

NIGERIA NATIONAL HIV SURVEILLANCE REPORT February 2022 Edition

OVERVIEW

Data is for February 2022 and was downloaded from the NDR on 13 March 2022

HIV Surveillance is the ongoing systematic collection, analysis, interpretation, and use of data to improve health determinants and disseminate information regarding HIV/AIDS related events. In Nigeria, data is collected from client-centred monitoring throughout the cascade of clinical care to guide the national response and understand the trend of the epidemic. As Nigeria approaches epidemic control, three surveillance activities have been key in tracking the epidemic: HIV-1 Recent Infection Surveillance, Casebased Surveillance (CBS), and Mortality Surveillance (MS).

HIV-1 RECENT INFECTION SURVEILLANCE



Figure 1 HIV-1 Recent Infection Surveillance cascade in February 2022



The chart above summarises HIV-1 Recent Infection Surveillance in 271 activated facilities and it displays the number of clients with new HIV+ diagnosis, number of HIV+ clients who had RTRI, and number of RTRI recent clients who had viral load confirmation for RITA.

Figure 2

Geographical distribution of confirmed (RITA) recent infections from March 2020 to February 2022



The map above is a geographical distribution of confirmed RITA recent infections from March 2020 to February 2022.

Figure 3a

Confirmed (RITA) recent infection by age and sex in Nigeria from March 2020 to February 2022



Figure 3b Recent infection rates disaggregated by age & sex in February 2022



Figure 3c

Confirmed recent infection February 2021 to February 2022



CASE-BASED SURVEILLANCE

Case-based Surveillance systematically and continuously collects data on demographic and health events (sentinel events) about clients with HIV infection from diagnosis and routine clinical care to final outcomes. This data is used to characterize the HIV epidemic and guide program improvement.

Figure 4



Monthly trend of clients by sex who commenced treatment over the past six months as of February 2022

Figure 5



Figure 6 Client CD 4 COUNT < 200 and ≥ 200 in February 2022



Figure 7



Figure 8

Distribution of Advanced HIV Disease (WHO stage III and IV HIV disease) by age and sex in February 2022



Figure 9

Distribution of newly diagnosed HIV+ clients with WHO stage III & IV HIV disease by state in February 2022



MORTALITY SURVEILLANCE

Mortality surveillance aims to determine the distribution and patterns of leading causes of death among people living with HIV (PLHIV) on treatment and the use of this information to reduce preventable deaths. The 2016 WHO Verbal Autopsy (VA) instrument is administered to eligible and consenting primary caregivers (usually a family member) who were with the deceased in the period leading to death. Data collected from VA is then uploaded to SmartVA analyze to generate the cause of death.

Figure 10a





Figure 10b Deaths by age and sex in February 2022



Figure 10c

AIDS-related and non-AIDS-related causes of death as of February 2022



Figure 11

Monthly trend of deaths in MS activated facilities by state as of February 2022



Figure 12 Death rates among clients currently on treatment in February 2022





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