



NIGERIA

NATIONAL HIV SURVEILLANCE REPORT

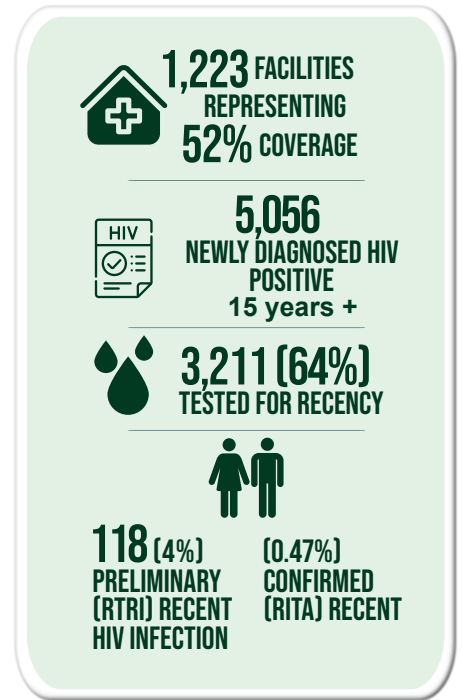
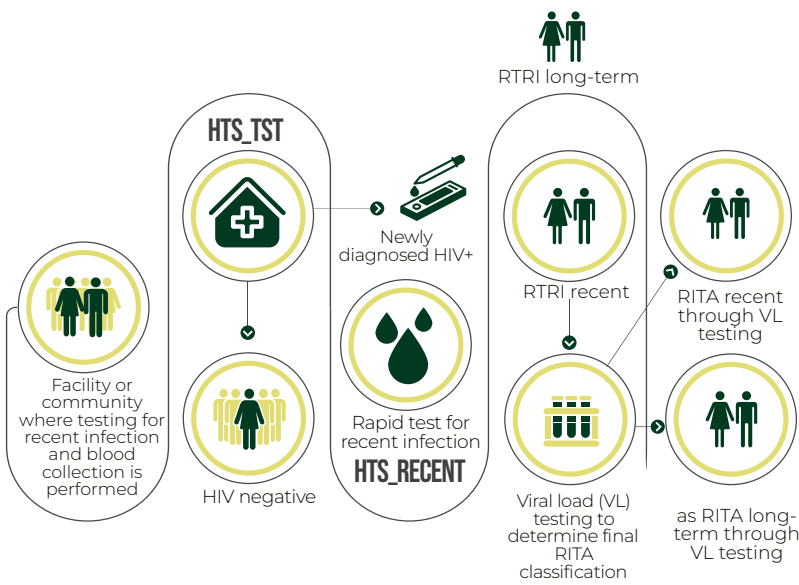
May 2024 Edition

Data is for May 2024 and was downloaded from the NDR on 19 June 2024

OVERVIEW

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, Case-based Surveillance (CBS), and Mortality Surveillance (MS).

HIV-1 RECENT INFECTION SURVEILLANCE



The chart below summarizes HIV-1 Recent Infection Surveillance in 1,223 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.

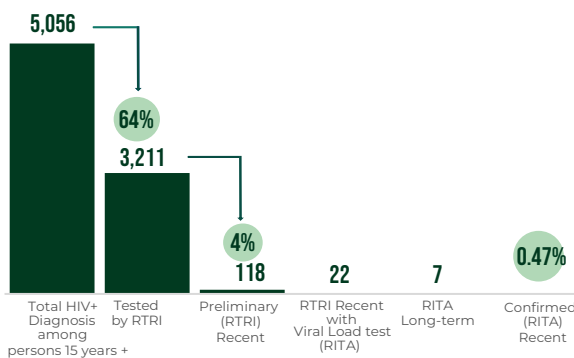


Figure 1
HIV-1 Recent Infection Surveillance Cascade in May 2024.

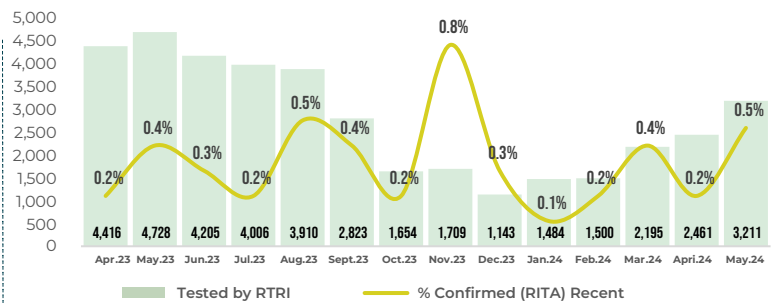
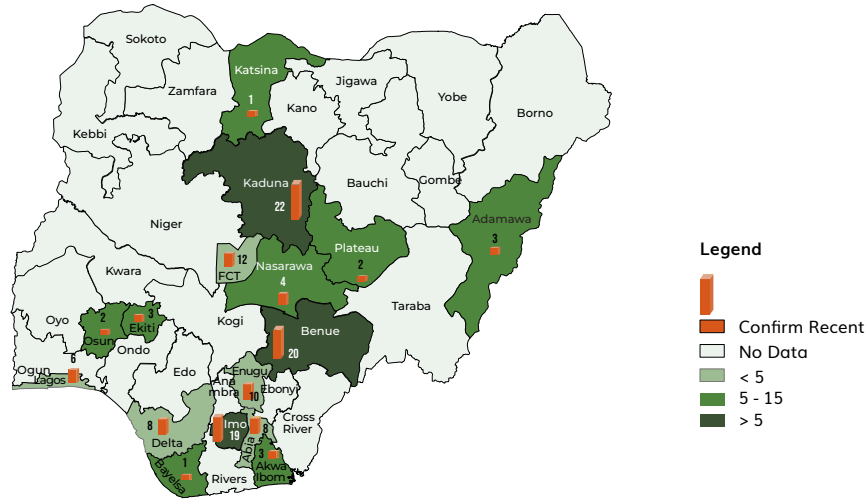


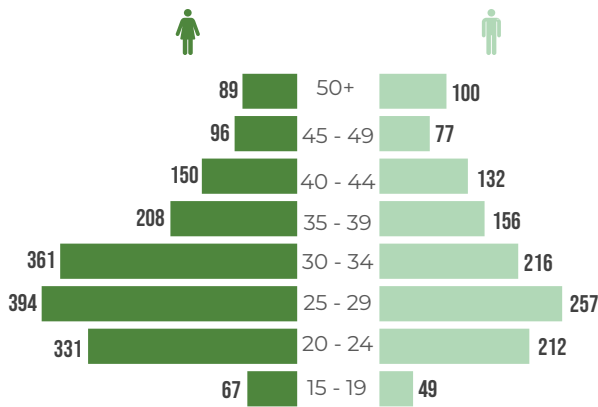
Figure 2
Trend of confirmed recent infection as of May 2024.



The chart above highlights the distribution of HIV recent infection cases by states between January to May 2024.

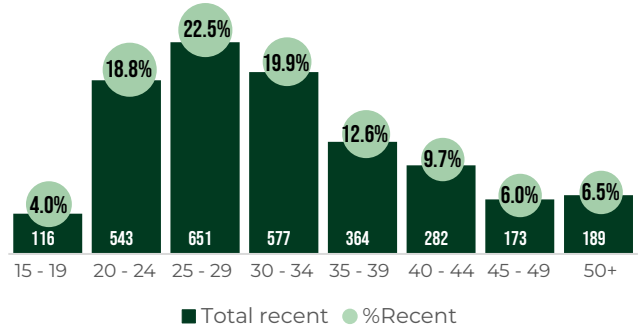
Figure 3

Distribution of confirmed recent infection cases by State from January 2024 to May 2024



The figure above shows the distribution of confirmed recent infections by age and sex as of May 2024.

Figure 4a
Recent infection by age and sex as of May 2024



The chart above represents the percentage of recent infections by age distribution.

Figure 4b
Percentage of Recent Infections by Age as of May 2024

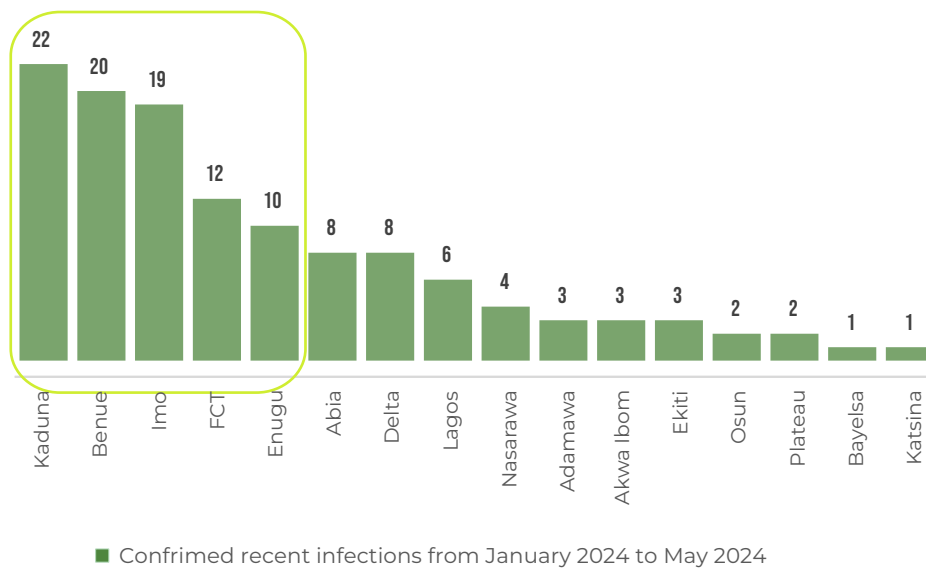
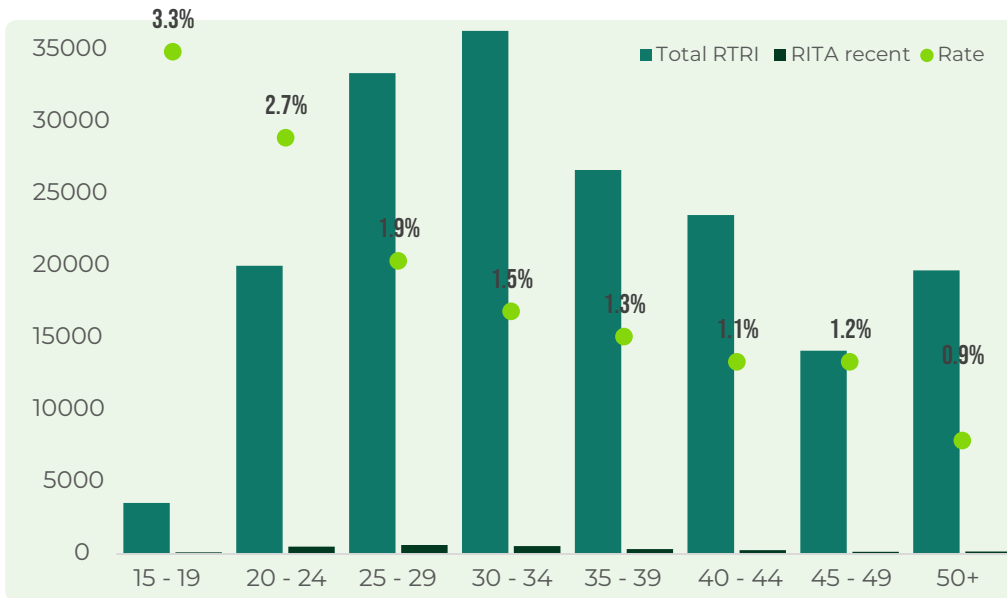


Figure 5
Top five states with confirmed recent infection cases from January 2024 to May 2024



The rate of confirmed recent infection is highest among the younger population. The age band 15-19 is highest, followed by 20-24, it is lowest amongst the age band 50 and above.

Figure 6
The proportion of confirmed recent infections by age as of May 2024.

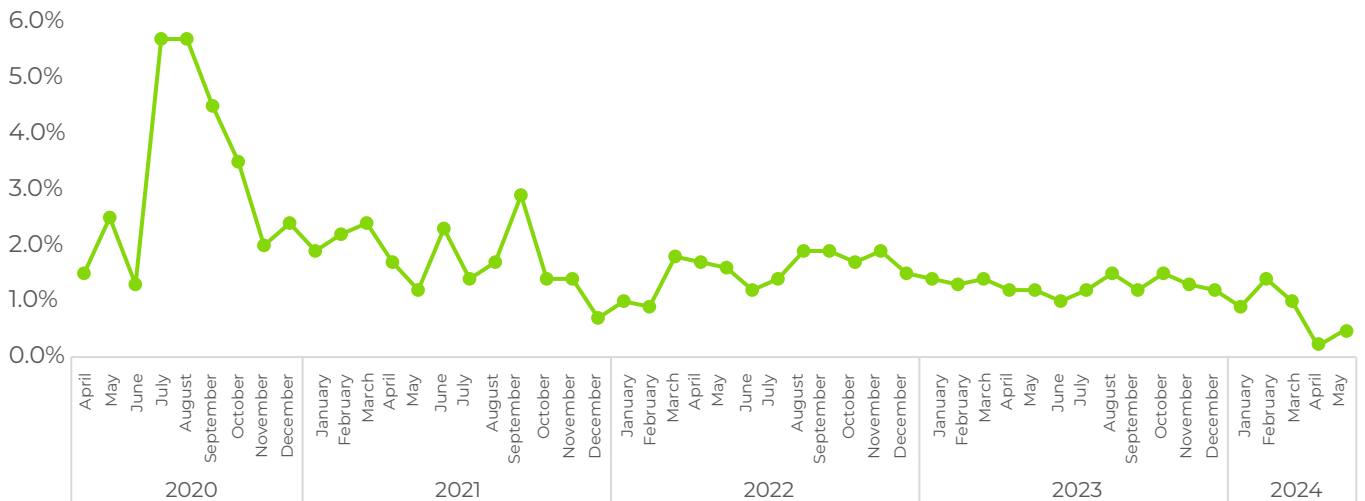
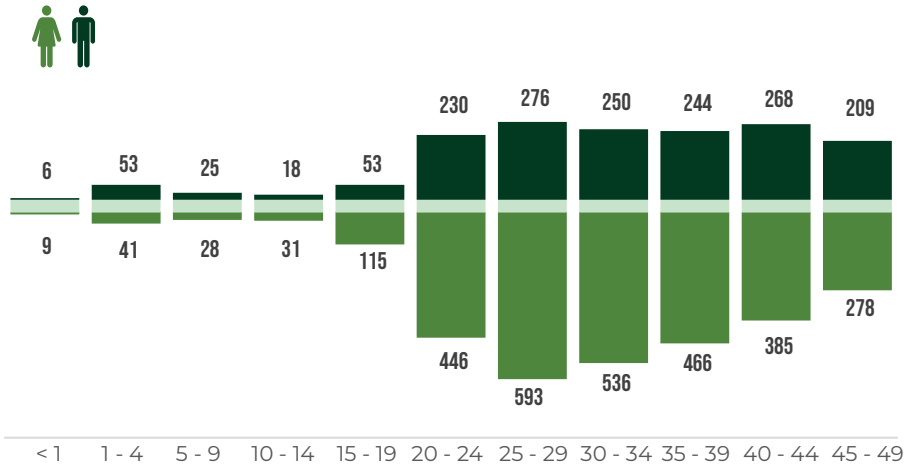


Figure 7
Monthly trend of recent infection rates from 2020 to date.

The chart above depicts the monthly trend of recent infection rates in Nigeria, the chart shows a consistent downward trend from Q4 of 2020 to date.

CASE-BASED SURVEILLANCE

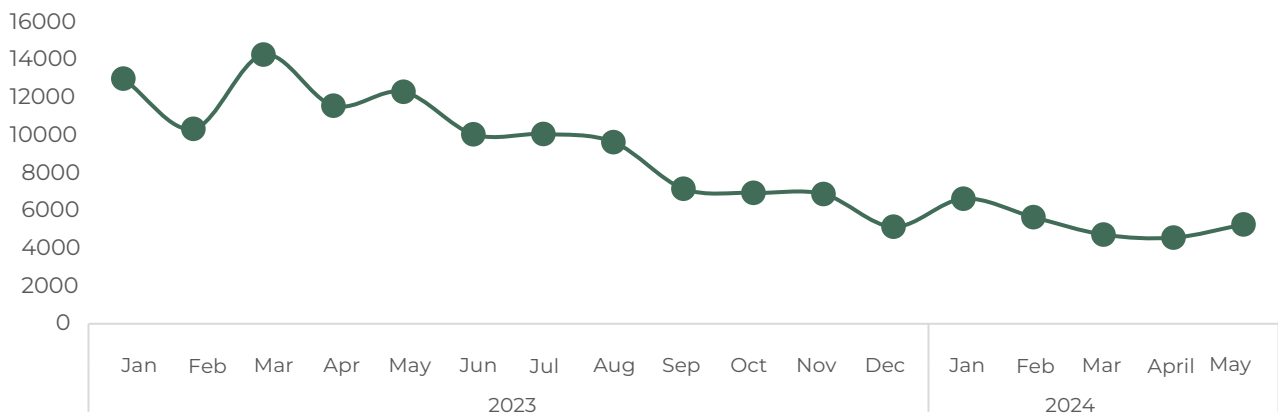
Case-based Surveillance systematically continuously collects data on demographic and health events (sentinel events) about clients with HIV infection from diagnosis and routine clinical care to final outcomes. This data is used to characterize the HIV epidemic and guide program improvement.



The data presented in the chart indicates a higher number of newly diagnosed HIV-positive cases among the female population. Additionally, within the age group analysis, individuals aged 25-29 years exhibited the highest incidence of newly identified HIV cases.

Figure 8a

Number of clients newly diagnosed HIV+ in May 2024



The chart above shows a downward trend of clients newly diagnosed HIV+ from January 2023 to May 2024.

Figure 8b

Trend of Newly Diagnosed HIV Positive Cases.

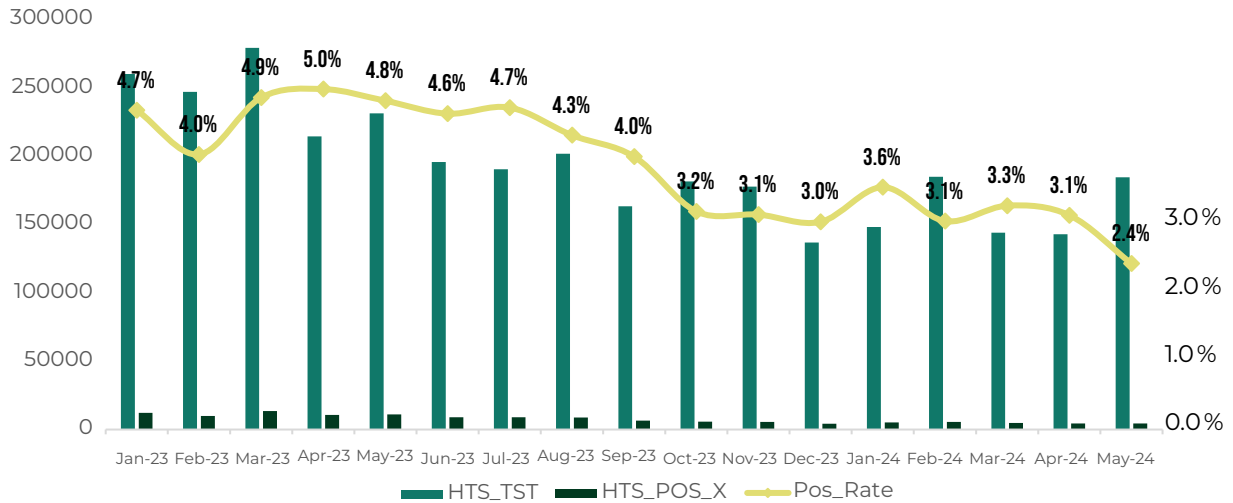
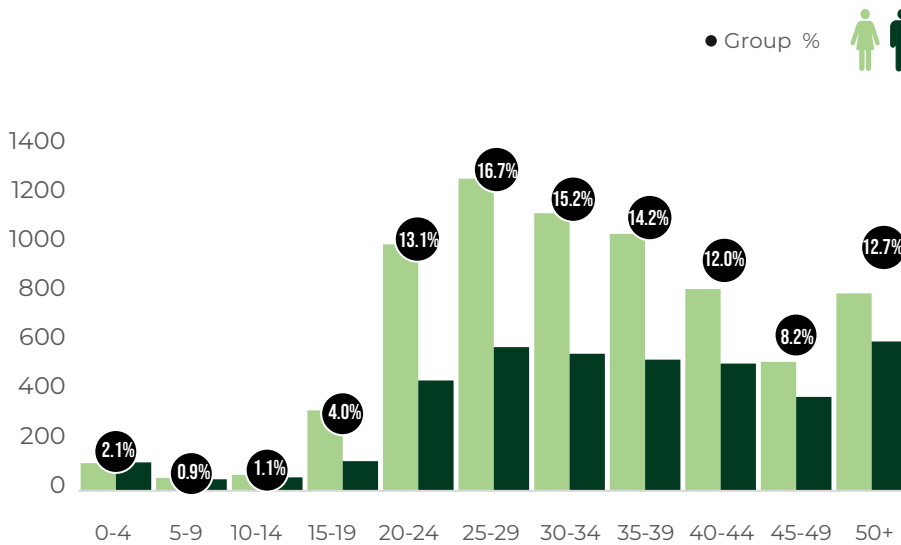


Figure 8c
Trend of clients newly diagnosed HIV+ and their positivity rate from January 2023 to May 2024



This chart shows the number of clients who tested HIV+ and commenced treatment (linkage) from January 2024 to May 2024. The number of clients who commenced treatment is highest in the **25-29** age band with **(16.7%)**, closely followed by age band **30-34** with **(15.2%)**, the lowest is amongst the age band **5-9 (0.9%)**.

Figure 9a
The number of clients started on treatment from January to May 2024.

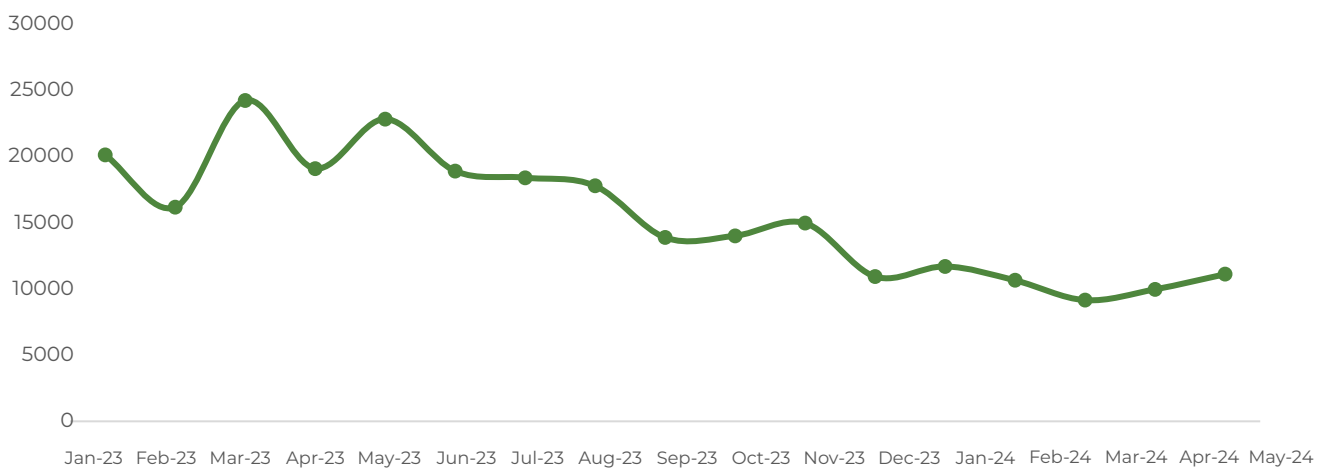


Figure 9b
Trend of clients who commenced treatment from January 2024 to May 2024



Figure 10a
Client CD 4 COUNT < 200 and > =200 At initiation in May 2024

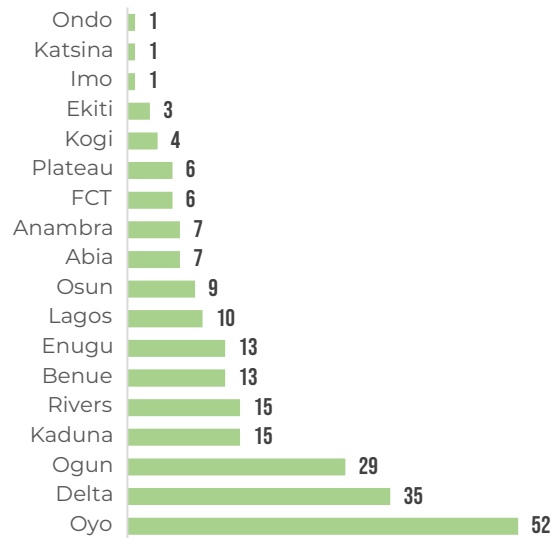


Figure 10b
AHD using clinical stage three and four of clients from January 2024 to May 2024

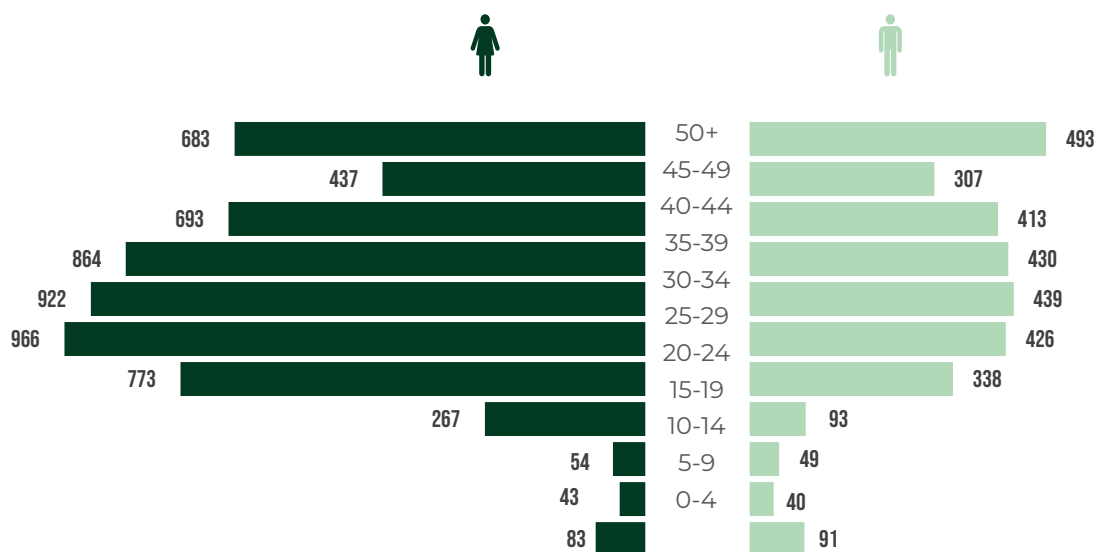


Figure 11
Distribution of Advanced HIV Disease (WHO stage III and IV HIV disease, CD4 less than 200 and children under five) by age and sex from January 2024 to May 2024

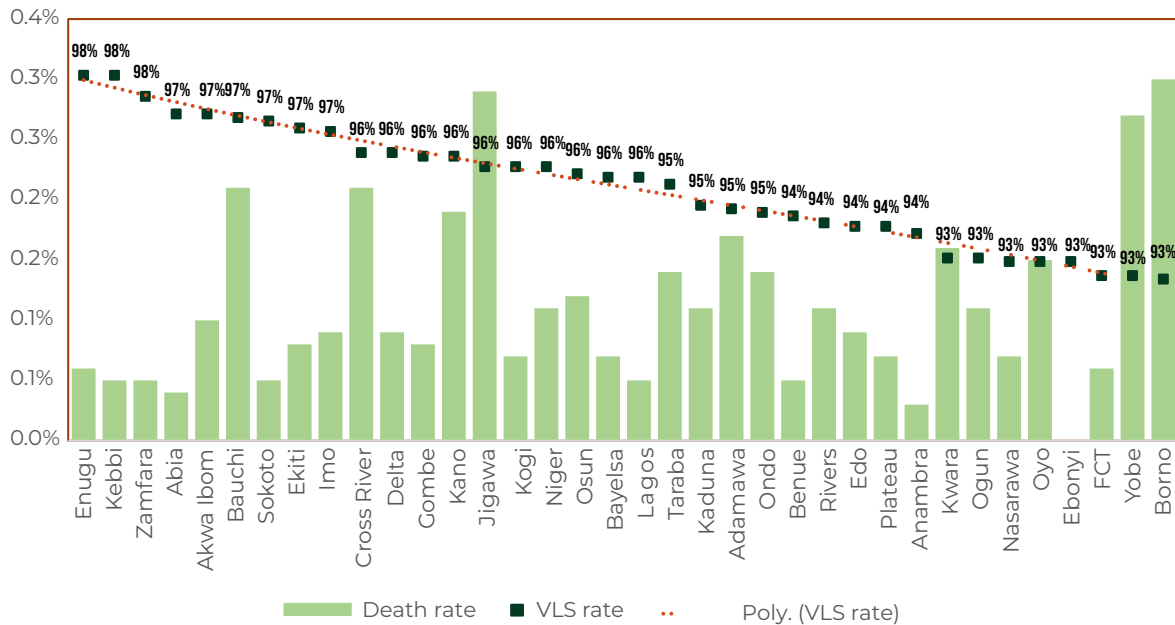
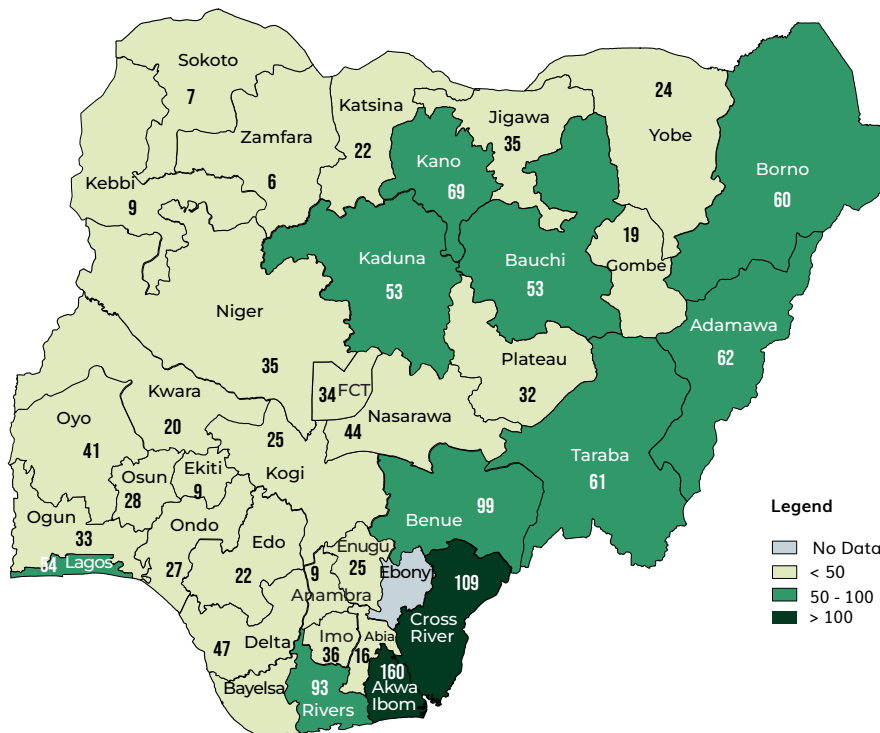


Figure 12
Death rate among states with high viral load suppression rate as of May 2024

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.



The chart above shows a distribution of death amongst PLHIV in Nigeria from 1st of May to 30th of May 2024.

Figure 13
Distribution of deaths by States in May 2024.

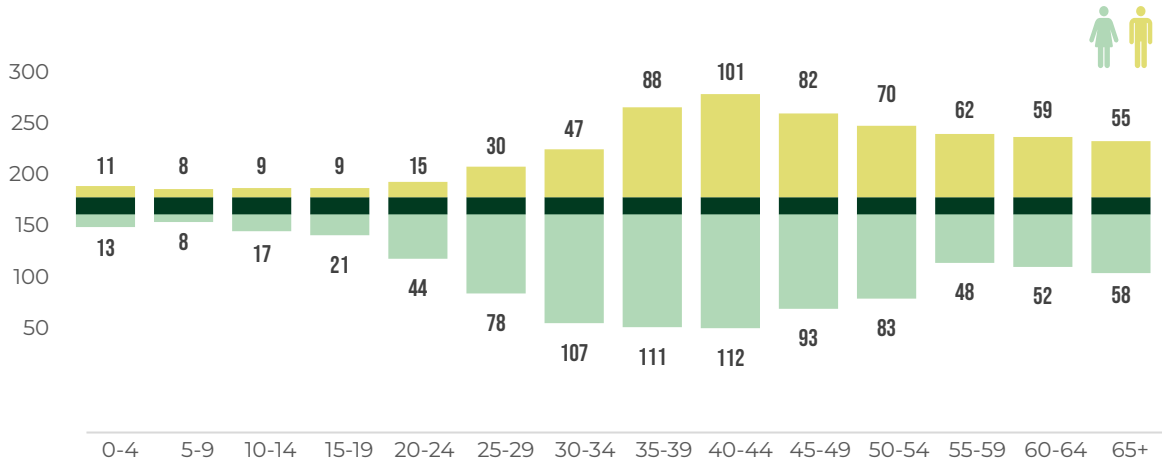
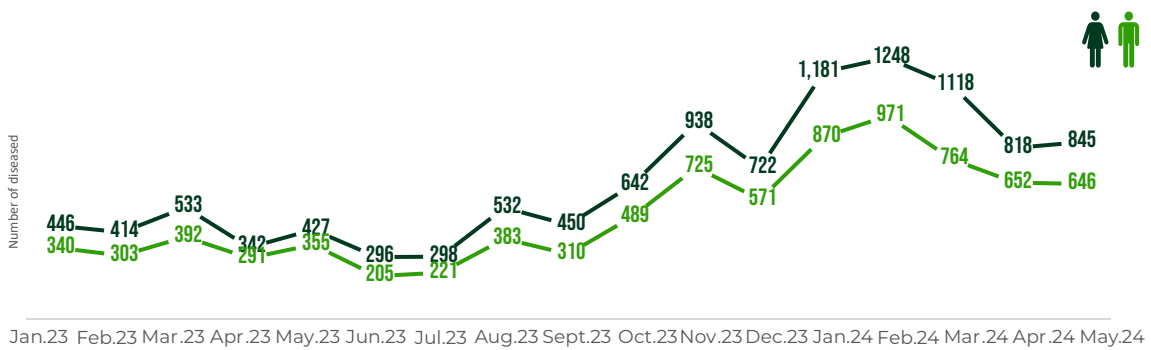
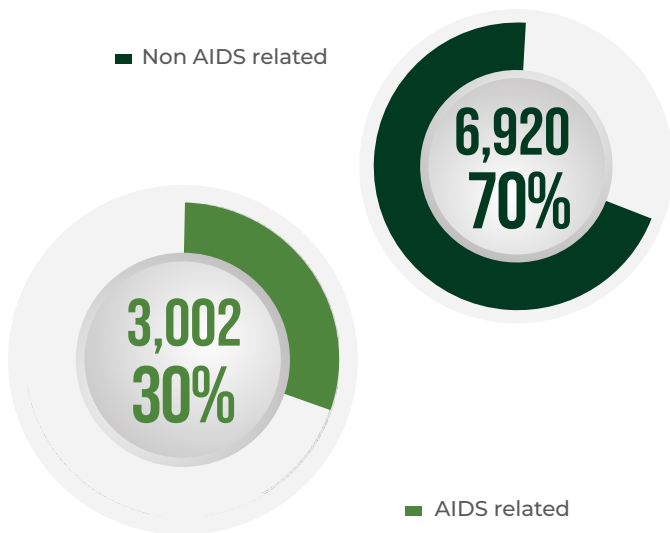


Figure 14a
Distribution of Deceased clients by age and Sex in May 2024.





The chart above provides insights into the monthly distribution of client on ART who died as of May 2024, the number of reported deaths increased from January to March and begins to decline in April


Figure 14b
Trends of death by Sex as of May 2024.



30% of the VA's conducted were AIDS related whereas 70% was non-AIDs related as of May 2024.

Figure 15
AIDS-related and non-AIDS-related cause of death amongst PLHIV as of May 2024



1,491 Total Deaths recorded in May 2024.  **845**  **646**

 **30** Total number of states where mortality surveillance is activated.

473 Total number of activated facilities in these states.

9,922 VAs conducted as of May 2024 to determine the causes of death.

1,462 Deaths were recorded in Mortality surveillance activated facilities in May 2024.

 **830**  **632**

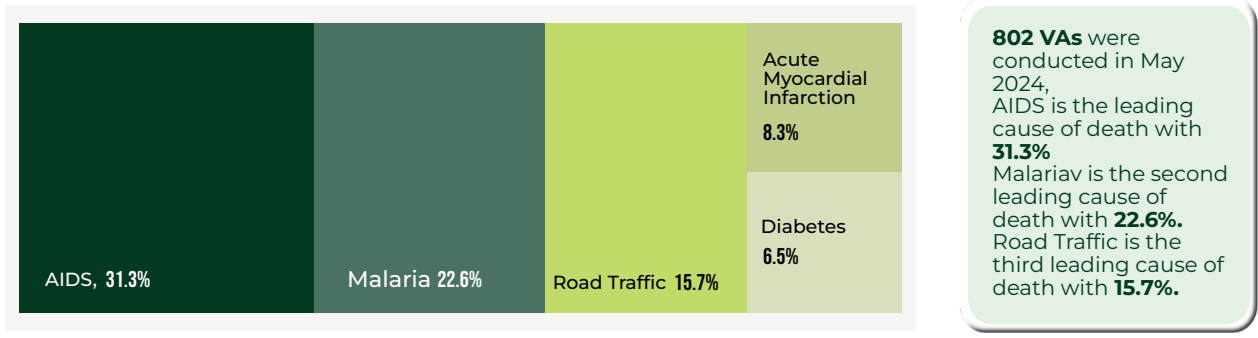
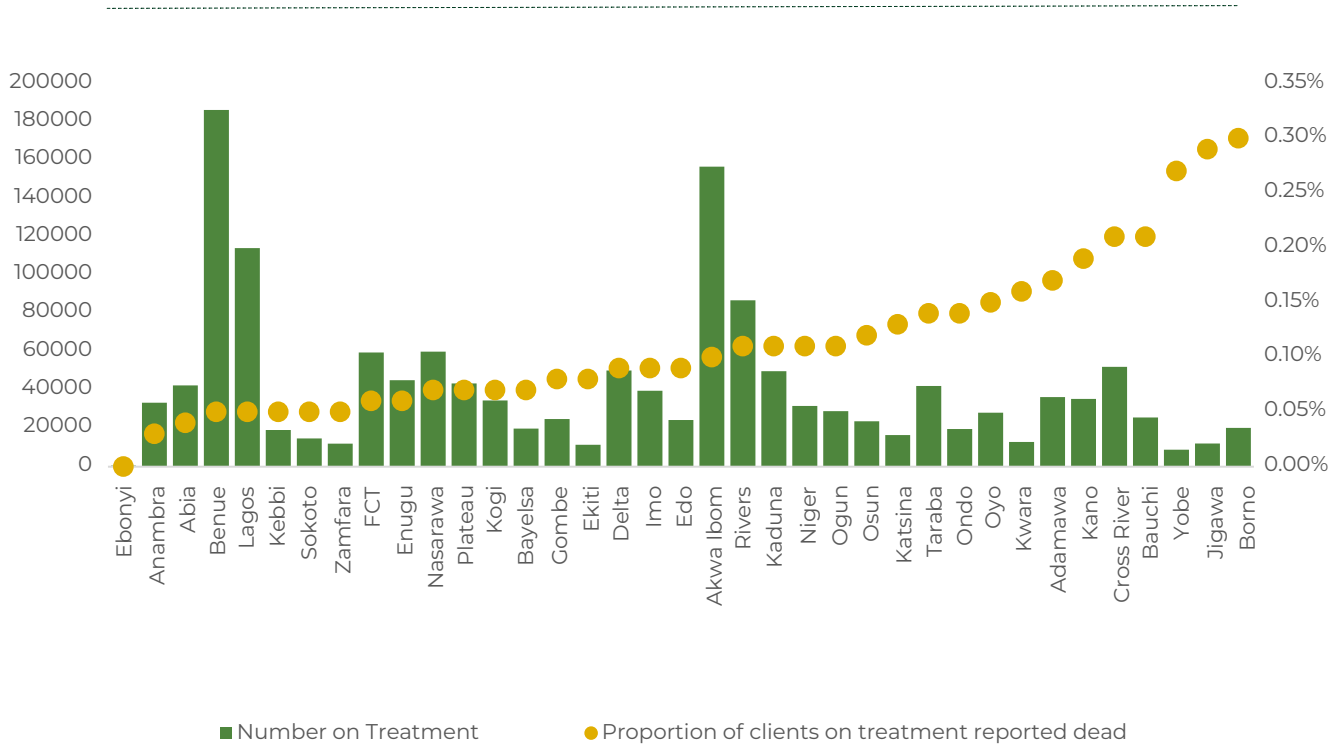


Figure 16
Top 5 causes of death among PLHIV in May 2024.



This chart shows the proportion of clients who were reported dead in May 2024. The death rate was calculated as the number of clients on treatment who are reported dead per the total number of clients active on treatment. A high death rate is recorded amongst states with lower TX_CURR.

Figure 17
The proportion of clients on treatment reported dead in May 2024.