-La Mancha and Melilla). Since 2009, data are available for 17 regions (+ Cantabria, Castilla-León and Murcia). Since 2012, data are available for 18 regions (+Valencia). Since 2013, data are available for all the 19 regions of Spain (+ Andalucía). Rates are based on the corresponding populations for each year. It has not been possible to include data from several regions for AIDS reporting in 2014–2017, so rates for those years are based on the corresponding population.
Sweden	Due to changes in the HIV/AIDS surveillance system, AIDS reporting has not been mandatory since 2000. Since 2008, AIDS data are not reported from Sweden because the national AIDS surveillance system had been discontinued.
United Kingdom	The United Kingdom has moved toward surveillance of AIDS within three months of HIV diagnoses. As a result, the AIDS figures provided from 2015 are likely to be lower than those previously reported.

Country-specific comments regarding national HIV and AIDS reporting (contd)

Country	Comments
Non-EU/EEA	
Albania	
Andorra	
Armenia	
Azerbaijan	
Belarus	All data are presented by "date of statistics" (instead of "date of diagnosis").
Bosnia and Herzegovina	
Georgia	Data for 2016 are presented by "date of statistics" (instead of "date of diagnosis").
Israel	
Kazakhstan	
Kyrgyzstan	
Monaco	
Montenegro	
Republic of Moldova	
Russian Federation	
San Marino	
Serbia	Data on HIV tests refer to the number of people tested and do not include people tested in the reference laboratory or private laboratories.
Switzerland	
Tajikistan	
The former Yugoslav Republic of Macedonia	AIDS cases include only people diagnosed with AIDS at the time of HIV diagnosis.
Turkey	Reported HIV cases exclude people diagnosed with AIDS at the time of HIV diagnosis. Reported AIDS cases only include people diagnosed with AIDS at the time of HIV diagnosis. Table 14 (see Tables section): CD4 cell count data exclude people diagnosed with AIDS at the time of HIV diagnosis. All data are presented by "date of statistics" (instead of "date of diagnosis").
Turkmenistan	
Ukraine	All data are presented by "date of statistics" (instead of "date of diagnosis"). Data reported from Ukraine exclude data from Crimea and Sevastopol City for 2014–2017 and parts of the non-government controlled areas for 2015–2017; corresponding population denominators were used to compute rates. Table 7 (see Tables section): mother-to-child transmission cases for 2016–2017 are provisional and may be adjusted in the coming few years.
Uzbekistan	

Annex 6

New HIV diagnoses and rate per 100 000 population, adjusted for reporting delay and adjustment coefficients,^a 2014–2017

Country, territory or area ^b	2014		2015		2016		2017		Adjustment coefficients			
	N	Rate	N	Rate	N	Rate	N	Rate	2014	2015	2016	2017
EU/EEA												
Austria	287	3.4	317	3.7	298	3.4	316	3.6	1.03	1.06	1.11	1.17
Belgium	1055	9.4	1015	9.0	908	8.0	890	7.9	1.00	1.00	1.00	1.00
Bulgaria	247	3.4	227	3.2	202	2.8	241	3.4	1.00	1.00	1.00	1.00
Croatia	92	2.2	117	2.8	109	2.6	106	2.5	1.00	1.00	1.00	1.00
Cyprus	56	6.5	80	9.4	80	9.4	85	10.1	1.00	1.00	1.00	1.01
Czech Republic	232	2.2	266	2.5	286	2.7	254	2.4	1.00	1.00	1.00	1.00
Denmark	256	4.5	277	4.9	244	4.3	244	4.3	1.00	1.00	1.00	1.01
Estonia	291	22.1	270	20.5	229	17.4	219	16.6	1.00	1.00	1.00	1.00
Finland	181	3.3	174	3.2	180	3.3	159	2.9	1.00	1.00	1.00	1.01
France ^c	5 683	8.6	5 285	7.9	5 439	8.1	5 442	8.2	1.00	1.00	1.00	1.04
Germany	3 501	4.3	3 699	4.6	3 427	4.2	–	–	1.00	1.00	1.00	–
Greece	793	7.3	799	7.4	667	6.2	659	6.1	1.02	1.03	1.04	1.05
Hungary	271	2.7	271	2.7	228	2.3	223	2.3	1.00	1.00	1.00	1.00
Iceland	11	3.4	12	3.6	28	8.4	24	7.2	1.00	1.00	1.00	1.00
Ireland	377	8.2	483	10.4	510	10.8	483	10.2	1.00	1.00	1.00	1.00
Italy	3 853	6.3	3 633	6.0	3 717	6.1	3 704	6.1	1.01	1.01	1.02	1.08
Latvia	347	17.3	393	19.8	365	18.5	371	19.0	1.00	1.00	1.00	1.01
Liechtenstein	1	2.7	0	0.0	2	5.3	0	0.0	1.00	1.00	1.00	1.00
Lithuania	141	4.8	157	5.4	214	7.4	263	9.1	1.00	1.00	1.00	1.00
Luxembourg	119	21.7	92	16.3	103	17.9	96	16.7	1.44	1.37	1.45	1.63
Malta	40	9.4	61	14.2	63	14.5	45	10.4	1.00	1.00	1.00	1.00
Netherlands	945	5.6	938	5.5	835	4.9	791	4.7	1.01	1.02	1.05	1.11
Norway	267	5.2	221	4.3	220	4.2	223	4.3	1.00	1.00	1.00	1.04
Poland	1 132	3.0	1 278	3.4	1 318	3.5	1 402	3.7	1.00	1.00	1.00	1.06
Portugal	1 431	13.7	1 497	14.4	1 553	15.0	1 470	14.2	1.08	1.12	1.18	1.38
Romania	855	4.3	821	4.1	705	3.6	661	3.3	1.00	1.00	1.00	1.00
Slovakia	86	1.6	86	1.6	88	1.6	70	1.3	1.00	1.00	1.00	1.18
Slovenia	51	2.5	50	2.4	57	2.8	39	1.9	1.00	1.00	1.00	1.00
Spain	4 396	9.5	4 181	9.0	3 963	8.5	3 249	7.0	1.00	1.00	1.00	1.00
Sweden	473	4.9	447	4.6	429	4.4	434	4.4	1.00	1.00	1.00	1.00
United Kingdom	6 185	9.6	6 043	9.3	5 280	8.1	4 363	6.7	1.00	1.00	1.00	1.00
Total EU/EEA	33 739	6.6	33 307	6.5	31 934	6.2	27 055	6.2	1.01	1.01	1.02	1.07
Non-EU/EEA												
Albania	79	2.7	96	3.3	127	4.3	94	3.2	1.00	1.00	1.00	1.00
Andorra	6	7.6	3	3.8	2	2.6	6	7.8	1.00	1.00	1.00	1.00
Armenia	333	11.5	295	10.1	303	10.4	354	12.1	1.00	1.00	1.00	1.00
Azerbaijan	604	6.4	727	7.6	556	5.7	570	5.8	1.00	1.00	1.00	1.00
Belarus	1 811	19.1	2 305	24.3	2 391	25.2	2 468	26.1	1.00	1.00	1.00	1.00
Bosnia and Herzegovina	23	0.6	15	0.4	24	0.7	12	0.3	1.00	1.00	1.00	1.00
Georgia	542	13.6	683	17.3	719	18.3	631	16.1	1.00	1.00	1.00	1.00
Israel	452	5.7	409	5.1	363	4.4	405	4.9	1.00	1.00	1.00	1.00
Kazakhstan	2 342	13.4	2 478	14.0	2 899	16.1	3 019	16.6	1.00	1.00	1.00	1.00
Kyrgyzstan	649	11.2	653	11.1	764	12.8	840	13.9	1.00	1.00	1.00	1.00
Monaco	1	2.6	1	2.6	0	0.0	3	7.8	1.00	1.00	1.00	1.00
Montenegro	20	3.2	19	3.0	34	5.4	26	4.1	1.00	1.00	1.00	1.00
Republic of Moldova	833	20.5	816	20.1	833	20.5	836	20.6	1.00	1.00	1.00	1.00
Russian Federation	–	–	–	–	–	–	–	–	1.00	1.00	1.00	1.00
San Marino	3	9.2	2	6.1	2	6.0	1	3.0	1.00	1.00	1.00	1.00
Serbia ^d	136	1.5	184	2.1	179	2.0	181	2.1	1.00	1.00	1.00	1.00
Serbia excluding Kosovo ^d	130	1.8	181	2.6	168	2.4	178	2.5	1.00	1.00	1.00	1.00
Kosovo ^d	6	0.3	3	0.2	11	0.6	3	0.2	1.00	1.00	1.00	1.00
Switzerland	517	6.3	536	6.4	531	6.3	443	5.2	1.00	1.00	1.00	1.00
Tajikistan	1 009	12.1	1 157	13.5	1 043	11.9	1 208	13.5	1.00	1.00	1.00	1.00
The former Yugoslav Republic of Macedonia	30	1.4	25	1.2	30	1.4	44	2.1	1.00	1.00	1.00	1.00
Turkey	1 838	2.4	2 107	2.7	2 438	3.1	2 844	3.5	1.00	1.00	1.00	1.00
Turkmenistan	–	–	–	–	–	–	–	–	1.00	1.00	1.00	1.00
Ukraine	15 796	35.2	13 000	30.4	14 262	33.5	15 680	37.0	1.00	1.00	1.00	1.00
Uzbekistan	–	–	–	–	–	–	–	–	1.00	1.00	1.00	1.00
Total non-EU/EEA	27 024	12.4	25 511	11.7	27 500	12.5	29 665	13.4	1.00	1.00	1.00	1.00
WHO European Region												
West	30 916	7.3	30 242	7.1	28 948	6.8	23 976	6.9	1.01	1.01	1.02	1.07
Centre	5 148	2.7	5 642	2.9	5 905	3.0	6 282	3.2	1.00	1.00	1.00	1.01
East	24 698	21.9	22 934	20.6	24 578	22.0	26 462	23.6	1.00	1.00	1.00	1.00
Total WHO European Region	60 762	8.3	58 818	8.1	59 432	8.1	56 720	8.7	1.01	1.01	1.01	1.03

^a The coefficients present the adjustments for the current year of reporting. Number of diagnosed cases for the last four years were adjusted compared to Table 1 (see Tables section) only if the adjusted number of cases for year of diagnosis was higher than the number of cases uploaded for that specific year.

^b Country-specific comments are in Annex 5.

^c French data for 2014–2017 are adjusted but not fully according to the national method which includes underreporting. For this reason numbers here may differ from those presented in the national report.

^d (in accordance with Security Council resolution 1244 (1999)).

Annex 7

HIV/AIDS surveillance in Europe: participating countries and national institutions

Country	National institutions
EU/EEA	
Austria	Federal Ministry of Health, Family and Youth
Belgium	Scientific Institute of Public Health
Bulgaria	Ministry of Health
Croatia	Croatian National Institute of Public Health
Cyprus	Ministry of Health
Czech Republic	National Institute of Public Health
Denmark	Statens Serum Institut
Estonia	Health Board
Finland	National Public Health Institute (KTL)
France	Santé Publique France (French National Public Health Agency)
Germany	Robert Koch Institute
Greece	Hellenic Centre for Disease Control and Prevention
Hungary	National Centre for Epidemiology (Országos Epidemiológiai Központ)
Iceland	Health Protection Agency Centre for Infections
Ireland	Health Protection Surveillance Centre (HPSC)
Italy	Ministry of Health DG Prevention – Unit V
Latvia	Centre for Disease Prevention and Control of Latvia
Liechtenstein	Principality of Liechtenstein
Lithuania	Centre for Communicable Diseases and AIDS
Luxembourg	National Service of Infectious Diseases, Centre Hospitalier
Malta	Department of Health Promotion and Disease Prevention
Netherlands	National Institute for Public Health and the Environment (RIVM)
Norway	Norwegian Institute of Public Health – Department of Infectious Disease Epidemiology
Poland	National Institute of Public Health – National Institute of Hygiene (NIZP-PZH)
Portugal	Directorate-General of Health (Direção-Geral da Saúde) and National Institute of Health Dr Ricardo Jorge (Instituto Nacional de Saúde Doutor Ricardo Jorge, I.P.)
Romania	Institute of Public Health and National Institute for Infectious Diseases "Prof. Dr. Matei Bals"
Slovakia	Regional Public Health Authority of capital Bratislava
Slovenia	National Institute of Public Health
Spain	Instituto de Salud Carlos III Centro Nacional de Epidemiología
Sweden	Public Health Agency of Sweden
United Kingdom	Public Health England
Non-EU/EEA	
Albania	National Institute of Public Health
Andorra	Ministry of Health, Social Welfare and Family
Armenia	National Centre for AIDS Prevention
Azerbaijan	Azerbaijan AIDS Centre
Belarus	National Centre for Hygiene, Epidemiology and Public Health
Bosnia and Herzegovina	Ministry of Civil Affairs of Bosnia and Herzegovina; Federal Ministry of Health; Ministry of Health and Social Welfare the Republica Srpska and Public Health Institutes of the Federation of Bosnia and Herzegovina and Republica Srpska
Georgia	Infectious Diseases, AIDS & Clinical Immunology Research Centre
Israel	Ministry of Health
Kazakhstan	National Centre for the Prevention and Control of AIDS
Kyrgyzstan	Republic Centre for AIDS Prevention and Control
Monaco	Ministry of Social Health
Montenegro	Institute of Public Health of Montenegro
Republic of Moldova	National AIDS Centre; National Centre for Preventative Care
Russian Federation	Federal Scientific and Methodological Centre for Prevention and Control of AIDS
San Marino	Ospedale di Stato
Serbia ^a	Institute of Public Health of Serbia
Switzerland	Bundesamt für Gesundheit
Tajikistan	Republican HIV/AIDS Centre
The former Yugoslav Republic of Macedonia	Institute of Public Health of the Republic of Macedonia
Turkey	Public Health Institute of Turkey, Ministry of Health
Turkmenistan	National AIDS Prevention Centre
Ukraine	State Institution "Public Health Centre of the Ministry of Health of Ukraine"
Uzbekistan	Republican AIDS Centre

^a Data for Kosovo (in accordance with Security Council resolution 1244 (1999)) were provided by the National Institute of Public Health of Kosovo.



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