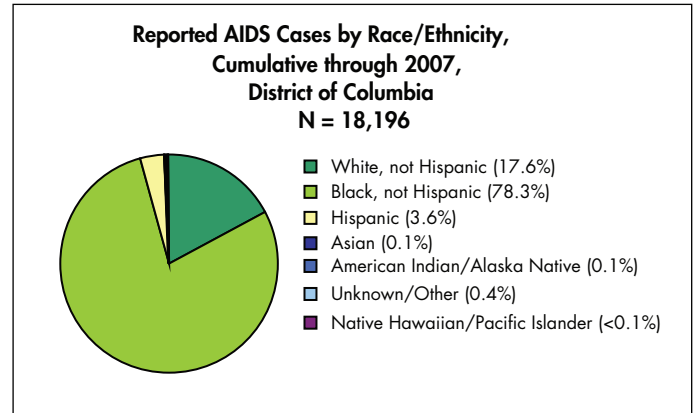
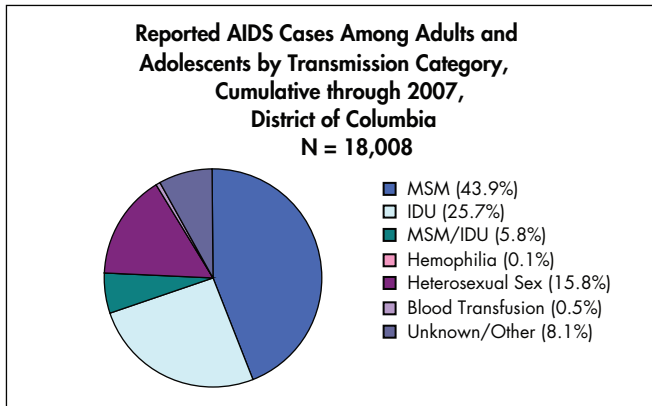


WASHINGTON, DISTRICT OF COLUMBIA – 2008 Profile

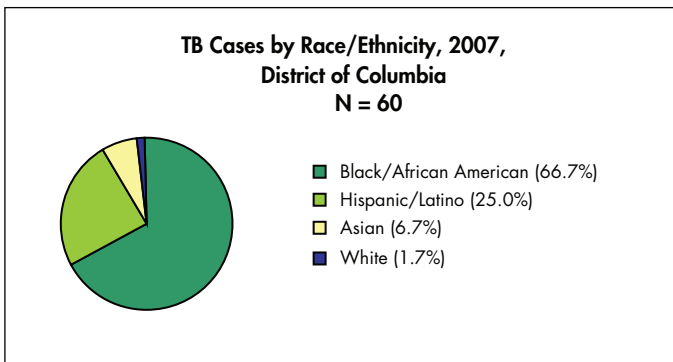
HIV/AIDS Epidemic

HIV/AIDS has claimed the lives of over 550,000 Americans. Today, about 1.1 million Americans are living with HIV, the virus that causes AIDS, and one fifth of those infected are unaware of their infection.



District of Columbia reported 18,196 AIDS cases to CDC, cumulatively from the beginning of the epidemic through December 2007.

Tuberculosis (TB)



Although the overall rate of TB in the U.S. has declined substantially since 1992, the rate of decrease among foreign-born persons has been much smaller than that for U.S.-born persons.

In 2007, the District of Columbia reported:

- A TB rate of 10.2 per 100,000 persons.
- 40% of TB cases occurred in foreign-born persons.

Hepatitis A, B, and C Virus (HAV, HBV, HCV)

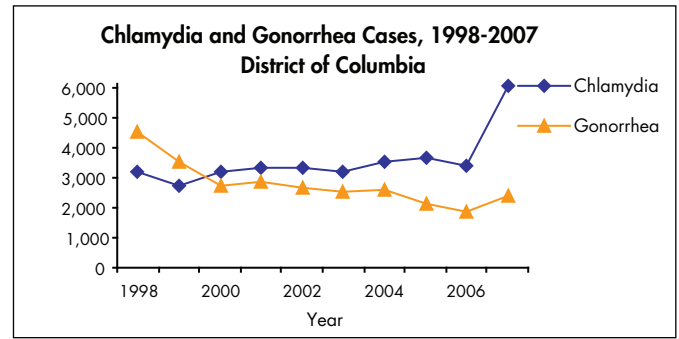
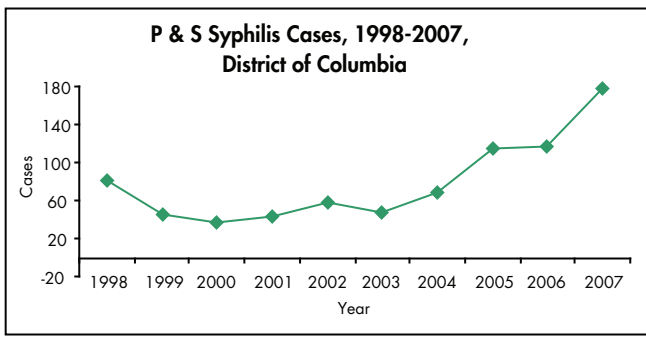
In the U.S., incidence of acute HAV and HBV in 2006 was the lowest ever recorded due to the availability of safe and effective vaccines. But there is no vaccine for HCV, and chronic HBV and HCV account for more than 50% of new cases of chronic liver disease, a leading cause of death. Approximately 4.5 million people are estimated to be living with HBV and HCV infection, and of that number, approximately 50% are unaware of their status.

In District of Columbia, between 1997 and 2006:

- Reported rates of acute hepatitis A decreased by 75%.
- Reported rates of acute hepatitis B decreased by 74%.

The District of Columbia began reporting cases of chronic Hepatitis C infection to the CDC in 2006.

Sexually Transmitted Diseases (STDs)



Syphilis – Primary and secondary (P&S) syphilis (the stages when syphilis is most infectious) remains a problem in the southern U.S. and some urban areas.

- District of Columbia had 30.6 cases of P&S syphilis per 100,000 persons.
- The number of congenital syphilis cases decreased from 8 in 1998 to 1 in 2007.

Chlamydia and Gonorrhea – Chlamydial and gonorrheal infections in women are usually asymptomatic and often go undiagnosed. Untreated, these infections can lead to pelvic inflammatory disease, which can cause tubal infertility, ectopic pregnancy, and chronic pelvic pain.

In 2007, District of Columbia:

- Reported chlamydial infection rate of 1036.7 per 100,000 persons and a gonorrheal infection rate of 408.1 per 100,000 persons.
- Reported rates of chlamydia among women (1285.3 cases per 100,000) that were 1.7 times greater than those among men (746 cases per 100,000).

Program Initiatives Supported by CDC

HIV/AIDS – CDC utilizes a comprehensive approach to HIV prevention that includes surveillance, research, interventions, capacity building, and evaluation. In the District of Columbia, CDC supports the health department, 1 community-based organization, and 3 capacity building assistance providers to conduct and support HIV prevention programs. Programs are designed to meet the cultural needs, expectations, and values of the populations they serve, and CDC involves affected communities in the HIV prevention community planning process to ensure that funding goes to those who need it most. Research, surveillance, and other prevention efforts are also supported.

STDs – In the District of Columbia, CDC funds the state health department through the Comprehensive STD Prevention System (CSPS) grant program. CSPS supports a community-wide, science-based, interdisciplinary approach to STD prevention that includes behavioral interventions, medical and laboratory services, disease surveillance, outbreak response, professional development, and STD awareness and education campaigns. As part of its CSPS grant, the District of Columbia receives funding specifically for syphilis elimination. CDC also provides support to national non-governmental organizations in the District of Columbia.

TB – In the District of Columbia, CDC funds the health department for TB prevention and control activities, including surveillance, case management, and directly observed therapy. These funds also support the identification and evaluation of persons exposed to TB, as well as laboratory services, medical consultation for complex TB cases, and training for state and local TB control staff.

Viral Hepatitis – In the District of Columbia, CDC supports an adult viral hepatitis prevention coordinator to provide management, networking, and technical expertise for successful integration of viral hepatitis prevention activities into existing public health programs. CDC also supports a national non-governmental organization headquartered in D.C.

CDC funding to District of Columbia, 2008	
HIV/AIDS	\$21,072,763
STDs	\$3,318,477
TB	\$890,522
Viral Hepatitis	\$453,193

For More Information

District of Columbia: doh.dc.gov/doh/site/default.asp

CDC: www.cdc.gov/nchhstp