HIV/AIDS responses in China should focus on the impact of global integration

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**Summary**  
China has made substantial progress in tackling its Human immunodeficiency virus (HIV) epidemic, however, the number of people living with HIV / acquired immunodeficiency syndrome (AIDS) continues to increase, with the number of all-cause deaths rising. There are a total 75.6 million people living with HIV and 2.39 million people newly infected with HIV as of December 31, 2017 in China. Besides, while the number of new HIV infections continued to decline in 2017 globally, the data from Chinese Center for Disease Control and Prevention (CCDC) show steady increases in new HIV infections in China. The compound annual growth rate (CAGR) of new HIV infections in China from 2012 to 2017 was 10.29\%, and the CAGR of AIDS-related deaths was 5.92\%. Moreover, there was a sudden increase in new HIV infections in China from January 2018, showing the compound monthly growth rate (CMGR) of 2018 increased by 9.92\% compared to 2017. Given the advance of globalization, it is increasingly important to focus on the impact of global integration for HIV/AIDS responses, facing the increasing challenge of key affected populations such as men who have sex with men (MSM), young people and older people. Certainly, comprehensive strategies for prevention, drug treatment, and even functional cure will also be crucial for curbing the HIV epidemic in China in the new era.

**Keywords:** HIV/AIDS response, globalization, growth trend, key population

Human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) continue to be a major global public health issue, having claimed more than 35 million lives so far (1). Although new HIV infections fell by 36\% and HIV-related deaths fell by 38\% between 2000 and 2017, people living with HIV increased by 14\% between 2010 and 2017, indicating the HIV/AIDS epidemic is still on the rise (2). With the advance of globalization, it is increasingly important to focus on the impact of global integration for HIV/AIDS responses.

1. New HIV infections in China increased rapidly since 2018

China has made substantial progress in HIV/AIDS response in the last decade and increased national measures have stemmed its epidemic across the country as well as improving the quality of life for people living with HIV.

Despite these efforts, the number of people living with HIV/AIDS continues to increase, with the number of all-cause deaths rising (Figure 1) (3-8). There are a total 75.6 million people living with HIV and 2.39 million people newly infected with HIV as of December 31, 2017 in China. Besides, the data from Chinese Center for Disease Control and Prevention (CCDC) show steady increases in new HIV infections in China, while the number of new HIV infections globally continued to decline in 2017 (Figure 2) (3-8). The compound annual growth rate (CAGR) of new HIV infections in China from 2012 to 2017 was 10.29\%, and the CAGR of AIDS-related deaths was 5.92\%. Moreover, there was a sudden increase in new HIV infections in China from January 2018, showing the compound monthly growth rate (CMGR) of 2018 increased by 9.92\% compared to 2017. Figure 3 shows the compound monthly growth rate (CMGR) of 2018 increased by 9.92\% compared to 2017 (3-9). By July of this year, the number of new HIV
infections has reached 91,301, with sexual transmission accounting for 91.76% (9).

The development of globalization affects the HIV epidemic at this stage, so that we should pay more attention to the impact of the process of global integration development in the process of HIV/AIDS responses.

2. Impact of global integration needs to be taken seriously for HIV/AIDS responses

China has a relatively low national HIV prevalence rate, but with higher-prevalence in some groups. Given global integration, China is also faced with the increasing challenge of key affected populations such as men who have sex with men (MSM), young people and older people.

MSM. HIV prevalence among MSM has been rising in China in this day and age. The data from the 5th National Conference on HIV/AIDS showed the average prevalence of HIV infection to be 7.3% in the MSM group (10). It is clear that the HIV epidemic among men who have sex with men is a concern in China so that a more effective response that meets this group’s needs should be conducted.

Young people. One of the growing key affected populations in China is young people who are more likely to accept the impact of new things. CCDC reports the proportion of new infections among people aged 15 to 24 has increased by 13.1% from 2008 to 2017, and 81.8% of young students have been among young men who have sex with men in 2017 (10). It is therefore vital that HIV services and education are tailored to the key affected groups within this younger population.

Older people. Given population aging in the world, elderly HIV infections are gradually increasing. Sex demand and openness are the major factors in the rising HIV epidemic among HIV-infected people among the elderly age 60 or over whose prevalence rate increased from 7.4% to 14.7% in 2010-2017 (10). Elderly people HIV/AIDS policy in China is limited, and the design and formulation of HIV/AIDS policies and programs will be important in tackling the epidemic among this population in China.

3. Expectations for HIV/AIDS responses in a globalized world

It is clear that China’s epidemic significantly affects key populations around the country in such a globalized world, including MSM, young people and older people.
Greater effort, including large-scale publicity campaigns, health education activities, condom promotion, HIV testing and counselling, etc., will be required for providing more targeted interventions that adequately and effectively support these groups.

Therefore, comprehensive strategies for prevention, drug treatment, and even functional cure will also be crucial for curbing the HIV epidemic in China in the new era. Certainly, China's comprehensive approach to HIV can provide important data and lessons for many countries in Asia and the Pacific and beyond.

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References


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