

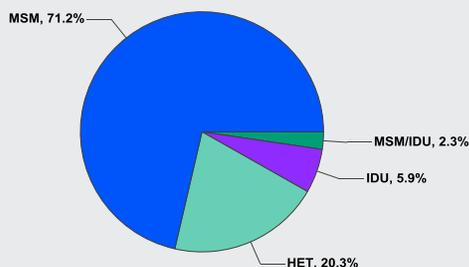
# Ohio – 2015 State Health Profile

## HIV/AIDS Epidemic

In 2013, an estimated 47,165 people in the United States were diagnosed with HIV, the virus that causes AIDS. About 1 in 6 people with HIV in the United States do not know that they are infected.

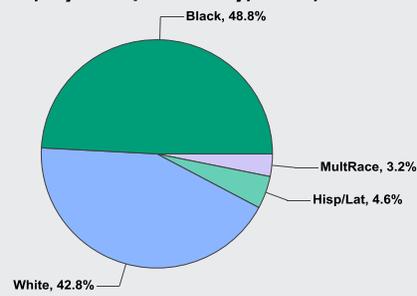
In 2013, an estimated 1,200 adults and adolescents were diagnosed with HIV in Ohio. Ohio ranked 12th among the 50 states in the number of HIV diagnoses in 2013.

**Estimated adults and adolescents diagnosed with HIV, by transmission category, Ohio, 2013**



\*MSM, men who have sex with men; IDU, injection drug users; MSM/IDU, men who have sex with men who also inject drugs; HET, Heterosexuals  
 \*\*Other: <0.333%

**Estimated adults and adolescents diagnosed with HIV, by race/ethnicity, Ohio, 2013**



\*AI/AN, American Indian/Alaska Native; Black, Black/African American; Hisp/Lat, Hispanic/Latino; MultRace, Multiple races; NHPI, Native Hawaiian/Other Pacific Islander; Unk, Unknown  
 \*\*NHPI, AI/AN, Asian: <0.67%

## Adolescent and School Health

Many young people engage in sexual risk behaviors that can result in unintended health outcomes. Sexual risk behaviors place adolescents at risk for HIV infection, other sexually transmitted diseases, and unintended pregnancy.

## Sexually Transmitted Diseases (STDs)

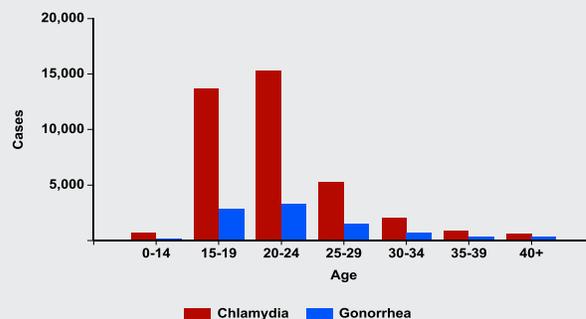
**Syphilis** – Primary and secondary (P&S) syphilis (the stages in which syphilis is most infectious) remains a health problem, primarily among men who have sex with men, but congenital transmission of syphilis from infected mothers to their unborn children persists in many areas of the country.

- In Ohio, the rate of primary and secondary syphilis was 3.1 per 100,000 in 2009 and 3.8 per 100,000 in 2013. Ohio now ranks 24th in rates of P&S syphilis among 50 states.
- There were 67 cases of congenital syphilis from 2009 through 2013.

**Chlamydia and Gonorrhea** – Untreated STDs are a common cause of pelvic inflammatory disease, infertility and chronic pelvic pain. In addition, they can increase the spread of HIV, and cause cancer. Pregnant women and newborns are particularly vulnerable. In 2013, Ohio:

- Ranked 19th among 50 states in chlamydial infections (460.2 per 100,000 persons) and ranked 7th among 50 states in gonorrheal infections (144 per 100,000 persons).
- Reported rates of chlamydia among women (648.9 cases per 100,000) that were 2.5 times greater than those among men (262.8 cases per 100,000).

**Chlamydia and Gonorrhea among Women by Age Group, Ohio, 2013**



## Tuberculosis (TB)

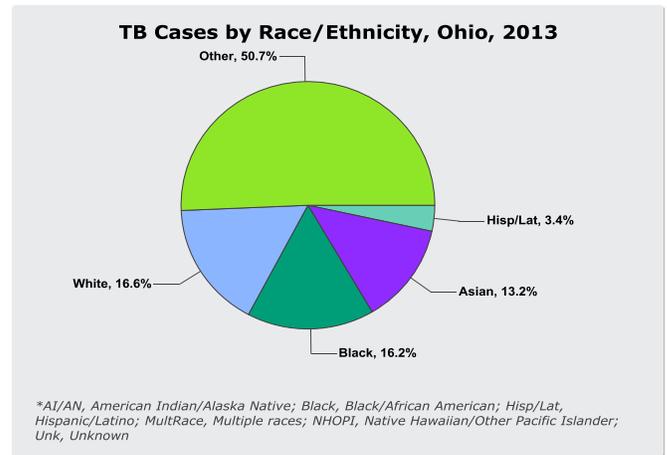
Although the overall rate of TB in the United States has declined substantially since 1992, the rate of decrease among foreign-born persons has been much smaller than that for U.S.-born persons. In 2013, Ohio:

- Ranked 38th among the 50 states in TB rates (1.3 per 100,000 persons).
- 54.05% of TB cases occurred in foreign-born persons.

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

In the United States in 2013, incidence of acute HAV and HBV was the lowest ever recorded due to the availability of safe and effective vaccines. However, 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 4.4 million people are estimated to be living with HBV and HCV infection; most do not know they are infected. In Ohio, between 2009 and 2013:

- Reported rates of acute hepatitis A did not increase.
- Reported rates of acute hepatitis B increased by 137%.
- Reported rates of acute hepatitis C increased by 400%.



## Program Initiatives Supported by CDC

CDC Funding to Ohio, 2014	
HIV/AIDS	\$7,516,047
STDs	\$3,205,893
TB	\$2,517,874
Viral Hepatitis	\$429,554

**HIV/AIDS** – CDC funds the Ohio State health department to implement a high impact approach to HIV prevention, prioritizing the delivery of evidence-based, cost-effective, scalable interventions to the most affected communities and regions of the state. Funded activities include surveillance, program implementation and service delivery, capacity building, and routine program

monitoring and evaluation. CDC also funds a community-based organization and supports the state and a local school district for HIV school health activities.

**STD** – In Ohio, CDC funds the State health department through a grant program that supports a community-wide, science-based, interdisciplinary approach to addressing STDs that includes prevention activities; assessment, including disease surveillance; assurance; and policy development. Ohio also participates in the Gonococcal Isolate Surveillance Project.

**TB** – In Ohio, CDC funds the State and a local 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. CDC also funds a university in Ohio for TB research.

**Viral Hepatitis** – In Ohio, CDC supports an adult viral hepatitis prevention coordinator to integrate viral hepatitis prevention activities into existing public health programs. CDC also supports a project to improve viral hepatitis screening and linkage to care in Ohio.

### For More Information

Ohio: <http://www.odh.ohio.gov/> CDC: <http://www.cdc.gov/nchstp/>