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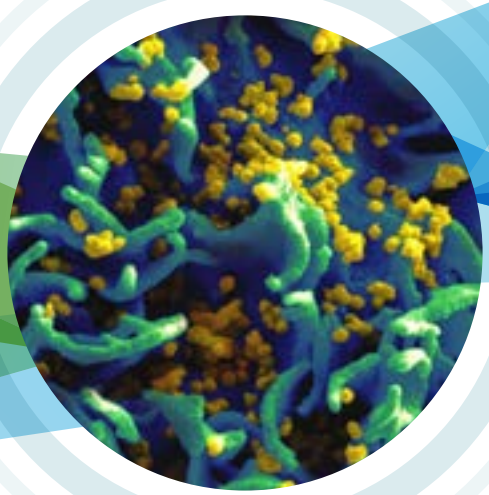

HIV/AIDS surveillance in Europe

2020

2019 data

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Abstract
HIV transmission remains a major public health concern and affects more than 2 million people in the WHO European Region, particularly in the eastern part of the Region. This report is the latest in a series published jointly by the European Centre for Disease Prevention and Control (ECDC) and the WHO Regional Office for Europe that has been summarizing data on HIV and AIDS in the WHO European Region and in the European Union and European Economic Area (EU/EEA) since 2007. It finds that while epidemic patterns and trends vary widely across European countries, nearly 137 000 people were diagnosed with HIV in the European Region in 2019, including 25 000 in the EU/EEA.

Keywords
ACQUIRED IMMUNODEFICIENCY SYNDROME – EPIDEMIOLOGY
AIDS – PREVENTION AND CONTROL
DISEASE OUTBREAKS – STATISTICS
HIV INFECTIONS – EPIDEMIOLOGY
POPULATION SURVEILLANCE

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

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Cover picture: NIAID
Suggested citation for full report. European Centre for Disease Prevention and Control, WHO Regional Office for Europe. HIV/AIDS surveillance in Europe 2020 – 2019 data. Copenhagen: WHO Regional Office for Europe; 2020.
Suggested citation for tables and figures. European Centre for Disease Prevention and Control, WHO Regional Office for Europe. HIV/AIDS surveillance in Europe 2020 – 2019 data.

ECDC PDF	ISBN 978-92-9498-527-9	doi 10.2900/073965	TQ-02-20-965-EN-N
WHO	ISBN 978-92-8905a-534-5		

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Acknowledgements

The report was coordinated by Anastasia Pharris (European Centre for Disease Prevention and Control (ECDC)) and Giorgi Kuchukhidze (WHO Regional Office for Europe).

Review and production support was provided by Nino Berdzuli (WHO Regional Office for Europe), Mike Catchpole (ECDC), Masoud Dara (WHO Regional Office for Europe), Karl Ekdahl (ECDC), Esther Kissling (EpiConcept), Vicky Lefevre (ECDC), Antons Mozalevskis (WHO Regional Office for Europe), Stine Nielsen (freelance consultant), Teymur Noori (ECDC), Adrian Prodan (ECDC), Nicole Seguy (WHO Regional Office for Europe), Marieke J. van der Werf (ECDC) and Elena Vovc (WHO Regional Office for Europe).

ECDC and the WHO Regional Office for Europe would like to thank the nominated operational contact points for HIV/AIDS surveillance from European Union/European Economic Area (EU/EEA) Member States and the HIV/AIDS surveillance focal points from the non-EU/EEA Member States and areas of the WHO European Region for providing data and valuable comments on this report.

Albania: Marjeta Dervishi; Andorra: Jennifer Fernández Garcia; Armenia: Gohar Mirzoyan; Austria: Daniela Schmid, Ziad El-Khatib; Azerbaijan: Farhad Singatulov, Shahin Khasiyev; Belarus: Svetlana Sergeenko; Belgium: Andre Sasse, Dominique Van Beckhoven; Bosnia and Herzegovina: Dušan Kojić; Bulgaria: Tonka Varleva; Croatia: Tatjana Nemeth Blazic; Cyprus: Linos Hadjihannas, Anna Demetriou; Czechia: Marek Maly; Denmark: Susan Cowan; Estonia: Kristi Rüütel; Finland: Kirsi Liitsola, Mika Salminen; France: Françoise Cazein, Josiane Pillonel, Florence Lot; Georgia: Otar Chokoshvili, Maia Tsereteli; Germany: Barbara Gunsenheimer-Bartmeyer; Greece: Vasilios Raftopoulos, Stavros Patrinos; Hungary: Maria Dudas; Iceland: Marianna Thordardottir, Gudrun Aspelund; Ireland: Derval Igoe, Kate O'Donnell; Israel: Daniel Chemtob, Yana Roshal; Italy: Barbara Suligoi; Kazakhstan: Lolita Ganina, Gulnar Temirkhanov; Kyrgyzstan: Aigul Solpueva; Latvia: Šarlote Konova; Liechtenstein: Andrea Leibold, Marina Jamnicki; Lithuania: Irma Čaplinskienė; Luxembourg: Carole Devaux, Jean-Claude Schmit; Malta: Jackie Maistre Melillo, Tanya Melillo; Monaco: Dominique De Furst; Montenegro: Alma Cicic; Netherlands: Eline Op de Coul, Ard van Sighem; North Macedonia: Milena Stefanovic, Zarko Karadzovski, Rumena Gerdovska; Norway: Hans Blystad, Hilde Klovstad; Poland: Magdalena Rosinska; Portugal: Isabel Aldir, Helena Cortes Martins; Republic of Moldova: Silvia Stratulat, Stepan Gheorghita; Romania: Mariana Mardarescu; Russian Federation: Inna Kulikova, Oleg Sonin, Lyalya Gabbasova; San Marino: Andrea Gualtieri, Mauro Fiorini; Serbia: Danijela Simic; Slovakia: Peter Truska; Slovenia: Irena Klavs, Tanja Kustec; Spain: Asuncion Diaz; Sweden: Maria Axelsson; Switzerland: Martin Gebhardt; Tajikistan: Kholnazarov Ramshed, Zukhra Nurlaminova; Turkey: Emel Özdemir Şahin; Ukraine: Ihor Kuzin, Violetta Martsynovska; and United Kingdom: Valerie Delpech. For Kosovo:[1] Luljeta Gashi.

1 All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Abbreviations

ART	antiretroviral treatment
EECA	Eastern Europe and Central Asia
ECDC	European Centre for Disease Prevention and Control
EU/EEA	European Union/European Economic Area
MSM	men who have sex with men
PrEP	pre-exposure prophylaxis
TB	tuberculosis
TESSy	The European Surveillance System
UNAIDS	Joint United Nations Programme on HIV/AIDS

This report

The European Centre for Disease Prevention and Control (ECDC) and the WHO Regional Office for Europe have jointly carried out the enhanced surveillance of HIV/AIDS in Europe since 2008. Both organizations strive to ensure a high quality of standardized HIV and AIDS surveillance data from the 53 Member States of the WHO European Region, including the 28 countries of the European Union (EU) and three countries of the European Economic Area (EEA), referred to in this report as EU/EEA.

This report is the latest in a series published jointly by ECDC and the WHO Regional Office for Europe that has been reporting data on HIV and AIDS in the WHO European Region since 2008. The data presented in the text are augmented by 40 figures and 31 tables: Fig. A–C and Table A in the Overview, Fig. 1.1–2.19 in Chapters 1 and 2, Tables 1–24 in a discrete section towards the end of the report, maps 1–8 and six tables (A2.1–A7.1) in the annexes.

The report has three main sections:

- an Overview, which effectively summarizes and captures the key issues of the report;
- Chapter 1, providing a comprehensive review of HIV and AIDS in the EU/EEA, focusing on HIV diagnoses, trends in HIV diagnoses, and AIDS cases and their morbidity and mortality; and
- Chapter 2, which presents data on HIV and AIDS diagnoses in the WHO European Region, focusing on HIV diagnoses, trends in HIV diagnoses, AIDS cases and their morbidity and mortality in the Region as a whole and in three geographic areas of the Region, and HIV testing.

The data in the report are also augmented by seven annexes:

- Annex 1, which presents the framework for data collection, validation and presentation;
- Annex 2, focusing on completeness of key variables presented for the EU/EEA and the WHO European Region as a whole;
- Annex 3, defining completeness of key variables presented by country and area;
- Annexes 4 and 4b, providing information on country and area HIV and AIDS surveillance systems;
- Annex 5, detailing country specific notes regarding the reported data and differences in surveillance systems across countries;
- Annex 6, which lists countries and areas with the number of reported diagnoses adjusted for reporting delay; and
- Annex 7, which lists the participating countries and areas and national institutions.

Overview of HIV and AIDS in Europe

The data in this report present new HIV diagnoses through to the end of 2019, the period just before the global COVID-19 pandemic began. The impact of the pandemic on laboratory, clinical and public health institutions involved in HIV surveillance and response has been felt during the data collection and preparation stages of this report, with several countries requiring more time than usual to submit their 2019 HIV and AIDS data or indicating that reporting delays may increase. Several countries reported that it was not possible to report some variables at all or at levels concordant with the past. The European Centre for Disease Prevention and Control (ECDC) and the WHO Regional Office for Europe, in collaboration with Member States and partners, will look carefully at the impact of COVID-19 on HIV surveillance to ensure the continuing high standard of European HIV and AIDS data.

Although HIV infection is preventable, significant HIV transmission continues across the WHO European Region. In 2019, 136 449 newly diagnosed HIV infections were reported in 47 of the 53 Member States in the Region,[2] including 24 801 from countries of the European Union/European Economic Area (EU/EEA). This corresponds to a crude rate of 15.6 newly diagnosed infections per 100 000 population (Table A).

The trend that has persisted over the last decade continues, with rates and overall numbers of people diagnosed with HIV highest in the East of the Region (41.7 per 100 000 population), lower in the West and in the EU/EEA (5.7 and 5.4 per 100 000, respectively) and lowest in the Centre[3] (3.4 per 100 000) (Table A). The main transmission mode also varies by geographical area, illustrating the diversity in the epidemiology of HIV in Europe. Sexual transmission between men was the most common mode in the EU/EEA, while heterosexual transmission and injecting drug use were the main reported transmission modes in the East of the Region.

The number of people newly diagnosed with HIV in the WHO European Region increased by 19% over the last decade, while the number of new diagnoses among countries in the EU/EEA declined by 9% over the same period (Fig. A). When comparing the number of new diagnoses to the estimated number of new HIV infections over the last decade in the Region, it is evident that for most of this period, more people became infected with HIV than had been diagnosed, indicating that the number of people living in the Region with undiagnosed HIV is increasing. In contrast, it is estimated that more people in the EU/EEA have been diagnosed than are becoming infected, indicating that the proportion of those living with undiagnosed HIV is decreasing.

The rate of new HIV diagnoses in men in the Region overall has increased at a faster pace than in women; by 2019, it was twice as high as the rate in women. The rate of new HIV diagnoses in the EU/EEA has declined in both men and women, but more rapidly in women; by 2019,

2 No data were received from Andorra, Belgium, Monaco, North Macedonia, Turkmenistan or Uzbekistan. Liechtenstein is an EEA Member State but not a WHO Member State, so its data are included in the totals for the EU/EEA but not for the WHO European Region.

3 The grouping of countries into the West (23 countries), Centre (15 countries) and East (15 countries) of the WHO European Region is based on epidemiological considerations and follows the division of countries used in reports published by EuroHIV since 1984: see Annex 1, Fig. A1.1 for details.

Table A. Characteristics of new HIV and AIDS diagnoses reported in the WHO European Region, the EU/EEA, and West, Centre and East of the WHO European Region, 2019

	WHO European Region	West	Centre	East	EU/EEA
Reporting countries/number of countries[a]	47/53	20/23	14/15	13/15	30/31
Number of new HIV diagnoses	136 449	21 793	6 814	107 842	24 801
Rate of HIV diagnoses per 100 000 population[b]	15.6	5.7	3.4	41.7	5.4
Percentage age 15–24 years	8.5%	10.2%	15.0%	5.7%	10.3%
Percentage age 50+ years	17.8%	22.0%	13.7%	16.1%	20.4%
Male-to-female ratio	1.8	2.9	5.5	1.6	3.1
Transmission mode					
Sex between men	20.7%	39.9%	27.3%	3.9%	38.7%
Heterosexual transmission (men)	26.4%	16.2%	18.2%	36.3%	16.1%
Heterosexual transmission (women)	23.8%	17.8%	7.2%	32.6%	16.7%
Injecting drug use	13.0%	3.4%	2.1%	23.2%	3.9%
Mother-to-child transmission	0.7%	0.7%	0.5%	0.8%	0.7%
Unknown	15.3%	21.6%	44.5%	3.1%	23.6%
AIDS and late HIV diagnosis					
Percentage new HIV diagnoses CD4 < 350 cells/mm^3	53.2%	48.8%	55.9%	55.7%	49.7%
Number of new AIDS diagnoses[c]	12 535	2156	802	9577	2772
Rate of AIDS diagnoses per 100 000 population	2.0	0.5	0.4	8.3	0.5

[a] No data received from Andorra, Belgium, Monaco, North Macedonia, Turkmenistan and Uzbekistan.

[b] EU/EEA and West rates are adjusted for reporting delay (Annex 6); the corresponding estimated number of new diagnoses adjusted for reporting delay are (27 231 and 23 971 respectively).

[c] No data received from Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan and Uzbekistan.

the rate of new diagnoses in men was three times higher than that in women (Fig. B). The rate of new diagnoses in the Region was also higher among men than women in all age groups, except for people under 15 years (see Table 9).

In 2019, just over half (53%) of those diagnosed with HIV in the European Region were diagnosed at a late stage of infection (CD4 cell count less than 350 cells/mm^3 at diagnosis). This percentage was highest in the East (56%) and Centre (56%) and lowest in the West (49%), while 50% were diagnosed late in the EU/EEA (Table A).

In 2019, 12 535 people were diagnosed with AIDS, reported in 45 countries[4] of the WHO European Region, and the rate of new diagnoses was 1.7 per 100 000 population (Table A; see also Table 14). In the EU/EEA, 2772 people were diagnosed with AIDS in 2019, giving a rate of 0.5 per 100 000 population. The number of AIDS cases continued to decline steadily in the West and the EU/EEA during the last decade (see Fig. 1.17 and 2.4). At the same time, it has been increasing in the East, although it began to stabilize between 2012 and 2018 and even declined in 2019.

European Union and European Economic Area

In 2019, 24 801 people were diagnosed with HIV in the 30 countries of the EU/EEA, with a rate of 5.4 per 100 000 when adjusted for reporting delay (Table 1, Annex 6). Countries with the highest rates were Malta (16.2; 80 cases), Latvia (15.4; 295) and Estonia (13.4; 178), and the lowest were reported by Slovakia (1.9; 101 cases) and Slovenia (1.6; 34) (Table 1, Map A). The rate of new HIV diagnoses was higher among men (7.5 per 100 000 population; Table 2) than women (2.4 per 100 000 population; Table 3). The overall male-to-female ratio was 3.1 (Table A). This ratio was highest in Croatia (19.4) and Hungary (13.0) and was above one in all countries in the EU/EEA (Fig. 1.1). The predominant mode of transmission in countries with the highest male-to-female ratios was sex between men.

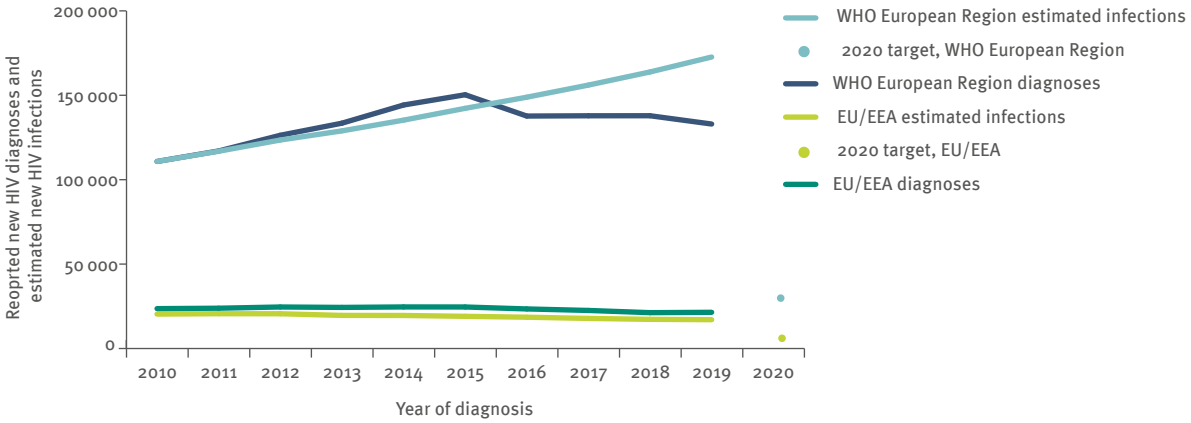
Men had higher age-specific rates than women in all age groups except among people under 15 years, where age-specific rates were similarly low (Fig. 1.2). The highest overall age-specific rate of HIV diagnoses for men was in the 20–29-year-old age group (18.0 per 100 000 population), while rates for women were highest in the 30–39 age group (6.1 per 100 000 population) (Fig. 1.2). Young people aged 15–24 years comprised 11% of the EU/EEA population and 11% of HIV diagnoses in 2019. Forty-one per cent of the EU/EEA population consists of older adults (50 years and above), who comprised 21% of the new HIV diagnoses reported in 2019 (Fig. 1.4).

Sex between men remains the predominant mode of HIV transmission reported in the EU/EEA, accounting for 39% (9598) of all new HIV diagnoses in 2019 and more than half (51%) of diagnoses where the route of transmission was known (Table 4, Table 8, Fig. 1.5). Among those with known route of HIV transmission, sex between men accounted for more than 60% of new HIV diagnoses in 10 countries (Croatia, Czechia, Germany, Hungary, Iceland, the Netherlands, Poland, Slovakia, Slovenia and Spain) (Fig. 1.5).

Heterosexual contact was the second most common reported mode of HIV transmission in the EU/EEA in 2019, accounting for 33% (8164) of HIV diagnoses and 43% of diagnoses where the route of transmission was known (Table 6, Table 8, Fig. 1.5). Heterosexual transmission was the most commonly reported known

4 No data were reported by Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan or Uzbekistan. The Russian Federation reported only data on new HIV diagnoses by sex and data on HIV testing.

Fig. A. Estimated new HIV infections and reported new HIV diagnoses in the EU/EEA and WHO European Region, 2010–2019, and target for 2020



Note: data from Andorra, Belgium, Italy, Monaco, North Macedonia, Spain, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

mode of transmission in nine EU/EEA countries (Cyprus, Estonia, France, Latvia, Luxembourg, Norway, Portugal, Romania and Sweden).

Transmission due to injecting drug use accounted for 4% of HIV diagnoses in 2019 and was the probable route of transmission for one quarter or more of the cases reported in Latvia (26%) and Lithuania (38%) (Table 5, Table 8, Fig. 1.5).

Vertical transmission accounted for less than 1% of new HIV diagnoses in the EU/EEA in 2019 while the transmission mode was not reported or reported to be unknown for 24% of new HIV diagnoses (Table A).

Forty-four per cent of those diagnosed in the EU/EEA in 2019 were migrants, defined as originating from outside of the country in which they were diagnosed (Fig. 1.6), with 18% originating from countries in sub-Saharan Africa, 9% from countries in Latin America and the Caribbean, 8% from other countries in central and eastern Europe, and 3% from other countries in western Europe.

The trend in rates of reported HIV diagnoses declined slightly between 2010 and 2019. Rates were 6.6 per 100 000 in the early part of this period, decreasing steadily thereafter to 5.4 per 100 000 in 2019 (Table 1, Fig. 1.10, Annexes 1, 5 and 6). The number of diagnoses in countries reporting consistently over the period declined by 9% between 2010 and 2019. While the overall EU/EEA trend has declined during the past decade, trends at national level vary. Several countries, including Austria, Denmark, Estonia, Finland, France, Italy, Luxembourg, the Netherlands, Norway, Portugal, Spain and the United Kingdom, have also reported a decline in rates of new diagnoses, even after adjusting for changes in population coverage of surveillance and reporting delay. Conversely, and taking reporting delay into account, rates of HIV diagnoses have more than doubled since 2010 in Cyprus, Malta and Slovakia and have increased by more than 50% in Bulgaria and Poland (Table 1, Annex 6). Some countries are affected disproportionately by reporting delay, with the result that decreases in the rates of new HIV diagnoses may be overestimated and increases in rates underestimated.

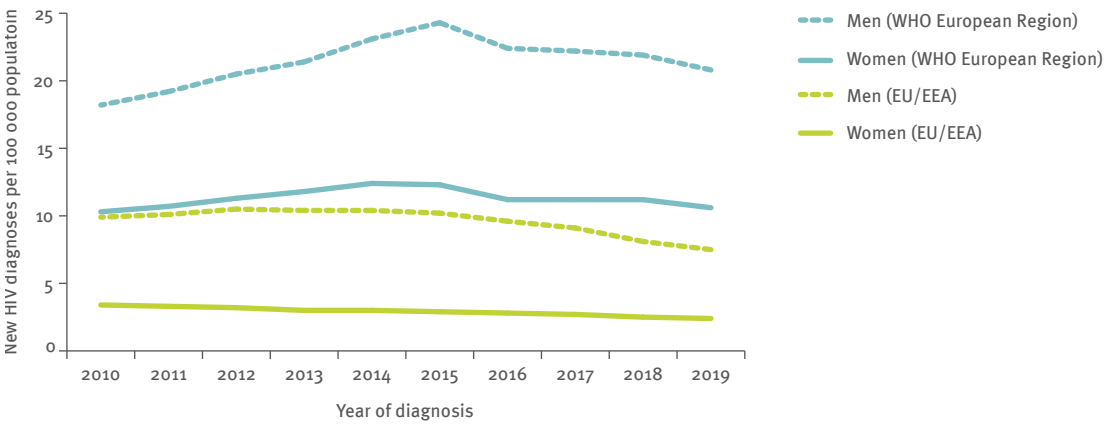
Trends differ by gender and age group. Age-specific rates have declined since 2010 in all age groups except for women over 50 years, with rates among 25–29-year-olds and 30–39-year-olds consistently higher than other groups throughout the period in both women and men (Fig. 1.11a, Fig. 1.11b).

The median age at HIV diagnosis increased from 34 to 37 years among women between 2010 and 2019, while remaining stable in men at 37 years. A larger proportion of diagnoses is being reported in older age groups: 15% of people diagnosed in 2010 were over 50 years on diagnosis, rising to 20% in 2019.

The proportion of all HIV diagnoses with known route of transmission that were attributed to sex between men in countries reporting consistently over the period increased from 45% of cases in 2010 to 52% in 2015, then decreased to 47% in 2019 (Fig 1.13). The number of HIV diagnoses reported among men who have sex with men (MSM) in countries reporting consistently increased from 8730 cases in 2010 and peaked at 9839 in 2014. Even after adjusting for reporting delay, fewer cases were reported in 2019 (6888) in this same group of countries. Most of the decline in recent years appears to be due to fewer diagnoses among MSM in Austria, Finland, France, Germany, Greece, Italy, Luxembourg, the Netherlands, Norway, Portugal, Spain and the United Kingdom (Table 4), with substantial increases noted in Bulgaria, Cyprus, Estonia, Lithuania, Poland, Romania and Slovakia in recent years. Cases attributed to MSM born outside of the reporting country increased over the period, declining slightly between 2016 and 2019 but not to the same extent as observed in EU/EEA-native MSM (Fig. 1.14).

The number of heterosexually acquired cases decreased steadily over the last decade (Fig. 1.13a), with sharper declines among women and foreign-born heterosexual

Fig. B. Rate of new HIV diagnosis per 100 000 population, by year of diagnosis and gender, EU/EEA and WHO European Region, 2010–2019



people than among men and non-foreign-born people (Fig. 1.13a, Fig. 1.14). Despite the overall decline in heterosexually acquired cases during this period, new diagnoses in Lithuania and Slovakia increased substantially in this group.

The number of HIV diagnoses reported as being due to injecting drug use has declined since 2010 in both foreign-born and non-foreign-born groups, but localized outbreaks that affected the EU/EEA trend in this group were seen in 2011–2012, and smaller local outbreaks were also noted in some countries during the last decade (Table 5, Fig. 1.13a, Fig. 1.14). Mother-to-child transmission and transmission through nosocomial infection or blood transfusion also decreased steadily between 2010 and 2019; these types of transmission now represent less than 1% of new cases diagnosed (Table 8). The number of cases reported to have an unknown mode of transmission increased from 14% in 2010 to 22% in 2019.

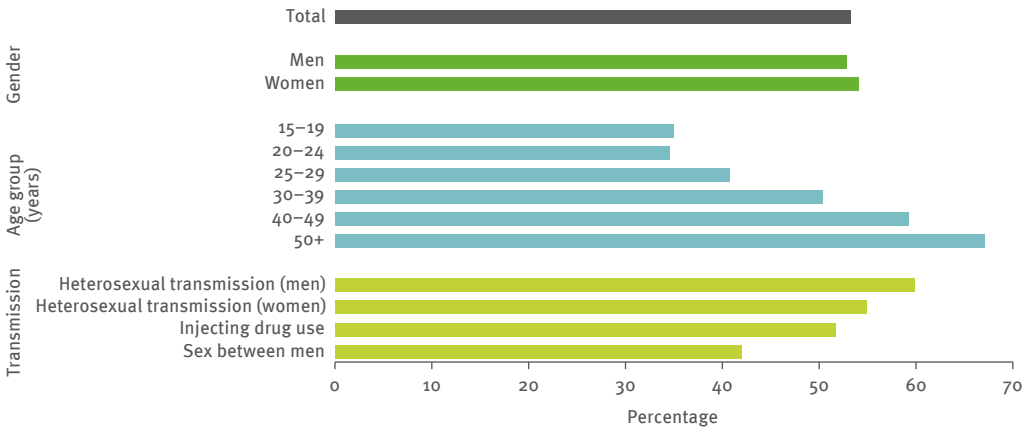
Information on CD4 cell count at the time of HIV diagnosis was provided by 25 countries (Table 13). Among all cases diagnosed in 2019 where information on CD4 count or acute HIV infection was available, 12% (1896) of cases were reported as acute infections and 26% (4122) as more recent infection (with a CD4 count above 500 cells per mm^3 at diagnosis). Among MSM diagnosed in 2019 where information was available, 15% (1116) were reported as acute infections and 30% (2192) had a CD4 count above 500 cells per mm^3 at diagnosis (Fig.1.7). As in previous years, half (50%) of all cases with a CD4 cell count were diagnosed several years after being infected, with a count of less than 350 cells per mm^3; 30% of cases were considered to have advanced HIV infection at the time of diagnosis (CD4 less than 200 cells/mm^3).

The highest proportions of people presenting at a later stage of HIV infection (CD4 less than 350 cells/mm^3) were observed among women (53%), older adults (54% in 40–49-year-olds and 65% in people over 50), men or women infected by heterosexual sex (61% and 53%, respectively), people who acquired HIV through injecting drug use (52%), migrants from sub-Saharan Africa (57%) and migrants from south and south-east Asia (54%) (Fig. 1.8, Table 13). In countries reporting consistently on transmission route and CD4 cell count at diagnosis over time, the number of persons diagnosed late (CD4 cell count less than 350 cells/mm^3 at diagnosis) decreased by 29%, from 7441 in 2010 to 5265 in 2019. A reduced number was observed in all transmission groups (Fig. 1.15), with a 42% reduction in late diagnoses in heterosexually transmitted HIV in women (2056 in 2010, 1201 in 2019), 40% reduction where the route of transmission was injecting drug use (319 in 2010, 191 in 2019), 29% reduction in heterosexual men (1906 in 2010, 1353 in 2019) and a 24% reduction in transmission due to sex between men (2529 in 2010, 1914 in 2019) (Fig. 1.15).

In 2019, 2772 diagnoses of AIDS were reported by 29 EU/EEA countries,[5] giving a rate of 0.5 cases per 100 000 population (Table 14). Overall, 74% of these AIDS diagnoses were made within 90 days of the HIV diagnosis, indicating that most AIDS cases in the EU/EEA are due to late diagnosis of HIV infection. This pattern holds for all transmission groups except people who acquired HIV through injecting drug use, where over half (60%) of the AIDS cases occurred more than 90 days after the HIV diagnosis (Fig. 1.16). Twenty-one countries reported tuberculosis (TB) (pulmonary and/or extrapulmonary) as an AIDS-defining illness in 14% of those newly diagnosed with AIDS in 2019 (Fig. 1.18). In the EU/EEA, the number of AIDS cases more than halved in the past decade (Fig. 1.10). This decline is noted in men and women and in all transmission groups, but appears greatest among cases attributed to injecting drug use (Tables 15–20, Fig. 1.17). Despite the general EU/EEA-wide decline, an increase has been reported in the rate of AIDS diagnoses since 2010 in Czechia and Hungary. AIDS-related deaths have declined steadily in the EU/EEA since the mid-1990s.

5 All EU/EEA countries except Belgium and Sweden.

Fig. C. Proportion of people diagnosed late (CD4 cell count < 350 per mm^3) by gender, age and transmission, WHO European Region, 2019 (n = 39 496)



WHO European Region

With 136 449 people newly diagnosed with HIV in 2019, corresponding to a rate of 15.6 per 100 000 population, halted growth in new HIV diagnoses continued to be observed in the WHO European Region, mainly due to the continuous decrease in the West and the overall stabilizing trend in the East. One third of countries in the East nevertheless reported annual increases in new HIV diagnoses.

Of the 136 449 people diagnosed in 2019, 79% were diagnosed in the East (107 842), 16% in the West (21 793) and 5% in the Centre of the Region (6814) (Table A). The rate was also highest in the East (41.7 per 100 000 population), being disproportionately higher than in the West (5.7 per 100 000 population) and the Centre (3.4 per 100 000 population) (Table A).

Rates of newly diagnosed HIV infections for 2019 varied significantly among countries in the WHO European Region, with the highest rates per 100 000 population being observed in the Russian Federation (54.9), Ukraine (39.0), the Republic of Moldova (22.8) and Belarus (22.6), and the lowest in Bosnia and Herzegovina (0.9) and Slovenia (1.6) (Table 1).

The overall rate for men was 20.8 per 100 000 population (Table 2) and for women 10.6 per 100 000 population (Table 3).

The largest proportion of new diagnoses in the 46 reporting countries[6] were in the age group 30–39 years (34%), while 9% were young people aged 15–24 years and 18% were 50 years or older at the time of diagnosis. The male-to-female ratio was 1.8, lowest in the East (1.6), higher in the West (2.9) and highest in the Centre (5.5). The most common form of infection was through heterosexual sex (50%), with 10% of these cases originating from countries outside of the Region that have generalized HIV epidemics, while 21% were infected through sex between men, 13% through injecting drug use and 0.7% through mother-to-child transmission. Information about transmission mode was unknown or missing for 15% of the new diagnoses (Table A).

Among the new diagnoses reported by 12 countries in the East for whom the mode of HIV transmission was known, 71% were infected through heterosexual transmission and 24% through injecting drug use, while reported transmission through sex between men remained low, at 4% of cases (Tables 4–6, 8). Sex between men (49%) and heterosexual sex (46%) were the main reported transmission modes in the Centre, but 44% of the new diagnoses lacked transmission-mode information. Sex between men was the predominant mode of transmission in 10 of the 14 countries in the Centre. In the West, sex between men remained the main transmission mode (40% of cases) followed by heterosexual transmission (34% of cases, among whom 39% originated from generalized epidemic countries). Information was lacking for 22% of new diagnoses.

The rate of newly diagnosed HIV infections in the 47 countries with consistent reporting over the past 10 years increased by 9%, from 14.1 per 100 000 population in 2010 (118 726 cases) to 15.4 per 100 000 population in 2019 (136 449 cases) (Fig. 2.2). The increase is driven mainly by the continuing upward trend in the East, where the rate increased by 23%, from 39.9 per 100 000 (86 266 cases) to 41.7 per 100 000 (107 842 cases). In the Centre, the rate increased by 113%, the largest relative increase among the three geographical areas, from 1.6 to 3.4 per 100 000 population between 2010 and 2019, while in the West it decreased by 31%, from 7.5 to 5.7 per 100 000 population over the same period (Fig. 2.2).

Consistent data on transmission mode were available from 39 countries for the period 2010–2019 (Fig. 2.3). Transmission in the East was driven by a rise in the number of HIV diagnoses with reported sexual transmission, which increased by 57% for heterosexual transmission and more than five-fold for transmission through sex between men. The increase with heterosexual transmission was considerably larger among men (103%) than women (21%). Transmission through injecting drug use, while still substantial, decreased by 36% (Fig. 2.9). In the Centre, new diagnoses in people infected through sex between men nearly doubled between 2010 and 2019; this was the predominant mode of transmission in 12 of the 14 countries, while heterosexual transmission increased by 48%. Transmission through injecting drug use has levelled off after an outbreak in Romania during 2011–2013. The percentage of new diagnoses attributed to injecting drug use was 6% in both 2010 and 2019 (Fig. 2.16). In the West, heterosexual transmission continued its steady decline and decreased by 37% over the 10-year period overall. Injecting drug use-related transmission decreased by 34% between 2010 and 2019 and is now decreasing again after a peak in 2012 caused by an outbreak in Greece. New diagnoses due to sex between men decreased by 29% compared to 2009. New diagnoses with unknown transmission mode increased by 37% in the West (Fig. 2.18).

Late HIV diagnosis remains a challenge in the Region. Among those newly diagnosed people over 14 years for whom information about CD4 cell count at the time of HIV diagnosis was available, over half (53%) were late presenters, with CD4 cell counts below 350 cells per mm^3, including 31% with advanced HIV infection (CD4 less than 200 cells/mm^3). The percentage of people newly diagnosed who were late presenters (CD4 less than 350/mm^3) varied across transmission categories and age groups but was highest for people with reported heterosexual transmission (58%; 60% for men and 55% for women) and injecting drug use (52%), and lowest for

6 Data reported by the Russian Federation were limited to new HIV diagnosis by sex for 2009–2019 and data on HIV testing, which enabled the inclusion of the Russian Federation's data in Tables 1–3 and 25 and in the figures showing the trend in HIV diagnosis. Data on age and modes of transmission presented in this report include countries that provided a full set of data to the joint ECDC/WHO European HIV surveillance system.

men infected through sex with men (42%) (Fig. C). The percentage increased with age, ranging from 35% among people aged 15–19 and 20–24 years at diagnosis, to 67% among those aged 50 years or older. In terms of gender, the percentage of late presenters was similar overall (53% for men and 54% for women) which, for men, conceals the difference between MSM (who tend to get diagnosed earlier) and heterosexual men (who tend to get diagnosed later). Additionally, there was mild variation across the Region, with 56% late presenters in the East and in the Centre and 49% in the West.

In 2019, 12 535 people were newly diagnosed with AIDS in 45 countries of the WHO European Region,[7] corresponding to a rate of 1.7 per 100 000 population. Overall, 76% of AIDS cases were diagnosed in the East, where the rate per 100 000 was also highest (8.3), 18% in the West (with a rate of 0.5 per 100 000) and 6% in the Centre of the Region (0.4 per 100 000) (Table 14). Twenty per cent of people diagnosed with AIDS presented with TB as an AIDS-defining illness, ranging from 13% of cases in the West and 21% in the Centre to 28% in the East. The overall rate of new AIDS diagnoses in the Region decreased by 23% between 2010 and 2019 but the AIDS trends varied greatly across the three geographical areas. In the East, the rate increased by 15%, from 7.2 in 2010 to 8.3 in 2019. In the Centre, the rate remained stable at 0.4 per 100 000 population, while in the West, the steady downward trend continued, with a 69% decrease from 1.6 in 2010 to 0.5 in 2019 (Fig. 2.4).

Conclusions

HIV transmission is still a major public health concern and affects millions of people in the WHO European Region, particularly in the eastern part of the Region. Over the course of the last three decades, over 2.1 million people have been diagnosed and reported with HIV in the WHO European Region, including over 710 000 people in the EU/EEA. In 2019, more than 136 000 people were diagnosed with HIV, at a rate of 15.6 per 100 000 population. The vast majority of new diagnoses, 79%, were reported from the East of the Region and 16% from the West. Newly diagnosed infections in the Russian Federation contributed 59% of all cases in the WHO European Region and 74% of cases in the East. An increasing trend in new HIV diagnoses has been observed in one third of the reporting countries in the East, although this is at a slower rate than in previous years. Over the last three years, halted growth in reported newly diagnosed HIV has been observed in the Russian Federation and some signs of stabilization have been noted in Ukraine, which contributed to the overall stabilization of the epidemic in the East.

The number of people living with undiagnosed HIV is increasing in the WHO European Region. Over the last decade, more people have been estimated to be newly infected annually than have been diagnosed. In contrast, the proportion of those living with undiagnosed HIV is decreasing in the EU/EEA.

While epidemic patterns and trends vary widely across WHO European Region countries, sustained increases have been seen in the number of newly diagnosed infections within certain transmission groups across parts of the Region: men who have sex with men in the Centre and East, and heterosexual transmission in the East, though some studies suggest that the latter increase needs to be interpreted with caution *(1,2)*. Heterosexual transmission has decreased substantially in the EU/EEA and the West, particularly among women, as has the number of cases due to sex between men in selected countries in the EU/EEA and the West in recent years. Transmission through injecting drug use has continued to decrease in many countries, although it still accounted for 24% of reported new diagnoses with a known mode of transmission in the East in 2019.

Too many people throughout the WHO European Region are diagnosed late (53%), increasing their risk of ill health, death and onward HIV transmission. The high number of AIDS diagnoses in the East confirms that late HIV diagnosis remains a major challenge. At the same time, the stabilizing AIDS trend observed since 2012 may be the result of a majority of countries having now implemented treat-all policies, which aim to offer anyone living with HIV the opportunity to receive antiretroviral therapy (ART) regardless of the stage of disease.

New strategies are required to improve early diagnosis and make more people aware of their infection by expanding diversified and user-friendly approaches to more widely available HIV testing. WHO consolidated guidelines on HIV testing services, including guidelines on HIV self-testing and partner notification, and ECDC public health guidance on an integrated approach to HIV and hepatitis B and C testing recommend implementation of innovative approaches that include self-testing and community testing by lay providers using rapid tests as part of overall HIV testing services *(3–5)*. WHO issued a policy brief on moving away from the use of western blotting and line immunoassays in HIV testing strategies and algorithms towards supporting decentralized testing and rapid linkage to treatment *(6)*. While the provision of HIV testing services has improved over time and self-testing and community-based HIV testing have seen a substantial increase in implementation in recent years, policy-monitoring in the Region indicates that some testing modes remain limited or non-existent in many European countries *(7)*. HIV testing services should focus on reaching the key population groups in the local epidemic context, be tailored to the specific needs of these groups, and support timely linkage to HIV prevention, treatment and care. This will ensure earlier diagnoses and treatment initiation and result in improved treatment outcomes and reduced HIV incidence, morbidity and mortality in support of the 90–90–90 goals and other regional and global targets *(8–10)*.

7 No data were reported from Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan or Uzbekistan.

A robust body of evidence shows that early initiation of ART is beneficial both to the health of the person receiving the treatment and in preventing onward HIV transmission *(11–16)*. Nearly 90% of countries in the WHO European Region have a policy to initiate ART regardless of CD4 cell count *(17,18)*.

The WHO Regional Office for Europe organized a regional workshop on advancing implementation science on HIV and viral hepatitis in Eastern Europe and Central Asia (EECA) in February 2020 *(19)*. The workshop aimed to support countries in EECA to conduct and use implementation science and programme data to guide practical implementation of WHO recommendations within their HIV and viral hepatitis programmes, including, but not limited to: assessing the validity of routine surveillance data, with a particular focus on data on modes of HIV transmission; identifying barriers to the target of 90% of all infections being diagnosed and to optimizing testing interventions; implementing and scaling-up pre-exposure prophylaxis (PrEP); and improving linkage to, and retention in, care, quality of care and management of comorbidities. The workshop also aspired to foster collaboration among researchers, scientists, donors and partners to conduct and support implementation science in EECA.

Interventions to control the epidemic should be based on evidence and adapted to national and local epidemiology. From the comprehensive epidemiological data presented in this report, the following can be concluded.

- For the countries in the EU/EEA and West, given the predominance of HIV transmission among MSM and increases in some countries, it would appear that current prevention, treatment and care interventions targeting MSM need to be further scaled-up and strengthened and should remain the priority of the HIV response. Countries with declines have demonstrated the impact of changing the culture towards more frequent testing for at-risk gay men and linkage to immediate care and ART for those found to be positive *(20)*. Multicomponent interventions, and the inclusion of PrEP for HIV, screening and treatment for sexually transmitted infections, and self-testing and assisted voluntary partner notification, in the package of prevention and control interventions could help to curb the increasing trends being seen in some countries. In most European countries, reported use of PrEP is well below perceived need *(3,21–23)*. Effective and accessible testing, prevention and care services for the increasingly diverse group of migrants at risk of, and living with, HIV need to be implemented more widely in many countries in the West of the Region. The 2011–2012 increase in HIV cases among people who inject drugs and continued reported local outbreaks in a number of countries *(24–28)* demonstrate the need to maintain or scale-up harm-reduction programmes.
- For the countries in the Centre, new diagnoses are increasing faster than in any other part of the WHO European Region. There is a very strong gender disparity in the rate of new HIV diagnoses in this part of the Region, with alarming increases among men, particularly MSM, compared with a fairly stable rate among women. Sex between men is the predominant mode of transmission in 13 of the 14 reporting Centre countries. Interventions to address this situation are needed, such as PrEP for high-risk groups, HIV testing by lay providers, HIV rapid diagnostic tests, HIV self-testing and voluntary assisted partner notification, alongside policies and practices to offer ART to all people living with HIV. Some countries have undergone a transition to domestic financing of the HIV response after withdrawal of funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria. This has posed sustainability challenges, particularly in relation to the financing of HIV prevention programmes. Increased political will and attention, alongside intensified involvement of civil society, is needed to mitigate some of these challenges and prevent the epidemic from accelerating *(29)*.
- For the countries in the East, there is an urgent need to continue the scale-up of bold, evidence-based interventions and deliver more effective, integrated services through health systems that better address the social determinants of health. Comprehensive combination-prevention and innovative HIV testing strategies are needed, with a particular focus on reaching key populations. This can be achieved through user-friendly prevention and testing services, including assisted partner notification, PrEP, HIV testing performed by trained lay providers and self-testing in line with WHO recommendations. All of these services should be integrated into national policies and programmes and then implemented *(3,4,10,30)*. Community involvement in the design and delivery of services is essential to reducing the rate of new HIV infections and increasing the number of people linked to care and initiated and retained on ART, with the ultimate aim of reducing HIV incidence and AIDS-related deaths. Innovative HIV prevention interventions should address the risk of heterosexual transmission, particularly in couples where one partner is engaged in high-risk behaviour (such as injecting drug use) or is spending longer periods of time working abroad. The large number of new diagnoses in people infected through injecting drug use emphasizes that evidence-based policies focused on key populations and other evidence-based approaches, including high coverage of harm-reduction programmes for people who inject drugs, remain critical to the HIV response in the eastern part of the Region.

Robust surveillance data are critical for monitoring and informing the public health response to the European HIV epidemic in an accurate and timely fashion. The completeness of data on reported mode of transmission and CD4 cell count at the time of diagnosis is suboptimal in the Region, mainly due to incomplete or no data

reported from large countries like Germany, Poland, the Russian Federation and Turkey.

Some studies conducted in the East found that the information about mode of transmission among newly diagnosed patients may be biased, with many cases registered as heterosexually acquired having a history of injecting drug use or, among male cases, sex with men *(1,2)*. This highlights the importance of assessing the validity of routine surveillance data in relation to mode of transmission, especially in countries where injecting drug use and homosexuality are stigmatized.

The number of countries conducting enhanced HIV surveillance and reporting surveillance data at European level has increased gradually over time. In 2019, 41 countries submitted linked HIV and AIDS data, enabling greater understanding of the clinical status of people diagnosed with HIV. This approach increases the possibilities for longer-term monitoring of HIV continuum-of-care outcomes, such as modelling the undiagnosed fraction, and measurement of linkage to care, treatment and viral suppression following diagnosis. It can also support national and global efforts to monitor progress towards the 90–90–90 goals and other global and regional targets.

In September 2020, reflecting the COVID-19 pandemic situation, the WHO Regional Office for Europe and ECDC organized a joint virtual meeting with major national stakeholders involved in the response to TB, HIV and viral hepatitis, including key partners, donors, affected communities and civil society organizations. The aim was to exchange information and good practices on the maintenance of essential TB, HIV and viral hepatitis services. Countries and partners discussed their experiences in ensuring access to, and continuity of, quality HIV services during the COVID-19 pandemic and on how they monitor the impact of the COVID-19 pandemic on HIV services. Latest WHO policy guidance and recommendations on TB, HIV, viral hepatitis and comorbidities were also discussed during the meeting.

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Обзор эпидемиологической ситуации по ВИЧ/СПИДу в Европе

В настоящем отчете представлены данные о диагностированных случаях ВИЧ-инфекции в период до конца 2019 г. – времени, непосредственно предшествующего началу глобальной пандемии COVID-19. Влияние пандемии на лабораторный потенциал, клинические учреждения и организации общественного здравоохранения, принимающие участие в эпиднадзоре за ВИЧ-инфекцией и ответных мерах в связи с ВИЧ/СПИД, наблюдалось на этапах сбора данных и подготовки настоящего отчета. Нескольким странам для предоставления своих данных по ВИЧ/СПИДу за 2019 г. потребовалось больше времени, чем обычно, а некоторые предупредили об увеличении задержек с подачей отчетности. Ряд стран вовсе заявил о невозможности подать сведения по некоторым переменным или подать их на тех уровнях, что соответствуют прошлой отчетности. Европейский центр профилактики и контроля заболеваний (ECDC) и Европейское региональное бюро ВОЗ в сотрудничестве с государствами-членами и партнерами внимательно изучат воздействие COVID-19 на эпиднадзор за ВИЧ-инфекцией ради обеспечения поддержания высоких стандартов европейских данных по ВИЧ/СПИДу.

Несмотря на то, что заражение ВИЧ-инфекцией предотвратимо, показатели ВИЧ-инфицирования в Европейском регионе ВОЗ продолжают оставаться высокими. В 2019 г. в 47 из 53 стран Региона было зарегистрировано 136 449 новых случаев ВИЧ-инфекции,[1] включая 24 801 случай в странах Европейского союза/Европейской экономической зоны (ЕС/ЕЭЗ). Это соответствует показателю заболеваемости, равному 15,6 впервые установленных диагнозов ВИЧ-инфекции на 100 000 населения (таблица А).

По-прежнему, как и в течение всего последнего десятилетия, частота ВИЧ-инфицирования и общее число впервые выявленных случаев ВИЧ-инфекции были самыми высокими на востоке Региона (41,7 на 100 000 населения), более низкими на западе и в ЕС/ЕЭЗ (5,7 и 5,4 на 100 000, соответственно) и самыми низкими – в центральной его части[2] (3,4 на 100 000 населения) (таблица А). Преобладающие пути передачи ВИЧ также различались в зависимости от географической зоны, указывая на неоднородность эпидемиологической ситуации по ВИЧ-инфекции в Европе. Преобладающими путями передачи ВИЧ-инфекции в странах ЕС/ЕЭЗ были половые контакты между мужчинами, а в восточной части Региона

1 Отсутствуют данные по Андорре, Бельгии, Монако, Северной Македонии, Туркменистану и Узбекистану. Лихтенштейн является членом ЕЭЗ, но не государством-членом ВОЗ, поэтому сведения о Лихтенштейне включены в итоговые данные по ЕС/ЕЭЗ, но не включены в итоговые данные по Европейскому региону ВОЗ.

2 Группировка стран Европейского региона ВОЗ на страны западной части Региона (23 страны), центральной его части (15 страны) и восточной (15 стран) основана на эпидемиологических характеристиках и соответствует разделению стран в предыдущих обзорах, опубликованных EuroHIV в период с 1984 г.: подробнее см. приложение 1, рисунок A1.1.

Таблица А. Эпидемиологические характеристики впервые установленных диагнозов ВИЧ-инфекции и СПИДа, зарегистрированных в Европейском регионе ВОЗ, ЕС/ЕЭЗ, а также в западной, центральной и восточной частях Региона, 2019 г.

	Европейский регион ВОЗ	Запад	Центр	Восток	ЕС/ЕЭЗ
Страны, предоставляющие данные/число страна	47/53	20/23	14/15	13/15	30/31
Number of new HIV diagnoses	136 449	21 793	6 814	107 842	24 801
Число впервые выявленных случаев ВИЧ-инфекцииb	15,6	5,2	3,4	41,7	5,4
Доля случаев в возрастной группе 15-24 лет	8,5%	10,2%	15,0%	5,7%	10,3%
Доля случаев в возрастной группе 50+	17,8%	22,0%	13,7%	16,1%	20,4%
Соотношение мужчины/женщины	1,8	2,9	5,5	1,6	3,1
Путь передачи инфекции					
Половые контакты между мужчинами	20,7%	39,9%	27,3%	3,9%	38,7%
Гетеросексуальная передача (мужчины)	26,4%	16,2%	18,2%	36,3%	16,1%
Гетеросексуальная передача (женщины)	23,8%	17,8%	7,2%	32,6%	16,7%
Употребление инъекционных наркотиков	13,0%	3,4%	2,1%	23,2%	3,9%
Передача ВИЧ от матери ребенку (вертикальный путь)	0,7%	0,7%	0,5%	0,8%	0,7%
Неизвестный	15,3%	21,6%	44,5%	3,1%	23,6%
СПИД и поздняя диагностика ВИЧ-инфекции					
Доля впервые выявленных случаев ВИЧ-инфекции с числом CD4 <350 клеток/мм3	53,2%	48,8%	55,9%	55,7%	49,7%
Число новых случаев СПИДас	12535	2156	802	9577	2772
Частота новых случаев СПИДа на 100 000 населения	2,0	0,5	0,4	8,3	0,5

[a] Отсутствуют данные по Андорре, Бельгии, Монако, Северной Македонии, Туркменистану и Узбекистану.

[b] Показатели заболеваемости в ЕС/ЕЭЗ скорректированы с учетом задержки отчетности (приложение 6); Расчетное число новых случаев с учетом задержки отчетности составляет 27 231 и 23 971 , соответственно.

[c] Отсутствуют данные по Северной Македонии, Швеции, Туркменистану и Узбекистану

– гетеросексуальные контакты и употребление инъекционных наркотиков.

В Европейском регионе ВОЗ за последнее десятилетие число людей с впервые выявленной ВИЧ-инфекцией увеличилось на 16%. В то же время в странах ЕС/ЕЭЗ в этот же период число новых диагнозов ВИЧ-инфекции сократилось на 9% (рис. А). При сопоставлении числа новых диагностированных случаев ВИЧ-инфекции с предполагаемым числом новых ВИЧ-инфекций за последнее десятилетие становится очевидным, что в течение большей части этого периода количество людей, заразившихся ВИЧ, превышает количество диагностированных случаев ВИЧ-инфекции, что свидетельствует о росте числа людей, живущих с не диагностированной ВИЧ-инфекцией в Регионе. Напротив, в ЕС/ЕЭЗ, согласно расчетным данным, число впервые выявленных случаев ВИЧ-инфекции превышает число людей, инфицированных ВИЧ, что свидетельствует о сокращении доли людей, живущих с не диагностированной ВИЧ-инфекцией.

В Регионе в целом частота новых случаев ВИЧ-инфекции среди мужчин увеличивалась более быстрыми темпами, чем среди женщин; к 2019 г. этот показатель у мужчин был в два раза выше, чем у женщин. В ЕС/ЕЭЗ частота новых диагнозов ВИЧ-инфекции снизилась как у мужчин, так и у женщин, но у женщин темпы снижения были более быстрыми; к 2019 г. этот показатель у мужчин был в три раза выше, чем у женщин (рис. В). Уровень зарегистрированной заболеваемости ВИЧ-инфекцией в Регионе также был выше среди мужчин, чем среди женщин во всех возрастных группах, за исключением лиц моложе 15 лет (таблица 9).

В Европейском регионе в 2019 г. чуть более половины (53%) впервые выявленных случаев заражения ВИЧ были диагностированы на поздней стадии инфекции (количество CD4-лимфоцитов < 350 клеток/мм3 на момент установления диагноза). Этот показатель был самым высоким в странах восточной части Региона (56%) и в центре (56%) и самым низким в странах западной его части (49%), в то время как в странах ЕС/ЕЭЗ поздняя диагностика отмечалась в 50% случаев (таблица А).

В 2019 г. в 45 государствах-членах в Европейском регионе ВОЗ было зарегистрировано 12 535 новых случаев СПИДа,[3] что соответствует показателю заболеваемости СПИДом, равному 1,7 на 100 000 населения (см. таблицу А, а также таблицу 14). В 2019 г. в странах ЕС/ЕЭЗ было зарегистрировано 2 772 случая заболевания СПИДом – 0,5 случаев на 100 000 населения. В течение последнего десятилетия заболеваемость СПИДом в западной части Региона и в странах ЕС/ЕЭЗ продолжала неуклонно снижаться (см. рис. 1.17 и 2.4). В то же время в восточной его части заболеваемость СПИДом продолжала увеличиваться, хотя в период с 2012 по 2018 г. она начала стабилизироваться и даже снизилась в 2019 г.

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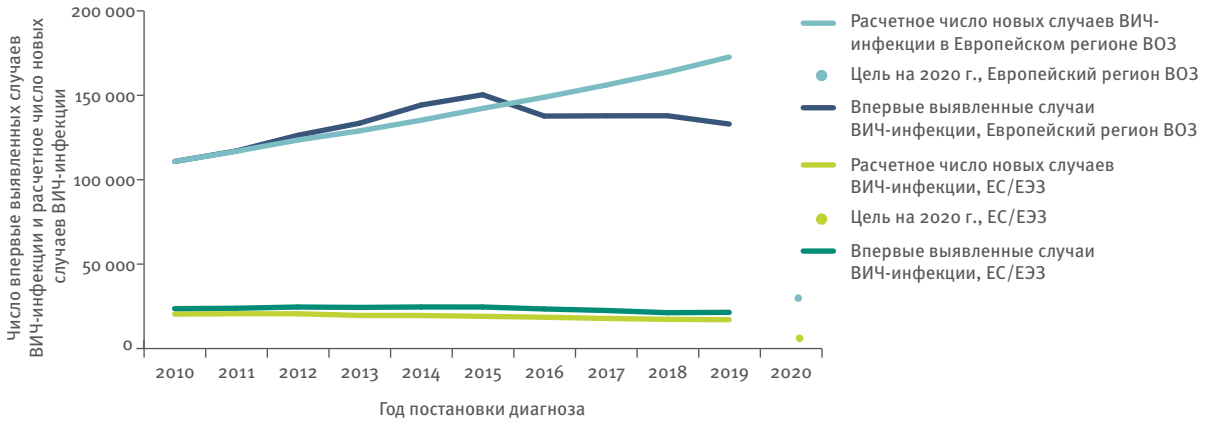
В 2019 г. в 30 странах ЕС/ЕЭЗ диагноз ВИЧ-инфекции был поставлен 26 24 801 человеку, что соответствует частоте, равной 5.4 на 100 000 населения с поправкой на задержку отчетности (таблица 1, приложение 6). Самые высокие показатели ВИЧ-инфицирования

3 Отсутствуют данные по Андорре, Бельгии, Монако, Российской Федерации, Северной Македонии, Туркменистану, Узбекистану и Швеции. (Российская Федерация подала сведения только по впервые установленным диагнозам ВИЧ-инфекции с разбивкой по полу и данные о тестировании на ВИЧ).

Рисунок А. Данные по ЕС/ЕЭЗ и Европейскому региону ВОЗ: расчетное число новых случаев ВИЧ-инфекции и число впервые выявленных случаев ВИЧ-инфекции, 2010-2019 гг., а также цель на 2020 год



были зарегистрированы на Мальте (16,2; 80 случаев), в Латвии (15,4; 295 случаев) и Эстонии (13,4; 178 случаев), а самые низкие – в Словакии (1,9; 101 случаев) и Словении (1,6; 34 случая) (таблица 1, карта A). Частота новых случаев ВИЧ-инфекции была выше среди мужчин (7,5 на 100 000 населения; таблица 2), чем среди женщин (2,4 на 100 000 населения; таблица 3). Общее процентное соотношение случаев ВИЧ-инфицирования у мужчин и женщин составило 3,1 (таблица A). Это соотношение, которое было самым высоким в Хорватии (19,4) и Венгрии (13,0), превышало 1 во всех странах ЕС/ЕЭЗ (рис. 1.1). Преобладающим путем передачи в странах с наиболее высоким процентным соотношением случаев ВИЧ-инфицирования у мужчин и женщин были половые контакты между мужчинами.

Анализ половозрастных показателей указывает на то, что заболеваемость ВИЧ-инфекцией у мужчин была выше, чем у женщин во всех возрастных группах, за исключением возрастной группы до 15 лет, в которой показатели заболеваемости мужчин и женщин были аналогично низкими (рис. 1.2). Наибольший повозрастной показатель впервые выявленных случаев ВИЧ-инфекции отмечался в возрастной группе 25–29 лет (18,0 на 100 000 населения), в то время как наиболее высокий повозрастной показатель у женщин отмечался в возрастной группе 30–39 лет (6,1 на 100 000 населения) (рис. 1.2). Молодые люди в возрасте от 15 до 24 лет составляют 11% населения ЕС/ЕЭЗ, и среди них в 2019 г. было установлено 11% диагнозов ВИЧ-инфекции. Сорок один процент населения ЕС/СЭЗ составляют пожилые люди (50 лет и старше), на долю которых приходится 21% новых случаев ВИЧ-инфекции, зарегистрированных в 2019 г. (рис. 1.4).

Половые контакты между мужчинами остаются преобладающим путем передачи ВИЧ-инфекции в ЕС/ЕЭЗ; на этот путь инфицирования пришлось39% (9598) всех случаев ВИЧ-инфекции, диагностированных в 2019 г., и более половины (51%) таких случаев с известным путем передачи (таблица 4, таблица 8, рис. 1.5). Среди диагнозов ВИЧ-инфекции с известным путем передачи ВИЧ-инфекции преобладали случаи инфицирования при половых контактах между мужчинами, на долю которых приходилось свыше 60% впервые установленных диагнозов ВИЧ-инфекции в 10 странах (Венгрия, Германия, Исландия, Испания, Нидерланды, Польша, Словакия, Словения, Хорватия и Чешская Республика; рис. 1.5).

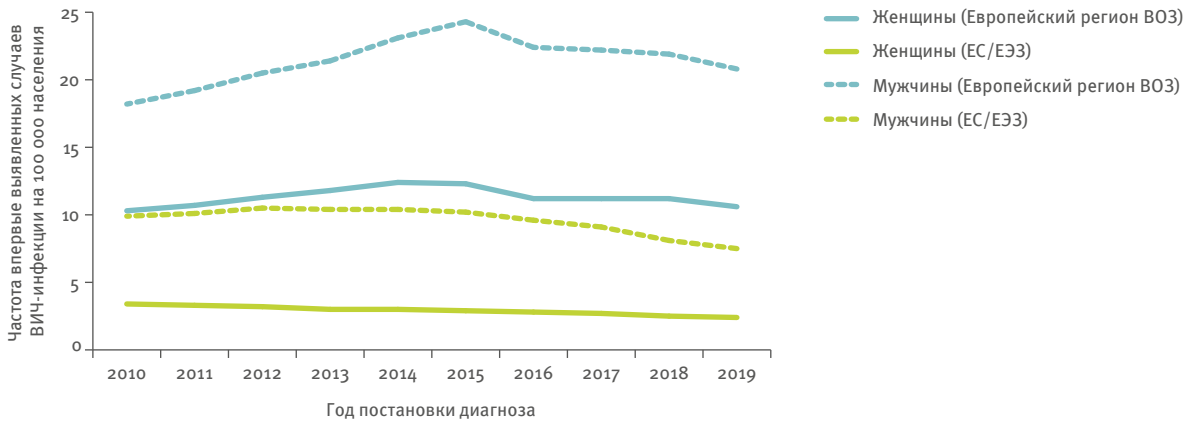
Гетеросексуальные контакты были вторым наиболее распространенным путем передачи ВИЧ-инфекции среди лиц, впервые диагностированных в ЕС/ЕЭЗ в 2019 г.; на этот путь заражения пришлось 33% (8 164 случая) новых диагностированных случаев ВИЧ-инфекции и 43% таких случаев с известным путем передачи (таблица 6, таблица 8, рис. 1.5). Гетеросексуальные контакты были наиболее распространенным известным путем передачи ВИЧ-инфекции в девяти странах ЕС/ЕЭЗ (Кипр, Латвия, Люксембург, Норвегия, Португалия, Румыния, Франция, Швеция и Эстония).

На заражение ВИЧ при употреблении инъекционных наркотиков пришлось 4% случаев ВИЧ-инфекции диагностированных в 2019 г.; употребление инъекционных наркотиков является вероятным путем ВИЧ-инфицирования для одной четверти или более новых случаев ВИЧ-инфекции, зарегистрированных в Латвии (26%) и Литве (38%) (таблица 5, таблица 8, рис. 1.5).

В 2019 г. в странах ЕС/ЕЭЗ на вертикальную передачу пришлось менее 1% новых диагностированных случаев ВИЧ-инфекции, а в 24% таких случаев путь заражения либо не был указан, либо был указан как неизвестный (таблица A).

Сорок четыре процента новых случаев ВИЧ-инфекции, зарегистрированных в ЕС/ЕЭЗ в 2019 г., были диагностированы у мигрантов, родившихся за пределами страны, где им был поставлен диагноз (рис. 1.6). По месту рождения мигрантов

Рисунок B. Частота впервые выявленных случаев ВИЧ-инфекции на 100 000 населения (с разбивкой по полу и году постановки диагноза) в ЕС/ЕЭЗ и в Европейском регионе ВОЗ, 2009-2018 гг.



распределение было следующим: 18% – страны Африки к югу от Сахары, 9% – страны Латинской Америки и Карибского бассейна, 8% – другие страны Центральной и Восточной Европы и 3% – другие страны Западной Европы.

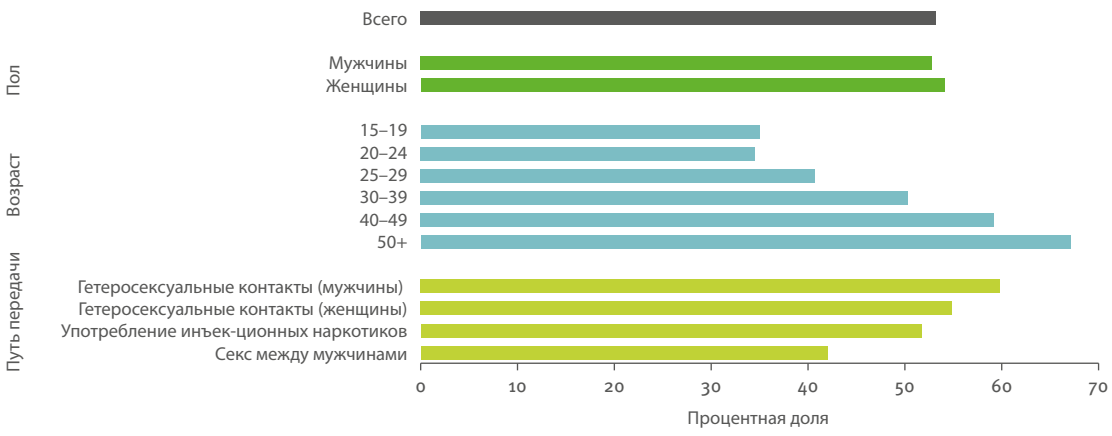
В период с 2010 г. по 2019 г. наметилась тенденция к незначительному снижению частоты установления диагнозов ВИЧ-инфекции. Данные показатели составляли 6,6 на 100 000 населения в начале этого периода, с последующим постепенным снижением до 4,9 на 100 000 в 2019 г. (таблица 1, рис. 1.10, приложения 1, 5 и 6). Хотя в последнее десятилетие в ЕС/ЕЭЗ отмечено снижение показателей в целом, на страновом уровне наблюдаются различные тенденции. Ряд стран, включая Австрию, Данию, Испанию, Италию, Люксембург, Нидерланды, Норвегию, Португалию, Соединенное Королевство, Финляндию, Францию и Эстонию, также сообщили о снижении частоты впервые диагностированных случаев ВИЧ-инфекции даже после корректировки на изменения в охвате населения эпиднадзором и задержку отчетности. И, наоборот, с учетом задержки отчетности, количество диагнозов ВИЧ более чем удвоилось с 2010 г. на Кипре, Мальте и в Словакии и увеличилось более чем на 50% в Болгарии и Польше (таблица 1, приложение 6). В некоторых странах наблюдаются диспропорционально большие задержки подачи отчетности, что сопряжено с риском как завышения показателей, указывающих на снижение частоты новых случаев ВИЧ-инфекции, так и занижения показателей, указывающих на увеличение частоты таких случаев.

Тенденции различаются и по половому, и по возрастному признаку. За период с 2010 г. повозрастные показатели снизились во всех возрастных группах, за исключением женщин старше 50 лет. Сравнение возрастных групп показывает, что показатели частоты выявления новых случаев ВИЧ-инфекции были устойчиво выше в группах 25–29 лет и 30–39 лет на протяжении всего анализируемого периода как у женщин, так и у мужчин (рис. 1.11a, 1.11b).

Среди женщин средний возраст на момент установления диагноза ВИЧ-инфекции увеличился с 34 лет в 2010 г. до 37 лет в 2019 г., оставаясь стабильным у мужчин на уровне 37 лет. В старших возрастных группах регистрируется более высокая доля новых диагнозов ВИЧ-инфекции; так, если в 2010 г. 15% лиц, которым был впервые поставлен диагноз ВИЧ-инфекции, были старше 50 лет, то в 2019 г. этот показатель повысился до 20%.

В структуре всех впервые выявленных случаев ВИЧ-инфекции доля случаев, обусловленных половыми контактами между мужчинами, увеличилась с 45% случаев в 2010 г. до 52% в 2015 г., а затем уменьшилась до 47% в 2019 г. (рис 1.13). В странах, регулярно подававших сведения, число диагнозов ВИЧ-инфекции среди МСМ стабильно увеличивалось с 8 730 случаев в 2010 г., достигнув в 2014 г. пикового значения, равного 9 839 случаев. В 2019 г. было зарегистрировано меньшее количество новых случаев ВИЧ-инфекции (6688), в этой же группе стран, даже после корректировки на задержку отчетности. Однако главным образом снижение, вероятнее всего, объясняется меньшим количеством новых случаев ВИЧ-инфекции среди мужчин, практикующих секс с мужчинами (МСМ) в Австрии, Германии, Греции, Испании, Италии, Люксембурге, Нидерландах, Норвегии, Португалии, Соединенном Королевстве, Финляндии и Франции (таблица 4) со значительным повышением в последние годы этих показателей, отмеченном в Болгарии, на Кипре, в Литве, Польше, Румынии, Словакии, Эстонии. В анализируемый период число случаев ВИЧ-инфицирования среди МСМ, родившихся за пределами подающей сведения страны, увеличилось, несколько снизившись в 2016-2019 гг., но не в той же степени, что наблюдалась среди МСМ, родившихся в странах ЕС/ЕЭЗ (рис. 1.14).

Рисунок С. Доля лиц с поздно выявленной ВИЧ-инфекцией (CD4 < 350 клеток/мм³) с разбивкой по полу, возрасту и пути заражения, Европейский регион ВОЗ, 2019 г. (n = 39 496)



В течение последнего десятилетия число новых случаев ВИЧ-инфекции с гетеросексуальным путем передачи последовательно снижалось (рис. 1.13a), причем такое снижение было более выраженным среди женщин и гетеросексуалов, родившихся за границей, чем среди мужчин и коренных жителей Региона (рис. 1.13a, 1.14). Несмотря на общее снижение частоты новых случаев ВИЧ-инфекции вследствие гетеросексуальных контактов, в Литве и Словакии было отмечено существенное повышение этого показателя.

Число впервые диагностированных случаев ВИЧ-инфекции, обусловленных употреблением инъекционных наркотиков, в период с 2010 г. снизилось как среди лиц, родившихся за границей, так и среди коренных жителей – за исключением локальных вспышек в 2011–2012 гг., повлиявших на тенденцию показателей в этой группе населения в странах ЕС/ЕЭЗ, и менее широких локальных вспышек, отмеченных в этот же период времени в ряде других стран (таблица 5, рис. 1.13a, 1.14). Частота передачи от матери ребенку, внутрибольничного инфицирования и инфицирования при переливании крови также последовательно снижались в период с 2010 г. по 2019 г., и теперь такие пути передачи обусловливают менее 1% впервые диагностированных случаев ВИЧ-инфекции (таблица 8). Число случаев с неизвестным путем передачи увеличился с 14% в 2010 г. до 22% в 2019 г.

Информация о количестве CD4-лимфоцитов на момент установления диагноза ВИЧ-инфекции была предоставлена 26 странами (таблица 13). Среди всех случаев ВИЧ-инфекции, диагностированных в 2019 г., по которым имелась информация о количестве CD4-лимфоцитов или об острой стадии ВИЧ-инфекции, 12% (1 896) случаев были зарегистрированы как острая стадия ВИЧ-инфекции и 26% (4 122) – как случаи недавнего заражения ВИЧ (с количеством CD4-лимфоцитов выше 500 клеток/мм3 на момент установления диагноза). Среди тех МСМ, у которых ВИЧ-инфекция была впервые выявлена в 2019 г. и о которых имелась соответствующая информация, 15% (1 116) случаев были зарегистрированы как случаи острой ВИЧ-инфекции, а у 30% (2 192) количество CD4- лимфоцитов было выше 500 клеток/мм3 на момент установления диагноза (рис.1.7). Как и в предыдущие годы, почти в половине (50%) всех случаев ВИЧ-инфекции с определением количества CD4-лимфоцитов диагноз был поставлен через несколько лет после заражения, когда количество CD4-лимфоцитов было менее 350 клеток/мм3; при этом считается, что 30% пациентов на момент установления диагноза были на поздних стадиях ВИЧ-болезни (количество CD4 ‹ 200 клеток/мм3).

Наибольшая доля людей с ВИЧ-инфекцией, впервые выявленной на поздних стадиях (CD4 ‹350/мм3) отмечалась среди женщин (53%), людей среднего и пожилого возраста (54% в возрасте 40–49 лет и 65% в возрасте старше 50) лет, мужчин и женщин, инфицировавшихся при гетеросексуальных контактах (61% и 53%, соответственно), людей, инфицировавшихся ВИЧ вследствие употреблении инъекционных наркотиков (52%), мигрантов из стран Африки, расположенных к югу от Сахары (57%), а также мигрантов из Южной и Юго-Восточной Азии (54%) (рис. 1.8, таблица 13). В странах, регулярно подававших сведения о путях передачи и количестве клеток CD4-лимфоцитов на момент установления диагноза в динамике, количество лиц, которым диагноз был поставлен на поздних стадиях (количество CD4-лифоцитов ‹ 350 клеток/мм3 на момент установления диагноза), сократилось на 29%, с 7 441 в 2010 г. до 5 265 в 2019 г. Снижение числа случаев поздней диагностики наблюдалось при всех путях передачи (рис. 1.15) с сокращением на 42% в группе женщин, инфицировавшихся ВИЧ гетеросексуальным путем (2 056 в 2010 г., 1 201 в 2019 г.), с сокращением на 40% в группе лиц, инфицировавшихся вследствие употребления инъекционных наркотиков (319 в 2010 г., 191 в 2019 г.), с сокращением на 29% среди гетеросексуальных мужчин (1 906 в 2010 г., 1 353 в 2019 г.) и с сокращением на 24% частоты передачи инфекции вследствие половых контактов между мужчинами (2 529 в 2010 г., 1 914 в 2019 г.) (рис. 1.15).

В 2019 г. сведения о 2 772 диагнозах СПИДа были поданы 29 странами ЕС/ЕЭЗ,[4] что соответствует показателю 0,5 случаев на 100 000 населения (таблица 14). В общей сложности, в 74% этих случаев диагноз СПИДа ставился в период, превышающий 90 дней с момента установления диагноза ВИЧ-инфекции, указывая на то, что большинство случаев СПИДа в странах ЕС/ЕЭЗ являются результатом поздней диагностики ВИЧ-инфекции. Эта закономерность характерна для всех пациентов вне зависимости от путей передачи ВИЧ-инфекции, за исключением людей, инфицировавшихся при употреблении инъекционных наркотиков, среди которых более половины (60%) случаев СПИДа диагностировались в период, превышающий 90 дней с момента установления диагноза ВИЧ-инфекции (рис. 1.16). В 2019 г. двадцать одна страна сообщила о выявлении (легочного и/или внелегочного) туберкулеза (ТБ) как СПИД-индикаторного заболевания у 14% лиц, которым диагноз СПИДа был установлен в 2019 г. (рис. 1.18). В ЕС/ЕЭЗ число случаев заболевания СПИДом за последнее десятилетие сократилось более чем вдвое (рис. 1.10). Такое снижение отмечается и среди мужчин, и среди женщин, а также среди всех категорий инфицированных, сгруппированных по путям передачи, но оно представляется наиболее выраженным у пациентов, заражение которых обусловлено употреблением инъекционных наркотиков (таблицы 15–20, рис. 1.17). Несмотря на общее сокращение частоты случаев СПИДа в масштабах ЕС/ЕЭЗ, в Венгрии и Чешской Республике в период с 2010 г. отмечался рост заболеваемости

4 Все страны ЕС/ЕЭЗ, за исключением Бельгии и Швеции.

СПИДом. Показатели смертности вследствие СПИДа в ЕС/ЕЭЗ неуклонно снижаются с середины 1990-х годов.

Европейский регион ВОЗ

В 2019 г. число зарегистрированных новых случаев ВИЧ-инфекции составило 136 449, что соответствует показателю 15,6 на 100 000 населения, то есть в Европейском регионе ВОЗ наблюдалось продолжение сокращения роста новых случаев ВИЧ-инфицирования, главным образом благодаря постоянному снижению этого показателя на западе и общей тенденции к его стабилизации на востоке. Тем не менее, треть стран в восточной части Региона отмечала ежегодный прирост новых случаев установления диагноза ВИЧ.

Из 136 449 случаев ВИЧ-инфекции, выявленных в 2019 г., 79% были диагностированы в восточной части (107 842), 16% – в западной части (21 793) и 5% – в центральной части Региона (6 814) (таблица А). Наиболее высокий показатель заболеваемости также зафиксирован на востоке (41,7 на 100 000 населения), будучи диспропорционально выше, чем на западе (5,7 на 100 000 населения) и в центре Региона (3,4 на 100 000 населения) (таблица А).

Частота новых диагностированных случаев ВИЧ-инфекции в 2019 г. существенно различались между странами Европейского региона ВОЗ. Самые высокие показатели на 100 000 населения отмечались в Российской Федерации (54,9), Украине (39,0), Республике Молдова (22,8) и Беларуси (22,6), а самые низкие – в Боснии и Герцеговине (0,9) и в Словении (1,6) (таблица 1).

Общий показатель ВИЧ-инфицирования среди мужчин составлял 20,8 на 100 000 населения (таблица 2) и среди женщин – 10,6 на 100 000 населения (таблица 3).

Наибольшая доля лиц с впервые диагностированной ВИЧ-инфекцией в 46 странах, предоставивших данные,[5] на момент установления диагноза принадлежали к возрастной группе 30–39 лет (34%), 9% были молодыми людьми в возрасте 15–24 лет и 18% – людьми в возрасте 50 лет и старше. Соотношение новых случаев ВИЧ-инфекции у мужчин и женщин равнялось 1,8 с самым низким значением в восточной части Региона (1,6), более высоким значением в западной его части (2,9) и наивысшим значением – в центре (5,5). Наиболее распространенным путем передачи инфекции были гетеросексуальные контакты (50%), причем 10% таких случаев отмечены среди выходцев из стран, расположенных за пределами Региона, с генерализованной эпидемией ВИЧ-инфекции, 21% инфицировались вследствие половых контактов между мужчинами, 13% – вследствие употребления инъекционных наркотиков и 0,7% – в результате передачи инфекции от матери ребенку. В 15% новых случаев ВИЧ-инфекции информация о пути передачи была неизвестна или отсутствовала (таблица А).

В восточной части Региона в 12 странах, предоставивших данные о новых случаях ВИЧ-инфекции с известным путем передачи, 71% пациентов инфицировались при гетеросексуальных контактах и 24% – при употреблении инъекционных наркотиков; частота заражения при половых контактах между мужчинами оставалась низкой – на уровне 4% случаев (таблицы 4–6, 8). Основными путями передачи ВИЧ-инфекции в центральной части Региона были половые контакты между мужчинами (49%) и гетеросексуальные контакты (46%), но у 44% пациентов с впервые диагностированной ВИЧ-инфекцией информация о пути передачи отсутствовала. Половые контакты между мужчинами были преобладающим путем передачи ВИЧ-инфекции в 10 из 14 стран центральной части Региона. В западной части Региона основными путями заражения ВИЧ были половые контакты между мужчинами (40% случаев) и гетеросексуальные контакты (34% случаев, среди которых 39% приходилось на выходцев из стран с генерализованной эпидемией ВИЧ-инфекции). По 22% случаев новых диагнозов ВИЧ-инфекции подобная информация отсутствовала.

За последние 10 лет в 47 странах, регулярно подававших сведения, частота выявления ВИЧ-инфекции увеличились на 9% с 14,1 на 100 000 населения в 2010 г. (118 726 случаев) до 15,4 на 100 000 населения в 2019 г. (136 449 случаев) (рис. 2.2). Увеличение происходило, главным образом, за счет сохранения восходящей тенденции в восточной части Региона, где этот показатель увеличился на 23%, с 39,9 на 100 000 (86 266 случаев) до 41,7 на 100 000 (107 842 случаев). В период с 2010 г. по 2019 г. в центральной части Региона этот показатель увеличился на 113% – с 1,6 до 3,4 на 100 000 населения (наибольшее относительное увеличение среди всех трех географических зон), в то время как в западной части Региона за тот же период он снизился на 31% – с 7,5 до 5,7 на 100 000 населения (рис. 2.2).

В период 2010–2019 гг. сведения о путях передачи ВИЧ-инфекции регулярно подавались 39 странами (рис. 2.3). На востоке общий рост был обусловлен быстрым увеличением числа заражений ВИЧ-инфекцией половым путем – прирост на 57% для передачи при гетеросексуальных половых контактах и пятикратное увеличение для передачи при половых контактах между мужчинами. При гетеросексуальной передаче увеличение показателей было значительно более выраженным среди мужчин (103%), чем среди женщин (21%). Частота передачи инфекции

5 Данные, предоставленные Российской Федерацией, ограничивались сведениями о новых случаях ВИЧ-инфекции с разбивкой по полу за 2009-2019 гг. и данными о тестировании на ВИЧ, что позволило включить российские данные в таблицы 1-3 и 25 и в рисунки, демонстрирующие динамику показателей ВИЧ-инфицирования. Данные о возрасте пациентов и путях передачи, представленные в настоящем докладе, охватывают страны, подавшие полный набор данных в единую европейскую систему эпиднадзора за ВИЧ-инфекцией ECDC/ВОЗ.

вследствие употребления инъекционных наркотиков снизилась на 36%, продолжая при этом оставаться на достаточно высоком уровне (рис. 2.9). В центре в период с 2010 г. по 2019 г. число инфицировавшихся при половых контактах между мужчинами, удвоилось; этот путь передачи преобладал в 12 из 14 стран при параллельном увеличении числа случаев передачи ВИЧ-инфекции гетеросексуальным путем на 48%. Частота передачи ВИЧ при употреблении инъекционных наркотиков стабилизировалась после вспышки, наблюдавшейся в Румынии в 2011– 2013 гг. (рис. 2.1). Доля новых случаев ВИЧ-инфекции вследствие употребления инъекционных наркотиков оставалась на уровне 6% и в 2010 г., и в 2019 г. (рис. 2.16). На Западе частота новых случаев ВИЧ-инфекции, обусловленных гетеросексуальными контактами, продолжала неуклонно снижаться, и в целом за десятилетний период она сократилась на 37%. В период с 2010 г. по 2019 г. частота заражения ВИЧ при употреблении инъекционных наркотиков снизилась на 34% и после пика в 2012 г., вызванного вспышкой в Греции, в настоящее время опять снижается. Число впервые выявленных случаев ВИЧ-инфекции, обусловленных половыми контактами между мужчинами, в сравнении с 2009 г. снизилось на 29%. Число новых диагнозов ВИЧ-инфекции с неизвестным путем передачи увеличилось на Западе на 37% (рис. 2.18).

Поздняя диагностика ВИЧ-инфекции в Регионе остается проблемой. Среди людей старше 14 лет с впервые выявленной ВИЧ-инфекцией, по которым имелась информация о количестве CD4-лимфоцитов на момент установления диагноза, более чем у половины (53%) диагноз был поставлен поздно, когда число CD4-лимфоцитов снизилось до менее 350 клеток/мм3, включая 31% пациентов на поздних стадиях ВИЧ-болезни с количеством CD4 <200 клеток/мм3. Доля людей с впервые выявленной ВИЧ-инфекцией на поздних стадиях (CD4 <350/мм3) варьировала в зависимости от пути передачи и возрастной группы, но была самой высокой среди инфицировавшихся при гетеросексуальных половых контактах (58%; 60% для мужчин и 55% для женщин) и при потреблении инъекционных наркотиков (52%), а самой низкой – среди мужчин, инфицировавшихся при половых контактах с мужчинами (42%) (рис. С). Эта доля повышается с увеличением возраста на момент установления диагноза в диапазоне от 35% среди людей в возрасте 15–19 лет до 67% среди людей в возрасте 50 лет и старше. Каких-либо значительных различий в частоте поздней диагностики в зависимости от пола выявлено не было (53% для мужчин и 54% для женщин), но в отношении мужчин эта схожесть маскирует различие между MCM (которым, как правило, диагноз ставится раньше) и гетеросексуальными мужчинами (которым, как правило, диагноз ставится позже). Кроме того, отмечались незначительные различия в поздней диагностике и в зависимости от географии внутри Региона – 56% на востоке и в центре и 49% на западе.

В 2019 г. в 45 государствах-членах в Европейском регионе ВОЗ[6] СПИД был впервые диагностирован у 12 535 человек, и, таким образом, заболеваемость СПИДом составила 1,7 случая на 100 000 населения. В целом по Региону 76% случаев СПИДа были диагностированы на востоке, где показатель заболеваемости на 100 000 населения также был самым высоким (8,3); 18% случаев диагностировались на Западе (показатель 0,5 на 100 000 населения) и 6% – в центре Региона (0,4 на 100 000 населения) (таблица 14). У двадцати одного процента людей с диагностированным СПИДом были выявлен туберкулез как СПИД-индикаторное заболевание, частота которого варьировала от 13% случаев на Западе и 21% в центре до 28% на востоке. В период с 2010 г. по 2019 г. общая частота новых диагнозов СПИДа в Регионе сократилась на 23%, но тенденции развития СПИДа значительно различаются между тремя географическими регионами. На востоке показатель увеличился на 15%, с 7,2 в 2010 г. до 8,3 в 2019 г. В центральной части показатель оставался стабильным на уровне 0,4 на 100 000 населения, в то время как на Западе Региона продолжилась тенденция устойчивого снижения – сокращение на 69% с 1,6 в 2010 г. до 0,5 в 2019 г. (рис. 2.4).

Выводы

Передача ВИЧ-инфекции остается одной из важнейших нерешенных проблем общественного здравоохранения, которая затрагивает миллионы людей в Европейском регионе ВОЗ, особенно в восточной его части. На протяжении последних трех десятилетий в Европейском регионе ВОЗ ВИЧ-инфекция была диагностирована с официальной регистрацией у 2,1 миллионов, в том числе у свыше 710 000 людей, проживающих в ЕС/ЕЭЗ. В 2019 г. ВИЧ-инфекция была диагностирована более чем у 136 000 человек, что соответствует показателю 15,6 на 100 000 населения. Подавляющее большинство новых случаев ВИЧ-инфекции (79%) были выявлены в восточной части Региона, а 16% – на Западе. На Российскую Федерацию приходится 59% всех новых случаев ВИЧ-инфекции, зарегистрированных в Европейском регионе ВОЗ, и 74% – в восточной части Региона В трети стран в восточной части Европейского региона ВОЗ, подавших сведения, наблюдается тенденция к увеличению числа новых диагнозов ВИЧ-инфекции, хотя и в более медленном, нежели ранее, темпе. В последние три года в Российской Федерации отмечалось приостановление темпов прироста числа зарегистрированных новых случаев ВИЧ-инфекции; некоторые признаки стабилизации наблюдались также в Украине, что способствовало общей стабилизации эпидемии на востоке Региона.

6 Отсутствуют данные по Андорре, Бельгии, Монако, Российской Федерации, Северной Македонии, Туркменистану, Узбекистану и Швеции.

В Европейском регионе ВОЗ растет число людей, живущих с ВИЧ, с неустановленным диагнозом. По оценкам, за последнее десятилетие ежегодно инфицируется больше людей, чем ставится диагнозов. Напротив, в ЕС/ЕЭЗ доля людей, живущих с ВИЧ, с неустановленным диагнозом, сокращается.

Хотя эпидемические модели и тенденции в разных странах Европейского региона ВОЗ варьируют в широких пределах, в некоторых частях Региона наблюдалось стойкое увеличение числа новых случаев заражения, связанных с определенными путями передачи инфекции, а именно: среди мужчин, имеющих половые контакты с мужчинами, в центре и на востоке, а также среди гетеросексуалов на востоке Региона, хотя некоторые исследования дают основания полагать, что последнее утверждение следует интерпретировать с осторожностью *(1,2)*. За прошлые годы частота гетеросексуальной передачи ВИЧ-инфекции существенно сократилась в ЕС/ЕЭЗ и западной части Региона, особенно среди женщин, равно как и частота случаев передачи ВИЧ-инфекции при половых контактах между мужчинами в отдельных странах ЕС/ЕЭЗ и западной части Региона. Во многих странах продолжала снижаться частота передачи ВИЧ при употреблении инъекционных наркотиков, хотя в 2019 г. на этот путь заражения в восточной части Региона по-прежнему приходилось 24% впервые зарегистрированных случаев ВИЧ-инфекции с известным путем передачи.

У слишком большого числа людей во всем Европейском регионе ВОЗ диагноз ВИЧ-инфекции ставится на поздних стадиях (53%), что повышает риск ухудшения состояния здоровья, летального исхода и дальнейшего распространения ВИЧ-инфекции. Большое число диагнозов СПИДа на востоке подтверждает, что поздняя диагностика ВИЧ-инфекции остается серьезной проблемой. В то же время тенденция к стабилизации заболеваемости СПИДом, наблюдаемая с 2012 г., может быть результатом того, что большинство стран восточной части Региона в настоящее время проводят политику «Лечить всех», согласно которой возможность получения антиретровирусной терапии (АРТ) предлагается всем людям, живущим с ВИЧ, независимо от стадии заболевания.

Для обеспечения ранней диагностики и повышения числа людей, осведомленных о своем ВИЧ-статусе, требуются новые стратегии с расширением диапазона разнообразных и дружественных пользователю подходов к более широкодоступному тестированию на ВИЧ. Сводное руководство ВОЗ по самотестированию на ВИЧ и информированию партнеров и Руководство ECDC по комплексному тестированию на ВИЧ-инфекцию и гепатиты B и C содержат рекомендации по внедрению в практику тестирования инновационных подходов, включая самотестирование и тестирование на уровне местных сообществ, проводимое обученными поставщиками услуг без медицинского образования с использованием быстрых тестов как части общих услуг по тестированию на ВИЧ *(3–5)*. ВОЗ выпустила аналитическую записку об отказе от использования вестерн-блоттинга и линейного иммуноанализа в стратегиях и алгоритмах тестирования на ВИЧ и переходе на поддержку децентрализованного тестирования и незамедлительного направления на лечение *(6)*. Хотя предоставление услуг по тестированию на ВИЧ в Регионе со временем улучшилось и степень внедрения таких подходов, как самотестирование и тестирование на местных сообществ, значительно повысилась в последние годы, результаты мониторинга политики в рамках Региона указывают на то, что во многих европейских странах некоторые подходы к тестированию используются в ограниченных масштабах или вообще не применяются *(7)*. Услуги по тестированию на ВИЧ должны сосредоточиваться на ключевых группах населения с учетом местных эпидемиологических особенностей, адаптироваться к конкретным потребностям этих групп, а также содействовать своевременному охвату такими услугами, как профилактика, лечение и помощь в связи с ВИЧ-инфекцией. Такой подход обеспечит более раннюю диагностику и начало лечения и приведет к улучшению исходов лечения и снижению ВИЧ-ассоциированной заболеваемости, болезненности и смертности, способствуя достижению целей «90-90-90» и других региональных и глобальных целевых ориентиров *(8–10)*.

Имеются убедительные фактические данные о том, что раннее начало АРТ полезно как для здоровья людей, получающих лечение, так и для предотвращения дальнейшей передачи ВИЧ *(11–16)*. Почти в 90% стран Европейского региона ВОЗ существует политика назначения АРТ вне зависимости от количества CD4-лимфоцитов *(17,18)*.

В феврале 2020 г. Европейское региональное бюро ВОЗ организовало в Восточной Европе и Центральной Азии (ВЕЦА) региональный семинар, посвященный науке внедрения в практику методов борьбы с ВИЧ-инфекцией и вирусными гепатитами *(19)*. Семинар проводился с целью оказания поддержки странам ВЕЦА в проведении научных исследований и применении научных и программных данных как руководящих указаний при реализации рекомендаций ВОЗ в практике программ по борьбе с ВИЧ и вирусными гепатитами. Помимо прочего, обсуждалась оценка валидности данных планового эпиднадзора с сосредоточением внимания на сведениях о путях передачи ВИЧ и выявление препятствий на пути к достижению цели – 90% всех инфекций должно диагностироваться путем оптимизации вмешательств по тестированию, а также внедрение и расширение масштабов доконтактной профилактики (ДКП). Рекомендовалось улучшение связей с системой оказания помощи и удержания в ней, повышение качества помощи и ведения коморбидных состояний. Семинар был также направлен на содействие сотрудничеству между

исследователями, учеными, донорами и партнерами для проведения научного поиска и оказания поддержки науки внедрения в странах ВЕЦА.

Меры противодействия эпидемии ВИЧ-инфекции должны основываться на научных данных и адаптироваться к национальной и местной эпидемиологической ситуации. На основании исчерпывающих данных эпиднадзора, приведенных в настоящем докладе, можно сделать следующие выводы:

- Что касается стран ЕС/ЕЭЗ и западной части Региона, то с учетом преобладания передачи ВИЧ-инфекции среди МСМ и повышения частоты ВИЧ-инфицирования МСМ в некоторых странах представляется, что существующие вмешательства по профилактике, лечению и оказанию помощи в связи с ВИЧ, направленные на МСМ, требуют дальнейшего расширения и укрепления; они должны оставаться приоритетным направлением ответных мер в связи с ВИЧ. Страны со снижением показателей продемонстрировали воздействие изменения характера деятельности, выражающееся в более частом тестировании на ВИЧ подвергающихся риску гомосексуальных мужчин и незамедлительном охвате диспансерным наблюдением и антиретровирусной терапией всех выявленных ВИЧ-положительных лиц *(20)*. Многокомпонентные вмешательства и включение в комплекс мероприятий по профилактике и противодействию таких подходов, как ДКП ВИЧ-инфекции, скрининг и лечение инфекций, передаваемых половым путем, самотестирование и содействие добровольному информированию партнера, могли бы помочь остановить тенденции к росту показателей, наблюдаемые в некоторых странах. В большинстве европейских стран уровень использования ДКП значительно ниже предполагаемой потребности *(3,21–23)*. Во многих странах западной части Региона необходимо более широко внедрять эффективные и доступные услуги по тестированию, профилактике и помощи, предназначенные для становящейся все более разнообразной группы мигрантов, подвергающихся риску заражения ВИЧ или живущих с ВИЧ. Увеличение в 2011–2012 гг. числа случаев ВИЧ-инфекции у людей, употребляющих инъекционные наркотики, и продолжающиеся в ряде стран местные вспышки *(24–28)* свидетельствуют о необходимости поддержания или расширения масштабов программ снижения вреда.
- В странах в центральной части Региона заболеваемость ВИЧ-инфекцией растет быстрее, чем в любой другой части Европейского региона ВОЗ. В центре отмечается очень значительные различия в частоте новых случаев ВИЧ-инфекции между мужчинами и женщинами: среди мужчин, особенно среди МСМ, наблюдается тревожный рост этого показателя по сравнению с довольно стабильной динамикой среди женщин. Половые контакты между мужчинами являются преобладающим путем передачи ВИЧ-инфекции в 13 из 14 стран центральной части Региона. Для изменения подобной ситуации необходимы вмешательства, такие как ДКП для групп высокого риска, тестирование на ВИЧ, проводимое поставщиками услуг без медицинского образования; экспресс-тестирование на ВИЧ, самотестирование на ВИЧ и содействие добровольному информированию партнера, наряду с политикой и практикой предложения АРТ всем людям, живущим с ВИЧ. В ряде стран после прекращения финансирования со стороны Глобального фонда для борьбы со СПИДом, туберкулезом и малярией произошел переход на практику внутреннего финансирования мер реагирования на ВИЧ. Однако в связи с таким переходом возникла проблема с устойчивостью финансирования, что особенно сказалось на финансировании программ профилактики ВИЧ-инфекции. Для смягчения некоторых возникающих проблем и предотвращения ускорения темпов распространения эпидемии необходимо усиление политической поддержки и помощи наряду с активизацией вовлечения гражданского общества *(29)*.
- В странах в восточной части Региона существует настоятельная необходимость продолжить расширение масштабов смелых, научно-обоснованных вмешательств и обеспечить предоставление более эффективных, комплексных услуг в рамках систем здравоохранения, обращающих больше внимания на социальные детерминанты здоровья. Нужны комплексные и инновационные стратегии тестирования на ВИЧ с особым упором на охват ключевых групп населения. Этого можно достичь с помощью дружественных пользователю услуг по профилактике и тестированию, включая содействие информированию партнера, ДКП, тестирование на ВИЧ, проводимое обученными поставщиками услуг без медицинского образования и самотестирование в соответствие с рекомендациями ВОЗ. Все эти услуги должны быть интегрированы в национальную политику и программы, а затем осуществлены на практике *(3,4,10,30)*. Привлечение общественности к разработке и оказанию лечебно-профилактических услуг имеет решающее значение для сокращения числа новых случаев инфицирования ВИЧ и увеличения числа людей, охваченных диспансерным наблюдением и получающих АРТ, с конечной целью снижения высоких показателей заболеваемости ВИЧ и смертности вследствие СПИДа. Инновационные вмешательства по профилактике ВИЧ-инфекции должны быть направлены на снижение риска гетеросексуальной передачи, особенно среди пар, в которых один из партнеров склонен к поведению высокого риска (такого как, например, употребление инъекционных наркотиков) или в течение длительных периодов времени работает за рубежом. Большое количество впервые диагностированных случаев ВИЧ-инфекции у людей, инфицировавшихся при употреблении инъекционных наркотиков, подчеркивает, что научно-обоснованная политика, сосредоточенная на ключевых группах населения и предусматривающая высокий уровень охвата программами

снижения вреда людей, употребляющих инъекционные наркотики, и других научно-обоснованных подходов, по-прежнему играет важнейшую роль в эффективном противодействии ВИЧ-инфекции в восточной части Региона.

Надежные данные эпиднадзора имеют решающее значение для мониторинга ситуации и принятия службами общественного здравоохранения информированных решений относительно точных и своевременных мер реагирования на европейскую эпидемию ВИЧ-инфекции. Полнота данных об известных путях передачи и количестве клеток CD4-лимфоцитов на момент установления диагноза в Регионе субоптимальна, главным образом из-за неполноты сведений, подаваемых такими крупными странами, как Германия, Польша, Российская Федерация и Турция, или отсутствия данных.

Некоторые исследования, проводившиеся в восточной части Региона, выявили, что информация о путях передачи может содержать погрешность, так как у многих пациентов, зарегистрированных как случаи заражения гетеросексуальным путем, есть анамнез употребления инъекционных наркотиков или, в случае мужчин, – половые контакты между мужчинами (1,2). Это обстоятельство подчеркивает важность оценки достоверности данных планового эпиднадзора, касающихся путей передачи, особенно в странах, где употребление инъекционных наркотиков и гомосексуальность стигматизированы.

Постепенно увеличивается число стран, проводящих усиленный эпиднадзор за ВИЧ-инфекцией и подающих собранные сведения об эпидемиологической обстановке на европейский уровень. В 2019 г. 41 страна предоставила сопряженные данные о ВИЧ-инфекции и СПИДе, что позволило лучше понять клиническое состояние людей с диагностированной ВИЧ-инфекцией. Такой подход расширяет возможности более долгосрочного мониторинга конечных результатов оказания преемственной медицинской помощи в связи с ВИЧ-инфекцией, например, путем моделирования доли не диагностированных случаев инфекции и количественной оценки таких параметров, как направление людей с диагностированной ВИЧ-инфекцией в систему оказания помощи и лечения для достижения вирусной супрессии. Кроме того, это может поддержать национальные и глобальные усилия по мониторингу прогресса в достижении целей 90–90–90 и иных глобальных и региональных целевых ориентиров.

В сентябре 2020 г., отражая ситуацию с пандемией COVID-19, Европейское региональное бюро ВОЗ и ECDC организовали совместное виртуальное совещание с основными национальными заинтересованными сторонами, участвующими в принятии мер реагирования на туберкулез, ВИЧ и вирусные гепатиты, включая ключевых партнеров, доноров, затронутые сообщества и организации гражданского общества. Цель заключалась в обмене информацией и передовым опытом по поддержанию оказания основных услуг по борьбе с туберкулезом, ВИЧ и вирусными гепатитами. Страны и партнеры обсудили свой опыт в обеспечении доступа к качественным услугам в связи с ВИЧ и преемственности оказания помощи во время пандемии COVID-19, а также о том, как они отслеживают воздействие пандемии COVID-19 на услуги в связи с ВИЧ. В ходе совещания обсуждались также последнее руководство и рекомендации ВОЗ по вопросам политики борьбы с туберкулезом, ВИЧ и вирусными гепатитами и ведения коморбидных состояний.

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1. HIV and AIDS in the EU/EEA

1.1 HIV diagnoses

In 2019, 24 801 new HIV diagnoses were reported in 30 countries of the EU/EEA,[9] with a rate of 5.4 per 100 000 when adjusted for reporting delay (Table 1, Annex 6). The highest rates were reported by Malta (16.2; 80 cases), Latvia (15.4; 295) and Estonia (13.4; 178), and the lowest by Slovakia (1.9; 101 cases) and Slovenia (1.6; 34) (Table 1, Map 1).

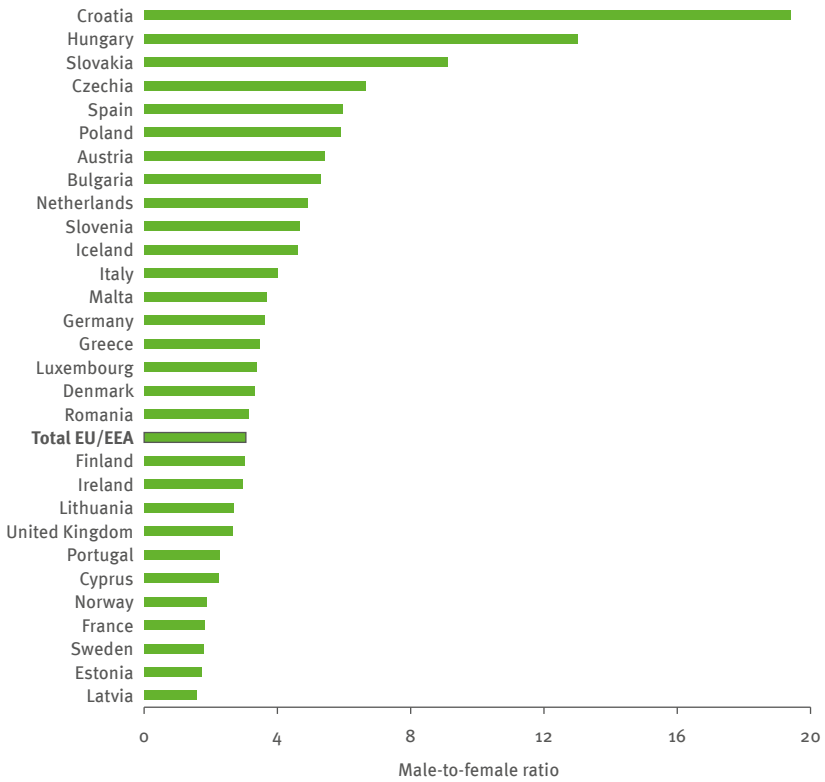
As in previous years, more men than women were diagnosed with HIV in 2019 (18 588 and 6086, respectively), resulting in an overall male-to-female ratio of 3.1 : 1 (Tables 2 and 3, Fig. 1.1). This ratio was highest in Croatia (19.4) and Hungary (13.0) and was above one in all countries in the EU/EEA (Fig. 1.1). The predominant mode of transmission in countries with the highest male-to-female ratios was sex between men. The overall rate of new diagnoses in men was 7.5 per 100 000 population (Table 2) and for women 2.4 per 100 000 population (Table 3). In addition to the 24 674 cases with male or female gender, 127 individuals with unknown or "other" gender were diagnosed with HIV in 2019. Current reporting systems at European level are not able effectively to differentiate how many of these cases are transgender men or women and how many are cases with unknown information reported on gender.

Age-specific rates were lowest in persons under 15 years of age (0.2 per 100 000 population for both males and females) (Fig. 1.2). In all other age groups, men had higher age-specific rates than women. The highest overall age-specific rate of HIV diagnoses was observed among 25–29-year-olds (12.0 per 100 000 population), largely because this age group has the highest age-specific rate for men at 18.0 per 100 000 population, while rates for women were highest in the 30–39 age group (6.1 per 100 000 population) (Fig. 1.2).

The mean age at diagnosis was lower for MSM (36.4 years) than for cases attributed to injecting drug use (38.8 years) or heterosexual transmission (41.1 years overall, 38.9 in women and 43.4 in men). The 30–39 age group accounted for most HIV diagnoses overall (31%) and in all transmission groups (Fig. 1.3). One third of diagnoses attributed to sex between men were made

9 Besides Belgium, all EU/EEA countries and the United Kingdom reported data for 2019.

Fig. 1.1. Male-to-female ratio in new HIV diagnoses, by country, EU/EEA, 2019 (n = 24 674)



Note: Belgium did not report data and Liechtenstein reported zero cases in 2019.

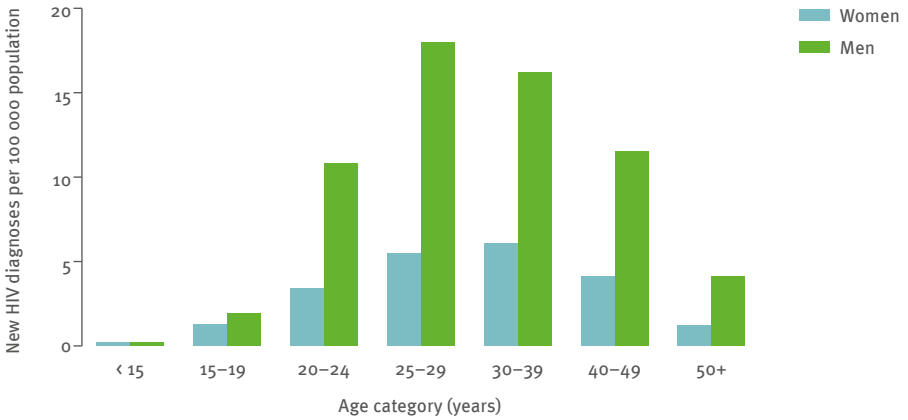
before age 30, while 51% of HIV infections due to sex between men and women were diagnosed at 40 years or above, and more than one quarter (26%) at 50 or above. The age pattern among those newly diagnosed with HIV differed across countries, with 30% or more of new diagnoses among persons under 30 years in Czechia, Hungary, Ireland, Malta, Poland, Romania and Slovakia and 50% or more of new diagnoses among persons 40 years and older in Denmark and Italy (Fig. 1.4).

Young people aged 15–24 years comprised 11% of the EU/EEA population and 11% of HIV diagnoses in 2019. Romania reported more than 15% of its HIV diagnoses in this age group (Fig. 1.5, Table 9). Forty-one per cent of the EU/EEA population consists of older adults (50 years and above), who comprised 21% of the new HIV diagnoses reported in 2019. Older adults comprised more than 25% of those newly diagnosed with HIV in Denmark, Finland and Italy (Fig. 1.4, Table 9).

Data on transmission mode provide information on the groups in the EU/EEA who are most affected by HIV (Tables 4–8, Fig. 1.5).

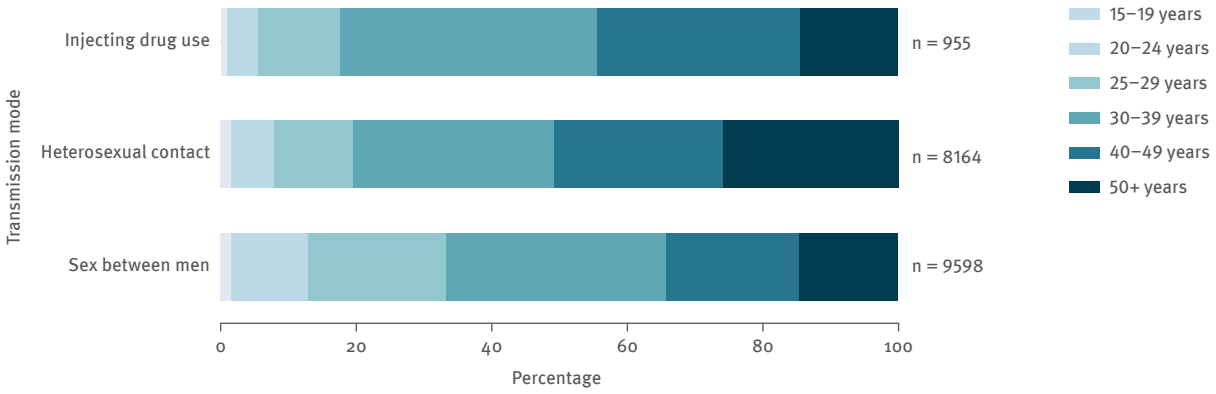
- Sex between men remains the most common mode of HIV transmission reported in the EU/EEA, accounting for 38.7% (9 598) of all new HIV diagnoses in 2019. Sex between men was the predominant route of transmission (50.6%) among those for whom route of transmission was known (Table 4, Table 8, Fig. 1.5) and accounted for more than 60% of new HIV diagnoses in 10 countries (Croatia, Czechia, Germany, Hungary, Iceland, the Netherlands, Poland, Slovakia, Slovenia and Spain) (Fig. 1.5).
- Sex between men and women is the second most commonly reported mode of transmission in the EU/EEA, accounting for 33% (8164) of all HIV diagnoses and 43% of diagnoses where the route of transmission was known (Table 6, Table 8, Fig. 1.5). These proportions are divided roughly equally between men and women. Heterosexual transmission is the most commonly reported known mode of transmission in nine EU/EEA countries (Cyprus, Estonia, France, Latvia, Luxembourg, Norway, Portugal, Romania and Sweden). More than one third (41%; 2346) of newly diagnosed cases due to heterosexual transmission are among migrants originating from countries with generalized HIV epidemics. The highest proportions of these were observed in Cyprus (79%) and Ireland (72%).

Fig. 1.2. Age- and gender-specific rates of new HIV diagnoses per 100 000 population, EU/EEA, 2019 (n = 22 318)



Note: this figure does not include Belgium (due to non-reporting) or Spain (due to non-national coverage of the surveillance data for 2019).

Fig. 1.3. New HIV diagnoses, by age group and transmission mode, EU/EEA, 2019



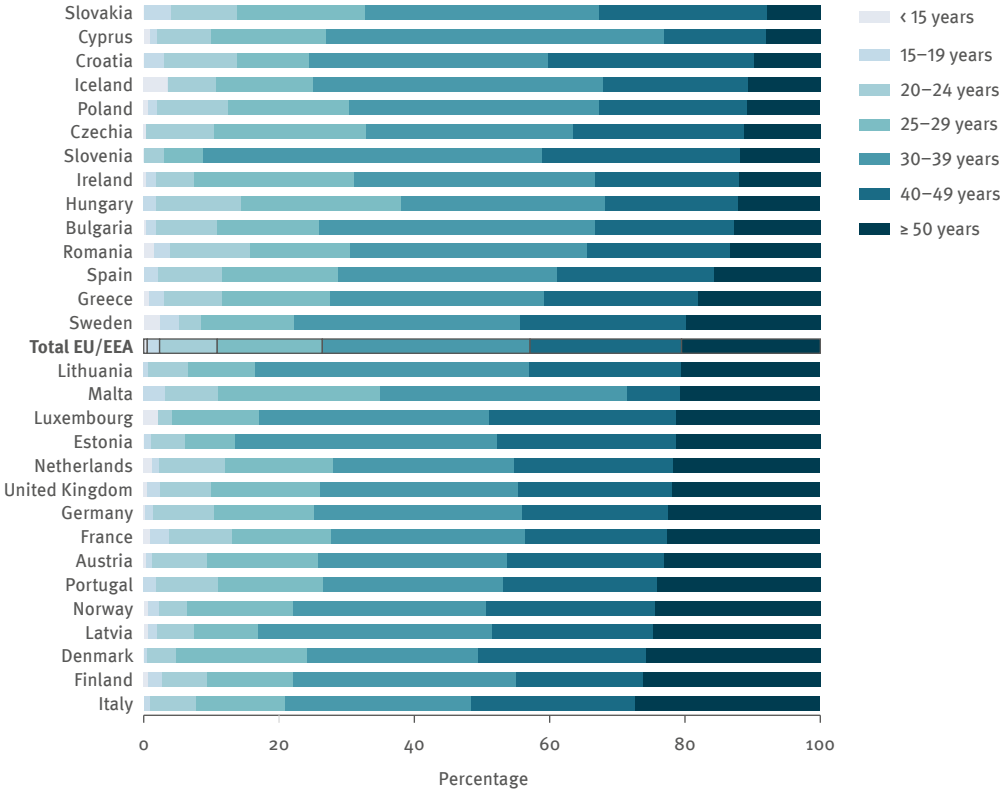
- Four per cent (955 cases) of all new HIV diagnoses and 5% of those with known route of HIV transmission were attributed to injecting drug use (Table 5, Table 8, Fig. 1.4). Injecting drug use was the probable route of transmission for one fourth or more of the cases reported in Latvia (26%) and Lithuania (38%) (Fig. 1.5).
- Of the remaining cases, 167 diagnoses (less than 1%) were reported as being due to vertical transmission during pregnancy, childbirth or breastfeeding (Table 7); 123 of these cases (74%) were born outside of the country in which the case was reported (Table 11). Fifty-two (0.3%) diagnoses were reported to be due to contaminated transfusion of blood and its products, and 21 cases to hospital-acquired infections (Table 8). The majority of these nosocomial and transfusion-related cases originated from outside of the country where the case was reported (Table 11).
- Transmission mode was reported as unknown for 5844 diagnoses (23.6%), with wide variation among countries: less than 5% of diagnoses were reported with unknown transmission mode in Bulgaria, Czechia, Denmark, Luxembourg, Norway and Romania, and over 50% in Ireland and Poland (Table 8).

Twenty-six EU/EEA countries provided information on the country of birth, country of nationality or region of origin for 20 430 (82%) HIV diagnoses in 2019 (Fig. 1.6).

In the EU/EEA, 8977 diagnoses (44% of those with known information on region of origin) were reported among people originating from outside of the reporting country. Of these, 3619 (18% of those with known information on region of origin), irrespective of transmission mode, were reported among people originating from countries with generalized HIV epidemics in sub-Saharan Africa (Fig. 1.6, Table 10). An additional 26% of new diagnoses with known region of origin (5383 cases) were among people born outside of the reporting country who did not originate from a country experiencing a generalized epidemic, including 9% from countries in Latin America and the Caribbean (1858 cases), 8% from other countries in central and eastern Europe (1579 cases) and 3% from other countries in western Europe (712 cases). The countries with more than half of their new HIV diagnoses among people originating from outside of the reporting country were Cyprus, Denmark, Finland, France, Iceland, Ireland, Luxembourg, Norway, Sweden and the United Kingdom.

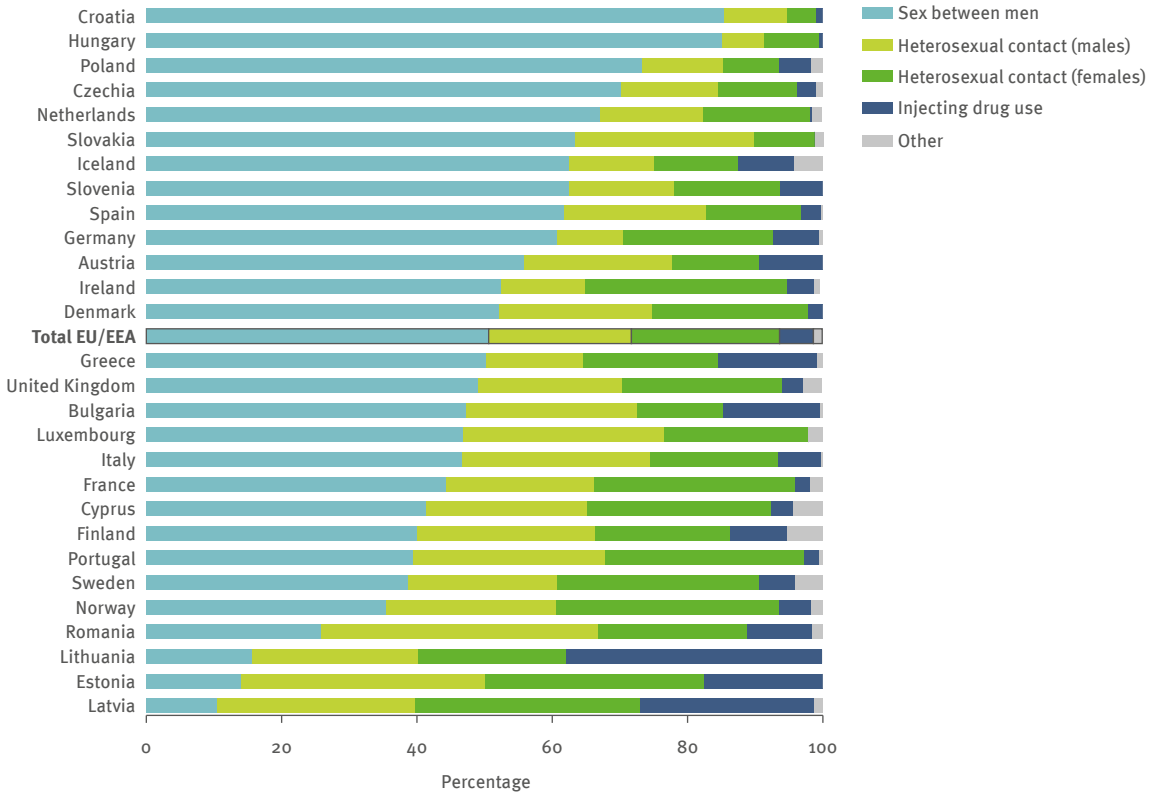
In 2019, 16 countries reported data on whether the new HIV diagnosis reported had previously been diagnosed with HIV in another country, prior to their 2019 diagnosis in the reporting country. Of the 11 178 new HIV diagnoses in these 16 countries, 954 (8.5%) were previous positives. The proportion of 2019 diagnoses that had previously been diagnosed was higher than the EU/EEA

Fig. 1.4. Percentage of new HIV diagnoses, by country and age group, EU/EEA, 2019 (n = 24 715)



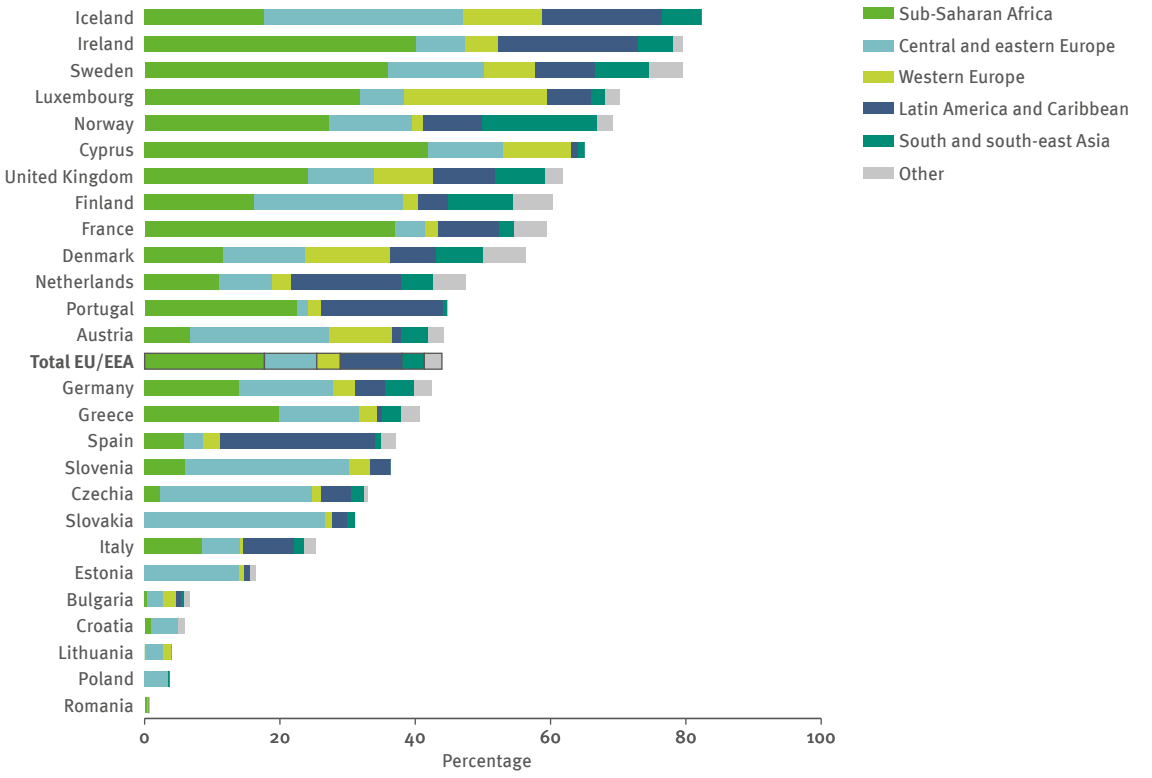
Note: graph organizes countries in order of proportion of population < 50 years. Belgium did not report data and Liechtenstein reported zero cases in 2019. Unknown route of transmission is excluded from the proportions presented here.

Fig. 1.5. Percentage of new HIV diagnoses with known mode of transmission, by transmission route and country, EU/EEA, 2019 (n = 18 957)



Note: Belgium did not report data, Liechtenstein reported zero cases and Malta did not report transmission data in 2019. Unknown route of transmission is excluded from the proportions presented here.

Fig. 1.6. Percentage of new HIV diagnoses among migrants out of all reported cases with known information on region of origin, by country of report, EU/EEA, 2019 (n = 20 430)



Note: Belgium did not report data in 2019 and Hungary, Latvia and Malta did not report data on country of birth or region of origin.

average in some countries, including Cyprus (21%), Czechia (15%), Denmark (24%), Iceland (32%), Ireland (20%), Malta (16%), Norway (31%), Sweden (43%) and Slovakia (32%).

Information on CD4 cell count at the time of HIV diagnosis was provided for 15 279 (68%) adults and adolescents diagnosed in 25 countries (Table 13). All countries reporting such data were able to provide CD4 cell counts for 50% or more of their reported cases, apart from Croatia, Estonia, Germany, Ireland, Latvia and Slovenia, all of which provided data for 35% of cases or fewer. Half (50%) of all cases with a CD4 cell count were considered to have been diagnosed several years after being infected, with a count of less than 350 cells per mm^3, including 30% of cases considered to have advanced HIV infection (CD4 cell count less than 200 cells/mm^3). The proportion of those diagnosed late (CD4 cell count below 350 cells per mm^3) was above 60% among cases with known CD4 cell count at diagnosis in Bulgaria (62%), Cyprus (91%), Latvia (70%) and Romania (63%).

Among all cases diagnosed in 2019 where information on CD4 cell count or acute HIV infection was available, 12% (1896) were reported as acute infections and 26% (4122) as more recent infection (with a CD4 cell count above 500 cells per mm^3 at diagnosis) (data not shown). Among MSM diagnosed in 2019 where information was available, 15% (1116) were reported as acute infections and 30% (2192) had a CD4 cell count above 500 cells per mm^3 at diagnosis (Fig. 1.7).

When analysing CD4 cell count, the highest proportions of people presenting at a later stage of HIV infection (CD4 less than 350 cells/mm^3) were observed among women (53%), older adults (54% in 40–49-year-olds and 65% in people over 50 years), men or women infected by heterosexual sex (61% and 53% respectively), people who acquired HIV through injecting drug use (52%), and migrants from sub-Saharan Africa (56%) and south and south-east Asia (54%) (Fig. 1.8, Table 13).

The lowest proportions of late diagnosis (CD4 less than 350 cells/mm^3) were observed among younger age groups (35% of those aged 15–24 years), men who acquired HIV through sex with another man (42%) and migrants from other western European countries (38%) (Fig. 1.8).

The interval between the date of diagnosis and the date of the CD4 count was used as a proxy for time to linkage to care and, among cases where CD4 data were reported, 81% of those diagnosed in 2019 were linked to care within four days of HIV diagnosis and 99% were linked to care within three months (Fig. 1.9).

1.2 Trends in HIV diagnoses

The trend in reported HIV diagnoses for the period 2010–2019 declined in recent years. Rates in the earlier part of this decade were 6.6 per 100 000 in 2010, increasing to 6.8 in 2012 and decreasing steadily thereafter to 5.4 in 2019 (27 231 cases when adjusted for reporting delay; see Table 1, Fig. 1.10 and Annexes 1 (for reporting delay adjustment methods), 5 (for country comments) and 6 (for results)).

While the overall EU/EEA trend appears to have declined during the past decade, trends at national level vary. Several countries, including Austria, Denmark, Estonia, Finland, France, Italy, Luxembourg, the Netherlands, Norway, Portugal, Spain and the United Kingdom, have also reported a decline in rates of new diagnoses, even after adjusting for changes in population coverage of surveillance over time and for reporting delay. In contrast, since 2010, and taking reporting delay into account, rates of HIV diagnoses have more than doubled in Cyprus, Malta and Slovakia and have increased by more than 50% in Bulgaria and Poland (Table 1, Annex 6). Some countries are more affected by reporting delay, meaning that decreases in the rates of new HIV diagnoses may be overestimated and increases in rates underestimated.

Trends differ by gender and age group. Age-specific rates have declined since 2010 in all age groups except for female adults over 50 years, where they have remained stable. HIV diagnosis rates in both women and

Fig. 1.7. Acute infection or CD4 cell count per mm^3 at HIV diagnosis, overall and by transmission group, EU/EEA, 2018

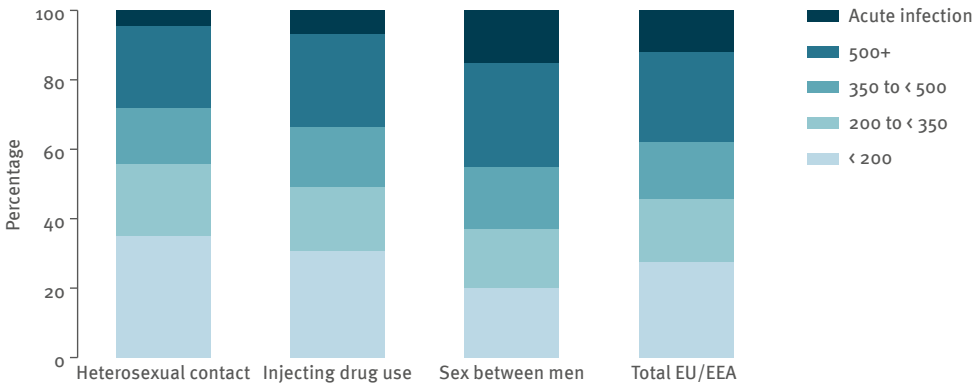
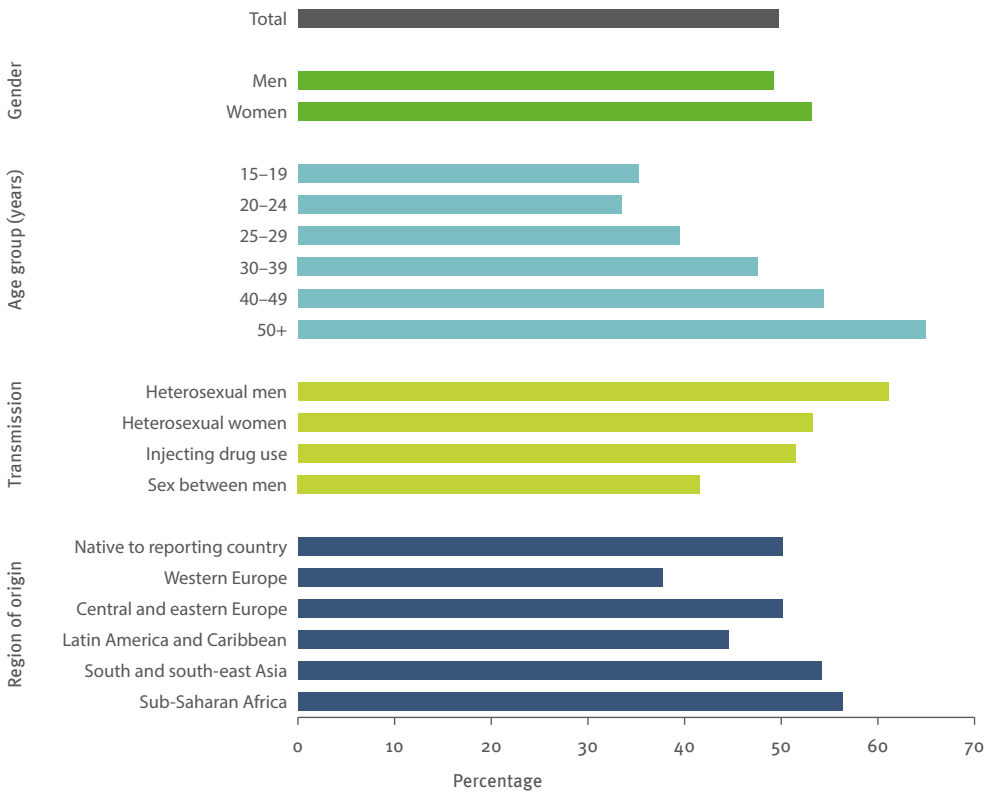
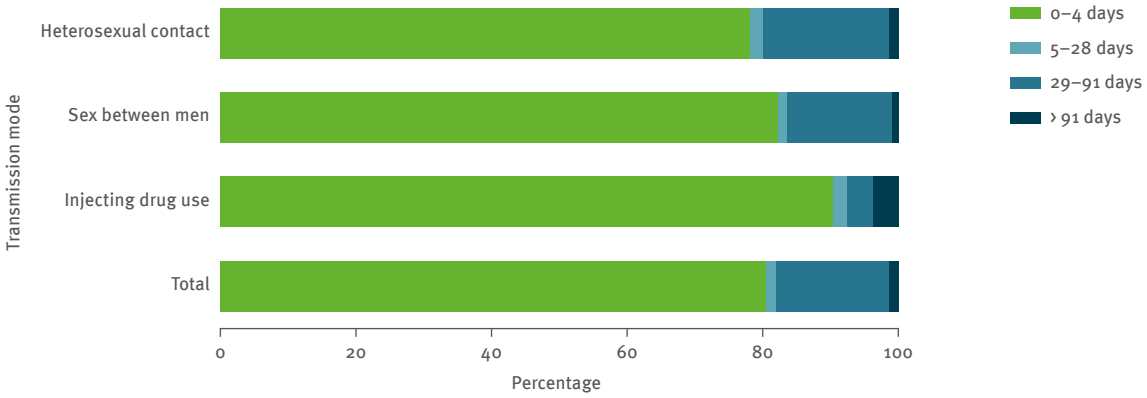


Fig. 1.8. Percentage of people diagnosed late (CD4 cell count < 350 per mm³) by demographic, EU/EEA, 2019



Note: cases with unknown CD4 count and individuals previously diagnosed abroad are excluded from the proportions presented here.

Fig. 1.9. Linkage to care after HIV diagnosis, EU/EEA, 2019 (n = 2593)



Note: cases with no or missing data on CD4 count or date and those who died within 91 days of diagnoses are excluded here.

men have consistently been higher among 25–29-year-olds and 30–39-year-olds throughout the period compared to other age groups. Age-specific rates in women have declined most markedly in those under 40 years. Rates among 20–29-year-old men peaked in 2015 and have declined since. Rates in men aged 15–24 and 30–49 years have declined since 2015. Meanwhile, rates in men over 50 have remained stable (Fig. 1.11a and 1.11b).

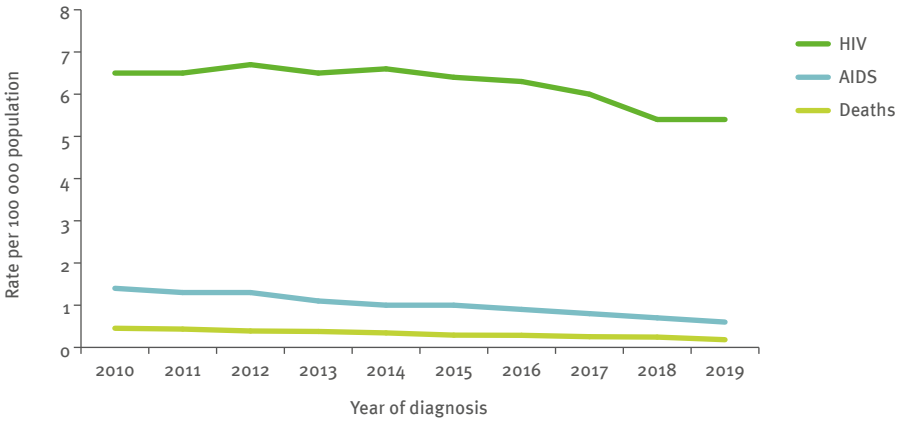
The median age at HIV diagnosis between 2010 and 2019 increased from 36 years to 37 years overall (and from 34 to 37 years among women, while remaining at 37 years in men). The proportion of diagnoses reported in older age groups is growing; 15% of people diagnosed in 2010 were over 50 years at HIV diagnosis, rising to 20% in 2019. In women, 14% of diagnoses in 2010 and 20% in 2019 were among those aged 50 years or above, while in men, 16% of diagnoses in 2010 and 20% in 2019 were among those aged 50 years or above (data not shown).

HIV diagnoses among those born outside of the reporting country comprised 40% of all new diagnoses in 2010, decreasing slightly to 37% in 2013 but increasing again in 2019 to 44% (Fig. 1.12). While the proportion of migrants from most regions has remained relatively stable since 2020, new diagnoses among people originating from countries in central and eastern Europe increased from 5% to 8% of all new diagnoses.

Since 2010, most EU/EEA countries consistently have reported data on transmission mode. From those countries consistently reporting, and adjusting for reporting delay, the data over the past decade indicate the following.

- The proportion of all HIV diagnoses attributed to sex between men increased from 45% of cases in 2010 to 52% in 2015, then decreased to 47% in 2019 (Fig. 1.13a and 1.13b). The number of HIV diagnoses reported among MSM in countries reporting consistently increased from 8730 cases in 2010 and peaked at 9839 in 2014. Even after adjusting for reporting delay, fewer cases were reported in 2019 (6888) in this same group of countries. Most of the decline in recent years appears to be due to fewer diagnoses among MSM in Austria, Finland, France, Germany, Greece, Italy, Luxembourg, the Netherlands, Norway, Portugal, Spain and the United Kingdom. Increases were observed in many EU/EEA countries between 2010 and 2019 (Table 4), with substantial increases noted in Bulgaria, Cyprus, Estonia, Lithuania, Poland, Romania and Slovakia in recent years. Cases attributed to MSM born outside of the reporting country increased during the period, declining slightly between 2016 and 2019 but not to the same extent as observed in MSM who were natives of the EU/EEA (Fig. 1.14).
- The number of heterosexually acquired cases decreased steadily in women, from 4948 in 2010 to 3682 in 2019, and from 4118 to 3131 in men during the same decade (Fig. 1.13a). The proportion of all HIV diagnoses attributed to heterosexually acquired infection in women decreased from 22% of cases in 2010 to 19% in 2019, and that attributed to heterosexually acquired infection in men decreased from 19% to 16% during the same period (Fig. 1.13b). Between 2010 and 2019, the number of cases among women and foreign-born heterosexual people decreased at a greater rate than cases among men and non-foreign-born people (Fig. 1.13a and 1.14). The decline in foreign-born cases is due mainly to sharp decreases among migrants originating from countries with generalized HIV epidemics (5441 in 2010 and 3619 in 2019). Despite the overall decline in heterosexually acquired cases during this period, new diagnoses in Lithuania and Slovakia increased substantially in this group.
- The number of HIV diagnoses reported among people who inject drugs has also declined since 2010 (from 1120 cases to 812) in both foreign-born and

Fig. 1.10. People diagnosed with HIV, AIDS and deaths reported per 100 000 population, EU/EEA, 2010–2019



Note: rates exclude countries not reporting consistently over the period: Belgium (HIV, AIDS and AIDS deaths), Sweden (AIDS and AIDS deaths), Italy and Denmark (AIDS deaths).

Fig. 1.11a. Age-specific trends in new HIV diagnoses in men, EU/EEA, 2010–2019

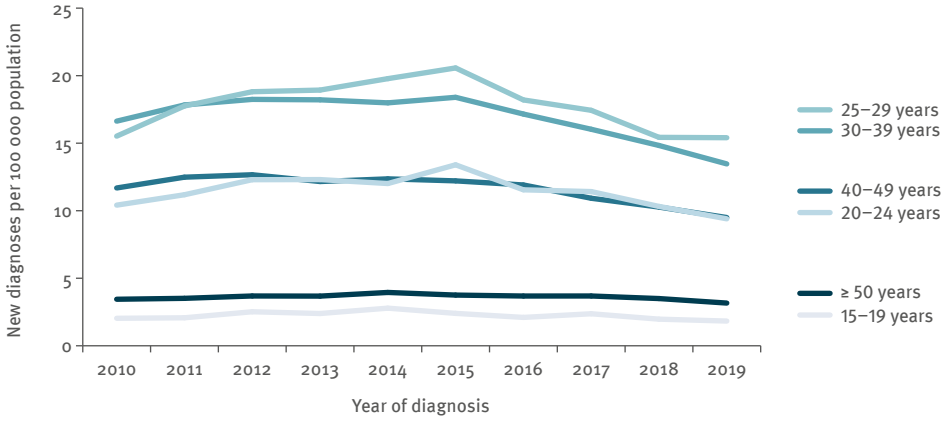
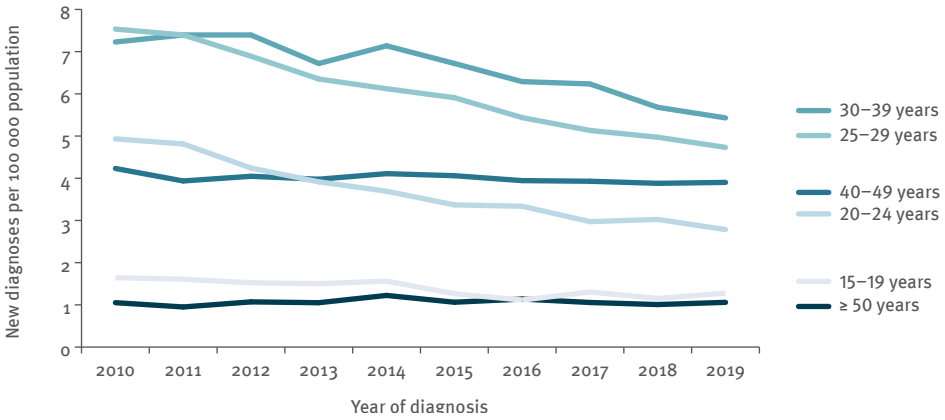
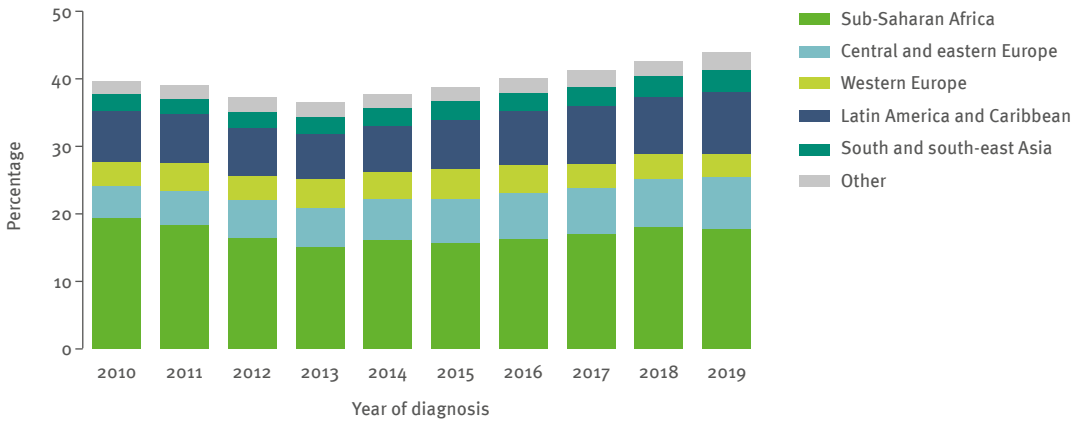


Fig. 1.11b. Age-specific trends in new HIV diagnoses in women, EU/EEA, 2010–2019



Note: these figures contain data for 28 countries. Data from Belgium, Italy and Spain are excluded due to incomplete coverage of the surveillance for a portion of the period.

Fig. 1.12. Percentage of new diagnoses among people born abroad, by year of diagnosis and region of origin, EU/EEA, 2010–2019



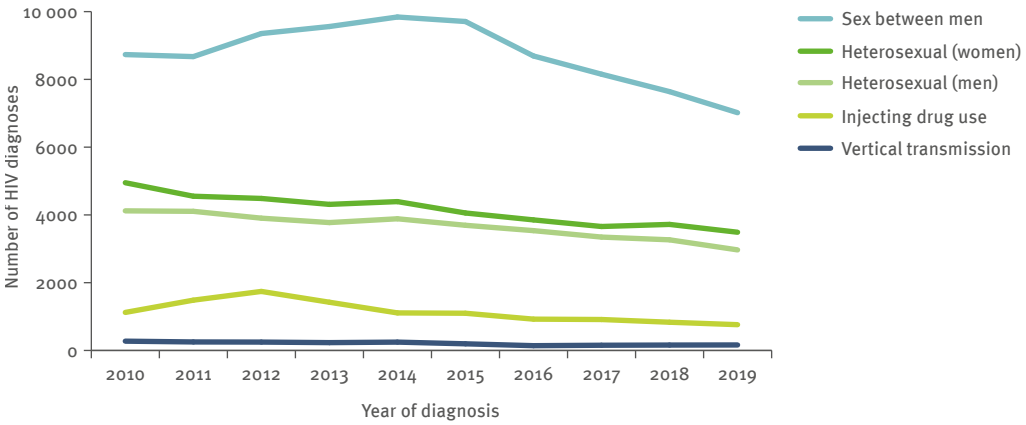
Note: data from Belgium are excluded due to inconsistent reporting during the period.

non-foreign-born people (Fig. 1.13a and 1.14). A temporary increase in overall numbers for the EU/EEA was observed in 2011 and 2012 due to localized outbreaks reported in Greece and Romania, but the overall downward trend in the number of reported cases continued for the EU/EEA in 2019 (Table 5). Several countries, including Austria, Bulgaria, Estonia, France, Italy, Portugal and Spain, have seen a sharp decrease in the rate of HIV diagnoses due to injecting drug use during the past decade.

- The number of diagnoses reported to be due to vertical transmission of HIV decreased from 272 in 2010 to 194 in 2019 (Fig. 1.13a). Throughout the period, between two thirds and three quarters of these cases originated from outside the reporting country.
- The number of HIV diagnoses reported to be due to nosocomial infection remained stable over the period, with 14 cases in 2010 and 21 in 2019. The number of cases reported to be due to transfusion of contaminated blood and its products remained stable at 52 in 2010 and 49 in 2019. The majority of these cases were among people who had migrated to the EU/EEA and were later diagnosed in the reporting country (80% in 2010 to 76% in 2019 among nosocomial cases, and 75% in 2010 to 90% in 2019 among transfusion-related cases).

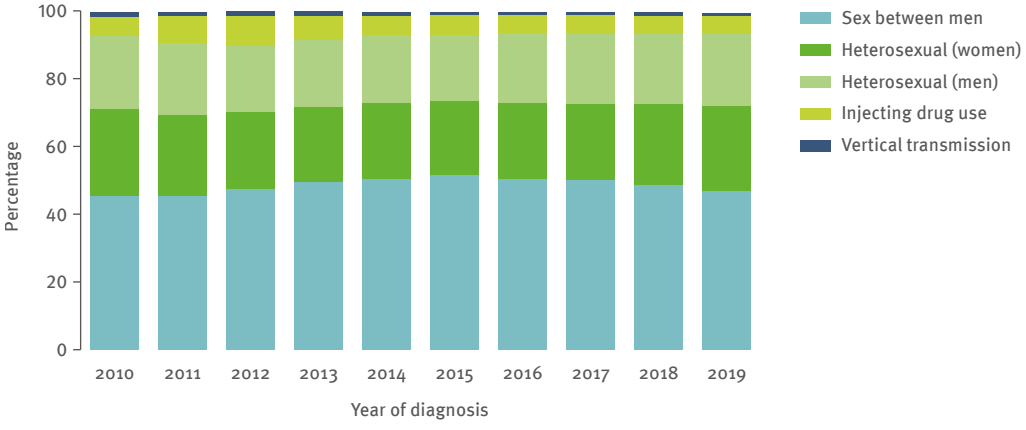
The number of cases with an unknown mode of transmission increased significantly from 3009 in 2010 to 3967 in 2019 (14% of cases in 2010 and 22% in 2019). This increase is affected by gaps in reporting and is expected to decrease slightly in future reporting.

Fig. 1.13a. HIV diagnoses, by year of diagnosis and transmission mode, adjusted for reporting delay and missing transmission imputed, EU/EEA, 2010–2019



Note: data from 24 EU/EEA countries included. HIV diagnoses reported by Iceland, Ireland, Malta and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Belgium, Italy and Spain excluded due to incomplete reporting during a portion of the period.

Fig. 1.13b. Percentage of HIV diagnoses, by year of diagnosis and transmission mode, adjusted for reporting delay, EU/EEA, 2010–2019



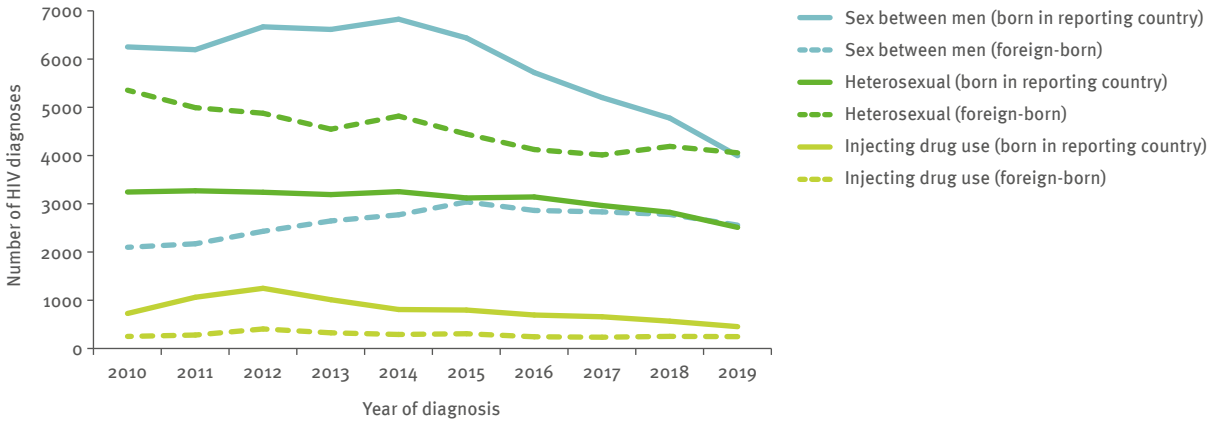
Note: data from 24 EU/EEA countries included. HIV diagnoses reported by Iceland, Ireland, Malta and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Belgium, Italy and Spain excluded due to incomplete reporting during a portion of the period.

Reporting delays differ significantly among transmission categories for some countries. When standardized adjustments for reporting delay are introduced, they increase the number of reported HIV cases in all transmission categories by between 8% and 19%, depending on the category (Fig. 1.13a and Fig. 1.14 show these adjusted trends).

While many people are still being diagnosed several years after being infected with HIV, the median CD4 cell count at HIV diagnosis increased from 341 cells/mm^3 in 2010 to 370 cells/mm^3 in 2015, declining again to 342 cells/mm^3 in 2019. The group with the highest median CD4 cell count at diagnosis is MSM, with 397 cells/mm^3 in 2019; this indicates earlier diagnosis in this group compared to others with lower median CD4 cells counts at diagnosis (data not shown). Median CD4 cell count at diagnosis was lower in cases attributed to heterosexual transmission; while there was an increase from 308 cells/mm^3 to 325 cells/mm^3 in women, median CD4 cell counts at diagnosis in men remained stable at around 260 cells/mm^3.

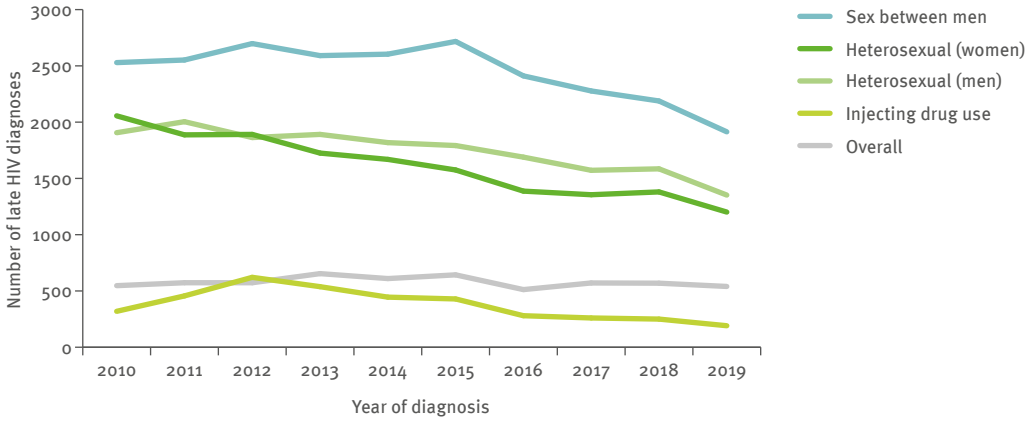
In countries reporting consistently on transmission route and CD4 count at diagnosis over time, the number of persons diagnosed late (CD4 cell count less than 350 cells/mm^3 at diagnosis) decreased by 29%, from 7441 in 2010 to 5265 in 2019. A reduced number was observed in all transmission groups (Fig. 1.15), with a 42% reduction in late diagnoses in heterosexually transmitted HIV in women (2056 in 2009, 1201 in 2019), 40% reduction where the route of transmission was injecting drug use (319 in 2009, 191 in 2010), 29% reduction in heterosexual men (1906 in 2010, 1352 in 2019) and a 24% reduction in

Fig. 1.14. New HIV diagnoses, by year of diagnosis, transmission and migration status, adjusted for reporting delay, EU/EEA, 2010–2019



Note: data from 26 EU/EEA countries included. HIV diagnoses reported by Malta and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Belgium, Italy and Spain excluded due to incomplete reporting during a portion of the period.

Fig. 1.15. Number of people diagnosed late (CD4 < 350 cells/mm^3), by year of diagnosis and transmission mode, EU/EEA, 2010–2019



Note: data from Iceland, Ireland, Malta and Poland excluded due to incomplete reporting on transmission mode during some years of the period; diagnoses reported by Belgium, Italy and Spain excluded due to incomplete reporting during a portion of the period. This graph does not account for cases that are missing CD4-count information.

transmission due to sex between men (2529 in 2010, 1914 in 2019).

1.3 AIDS cases, morbidity and mortality

Although there have been improvements in the early diagnosis of HIV, 2772 diagnoses of AIDS were reported by 29 EU/EEA countries[10] in 2019 – a crude rate of 0.5 cases per 100 000 population (Table 14). The highest rate was reported by Latvia (4.7 per 100 000 population; 90 cases). Overall, 74% of AIDS diagnoses in 2019 were made within 90 days of the HIV diagnosis, although this is affected by reporting practices in countries that only report AIDS at the time of HIV diagnosis. Among people whose HIV infection was attributed to injecting drug use, over half (60%) of AIDS diagnoses were made more than 90 days following the HIV diagnosis (Fig. 1.16).

The rate of reported AIDS cases has more than halved in the past decade, down from 1.4 per 100 000 reported in 2010 (Fig. 1.10). This decline is noted in men and women and in all transmission groups, but appears greatest among cases attributed to injecting drug use (Tables 16–20, Fig. 1.17). Despite the general EU/EEA-wide decline, an increase has been reported in the rate of AIDS diagnoses since 2010 in Bulgaria and Hungary (Table 14).

The most common AIDS-indicative diseases diagnosed in 2019 in the EU/EEA were *Pneumocystis* pneumonia

10 This includes all EU/EEA countries except Belgium and Sweden.

Fig. 1.16. Percentage of AIDS diagnoses within 90 days of HIV diagnosis, EU/EEA, 2019 (n = 1763)

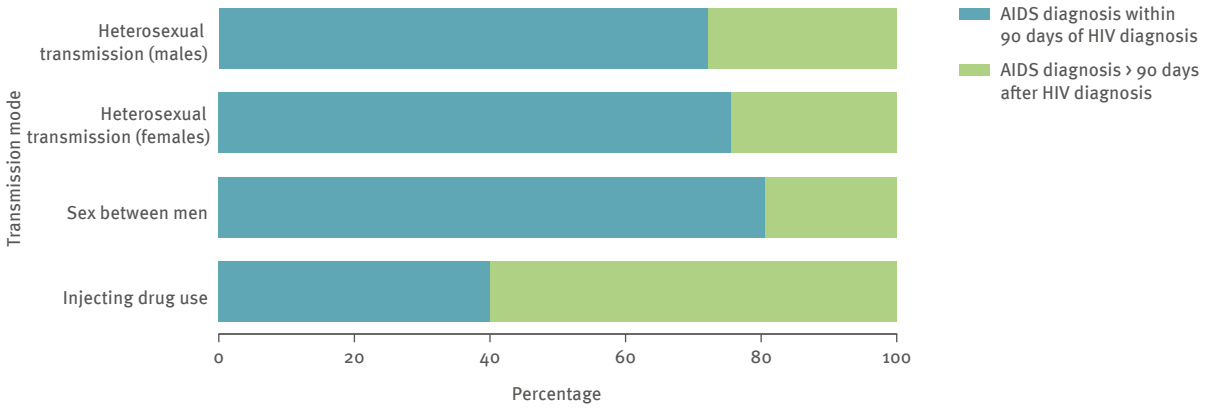
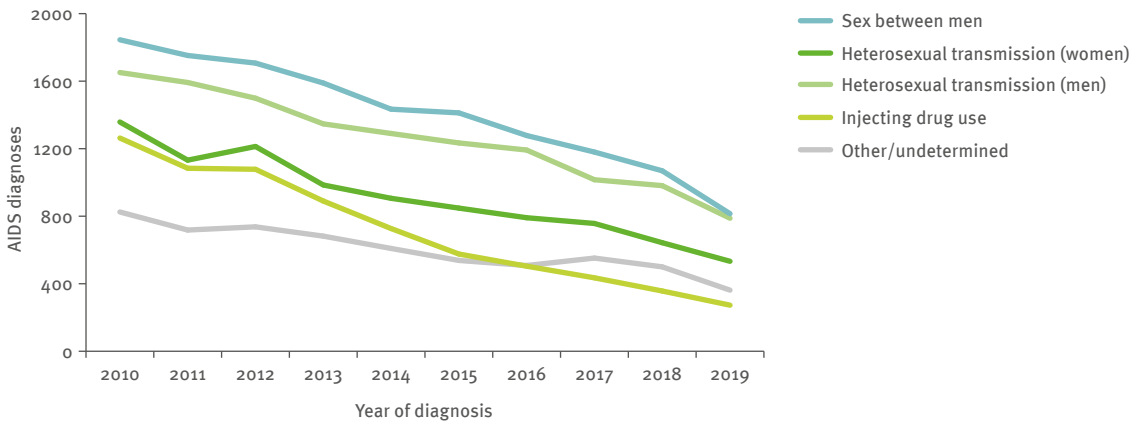


Fig. 1.17. AIDS diagnoses, by transmission mode, EU/EEA, 2010–2019



Note: data from Belgium and Sweden excluded due to inconsistent reporting during the period.

(21% of all AIDS-indicative diseases), pulmonary and/or extrapulmonary TB (12%), wasting syndrome due to HIV (12%) and oesophageal candidiasis (11%) (Table 22). Twenty-one countries reported at least one case with TB (pulmonary and/or extrapulmonary) as an AIDS-defining illness in people newly diagnosed with AIDS in 2019. Fourteen per cent of people diagnosed with AIDS in these countries presented with TB as an AIDS-defining illness, ranging from 2% of cases in Austria to more than 60% in Lithuania (Fig. 1.18).

Twenty-seven EU/EEA countries (all but Belgium, Denmark, Italy and Sweden, which did not report consistently over the past decade) reported data on deaths of people diagnosed with AIDS. Overall, 774 people were reported to have died due to AIDS-related causes during 2019 (Table 23), although these data are affected by underreporting due to the challenges for many countries in linking to death registries. AIDS-related death reports have been decreasing consistently since 2010, when 1920 deaths were recorded in the countries reporting consistently over time, although delays in reporting affect the latest figures and underreporting has affected AIDS-deaths reporting throughout the period (Fig. 1.10). From the beginning of the HIV epidemic to the end of 2019, the cumulative total of people diagnosed with AIDS in the EU/EEA was 367 890 (Table 14). The cumulative total of cases reported as known to have died due to AIDS-related causes by the end of 2019 was 196 164 (Table 23).

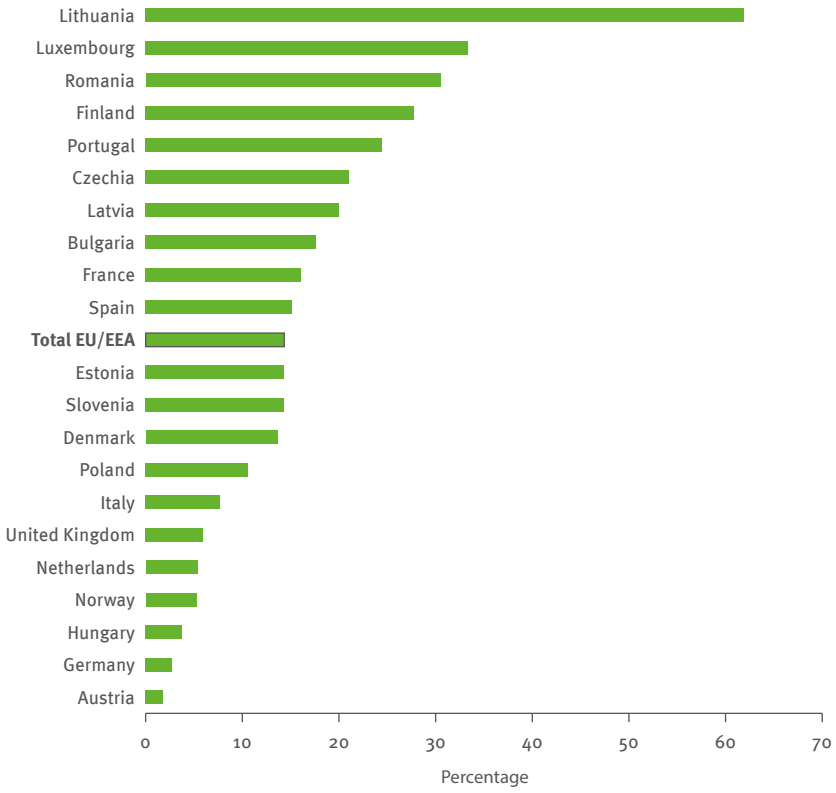
1.4 HIV testing

Nine countries reported data on HIV tests performed, excluding unlinked anonymous testing and testing of blood donations. The number of tests increased by 21% in countries reporting consistently over the last decade (Table 24). Changes in overall testing activity do not appear to explain the decrease in cases reported, particularly among MSM, in some European countries. It is important to note that numbers provided are collected in a heterogeneous manner and comparisons between country testing rates should be undertaken with caution, but these data can indicate large changes in overall testing policy or be used to support the interpretation of HIV cases notified.

1.5 Conclusions

HIV surveillance data for 2019 continue to underscore important changes in the epidemiology of HIV in EU/EEA countries occurring over the past decade. Rates of AIDS and AIDS-related deaths in the EU/EEA as a whole have decreased substantially over the past decade, reflecting greater access to treatment and better case management, indicating sustained progress towards

Fig. 1.18. Percentage of people diagnosed with AIDS where TB is an AIDS-defining illness, EU/EEA, 2019 (n = 2650)



Note: countries that did not report AIDS (Belgium and Sweden) or reported no cases of TB as an AIDS-defining illness (Croatia, Cyprus, Greece, Iceland, Ireland and Slovakia) are excluded.

the Sustainable Development Goal of ending the AIDS epidemic as a public health threat and decreasing AIDS-related deaths. There has been a clear, continuous decline in the rate of new HIV diagnoses per 100 000 population in the EU/EEA overall, with an adjusted rate of 5.4 reported in 2019. While the notification rate is lower than in previous years, it is expected to be revised upwards in future reporting cycles due to reporting delay, which is common for HIV generally and for certain countries in the EU/EEA in particular. Data for 2019 may suffer specifically from this due to non- or incomplete reporting in some countries due to extra workload induced by the COVID-19 pandemic. Despite the evidence of some progress in reducing the number of new HIV diagnoses in the EU/EEA overall, rates continue to increase in about one quarter of EU/EEA countries.

Evidence of a decline in diagnoses among MSM in certain EU/EEA countries appears to be the main determinant behind the overall decline observed in the EU/EEA. This is significant, because MSM still account for the largest number of new HIV diagnoses in the EU/EEA and, until recently, was the only population in the EU/EEA in which HIV cases were increasing for most of the past decade. The decline at EU/EEA level is driven by substantial declines in specific EU/EEA countries – Austria, Finland, France, Germany, Greece, Italy, Luxembourg, the Netherlands, Norway, Portugal, Spain and the United Kingdom. Reasons for the decrease may include successful programmes to offer more frequent and targeted HIV testing to promote earlier diagnosis, rapid linkage to care and immediate initiation of ART for those found to be positive, which results in higher rates of viral suppression and a decline in HIV transmission *(1,2)*. In addition to more frequent testing and linkage to care, the use of formal and informal PrEP may also have played a role in the decline of HIV diagnoses observed in at least some of these settings, as it is noted that PrEP has been made available through the health system or pilot projects in all of these countries *(2,3)*.

The positive trends described above nevertheless are countered by the prevailing situation in several EU/EEA countries in which HIV continues to increase among MSM. Substantial increases have been reported in Bulgaria, Cyprus, Estonia, Lithuania, Poland, Romania and Slovakia in recent years. Overall in the EU/EEA, and even in some settings with declines in rates among MSM, new HIV diagnoses in migrant MSM have not declined at the same rate as in people who are not foreign-born. There is an urgent need to significantly scale up more effective combination-prevention programmes for this at-risk population. This includes promoting the uptake of regular, easy-to-access HIV testing, accompanied by immediate linkage to care and treatment for those found positive, and providing condoms, peer support and access to PrEP for high-risk HIV-negative men *(4)*.

The substantial decrease in the number of HIV infections transmitted through heterosexual contact, particularly among women, represents an important epidemiological trend observed over the past decade. Heterosexual transmission nevertheless remains the second most common mode of HIV transmission reported in the EU/EEA and, in some countries, is the most common transmission mode. Despite the overall declines, heterosexual transmission increased substantially in Lithuania and Slovakia.

The declining trend in heterosexual cases is probably influenced by the decrease (since 2010) in the number of heterosexually acquired cases in migrants originating from countries with generalized HIV epidemics *(5)*. Migrants (or people originating from outside of the reporting country) again constituted a considerable proportion (44%) of new HIV diagnoses in the EU/EEA in 2019. It is important to recognize the emerging evidence that a significant proportion of migrants, even those originating from high HIV-endemic areas, acquire HIV after arrival in the EU/EEA *(6–8)*. This indicates the need for specific HIV-prevention campaigns for migrants from the moment of their arrival, including the offer of HIV testing to newly arrived migrants to the EU *(9)*.

Transmission among people who inject drugs continues to decline and remains at a low level in most EU/EEA countries, thanks to well established and effective harm-reduction programmes throughout most of the Region. The most drastic decline is noted in Estonia, where new diagnoses among people who inject drugs in 2019 are one quarter of what they were a decade ago. Increases nevertheless were observed in 2016–2017 in Lithuania, and increases in this population have also been reported from Germany in recent years. There were also outbreaks reported in 2011–2012 in Romania and Greece – countries with previously very low levels of HIV among people who inject drugs *(10,11)*. More localized outbreaks have been reported in Ireland, Luxembourg and the United Kingdom (Scotland) *(12–14)*. This reinforces the importance of maintaining adequate scale and coverage of harm-reduction services and recognizing that trends can change quickly for this group in the absence of effective prevention delivered at scale *(15)*.

It is estimated that about 120 000 people are living with undiagnosed HIV in the EU/EEA, implying that about one in seven of those living with HIV are not aware of their status *(16)*. Modelled estimates also indicate that it takes an average of 2.9 years from HIV infection to diagnosis in the EU/EEA, with variation by geographical area from 2.2 to 3.6 years *(17)*. In addition to the clinical and personal benefits for the person diagnosed, early diagnosis and effective ART can also benefit sexual and injecting partners by inhibiting onward HIV transmission. Half of those newly diagnosed (50%) have a CD4 cell count of below 350 cells per mm^3, including 30% of cases with advanced HIV infection (CD4 less than 200 cells/mm^3), indicating the need to improve testing programmes to diagnose people living with HIV at an earlier stage. These data indicate that the people were

infected many years previously and suggest problems with access to, and uptake of, HIV testing for some segments of the population in these countries.

One of the subgroups to emerge with the highest rate of late diagnosis is older adults (people aged over 50 years), particularly older men reported as having acquired HIV heterosexually. The trend during the past decade has been towards an increasing median age at HIV diagnosis, particularly among women. In 2019, one in five new HIV diagnoses was in a person over 50 years. This may be the result of stigma, or low or inaccurate risk perception among older adults or the health-care providers who serve them *(18)*.

To reduce the high proportion of people diagnosed late, it is essential to diversify HIV testing by augmenting routine testing for health conditions associated with HIV (indicator condition-guided testing), increasing HIV testing during screening for other sexually transmitted infections, and continuing to expand community-based testing, self-testing/home-sampling and partner notification. European guidance on setting-based approaches for HIV and viral hepatitis testing, including best practices for effective implementation, can help countries seeking to implement more effective testing programmes *(19)*. Testing provides not only a gateway to HIV treatment for people found to be positive, but can also serve as an entry point for high-risk HIV-negative people to effective prevention, including PrEP.

Despite clear evidence of the benefits for the health of HIV-positive people of introducing ART early *(20,21)* and the fact that this should serve as an incentive for people to know their HIV status, many continue to be diagnosed with HIV years after becoming infected and when they are at an advanced stage of illness. Overall, 74% of AIDS diagnoses were reported to have been made within 90 days of the HIV diagnosis, indicating that most AIDS cases in the EU/EEA are due to late diagnosis of HIV infection. The only group in which more than half of the AIDS cases occurred more than 90 days after the initial HIV diagnosis was among people whose HIV infection was attributed to injecting drug use, possibly indicating that AIDS diagnoses in this group are associated with lack of engagement with, or retention in, clinical services.

Once tested, rapid linkage to high-quality care (including ART) is essential. Ninety-nine per cent of people diagnosed in 2019 who had evidence of linkage to care were linked to care within three months of HIV diagnosis; those not linked to care, however, are less likely to be included in the data used to calculate this indicator, so this is likely to be an underestimate of poor linkage to care. This bias is slightly countered by the use of the date of the $CD4$ cell count as a proxy for time to linkage to care, as this would tend to slightly overestimate the time interval. Timely linkage to care following HIV diagnosis is crucial, as delayed access can result in poor patient outcomes *(22)*. Once linked to care, there is evidence that high proportions of people diagnosed with HIV in the EU/EEA have access to ART and achieve viral suppression *(23)*.

Recent years have seen a worrying trend of reduced data completeness on the HIV transmission route, with nearly one quarter of cases reported in 2019 lacking this important information. Information on probable route of transmission is crucial to better inform HIV-prevention interventions and programme-planning. Greater efforts to improve collaboration with clinicians and follow-up with other data providers may improve the transmission data. Meanwhile, statistical adjustments for missing data were used in select figures presented in this chapter to partially address this issue *(24)*.

The changing epidemiology of HIV infections observed in the EU/EEA over the past decade suggests that some progress has been achieved, particularly in reducing infections attributed to heterosexual transmission and injecting drug use. More recently, progress has also been made in reducing the number of HIV infections resulting from sex between men in selected EU/EEA countries. These epidemiological trends also indicate, however, that it is crucial to sustain, and in some places strengthen, evidence-based HIV prevention interventions tailored to the local epidemiological context and targeting those most at risk.

Programmes on the prevention and control of HIV infection adapted to key populations and maintained to scale remain important in EU/EEA countries. For most EU/EEA countries, this means a strong focus on MSM, including intra-European and other migrant MSM. Other migrants, both those from countries with generalized HIV epidemics and others, are also a key vulnerable population who need specific prevention and control efforts in most EU/EEA countries. Given the increasing evidence of post-migration HIV acquisition, it is important that migrant-sensitive services for prevention and HIV testing, combined with policies that promote and ensure linkage and access to care, are delivered in all EU/EEA countries.

Harm-reduction programmes among people who inject drugs and their sexual partners are crucial and should be maintained and scaled up where service coverage is low, particularly when patterns of drug use change. Finally, strengthening the offer and effectiveness of HIV testing programmes to increase the frequency of testing in high-risk individuals will help to decrease late diagnosis and, ultimately, the proportion of people living with undiagnosed HIV in the EU/EEA.

The data in this report present new HIV diagnoses through to the end of 2019, the period just before the global COVID-19 pandemic. The impact of the pandemic on human resources in laboratory, clinical and public health institutions has already been observed. One country (Belgium) was unable to report 2019 HIV and/or AIDS data due to the need to focus public health capacity on COVID-19 surveillance and response. The majority of ECDC operational contact points for HIV reported also working on COVID-19 surveillance and response issues

during 2020. About half of EU/EEA countries needed more time than usual to submit their 2019 HIV and AIDS data and several mentioned that reporting delay may be increased for 2019 data, or that some variables (CD4 at diagnosis, viral load) were not possible to report at all or at concordant levels with the past. The ECDC, in collaboration with EU/EEA Member States, the WHO Regional Office for Europe, and clinical and community partners, will look carefully at the impact on HIV surveillance and prevention response to support the continued high standard of European HIV and AIDS data to guide the response in the Region and to understand how the ongoing pandemic may affect HIV incidence, particularly in regions and groups most at-risk.

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11 All weblinks were accessed on 12 November 2020.

2. HIV and AIDS in the WHO European Region

2.1 HIV and AIDS diagnoses in the WHO European Region

2.1.1 HIV diagnoses

In 2019, 136 449 people in the WHO European Region were newly diagnosed with HIV, corresponding to a rate of 15.6 per 100 000 population (Table A, Table 1). This number includes new diagnoses reported by 47 countries[12] to the joint ECDC and WHO Regional Office for Europe surveillance system.[13] It brings the cumulative number of reported HIV diagnoses in the Region since reporting began in the 1980s to 2 114 520. As in previous years, most (79%) of the 136 449 people newly diagnosed with HIV in 2019 were from the East of the Region (107 842), 16% from the West (21 793) and 5% from the Centre (6814). The rate was also highest in the East (41.7 per 100 000 population), eight times higher than in the West (5.7 per 100 000, adjusted for reporting delay; see Annex 1 for methods and Annex 6 for results) and 12 times higher than in the Centre (3.4 per 100 000) (Table A, Table 1). For men, the rate was 20.8 per 100 000 population (Table 2) and for women 10.6 per 100 000 population (Table 3).

Rates of newly diagnosed HIV infections varied widely across countries in the WHO European Region in 2019. The highest rates per 100 000 population (more than 15.0) were observed in the Russian Federation (54.9) followed by Ukraine (39.0), the Republic of Moldova (22.8), Belarus (22.6), Kazakhstan (19.8), Georgia (16.7), Malta (16.2), Latvia (15.4) and Armenia (15.1). The lowest rates (under 3.0) were reported by Bosnia and Herzegovina (0.9), Slovenia (1.6), Slovakia (1.9), Serbia (2.0), Czechia (2.1), Hungary (2.4), Austria (2.5), Croatia (2.5) and Finland (2.7). No new HIV cases were diagnosed in San Marino in 2019.

The male-to-female ratio was 1.8, lowest in the East (1.6), higher in the West (2.9) and highest in the Centre (5.5). The highest male-to-female ratios (more than 15.0) at country level among countries with more than 10 new cases were observed in Croatia (19.4) and the lowest (1.5 or less) in Kyrgyzstan (1.4), Tajikistan (1.4) and the Republic of Moldova (1.4) (see section 1.1 (HIV diagnoses) in Chapter 1 and sections 2.2 (HIV diagnoses in the East) and 2.2.2 (Trends in HIV diagnoses in the East) below).

The largest proportion of people newly diagnosed in the 46 countries reporting HIV data by age were in the age group 30–39 years (34%), while 9% were young people aged 15–24 years and 18% were 50 years or older at diagnosis (Table A, Table 9).

Data on transmission mode (Table A, Tables 4–8, no data received from the Russian Federation) provide information about risk exposure among people newly diagnosed with HIV and indicate the following for 2019.

- Heterosexual contact was still the main reported mode of HIV transmission in the WHO European Region, accounting for half (50%) of people newly diagnosed in 2019 (28 273) and 59% of new HIV diagnoses with a known mode of transmission (Table 6). Among those, 10% originated from countries with generalized epidemics (data not shown).
- Sex between men was the second most common transmission mode, accounting for 21% of new diagnoses overall (11 645) and 24% of new HIV diagnoses with a known mode of transmission (Table 4).
- Injecting drug use accounted for 13% of new diagnoses (7309) and 15% of new HIV diagnoses with a known mode of transmission (Table 5).
- One per cent (0.7%, 401) of cases were infected through mother-to-child transmission (0.8% of those with a known mode of transmission) (Table 7) and 0.2% (94) through other transmission routes (nosocomial infection, transfusion or use of other blood products) (Table 8).
- Transmission mode was reported as unknown or missing for 15% (8603 cases) (Table 8). Reporting completeness regarding transmission mode varies greatly across the Region, with information lacking for 3% of new diagnoses in the East, 44% in the Centre and 22% in the West.

Information about country of birth, country of nationality or region of origin was provided by 43 countries for 55 792 people newly diagnosed in 2019. Among those with known origin (51 812), 20% (10 189) originated from outside of the reporting country, including 14% (7210) from outside the WHO European Region and 6% (2979) from a European country other than the country of report (Table 10).

Information about probable country of infection was reported by 32 countries for 27 415 people newly diagnosed. Among people for whom the probable country of infection was known (19 583), 23% (4517) were infected abroad, including 7% in sub-Saharan Africa, 7% in central and eastern Europe, 3% in western

12 No data were received from Andorra, Belgium, Monaco, North Macedonia, Turkmenistan or Uzbekistan. Liechtenstein is an EEA Member State but not a WHO Member State, so its data are included in the totals for the EU/EEA but not for the WHO European Region.

13 The data reported by the Russian Federation were limited to new HIV diagnosis by sex for 2010–2019 and data on HIV testing, which enabled the inclusion of the Russian Federation's data in Tables 1–3 and 25 and in the figures showing the trend of HIV diagnosis. Data on age and modes of transmission presented in this report include countries that provided a full set of data to the joint ECDC/WHO European HIV surveillance system, excluding the Russian Federation.

Europe, 3% in south and south-east Asia and 2% in Latin America (Table 12).

Forty-one countries provided information about CD4 cell count at the time of HIV diagnosis in 2019. Information was reported for 39 496 people over 14 years at diagnosis (covering 74% of all new diagnoses in the reporting countries) (Table 13). Just over half (53%) of those newly diagnosed were late presenters, with CD4 cell counts below 350 per mm^3 at the time of HIV diagnosis, including 31% with advanced HIV infection (CD4 above 200/mm^3). Nineteen per cent had a CD4 cell count of between 350 and 500 cells per mm^3 and 27% had a count above 500 per mm^3 (data not shown). The percentage of those newly diagnosed who were late presenters (CD4 below 350/mm^3) varied across the Region, but was highest in the East and in the Centre (both 56%) and lowest in the West (49%). The countries with the highest percentages of late presenters (over 60%, in countries with more than five cases) were Cyprus (91%), Albania (75%), Latvia (70%), Montenegro (64%), Romania (63%) and Bulgaria (61%). Those with the lowest percentages (less than 40%) were Iceland (20%), Slovakia (28%), Luxembourg (36%) and Czechia (40%).

The percentage of late presenters was higher than the regional average of 53% in 19 countries (seven in the East, seven in the Centre and five in the West). The percentage also varied across transmission categories and was highest for people with reported heterosexual transmission (58%; 60% for men and 55% for women) and as a result of injecting drug use (52%), and lowest for men infected through sex with men (42%) (Table 14, Fig. 2.1, Fig. C). The percentage of people diagnosed at or below 350 CD4 cells per mm^3 increased with age, ranging from 35% among people aged 15–19 and 20–24 years at diagnosis, respectively, to 67% among people aged 50 years or above. Overall, the percentage of late presenters by gender was similar (53% for men and 54% for women), but this is confounded by transmission mode and conceals, for men, the difference between MSM (who tend to get diagnosed earlier) and men with reported heterosexual transmission (who tend to get diagnosed later) (Fig. C).

2.1.2 Trends in HIV diagnoses

The rate of newly diagnosed HIV infections in the WHO European Region[14] increased by 9% for the period 2010–2019, from 14.1 per 100 000 population (118 726 cases) to 15.4 per 100 000 population (136 449 cases) (Fig. 2.2). The increase mainly is driven by an upward trend in many countries of the East; overall for the East, the rate increased by 23%, from 33.9 in 2010 (86 266 cases) to 41.7 in 2019 (107 842 cases). In the Centre, the rate increased by 113% – the largest relative increase across the three geographical areas – from 1.6 (3097 cases) to 3.4 (7029 cases); and in the West, the rate decreased by 24%, from 7.5 (29 515 cases) to 5.7 (23 971 cases, adjusted for reporting delay).[15]

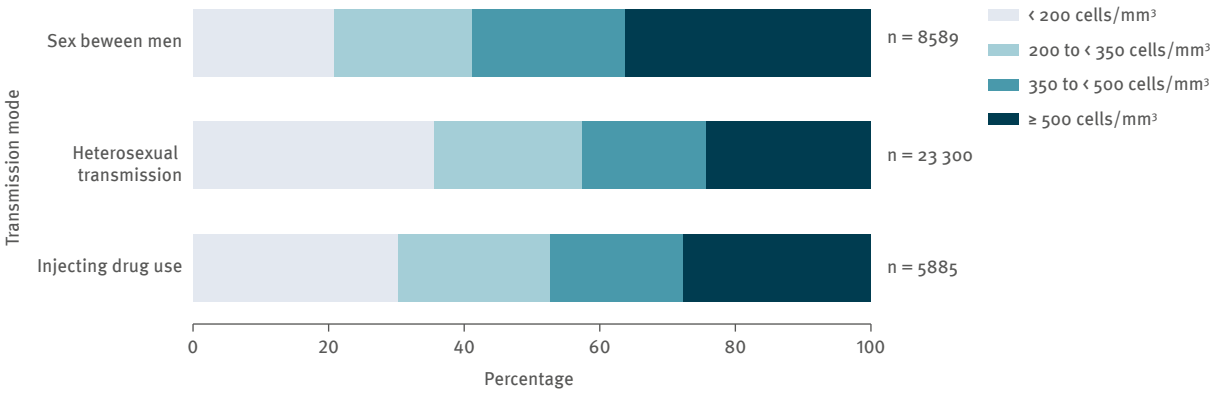
Thirty-nine countries have consistently reported data on transmission mode for the period 2010–2019 (Fig. 2.3). Data from Iceland, Ireland, Poland and Turkey were excluded because over 50% of the data on transmission mode were missing for some years in the period. Data from Spain and Italy were excluded because coverage of the national surveillance system increased during this time period. No data on modes of transmission were reported from the Russian Federation and Malta, and data from Andorra, Belgium, North Macedonia, Monaco, Turkmenistan and Uzbekistan were not consistently reported during the period.

Data on transmission mode from the countries with consistent data indicate that:

14 No data were received from Andorra, Belgium, Monaco, North Macedonia, Turkmenistan or Uzbekistan. Liechtenstein is an EEA Member State but not a WHO Member State, so its data are included in the totals for the EU/EEA but not for the WHO European Region.

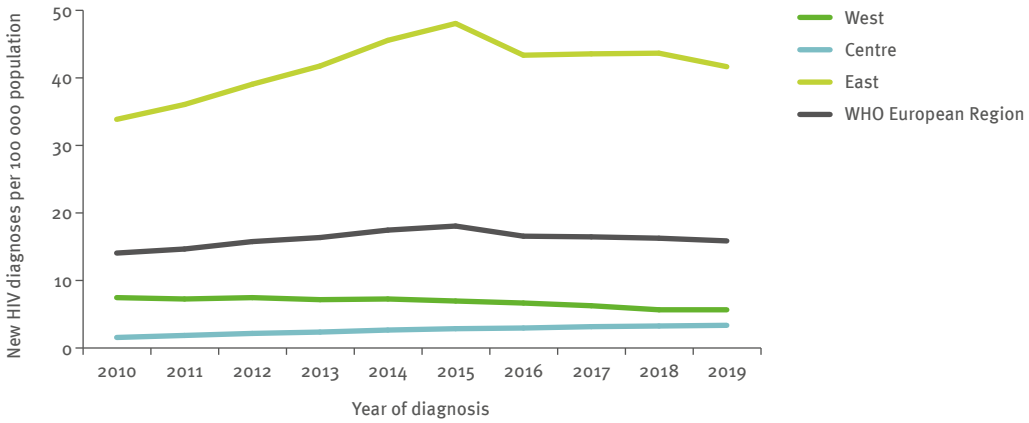
15 See Annex 1 for methods and Annex 6 for results (see also section 2.4 (HIV and AIDS diagnoses in the West) below).

Fig. 2.1. New HIV diagnoses, by CD4 cell count per mm^3 at diagnosis and transmission mode, WHO European Region, 2019 (n = 37 774)



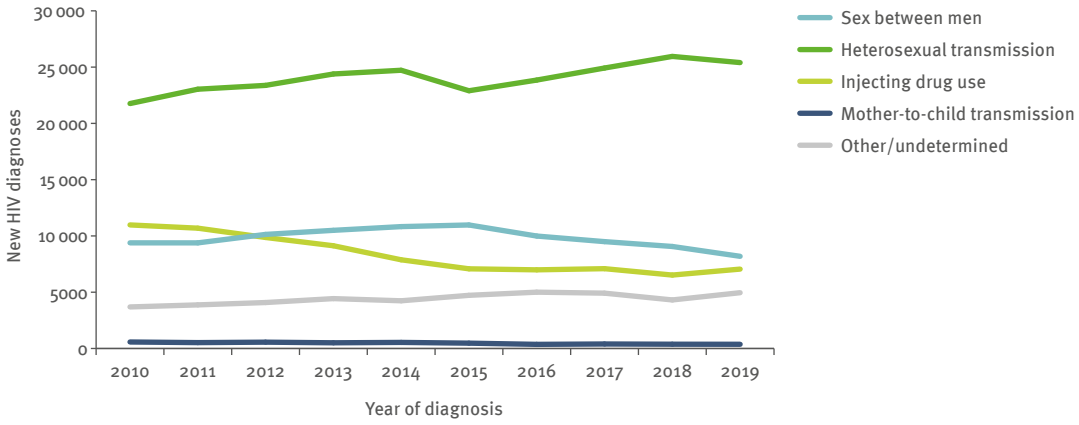
Note: no data from Andorra, Belgium, Hungary, Malta, Monaco, North Macedonia, Norway, Poland, the Russian Federation, San Marino, Turkmenistan or Uzbekistan.

Fig. 2.2. New HIV diagnoses per 100 000 population, by year of diagnosis, WHO European Region, 2010–2019



Note: data from Andorra, Belgium, Monaco, North Macedonia, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

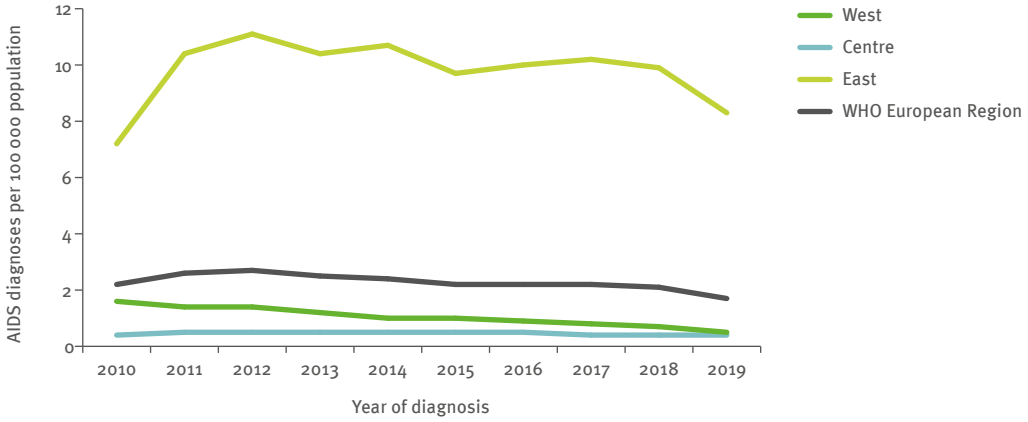
Fig. 2.3. New HIV diagnoses, by transmission mode and year of diagnosis, WHO European Region, 2010–2019



Note: data from Andorra, Belgium, Monaco, North Macedonia, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period; data from Iceland, Ireland, Malta, Poland and Turkey excluded due to incomplete reporting on transmission mode during the period; data from Italy and Spain excluded due to increasing coverage of national surveillance during the period. Data were not reported from the Russian Federation. (In total, data from 39 countries are included for Fig. 2.3.)

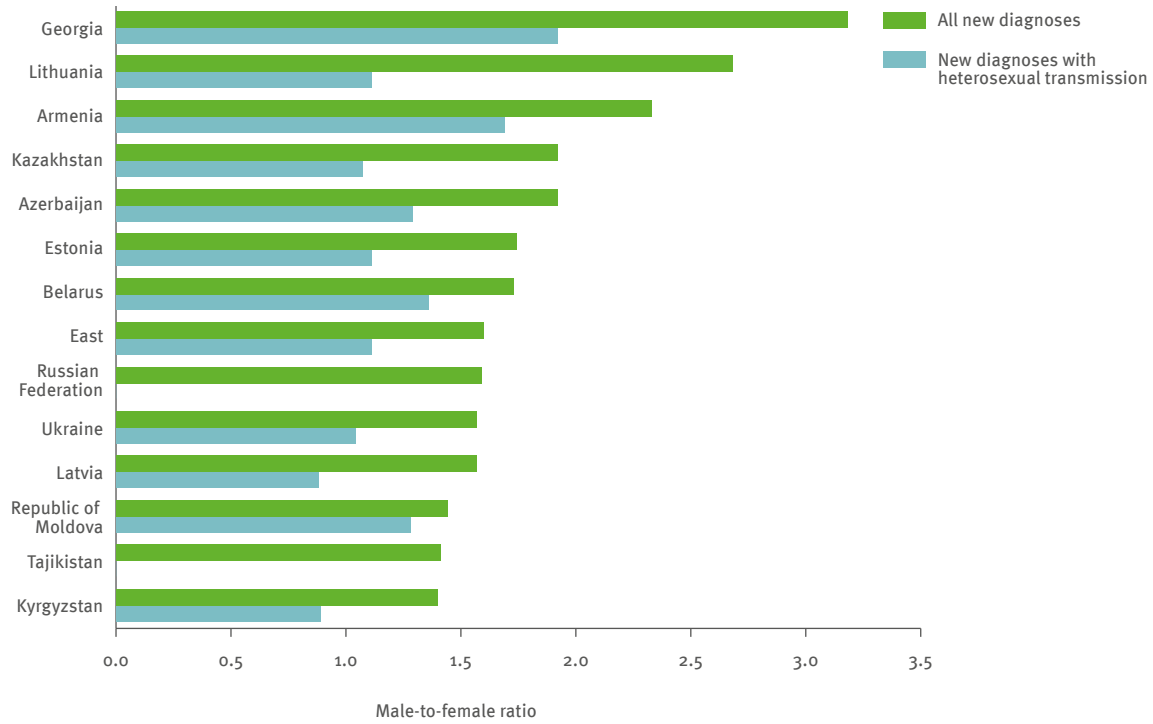
- the number of new diagnoses in people with reported heterosexual transmission increased by 17% in the Region, from 21 762 in 2010 to 25 402 in 2019, while the percentage of all new HIV diagnoses attributed to heterosexual contact increased from 47% of cases in 2010 to 55% in 2019;
- the number of new diagnoses in people infected through sex between men decreased by 13%, from 9385 in 2010 to 8189 in 2019, and the percentage of all new HIV diagnoses attributed to sex between men also decreased slightly, from 20% to 18%;
- the number of new diagnoses in people infected through injecting drug use decreased by 36%, from 10 977 in 2010 to 7053 in 2019, while the percentage of all HIV diagnoses attributed to injecting drug use decreased from 24% in 2009 to 15% in 2019;
- the number of new diagnoses in children infected through mother-to-child transmission decreased by 35%, from 576 in 2010 to 373 in 2019, representing 1.2% of all new HIV diagnoses in 2010 and 0.8% in 2019;
- of the new diagnoses in people infected by other means, nosocomial infections increased by 31%, from 26 cases in 2010 to 34 in 2019 (peaking at 105 cases in 2012); new diagnoses attributed to transfusion of blood and its products decreased by 23%, from 69 in 2010 to 53 in 2019; and
- the number of new diagnoses for which information on transmission mode was unknown or missing increased by 31%, from 3596 in 2010 to 4869 in 2019 – representing 8% of all new HIV diagnoses in 2010 and 11% in 2019.

Fig. 2.4. New AIDS diagnoses per 100 000 population, by geographical area and year of diagnosis, WHO European Region, 2010–2019



Note: data from Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

Fig. 2.5. Male-to-female ratio in all new HIV diagnoses and new diagnoses with heterosexual transmission, by country, East, 2019 (n = 107 842; 19 112)



Note: no data from Turkmenistan and Uzbekistan. No data on mode of transmission from the Russian Federation.

2.1.3 AIDS cases, morbidity and mortality

In 2019, 12 535 people in 45 countries of the WHO European Region[16] were diagnosed with AIDS, which corresponds to a rate of 1.7 per 100 000 population (Table 14). Of the 12 535 people who received a diagnosis of AIDS in 2019, 76% (9577) were diagnosed in the East, 18% (2156) in the West and 7% (802) in the Centre of the Region. The rate was also highest in the East (8.3 per 100 000 population), 17 times higher than in the West (0.5 per 100 000) and more than 20 times higher than in the Centre (0.4 per 100 000 population).

The rate of new AIDS diagnoses varied widely among the countries, with the highest rates (3.0 or above) reported in Ukraine (17.9), the Republic of Moldova (7.0), Georgia (6.6), Armenia (5.8), Latvia (4.7) and Belarus (4.0), and the lowest rates (under 0.3) reported in Turkey (0.1),[17] Slovakia (0.1), Germany (0.1), Ireland (0.1), Bosnia and Herzegovina (0.2) and Poland (0.2). Malta and San Marino reported zero cases.

TB represented 17% of all reported AIDS-defining illness events in 2019, ranging from 9% of reports in the West and 15% in the Centre to 30% in the East.

In the 45 countries with consistent AIDS data,[18] the overall rate of new AIDS diagnoses in the Region decreased by 23% between 2010 and 2019, from 2.2 per 100 000 population (15 148 cases) to 1.7 per 100 000 (12 535 cases) (Fig. 2.4). Since there are reporting delays in some countries, this decrease is expected to even out in the coming years.

AIDS trends varied greatly across the three geographical areas. In the East, the rate increased by 15%, from 7.2 in 2010 to 8.3 in 2019. In the Centre, the rate remained stable at 0.4 per 100 000 population, while in the West, the steady downward trend continued with a 69% decrease, from 1.6 in 2010 to 0.5 in 2019 (Fig. 2.4).

Information about AIDS-related deaths or deaths among people previously diagnosed with AIDS for countries and years where cause of death (AIDS- or non-AIDS-related) was recorded was provided by 43 countries in the Region[19] and included 4618 people who were reported to have died during 2019. This represented a 20% decrease compared with the 5760 deaths reported for the same countries in 2010. Of the 4618 deaths in 2019, 83% were reported from the East of the Region, 11% from the West and 6% from the Centre (Table 23). It is important to note that delays in reporting and underreporting have a significant impact on these numbers at European level, particularly when the death occurs long after HIV or AIDS diagnosis. The numbers presented here should therefore not be interpreted as being representative of the true AIDS mortality burden in the European Region. According to a country survey from 2006, only about one third of countries in the WHO European Region were able to match their HIV/AIDS registries with their national mortality or vital statistics registries *(1)*.

2.2 HIV and AIDS diagnoses in the East

2.2.1 HIV diagnoses in the East

In 2019, 107 842 people were newly diagnosed with HIV across 13 countries[20] in the East of the WHO European Region, giving a rate of 41.7 per 100 000 population. This number includes 80 124 new diagnoses reported from the Russian Federation[21] and 27 718 from the remaining 12 reporting countries in the East of the Region.

The highest rates of HIV diagnoses (more than 20.0) for 2019 were observed in the Russian Federation (54.9 per 100 000 population), Ukraine (39.0), the Republic of Moldova (22.8) and Belarus (22.6), while the lowest (under 10.0) were reported by Azerbaijan (7.2) and Lithuania (5.4).

Among the 12 countries in the East[22] reporting age distribution, most of those newly diagnosed (38%) were in the age group 30–39 years, while only 6% were young people aged 15–24 years and 16% were 50 years or older at the time of diagnosis (Table A, Table 9). The male-to-female ratio was 1.6, the lowest of the three geographical areas, with 38% of new diagnoses among women in the East in 2019. The male-to-female ratio was highest (over 2.0) in Georgia (3.2), Lithuania (2.7) and Armenia (2.3), and lowest (under 1.5) in the Republic of Moldova (1.4), Tajikistan (1.4) and Kyrgyzstan (1.4) (Fig. 2.5). Among those reported as infected through heterosexual transmission, the male-to-female ratio was 1.5 or above in two countries (Georgia (1.9) and Armenia (1.7)), suggesting that more men than women were reported as infected through heterosexual contact in these countries. As this pattern differs from other countries where more heterosexual cases tend to be in women, it cannot be ruled out that some of these men may in fact have been infected through injecting drug use or sex with other men, but misclassified in the heterosexual category.

Heterosexual contact and injecting drug use are still the main modes of HIV transmission reported in the East of the Region. Reported transmission related to sex between men remains relatively low.

16 No data were reported from Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan or Uzbekistan.

17 AIDS data for Turkey only include those diagnosed with AIDS at the time of HIV diagnosis and are therefore not comparable with AIDS data from other countries.

18 Data from Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan and Uzbekistan are excluded or not reported.

19 No data were received from Andorra, Belgium, Denmark, Italy, North Macedonia, Monaco, the Russian Federation, Sweden, Turkmenistan or Uzbekistan.

20 No data were received from Turkmenistan or Uzbekistan.

21 This year, the Russian Federation has reported data to the surveillance system, including historic data for 2010–2019, but the reporting was limited to the new HIV diagnosis by sex and data on HIV testing. Detailed information on the status of the data submitted by the Russian Federation can be found in Annex 5.

22 Data from the Russian Federation were not included.

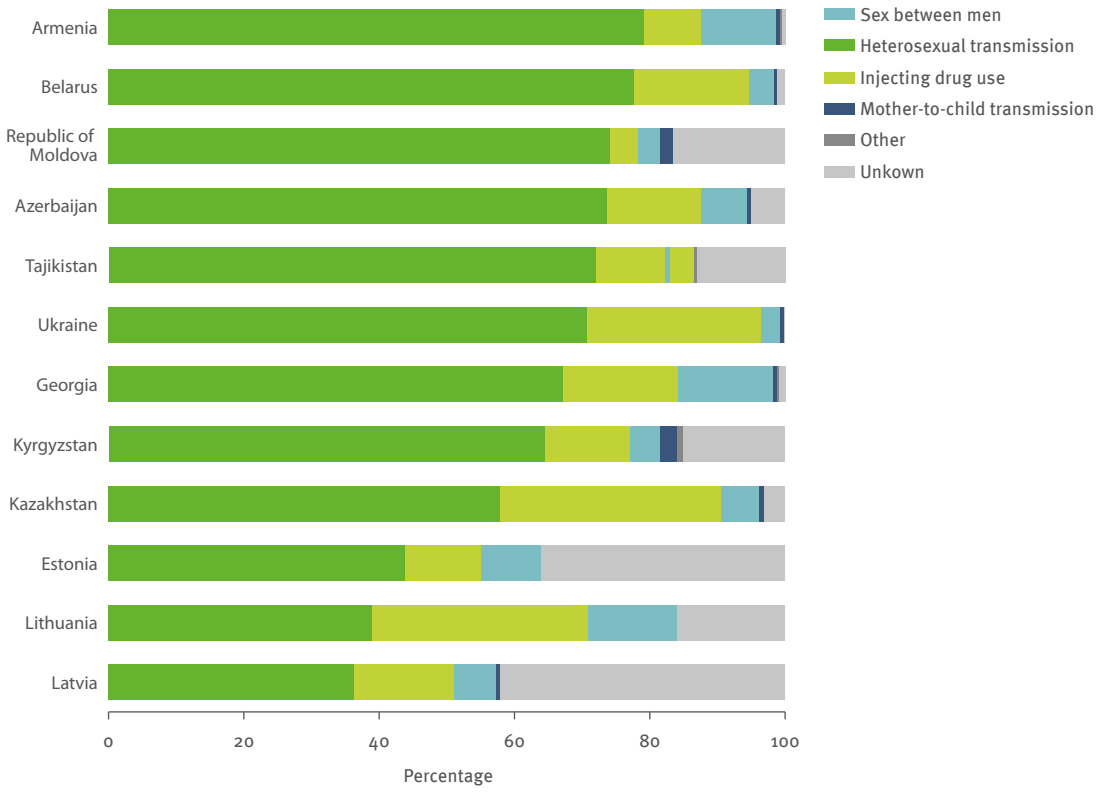
In 2019, 27 718 new HIV diagnoses were reported from 12 countries in the East, with data by transmission mode suggesting the following (Table A, Tables 4–8, Fig. 2.6):

- 69% of those newly diagnosed and 71% of new HIV diagnoses with a known mode of transmission were infected heterosexually (19 112), making it the main mode of transmission reported in all countries in the East (Table 6);
- 23% of those newly diagnosed and 24% of new HIV diagnoses with a known mode of transmission were infected through injecting drug use (6424) (Table 5), with transmission through injecting drug use accounting for 25% or more of new diagnoses with a known transmission mode in four countries (Lithuania (38%), Kazakhstan (34%), Latvia (26%) and Ukraine (26%));
- 4% were infected through sex between men (1079) (Table 4), but five countries (Lithuania, Estonia, Georgia, Armenia and Latvia) reported that sex between men accounted for more than 10% of new diagnoses with a known transmission mode;
- 0.8% of those diagnosed were infected through mother-to-child transmission (215) (Table 7) and 0.07% (19) through other transmission routes (nosocomial infection, transfusion or use of other blood products); and
- transmission mode was reported as unknown or missing for only 3% of those newly diagnosed across the 12 countries in the East of the Region (869), but at country level, transmission-mode information was lacking for 15% or more of cases in five countries: Latvia (42%), Estonia (36%), Lithuania (16%), the Republic of Moldova (16%) and Kyrgyzstan (15%).

Analysis of the new diagnoses by age group and transmission mode for the 12 reporting countries in the East (Fig. 2.7) shows that 30–39-year-olds accounted for most HIV diagnoses across all transmission groups (48% of people infected through injecting drug use, 36% with reported heterosexual transmission and 32% through sex between men). People in the younger age groups tended to be infected through sex between men; among MSM, 51% of adults (aged 15–49 years) were under 30 years at diagnosis, compared with only 12% and 20% among those infected through injecting drug use and heterosexual sex, respectively. People aged 50 years and above were more frequently infected as a result of heterosexual sex (19% compared with 8% and 5% for injecting drug use and MSM, respectively) (Fig. 2.7).

Twelve countries in the East provided information about CD4 cell count at the time of HIV diagnosis for 23 141 people above 14 years (covering 85% of the 27 718 new

Fig. 2.6. New HIV diagnoses, by country and transmission mode, East, 2019 (n = 27 718)



Note: no data were received from the Russian Federation, Turkmenistan and Uzbekistan.

diagnoses in the 12 countries (Table 13)). Fifty-six per cent of these people were late presenters, with CD4 cell counts below 350 per mm³, including 32% with advanced HIV infection (CD4 below 200/mm³) at the time of HIV diagnosis. The percentage of people diagnosed with a CD4 count of less than 350/mm³ was higher than 50% in eight of the 12 countries. The percentage of late presenters varied across transmission categories, being highest for people infected heterosexually (58%) and through injecting drug use (52%) and lowest for men infected through sex with men (43%) (Fig. 2.8).

Ten countries in the East provided information about the probable country of infection for 10 041 people newly diagnosed in 2019 (Table 12). Among the 9337 cases for whom the probable country of infection was known, only 8% (740 cases) were infected abroad, including 7% in central and eastern Europe. The data suggest that most of those newly diagnosed with HIV in the East of the Region were infected in the reporting country and that those infected abroad were infected in neighbouring countries of central and eastern Europe.

2.2.2 Trends in HIV diagnoses in the East

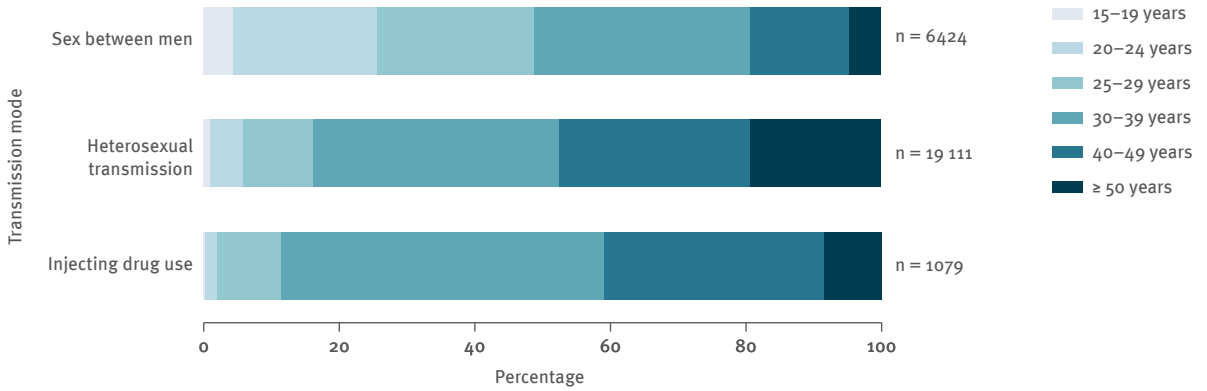
The increasing trend in newly diagnosed HIV infections continued in the East[23] over the last decade, with a 31% increase in the rate of new diagnoses per 100 000 population, from 31.8 in 2010 (90 061 cases) to 41.7 in 2019 (107 842 cases) (Fig. 2.2).

The decrease in new diagnoses from 2015 to 2016 (Fig. 2.2) coincided with a change in the case definition in the Russian Federation.[24] The rate doubled in two countries (Armenia and Belarus) between 2010 and 2019, whereas four countries had an increase of 30–62% over the decade: Kazakhstan (62%), Georgia (50%), Azerbaijan (41%) and the Republic of Moldova (33%). In Estonia, the only country that has seen a sustained decrease in new diagnoses over the decade, the rate continued the steady decline that began after the 2001

23 For the analysis of trends, data from Turkmenistan and Uzbekistan were excluded. The Russian Federation provided data only for Tables 1–3 and 25 and therefore is included only for overall trends (not by, for instance, age or modes of transmission). Estonia is excluded for the trend analysis regarding modes of transmission due to incomplete reporting on transmission mode during the period.

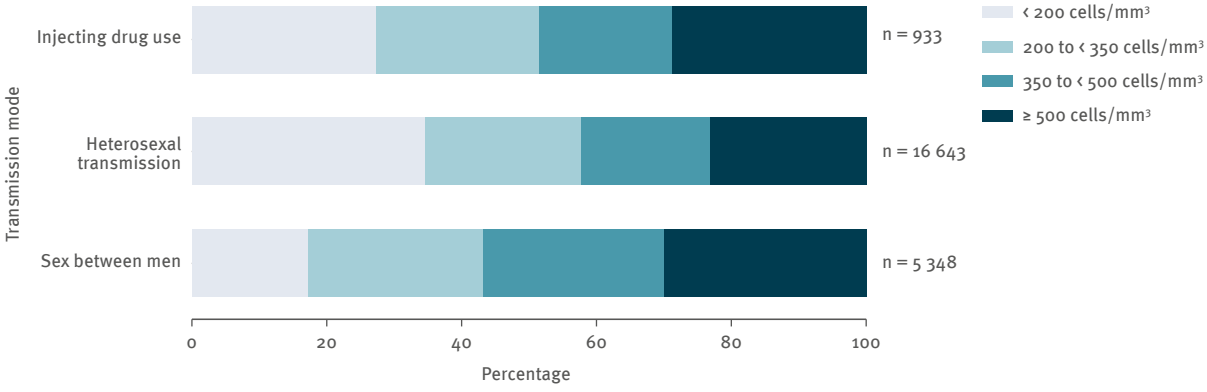
24 Detailed information on the status of the data submitted by the Russian Federation can be found in Annex 5.

Fig. 2.7. New HIV diagnoses, by age group and transmission mode, East, 2019 (n = 27 332)



Note: no data from the Russian Federation, Turkmenistan and Uzbekistan.

Fig. 2.8. New HIV diagnoses, by CD4 cell count per mm³ at diagnosis and transmission mode, East, 2019 (n = 22 984)



Note: no data from the Russian Federation, Turkmenistan and Uzbekistan.

peak in new diagnoses and continued through to 2019 (Table 1).

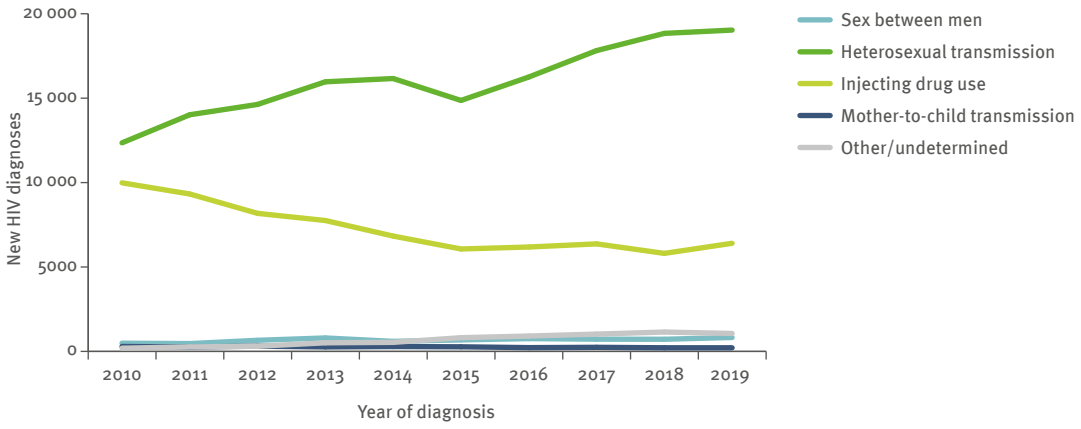
The number of newly diagnosed women increased by 10% across the 13 countries, from 37 567 in 2010 to 41 404 in 2019, and the number of newly diagnosed men increased by 27%, from 52 313 to 66 438 (Tables 2 and 3). The overall trend largely reflects the situation in the Russian Federation, which accounts for the vast majority of new cases reported in 2019. The other countries have significant variations. Three (Azerbaijan, Kyrgyzstan and Tajikistan) have all experienced much larger increases among women over the decade (11–191%) compared to the increase among men (11–30%).

Information about mode of transmission for the period 2010–2019 (Fig. 2.9) from the 12 countries with consistent data suggests the following.

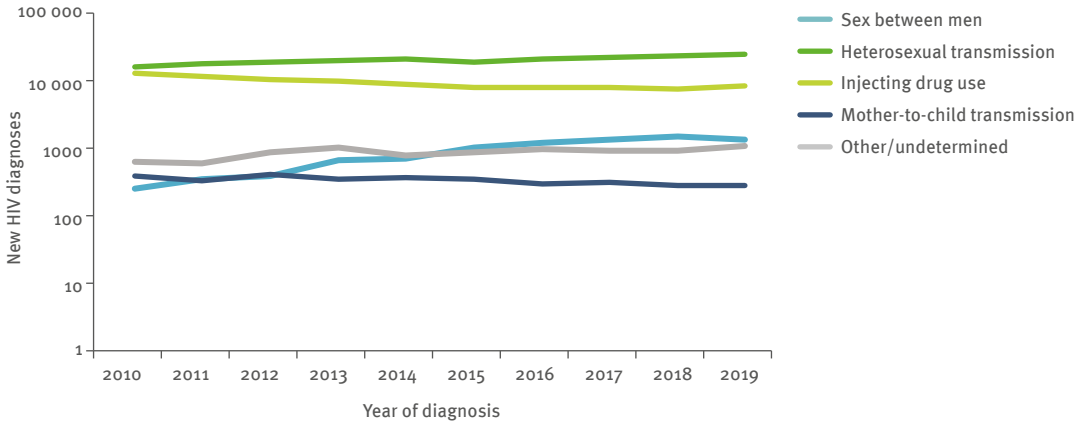
- The number of new diagnoses in people with reported heterosexual transmission increased by 57%, from 12 354 in 2010 to 19 034 in 2019. The increase was considerably larger among men with heterosexual transmission (a 103% increase) than women with heterosexual transmission (21% increase). At the same time, the percentage of all new HIV diagnoses attributed to heterosexual contact increased from 53% of cases in 2010 to 69% in 2019.
- The number of new diagnoses in people infected through injecting drug use decreased by 36%, from 9985 in 2010 to 6404 in 2019, but a moderate increase was seen between 2018 and 2019 in two countries (Kazakhstan and Ukraine) (Table 5). The percentage of all new HIV diagnoses attributed to injecting drug use decreased from 43% in 2010 to 23% in 2019.
- The number of new diagnoses in people infected through sex between men increased more than five-fold, from 190 in 2010 to 1063 in 2019. This is by far the highest relative increase across the various transmission modes and geographical areas. It is

Fig. 2.9. New HIV diagnoses, by transmission mode and year of diagnosis, East, 2010–2019

Arithmetic scale



Logarithmic scale



Note: data from the Russian Federation, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period; data from Estonia excluded due to incomplete reporting on transmission mode during the period.

clearly visible on the logarithmic scale of Fig. 2.9, which facilitates the comparison of rates of change regardless of starting point. Although it has increased, the percentage of all new HIV diagnoses attributed to sex between men nevertheless has remained low at 0.8% in 2010 and 4% in 2019.

- The number of children infected through mother-to-child transmission decreased by 27%, from 293 in 2010 to 215 in 2019, representing 1.3% of new HIV diagnoses in 2010 and 0.8% in 2019.
- The number of new diagnoses for which the mode of transmission was unknown increased by 71%, from 471 in 2010 to 805 in 2019. The percentage of new HIV diagnoses with unknown mode of transmission remained low and stable at 2–3% in 2010 and 2019.

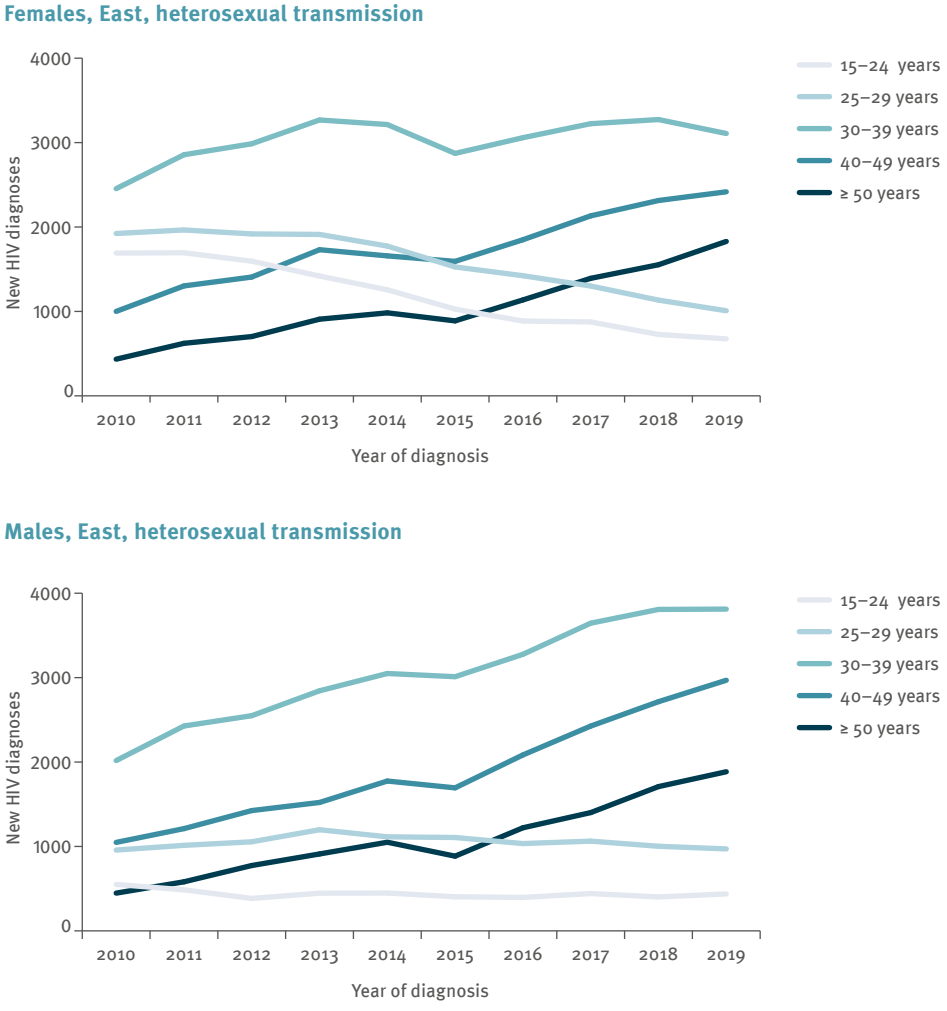
Further analysis of the increase in new diagnoses attributed to heterosexual transmission in the East by gender and age groups (Fig. 2.10) reveals continuing increases in older age groups for both men and women (it is highest in those aged 50 years and above, followed by the 40–49 and 30–39 age groups). Heterosexual transmission nevertheless has continued to decrease among young women aged 15–24 and 25–29 years, by 60% and 48%, respectively.

2.2.3 AIDS cases, morbidity and mortality in the East

In 2019, 9577 people were diagnosed with AIDS from the 12 countries in the East that provided AIDS data, giving a rate of 8.3 per 100 000 population. The highest rates (above 5.0) were reported in Ukraine (17.9), the Republic of Moldova (7.0), Georgia (6.6) and Armenia (5.8) (Table 14).

The AIDS rate increased by 15% between 2010 and 2019, from 7.2 per 100 000 population (8038 cases) to 8.3 (9577 cases) in the 12 countries (Fig. 2.4). The rate of new AIDS diagnoses increased in five of the 12 countries in the East, most noticeably in Armenia, Kazakhstan and Ukraine. The rate declined over the last decade in seven

Fig. 2.10. Age-specific trends by gender in new HIV diagnoses with heterosexual transmission, East, 2010–2019



Note: no data by age for the Russian Federation. Data from Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

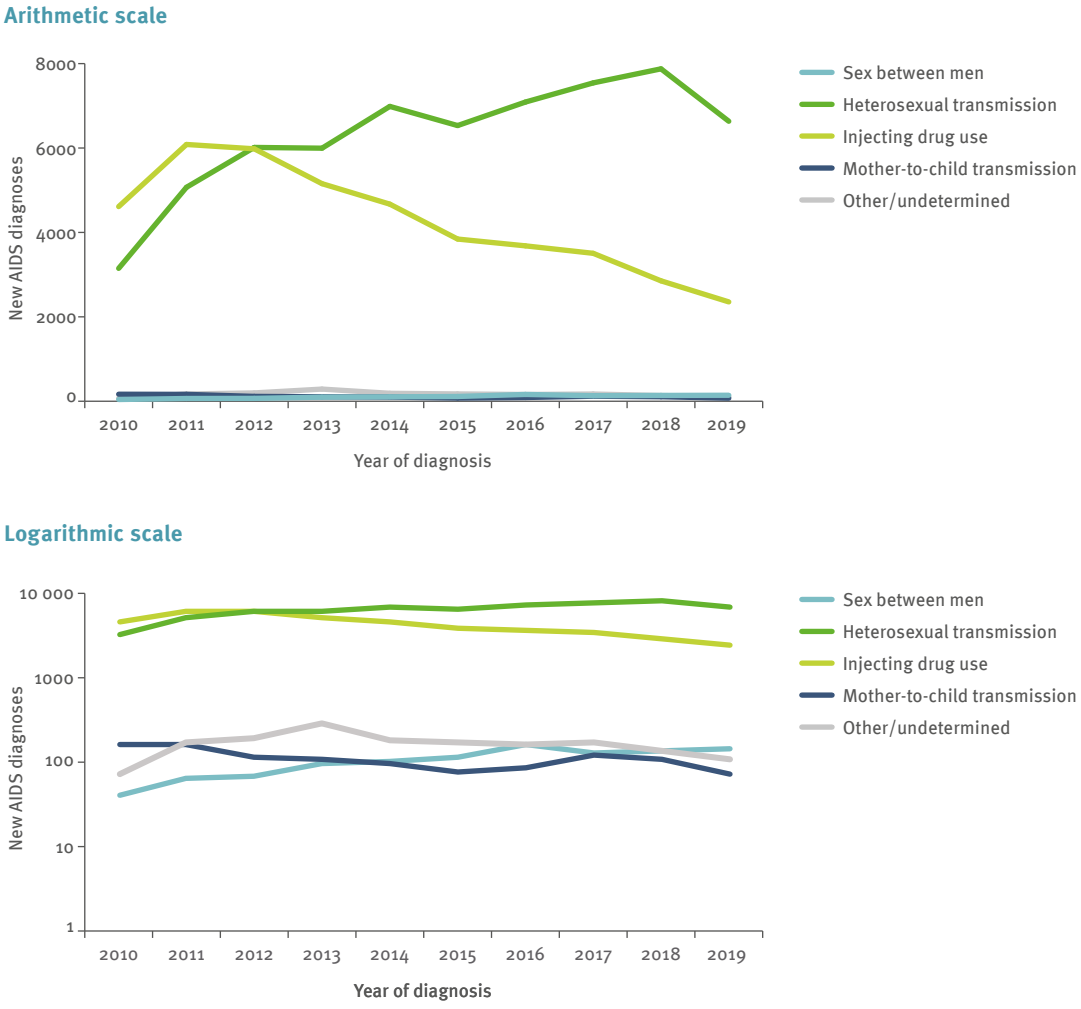
countries: Azerbaijan, Belarus, Georgia, Kyrgyzstan, Latvia, Lithuania and the Republic of Moldova. By mode of transmission, both in men infected through sex between men and in people infected heterosexually, the number of new AIDS diagnoses more than doubled between 2010 and 2019. AIDS cases in people infected as a result of injecting drug use decreased by 49% in comparison with 2010 (Fig. 2.11).

The trend in more recent years, however, has been for the AIDS rate to decline – from 10.2 in 2017 to 8.3 in 2019.

The most common AIDS-indicative diseases diagnosed in 2019 were wasting syndrome due to HIV (17% of all disease events reported), pulmonary TB (16%) and oesophageal candidiasis (13%) (Table 22). By transmission mode, wasting syndrome due to HIV, pulmonary TB and Kaposi's sarcoma were the most common AIDS-defining diseases among people infected through heterosexual sex (the three diseases together accounting for 53% of reported events). The most common AIDS-defining diseases reported among people with AIDS infected through injecting drug use were extrapulmonary TB, pulmonary TB and wasting syndrome due to HIV (together accounting for 56% of reported events). Among the few AIDS cases infected as a result of sex between men, pulmonary TB, *Pneumocystis* pneumonia and Kaposi's sarcoma were the most common diseases (Fig. 2.12).

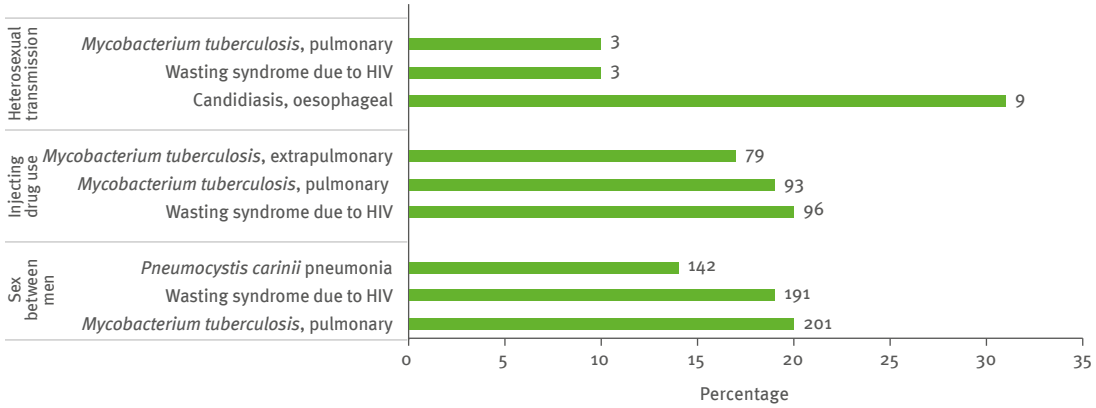
AIDS-related mortality remains high in the East, with 3830 reported AIDS-related deaths or deaths among people previously diagnosed with AIDS where cause of death (AIDS- or non-AIDS-related) was unknown or could not be reported in the 12 countries concerned for 2019. This figure represents 83% of all AIDS-related deaths reported in the Region, a 19% decrease compared with 2012, which had the highest number of deaths reported for the decade (Table 23).

Fig. 2.11. New AIDS diagnoses, by transmission mode and year of diagnosis, East, 2010–2019



Note: data from the Russian Federation, Turkmenistan and Uzbekistan excluded due to inconsistent reporting during the period.

Fig. 2.12. Distribution of the three most common AIDS-defining illnesses per transmission mode, East, 2019



Note: no data from Russian Federation, Turkmenistan and Uzbekistan.

2.3 HIV and AIDS diagnoses in the Centre

2.3.1 HIV diagnoses in the Centre

The HIV epidemic in the Centre remains at a relatively low level compared to other parts of the Region, but the number of new diagnoses is increasing more rapidly here than elsewhere, particularly in people infected as a result of sex between men. A total of 6814 people were newly diagnosed with HIV in 2019 from the 14 countries in the Centre of the WHO European Region, giving a rate of 3.4 per 100 000 population (Table 1). The highest rates (over 3.0) were reported by Cyprus (11.4), Montenegro (4.1), Poland (3.9), Turkey (3.9), Bulgaria (3.7), Romania (3.6) and Albania (3.5), and the lowest (under 2.0) by Bosnia and Herzegovina (0.9), Slovenia (1.6) and Slovakia (1.9).

The most affected age group in 2019 was 30–39-year-olds (32% of cases), while 15% of cases were diagnosed in young people aged 15–24 years – the largest percentage of young people among the three geographical areas (Table A, Table 9). The male-to-female ratio was 5.5, higher than in both the West and the East. This reflects the higher number of young MSM among newly diagnosed cases in the central part of the Region compared with other parts of the Region. The highest male-to-female ratios (over 10.0) were observed in Croatia (19.4), Hungary (13.0), Montenegro (12.0) and Serbia (10.3) (Fig. 2.13).

All 14 countries reporting 2019 data provided information on transmission mode, and the 2019 data (Table A, Tables 4–7) indicate the following:

- 27% of those newly diagnosed and 49% of new HIV diagnoses with a known route of transmission were infected through sex between men (1863) (Table 4); in 2019, sex between men was the predominant reported mode of transmission in 10 countries (Bosnia and Herzegovina, Bulgaria, Croatia, Czechia, Hungary, Montenegro, Serbia, Slovakia, Slovenia and Poland) (Fig. 2.14);
- 25% of those newly diagnosed and 46% of new HIV diagnoses with a known route of transmission were infected through heterosexual transmission (1730) (Table 6), which was the main reported mode of transmission in four countries (Albania, Cyprus, Romania and Turkey) (Fig. 2.14);
- 2% of those newly diagnosed and 4% of new HIV diagnoses with a known route of transmission were infected through injecting drug use (146) (Table 5);
- 1% of those with a known route of transmission were infected through mother-to-child transmission (36) (Table 7); and
- transmission mode was unknown for 44% of those newly diagnosed (3029) (Table 8), with the two countries with the highest number of new HIV diagnoses in 2019 (Turkey and Poland – together accounting for 69% of all new HIV diagnoses reported in the Centre in 2019) also having the highest percentage of new HIV diagnoses with an unknown transmission mode (Poland 72% and Turkey 58%).

Twelve of 15 countries provided information on CD4 cell count at HIV diagnosis for 2034 people aged over 14 years (covering 30% of all new diagnoses in the Centre countries and 40% in the 14 countries with CD4 cell data) (Table 13). Fifty-six per cent were late presenters, with CD4 cell counts below 350 per mm^3 at HIV diagnosis, including 35% with advanced HIV infection (CD4 under 200/mm^3). In all, 18% had a CD4 cell count of between 350 and 500 cells per mm^3 and 27% had a CD4 cell count above 500 per mm^3. The proportion diagnosed with CD4 counts of less than 350/mm^3 was 50% or above in nine countries: Cyprus (91%), Albania (75%), Montenegro (64%), Romania (63%), Bulgaria (62%), Serbia (60%), Bosnia and Herzegovina (54%), Slovenia (52%) and Croatia (50%). The percentage of late presenters varied across transmission categories and was highest for

Fig. 2.13. Male-to-female ratio in new HIV diagnoses, by country, Centre, 2019

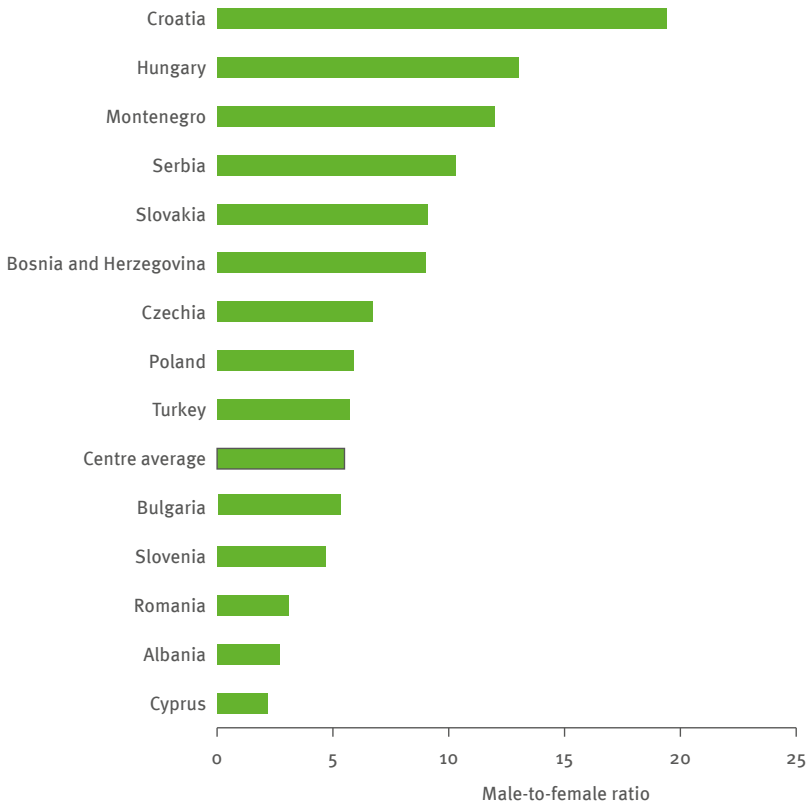
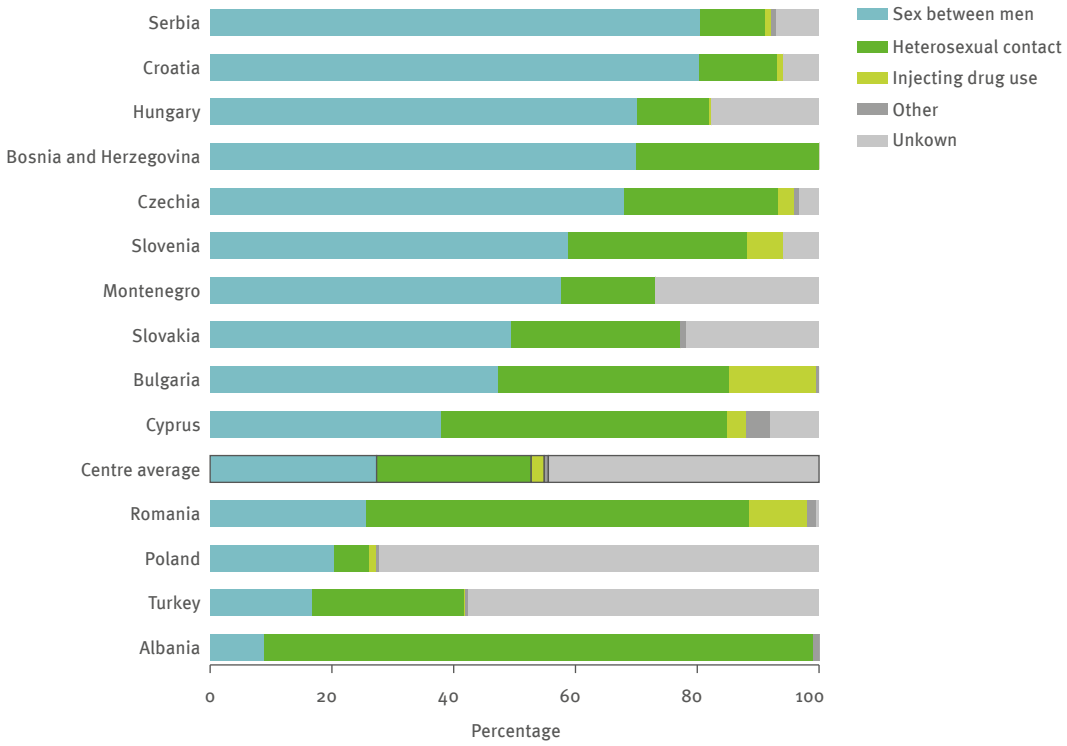


Fig. 2.14. New HIV diagnoses, by country and transmission mode, Centre, 2019 (n = 6713)



those infected as a result of injecting drug use (73%) and heterosexually (65%) and lowest for men infected through sex with men (47%) (Table 13, Fig. 2.15).

2.3.2 Trends in HIV diagnoses in the Centre

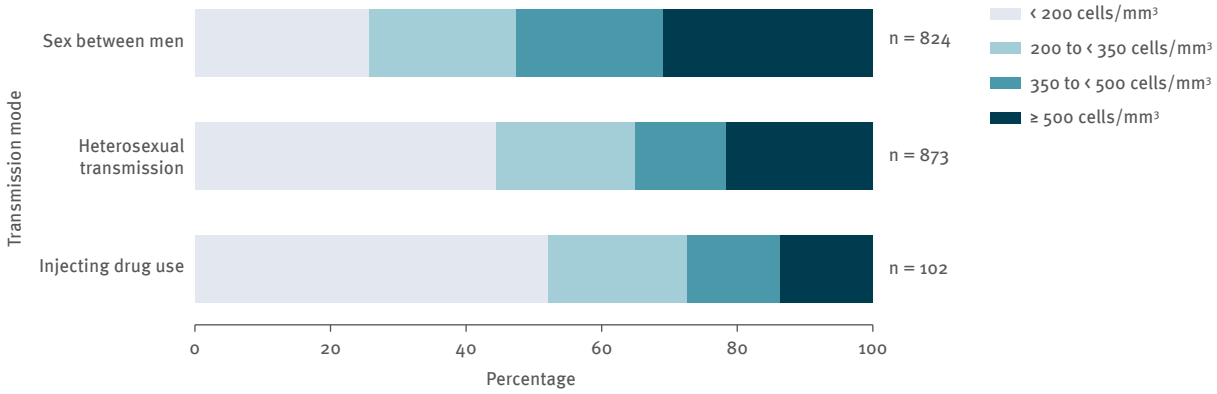
The rate of new HIV diagnoses increased by 113% between 2010 and 2019 in the 14 reporting countries of the Centre, from 1.6 per 100 000 population (2945 cases) to 3.4 (6814 cases) (Fig. 2.2). Rates increased in all countries except Slovenia. The largest increases were in Bosnia and Herzegovina, Slovakia and Turkey.

Information on trends by reported mode of HIV transmission for the period 2010–2019 in the 12 countries with consistent data[25] (Fig. 2.16) indicates the following.

- The number of new diagnoses in those infected as a result of sex between men nearly doubled, from 593 to 1025. The percentage of new HIV diagnoses attributed to sex between men also increased, from 40% in 2010 to 48% in 2019.
- The number of new diagnoses in those infected through heterosexual transmission increased by 48%, from 568 to 841. The percentage of new HIV diagnoses attributed to heterosexual transmission decreased slightly from 40% in 2010 to 38% in 2019.
- The number of new diagnoses in those infected as a result of injecting drug use increased from 96 to 117.

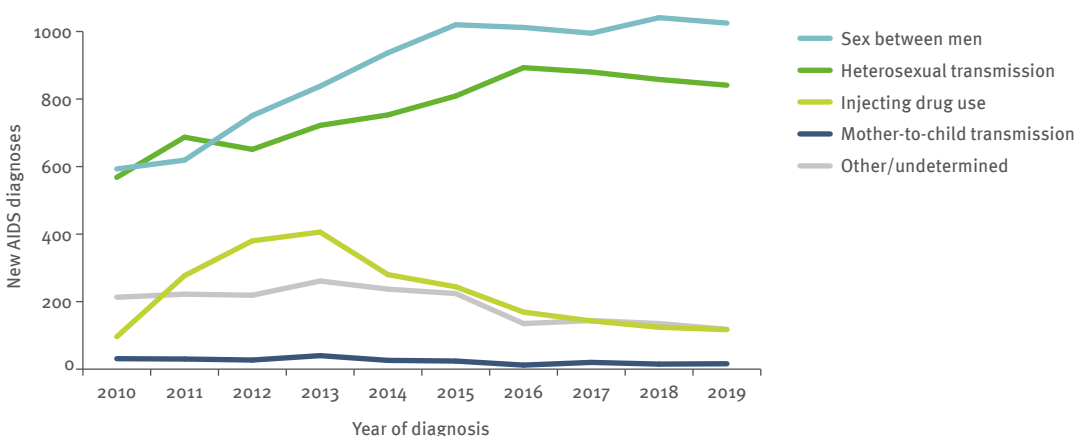
25 Data from North Macedonia, Poland and Turkey were excluded due to incomplete reporting on transmission mode during the period.

Fig. 2.15. New HIV diagnoses, by CD4 cell count per mm³ at diagnosis and transmission mode, Centre, 2019 (n = 1847)



Note: no data from Hungary, North Macedonia or Poland.

Fig. 2.16. New HIV diagnoses, by transmission mode and year of diagnosis, Centre, 2010–2019



Note: data from North Macedonia, Poland and Turkey excluded due to incomplete reporting on transmission mode during the period.

The 2011–2013 outbreak in Romania that caused higher numbers of cases during this period has levelled off, as evidenced by the decrease in new diagnoses since 2013. The percentage of new diagnoses attributed to injecting drug use was 6% in both 2010 and 2019.

- The number of new diagnoses as a result of mother-to-child transmission decreased from 31 cases in 2010 to 16 cases in 2019.
- The number of new diagnoses reported with unknown transmission mode in 2019, although still high at 44% for the 15 countries, decreased by 47%, from 211 to 112 in the 12 countries with consistent data on transmission mode. The percentage of new diagnoses with missing information about transmission mode decreased from 14% in 2010 to 5% in 2019 in the 12 countries included in the trend assessment.

2.3.3 AIDS cases, morbidity and mortality in the Centre

In 2019, 802 people were diagnosed with AIDS in the 14 reporting countries in the Centre, corresponding to a rate of 0.4 per 100 000 population (Table 14). The highest rates (1.0 or above) were reported by Montenegro (1.6), Romania (1.5), Albania (1.4) and Bulgaria (1.0). AIDS rates remained below 0.8 per 100 000 population in other countries in the Centre. In contrast to the distribution of transmission modes for new HIV diagnoses in the Centre (where sex between men is the predominant mode), more AIDS diagnoses are reported in people infected through heterosexual contact (52% of new diagnoses) than with sex between men (32% of new diagnoses).

The rate of new AIDS diagnoses remained stable at 0.4 per 100 000 between 2010 and 2019, with almost no change during the period (Fig. 2.4). Trends were more heterogeneous at country level. Of the nine countries reporting more than 10 AIDS cases in 2019, the rate increased by more than 50% in four (Albania, Bulgaria, Croatia and Hungary) (Table 14). In terms of the mode of transmission, new AIDS diagnoses increased most among men infected as a result of sex between men (by 93% for the decade) but have been relatively stable or declining since 2014 in those infected heterosexually or through injecting drug use (Fig. 2.17).

The most common AIDS-indicative diseases diagnosed in 2019 were wasting syndrome due to HIV (21% of all recorded disease events), *Pneumocystis* pneumonia (13%) and pulmonary TB (12%) (Table 22).

Mortality also remained stable in the Centre, with 282 deaths reported by the 14 countries in 2010 and 260 in 2019 and little variation being seen during the decade (though the numbers were slightly higher during 2011–2015) (Table 23). These numbers do not represent the true burden of AIDS-related mortality due to underreporting of deaths in countries that do not match their HIV/AIDS registries with the national mortality registry.

2.4 HIV and AIDS diagnoses in the West

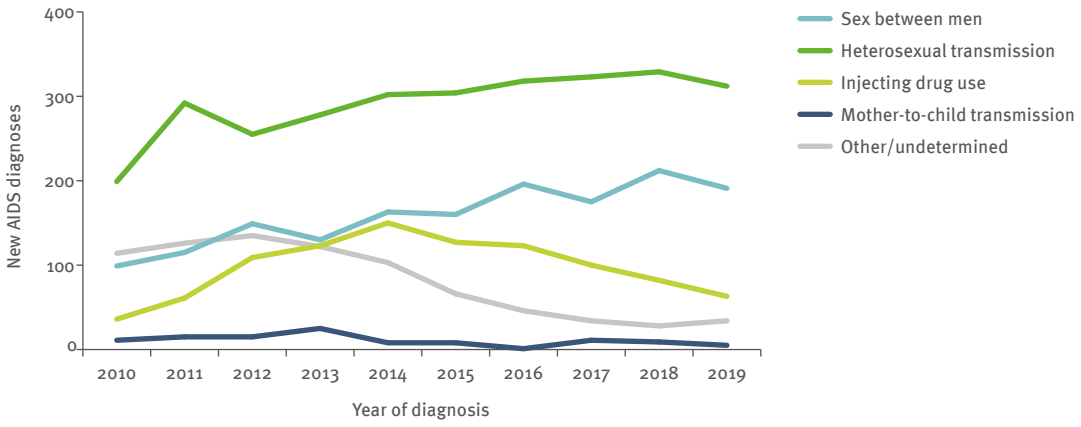
2.4.1 HIV diagnoses in the West

The epidemiological pattern of HIV infection in the West largely mirrors that of the EU/EEA, as described in Chapter 1. In 2019, 21 793 people were newly diagnosed with HIV in the 20 reporting countries comprising the West of the WHO European Region, giving a rate of 5.2 per 100 000 population (not adjusted for reporting delay) (Table A, Table 1). When adjusting the 2019 West rate for reporting delay,[26] it increases to 5.7 per 100 000 population (23 971 cases).

In 2019, the highest proportion of newly diagnosed HIV infections (30%) were in 30–39-year-olds, 10% were aged 15–24 years and the male-to-female ratio was 2.9

26 See Annex 1 for methods and Annex 6 for results.

Fig. 2.17. New AIDS diagnoses, by transmission mode and year of diagnosis, Centre, 2010–2019



Note: data from North Macedonia, Poland and Turkey excluded due to incomplete reporting during the period.

(Table A). Sexual transmission between men remained the main transmission mode in 2019, followed by heterosexual transmission, together accounting for 74% of all new diagnoses and 94% of all cases with a known route of transmission.

Seventeen countries reported information on CD4 cell count at HIV diagnosis for 14 321 people over 14 years (67% of new diagnoses from the 17 countries reporting information on CD4 cell counts). Of these, 49% were late presenters with CD4 cell counts below 350 per mm^3 at HIV diagnosis, including 29% with advanced HIV infection (CD4 under 200/mm^3) (Table 13). Late presentation varied by transmission category and was more common in people infected heterosexually (56%) or through injecting drug use (49%) and less common in men infected through sex with men (41%) (Table 13).

Information about transmission mode (Table A, Tables 4–7) suggests the following:

- 40% of all people newly diagnosed and 51% of those with a known mode of transmission were infected through sex between men (8703) (Table 4);
- 34% of all people newly diagnosed and 43% of those with a known mode of transmission were infected heterosexually (7431) (Table 6); of these, 63% were born abroad and 39% originated from generalized epidemic countries (Table 11);
- 3% of all people newly diagnosed were infected through injecting drug use (739) (Table 5);
- mother-to-child transmission accounted for 0.7% of all new diagnoses and 0.9% of those with a known route of transmission (150 cases) (Table 7); of these, 88% were born abroad and 63% originated from countries with a generalized epidemic (Table 11); and
- transmission mode was unknown for 22% of all new diagnoses (4705).

Information about country of birth, country of nationality or region of origin was provided for all 21 793 new diagnoses in 2019. Region of origin was unknown for 14% (3034). Among 18 759 persons with known origin (86%), 49% (9192) originated from outside of the reporting country, including 36% (6845) from outside the WHO European Region and 13% (2347) from a European country other than the country of report (Table 11).

2.4.2 Trends in HIV diagnoses in the West

The crude rate of new diagnoses in the 20 reporting countries declined by 44% between 2010 and 2019, from 7.5 per 100 000 population (29 515) to 5.2 (21 793) (not adjusted for reporting delay).[27] After adjusting the 2019 rate for reporting delay, the decline was 32% (from 7.5 to 5.7 per 100 000 population, with 23 971 cases in 2019). HIV rates increased (by 10% or more in countries with more than 10 cases in both 2010 and 2019) in four countries – Germany, Iceland, Ireland and Malta – and decreased (by 10% or more) in 13 (Table 1), not taking into account the impact of reporting delays in several countries. Information about trends by reported transmission mode during the period 2010–2019 in the 15 countries with consistent data[28] and taking standardized adjustments for reporting delay into account (Fig. 2.18) suggests the following.

- New diagnoses of people infected through sex between men decreased by 27%, from 8601 to 6274. The percentage of new diagnoses attributed to sex between men decreased from 41% in 2010 to 36% in 2019.
- New diagnoses of people with reported heterosexual transmission decreased by 30%, from 8667 to 6097, with the steepest decline among women and foreign-born heterosexual people, the latter being due mainly to sharp declines among migrants originating from countries with generalized HIV epidemics (data not shown; see also Fig. 1.11 and 1.12 and section 1.2 (Trends in HIV diagnoses) in Chapter 1). The percentage of new diagnoses attributed to heterosexual contact decreased from 41% of cases in 2010 to 35% in 2019.
- New diagnoses of people infected through injecting drug use decreased by 29%, from 778 in 2010 to 554 in 2019, representing 4% of new HIV diagnoses in 2010 and 3% in 2019.
- New diagnoses of children infected through mother-to-child transmission decreased by 42%, from 249 in 2010 to 145 in 2019.
- The number of new diagnoses with missing information about transmission mode increased by 47%, from 2833 to 4164, corresponding to 13% of new diagnoses in 2010 and 24% in 2019. Delays in the reporting of probable mode of transmission to national and European surveillance systems intensify the increase.

2.4.3 AIDS cases, morbidity and mortality in the West

In 2019, 19 of the 23 countries in the West[29] reported that 2156 people were diagnosed with AIDS, giving a rate of 0.5 per 100 000 population (Table 14). The steady decline in new AIDS diagnoses that began in the late 1990s continued through to 2019, with a 69% decrease in the rate of new AIDS cases over the decade from 1.6 per 100 000 population (6539 cases) in 2010 to 0.5 (2156 cases) in 2019 (Fig. 2.4). New AIDS diagnoses decreased in all transmission groups but most notably among people who inject drugs (an 85% decline) (Fig. 2.19).

The most common AIDS-indicative diseases diagnosed in the West in 2019 were *Pneumocystis* pneumonia (24% of all disease events reported), oesophageal candidiasis (12%) and Kaposi's sarcoma (11%) (Table 22).

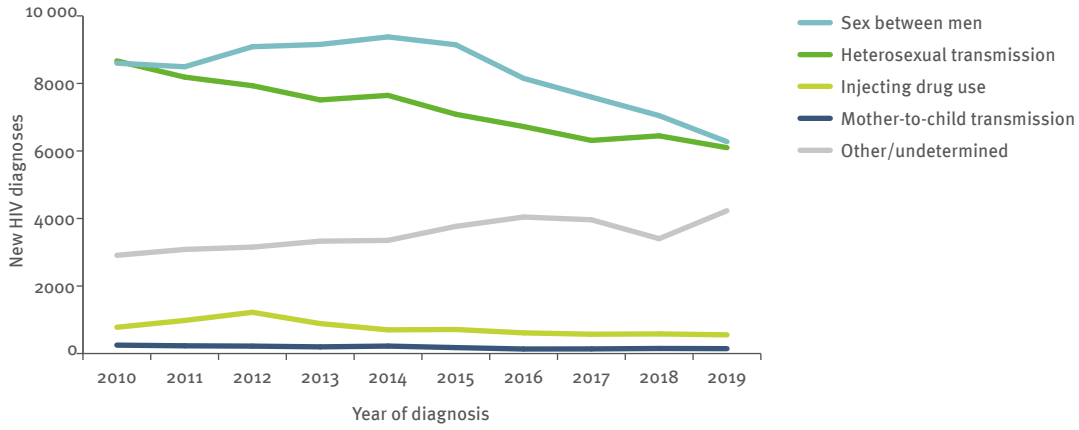
In the West, 527 people were reported to have died in 2019 in the 17 countries for which consistent data were

27 See Annex 1 for methods and Annex 6 for results.

28 Data from Italy and Spain were excluded due to increasing coverage of national surveillance over the period.

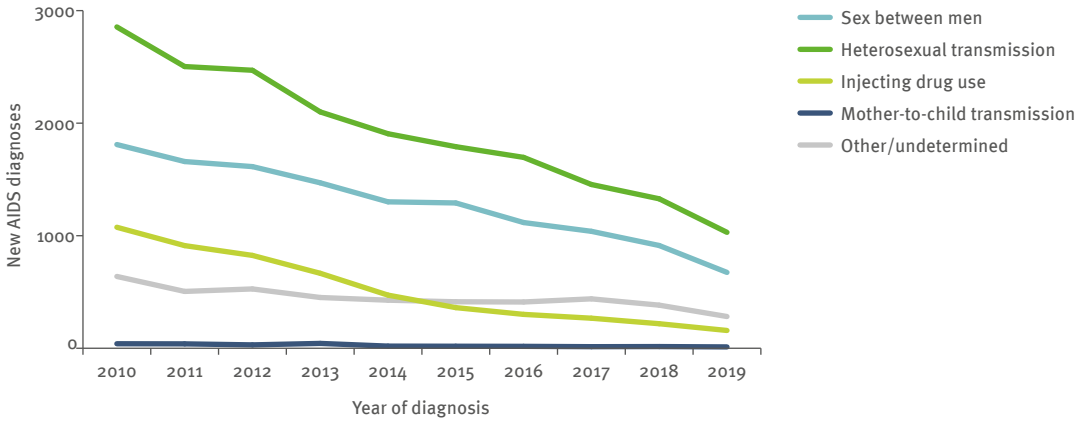
29 No data were available from Andorra, Belgium, Monaco or Sweden.

Fig. 2.18. New HIV diagnoses, by transmission mode and year of diagnosis, West, 2010–2019



Note: data from Andorra, Belgium and Monaco excluded due to inconsistent reporting during the period; data from Iceland, Ireland and Malta excluded due to incomplete reporting on transmission mode during the period; data from Italy and Spain excluded due to increasing coverage of national surveillance during the period. (In total, data from 45 countries included for Fig 2.18 in 2019.)

Fig. 2.19. New AIDS diagnoses, by transmission mode and year of diagnosis, West, 2010–2019



Note: Andorra, Belgium, Monaco and Sweden excluded due to inconsistent reporting during the period.

available[30] (Table 23). The number of AIDS-related deaths has continued to decline during the decade, from 2325 in 2010 to 527 in 2019, representing a 77% decrease. These numbers do not reflect the true burden of AIDS-related mortality in the West of the Region due to reporting delays. In particular, there is a risk of deaths being underreported in those countries that do not have the ability to link their HIV/AIDS registries with their vital statistics registries.

2.5 HIV testing

Data on the number of HIV tests can support the interpretation of trends in newly diagnosed HIV infections. In 2019, a total of 66 879 048 HIV tests were reported by 22 countries (12 East, nine Centre and one West). These tests do not include unlinked anonymous testing and all countries except the Russian Federation also exclude the HIV tests performed as part of blood-donor screening. In 2019, the Russian Federation reported a total of 47 206 251 HIV tests, accounting for 71% of all HIV tests reported in the Region for that year. Countries in the East tended to report higher testing rates than those in the West and Centre, but rates varied greatly across countries from all parts of the Region, and more data were available from countries in the Centre and East than the West (Table 24).

The overall number of tests performed in the Region increased by 77%, from 37 650 358 in 2010 to 66 918 147 in 2019, in the 21 countries with data for both 2010 and 2019. Increases in large countries with high testing numbers, such as Belarus, Kazakhstan, the Russian

30 No data were available from Andorra, Belgium, Denmark, Italy, Monaco or Sweden.

Federation and Turkey, had a considerable impact on the overall increase. The number of tests more than doubled in six countries, but information about testing yield or coverage among key populations at higher risk of HIV infection is not available here.

The number of HIV tests from the 12 reporting countries in the East of the Region increased by 77%, from 31 793 139 in 2010 to 56 127 346 in 2019 (Table 24). Information about the types of populations tested is not available, but an increasing number of HIV tests do not necessarily generate higher testing yields if large numbers of HIV tests are performed among people at low risk of HIV infection. It nevertheless is possible that increased testing activity has contributed to the observed increase in new diagnoses.

The rate of new HIV diagnoses in the Centre more than doubled during the last decade, while the number of HIV tests increased by 76% (from 5 924 413 in 2010 to 10 415 092 in 2019) in the eight countries for which consistent data were available.[31]

The number of HIV tests conducted in the West is not reported separately here. In contrast to countries in the East and Centre, many in the West do not systematically collect data on the number of HIV tests performed. This results in data being too sparse to allow for meaningful interpretation.

2.6 Conclusions

HIV infection continues to affect the health and well-being of millions of people in the WHO European Region and to pose a serious public health concern, particularly in the eastern part of the Region.

More than 136 000 people were diagnosed with HIV infection in 2019, at a rate of 15.6 diagnoses per 100 000 population. The vast majority of people newly diagnosed (79%) were from the East, with a rate of 41.7 per 100 000 population, while 16% were diagnosed in the West, with a rate of 5.7 per 100 000 population, and 5% in the Centre, with a rate of 3.4 per 100 000 population. An increasing trend in new HIV diagnoses has been observed in one third of the reporting countries in the East, although this is at a slower rate than in previous years. Halted growth in reported newly diagnosed HIV has been observed in the Russian Federation. Some signs of stabilization have been noted in Ukraine. This contributed to the overall stabilization of the epidemic in the East.

The 2019 HIV surveillance data also confirm the great variation in epidemic patterns and trends across the WHO European Region. Overall, among the new diagnoses for which the HIV transmission mode was known, heterosexual transmission accounted for 59%, sex between men for 24% and injecting drug use for 15%. These overall numbers conceal a complex mix of transmission patterns, trends and country contexts in which transmission through sex between men tends to predominate in the western and central parts of the Region, heterosexual transmission remains substantial across large parts of the Region (particularly among migrants, travellers and partners of people who inject drugs) and injecting drug use remains an important risk factor, mainly in the eastern part of the Region.

Transmission as a result of injecting drug use continued to decrease during the decade but still accounted for 24% of new diagnoses in the East with a known transmission mode. Although the reported transmission through sex between men remains low in absolute terms in the East, it has increased nearly five-fold during the decade – the largest increase in any transmission category and any geographical area of the Region. There is some evidence to suggest that a proportion of men reported as heterosexually infected may in fact be men who have sex with men or people with a history of drug injection who may have been misclassified as heterosexually infected *(2,3)*. While most new diagnoses (65%) were in men and new diagnoses increased more rapidly among men than women, the proportion of new diagnoses among women was much higher in the East than elsewhere in the Region.

The rate of new diagnoses is increasing more rapidly in the central part than anywhere else in the Region, with a strong gender disparity and very steep increases among men (both MSM and heterosexual) compared with a fairly stable rate among women. Sexual transmission outweighs all other types of transmission in all countries, with sex between men being the predominant mode of transmission in 12 of the 15 Centre countries and reported heterosexual transmission prevailing in three. Drug-injection-related transmission remains low but recent outbreaks *(4–8)* suggest that HIV prevention services for people who inject drugs continue to be important and must be maintained with sufficient coverage to prevent outbreaks. The percentage of young people among the new diagnoses is also higher in this part of the Region than elsewhere. HIV prevention, diagnostics and treatment interventions should accommodate the needs of key populations, particularly MSM, with relevant evidence-based interventions, including: condom and lubricant programming; diversified HIV testing services; assisted voluntary partner notification; PrEP; prevention and management of coinfections (particularly sexually transmitted infections); and rapid HIV treatment initiation. Services should be patient-centred and provided in a friendly environment, preferably with the involvement of civil society along the entire HIV continuum of services, ranging from HIV prevention to adherence and ART.

In the western part of the Region, there has been a clear decline in the overall rate of new HIV diagnoses during the decade, resulting primarily from decreases in new diagnoses among MSM in specific countries (Austria, Belgium, Denmark, the Netherlands, Norway, Spain and the United Kingdom) and among people infected heterosexually, particularly women and people

31 The eight countries are Albania, Bulgaria, Czechia, Montenegro, Poland, Serbia, Slovenia and Turkey.

originating from countries with generalized HIV epidemics. Continued strong HIV combination prevention, including the use of formal and informal PrEP, implementation of diversified and user-friendly HIV testing services with more frequent testing to facilitate earlier diagnosis, early linkage to care and rapid initiation of ART, and a strong focus on interventions designed to reach MSM *(9,10)* have probably all contributed to the observed decline. While a certain proportion of migrants, even those originating from HIV-endemic areas, are known to acquire HIV after arrival in the EU/EEA *(11–13)*, the extent to which the observed decreases can be explained by lower incidence of HIV in the migrant populations, reduced test-seeking or opportunities, changed migration patterns or a combination of factors, is unclear.

Where migration is a common occurrence and takes a variety of forms, the public health challenge of ensuring access to health services for migrant populations (including HIV services and the promotion of cross-border collaboration and sharing of data) remains essential to a robust and people-centred public health response.

As in previous years, it remains a major concern that over half (53%) of those newly diagnosed with HIV are only detected once their CD4 cell counts have fallen to below 350 per mm^3. Once again, it is significant that the 2019 data provide information about variations in late presentation according to geography, transmission mode and age. Moreover, the data confirm that the proportion diagnosed at a late stage of infection was highest in the East, among people infected heterosexually (particularly men) and as a result of injecting drug use, and among those in older age groups.

Late presentation reflects insufficient access to, and uptake of, appropriate HIV testing and counselling by those who have a higher risk of acquiring HIV. HIV testing strategies need to be reconsidered and diversified to include innovative approaches that involve community-based organizations and focus on the key population groups. Multiple entry points to HIV testing should be available through, for example, HIV self-testing, HIV testing performed by lay providers and civil society, home sampling, routine indicator condition-guided HIV testing offered in the health system and assisted partner notifications. HIV testing should also be available in settings such as prisons, drug-dependence treatment programmes, sexual and reproductive health clinics and migrant health services, depending on the local context. Support for timely linkage to HIV treatment and care is essential to reduce late presentation and to make progress towards the Joint United Nations Programme on HIV/AIDS (UNAIDS) and WHO 90–90–90 targets, improving treatment outcomes and further reducing HIV transmission.

In September 2020, considering the COVID-19 pandemic situation, the WHO Regional Office for Europe and the ECDC organized a joint virtual meeting with major national stakeholders involved in the response to TB, HIV and viral hepatitis, including key partners, donors, affected communities and civil society organizations, to exchange information and good practices on the maintenance of essential TB, HIV and viral hepatitis services. Countries and partners discussed their experiences in ensuring access to, and continuity of, quality HIV services during the COVID-19 pandemic and on how they monitored the impact of the COVID-19 pandemic on HIV services. Latest WHO policy guidance and recommendations on TB, HIV, viral hepatitis and comorbidities were also discussed during the meeting.

AIDS trends varied greatly across the three geographical areas. While the rate continued its steady decline in the West, it remained stable in the Centre and, although it increased by 15% over the decade in the East of the Region, overall there was a 23% decrease in the rate of new AIDS diagnoses in the Region between 2010 and 2019. The high number of AIDS cases is indicative of late HIV diagnosis, delayed initiation of life-saving HIV treatment and low treatment coverage. Increasing implementation of a treat-all approach and having policies in place in most countries in the Region to ensure that everyone living with HIV is offered ART regardless of the stage of disease has helped to stabilize AIDS trends and will, ultimately, help reduce AIDS-related deaths in line with global and regional targets *(14–17)*.

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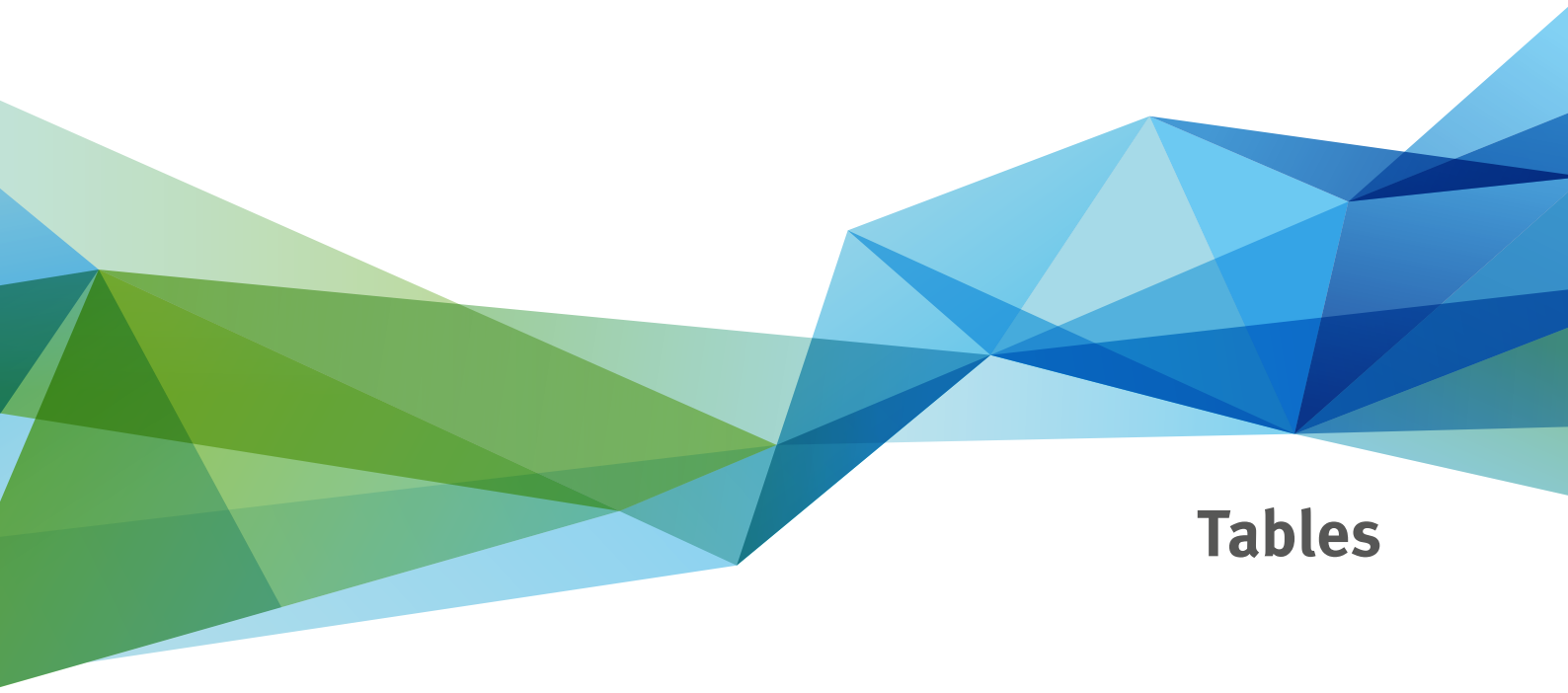


Tables

Table 1. New HIV diagnoses and rates per 100 000 population, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of start of reporting	2010		2011		2012		2013		2014	
			N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA												
West	Austria	1980	363	4.3	361	4.3	365	4.3	307	3.6	304	3.6
West	Belgium	1985	1 184	10.9	1 171	10.6	1 228	11.1	1 128	10.1	1 057	9.5
Centre	Bulgaria	1986	163	2.2	201	2.7	157	2.1	200	2.7	247	3.4
Centre	Croatia	1985	71	1.7	74	1.7	73	1.7	85	2.0	92	2.2
Centre	Cyprus	1986	41	5.0	54	6.4	58	6.7	54	6.2	56	6.5
Centre	Czechia	1985	180	1.7	153	1.5	212	2.0	235	2.2	232	2.2
West	Denmark	1990	275	5.0	266	4.8	201	3.6	233	4.2	256	4.5
East	Estonia	1988	376	28.2	366	27.5	315	23.8	325	24.6	291	22.1
West	Finland	1980	184	3.4	172	3.2	156	2.9	157	2.9	181	3.3
West	France	2003	5 559	8.6	5 426	8.4	5 680	8.7	5 572	8.5	5 691	8.6
West	Germany	1993	2 809	3.4	2 763	3.4	3 027	3.8	3 235	4.0	3 525	4.4
West	Greece	1984	648	5.8	966	8.7	1 161	10.5	901	8.2	779	7.1
Centre	Hungary	1985	182	1.8	162	1.6	219	2.2	240	2.4	271	2.7
West	Iceland	1983	24	7.6	23	7.2	19	5.9	11	3.4	11	3.4
West	Ireland[c]	1985	330	7.3	328	7.2	350	7.6	343	7.4	378	8.2
West	Italy	1985	4 024	6.8	3 898	6.6	4 162	7.0	3 843	6.4	3 831	6.3
East	Latvia	1987	274	12.9	299	14.4	339	16.6	340	16.8	350	17.5
–	Liechtenstein	1985	4	11.1	1	2.8	0	0.0	0	0.0	1	2.7
East	Lithuania	1988	153	4.9	166	5.4	160	5.3	177	6.0	141	4.8
West	Luxembourg[c]	1983	65	12.9	61	11.9	70	13.3	75	14.0	89	16.2
West	Malta	2001	18	4.3	21	5.1	30	7.2	36	8.5	40	9.3
West	Netherlands	1980	1 277	7.7	1 233	7.4	1 167	7.0	1 132	6.7	1 001	5.9
West	Norway	1984	258	5.3	269	5.5	242	4.9	233	4.6	267	5.2
Centre	Poland	1985	955	2.5	1 113	2.9	1 104	2.9	1 100	2.9	1 134	3.0
West	Portugal	1985	1 989	18.8	1 821	17.2	1 804	17.1	1 772	16.9	1 454	13.9
Centre	Romania	1987	590	2.9	837	4.1	940	4.7	1 019	5.1	907	4.5
Centre	Slovakia	1985	28	0.5	49	0.9	50	0.9	83	1.5	86	1.6
Centre	Slovenia	1985	35	1.7	56	2.7	48	2.3	47	2.3	53	2.6
West	Spain	2003	3 914	11.9	3 676	11.2	3 944	10.4	4 374	9.4	4 429	9.5
West	Sweden	1983	420	4.5	461	4.9	441	4.7	457	4.8	473	4.9
West	United Kingdom	1981	6 328	10.1	6 153	9.8	6 190	9.7	5 964	9.3	6 296	9.8
	Total EU/EEA		**32 721**	**6.6**	**32 600**	**6.6**	**33 912**	**6.8**	**33 678**	**6.6**	**33 923**	**6.6**
Non-EU/EEA												
Centre	Albania	1993	43	1.5	78	2.7	81	2.8	120	4.1	79	2.7
West	Andorra	2004	6	7.1	2	2.4	2	2.4	5	6.2	5	6.3
East	Armenia[c]	1988	149	5.2	183	6.4	230	8.0	239	8.2	339	11.6
East	Azerbaijan	1987	459	5.1	548	6.0	517	5.6	514	5.5	604	6.4
East	Belarus	1981	1 069	11.3	1 196	12.7	1 223	13.0	1 533	16.3	1 811	19.2
Centre	Bosnia and Herzegovina[c]	1986	1	0.0	27	0.7	25	0.7	2	0.1	23	0.7
East	Georgia	1989	455	11.1	424	10.4	526	12.9	490	12.1	564	14.0
West	Israel	1981	419	5.7	450	6.0	483	6.3	465	6.0	462	5.9
East	Kazakhstan	1987	1 982	12.2	1 997	12.1	2 004	12.0	2 131	12.5	2 342	13.5
East	Kyrgyzstan	1987	567	10.5	614	11.1	701	12.5	503	8.8	649	11.1
West	Monaco	1987	0	0.0	0	0.0	1	2.7	0	0.0	1	2.7
Centre	Montenegro	1989	15	2.4	9	1.4	13	2.1	11	1.8	20	3.2
Centre	North Macedonia	1993	5	0.2	1	0.0	15	0.7	15	0.7	30	1.4
East	Republic of Moldova	1987	703	17.2	721	17.7	757	18.6	706	17.3	831	20.4
East	Russian Federation	2009	62 581	43.6	67 317	46.8	75 708	52.6	81 698	56.6	92 613	64.0
West	San Marino	1985	6	19.2	8	25.3	5	15.6	1	3.1	3	9.1
Centre	Serbia	1984	152	1.7	134	1.5	137	1.5	156	1.7	137	1.5
Centre	Serbia excluding Kosovo[1]	1984	149	2.2	128	1.8	133	1.9	153	2.1	131	1.8
Centre	Kosovo[1]	1999	3	0.1	6	0.3	4	0.2	3	0.2	6	0.3
West	Switzerland	1985	605	7.7	562	7.1	621	7.8	576	7.1	517	6.3
East	Tajikistan	1991	881	11.7	880	11.4	770	9.8	817	10.1	986	11.9
Centre	Turkey	1985	489	0.7	699	1.0	1 068	1.4	1 313	1.7	1 838	2.4
East	Turkmenistan	1990	0	0.0	0	0.0	0	0.0	–	–	–	–
East	Ukraine	1987	16 617	36.3	17 305	37.9	16 850	37.1	17 844	39.4	15 796	35.0
East	Uzbekistan	1981	3 795	13.3	–	–	–	–	–	–	–	–
	Total non-EU/EEA		**90 999**	**23.8**	**93 155**	**26.2**	**101 737**	**28.4**	**109 139**	**30.3**	**119 650**	**33.0**
WHO European Region												
West	West		30 705	7.6	30 091	7.4	31 349	7.6	30 820	7.3	31 050	7.3
Centre	Centre		2 950	1.6	3 647	1.9	4 200	2.2	4 680	2.4	5 205	2.7
East	East		90 061	31.8	92 016	36.1	100 100	39.1	107 317	41.8	117 317	45.6
	Total WHO European Region		**123 716**	**14.1**	**125 754**	**14.8**	**135 649**	**15.8**	**142 817**	**16.4**	**153 572**	**17.5**

[a] Country-specific comments are in Annex 5.
[b] Cumulative total is the total number of cases reported by the country since the start of reporting.
[c] The numbers displayed here may not fully align with the numbers in the country's national statistics as these are presented by the "date of notification" instead of the "date of diagnosis" as here. The national statistics numbers are, for 2019, 448 (Armenia), 31 (Bosnia and Herzegovina), 538 (Ireland) and 96 (Luxembourg).
[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

2015		2016		2017		2018		2019		Cumulative total[b]	Country, territory or area[a]
N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
											EU/EEA
324	3.8	291	3.3	302	3.4	199	2.3	225	2.5	10 188	Austria
1 020	9.1	909	8.0	899	7.9	882	7.7	–	–	31 540	Belgium
227	3.2	202	2.8	241	3.4	311	4.4	258	3.7	3 316	Bulgaria
117	2.8	109	2.6	106	2.6	94	2.3	102	2.5	1 734	Croatia
80	9.4	80	9.4	85	9.9	78	9.0	100	11.4	1 326	Cyprus
266	2.5	286	2.7	254	2.4	208	2.0	222	2.1	3 590	Czechia
277	4.9	244	4.3	242	4.2	219	3.8	190	3.3	8 000	Denmark
270	20.5	229	17.4	219	16.6	190	14.4	178	13.4	10 079	Estonia
174	3.2	180	3.3	158	2.9	153	2.8	149	2.7	4 213	Finland
5 313	8.0	5 444	8.2	5 388	8.1	5 078	7.6	4 923	7.3	93 688	France
3 642	4.5	3 378	4.1	3 155	3.8	2 867	3.5	3 093	3.7	71 163	Germany
778	7.2	649	6.0	647	6.0	723	6.7	603	5.6	16 171	Greece
271	2.7	228	2.3	223	2.3	229	2.3	238	2.4	4 034	Hungary
12	3.6	28	8.4	24	7.1	38	10.9	28	7.8	451	Iceland
483	10.3	511	10.8	499	10.4	508	10.5	533	10.9	9 901	Ireland[c]
3 598	5.9	3 687	6.1	3 579	5.9	3 003	5.0	2 531	4.2	49 882	Italy
400	20.1	369	18.7	376	19.3	328	17.0	295	15.4	7 985	Latvia
0	0.0	2	5.3	0	0.0	0	0.0	0	0.0	67	Liechtenstein
157	5.4	214	7.4	263	9.2	160	5.7	151	5.4	3 323	Lithuania
75	13.3	81	14.1	67	11.3	57	9.5	48	7.8	1 830	Luxembourg[c]
61	13.9	63	14.0	45	9.8	73	15.3	80	16.2	585	Malta
990	5.9	891	5.2	825	4.8	691	4.0	563	3.3	28 083	Netherlands
221	4.3	220	4.2	213	4.1	191	3.6	172	3.2	6 654	Norway
1 278	3.4	1 319	3.5	1 419	3.7	1 210	3.2	1 468	3.9	25 591	Poland
1 495	14.4	1 508	14.6	1 336	13.0	1 109	10.8	778	7.6	61 433	Portugal
884	4.4	774	3.9	796	4.1	732	3.7	690	3.6	24 990	Romania
86	1.6	88	1.6	72	1.3	102	1.9	101	1.9	1 074	Slovakia
52	2.5	60	2.9	40	1.9	37	1.8	34	1.6	923	Slovenia
4 189	9.0	4 175	9.0	3 795	8.2	2 527	6.4	2 483	5.6	54 673	Spain
447	4.6	429	4.4	434	4.3	481	4.8	449	4.4	13 499	Sweden
6 198	9.6	5 231	8.0	4 653	7.1	4 537	6.8	4 116	6.2	164 417	United Kingdom
33 385	**6.5**	**31 879**	**6.2**	**30 355**	**5.9**	**27 015**	**5.3**	**24 801**	**4.9**	**714 403**	**Total EU/EEA**
											Non-EU/EEA
96	3.3	127	4.4	94	3.3	102	3.5	101	3.5	1 304	Albania
3	3.8	3	3.9	6	7.8	12	15.6	–	–	96	Andorra
296	10.1	304	10.4	355	12.1	420	14.2	446	15.1	3 785	Armenia[c]
727	7.6	556	5.7	567	5.8	656	6.6	721	7.2	8 129	Azerbaijan
2 305	24.4	2 391	25.3	2 468	26.1	2 386	25.2	2 137	22.6	29 209	Belarus
15	0.4	24	0.7	15	0.4	24	0.7	30	0.9	338	Bosnia and Herzegovina[c]
717	17.8	719	17.9	631	15.7	672	16.8	668	16.7	8 102	Georgia
413	5.2	368	4.5	415	5.0	452	5.4	408	4.8	10 495	Israel
2 475	14.1	2 898	16.3	3 014	16.7	3 215	17.5	3 673	19.8	39 439	Kazakhstan
653	11.0	764	12.6	840	13.6	876	13.9	850	13.2	9 745	Kyrgyzstan
1	2.7	0	0.0	3	7.8	0	0.0	–	–	40	Monaco
19	3.0	34	5.4	26	4.1	23	3.7	26	4.1	303	Montenegro
25	1.2	30	1.4	44	2.1	45	2.2	–	–	246	North Macedonia
818	20.1	832	20.5	835	20.6	905	22.3	922	22.8	13 679	Republic of Moldova
100 220	69.1	86 855	59.8	85 802	59.0	85 995	59.0	80 124	54.9	881 258	Russian Federation
2	6.0	2	6.0	1	3.0	3	8.9	0	0.0	93	San Marino
183	2.1	179	2.0	186	2.1	188	2.1	215	2.0	4 192	Serbia
180	2.5	168	2.4	183	2.6	180	2.6	210	2.4	4 066	Serbia excluding Kosovo[1]
3	0.2	11	0.6	3	0.2	8	0.4	5	0.3	126	Kosovo[1]
536	6.5	533	6.4	446	5.3	425	5.0	421	4.9	36 822	Switzerland
1 149	13.6	1 038	12.0	1 205	13.6	1 421	15.6	1 320	14.2	11 986	Tajikistan
2 107	2.7	2 438	3.1	2 844	3.5	3 248	3.9	3 229	3.9	22 467	Turkey
–	–	–	–	–	–	–	–	–	–	2	Turkmenistan
13 000	30.4	14 241	33.4	15 625	36.8	15 686	37.2	16 357	39.0	294 436	Ukraine
–	–	–	–	–	–	–	–	–	–	24 018	Uzbekistan
125 760	**34.7**	**114 336**	**31.3**	**115 422**	**31.4**	**116 754**	**31.6**	**111 648**	**30.1**	**1 400 184**	**Total non-EU/EEA**
											WHO European Region
30 252	7.1	28 825	6.7	27 132	6.3	24 228	5.7	21 793	5.2	673 917	West
5 706	2.9	5 978	3.1	6 445	3.3	6 631	3.4	6 814	3.4	95 428	Centre
123 187	48.1	111 410	43.4	112 200	43.6	112 910	43.7	107 842	41.7	1 345 175	East
159 145	**18.2**	**146 213**	**16.6**	**145 777**	**16.5**	**143 769**	**16.3**	**136 449**	**15.6**	**2 114 520**	**Total WHO European Region**

Table 2. New HIV diagnoses in males and rates per 100 000 population, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	2010		2011		2012		2013		2014	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA											
West	Austria	296	7.3	287	7.0	292	7.1	261	6.3	241	5.8
West	Belgium	788	14.8	783	14.5	837	15.4	789	14.4	738	13.4
Centre	Bulgaria	132	3.7	163	4.5	123	3.4	161	4.5	201	5.7
Centre	Croatia	68	3.3	63	3.0	70	3.4	77	3.7	83	4.0
Centre	Cyprus	34	8.5	39	9.5	49	11.7	46	10.9	49	11.7
Centre	Czechia	159	3.1	139	2.7	185	3.6	211	4.1	209	4.0
West	Denmark	201	7.3	192	7.0	146	5.3	178	6.4	196	7.0
East	Estonia	230	37.0	226	36.5	209	33.8	200	32.5	182	29.6
West	Finland	130	5.0	112	4.2	111	4.2	102	3.8	138	5.1
West	France	3 662	11.7	3 597	11.4	3 826	12.1	3 734	11.8	3 823	11.9
West	Germany	2 378	5.9	2 326	5.9	2 553	6.5	2 655	6.7	2 861	7.2
West	Greece	570	10.4	825	15.1	983	18.1	812	15.1	678	12.8
Centre	Hungary	142	3.0	122	2.6	186	3.9	192	4.1	214	4.5
West	Iceland	17	10.6	12	7.5	13	8.1	8	5.0	9	5.5
West	Ireland	241	10.7	239	10.5	252	11.1	258	11.3	274	11.9
West	Italy	3 030	10.6	2 928	10.2	3 276	11.4	3 000	10.4	3 042	10.3
East	Latvia	170	17.5	196	20.7	218	23.3	203	21.9	239	26.1
–	Liechtenstein	2	11.3	1	5.6	0	0.0	0	0.0	1	5.4
East	Lithuania	125	8.6	134	9.5	114	8.2	125	9.1	90	6.6
West	Luxembourg	46	18.4	46	18.1	50	19.1	61	22.7	57	20.7
West	Malta	16	7.8	17	8.2	23	11.1	30	14.3	36	16.8
West	Netherlands	1 065	13.0	1 043	12.7	972	11.7	963	11.6	848	10.2
West	Norway	173	7.1	190	7.7	166	6.6	158	6.2	199	7.8
Centre	Poland	712	3.9	914	5.0	924	5.0	937	5.1	933	5.1
West	Portugal	1 329	26.2	1 266	25.1	1 267	25.2	1 254	25.1	1 043	21.0
Centre	Romania	365	3.7	578	5.9	685	7.0	720	7.4	636	6.5
Centre	Slovakia	25	1.0	46	1.8	44	1.7	71	2.7	75	2.8
Centre	Slovenia	31	3.1	49	4.8	45	4.4	41	4.0	48	4.7
West	Spain	3 218	19.9	3 035	18.8	3 334	18.0	3 743	16.3	3 782	16.6
West	Sweden	250	5.4	291	6.2	265	5.6	293	6.1	273	5.7
West	United Kingdom	4 318	14.1	4 399	14.2	4 490	14.4	4 493	14.3	4 707	14.9
	Total EU/EEA	**23 923**	**9.9**	**24 258**	**10.1**	**25 708**	**10.5**	**25 776**	**10.4**	**25 905**	**10.4**
Non-EU/EEA											
Centre	Albania	28	1.9	55	3.7	58	3.9	82	5.6	61	4.1
West	Andorra	6	14.4	2	4.8	2	4.9	4	10.1	5	12.8
East	Armenia	98	7.3	116	8.6	160	11.8	162	11.9	221	16.2
East	Azerbaijan	365	8.2	410	9.0	356	7.7	329	7.1	375	7.9
East	Belarus	563	12.9	621	14.2	659	15.1	802	18.3	1 052	24.0
Centre	Bosnia and Herzegovina	1	0.1	23	1.3	23	1.3	2	0.1	20	1.2
East	Georgia	322	16.5	300	15.4	381	19.7	367	19.0	413	21.4
West	Israel	288	7.9	298	8.1	353	9.4	347	9.1	330	8.5
East	Kazakhstan	1 252	15.9	1 206	15.1	1 167	14.4	1 203	14.6	1 334	15.9
East	Kyrgyzstan	399	14.9	422	15.5	406	14.6	292	10.3	369	12.8
West	Monaco	0	0.0	0	0.0	0	0.0	0	0.0	1	5.5
Centre	Montenegro	15	4.9	8	2.6	12	3.9	11	3.6	17	5.5
Centre	North Macedonia	5	0.5	0	0.0	10	1.0	15	1.4	29	2.8
East	Republic of Moldova	341	17.4	377	19.2	375	19.1	382	19.5	452	23.1
East	Russian Federation	36 172	54.4	39 410	59.2	44 066	66.0	48 025	71.8	55 469	82.8
West	San Marino	6	39.7	6	39.1	2	12.9	0	0.0	3	18.8
Centre	Serbia	135	3.1	116	2.6	124	2.8	142	3.3	120	2.8
Centre	Serbia excluding Kosovo[1]	133	4.0	111	3.2	121	3.5	140	4.0	114	3.3
Centre	Kosovo[1]	2	0.2	5	0.6	3	0.3	2	0.2	6	0.7
West	Switzerland	444	11.5	424	10.9	462	11.7	421	10.5	385	9.5
East	Tajikistan	693	18.2	608	15.7	495	12.5	490	12.0	557	13.4
Centre	Turkey	350	1.0	531	1.5	819	2.2	1 072	2.9	1 497	3.9
East	Turkmenistan	0	0.0	0	0.0	0	0.0	–	–	–	–
East	Ukraine	9 521	45.0	9 472	45.0	9 400	44.8	10 011	47.8	8 991	43.1
East	Uzbekistan	2 062	14.5	–	–	–	–	–	–	–	–
	Total non-EU/EEA	**53 066**	**29.1**	**54 405**	**32.3**	**59 330**	**34.8**	**64 159**	**37.4**	**71 701**	**41.5**
WHO European Region											
West	West	22 472	11.4	22 318	11.3	23 675	11.8	23 564	11.4	23 669	11.4
Centre	Centre	2 202	2.4	2 846	3.1	3 357	3.6	3 780	4.0	4 192	4.4
East	East	52 313	39.2	53 498	44.8	58 006	48.4	62 591	52.1	69 744	57.8
	Total WHO European Region	**76 987**	**18.2**	**78 662**	**19.2**	**85 038**	**20.5**	**89 935**	**21.4**	**97 605**	**23.1**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

2015		2016		2017		2018		2019		Cumulative total[b]	Country, territory or area[a]
N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
											EU/EEA
283	6.7	244	5.7	256	5.9	170	3.9	190	4.4	7 827	Austria
701	12.7	649	11.7	601	10.8	603	10.7	–	–	20 073	Belgium
194	5.5	169	4.9	218	6.3	276	8.1	217	6.4	2 669	Bulgaria
111	5.4	104	5.1	101	5.0	88	4.4	97	4.9	1 541	Croatia
72	17.5	65	15.8	65	15.6	65	15.4	69	16.1	981	Cyprus
248	4.8	262	5.1	231	4.4	186	3.6	193	3.7	3 093	Czechia
205	7.3	191	6.7	192	6.7	170	5.9	146	5.1	5 876	Denmark
167	27.2	139	22.5	146	23.6	131	21.1	113	18.1	6 742	Estonia
131	4.9	121	4.5	101	3.7	104	3.8	112	4.1	3 043	Finland
3 554	11.0	3 590	11.1	3 517	10.9	3 257	10.1	3 136	9.7	60 406	France
2 888	7.2	2 658	6.6	2 502	6.1	2 229	5.5	2 421	5.9	56 345	Germany
688	13.1	538	10.3	538	10.3	584	11.2	468	9.0	13 501	Greece
196	4.2	171	3.6	148	3.2	195	4.2	208	4.4	3 115	Hungary
10	6.1	22	13.2	21	12.3	24	13.5	23	12.6	328	Iceland
372	16.1	396	16.9	375	15.8	399	16.7	396	16.3	5 890	Ireland
2 790	9.5	2 836	9.6	2 725	9.3	2 351	8.0	2 025	6.9	38 026	Italy
269	29.5	233	25.8	244	27.2	222	25.0	180	20.3	5 401	Latvia
0	0.0	2	10.7	0	0.0	0	0.0	0	0.0	41	Liechtenstein
115	8.5	165	12.4	220	16.8	118	9.1	110	8.5	2 630	Lithuania
60	21.3	62	21.4	48	16.2	41	13.6	37	12.0	1 348	Luxembourg
53	24.0	51	22.5	35	15.1	62	25.8	55	21.8	452	Malta
825	9.9	763	9.1	701	8.3	581	6.8	456	5.3	22 508	Netherlands
145	5.6	157	6.0	155	5.9	122	4.6	112	4.2	4 508	Norway
1 084	5.9	1 150	6.3	1 256	6.8	1 049	5.7	1 249	6.8	20 291	Poland
1 102	22.4	1 087	22.2	963	19.7	791	16.3	539	11.1	44 288	Portugal
647	6.7	564	5.8	593	6.2	546	5.7	523	5.5	15 186	Romania
76	2.9	81	3.1	66	2.5	94	3.5	91	3.4	944	Slovakia
45	4.4	58	5.7	38	3.7	36	3.5	28	2.7	816	Slovenia
3 609	15.8	3 540	15.5	3 228	14.1	2 147	11.2	2 126	9.8	45 197	Spain
276	5.7	269	5.5	273	5.4	306	6.0	288	5.6	9 032	Sweden
4 712	14.8	3 973	12.3	3 451	10.6	3 360	10.3	2 980	9.1	116 031	United Kingdom
25 628	**10.2**	**24 310**	**9.6**	**23 008**	**9.1**	**20 307**	**8.1**	**18 588**	**7.5**	**518 129**	**Total EU/EEA**
											Non-EU/EEA
67	4.6	104	7.1	69	4.7	76	5.2	74	5.0	948	Albania
3	7.8	3	7.9	3	7.9	8	21.1	–	–	78	Andorra
207	15.1	212	15.4	252	18.2	284	20.5	312	22.4	2 626	Armenia
495	10.3	355	7.3	359	7.3	437	8.8	474	9.5	5 847	Azerbaijan
1 395	31.8	1 490	33.9	1 540	35.0	1 499	34.1	1 354	30.8	17 671	Belarus
14	0.8	22	1.3	15	0.9	22	1.4	27	1.7	289	Bosnia and Herzegovina
545	28.4	553	28.8	492	25.7	506	26.5	508	26.7	6 048	Georgia
292	7.4	257	6.4	297	7.3	297	7.1	268	6.3	6 950	Israel
1 442	16.9	1 684	19.5	1 822	20.8	2 005	22.6	2 416	26.8	25 481	Kazakhstan
364	12.3	446	14.8	491	16.0	0	0.0	496	15.6	5 666	Kyrgyzstan
1	5.5	0	0.0	3	16.1	0	0.0	–	–	26	Monaco
17	5.5	32	10.3	25	8.1	21	6.8	24	7.7	266	Montenegro
24	2.3	28	2.7	44	4.2	45	4.3	–	–	221	North Macedonia
462	23.6	471	24.1	468	24.0	537	27.6	544	28.1	7 917	Republic of Moldova
62 118	92.5	53 689	79.8	53 209	78.9	52 720	78.1	49 177	72.7	529 594	Russian Federation
2	12.4	2	12.3	1	6.1	2	12.2	0	0.0	73	San Marino
177	4.1	164	3.8	175	4.1	174	4.0	196	3.8	3 425	Serbia
175	5.1	153	4.4	172	5.0	167	4.9	192	4.5	3 331	Serbia excluding Kosovo[1]
2	0.2	11	1.2	3	0.3	7	0.8	4	0.5	94	Kosovo[1]
408	9.9	413	10.0	343	8.2	332	7.9	326	7.7	23 587	Switzerland
679	15.9	621	14.2	735	16.4	878	19.1	772	16.4	7 700	Tajikistan
1 770	4.6	2 065	5.3	2 389	6.0	2 717	6.7	2 748	6.7	18 098	Turkey
–	–	–	–	–	–	–	–	–	–	1	Turkmenistan
7 519	32.7	8 374	42.5	9 312	47.4	9 543	48.8	9 982	51.3	175 285	Ukraine
–	–	–	–	–	–	–	–	–	–	16 234	Uzbekistan
78 001	**44.3**	**70 985**	**40.8**	**72 044**	**41.2**	**72 103**	**41.7**	**69 698**	**39.4**	**854 031**	**Total non-EU/EEA**
											WHO European Region
23 110	11.1	21 822	10.4	20 329	9.6	17 940	8.6	16 104	7.8	485 393	West
4 742	5.0	5 039	5.3	5 433	5.6	5 590	5.8	5 744	5.9	71 883	Centre
75 777	61.5	68 432	56.8	69 290	57.4	68 880	58.4	66 438	54.7	814 843	East
103 629	**24.3**	**95 293**	**22.4**	**95 052**	**22.2**	**92 410**	**21.9**	**88 286**	**20.8**	**1 372 119**	**Total WHO European Region**

Table 3. New HIV diagnoses in females and rates per 100 000 population, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	2010		2011		2012		2013		2014	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA											
West	Austria	67	1.6	74	1.7	73	1.7	46	1.1	63	1.4
West	Belgium	394	7.1	388	6.9	389	6.9	339	6.0	317	5.6
Centre	Bulgaria	31	0.8	38	1.0	34	0.9	39	1.0	46	1.2
Centre	Croatia	3	0.1	11	0.5	3	0.1	8	0.4	9	0.4
Centre	Cyprus	7	1.7	15	3.5	9	2.0	8	1.8	7	1.6
Centre	Czechia	21	0.4	14	0.3	27	0.5	24	0.4	23	0.4
West	Denmark	74	2.7	74	2.6	54	1.9	55	1.9	60	2.1
East	Estonia	146	20.5	140	19.7	106	15.0	125	17.8	109	15.6
West	Finland	54	2.0	60	2.2	45	1.6	55	2.0	43	1.6
West	France	1 884	5.6	1 826	5.4	1 832	5.4	1 815	5.4	1 841	5.4
West	Germany	424	1.0	431	1.0	472	1.1	578	1.4	662	1.6
West	Greece	78	1.4	141	2.5	178	3.1	89	1.6	101	1.8
Centre	Hungary	9	0.2	12	0.2	14	0.3	17	0.3	20	0.4
West	Iceland	7	4.4	11	6.9	6	3.8	3	1.9	2	1.2
West	Ireland	89	3.9	89	3.9	98	4.2	85	3.7	104	4.4
West	Italy	990	3.3	970	3.2	886	2.9	843	2.7	789	2.5
East	Latvia	104	9.0	103	9.1	121	10.9	137	12.5	111	10.2
–	Liechtenstein	2	11.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Lithuania	28	1.7	32	1.9	46	2.8	52	3.2	51	3.2
West	Luxembourg	19	7.5	15	5.8	18	6.8	14	5.2	32	11.7
West	Malta	2	1.0	4	1.9	7	3.3	6	2.8	4	1.9
West	Netherlands	203	2.4	181	2.2	187	2.2	157	1.9	147	1.7
West	Norway	85	3.5	79	3.2	76	3.1	75	3.0	68	2.7
Centre	Poland	156	0.8	159	0.8	159	0.8	150	0.8	188	1.0
West	Portugal	660	12.0	555	10.1	537	9.7	518	9.4	411	7.5
Centre	Romania	225	2.2	259	2.5	255	2.5	299	2.9	271	2.7
Centre	Slovakia	3	0.1	3	0.1	6	0.2	12	0.4	11	0.4
Centre	Slovenia	4	0.4	7	0.7	3	0.3	6	0.6	4	0.4
West	Spain	696	4.2	641	3.8	610	3.2	631	2.7	647	2.7
West	Sweden	170	3.6	169	3.6	175	3.7	163	3.4	198	4.1
West	United Kingdom	2 010	6.3	1 754	5.5	1 700	5.3	1 471	4.5	1 589	4.9
	Total EU/EEA	**8 645**	**3.4**	**8 255**	**3.3**	**8 126**	**3.2**	**7 820**	**3.0**	**7 928**	**3.0**
Non-EU/EEA											
Centre	Albania	15	1.0	23	1.6	23	1.6	38	2.7	18	1.3
West	Andorra	0	0.0	0	0.0	0	0.0	1	2.4	0	0.0
East	Armenia	51	3.3	67	4.4	70	4.6	77	5.0	118	7.6
East	Azerbaijan	94	2.1	138	3.0	161	3.5	185	3.9	229	4.8
East	Belarus	506	10.0	575	11.4	564	11.2	731	14.5	759	15.0
Centre	Bosnia and Herzegovina	0	0.0	4	0.2	2	0.1	0	0.0	3	0.2
East	Georgia	133	6.2	124	5.8	145	6.8	123	5.8	151	7.2
West	Israel	131	3.5	152	4.0	130	3.4	116	3.0	130	3.3
East	Kazakhstan	730	8.7	791	9.3	837	9.7	928	10.6	1 008	11.3
East	Kyrgyzstan	168	6.1	192	6.9	295	10.4	211	7.3	280	9.5
West	Monaco	0	0.0	0	0.0	1	5.3	0	0.0	0	0.0
Centre	Montenegro	0	0.0	1	0.3	1	0.3	0	0.0	3	0.9
Centre	North Macedonia	0	0.0	0	0.0	4	0.4	0	0.0	0	0.0
East	Republic of Moldova	362	17.1	344	16.2	382	18.1	324	15.3	379	17.9
East	Russian Federation	26 409	34.3	27 907	36.2	31 642	41.0	33 673	43.5	37 144	47.8
West	San Marino	0	0.0	2	12.2	3	18.1	1	6.0	0	0.0
Centre	Serbia	17	0.4	18	0.4	13	0.3	14	0.3	17	0.4
Centre	Serbia excluding Kosovo[1]	16	0.5	17	0.5	12	0.3	13	0.4	17	0.5
Centre	Kosovo[1]	1	0.1	1	0.1	1	0.1	1	0.1		0.0
West	Switzerland	160	4.0	132	3.3	150	3.7	151	3.7	124	3.0
East	Tajikistan	188	5.0	272	7.1	275	7.1	327	8.2	429	10.5
Centre	Turkey	139	0.4	166	0.4	249	0.7	241	0.6	341	0.9
East	Turkmenistan	0	0.0	0	0.0	0	0.0	–	–	–	–
East	Ukraine	6 915	28.0	7 697	31.3	7 301	29.8	7 722	31.7	6 683	27.6
East	Uzbekistan	1 733	12.1	–	–	–	–		–	–	–
	Total non-EU/EEA	**37 751**	**19.2**	**38 605**	**20.8**	**42 248**	**22.5**	**44 863**	**24.2**	**47 816**	**25.4**
WHO European Region											
West	West	8 197	4.0	7 748	3.7	7 627	3.6	7 212	3.3	7 332	3.4
Centre	Centre	630	0.7	730	0.8	802	0.8	856	0.9	961	1.0
East	East	37 567	25.1	38 382	28.3	41 945	30.8	44 615	32.7	47 451	34.7
	Total WHO European Region	**46 394**	**10.3**	**46 860**	**10.7**	**50 374**	**11.3**	**52 683**	**11.8**	**55 744**	**12.4**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

2015		2016		2017		2018		2019		Cumulative total[b]	Country, territory or area[a]
N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
											EU/EEA
41	0.9	47	1.1	46	1.0	29	0.6	35	0.8	2 361	Austria
314	5.5	258	4.5	284	4.9	270	4.7	–	–	11 125	Belgium
33	0.9	33	0.9	23	0.6	35	1.0	41	1.1	647	Bulgaria
6	0.3	5	0.2	5	0.2	6	0.3	5	0.2	193	Croatia
8	1.8	15	3.4	20	4.6	13	2.9	31	6.9	345	Cyprus
18	0.3	24	0.4	23	0.4	22	0.4	29	0.5	497	Czechia
72	2.5	53	1.8	50	1.7	49	1.7	44	1.5	2 123	Denmark
103	14.7	90	12.9	73	10.5	59	8.5	65	9.3	3 325	Estonia
43	1.5	59	2.1	57	2.0	49	1.8	37	1.3	1 170	Finland
1 719	5.0	1 810	5.3	1 808	5.2	1 758	5.1	1 719	5.0	32 834	France
751	1.8	716	1.7	648	1.5	630	1.5	669	1.6	14 014	Germany
90	1.6	111	2.0	109	2.0	139	2.5	135	2.4	2 663	Greece
26	0.5	21	0.4	18	0.4	8	0.2	16	0.3	385	Hungary
2	1.2	6	3.6	3	1.8	14	8.2	5	2.9	123	Iceland
110	4.7	115	4.8	121	5.0	104	4.3	134	5.4	2 796	Ireland
808	2.6	851	2.7	854	2.7	652	2.1	506	1.6	11 852	Italy
131	12.2	136	12.8	132	12.5	106	10.1	115	11.1	2 584	Latvia
0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	23	Liechtenstein
42	2.7	49	3.1	43	2.8	42	2.8	41	2.7	693	Lithuania
15	5.3	19	6.6	19	6.5	16	5.3	11	3.6	477	Luxembourg
8	3.6	11	4.9	10	4.4	11	4.7	15	6.2	122	Malta
149	1.7	125	1.5	115	1.3	96	1.1	93	1.1	5 396	Netherlands
76	3.0	63	2.4	58	2.2	69	2.6	60	2.3	2 146	Norway
175	0.9	142	0.7	160	0.8	151	0.8	212	1.1	4 664	Poland
393	7.2	421	7.7	373	6.9	318	5.9	239	4.4	17 137	Portugal
237	2.3	210	2.1	203	2.0	186	1.9	167	1.7	9 804	Romania
10	0.4	7	0.3	6	0.2	8	0.3	10	0.4	130	Slovakia
7	0.7	2	0.2	2	0.2	1	0.1	6	0.6	106	Slovenia
580	2.5	635	2.7	567	2.4	380	1.9	357	1.6	9 476	Spain
171	3.5	160	3.3	161	3.2	175	3.5	161	3.2	4 458	Sweden
1 461	4.4	1 236	3.7	1 177	3.5	1 161	3.5	1 128	3.3	48 290	United Kingdom
7 599	**2.9**	**7 430**	**2.8**	**7 168**	**2.7**	**6 557**	**2.5**	**6 086**	**2.4**	**191 959**	**Total EU/EEA**
											Non-EU/EEA
29	2.0	23	1.6	25	1.8	26	1.8	27	1.9	356	Albania
0	0.0	0	0.0	3	7.7	4	10.2	–	–	18	Andorra
89	5.7	92	5.9	103	6.6	136	8.7	134	8.6	1 159	Armenia
232	4.8	201	4.1	208	4.2	219	4.4	247	4.9	2 282	Azerbaijan
910	18.0	901	17.8	928	18.4	887	17.6	783	15.5	11 538	Belarus
1	0.1	2	0.1	0	0.0	2	0.1	3	0.2	46	Bosnia and Herzegovina
172	8.2	166	7.9	139	6.6	166	7.9	160	7.7	2 054	Georgia
121	3.0	109	2.7	117	2.8	153	3.6	140	3.3	3 430	Israel
1 033	11.4	1 214	13.2	1 192	12.8	1 210	12.8	1 257	13.2	13 958	Kazakhstan
289	9.6	318	10.4	349	11.2	333	10.5	354	10.9	3 467	Kyrgyzstan
0	0.0	0	0.0	0	0.0	0	0.0	–	–	14	Monaco
2	0.6	2	0.6	1	0.3	2	0.6	2	0.6	37	Montenegro
1	0.1	1	0.1	0	0.0	0	0.0	–	–	18	North Macedonia
356	16.8	361	17.1	367	17.4	368	17.5	378	18.0	5 762	Republic of Moldova
38 102	49.0	33 166	42.5	32 593	41.7	33 275	42.5	30 947	39.5	351 664	Russian Federation
0	0.0	0	0.0	0	0.0	1	5.8	0	0.0	20	San Marino
6	0.1	15	0.3	11	0.2	14	0.3	19	0.4	767	Serbia
5	0.1	15	0.4	11	0.3	13	0.4	18	0.4	735	Serbia excluding Kosovo[1]
1	0.1		0.0		0.0	1	0.1	1	0.1	32	Kosovo[1]
122	2.9	113	2.7	100	2.3	88	2.0	88	2.0	10 495	Switzerland
470	11.2	417	9.7	470	10.7	543	12.0	548	11.9	4 286	Tajikistan
337	0.8	373	0.9	455	1.1	531	1.3	481	1.1	4 367	Turkey
–	–	–	–		–	–	–	–	–	1	Turkmenistan
5 481	27.7	5 867	25.7	6 313	27.7	6 143	27.1	6 375	28.3	117 243	Ukraine
–	–	–	–	–	–	–	–	–	–	7 783	Uzbekistan
47 753	**25.6**	**43 341**	**22.8**	**43 374**	**23.0**	**44 101**	**23.0**	**41 943**	**21.7**	**540 765**	**Total non-EU/EEA**
											WHO European Region
7 046	3.2	6 918	3.2	6 680	3.0	6 166	2.9	5 576	2.6	182 540	West
896	0.9	875	0.9	952	1.0	1 005	1.0	1 049	1.0	22 362	Centre
47 410	35.7	42 978	31.5	42 910	31.4	43 487	31.7	41 404	30.2	527 799	East
55 352	**12.3**	**50 771**	**11.2**	**50 542**	**11.2**	**50 658**	**11.2**	**48 029**	**10.6**	**732 701**	**Total WHO European Region**

Table 4. New HIV diagnoses in men infected through sex with men, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	178	184	183	169	155	166	167	184	112	113	4 058
West	Belgium	438	435	441	467	400	409	378	336	327	–	8 349
Centre	Bulgaria	32	47	59	72	97	111	96	120	170	122	1 040
Centre	Croatia	61	47	65	70	79	99	95	97	82	82	1 179
Centre	Cyprus	22	27	31	35	39	51	47	47	43	38	586
Centre	Czechia	132	113	155	180	171	210	213	182	137	151	2 436
West	Denmark	112	113	82	116	132	126	121	123	110	99	3 372
East	Estonia	1	2	1	9	3	18	9	16	11	16	179
West	Finland	48	36	47	43	55	53	48	32	38	38	1 283
West	France	1 524	1 442	1 629	1 616	1 681	1 494	1 375	1 431	1 475	1 317	24 423
West	Germany	1 690	1 555	1 777	1 781	1 956	1 890	1 730	1 621	1 421	1 445	34 410
West	Greece	404	364	358	399	407	452	316	307	293	247	8 359
Centre	Hungary	126	106	149	163	175	134	118	110	145	167	2 331
West	Iceland	5	0	1	0	0	0	8	4	15	15	147
West	Ireland	134	145	174	156	182	251	277	264	287	131	3 312
West	Italy	1 258	1 284	1 590	1 518	1 556	1 458	1 404	1 376	1 176	1 069	17 464
East	Latvia	18	20	18	27	28	34	24	24	19	18	432
–	Liechtenstein	0	0	0	0	1	0	0	0	0	0	3
East	Lithuania	7	12	12	31	12	29	29	21	19	20	296
West	Luxembourg	28	34	35	37	31	24	28	18	26	22	708
West	Malta[c]	6	4	8	16	25	45	38	23	38	0	222
West	Netherlands	814	809	756	784	665	640	593	536	445	333	16 471
West	Norway	85	97	76	98	115	70	87	88	73	61	2 215
Centre	Poland	168	318	356	280	336	358	404	383	303	299	4 179
West	Portugal	487	539	567	556	479	591	576	502	390	296	11 627
Centre	Romania	71	109	95	100	139	133	148	165	162	177	1 607
Centre	Slovakia	21	32	28	58	53	55	60	52	60	50	674
Centre	Slovenia	28	36	36	28	35	36	49	26	29	20	602
West	Spain	1 938	1 885	2 056	2 271	2 488	2 340	2 341	2 132	1 431	1 403	27 259
West	Sweden	102	106	137	147	119	118	136	128	158	152	4 398
West	United Kingdom	2 739	2 840	3 055	3 039	3 212	3 172	2 538	2 201	2 069	1 697	74 455
	Total EU/EEA	**12 677**	**12 741**	**13 977**	**14 266**	**14 826**	**14 567**	**13 453**	**12 549**	**11 064**	**9 598**	**258 076**
Non-EU/EEA												
Centre	Albania	5	15	9	11	9	13	11	6	8	9	138
West	Andorra	3	1	1	3	4	2	3	2	4	–	38
East	Armenia	1	4	5	13	11	12	17	17	40	49	186
East	Azerbaijan	7	5	13	11	12	35	18	41	45	50	254
East	Belarus	14	29	31	41	53	58	71	72	103	82	601
Centre	Bosnia and Herzegovina	0	12	21	2	16	10	18	12	14	21	152
East	Georgia	27	25	44	69	67	163	131	131	152	94	958
West	Israel	145	159	157	172	151	141	129	150	131	113	2 707
East	Kazakhstan	20	26	20	37	47	80	121	144	163	205	936
East	Kyrgyzstan	0	0	3	14	17	20	35	45	46	37	219
West	Monaco	0	0	0	0	1	1	0	2	0	–	18
Centre	Montenegro	11	5	8	6	13	14	25	22	16	15	174
Centre	North Macedonia	5	1	7	13	26	21	18	34	37	–	173
East	Republic of Moldova	6	5	4	4	9	10	18	29	32	29	172
East	Russian Federation[c]	0	0	0	0	0	0	0	0	0	0	0
West	San Marino	0	4	0	0	0	0	0	0	0	0	21
Centre	Serbia	84	69	88	100	85	133	114	122	138	173	1 679
Centre	Serbia excluding Kosovo[1]	84	68	86	99	80	131	111	122	136	170	1 654
Centre	Kosovo[1]		1	2	1	5	2	3	–	2	3	25
West	Switzerland	245	211	228	198	220	208	233	170	160	152	5 615
East	Tajikistan	0	1	1	0	3	3	11	12	22	11	64
Centre	Turkey	32	59	142	187	281	350	403	494	540	539	3 213
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	90	143	152	262	277	368	435	490	506	468	3 508
East	Uzbekistan	0	–	–	–	–	–	–	–	–	–	29
	Total non-EU/EEA	**695**	**774**	**934**	**1 143**	**1 302**	**1 642**	**1 811**	**1 995**	**2 157**	**2 047**	**20 855**
WHO European Region												
West	West	12 383	12 247	13 358	13 586	14 034	13 651	12 526	11 630	10 179	8 703	250 931
Centre	Centre	798	996	1 249	1 305	1 554	1 728	1 819	1 872	1 884	1 863	20 163
East	East	191	272	304	518	539	830	919	1 042	1 158	1 079	7 834
	Total WHO European Region	**13 372**	**13 515**	**14 911**	**15 409**	**16 127**	**16 209**	**15 264**	**14 544**	**13 221**	**11 645**	**278 928**

[a] Country-specific comments are in Annex 5. Due to surveillance human resource constraints associated with the COVID-19 pandemic, some countries have higher than normal incomplete data on transmission route for 2019 and trends should be interpreted with care.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[c] Data on route of transmission were not reported by Malta or the Russian Federation for 2019.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 5. New HIV diagnoses in people infected through injecting drug use, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	48	55	54	27	30	33	18	17	13	19	2 093
West	Belgium	17	20	16	19	15	17	5	9	12	–	788
Centre	Bulgaria	56	63	40	33	48	29	22	33	34	37	631
Centre	Croatia	2	4	0	0	0	2	0	0	0	1	68
Centre	Cyprus	0	0	0	0	3	1	2	0	1	3	19
Centre	Czechia	5	9	6	6	10	6	7	5	8	6	141
West	Denmark	8	10	11	13	11	8	9	6	6	4	563
East	Estonia	118	110	86	81	67	55	30	15	24	20	4 214
West	Finland	8	8	7	3	7	7	6	10	6	8	418
West	France	129	123	131	111	104	78	61	60	68	65	2 142
West	Germany	83	84	88	108	131	142	134	116	146	159	4 360
West	Greece	28	319	524	270	120	95	101	93	119	72	2 033
Centre	Hungary	0	0	0	1	1	2	3	1	1	1	32
West	Iceland	9	12	3	1	1	0	9	3	2	2	69
West	Ireland	23	18	16	22	30	47	21	18	13	10	1 678
West	Italy	269	185	217	183	143	121	108	101	109	147	2 789
East	Latvia	86	90	94	77	77	92	62	79	73	44	3 470
–	Liechtenstein	0	1	0	0	0	0	0	0	0	0	5
East	Lithuania	108	95	68	65	38	46	86	140	55	48	1 905
West	Luxembourg	1	1	5	6	17	14	19	10	5	0	221
West	Malta[c]	0	0	0	3	0	0	1	0	0	0	10
West	Netherlands	7	9	8	8	2	3	1	4	2	2	807
West	Norway	11	10	11	8	7	8	8	7	6	8	648
Centre	Poland	47	72	49	47	50	51	38	30	21	19	6 398
West	Portugal	227	151	142	121	63	64	46	32	27	16	19 352
Centre	Romania	25	191	325	353	209	196	132	99	77	65	1 758
Centre	Slovakia	2	1	1	0	1	3	1	0	1	0	18
Centre	Slovenia	0	0	1	2	2	1	1	0	0	2	23
West	Spain	256	237	209	187	153	119	140	108	74	68	3 717
West	Sweden	23	15	22	13	14	15	26	20	23	21	1 311
West	United Kingdom	145	133	116	115	144	196	138	137	100	108	6 505
	Total EU/EEA	**1 741**	**2 026**	**2 250**	**1 883**	**1 498**	**1 451**	**1 235**	**1 153**	**1 026**	**955**	**68 186**
Non-EU/EEA												
Centre	Albania	0	0	1	0	1	0	0	0	0	0	5
West	Andorra	0	0	0	0	0	0	0	0	0	–	11
East	Armenia	51	42	47	34	43	37	35	39	28	38	733
East	Azerbaijan	277	319	218	204	183	183	160	99	105	100	3 291
East	Belarus	223	254	247	201	376	790	600	485	391	363	9 566
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	20
East	Georgia	211	188	224	172	194	187	205	150	96	114	3 065
West	Israel	40	41	78	71	44	39	25	32	35	18	1 310
East	Kazakhstan	1 100	923	793	730	779	826	900	901	920	1 203	18 808
East	Kyrgyzstan	347	355	255	188	183	172	200	204	136	107	3 968
West	Monaco	0	0	0	0	0	0	0	0	0	–	8
Centre	Montenegro	0	0	1	0	0	0	0	1	0	0	6
Centre	North Macedonia	0	0	0	0	0	0	0	0	0	–	2
East	Republic of Moldova	58	62	40	22	61	38	40	42	59	39	2 935
East	Russian Federation[c]	0	0	0	0	0	0	0	0	0	0	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	11
Centre	Serbia	6	9	5	11	5	4	1	4	2	2	983
Centre	Serbia excluding Kosovo[1]	6	9	5	11	5	4	1	4	2	2	981
Centre	Kosovo[1]	–	–	–	–	–	–	–	–	–	–	2
West	Switzerland	20	21	24	13	8	10	13	20	13	12	2 911
East	Tajikistan	590	407	257	213	227	247	201	247	193	134	3 696
Centre	Turkey	0	6	6	4	10	13	8	14	24	10	178
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	6 934	6 588	5 933	5 847	4 670	3 449	3 694	3 983	3 750	4 214	128 975
East	Uzbekistan	1 850	–	–	–	–	–	–	–	–	–	11 390
	Total non-EU/EEA	**11 707**	**9 215**	**8 129**	**7 710**	**6 784**	**5 995**	**6 082**	**6 221**	**5 752**	**6 354**	**191 872**
WHO European Region												
West	West	1 352	1 452	1 682	1 302	1 044	1 016	889	803	779	739	53 755
Centre	Centre	143	355	435	457	340	308	215	187	169	146	10 282
East	East	11 953	9 433	8 262	7 834	6 898	6 122	6 213	6 384	5 830	6 424	196 016
	Total WHO European Region	**13 448**	**11 240**	**10 379**	**9 593**	**8 282**	**7 446**	**7 317**	**7 374**	**6 778**	**7 309**	**260 053**

[a] Country-specific comments are in Annex 5. Due to surveillance human resource constraints associated with the COVID-19 pandemic, some countries have higher than normal incomplete data on transmission route for 2019 and trends should be interpreted with care.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[c] Data on route of transmission were not reported by Malta or the Russian Federation for 2019.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 6. New HIV diagnoses in people infected through heterosexual contact, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	110	108	112	90	97	102	83	80	58	70	3 200
West	Belgium	474	477	509	427	408	365	347	338	309	–	11 783
Centre	Bulgaria	71	89	58	70	94	86	84	85	104	98	1 563
Centre	Croatia	7	21	7	13	12	13	13	8	10	13	406
Centre	Cyprus	15	23	23	16	10	26	27	32	32	47	645
Centre	Czechia	38	26	41	45	45	46	53	59	56	56	875
West	Denmark	141	132	96	90	102	126	100	93	91	87	3 521
East	Estonia	173	146	170	188	162	144	116	89	67	78	1 713
West	Finland	94	88	71	67	70	79	83	70	55	44	1 691
West	France	2 223	2 075	2 199	2 185	2 189	1 783	1 635	1 668	1 897	1 538	37 379
West	Germany	500	539	519	624	817	972	881	789	746	763	16 633
West	Greece	123	151	159	125	142	129	141	153	171	169	3 690
Centre	Hungary	18	19	24	25	28	22	28	22	13	28	528
West	Iceland	10	6	0	0	0	0	9	2	15	6	132
West	Ireland	127	126	135	134	128	129	147	173	160	107	3 576
West	Italy	1 886	1 822	1 767	1 700	1 664	1 632	1 754	1 642	1 245	1 071	22 611
East	Latvia	131	144	112	125	132	152	143	135	111	107	2 266
–	Liechtenstein	3	0	0	0	0	0	1	0	0	0	13
East	Lithuania	29	39	53	59	74	65	70	70	67	59	819
West	Luxembourg	34	26	28	27	35	31	30	33	22	24	750
West	Malta[c]	10	13	15	10	9	15	21	17	14	0	196
West	Netherlands	365	309	311	264	248	268	223	198	159	154	8 348
West	Norway	157	155	142	123	140	138	120	115	101	100	3 521
Centre	Poland	108	93	102	90	109	112	110	103	69	83	1 938
West	Portugal	1 228	1 095	1 064	1 045	867	799	840	762	648	433	28 359
Centre	Romania	332	369	371	396	430	467	486	517	482	434	8 011
Centre	Slovakia	4	12	14	21	18	23	18	15	19	28	254
Centre	Slovenia	7	8	4	9	5	10	9	11	7	10	161
West	Spain	1 268	1 123	1 150	1 154	1 099	1 016	1 038	1 038	691	798	16 890
West	Sweden	222	260	227	218	229	211	202	212	213	204	6 074
West	United Kingdom	3 042	2 825	2 582	2 257	2 329	2 067	1 901	1 648	1 668	1 555	71 072
	Total EU/EEA	**12 950**	**12 319**	**12 065**	**11 597**	**11 692**	**11 028**	**10 713**	**10 177**	**9 300**	**8 164**	**258 618**
Non-EU/EEA												
Centre	Albania	34	60	66	101	62	77	115	87	80	91	1 081
West	Andorra	2	1	1	1	0	0	0	2	7	–	30
East	Armenia	88	131	166	179	275	238	245	287	340	353	2 726
East	Azerbaijan	131	191	244	275	378	440	338	370	469	531	3 915
East	Belarus	789	881	919	1 265	1 349	1 416	1 671	1 868	1 861	1 659	18 429
Centre	Bosnia and Herzegovina	1	14	4	0	7	4	6	2	10	9	142
East	Georgia	203	202	241	240	294	355	372	341	413	449	3 880
West	Israel	207	209	200	174	207	201	194	183	215	173	5 269
East	Kazakhstan	796	987	1 112	1 268	1 391	1 439	1 743	1 869	2 057	2 125	17 935
East	Kyrgyzstan	186	181	307	276	392	404	421	490	530	549	4 417
West	Monaco	0	0	1	0	0	0	0	1	0	–	13
Centre	Montenegro	3	4	4	2	4	3	9	3	5	4	91
Centre	North Macedonia	0	0	7	2	4	4	10	8	6	–	59
East	Republic of Moldova	607	612	661	337	616	578	547	561	617	683	8 694
East	Russian Federation[c]	0	0	0	0	0	0	0	0	0	0	0
West	San Marino	0	4	3	0	0	0	0	0	0	0	23
Centre	Serbia	38	42	28	22	34	28	35	31	34	23	906
Centre	Serbia excluding Kosovo[1]	35	37	27	20	33	28	30	29	29	21	841
Centre	Kosovo[1]	3	5	1	2	1		5	2	5	2	65
West	Switzerland	221	211	220	223	174	180	165	136	150	135	7 239
East	Tajikistan	272	402	375	474	615	735	691	791	1 042	952	6 845
Centre	Turkey	195	263	376	428	495	583	646	775	951	806	7 376
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	9 122	10 248	10 440	11 472	10 648	9 043	10 011	11 036	11 331	11 567	154 148
East	Uzbekistan	852										4 711
	Total non-EU/EEA	**13 747**	**14 643**	**15 375**	**16 739**	**16 945**	**15 728**	**17 219**	**18 841**	**20 118**	**20 109**	**247 929**
WHO European Region												
West	West	12 444	11 755	11 511	10 938	10 954	10 243	9 914	9 353	8 635	7 431	252 000
Centre	Centre	871	1 043	1 129	1 240	1 357	1 504	1 649	1 758	1 878	1 730	24 036
East	East	13 379	14 164	14 800	16 158	16 326	15 009	16 368	17 907	18 905	19 112	230 498
	Total WHO European Region	**26 694**	**26 962**	**27 440**	**28 336**	**28 637**	**26 756**	**27 931**	**29 018**	**29 418**	**28 273**	**506 534**

[a] Country-specific comments are in Annex 5. Due to surveillance human resource constraints associated with the COVID-19 pandemic, some countries have higher than normal incomplete data on transmission route for 2019 and trends should be interpreted with care.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[c] Data on route of transmission were not reported by Malta or the Russian Federation for 2019.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 7. New HIV diagnoses in people infected through mother-to-child transmission, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	1	2	0	0	1	0	1	1	1	0	62
West	Belgium	11	18	10	7	10	14	8	5	10	–	452
Centre	Bulgaria	4	2	0	5	1	1	0	3	3	1	28
Centre	Croatia	0	1	0	0	1	0	0	0	0	0	14
Centre	Cyprus	0	0	1	0	0	1	0	0	0	1	5
Centre	Czechia	0	0	2	0	1	0	2	0	0	0	9
West	Denmark	3	3	4	5	5	4	1	5	2	0	113
East	Estonia	3	3	4	2	5	1	0	0	0	0	54
West	Finland	1	1	2	2	2	3	2	0	2	4	37
West	France	41	35	50	37	53	47	28	24	37	41	637
West	Germany	20	14	22	23	26	27	23	18	20	13	473
West	Greece	3	4	0	0	1	0	3	1	2	4	67
Centre	Hungary	0	0	1	1	1	2	1	2	0	0	17
West	Iceland	0	0	0	0	0	0	0	0	2	1	4
West	Ireland	9	3	5	3	2	5	3	1	3	2	91
West	Italy	13	27	16	13	14	16	10	16	11	3	214
East	Latvia	4	2	7	10	4	3	6	3	5	2	82
–	Liechtenstein	0	0	0	0	0	0	0	0	0	0	1
East	Lithuania	0	1	0	1	2	0	1	1	0	0	7
West	Luxembourg	0	0	1	0	2	0	0	0	0	1	15
West	Malta[c]	0	0	0	0	0	0	2	0	2	0	4
West	Netherlands	27	16	19	10	14	11	7	4	4	2	368
West	Norway	1	4	7	1	3	2	2	2	6	2	93
Centre	Poland	11	7	4	4	3	8	1	3	2	5	224
West	Portugal	15	12	5	9	7	5	5	4	1	0	489
Centre	Romania	27	22	19	24	18	18	6	14	9	11	760
Centre	Slovakia	0	0	0	0	0	0	0	0	0	0	0
Centre	Slovenia	0	1	0	0	0	0	0	0	0	0	7
West	Spain	13	11	7	18	4	3	8	3	4	2	135
West	Sweden	13	22	14	7	7	15	10	14	12	12	273
West	United Kingdom	109	104	87	92	90	54	40	54	53	60	2 903
	Total EU/EEA	**329**	**315**	**287**	**274**	**277**	**240**	**170**	**178**	**191**	**167**	**7 638**
Non-EU/EEA												
Centre	Albania	0	3	3	6	3	1	1	1	2	1	36
West	Andorra	0	0	0	0	0	0	0	0	0	–	1
East	Armenia	3	2	3	5	7	4	1	5	6	3	54
East	Azerbaijan	11	9	14	10	18	16	10	10	9	4	132
East	Belarus	22	23	16	16	15	26	20	13	4	10	318
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	1
East	Georgia	13	6	9	4	5	6	4	3	6	3	108
West	Israel	7	8	7	9	9	4	4	6	7	3	265
East	Kazakhstan	21	18	30	36	22	25	24	34	24	26	396
East	Kyrgyzstan	19	20	33	10	14	25	17	16	24	21	252
West	Monaco	0	0	0	0	0	0	0	0	0	–	1
Centre	Montenegro	0	0	0	0	0	0	0	0	0	0	4
Centre	North Macedonia	0	0	0	0	0	0	0	0	0	–	2
East	Republic of Moldova	10	16	11	13	19	14	10	11	13	19	209
East	Russian Federation[c]	0	0	0	0	0	0	0	0	0	0	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	1
Centre	Serbia	–	1	1	4	1	1	2		1	2	53
Centre	Serbia excluding Kosovo[1]	0	1	0	4	1	0	2	0	0	2	48
Centre	Kosovo[1]	–	–	1	–	–	1	–	–	1	–	5
West	Switzerland	8	4	2	3	1	4	4	4	2	0	182
East	Tajikistan	13	26	38	49	59	55	54	60	53	47	477
Centre	Turkey	0	5	12	11	22	23	15	12	13	15	182
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	177	136	149	111	122	98	77	86	71	80	2 301
East	Uzbekistan	73	–	–	–	–	–	–	–	–	–	363
	Total non-EU/EEA	**377**	**277**	**328**	**287**	**317**	**302**	**243**	**261**	**235**	**234**	**5 338**
WHO European Region												
West	West	295	288	258	239	251	214	161	162	181	150	6 880
Centre	Centre	42	42	43	55	51	55	28	35	30	36	1 342
East	East	369	262	314	267	292	273	224	242	215	215	4 753
	Total WHO European Region	**706**	**592**	**615**	**561**	**594**	**542**	**413**	**439**	**426**	**401**	**12 975**

[a] Country-specific comments are in Annex 5. Due to surveillance human resource constraints associated with the COVID-19 pandemic, some countries have higher than normal incomplete data on transmission route for 2019 and trends should be interpreted with care.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[c] Data on route of transmission were not reported by Malta or the Russian Federation for 2019.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 8. HIV diagnoses in 2019, by country of report, transmission mode and sex, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Sex between men		Injecting drug users			Heterosexual			Mother-to-child transmission		
		Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]
EU/EEA												
West	Austria	113	113	7	12	19	26	44	70	0	0	0
West	Belgium	–	–	–	–	–	–	–	–	–	–	–
Centre	Bulgaria	122	122	8	29	37	33	65	98	0	1	1
Centre	Croatia	82	82	0	1	1	4	9	13	0	0	0
Centre	Cyprus	38	38	0	3	3	25	22	47	1	0	1
Centre	Czechia	151	151	1	5	6	25	31	56	0	0	0
West	Denmark	99	99	0	4	4	44	43	87	0	0	0
East	Estonia	16	16	7	13	20	37	41	78	0	0	0
West	Finland	38	38	0	8	8	19	25	44	3	1	4
West	France	1 260	1 317	9	56	65	882	650	1 538	21	20	41
West	Germany	1 443	1 445	19	140	159	531	231	763	6	7	13
West	Greece	247	247	9	63	72	98	71	169	3	1	4
Centre	Hungary	167	167	0	1	1	16	12	28	0	0	0
West	Iceland	15	15	0	2	2	3	3	6	1	0	1
West	Ireland	130	131	1	9	10	75	31	107	1	1	2
West	Italy	1 069	1 069	18	129	147	434	637	1 071	1	2	3
East	Latvia	18	18	6	38	44	57	50	107	1	1	2
–	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	20	20	9	39	48	28	31	59	0	0	0
West	Luxembourg	22	22	0	0	0	10	14	24	1	0	1
West	Malta	0	0	0	0	0	0	0	0	0	0	0
West	Netherlands	320	333	1	1	2	78	76	154	1	1	2
West	Norway	61	61	0	8	8	57	43	100	2	0	2
Centre	Poland	299	299	5	14	19	34	49	83	2	3	5
West	Portugal	296	296	3	13	16	221	212	433	0	0	0
Centre	Romania	177	177	7	58	65	152	282	434	5	6	11
Centre	Slovakia	50	50	0	0	0	7	21	28	0	0	0
Centre	Slovenia	20	20	1	1	2	5	5	10	0	0	0
West	Spain	1 403	1 403	17	51	68	318	480	798	0	2	2
West	Sweden	152	152	5	16	21	117	87	204	6	6	12
West	United Kingdom	1 697	1 697	16	92	108	818	733	1 555	33	27	60
	Total EU/EEA	**9 525**	**9 598**	**149**	**806**	**955**	**4 154**	**3 998**	**8 164**	**88**	**79**	**167**
Non-EU/EEA												
Centre	Albania	9	9	0	0	0	27	64	91	0	1	1
West	Andorra	–	0	–	–	0	–	–	0	–	–	0
East	Armenia	49	49	0	38	38	131	222	353	2	1	3
East	Azerbaijan	50	50	4	96	100	232	299	531	1	3	4
East	Belarus	82	82	73	290	363	702	957	1 659	4	6	10
Centre	Bosnia and Herzegovina	21	21	0	0	0	3	6	9	0	0	0
East	Georgia	94	94	1	113	114	154	295	449	2	1	3
West	Israel	113	113	5	13	18	94	79	173	1	2	3
East	Kazakhstan	205	205	176	1 027	1 203	1 029	1 096	2 125	19	7	26
East	Kyrgyzstan	37	37	2	105	107	291	258	549	6	15	21
West	Monaco	–	0	–	–	0	–	–	0	–	–	0
Centre	Montenegro	15	15	0	0	0	1	3	4	0	0	0
Centre	North Macedonia	–	0	–	–	0	–	–	0	–	–	0
East	Republic of Moldova	29	29	8	31	39	300	383	683	9	10	19
East	Russian Federation	0	0	0	0	0	0	0	0	0	0	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	0
Centre	Serbia	173	173	–	2	2	15	8	23	1	1	2
Centre	Serbia excluding Kosovo[1]	170	170	0	2	2	14	7	21	1	1	2
Centre	Kosovo[1]	3	3	–	–	0	1	1	2	–	–	0
West	Switzerland	151	152	3	9	12	62	73	135	0	0	0
East	Tajikistan	11	11	2	132	134	452	500	952	19	28	47
Centre	Turkey	539	539	1	9	10	146	660	806	6	9	15
East	Turkmenistan	–	0	–	–	0	–	–	0	–	–	0
East	Ukraine	468	468	702	3 512	4 214	5 625	5 942	11 567	37	43	80
East	Uzbekistan	–	0	–	–	0	–	–	0	–	–	0
	Total non-EU/EEA	**2 046**	**2 047**	**977**	**5 377**	**6 354**	**9 264**	**10 845**	**20 109**	**107**	**127**	**234**
WHO European Region												
West	West	8 629	8 703	113	626	739	3 887	3 532	7 431	80	70	150
Centre	Centre	1 863	1 863	23	123	146	493	1 237	1 730	15	21	36
East	East	1 079	1 079	990	5 434	6 424	9 038	10 074	19 112	100	115	215
	Total WHO European Region	**11 571**	**11 645**	**1 126**	**6 183**	**7 309**	**13 418**	**14 843**	**28 273**	**195**	**206**	**401**

[a] Country-specific comments are in Annex 5.

[b] Totals include transgender and persons with unknown gender and may, therefore, not equal the sum of the columns or may differ slightly from the totals presented for 2019 in tables 4–7.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Nosocomial			Haemophiliac/transfusion			Unknown			Total[b]	Country, territory or area[a]
Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]		
										EU/EEA
0	0	0	0	0	0	2	21	23	225	Austria
–	–	–	–	–	–	–	–	–	–	Belgium
0	0	0	0	0	0	0	0	0	258	Bulgaria
0	0	0	0	0	0	1	5	6	102	Croatia
1	0	1	1	1	2	3	5	8	100	Cyprus
0	1	1	0	1	1	3	4	7	222	Czechia
0	0	0	0	0	0	0	0	0	190	Denmark
0	0	0	0	0	0	21	43	64	178	Estonia
0	1	1	0	0	0	15	39	54	149	Finland
0	0	0	9	3	12	798	1 147	1 950	4 923	France
0	0	0	0	0	0	113	600	713	3 093	Germany
0	0	0	0	0	0	25	86	111	603	Greece
0	0	0	0	0	0	0	28	42	238	Hungary
0	0	0	0	0	0	1	3	4	28	Iceland
0	0	0	0	0	0	57	225	283	533	Ireland
0	0	0	1	0	1	52	188	240	2 531	Italy
0	0	0	0	0	0	51	73	124	295	Latvia
0	0	0	0	0	0	0	0	0	0	Liechtenstein
0	0	0	0	0	0	4	20	24	151	Lithuania
0	0	0	0	0	0	0	1	1	48	Luxembourg
0	0	0	0	0	0	15	55	80	80	Malta
1	4	5	0	0	0	12	54	67	563	Netherlands
1	0	1	0	0	0	0	0	0	172	Norway
1	1	2	0	0	0	170	883	1 060	1 468	Poland
0	0	0	3	1	4	12	17	29	778	Portugal
0	0	0	0	0	0	3	0	3	690	Romania
0	0	0	0	1	1	3	19	22	101	Slovakia
0	0	0	0	0	0	0	2	2	34	Slovenia
0	0	0	0	2	2	22	188	210	2 483	Spain
0	0	0	4	0	4	29	27	56	449	Sweden
3	7	10	16	9	25	242	415	661	4 116	United Kingdom
7	**14**	**21**	**34**	**18**	**52**	**1 654**	**4 148**	**5 844**	**24 801**	**Total EU/EEA**
										Non-EU/EEA
0	0	0	0	0	0	0	0	0	101	Albania
–	–	0	–	–	0	–	–	0	0	Andorra
1	0	1	0	0	0	0	2	2	446	Armenia
0	0	0	0	0	0	10	26	36	721	Azerbaijan
0	0	0	0	0	0	4	19	23	2 137	Belarus
0	0	0	0	0	0	0	0	0	30	Bosnia and Herzegovina
0	0	0	0	2	2	3	3	6	668	Georgia
0	0	0	0	0	0	40	61	101	408	Israel
0	0	0	0	0	0	33	81	114	3 673	Kazakhstan
2	6	8	0	0	0	53	75	128	850	Kyrgyzstan
–	–	0	–	–	0	–	–	0	0	Monaco
0	0	0	0	0	0	1	6	7	26	Montenegro
–	–	0	–	–	0	–	–	0	0	North Macedonia
0	0	0	0	0	0	61	91	152	922	Republic of Moldova
0	0	0	0	0	0	30 947	49 177	80 124	80 124	Russian Federation
0	0	0	0	0	0	0	0	0	0	San Marino
–	–	0	–	–	0	3	12	15	215	Serbia
0	0	0	0	0	0	3	12	15	210	Serbia excluding Kosovo[1]
–	–	0	–	–	0	–	–	0	5	Kosovo[1]
0	0	0	0	0	0	23	93	122	421	Switzerland
1	2	3	1	0	1	73	99	172	1 320	Tajikistan
0	0	0	1	1	2	327	1 530	1 857	3 229	Turkey
–	–	0	–	–	0	–	–	0	0	Turkmenistan
0	3	3	1	0	1	10	14	24	16 357	Ukraine
–	–	0	–	–	0	–	–	0	0	Uzbekistan
4	**11**	**15**	**3**	**3**	**6**	**31 588**	**51 289**	**82 883**	**111 648**	**Total non-EU/EEA**
										WHO European Region
5	12	17	33	15	48	1 458	3 220	4 705	21 793	West
2	2	4	2	4	6	514	2 494	3 029	6 814	Centre
4	11	15	2	2	4	31 270	49 723	80 993	107 842	East
11	**25**	**36**	**37**	**21**	**58**	**33 242**	**55 437**	**88 727**	**136 449**	**Total WHO European Region**

Table 9. HIV diagnoses in 2019, by country of report, age and sex, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	< 15 years			15–19 years			20–24 years			25–29 years		
		Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]
EU/EEA													
West	Austria	1	0	1	0	2	2	3	15	18	6	31	37
West	Belgium	–	–	–	–	–	–	–	–	–	–	–	–
Centre	Bulgaria	0	1	1	4	0	4	3	20	23	7	32	39
Centre	Croatia	0	0	0	0	3	3	1	10	11	0	11	11
Centre	Cyprus	1	0	1	1	0	1	2	6	8	7	10	17
Centre	Czechia	0	1	1	0	0	0	1	21	22	5	45	50
West	Denmark	0	0	0	0	1	1	1	7	8	8	29	37
East	Estonia	0	0	0	1	1	2	7	2	9	5	8	13
West	Finland	1	0	1	1	2	3	1	9	10	5	14	19
West	France	19	26	45	60	75	136	145	313	465	239	462	717
West	Germany	2	3	5	11	29	40	76	199	275	113	342	455
West	Greece	4	1	5	4	9	13	10	42	52	25	71	96
Centre	Hungary	0	0	0	1	3	4	0	28	28	3	50	53
West	Iceland	1	0	1	0	0	0	0	2	2	0	4	4
West	Ireland	1	1	2	2	6	8	6	24	30	27	98	126
West	Italy	1	2	3	12	9	21	38	135	173	61	273	334
East	Latvia	1	1	2	2	2	4	2	14	16	11	17	28
–	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	0	0	0	0	1	1	0	9	9	5	10	15
West	Luxembourg	1	0	1	0	0	0	0	1	1	1	5	6
West	Malta	0	0	0	0	2	2	3	2	5	3	12	15
West	Netherlands	4	3	7	1	5	6	10	44	55	13	70	90
West	Norway	1	0	1	2	1	3	2	5	7	9	18	27
Centre	Poland	3	6	9	3	17	20	14	135	150	23	233	257
West	Portugal	0	0	0	6	8	14	11	61	72	30	91	121
Centre	Romania	5	6	11	7	9	16	16	66	82	28	74	102
Centre	Slovakia	0	0	0	0	4	4	1	9	10	1	18	19
Centre	Slovenia	0	0	0	0	0	0	0	1	1	0	2	2
West	Spain	0	2	2	13	39	52	32	201	233	50	377	427
West	Sweden	6	5	11	5	8	13	4	10	14	16	46	62
West	United Kingdom	10	10	20	34	43	77	67	249	316	118	542	660
	Total EU/EEA	**62**	**68**	**130**	**170**	**279**	**450**	**456**	**1 640**	**2 105**	**819**	**2 995**	**3 839**
Non-EU/EEA													
Centre	Albania	0	1	1	0	3	3	0	8	8	5	13	18
West	Andorra	–	–	0	–	–	0	–	–	0	–	–	0
East	Armenia	3	1	4	1	3	4	8	22	30	18	51	69
East	Azerbaijan	4	4	8	2	1	3	29	30	59	33	93	126
East	Belarus	5	10	15	7	8	15	43	56	99	93	144	237
Centre	Bosnia and Herzegovina	0	0	0	0	1	1	0	4	4	0	8	8
East	Georgia	2	1	3	1	10	11	9	55	64	16	60	76
West	Israel	1	2	3	3	1	4	3	15	18	8	45	53
East	Kazakhstan	21	8	29	21	24	45	91	133	224	158	293	451
East	Kyrgyzstan	9	23	32	5	6	11	23	40	63	50	49	99
West	Monaco	–	–	0	–	–	0	–	–	0	–	–	0
Centre	Montenegro	0	0	0	0	0	0	1	1	2	0	5	5
Centre	North Macedonia	–	–	0	–	–	0	–	–	0	–	–	0
East	Republic of Moldova	9	9	18	10	8	18	31	29	60	50	59	109
East	Russian Federation	0	0	0	0	0	0	0	0	0	0	0	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	0	0
Centre	Serbia	1	1	2	1		1	1	20	21	2	30	32
Centre	Serbia excluding Kosovo[1]	1	1	2	1	0	1	1	19	20	2	30	32
Centre	Kosovo[1]	–	–	0	–	–	0	–	1	1	–	–	0
West	Switzerland	0	0	0	0	1	1	6	26	33	11	41	52
East	Tajikistan	74	110	184	17	7	24	43	45	88	61	91	152
Centre	Turkey	6	9	15	16	99	115	45	439	484	72	532	604
East	Turkmenistan	–	–	0	–	–	0	–	–	0	–	–	0
East	Ukraine	41	50	91	86	46	132	323	278	601	667	853	1 520
East	Uzbekistan	–	–	0	–	–	0	–	–	0	–	–	0
	Total non-EU/EEA	**176**	**229**	**405**	**170**	**218**	**388**	**656**	**1 201**	**1 858**	**1 244**	**2 367**	**3 611**
WHO European Region													
West	West	53	55	108	154	241	396	418	1 360	1 787	743	2 571	3 338
Centre	Centre	16	25	41	33	139	172	85	768	854	153	1 063	1 217
East	East	169	217	386	153	117	270	609	713	1 322	1 167	1 728	2 895
	Total WHO European Region	**238**	**297**	**535**	**340**	**497**	**838**	**1 112**	**2 841**	**3 963**	**2 063**	**5 362**	**7 450**

[a] Country-specific comments are in Annex 5.

[b] Totals include persons with unknown gender and may, therefore, not equal the sum of the columns.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

30–39 years			40–49 years			50+ years			Unknown age			Total[b]	Country, territory or area[a]
Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]		
													EU/EEA
14	49	63	4	48	52	7	45	52	0	0	0	225	Austria
–	–	–	–	–	–	–	–	–	–	–	–	–	Belgium
14	91	105	7	46	53	6	27	33	0	0	0	258	Bulgaria
1	35	36	1	30	31	2	8	10	0	0	0	102	Croatia
15	35	50	4	11	15	1	7	8	0	0	0	100	Cyprus
13	55	68	6	50	56	4	21	25	0	0	0	222	Czechia
13	35	48	11	36	47	11	38	49	0	0	0	190	Denmark
24	45	69	14	33	47	14	24	38	0	0	0	178	Estonia
9	40	49	6	22	28	14	25	39	0	0	0	149	Finland
568	824	1 413	362	657	1 034	326	779	1 113	0	0	0	4 923	France
219	729	951	127	536	663	118	575	693	3	8	11	3 093	Germany
43	148	191	32	105	137	17	92	109	0	0	0	603	Greece
4	62	67	4	40	44	4	23	27	0	2	15	238	Hungary
2	10	12	1	5	6	1	2	3	0	0	0	28	Iceland
47	142	190	35	77	113	16	48	64	0	0	0	533	Ireland
142	549	691	116	498	614	135	555	690	1	4	5	2 531	Italy
34	68	102	29	41	70	36	37	73	0	0	0	295	Latvia
0	0	0	0	0	0	0	0	0	0	0	0	0	Liechtenstein
14	47	61	11	23	34	11	20	31	0	0	0	151	Lithuania
6	10	16	2	11	13	1	9	10	0	1	1	48	Luxembourg
3	20	23	1	4	5	3	10	13	2	5	17	80	Malta
28	121	150	17	111	133	20	102	122	0	0	0	563	Netherlands
21	28	49	14	29	43	11	31	42	0	0	0	172	Norway
81	443	527	58	256	314	25	129	154	5	30	37	1 468	Poland
67	139	206	58	119	177	67	121	188	0	0	0	778	Portugal
53	188	241	34	112	146	24	68	92	0	0	0	690	Romania
5	30	35	1	24	25	2	6	8	0	0	0	101	Slovakia
5	12	17	1	9	10	0	4	4	0	0	0	34	Slovenia
114	691	805	92	482	574	56	334	390	0	0	0	2 483	Spain
59	91	150	48	62	110	23	66	89	0	0	0	449	Sweden
317	881	1 203	305	635	941	277	620	899	0	0	0	4 116	United Kingdom
1 935	**5 618**	**7 588**	**1 401**	**4 112**	**5 535**	**1 232**	**3 826**	**5 068**	**11**	**50**	**86**	**24 801**	**Total EU/EEA**
													Non-EU/EEA
7	18	25	5	18	23	10	13	23	0	0	0	101	Albania
–	–	0	–	–	0	–	–	0	–	–	0	0	Andorra
47	95	142	26	82	108	31	58	89	0	0	0	446	Armenia
85	163	248	53	97	150	41	86	127	0	0	0	721	Azerbaijan
262	551	813	221	379	600	152	206	358	0	0	0	2 137	Belarus
1	7	8	1	3	4	1	4	5	0	0	0	30	Bosnia and Herzegovina
47	140	187	41	138	179	44	104	148	0	0	0	668	Georgia
47	69	116	51	67	118	27	68	95	0	1	1	408	Israel
460	1 005	1 465	302	652	954	204	301	505	0	0	0	3 673	Kazakhstan
130	195	325	75	115	190	62	68	130	0	0	0	850	Kyrgyzstan
–	–	0	–	–	0	–	–	0	–	–	0	0	Monaco
1	5	6	0	10	10	0	3	3	0	0	0	26	Montenegro
–	–	0	–	–	0	–	–	0	–	–	0	0	North Macedonia
126	226	352	76	130	206	76	83	159	0	0	0	922	Republic of Moldova
0	0	0	0	0	0	0	0	0	30 947	49 177	80 124	80 124	Russian Federation
0	0	0	0	0	0	0	0	0	0	0	0	0	San Marino
7	72	79		39	39	7	34	41	–	–	0	215	Serbia
6	71	77	0	37	37	7	34	41	0	0	0	210	Serbia excluding Kosovo[1]
1	1	2	–	2	2	–	–	0	–	–	0	5	Kosovo[1]
29	85	117	21	76	98	21	97	119	0	0	1	421	Switzerland
194	239	433	97	194	291	62	86	148	0	0	0	1 320	Tajikistan
167	781	948	95	467	562	80	421	501	0	0	0	3 229	Turkey
–	–	0	–	–	0	–	–	0	–	–	0	0	Turkmenistan
2 206	4 167	6 373	1 800	3 174	4 974	1 252	1 414	2 666	0	0	0	16 357	Ukraine
		0	–	–	0	–	–	0	–	–	0	0	Uzbekistan
3 816	**7 818**	**11 637**	**2 864**	**5 641**	**8 506**	**2 070**	**3 046**	**5 117**	**30 947**	**49 178**	**80 126**	**111 648**	**Total non-EU/EEA**
													WHO European Region
1 748	4 661	6 443	1 303	3 580	4 906	1 151	3 617	4 779	6	19	36	21 793	West
374	1 834	2 212	217	1 115	1 332	166	768	934	5	32	52	6 814	Centre
3 629	6 941	10 570	2 745	5 058	7 803	1 985	2 487	4 472	30 947	49 177	80 124	107 842	East
5 751	**13 436**	**19 225**	**4 265**	**9 753**	**14 041**	**3 302**	**6 872**	**10 185**	**30 958**	**49 228**	**80 212**	**136 449**	**Total WHO European Region**

Table 10. HIV diagnoses, by country of report and region of origin, cases diagnosed in 2019, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Country of report		Western Europe		Central and eastern Europe		Sub-Saharan Africa	
		N	%	N	%	N	%	N	%
EU/EEA									
West	Austria	125	55.6	21	9.3	46	20.4	15	6.7
West	Belgium	–	–	–	–	–	–	–	–
Centre	Bulgaria	241	93.4	5	1.9	6	2.3	1	0.4
Centre	Croatia	94	92.2	0	0.0	4	3.9	1	1.0
Centre	Cyprus	35	35.0	10	10.0	11	11.0	42	42.0
Centre	Czechia	149	67.1	3	1.4	50	22.5	5	2.3
West	Denmark	83	43.7	24	12.6	23	12.1	22	11.6
East	Estonia	102	57.3	1	0.6	17	9.6	0	0.0
West	Finland	54	36.2	3	2.0	30	20.1	22	14.8
West	France	1 343	27.3	64	1.3	145	2.9	1 226	24.9
West	Germany	1 614	52.2	91	2.9	390	12.6	391	12.6
West	Greece	353	58.5	16	2.7	71	11.8	118	19.6
Centre	Hungary	–	–	–	–	–	–	–	–
West	Iceland	3	10.7	2	7.1	5	17.9	3	10.7
West	Ireland	56	10.5	13	2.4	20	3.8	110	20.6
West	Italy	1 884	74.4	12	0.5	141	5.6	214	8.5
East	Latvia	–	–	–	–	–	–	–	–
–	Liechtenstein	–	–	–	–	–	–	–	–
East	Lithuania	145	96.0	2	1.3	4	2.6	0	0.0
West	Luxembourg	14	29.2	10	20.8	3	6.3	15	31.3
West	Malta	80	100.0	0	0.0	0	0.0	0	0.0
West	Netherlands	294	52.2	15	2.7	44	7.8	62	11.0
West	Norway	53	30.8	3	1.7	21	12.2	47	27.3
Centre	Poland	637	43.4	0	0.0	23	1.6	0	0.0
West	Portugal	420	54.0	15	1.9	12	1.5	172	22.1
Centre	Romania	681	98.7	1	0.1	1	0.1	2	0.3
Centre	Slovakia	62	61.4	1	1.0	24	23.8	0	0.0
Centre	Slovenia	21	61.8	1	2.9	8	23.5	2	5.9
West	Spain	1 466	59.0	59	2.4	68	2.7	135	5.4
West	Sweden	90	20.0	33	7.3	63	14.0	158	35.2
West	United Kingdom	1 354	32.9	307	7.5	349	8.5	856	20.8
	Total EU/EEA	**11 453**	**47.2**	**712**	**2.9**	**1 579**	**6.5**	**3 619**	**14.9**
Non-EU/EEA									
Centre	Albania	101	100.0	0	0.0	0	0.0	0	0.0
West	Andorra	–	–	–	–	–	–	–	–
East	Armenia	446	100.0	0	0.0	0	0.0	0	0.0
East	Azerbaijan	686	95.1	1	0.1	34	4.7	0	0.0
East	Belarus	2 134	99.9	0	0.0	3	0.1	0	0.0
Centre	Bosnia and Herzegovina	26	86.7	0	0.0	1	3.3	0	0.0
East	Georgia	667	99.9	0	0.0	1	0.1	0	0.0
West	Israel	120	29.4	9	2.2	135	33.1	74	18.1
East	Kazakhstan	3 511	95.6	0	0.0	124	3.4	0	0.0
East	Kyrgyzstan	788	92.7	2	0.2	56	6.6	0	0.0
West	Monaco	–	–	–	–	–	–	–	–
Centre	Montenegro	25	96.2	0	0.0	1	3.8	0	0.0
Centre	North Macedonia	–	–	–	–	–	–	–	–
East	Republic of Moldova	922	100.0	0	0.0	0	0.0	0	0.0
East	Russian Federation	–	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–	–
Centre	Serbia	215	100.0	–	–	–	–	–	–
Centre	Serbia excluding Kosovo[1]	210	100.0	0	0.0	0	0.0	0	0.0
Centre	Kosovo[1]	5	100.0	–	–	–	–	–	–
West	Switzerland	161	38.2	67	15.9	17	4.0	36	8.6
East	Tajikistan	1 295	98.1	0	0.0	11	0.8	0	0.0
Centre	Turkey	2 716	84.1	43	1.3	183	5.7	69	2.1
East	Turkmenistan	–	–	–	–	–	–	–	–
East	Ukraine	16 357	100.0	0	0.0	0	0.0	0	0.0
East	Uzbekistan	–	–	–	–	–	–	–	–
	Total non-EU/EEA	**30 170**	**95.7**	**122**	**0.4**	**566**	**1.8**	**179**	**0.6**
WHO European Region									
West	West	9 567	43.9	764	3.5	1 583	7.3	3 676	16.9
Centre	Centre	5 003	76.1	64	1.0	312	4.7	122	1.9
East	East	27 053	98.7	6	0.0	250	0.9	0	0.0
	Total WHO European Region	**41 623**	**74.6**	**834**	**1.5**	**2 145**	**3.8**	**3 798**	**6.8**

[a] Country-specific comments are in Annex 5. Countries that do not report on the variables "country of birth", "country of nationality" or "region of origin" are excluded and therefore regional totals may not equal those presented in Table 1.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Latin America and Caribbean		South and south-east Asia		Other		Unknown		Total	Country, territory or area[a]
N	Rate	N	%	N	%	N	%		
									EU/EEA
3	1.3	9	4.0	5	2.2	1	0.4	225	Austria
–	–	–	–	–	–	–	–	–	Belgium
2	0.8	1	0.4	2	0.8	0	0.0	258	Bulgaria
0	0.0	0	0.0	1	1.0	2	2.0	102	Croatia
1	1.0	1	1.0	0	0.0	0	0.0	100	Cyprus
10	4.5	4	1.8	1	0.5	0	0.0	222	Czechia
13	6.8	13	6.8	12	6.3	0	0.0	190	Denmark
1	0.6	0	0.0	1	0.6	56	31.5	178	Estonia
6	4.0	13	8.7	8	5.4	13	8.7	149	Finland
298	6.1	73	1.5	158	3.2	1 616	32.8	4 923	France
123	4.0	120	3.9	72	2.3	292	9.4	3 093	Germany
4	0.7	17	2.8	16	2.7	8	1.3	603	Greece
–	–	–	–	–	–	–	–	–	Hungary
3	10.7	1	3.6	11	39.3	0	0.0	28	Iceland
57	10.7	14	2.6	4	0.8	259	48.6	533	Ireland
191	7.5	36	1.4	41	1.6	12	0.5	2 531	Italy
–	–	–	–	–	–	–	–	–	Latvia
–	–	–	–	–	–	–	–	–	Liechtenstein
0	0.0	0	0.0	0	0.0	0	0.0	151	Lithuania
3	6.3	1	2.1	1	2.1	1	2.1	48	Luxembourg
0	0.0	0	0.0	0	0.0	0	0.0	80	Malta
91	16.2	26	4.6	27	4.8	4	0.7	563	Netherlands
15	8.7	29	16.9	4	2.3	0	0.0	172	Norway
0	0.0	1	0.1	0	0.0	807	55.0	1 468	Poland
137	17.6	4	0.5	1	0.1	17	2.2	778	Portugal
0	0.0	0	0.0	1	0.1	4	0.6	690	Romania
2	2.0	1	1.0	0	0.0	11	10.9	101	Slovakia
1	2.9	0	0.0	0	0.0	1	2.9	34	Slovenia
531	21.4	20	0.8	49	2.0	155	6.2	2 483	Spain
39	8.7	35	7.8	22	4.9	9	2.0	449	Sweden
327	7.9	259	6.3	94	2.3	570	13.8	4 116	United Kingdom
1 858	**7.7**	**678**	**2.8**	**531**	**2.2**	**3 838**	**15.8**	**24 268**	**Total EU/EEA**
									Non-EU/EEA
0	0.0	0	0.0	0	0.0	0	0.0	101	Albania
–	–	–	–	–	–	–	–	–	Andorra
0	0.0	0	0.0	0	0.0	0	0.0	446	Armenia
0	0.0	0	0.0	0	0.0	0	0.0	721	Azerbaijan
0	0.0	0	0.0	0	0.0	0	0.0	2 137	Belarus
2	6.7	0	0.0	1	3.3	0	0.0	30	Bosnia and Herzegovina
0	0.0	0	0.0	0	0.0	0	0.0	668	Georgia
7	1.7	8	2.0	55	13.5	0	0.0	408	Israel
0	0.0	3	0.1	35	1.0	0	0.0	3 673	Kazakhstan
0	0.0	2	0.2	0	0.0	2	0.2	850	Kyrgyzstan
–	–	–	–	–	–	–	–	–	Monaco
0	0.0	0	0.0	0	0.0	0	0.0	26	Montenegro
–	–	–	–	–	–	–	–	–	North Macedonia
0	0.0	0	0.0	0	0.0	0	0.0	922	Republic of Moldova
–	–	–	–	–	–	–	–	–	Russian Federation
–	–	–	–	–	–	–	–	–	San Marino
–	–	–	–	–	–	–	–	215	Serbia
0	0.0	0	0.0	0	0.0	0	0.0	210	Serbia excluding Kosovo[1]
–	–	–	–	–	–	–	–	5	Kosovo[1]
32	7.6	22	5.2	9	2.1	77	18.3	421	Switzerland
0	0.0	0	0.0	14	1.1	0	0.0	1 320	Tajikistan
11	0.3	43	1.3	101	3.1	63	2.0	3 229	Turkey
–	–	–	–	–	–	–	–	–	Turkmenistan
0	0.0	0	0.0	0	0.0	0	0.0	16 357	Ukraine
–	–	–	–	–	–	–	–	–	Uzbekistan
52	**0.2**	**78**	**0.2**	**215**	**0.7**	**142**	**0.5**	**31 524**	**Total non-EU/EEA**
									WHO European Region
1 880	8.6	700	3.2	589	2.7	3 034	13.9	21 793	West
29	0.4	51	0.8	107	1.6	888	13.5	6 576	Centre
1	0.0	5	0.0	50	0.2	58	0.2	27 423	East
1 910	**3.4**	**756**	**1.4**	**746**	**1.3**	**3 980**	**7.1**	**55 792**	**Total WHO European Region**

Table 11. HIV diagnoses, by geographical area, transmission mode and country or subcontinent of origin, in cases reported in 2019

Transmission mode	Country of report		Western Europe		Central and eastern Europe		Sub-Saharan Africa	
	N	%	N	%	N	%	N	%
EU/EEA								
Sex between men	5 719	59.6	434	4.5	547	5.7	269	2.8
Injecting drug use	614	64.3	29	3.0	169	17.7	11	1.2
Heterosexual contact	3 397	41.6	168	2.1	512	6.3	2 831	34.7
Mother-to-child	32	19.2	7	4.2	7	4.2	94	56.3
Haemophiliac/transfusion recipient	5	9.6	2	3.8	7	13.5	23	44.2
Nosocomial infection	5	23.8	–	–	9	42.9	3	14.3
Other/undetermined	1 681	28.8	72	1.2	328	5.6	388	6.6
Total EU/EEA	**11 453**	**46.2**	**712**	**2.9**	**1 579**	**6.4**	**3 619**	**14.6**
Non-EU/EEA								
Sex between men	1 883	92.0	38	1.9	39	1.9	4	0.2
Injecting drug use	6 287	98.9	4	0.1	58	0.9		
Heterosexual contact	19 626	97.6	21	0.1	243	1.2	104	0.5
Mother-to-child	220	94.0	–	–	12	5.1	1	0.4
Haemophiliac/transfusion recipient	4	66.7	–	–	–	–	1	16.7
Nosocomial infection	12	80.0	–	–	3	20.0	–	–
Other/undetermined	2 138	77.5	59	2.1	211	7.6	69	2.5
Total non-EU/EEA	**30 170**	**95.7**	**122**	**0.4**	**566**	**1.8**	**179**	**0.6**
West								
Sex between men	5 180	59.5	455	5.2	526	6.0	270	3.1
Injecting drug use	444	60.1	30	4.1	175	23.7	11	1.5
Heterosexual contact	2 736	36.8	187	2.5	525	7.1	2 877	38.7
Mother-to-child	18	12.0	7	4.7	7	4.7	94	62.7
Haemophiliac/transfusion recipient	4	8.3	1	2.1	6	12.5	22	45.8
Nosocomial infection	4	23.5	–	–	6	35.3	3	17.6
Other/undetermined	1 181	25.1	84	1.8	338	7.2	399	8.5
Total West	**9 567**	**43.9**	**764**	**3.5**	**1 583**	**7.3**	**3 676**	**16.9**
Centre								
Sex between men	1 380	74.1	17	0.9	45	2.4	3	0.2
Injecting drug use	128	87.7	2	1.4	7	4.8	–	–
Heterosexual contact	1 482	85.7	2	0.1	78	4.5	58	3.4
Mother-to-child	24	66.7	–	–	9	25.0	1	2.8
Haemophiliac/transfusion recipient	1	16.7	1	16.7	1	16.7	2	33.3
Nosocomial infection	1	25.0	–	–	3	75.0	–	–
Other/undetermined	1 987	65.6	42	1.4	169	5.6	58	1.9
Total Centre	**5 003**	**73.4**	**64**	**0.9**	**312**	**4.6**	**122**	**1.8**
East								
Sex between men	1 042	96.6	–	–	15	1.4	–	–
Injecting drug use	6 329	98.5	1	0.0	45	0.7	–	–
Heterosexual contact	18 805	98.4	–	–	152	0.8	–	–
Mother-to-child	210	97.7	–	–	3	1.4	–	–
Haemophiliac/transfusion recipient	4	100.0	–	–	–	–	–	–
Nosocomial infection	12	80.0	–	–	3	20.0	–	–
Other/undetermined	651	74.9	5	0.6	32	3.7	–	–
Total East	**27 053**	**97.6**	**6**	**0.0**	**250**	**0.9**	**0**	**0.0**
Total WHO European Region	**83 246**	**73.9**	**1 668**	**1.5**	**4 290**	**3.8**	**7 596**	**6.7**

Latin America and Caribbean		South and south-east Asia		Other		Unknown		Total	Transmission mode
N	%	N	%	N	%	N	%		
									EU/EEA
1 284	13.4	325	3.4	257	2.7	763	7.9	9 598	Sex between men
9	0.9	19	2.0	13	1.4	91	9.5	955	Injecting drug use
433	5.3	224	2.7	161	2.0	438	5.4	8 164	Heterosexual contact
4	2.4	3	1.8	8	4.8	12	7.2	167	Mother-to-child
2	3.8	8	15.4	3	5.8	2	3.8	52	Haemophiliac/transfusion recipient
1	4.8	2	9.5	–	–	1	4.8	21	Nosocomial infection
125	2.1	97	1.7	89	1.5	3 064	52.4	5 844	Other/undetermined
1 858	**7.5**	**678**	**2.7**	**531**	**2.1**	**4 371**	**17.6**	**24 801**	**Total EU/EEA**
									Non-EU/EEA
22	1.1	13	0.6	32	1.6	16	0.8	2 047	Sex between men
1	0.0	–	–	4	0.1	–	–	6 354	Injecting drug use
13	0.1	26	0.1	52	0.3	24	0.1	20 109	Heterosexual contact
–	–	–	–	–	–	1	0.4	234	Mother-to-child
–	–	–	–	1	16.7	–	–	6	Haemophiliac/transfusion recipient
–	–			–	–	–	–	15	Nosocomial infection
16	0.6	39	1.4	126	4.6	101	3.7	2 759	Other/undetermined
52	**0.2**	**78**	**0.2**	**215**	**0.7**	**142**	**0.5**	**31 524**	**Total non-EU/EEA**
									West
1 290	14.8	326	3.7	262	3.0	394	4.5	8 703	Sex between men
10	1.4	19	2.6	13	1.8	37	5.0	739	Injecting drug use
440	5.9	238	3.2	170	2.3	258	3.5	7 431	Heterosexual contact
4	2.7	3	2.0	8	5.3	9	6.0	150	Mother-to-child
2	4.2	8	16.7	3	6.3	2	4.2	48	Haemophiliac/transfusion recipient
1	5.9	2	11.8	–	–	1	5.9	17	Nosocomial infection
133	2.8	104	2.2	133	2.8	2 333	49.6	4 705	Other/undetermined
1 880	**8.6**	**700**	**3.2**	**589**	**2.7**	**3 034**	**13.9**	**21 793**	**Total West**
									Centre
16	0.9	12	0.6	23	1.2	367	19.7	1 863	Sex between men
–	–	–	–	–	–	9	6.2	146	Injecting drug use
5	0.3	8	0.5	12	0.7	85	4.9	1 730	Heterosexual contact
–	–	–	–			2	5.6	36	Mother-to-child
–	–	–	–	1	16.7	–	–	6	Haemophiliac/transfusion recipient
–	–	–	–	–	–	–	–	4	Nosocomial infection
8	0.3	31	1.0	71	2.3	663	21.9	3 029	Other/undetermined
29	**0.4**	**51**	**0.7**	**107**	**1.6**	**1 126**	**16.5**	**6 814**	**Total Centre**
									East
–	–	–	–	4	0.4	18	1.7	1 079	Sex between men
–	–	–	–	4	0.1	45	0.7	6 424	Injecting drug use
1	0.0	4	0.0	31	0.2	119	0.6	19 112	Heterosexual contact
–	–	–	–	–	–	2	0.9	215	Mother-to-child
–	–	–	–	–	–	–	–	4	Haemophiliac/transfusion recipient
–	–	–	–	–	–	–	–	15	Nosocomial infection
		1	0.1	11	1.3	169	19.4	869	Other/undetermined
1	**0.0**	**5**	**0.0**	**50**	**0.2**	**353**	**1.3**	**27 718**	**Total East**
3 820	**3.4**	**1 512**	**1.3**	**1 492**	**1.3**	**9 026**	**8.0**	**112 650**	**Total WHO European Region**

Table 12. New HIV diagnoses, by country of report and probable region of infection, in 2019, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Country of report		Western Europe		Central and eastern Europe		Sub-Saharan Africa	
		N	%	N	%	N	%	N	%
EU/EEA									
West	Austria	11	4.9	0	0.0	0	0.0	2	0.9
West	Belgium	–	–	–	–	–	–	–	–
Centre	Bulgaria	–	–	–	–	–	–	–	–
Centre	Croatia	–	–	–	–	–	–	–	–
Centre	Cyprus	26	26.0	14	14.0	6	6.0	40	40.0
Centre	Czechia	38	17.1	7	3.2	15	6.8	7	3.2
West	Denmark	72	37.9	22	11.6	17	8.9	25	13.2
East	Estonia	109	61.2	2	1.1	8	4.5	0	0.0
West	Finland	26	17.4	12	8.1	30	20.1	20	13.4
West	France	1 094	22.2	0	0.0	0	0.0	0	0.0
West	Germany	1 615	52.2	57	1.8	194	6.3	275	8.9
West	Greece	–	–	–	–	–	–	–	–
Centre	Hungary	–	–	–	–	–	–	–	–
West	Iceland	3	10.7	1	3.6	4	14.3	4	14.3
West	Ireland	57	10.7	15	2.8	10	1.9	45	8.4
West	Italy	–	–	–	–	–	–	–	–
East	Latvia	140	47.5	3	1.0	3	1.0	0	0.0
–	Liechtenstein	–	–	–	–	–	–	–	–
East	Lithuania	0	0.0	2	1.3	4	2.6	0	0.0
West	Luxembourg	20	41.7	3	6.3	0	0.0	0	0.0
West	Malta	–	–	–	–	–	–	–	–
West	Netherlands	298	52.9	8	1.4	17	3.0	28	5.0
West	Norway	28	0.0	13	7.6	20	11.6	46	26.7
Centre	Poland	–	–	–	–	–	–	–	–
West	Portugal	413	53.1	11	1.4	3	0.4	100	12.9
Centre	Romania	681	98.7	1	0.1	1	0.1	2	0.3
Centre	Slovakia	0	0.0	5	5.0	17	16.8	0	0.0
Centre	Slovenia	17	50.0	0	0.0	6	17.6	2	5.9
West	Spain	–	–	–	–	–	–	–	–
West	Sweden	78	17.4	38	8.5	57	12.7	147	32.7
West	United Kingdom	1 554	37.8	249	6.0	187	4.5	607	14.7
	Total EU/EEA	**6 280**	**36.9**	**463**	**2.7**	**599**	**3.5**	**1 350**	**7.9**
Non-EU/EEA									
Centre	Albania	101	100.0	0	0.0	0	0.0	0	0.0
West	Andorra	–	–	–	–	–	–	–	–
East	Armenia	206	46.2	0	0.0	227	50.9	0	0.0
East	Azerbaijan	436	60.5	1	0.1	210	29.1	0	0.0
East	Belarus	2 137	100.0	0	0.0	0	0.0	0	0.0
Centre	Bosnia and Herzegovina	18	60.0	3	10.0	3	10.0	1	3.3
East	Georgia	348	52.1	17	2.5	122	18.3	1	0.1
West	Israel	191	46.8	5	1.2	87	21.3	51	12.5
East	Kazakhstan	3 511	95.6	0	0.0	124	3.4	0	0.0
East	Kyrgyzstan	788	92.7	0	0.0	0	0.0	0	0.0
West	Monaco	–	–	–	–	–	–	–	–
Centre	Montenegro	–	–	–	–	–	–	–	–
Centre	North Macedonia	–	–	–	–	–	–	–	–
East	Republic of Moldova	922	100.0	0	0.0	0	0.0	0	0.0
East	Russian Federation	–	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–	–
Centre	Serbia	–	–	–	–	–	–	–	–
Centre	Serbia excluding Kosovo[1]	–	–	–	–	–	–	–	–
Centre	Kosovo[1]	–	–	–	–	–	–	–	–
West	Switzerland	128	30.4	24	5.7	9	2.1	31	7.4
East	Tajikistan	–	–	–	–	–	–	–	–
Centre	Turkey	–	–	–	–	–	–	–	–
East	Turkmenistan	–	–	–	–	–	–	–	–
East	Ukraine	–	–	–	–	–	–	–	–
East	Uzbekistan	–	–	–	–	–	–	–	–
	Total non-EU/EEA	**8 786**	**84.7**	**50**	**0.5**	**782**	**7.5**	**84**	**0.8**
WHO European Region									
West	West	5 588	34.7	458	2.8	635	3.9	1 381	8.6
Centre	Centre	881	68.9	30	2.3	48	3.8	52	4.1
East	East	8 597	85.6	25	0.2	698	7.0	1	0.0
	Total WHO European Region	**15 066**	**55.0**	**513**	**1.9**	**1 381**	**5.0**	**1 434**	**5.2**

[a] Country-specific comments are in Annex 5. Countries that do not report on the variables "country of birth", "country of nationality" or "region of origin" are excluded and therefore regional totals may not equal those presented in Table 1.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Latin America and Caribbean		South and south-east Asia		Other		Unknown		Total	Country, territory or area[a]
N	Rate	N	%	N	%	N	%		
									EU/EEA
2	0.9	2	0.9	0	0.0	208	92.4	225	Austria
–	–	–	–	–	–	–	–	–	Belgium
–	–	–	–	–	–	–	–	–	Bulgaria
–	–	–	–	–	–	–	–	–	Croatia
1	1.0	1	1.0	0	0.0	12	12.0	100	Cyprus
4	1.8	5	2.3	2	0.9	144	64.9	222	Czechia
9	4.7	21	11.1	8	4.2	16	8.4	190	Denmark
1	0.6	0	0.0	1	0.6	57	32.0	178	Estonia
2	1.3	20	13.4	6	4.0	33	22.1	149	Finland
0	0.0	0	0.0	0	0.0	3 829	77.8	4 923	France
60	1.9	85	2.7	37	1.2	770	24.9	3 093	Germany
–	–	–	–	–	–	–	–	–	Greece
–	–	–	–	–	–	–	–	–	Hungary
3	10.7	0	0.0	0	0.0	13	46.4	28	Iceland
30	5.6	9	1.7	5	0.9	362	67.9	533	Ireland
–	–	–	–	–	–	–	–	–	Italy
0	0.0	0	0.0	0	0.0	149	50.5	295	Latvia
–	–	–	–	–	–	–	–	–	Liechtenstein
0	0.0	0	0.0	0	0.0	145	96.0	151	Lithuania
0	0.0	0	0.0	0	0.0	25	52.1	48	Luxembourg
–	–	–	–	–	–	–	–	–	Malta
17	3.0	24	4.3	10	1.8	161	28.6	563	Netherlands
16	9.3	39	22.7	6	3.5	4	18.6	172	Norway
–	–	–	–	–	–	–	–	–	Poland
50	6.4	2	0.3	2	0.3	197	25.3	778	Portugal
0	0.0	0	0.0	1	0.1	4	0.6	690	Romania
0	0.0	1	1.0	0	0.0	78	77.2	101	Slovakia
2	5.9	0	0.0	0	0.0	7	20.6	34	Slovenia
–	–	–	–	–	–	–	–	–	Spain
34	7.6	52	11.6	19	4.2	24	5.3	449	Sweden
172	4.2	235	5.7	114	2.8	998	24.2	4 116	United Kingdom
403	**2.4**	**496**	**2.9**	**211**	**1.2**	**7 236**	**42.5**	**17 038**	**Total EU/EEA**
									Non-EU/EEA
0	0.0	0	0.0	0	0.0	0	0.0	101	Albania
–	–	–	–	–	–	–	–	–	Andorra
0	0.0	0	0.0	2	0.4	11	2.5	446	Armenia
0	0.0	0	0.0	1	0.1	73	10.1	721	Azerbaijan
0	0.0	0	0.0	0	0.0	0	0.0	2 137	Belarus
2	6.7	0	0.0	1	3.3	2	6.7	30	Bosnia and Herzegovina
0	0.0	3	0.4	5	0.7	172	25.7	668	Georgia
4	1.0	7	1.7	6	1.5	57	14.0	408	Israel
0	0.0	3	0.1	0	0.0	35	1.0	3 673	Kazakhstan
0	0.0	0	0.0	0	0.0	62	7.3	850	Kyrgyzstan
–	–	–	–	–	–	–	–	–	Monaco
–	–	–	–	–	–	–	–	–	Montenegro
–	–	–	–	–	–	–	–	–	North Macedonia
0	0.0	0	0.0	0	0.0	0	0.0	922	Republic of Moldova
–	–	–	–	–	–	–	–	–	Russian Federation
–	–	–	–	–	–	–	–	–	San Marino
–	–	–	–	–	–	–	–	–	Serbia
–	–	–	–	–	–	–	–	–	Serbia excluding Kosovo[1]
–	–	–	–	–	–	–	–	–	Kosovo[1]
18	4.3	20	4.8	7	1.7	184	43.7	421	Switzerland
–	–	–	–	–	–	–	–	–	Tajikistan
–	–	–	–	–	–	–	–	–	Turkey
–	–	–	–	–	–	–	–	–	Turkmenistan
–	–	–	–	–	–	–	–	–	Ukraine
–	–	–	–	–	–	–	–	–	Uzbekistan
24	**0.2**	**33**	**0.3**	**22**	**0.2**	**596**	**5.7**	**10 377**	**Total non-EU/EEA**
									WHO European Region
417	2.6	516	3.2	220	1.4	6 881	42.8	16 096	West
9	0.7	7	0.5	4	0.3	247	19.3	1 278	Centre
1	0.0	6	0.1	9	0.1	704	7.0	10 041	East
427	**1.6**	**529**	**1.9**	**233**	**0.8**	**7 832**	**28.6**	**27 415**	**Total WHO European Region**

Table 13. Percentage of new HIV diagnoses (2019) among persons › 14 years reported with information about CD4 cell count, by CD4 cell count level (‹ 200 and ‹ 350 cells per mm³ blood) and by transmission mode in cases with CD4 ‹ 350, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Number of cases with CD4 cell count	Completeness (%) CD4[b]	CD4 ‹ 200 (%)		CD4 ‹ 350 (%)		CD4 ‹ 350 mm³ (%)		
				N	%	N	%	Heterosexual[b]	Injecting drug user[b]	Sex between men[b]
EU/EEA										
West	Austria	221	98.7	66	29.9	110	49.8	65.2	26.3	42.0
West	Belgium	–	–	–	–	–	–	–	–	–
Centre	Bulgaria	230	89.5	90	39.1	142	61.7	69.8	71.4	53.4
Centre	Croatia	4	3.9	1	25.0	2	50.0	–	–	–
Centre	Cyprus	93	93.9	84	90.3	85	91.4	91.3	–	91.4
Centre	Czechia	210	95.0	51	24.3	84	40.0	55.4	–	31.8
West	Denmark[c]	134	92.4	42	31.3	80	59.7	68.3	–	54.2
East	Estonia	47	26.4	12	25.5	26	55.3	60.0	50.0	–
West	Finland	115	77.7	37	32.2	57	49.6	56.1	62.5	41.7
West	France	2 555	52.4	679	26.6	1 290	50.5	56.0	41.9	41.2
West	Germany	894	29.1	320	35.8	499	55.8	62.1	40.0	50.1
West	Greece	424	70.9	144	34.0	233	55.0	63.5	52.4	46.4
Centre	Hungary	–	–	–	–	–	–	–	–	–
West	Iceland	20	74.1	4	20.0	4	20.0	–	–	–
West	Ireland[c]	72	16.9	14	19.4	30	41.7	43.3	–	37.0
West	Italy	2 221	88.0	883	39.8	1 306	58.8	64.6	60.4	50.9
East	Latvia	46	15.7	24	52.2	32	69.6	73.1	40.0	83.3
–	Liechtenstein	–	–	–	–	–	–	–	–	–
East	Lithuania	106	70.2	32	30.2	49	46.2	64.2	25.0	26.3
West	Luxembourg	33	71.7	3	9.1	12	36.4	31.3		41.2
West	Malta	–	–	–	–	–	–	–	–	–
West	Netherlands	513	92.3	139	27.1	241	47.0	57.0	–	37.7
West	Norway	–	–	–	–	–	–	–	–	–
Centre	Poland	–	–	–	–	–	–	–	–	–
West	Portugal	608	78.1	178	29.3	291	47.9	56.5	41.7	34.9
Centre	Romania	662	97.5	263	39.7	416	62.8	67.5	69.8	49.7
Centre	Slovakia	36	35.6	8	22.2	10	27.8	50.0	–	12.5
Centre	Slovenia	29	85.3	10	34.5	15	51.7	66.7	–	41.2
West	Spain	2 172	87.5	555	25.6	1 005	46.3	53.2	60.7	41.6
West	Sweden	356	81.3	85	23.9	151	42.4	51.4	42.9	29.4
West	United Kingdom	3 478	84.9	786	22.6	1 428	41.1	48.3	39.1	33.3
	Total EU/EEA	**15 279**	**67.7**	**4 510**	**29.5**	**7 598**	**49.7**	**57.0**	**51.5**	**41.6**
Non-EU/EEA										
Centre	Albania	40	40.0	22	55.0	30	75.0	78.9	–	–
West	Andorra	–	–	–	–	–	–	–	–	–
East	Armenia	395	89.4	144	36.5	231	58.5	61.4	54.8	39.5
East	Azerbaijan	563	79.0	168	29.8	277	49.2	49.7	60.0	30.2
East	Belarus	1 817	85.6	426	23.4	795	43.8	44.1	43.1	36.3
Centre	Bosnia and Herzegovina	28	93.3	10	35.7	15	53.6	55.6		52.6
East	Georgia	595	89.5	200	33.6	338	56.8	57.8	67.7	42.4
West	Israel	230	56.9	63	27.4	109	47.4	55.5	58.3	34.8
East	Kazakhstan	2 740	75.2	587	21.4	1 286	46.9	52.0	37.8	40.7
East	Kyrgyzstan	564	68.9	166	29.4	306	54.3	53.8	65.7	35.5
West	Monaco	–	–	–	–	–	–	–	–	–
Centre	Montenegro	22	84.6	8	36.4	14	63.6			53.8
Centre	North Macedonia	–	–	–	–	–	–	–	–	–
East	Republic of Moldova	736	81.4	220	29.9	384	52.2	53.4	44.7	34.5
East	Russian Federation	–	–	–	–	–	–	–	–	–
West	San Marino	–	–	–	–	–	–	–	–	–
Centre	Serbia	191	89.7	74	38.7	115	60.2	77.8	–	55.7
Centre	Serbia excluding Kosovo[1]	188	90.4	73	38.8	113	60.1	76.5	–	55.8
Centre	Kosovo[1]	3	60.0	1	33.3	2	66.7	–	–	–
West	Switzerland	275	65.5	89	32.4	148	53.8	54.8	90.0	43.8
East	Tajikistan	591	52.0	194	32.8	340	57.5	56.7	67.2	60.0
Centre	Turkey	489	15.2	87	17.8	209	42.7	49.4	–	38.3
East	Turkmenistan	–	–	–	–	–	–	–	–	–
East	Ukraine	14 941	91.9	5 251	35.1	8 817	59.0	61.1	54.4	48.1
East	Uzbekistan	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	**24 217**	**77.8**	**7 709**	**31.8**	**13 414**	**55.4**	**57.6**	**51.8**	**43.9**
WHO European Region										
West	West	14 321	67.3	4 087	28.5	6 994	48.8	55.5	49.4	41.1
Centre	Centre	2 034	40.1	708	34.8	1 137	55.9	64.9	72.5	47.3
East	East	23 141	84.7	7 424	32.1	12 881	55.7	57.7	51.5	43.2
	Total WHO European Region	**39 496**	**73.6**	**12 219**	**30.9**	**21 012**	**53.2**	**57.5**	**51.7**	**42.0**

[a] Country-specific comments are in Annex 5.

[b] There is some variation by country for CD4 cell count completeness by transmission group and numbers of cases by transmission group (sex between men, heterosexual, injecting drug user) and therefore percentages based on five or fewer cases are censored.

[c] People who were previously diagnosed HIV positive abroad are excluded in numbers reported for Denmark and Ireland and the data presented in the table are therefore not comparable with other countries.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 14. AIDS diagnoses and rates per 100 000 population, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of start of reporting	2010		2011		2012		2013		2014	
			N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA												
West	Austria	1982	82	1.0	79	0.9	101	1.2	69	0.8	83	1.0
West	Belgium	1983	121	1.1	99	0.9	107	1.0	100	0.9	120	1.1
Centre	Bulgaria	1987	32	0.4	40	0.5	65	0.9	71	1.0	64	0.9
Centre	Croatia	1986	1	0.0	26	0.6	28	0.7	17	0.4	23	0.5
Centre	Cyprus	1986	11	1.3	12	1.4	11	1.3	9	1.0	11	1.3
Centre	Czechia	1986	28	0.3	29	0.3	36	0.3	33	0.3	32	0.3
West	Denmark	1980	44	0.8	59	1.1	41	0.7	38	0.7	30	0.5
East	Estonia	1992	26	2.0	38	2.9	36	2.7	26	2.0	18	1.4
West	Finland	1983	31	0.6	24	0.4	19	0.4	20	0.4	20	0.4
West	France	1982	990	1.5	869	1.3	834	1.3	721	1.1	652	1.0
West	Germany	1981	527	0.6	518	0.6	511	0.6	441	0.5	393	0.5
West	Greece	1981	103	0.9	102	0.9	123	1.1	140	1.3	128	1.2
Centre	Hungary	1986	28	0.3	32	0.3	48	0.5	42	0.4	51	0.5
West	Iceland	1985	1	0.3	2	0.6	1	0.3	1	0.3	0	0.0
West	Ireland	1983	38	0.8	47	1.0	38	0.8	30	0.7	33	0.7
West	Italy	1982	1 149	1.9	1 058	1.8	1 074	1.8	1 078	1.8	931	1.5
East	Latvia	1990	132	6.2	112	5.4	142	6.9	133	6.6	171	8.5
–	Liechtenstein	1989	0	0.0	1	2.8	1	2.7	0	0.0	1	2.7
East	Lithuania	1988	33	1.1	21	0.7	38	1.3	44	1.5	37	1.3
West	Luxembourg	1983	8	1.6	12	2.3	8	1.5	11	2.0	9	1.6
West	Malta	1986	6	1.4	5	1.2	6	1.4	1	0.2	4	0.9
West	Netherlands	1999	323	1.9	268	1.6	298	1.8	270	1.6	220	1.3
West	Norway	1983	22	0.5	19	0.4	25	0.5	28	0.6	45	0.9
Centre	Poland	1986	173	0.5	184	0.5	157	0.4	162	0.4	148	0.4
West	Portugal	1985	767	7.3	654	6.2	625	5.9	525	5.0	382	3.7
Centre	Romania	1985	258	1.3	336	1.7	339	1.7	361	1.8	411	2.1
Centre	Slovakia	1985	2	0.0	4	0.1	7	0.1	6	0.1	4	0.1
Centre	Slovenia	1986	7	0.3	15	0.7	12	0.6	11	0.5	17	0.8
West	Spain	1981	1 456	3.1	1 293	2.8	1 175	2.5	858	1.8	678	1.6
West	Sweden	1982	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	1981	665	1.1	419	0.7	435	0.7	347	0.5	370	0.6
	Total EU/EEA		**7 064**	**1.4**	**6 377**	**1.3**	**6 341**	**1.2**	**5 593**	**1.1**	**5 086**	**1.0**
Non-EU/EEA												
Centre	Albania	1993	26	0.9	46	1.6	49	1.7	65	2.2	50	1.7
West	Andorra	2004	0	0.0	1	1.2	0	0.0	3	3.7	0	0.0
East	Armenia	1988	94	3.3	87	3.0	136	4.7	144	5.0	174	6.0
East	Azerbaijan	1995	250	2.8	195	2.1	235	2.5	189	2.0	200	2.1
East	Belarus	1991	475	5.0	590	6.3	598	6.4	547	5.8	474	5.0
Centre	Bosnia and Herzegovina	1986	6	0.2	7	0.2	4	0.1	7	0.2	7	0.2
East	Georgia	1989	339	8.3	395	9.7	359	8.8	303	7.5	268	6.6
West	Israel	1981	40	0.5	55	0.7	52	0.7	47	0.6	70	0.9
East	Kazakhstan	1993	252	1.6	241	1.5	237	1.4	258	1.5	250	1.4
East	Kyrgyzstan	1999	130	2.4	90	1.6	88	1.6	67	1.2	85	1.5
West	Monaco	1985	0	0.0	0	0.0	0	0.0	0	0.0	1	2.7
Centre	Montenegro	1990	8	1.3	2	0.3	7	1.1	7	1.1	7	1.1
Centre	North Macedonia	1989	6	0.3	8	0.4	10	0.5	10	0.5	16	0.8
East	Republic of Moldova	1989	340	8.3	449	11.0	250	6.1	378	9.3	299	7.3
East	Russian Federation		0	0.0	–	–	–	–	–	–	–	–
West	San Marino	1986	0	0.0	1	3.2	2	6.2	0	0.0	0	0.0
Centre	Serbia	1985	52	0.6	60	0.7	57	0.6	49	0.5	49	0.6
Centre	Serbia excluding Kosovo[1]	1985	51	0.7	53	0.7	55	0.8	46	0.6	48	0.7
Centre	Kosovo[1]	2005	1	0.0	7	0.4	2	0.1	3	0.2	1	0.1
West	Switzerland	1980	166	2.1	134	1.7	98	1.2	105	1.3	77	0.9
East	Tajikistan	1998	106	1.4	146	1.9	183	2.3	191	2.4	227	2.8
Centre	Turkey	1985	60	0.1	81	0.1	95	0.1	96	0.1	125	0.2
East	Turkmenistan	2002	0	0.0	0	0.0	0	0.0	–	–	–	–
East	Ukraine	1988	5 861	12.8	9 189	20.1	10 073	22.2	9 362	20.7	9 844	21.8
East	Uzbekistan	1992	220	0.8	–	–	–	–	–	–	–	–
	Total non-EU/EEA		**8 431**	**3.5**	**11 777**	**5.6**	**12 533**	**5.9**	**11 828**	**5.5**	**12 223**	**5.6**
WHO European Region												
West	West		6 539	1.6	5 718	1.4	5 573	1.3	4 833	1.1	4 246	1.0
Centre	Centre		698	0.4	882	0.5	925	0.5	946	0.5	1 015	0.5
East	East		8 258	5.9	11 553	10.4	12 375	11.1	11 642	10.4	12 047	10.7
	Total WHO European Region		**15 495**	**2.1**	**18 153**	**2.5**	**18 873**	**2.6**	**17 421**	**2.4**	**17 308**	**2.4**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

2015		2016		2017		2018		2019		Cumulative total[b]	Country, territory or area[a]
N	Rate	N	Rate	N	Rate	N	Rate	N	Rate		
											EU/EEA
76	0.9	65	0.7	61	0.7	53	0.6	56	0.6	3 307	Austria
95	0.8	62	0.5	50	0.4	49	0.4	–	–	5 019	Belgium
45	0.6	42	0.6	49	0.7	57	0.8	68	1.0	790	Bulgaria
16	0.4	22	0.5	20	0.5	30	0.7	20	0.5	511	Croatia
13	1.5	22	2.6	15	1.8	13	1.5	3	0.3	344	Cyprus
38	0.4	44	0.4	54	0.5	39	0.4	38	0.4	676	Czechia
40	0.7	24	0.4	28	0.5	26	0.4	22	0.4	3 037	Denmark
18	1.4	40	3.0	20	1.5	25	1.9	28	2.1	565	Estonia
18	0.3	30	0.5	18	0.3	21	0.4	18	0.3	742	Finland
603	0.9	510	0.8	491	0.7	522	0.8	430	0.6	72 907	France
362	0.4	310	0.4	295	0.4	242	0.3	74	0.1	32 203	Germany
139	1.3	139	1.3	120	1.1	102	0.9	86	0.8	4 097	Greece
43	0.4	53	0.5	52	0.5	57	0.6	53	0.5	1 054	Hungary
0	0.0	4	1.2	0	0.0	2	0.6	4	1.1	77	Iceland
21	0.4	14	0.3	21	0.4	14	0.3	6	0.1	1 305	Ireland
872	1.4	873	1.4	800	1.3	716	1.2	571	0.9	71 204	Italy
132	6.6	114	5.8	118	6.1	99	5.1	90	4.7	2 077	Latvia
0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	12	Liechtenstein
35	1.2	48	1.7	54	1.9	37	1.3	21	0.8	610	Lithuania
10	1.8	12	2.1	6	1.0	4	0.7	3	0.5	334	Luxembourg
2	0.5	5	1.1	0	0.0	0	0.0	0	0.0	114	Malta
250	1.5	204	1.2	187	1.1	168	1.0	93	0.5	7 575	Netherlands
22	0.4	22	0.4	14	0.3	12	0.2	19	0.4	1 203	Norway
128	0.3	102	0.3	109	0.3	111	0.3	85	0.2	3 771	Poland
340	3.3	375	3.6	296	2.9	256	2.5	172	1.7	22 835	Portugal
358	1.8	340	1.7	323	1.6	301	1.5	282	1.5	10 581	Romania
8	0.1	10	0.2	9	0.2	11	0.2	3	0.1	119	Slovakia
11	0.5	10	0.5	7	0.3	10	0.5	7	0.3	276	Slovenia
607	1.8	539	1.6	510	1.5	367	1.1	251	0.6	88 141	Spain
–	–	–	–	–	–	–	–	–	–	2 170	Sweden
404	0.6	301	0.5	264	0.4	255	0.4	269	0.4	30 234	United Kingdom
4 706	**1.0**	**4 336**	**0.9**	**3 991**	**0.8**	**3 599**	**0.7**	**2 772**	**0.5**	**367 890**	**Total EU/EEA**
											Non-EU/EEA
65	2.2	58	2.0	33	1.1	47	1.6	40	1.4	649	Albania
3	3.8	0	0.0	2	2.6	0	0.0	–	–	15	Andorra
163	5.6	163	5.6	144	4.9	211	7.1	173	5.8	1 866	Armenia
193	2.0	161	1.7	168	1.7	182	1.8	196	2.0	2 524	Azerbaijan
490	5.2	512	5.4	439	4.6	382	4.0	380	4.0	6 841	Belarus
7	0.2	7	0.2	4	0.1	11	0.3	8	0.2	171	Bosnia and Herzegovina
270	6.7	269	6.7	257	6.4	273	6.8	265	6.6	4 266	Georgia
45	0.6	46	0.6	33	0.4	37	0.4	23	0.3	1 739	Israel
272	1.5	348	2.0	361	2.0	433	2.4	441	2.4	4 102	Kazakhstan
125	2.1	72	1.2	59	1.0	56	0.9	46	0.7	1 040	Kyrgyzstan
0	0.0	0	0.0	0	0.0	0	0.0	–	–	51	Monaco
11	1.8	15	2.4	13	2.1	14	2.2	10	1.6	162	Montenegro
6	0.3	9	0.4	2	0.1	4	0.2	–	–	170	North Macedonia
293	7.2	366	9.0	274	6.7	365	9.0	285	7.0	4 437	Republic of Moldova
–	–	–	–	–	–	–	–	–	–	0	Russian Federation
0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	23	San Marino
50	0.6	61	0.7	64	0.7	70	0.8	73	0.7	2 117	Serbia
47	0.7	56	0.8	58	0.8	62	0.9	68	0.8	2 032	Serbia excluding Kosovo[1]
3	0.2	5	0.3	6	0.3	8	0.4	5	0.3	85	Kosovo[1]
63	0.8	69	0.8	70	0.8	60	0.7	59	0.7	10 086	Switzerland
278	3.3	236	2.7	267	3.0	207	2.3	141	1.5	2 181	Tajikistan
118	0.2	99	0.1	121	0.1	108	0.1	112	0.1	1 797	Turkey
–	–	–	–	–	–	–	–	–	–	1	Turkmenistan
8 468	19.8	8 852	20.8	9 308	21.9	8 839	20.9	7 511	17.9	118 557	Ukraine
–	–	–	–	–	–	–	–	–	–	651	Uzbekistan
10 920	**5.0**	**11 343**	**5.2**	**11 619**	**5.2**	**11 299**	**5.1**	**9 763**	**4.2**	**163 446**	**Total non-EU/EEA**
											WHO European Region
3 972	1.0	3 604	0.9	3 266	0.8	2 906	0.7	2 156	0.5	358 418	West
917	0.5	894	0.5	875	0.4	883	0.4	802	0.4	23 188	Centre
10 737	9.7	11 181	10.0	11 469	10.2	11 109	9.9	9 577	8.3	149 718	East
15 626	**2.2**	**15 679**	**2.2**	**15 610**	**2.2**	**14 898**	**2.0**	**12 535**	**1.7**	**531 324**	**Total WHO European Region**

Table 15. AIDS diagnoses in males and rates per 100 000 population, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	2010		2011		2012		2013		2014		2015	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA													
West	Austria	62	1.5	61	1.5	80	2.0	50	1.2	57	1.4	57	1.4
West	Belgium	70	1.3	58	1.1	66	1.2	70	1.3	79	1.4	59	1.1
Centre	Bulgaria	21	0.6	38	1.1	47	1.3	53	1.5	52	1.5	39	1.1
Centre	Croatia	1	0.0	25	1.2	26	1.3	14	0.7	21	1.0	15	0.7
Centre	Cyprus	8	2.0	7	1.7	9	2.1	5	1.2	10	2.4	9	2.2
Centre	Czechia	21	0.4	20	0.4	28	0.5	27	0.5	23	0.4	30	0.6
West	Denmark	34	1.2	40	1.5	35	1.3	29	1.0	24	0.9	28	1.0
East	Estonia	21	3.4	31	5.0	25	4.0	19	3.1	13	2.1	11	1.8
West	Finland	22	0.8	17	0.6	16	0.6	17	0.6	14	0.5	13	0.5
West	France	675	2.2	635	2.0	573	1.8	518	1.6	441	1.4	415	1.3
West	Germany	439	1.1	438	1.1	406	1.0	350	0.9	335	0.8	297	0.7
West	Greece	84	1.5	86	1.6	102	1.9	120	2.2	105	2.0	114	2.2
Centre	Hungary	26	0.5	27	0.6	45	1.0	38	0.8	41	0.9	37	0.8
West	Iceland	1	0.6	1	0.6	1	0.6	1	0.6	0	0.0	0	0.0
West	Ireland	27	1.2	34	1.5	27	1.2	22	1.0	23	1.0	16	0.7
West	Italy	849	3.0	806	2.8	784	2.7	813	2.8	713	2.4	686	2.3
East	Latvia	86	8.9	80	8.4	102	10.9	90	9.7	110	12.0	89	9.8
–	Liechtenstein	0	0.0	1	5.6	1	5.5	0	0.0	1	5.4	0	0.0
East	Lithuania	27	1.9	15	1.1	28	2.0	31	2.3	29	2.1	26	1.9
West	Luxembourg	4	1.6	8	3.1	5	1.9	10	3.7	6	2.2	6	2.1
West	Malta	4	1.9	3	1.5	5	2.4	1	0.5	4	1.9	2	0.9
West	Netherlands	258	3.1	210	2.5	236	2.8	224	2.7	182	2.2	206	2.5
West	Norway	20	0.8	17	0.7	23	0.9	19	0.7	36	1.4	15	0.6
Centre	Poland	132	0.7	142	0.8	120	0.7	131	0.7	115	0.6	97	0.5
West	Portugal	538	10.6	484	9.6	443	8.8	364	7.3	295	5.9	244	5.0
Centre	Romania	148	1.5	207	2.1	211	2.2	245	2.5	291	3.0	249	2.6
Centre	Slovakia	2	0.1	4	0.2	7	0.3	6	0.2	3	0.1	7	0.3
Centre	Slovenia	7	0.7	12	1.2	11	1.1	10	1.0	16	1.6	11	1.1
West	Spain	1 136	4.9	1 000	4.3	900	3.9	671	2.9	546	2.8	490	2.9
West	Sweden	–	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	430	1.4	284	0.9	301	1.0	247	0.8	249	0.8	301	0.9
	Total EU/EEA	**5 153**	**2.1**	**4 791**	**1.9**	**4 663**	**1.9**	**4 195**	**1.7**	**3 834**	**1.6**	**3 569**	**1.5**
Non-EU/EEA													
Centre	Albania	18	1.2	35	2.4	34	2.3	50	3.4	36	2.4	50	3.4
West	Andorra	0	0.0	1	2.4	0	0.0	2	5.0	0	0.0	2	5.2
East	Armenia	73	5.4	65	4.8	98	7.3	103	7.6	127	9.3	129	9.4
East	Azerbaijan	231	5.2	171	3.8	209	4.5	162	3.5	162	3.4	150	3.1
East	Belarus	291	6.6	365	8.3	375	8.6	369	8.4	308	7.0	278	6.3
Centre	Bosnia and Herzegovina	6	0.3	4	0.2	4	0.2	6	0.3	7	0.4	7	0.4
East	Georgia	243	12.4	277	14.2	248	12.8	219	11.3	201	10.4	196	10.2
West	Israel	24	0.7	37	1.0	37	1.0	36	0.9	48	1.2	26	0.7
East	Kazakhstan	180	2.3	162	2.0	179	2.2	190	2.3	184	2.2	180	2.1
East	Kyrgyzstan	111	4.1	69	2.5	65	2.3	49	1.7	58	2.0	89	3.0
West	Monaco	0	0.0	0	0.0	0	0.0	0	0.0	1	5.5	0	0.0
Centre	Montenegro	8	2.6	2	0.6	7	2.3	7	2.3	4	1.3	11	3.5
Centre	North Macedonia	6	0.6	5	0.5	8	0.8	9	0.9	13	1.3	5	0.5
East	Republic of Moldova	193	9.8	274	14.0	128	6.5	218	11.1	183	9.3	179	9.2
East	Russian Federation	0	0.0	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0.0	1	6.5	2	12.9	0	0.0	0	0.0	0	0.0
Centre	Serbia	45	1.0	50	1.1	51	1.2	41	0.9	43	1.0	47	1.1
Centre	Serbia excluding Kosovo[1]	44	1.3	45	1.3	50	1.4	39	1.1	42	1.2	45	1.3
Centre	Kosovo[1]	1	0.1	5	0.6	1	0.1	2	0.2	1	0.1	2	0.2
West	Switzerland	124	3.2	96	2.5	68	1.7	73	1.8	61	1.5	51	1.2
East	Tajikistan	91	2.4	113	2.9	137	3.4	139	3.4	155	3.7	184	4.3
Centre	Turkey	46	0.1	66	0.2	83	0.2	77	0.2	99	0.3	92	0.2
East	Turkmenistan	0	0.0	0	0.0	0	0.0	–	–	–	–	–	–
East	Ukraine	3 988	18.9	6 141	29.2	6 498	31.0	6 013	28.7	6 119	29.3	5 328	23.2
East	Uzbekistan	163	1.1	–	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	**5 841**	**5.0**	**7 934**	**7.7**	**8 231**	**8.0**	**7 763**	**7.4**	**7 809**	**7.4**	**7 004**	**6.4**
WHO European Region													
West	West	4 801	2.3	4 317	2.1	4 110	2.0	3 637	1.8	3 219	1.6	3 028	1.5
Centre	Centre	495	0.5	644	0.7	691	0.7	719	0.8	774	0.8	706	0.7
East	East	5 698	8.5	7 763	14.7	8 092	15.3	7 602	14.3	7 649	14.3	6 839	12.2
	Total WHO European Region	**10 994**	**3.0**	**12 724**	**3.6**	**12 893**	**3.7**	**11 958**	**3.4**	**11 642**	**3.4**	**10 573**	**3.0**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

2016		2017		2018		2019		Cumulative total[b]	Country, territory or area[a]
N	Rate	N	Rate	N	Rate	N	Rate		
									EU/EEA
47	1.1	49	1.1	43	1.0	45	1.0	2 517	Austria
38	0.7	35	0.6	32	0.6	–	–	3 370	Belgium
39	1.1	39	1.1	48	1.4	56	1.6	621	Bulgaria
21	1.0	19	0.9	28	1.4	18	0.9	456	Croatia
17	4.1	9	2.2	8	1.9	2	0.5	260	Cyprus
38	0.7	44	0.8	35	0.7	28	0.5	550	Czechia
19	0.7	25	0.9	21	0.7	15	0.5	2 580	Denmark
23	3.7	15	2.4	19	3.1	19	3.0	407	Estonia
25	0.9	10	0.4	17	0.6	12	0.4	595	Finland
336	1.0	350	1.1	367	1.1	311	1.0	57 112	France
249	0.6	231	0.6	191	0.5	55	0.1	27 494	Germany
105	2.0	92	1.8	89	1.7	63	1.2	3 413	Greece
45	1.0	36	0.8	54	1.2	46	1.0	914	Hungary
4	2.4	0	0.0	0	0.0	3	1.6	65	Iceland
11	0.5	15	0.6	13	0.5	4	0.2	1 000	Ireland
669	2.3	586	2.0	560	1.9	466	1.6	54 918	Italy
90	10.0	73	8.2	63	7.1	53	6.0	1 428	Latvia
0	0.0	0	0.0	0	0.0	0	0.0	11	Liechtenstein
41	3.1	46	3.5	29	2.2	16	1.2	493	Lithuania
10	3.5	5	1.7	3	1.0	1	0.3	255	Luxembourg
5	2.2	0	0.0	0	0.0	0	0.0	100	Malta
159	1.9	148	1.7	132	1.5	73	0.9	6 064	Netherlands
15	0.6	11	0.4	9	0.3	14	0.5	935	Norway
90	0.5	94	0.5	86	0.5	70	0.4	2 985	Poland
268	5.5	215	4.4	171	3.5	112	2.3	17 960	Portugal
245	2.5	240	2.5	218	2.3	196	2.1	6 356	Romania
10	0.4	9	0.3	11	0.4	3	0.1	106	Slovakia
8	0.8	7	0.7	10	1.0	3	0.3	242	Slovenia
437	2.6	408	2.4	301	1.8	205	1.1	70 259	Spain
–	–	–	–	–	–	–	–	1 774	Sweden
226	0.7	188	0.6	189	0.6	205	0.6	23 580	United Kingdom
3 290	**1.3**	**2 999**	**1.2**	**2 747**	**1.1**	**2 094**	**0.8**	**288 820**	**Total EU/EEA**
									Non-EU/EEA
50	3.4	24	1.6	35	2.4	26	1.8	497	Albania
0	0.0	1	2.6	0	0.0	–	–	11	Andorra
116	8.4	111	8.0	147	10.6	127	9.1	1 385	Armenia
125	2.6	114	2.3	122	2.5	150	3.0	1 981	Azerbaijan
311	7.1	274	6.2	229	5.2	241	5.5	4 263	Belarus
6	0.4	4	0.2	11	0.7	6	0.4	143	Bosnia and Herzegovina
196	10.2	193	10.1	172	9.0	199	10.4	3 131	Georgia
28	0.7	23	0.6	27	0.6	15	0.4	1 246	Israel
230	2.7	223	2.5	279	3.1	287	3.2	2 811	Kazakhstan
55	1.8	36	1.2	0	0.0	26	0.8	741	Kyrgyzstan
0	0.0	0	0.0	0	0.0	–	–	40	Monaco
15	4.8	12	3.9	14	4.5	10	3.2	141	Montenegro
6	0.6	2	0.2	4	0.4	–	–	127	North Macedonia
210	10.8	167	8.6	213	11.0	180	9.3	2 689	Republic of Moldova
–	–	–	–	–	–	–	–	0	Russian Federation
0	0.0	0	0.0	0	0.0	0	0.0	21	San Marino
57	1.3	58	1.3	62	1.4	57	1.1	1 645	Serbia
52	1.5	52	1.5	55	1.6	53	1.2	1 579	Serbia excluding Kosovo[1]
5	0.6	6	0.7	7	0.8	4	0.5	66	Kosovo[1]
47	1.1	52	1.2	47	1.1	50	1.2	7 519	Switzerland
172	3.9	182	4.1	145	3.2	98	2.1	1 583	Tajikistan
86	0.2	103	0.3	91	0.2	92	0.2	1 494	Turkey
–	–	–	–	–	–	–	–	0	Turkmenistan
5 462	27.7	5 612	28.6	5 405	27.6	4 661	24.0	77 354	Ukraine
–	–	–	–	–	–	–	–	494	Uzbekistan
7 172	**6.7**	**7 191**	**6.7**	**7 003**	**6.6**	**6 225**	**5.5**	**109 410**	**Total non-EU/EEA**
									WHO European Region
2 698	1.3	2 444	1.2	2 212	1.1	1 649	0.8	282 828	West
733	0.8	700	0.7	715	0.7	613	0.6	16 537	Centre
7 031	13.2	7 046	13.2	6 823	13.5	6 057	11.0	98 854	East
10 462	**3.0**	**10 190**	**2.9**	**9 750**	**2.8**	**8 319**	**2.3**	**398 219**	**Total WHO European Region**

Table 16. AIDS diagnoses in females and rates per 100 000 population, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	2010		2011		2012		2013		2014		2015	
		N	Rate	N	Rate	N	Rate	N	Rate	N	Rate	N	Rate
EU/EEA													
West	Austria	20	0.5	18	0.4	21	0.5	19	0.4	26	0.6	19	0.4
West	Belgium	51	0.9	40	0.7	41	0.7	30	0.5	40	0.7	35	0.6
Centre	Bulgaria	11	0.3	2	0.1	18	0.5	18	0.5	12	0.3	6	0.2
Centre	Croatia	0	0.0	1	0.0	2	0.1	3	0.1	2	0.1	1	0.0
Centre	Cyprus	3	0.7	5	1.2	2	0.5	4	0.9	1	0.2	4	0.9
Centre	Czechia	7	0.1	9	0.2	8	0.1	6	0.1	9	0.2	8	0.1
West	Denmark	10	0.4	19	0.7	6	0.2	9	0.3	6	0.2	12	0.4
East	Estonia	5	0.7	7	1.0	11	1.6	7	1.0	5	0.7	7	1.0
West	Finland	9	0.3	7	0.3	3	0.1	3	0.1	6	0.2	5	0.2
West	France	311	0.9	232	0.7	258	0.8	198	0.6	210	0.6	183	0.5
West	Germany	88	0.2	80	0.2	105	0.3	91	0.2	58	0.1	65	0.2
West	Greece	19	0.3	16	0.3	21	0.4	20	0.4	23	0.4	25	0.4
Centre	Hungary	2	0.0	5	0.1	3	0.1	4	0.1	10	0.2	6	0.1
West	Iceland	0	0.0	1	0.6	0	0.0	0	0.0	0	0.0	0	0.0
West	Ireland	11	0.5	13	0.6	11	0.5	8	0.3	10	0.4	5	0.2
West	Italy	300	1.0	252	0.8	290	0.9	265	0.9	218	0.7	186	0.6
East	Latvia	46	4.0	32	2.8	40	3.6	43	3.9	61	5.6	43	4.0
–	Liechtenstein	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
East	Lithuania	6	0.4	6	0.4	10	0.6	13	0.8	8	0.5	9	0.6
West	Luxembourg	4	1.6	4	1.6	3	1.1	1	0.4	3	1.1	4	1.4
West	Malta	2	1.0	2	1.0	1	0.5	0	0.0	0	0.0	0	0.0
West	Netherlands	65	0.8	57	0.7	61	0.7	46	0.5	38	0.4	42	0.5
West	Norway	2	0.1	2	0.1	2	0.1	9	0.4	9	0.4	7	0.3
Centre	Poland	41	0.2	42	0.2	37	0.2	31	0.2	33	0.2	31	0.2
West	Portugal	229	4.2	170	3.1	182	3.3	161	2.9	87	1.6	96	1.8
Centre	Romania	110	1.1	129	1.2	128	1.2	116	1.1	120	1.2	109	1.1
Centre	Slovakia	0	0.0	0	0.0	0	0.0	0	0.0	1	0.0	1	0.0
Centre	Slovenia	0	0.0	3	0.3	1	0.1	1	0.1	1	0.1	0	0.0
West	Spain	320	1.4	293	1.2	275	1.2	187	0.8	132	0.7	117	0.7
West	Sweden	–	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	235	0.7	135	0.4	134	0.4	100	0.3	121	0.4	101	0.3
	Total EU/EEA	**1 907**	**0.8**	**1 582**	**0.6**	**1 674**	**0.7**	**1 393**	**0.5**	**1 250**	**0.5**	**1 127**	**0.4**
Non-EU/EEA													
Centre	Albania	8	0.5	11	0.8	15	1.0	15	1.0	14	1.0	15	1.1
West	Andorra	0	0.0	0	0.0	0	0.0	1	2.4	0	0.0	1	2.5
East	Armenia	21	1.4	22	1.4	38	2.5	41	2.7	47	3.0	34	2.2
East	Azerbaijan	19	0.4	24	0.5	26	0.6	27	0.6	38	0.8	43	0.9
East	Belarus	184	3.7	225	4.5	223	4.4	178	3.5	166	3.3	212	4.2
Centre	Bosnia and Herzegovina	0	0.0	3	0.2	0	0.0	1	0.1	0	0.0	0	0.0
East	Georgia	96	4.5	118	5.5	111	5.2	84	4.0	67	3.2	74	3.5
West	Israel	16	0.4	18	0.5	15	0.4	11	0.3	22	0.6	19	0.5
East	Kazakhstan	72	0.9	79	0.9	58	0.7	68	0.8	66	0.7	92	1.0
East	Kyrgyzstan	19	0.7	21	0.8	23	0.8	18	0.6	27	0.9	36	1.2
West	Monaco	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Montenegro	0	0.0	0	0.0	0	0.0	0	0.0	3	0.9	0	0.0
Centre	North Macedonia	0	0.0	0	0.0	2	0.2	1	0.1	3	0.3	1	0.1
East	Republic of Moldova	147	6.9	175	8.3	122	5.8	160	7.6	116	5.5	114	5.4
East	Russian Federation	0	0.0	–	–	–	–	–	–	–	–	–	–
West	San Marino	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Centre	Serbia	7	0.2	10	0.2	6	0.1	8	0.2	6	0.1	3	0.1
Centre	Serbia excluding Kosovo[1]	7	0.2	8	0.2	5	0.1	7	0.2	6	0.2	2	0.1
Centre	Kosovo[1]	–	0.0	2	0.2	1	0.1	1	0.1	–	0.0	1	0.1
West	Switzerland	42	1.1	38	0.9	30	0.7	32	0.8	16	0.4	12	0.3
East	Tajikistan	15	0.4	33	0.9	46	1.2	52	1.3	72	1.8	94	2.2
Centre	Turkey	14	0.0	15	0.0	12	0.0	19	0.0	26	0.1	26	0.1
East	Turkmenistan	0	0.0	0	0.0	0	0.0	–	–	–	–	–	–
East	Ukraine	1 873	7.6	3 048	12.4	3 575	14.6	3 349	13.7	3 725	15.4	3 140	15.9
East	Uzbekistan	57	0.4	–	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	**2 590**	**2.2**	**3 840**	**3.6**	**4 302**	**4.0**	**4 065**	**3.7**	**4 414**	**4.0**	**3 916**	**3.7**
WHO European Region													
West	West	1 734	0.8	1 397	0.7	1 459	0.7	1 191	0.6	1 025	0.5	934	0.5
Centre	Centre	203	0.2	235	0.3	234	0.3	227	0.2	241	0.3	211	0.2
East	East	2 560	3.5	3 790	6.5	4 283	7.3	4 040	6.8	4 398	7.4	3 898	7.1
	Total WHO European Region	**4 497**	**1.2**	**5 422**	**1.5**	**5 976**	**1.7**	**5 458**	**1.5**	**5 664**	**1.6**	**5 043**	**1.4**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

2016		2017		2018		2019		Cumulative total[b]	Country, territory or area[a]
N	Rate	N	Rate	N	Rate	N	Rate		
									EU/EEA
18	0.4	12	0.3	10	0.2	11	0.2	790	Austria
24	0.4	15	0.3	17	0.3	–	–	1 643	Belgium
3	0.1	10	0.3	9	0.2	12	0.3	169	Bulgaria
1	0.0	1	0.0	2	0.1	2	0.1	55	Croatia
5	1.1	6	1.4	5	1.1	1	0.2	84	Cyprus
6	0.1	10	0.2	4	0.1	10	0.2	126	Czechia
5	0.2	3	0.1	5	0.2	7	0.2	457	Denmark
17	2.4	5	0.7	6	0.9	9	1.3	158	Estonia
5	0.2	8	0.3	4	0.1	6	0.2	147	Finland
170	0.5	137	0.4	152	0.4	112	0.3	15 733	France
61	0.1	64	0.2	51	0.1	19	0.0	4 709	Germany
34	0.6	28	0.5	13	0.2	23	0.4	684	Greece
8	0.2	16	0.3	3	0.1	7	0.1	140	Hungary
0	0.0	0	0.0	2	1.2	1	0.6	12	Iceland
3	0.1	6	0.2	1	0.0	2	0.1	303	Ireland
204	0.7	214	0.7	156	0.5	105	0.3	16 286	Italy
24	2.3	45	4.3	36	3.4	37	3.6	649	Latvia
0	0.0	0	0.0	0	0.0	0	0.0	1	Liechtenstein
7	0.4	8	0.5	8	0.5	5	0.3	117	Lithuania
2	0.7	1	0.3	1	0.3	2	0.7	78	Luxembourg
0	0.0	0	0.0	0	0.0	0	0.0	14	Malta
43	0.5	37	0.4	31	0.4	18	0.2	1 476	Netherlands
7	0.3	3	0.1	3	0.1	5	0.2	268	Norway
12	0.1	15	0.1	25	0.1	15	0.1	786	Poland
107	2.0	81	1.5	85	1.6	60	1.1	4 874	Portugal
95	0.9	83	0.8	83	0.8	86	0.9	4 225	Romania
0	0.0	0	0.0	0	0.0	0	0.0	13	Slovakia
2	0.2	0	0.0	0	0.0	4	0.4	34	Slovenia
102	0.6	102	0.6	64	0.4	46	0.2	17 876	Spain
–	–	–	–	–	–	–	–	396	Sweden
74	0.2	75	0.2	66	0.2	64	0.2	6 650	United Kingdom
1 039	**0.4**	**985**	**0.4**	**842**	**0.3**	**669**	**0.3**	**78 953**	**Total EU/EEA**
									Non-EU/EEA
8	0.6	9	0.6	12	0.8	14	1.0	152	Albania
0	0.0	1	2.6	0	0.0	–	–	4	Andorra
47	3.0	33	2.1	64	4.1	46	2.9	481	Armenia
36	0.7	54	1.1	60	1.2	46	0.9	438	Azerbaijan
201	4.0	165	3.3	153	3.0	139	2.8	2 578	Belarus
1	0.1	0	0.0	0	0.0	2	0.1	26	Bosnia and Herzegovina
73	3.5	64	3.1	101	4.8	66	3.2	1 135	Georgia
18	0.4	10	0.2	10	0.2	8	0.2	493	Israel
118	1.3	138	1.5	154	1.6	154	1.6	1 291	Kazakhstan
17	0.6	23	0.7	22	0.7	20	0.6	262	Kyrgyzstan
0	0.0	0	0.0	0	0.0	–	–	11	Monaco
0	0.0	1	0.3	0	0.0	0	0.0	21	Montenegro
2	0.2	0	0.0	0	0.0	–	–	36	North Macedonia
156	7.4	107	5.1	152	7.2	105	5.0	1 748	Republic of Moldova
–	–	–	–	–	–	–	–	0	Russian Federation
0	0.0	0	0.0	0	0.0	0	0.0	2	San Marino
4	0.1	6	0.1	8	0.2	16	0.3	472	Serbia
4	0.1	6	0.2	7	0.2	15	0.3	453	Serbia excluding Kosovo[1]
–	0.0	–	0.0	1	0.1	1	0.1	19	Kosovo[1]
21	0.5	17	0.4	12	0.3	9	0.2	2 563	Switzerland
64	1.5	85	1.9	62	1.4	43	0.9	598	Tajikistan
13	0.0	18	0.0	17	0.0	20	0.0	303	Turkey
–	–	–	–	–	–	–	–	1	Turkmenistan
3 390	14.8	3 696	16.2	3 434	15.2	2 850	12.7	41 203	Ukraine
–	–	–	–	–	–	–	–	157	Uzbekistan
4 169	**3.7**	**4 427**	**4.0**	**4 261**	**3.8**	**3 538**	**3.0**	**53 986**	**Total non-EU/EEA**
									WHO European Region
898	0.4	814	0.4	683	0.3	498	0.2	75 469	West
160	0.2	175	0.2	168	0.2	189	0.2	6 642	Centre
4 150	7.1	4 423	7.5	4 252	7.2	3 520	5.8	50 827	East
5 208	**1.4**	**5 412**	**1.5**	**5 103**	**1.4**	**4 207**	**1.1**	**132 938**	**Total WHO European Region**

Table 17. AIDS diagnoses in men infected through sex with men, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	30	34	32	23	25	21	25	24	21	23	1 129
West	Belgium	36	34	32	33	40	34	19	18	15	–	1 589
Centre	Bulgaria	5	2	8	12	9	12	11	15	17	28	159
Centre	Croatia	0	18	22	11	18	12	21	17	25	17	304
Centre	Cyprus	5	3	2	4	5	5	10	6	3	1	140
Centre	Czechia	10	15	15	16	13	19	24	29	19	17	330
West	Denmark	15	13	13	11	10	11	7	8	9	8	1 759
East	Estonia	0	0	1	0	1	0	1	1	0	0	29
West	Finland	6	6	2	4	6	7	5	3	3	1	312
West	France	252	244	194	207	155	159	132	133	143	114	28 778
West	Germany	260	232	231	197	183	155	113	115	94	35	18 654
West	Greece	64	55	51	53	44	63	55	49	46	29	2 162
Centre	Hungary	23	24	37	29	37	33	41	29	47	37	738
West	Iceland	0	0	0	0	0	0	1	0	0	3	47
West	Ireland	13	17	13	8	12	11	7	10	4	2	415
West	Italy	255	266	263	306	271	287	260	213	223	181	12 815
East	Latvia	10	7	4	10	7	5	4	10	6	3	135
–	Liechtenstein	0	0	0	0	1	0	0	0	0	0	2
East	Lithuania	0	2	2	5	3	3	9	7	3	0	93
West	Luxembourg	2	6	3	7	3	4	6	2	1	0	142
West	Malta	0	1	0	1	1	0	2	0	0	0	44
West	Netherlands	148	130	149	145	105	120	93	85	78	44	3 705
West	Norway	9	9	10	15	18	4	4	2	6	3	523
Centre	Poland	29	45	25	48	40	30	31	23	24	17	758
West	Portugal	89	94	92	64	63	69	82	61	40	27	3 065
Centre	Romania	13	13	8	17	25	19	24	28	25	35	306
Centre	Slovakia	1	3	3	2	2	2	7	5	5	1	63
Centre	Slovenia	7	7	9	7	10	10	6	3	6	2	158
West	Spain	403	366	358	274	238	212	191	204	135	100	13 979
West	Sweden	–	–	–	–	–	–	–	–	–	–	1 086
West	United Kingdom	196	140	160	113	129	139	106	98	86	87	15 370
	Total EU/EEA	**1 881**	**1 786**	**1 739**	**1 622**	**1 474**	**1 446**	**1 297**	**1 198**	**1 084**	**815**	**108 789**
Non-EU/EEA												
Centre	Albania	1	5	6	6	8	8	3	1	1	2	63
West	Andorra	0	1	0	2	0	1	0	0	0	–	7
East	Armenia	2	2	2	4	7	1	3	4	6	7	44
East	Azerbaijan	4	1	1	3	2	1	2	0	5	8	33
East	Belarus	2	6	3	3	4	3	4	6	4	76	45
Centre	Bosnia and Herzegovina	5	2	4	3	6	4	4	1	8	3	54
East	Georgia	10	12	10	16	21	24	18	21	26	26	218
West	Israel	6	8	7	10	14	4	2	6	2	2	334
East	Kazakhstan	1	1	0	4	1	2	2	2	2	6	25
East	Kyrgyzstan	0	0	0	0	0	0	0	0	0	1	2
West	Monaco	0	0	0	0	1	0	0	0	0	–	22
Centre	Montenegro	6	1	4	3	3	8	9	11	11	4	82
Centre	North Macedonia	1	4	3	3	5	2	4	2	2	–	47
East	Republic of Moldova	2	3	0	2	3	2	1	8	5	3	40
East	Russian Federation	0	–	–	–	–	–	–	–	–	–	0
West	San Marino	0	1	2	0	0	0	0	0	0	0	11
Centre	Serbia	23	22	31	20	27	28	36	30	45	44	580
Centre	Serbia excluding Kosovo[1]	23	21	30	19	27	26	36	30	43	41	565
Centre	Kosovo[1]		1	1	1		2			2	3	15
West	Switzerland	62	37	34	32	24	25	26	26	22	15	3 409
East	Tajikistan	0	0	0	0	0	0	1	3	0	0	4
Centre	Turkey	3	0	0	12	15	12	17	14	12	15	178
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	10	31	45	50	55	72	116	69	81	82	659
East	Uzbekistan	0	–	–	–	–	–	–	–	–	–	1
	Total non-EU/EEA	**138**	**137**	**152**	**173**	**196**	**197**	**248**	**204**	**232**	**225**	**5 858**
WHO European Region												
West	West	1 846	1 694	1 646	1 505	1 342	1 326	1 136	1 057	928	674	109 357
Centre	Centre	132	164	177	193	223	204	248	214	250	223	3 960
East	East	41	65	68	97	104	113	161	131	138	143	1 328
	Total WHO European Region	**2 019**	**1 923**	**1 891**	**1 795**	**1 669**	**1 643**	**1 545**	**1 402**	**1 316**	**1 040**	**114 645**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 18. AIDS diagnoses in people infected through injecting drug use, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	14	13	28	14	21	18	10	10	1	6	904
West	Belgium	3	4	1	3	7	1	0	1	0	–	288
Centre	Bulgaria	10	17	39	29	26	11	14	17	20	18	215
Centre	Croatia	1	1	1	0	0	1	0	2	0	0	26
Centre	Cyprus	0	0	0	0	1	0	0	0	0	0	4
Centre	Czechia	4	1	2	3	2	3	4	2	4	4	53
West	Denmark	4	4	4	5	1	0	1	1	0	0	252
East	Estonia	14	20	15	9	6	4	16	3	11	9	284
West	Finland	3	0	4	2	0	0	1	1	3	0	60
West	France	60	62	45	42	30	31	19	12	19	16	13 953
West	Germany	36	41	42	31	26	21	18	13	18	4	4 429
West	Greece	3	9	22	41	45	31	25	19	12	9	330
Centre	Hungary	0	0	0	0	0	2	2	1	1	1	13
West	Iceland	0	0	0	0	0	0	2	0	0	0	7
West	Ireland	6	10	3	1	0	0	0	1	2	0	377
West	Italy	229	195	180	179	114	101	89	89	78	70	35 267
East	Latvia	70	57	70	62	73	51	36	38	30	32	1 022
–	Liechtenstein	0	1	0	0	0	0	0	0	0	0	7
East	Lithuania	20	9	22	19	16	15	19	23	14	11	278
West	Luxembourg	0	1	0	1	1	1	0	1	0	0	46
West	Malta	0	0	0	0	1	0	0	0	0	0	4
West	Netherlands	8	9	3	4	1	4	4	3	3	2	381
West	Norway	3	0	1	1	0	0	1	0	0	1	157
Centre	Poland	70	62	59	46	32	34	23	23	10	8	1 601
West	Portugal	240	165	165	115	68	47	41	39	22	13	9 553
Centre	Romania	14	29	61	82	114	105	103	73	55	37	699
Centre	Slovakia	0	0	0	0	0	0	0	0	1	0	2
Centre	Slovenia	0	0	0	0	1	0	0	0	0	1	8
West	Spain	432	366	301	195	135	87	66	59	44	25	50 514
West	Sweden	–	–	–	–	–	–	–	–	–	–	242
West	United Kingdom	22	12	11	9	13	9	10	5	9	6	1 512
	Total EU/EEA	**1 266**	**1 088**	**1 079**	**893**	**734**	**577**	**504**	**436**	**357**	**273**	**122 488**
Non-EU/EEA												
Centre	Albania	0	1	0	0	1	0	0	0	0	0	3
West	Andorra	0	0	0	0	0	0	0	0	0	–	2
East	Armenia	42	33	46	26	35	23	30	18	18	84	2 652
East	Azerbaijan	183	148	160	123	109	92	76	52	51	60	1 421
East	Belarus	208	266	242	193	150	139	130	116	60	14	2 582
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	18
East	Georgia	184	191	161	142	120	99	110	86	50	61	1 982
West	Israel	4	7	10	15	12	9	9	6	7	2	272
East	Kazakhstan	174	149	152	158	149	154	173	168	192	185	2 395
East	Kyrgyzstan	102	58	55	38	40	73	30	23	10	3	596
West	Monaco	0	0	0	0	0	0	0	0	0	–	19
Centre	Montenegro	0	0	1	0	0	0	0	0	0	0	4
Centre	North Macedonia	0	0	0	0	0	0	0	0	0	–	9
East	Republic of Moldova	95	102	39	54	42	46	39	31	35	23	1 068
East	Russian Federation	0	–	–	–	–	–	–	–	–	–	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	6
Centre	Serbia	7	12	5	9	5	5		5	1	2	662
Centre	Serbia excluding Kosovo[1]	7	12	5	9	5	5	0	5	1	2	661
Centre	Kosovo[1]	–	–	–	–	–	–	–	–	–	–	1
West	Switzerland	11	18	6	11	4	2	5	8	0	4	3 325
East	Tajikistan	62	72	86	58	74	97	84	75	39	26	803
Centre	Turkey	2	2	1	1	2	0	2	1	0	0	64
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	3 458	4 979	4 933	4 273	3 856	3 050	2 939	2 872	2 343	1 916	51 724
East	Uzbekistan	131	–	–	–	–	–	–	–	–	–	380
	Total non-EU/EEA	**4 663**	**6 038**	**5 897**	**5 101**	**4 599**	**3 789**	**3 627**	**3 461**	**2 806**	**2 380**	**67 877**
WHO European Region												
West	West	1 078	916	826	669	479	362	301	268	218	158	121 900
Centre	Centre	108	125	169	170	184	161	148	124	92	71	3 381
East	East	4 743	6 084	5 981	5 155	4 670	3 843	3 682	3 505	2 853	2 424	65 077
	Total WHO European Region	**5 929**	**7 125**	**6 976**	**5 994**	**5 333**	**4 366**	**4 131**	**3 897**	**3 163**	**2 653**	**190 358**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 19. AIDS diagnoses in people infected through heterosexual contact, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	31	29	35	27	34	29	22	22	26	21	971
West	Belgium	77	53	68	54	65	50	39	25	27	–	2 635
Centre	Bulgaria	14	20	15	20	25	22	17	17	17	22	377
Centre	Croatia	0	6	4	6	5	2	1	1	5	2	155
Centre	Cyprus	5	9	6	4	3	8	11	9	9	2	175
Centre	Czechia	13	13	14	12	16	16	15	22	13	16	252
West	Denmark	23	40	22	21	17	27	14	16	16	14	833
East	Estonia	7	9	16	10	8	14	16	12	9	14	190
West	Finland	12	15	10	12	9	6	16	11	9	11	275
West	France	537	444	497	381	377	340	283	253	270	218	21 444
West	Germany	128	155	132	129	117	109	107	83	73	19	4 508
West	Greece	30	34	42	31	33	38	45	33	29	34	1 117
Centre	Hungary	4	7	6	11	12	7	10	19	8	14	210
West	Iceland	1	2	1	0	0	0	0	0	1	0	16
West	Ireland	12	17	22	17	18	8	7	8	6	3	380
West	Italy	561	504	517	502	452	424	451	416	336	266	18 432
East	Latvia	36	34	55	37	59	58	51	49	46	46	655
–	Liechtenstein	0	0	1	0	0	0	0	0	0	0	3
East	Lithuania	11	9	13	15	17	16	18	18	16	9	196
West	Luxembourg	6	5	4	2	5	4	4	3	3	3	126
West	Malta	6	3	5	0	2	1	3	0	0	0	41
West	Netherlands	128	92	108	88	84	87	80	69	54	24	2 511
West	Norway	10	9	12	11	27	17	16	11	6	15	462
Centre	Poland	53	45	37	35	34	33	18	17	18	17	736
West	Portugal	423	388	355	330	244	216	242	181	184	121	9 436
Centre	Romania	123	172	155	150	184	179	186	196	203	192	3 234
Centre	Slovakia	1	1	3	4	2	3	3	3	2	0	40
Centre	Slovenia	0	3	1	3	0	0	4	4	3	3	57
West	Spain	448	418	380	272	212	199	185	168	126	96	16 419
West	Sweden	–	–	–	–	–	–	–	–	–	–	666
West	United Kingdom	387	241	244	202	200	222	159	133	136	140	11 033
	Total EU/EEA	**3 087**	**2 777**	**2 780**	**2 386**	**2 261**	**2 135**	**2 023**	**1 799**	**1 651**	**1 322**	**97 585**
Non-EU/EEA												
Centre	Albania	24	39	40	55	40	52	55	31	46	37	563
West	Andorra	0	0	0	1	0	2	0	1	0	–	5
East	Armenia	46	51	86	106	125	132	125	117	180	150	1 289
East	Azerbaijan	42	44	68	57	85	93	76	112	120	124	982
East	Belarus	246	305	348	344	309	333	367	312	313	279	3 858
Centre	Bosnia and Herzegovina	1	4	0	3	1	2	3	2	3	5	84
East	Georgia	134	180	184	139	123	145	137	145	189	177	1 943
West	Israel	27	38	32	21	43	31	34	21	25	19	979
East	Kazakhstan	65	81	76	82	93	97	157	168	231	232	1 459
East	Kyrgyzstan	24	26	27	24	39	40	35	30	34	35	356
West	Monaco	0	0	0	0	0	0	0	0	0	–	7
Centre	Montenegro	2	1	2	1	3	1	6	2	2	3	60
Centre	North Macedonia	3	3	6	6	10	4	3	0	1	–	92
East	Republic of Moldova	232	327	196	217	210	208	275	186	286	226	2 872
East	Russian Federation	0	–	–	–	–	–	–	–	–	–	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	5
Centre	Serbia	12	17	9	9	11	12	7	17	18	16	455
Centre	Serbia excluding Kosovo[1]	11	11	9	7	10	12	5	12	13	14	415
Centre	Kosovo[1]	1	6	–	2	1	–	2	5	5	2	40
West	Switzerland	85	69	52	54	32	33	28	27	28	26	2 793
East	Tajikistan	41	59	72	90	112	146	124	151	146	91	1 096
Centre	Turkey	26	37	35	41	58	39	28	30	37	35	762
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	2 264	3 944	4 873	4 875	5 806	5 250	5 708	6 243	6 306	5 443	57 486
East	Uzbekistan	68	–	–	–	–	–	–	–	–	–	183
	Total non-EU/EEA	**3 342**	**5 225**	**6 106**	**6 125**	**7 100**	**6 620**	**7 168**	**7 595**	**7 965**	**6 898**	**77 329**
WHO European Region												
West	West	2 932	2 556	2 538	2 155	1 971	1 843	1 735	1 481	1 355	1 030	95 094
Centre	Centre	281	377	333	360	404	380	367	370	385	364	7 252
East	East	3 216	5 069	6 014	5 996	6 986	6 532	7 089	7 543	7 876	6 826	72 565
	Total WHO European Region	**6 429**	**8 002**	**8 885**	**8 511**	**9 361**	**8 755**	**9 191**	**9 394**	**9 616**	**8 220**	**174 911**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 20. AIDS diagnoses in people infected through mother-to-child transmission, by country and year of diagnosis (2010–2019) and cumulative totals, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Year of diagnosis										Cumulative total[b]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	0	1	0	0	0	0	1	0	1	0	14
West	Belgium	0	1	2	1	1	3	1	0	0	–	145
Centre	Bulgaria	2	1	0	3	0	0	0	0	3	0	10
Centre	Croatia	0	1	0	0	0	0	0	0	0	0	4
Centre	Cyprus	0	0	0	0	0	0	0	0	0	0	2
Centre	Czechia	0	0	0	0	0	0	1	0	0	0	1
West	Denmark	1	0	0	1	0	0	0	1	0	0	26
East	Estonia	0	0	0	0	0	0	0	0	0	0	2
West	Finland	0	0	0	0	1	0	0	0	0	0	8
West	France	5	8	10	10	4	5	5	4	7	3	802
West	Germany	1	3	2	1	2	0	0	1	0	0	121
West	Greece	1	0	0	0	0	0	0	0	0	0	24
Centre	Hungary	0	0	1	0	0	1	0	2	1	0	8
West	Iceland	0	0	0	0	0	0	0	0	1	0	1
West	Ireland	1	0	0	1	0	0	0	0	0	0	36
West	Italy	3	3	4	7	2	0	1	0	0	0	740
East	Latvia	0	2	1	2	0	0	2	1	1	1	23
–	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	0	0	0	1	0	0	0	0	0	0	1
West	Luxembourg	0	0	1	0	0	0	0	0	0	0	4
West	Malta	0	0	0	0	0	0	0	0	0	0	1
West	Netherlands	8	4	2	5	3	4	0	1	2	0	115
West	Norway	0	0	0	1	0	0	0	1	0	0	8
Centre	Poland	1	3	1	0	1	1	0	0	1	0	70
West	Portugal	1	2	1	3	1	1	3	1	1	1	129
Centre	Romania	8	12	11	17	8	6	0	8	4	4	327
Centre	Slovakia	0	0	0	0	0	0	0	0	0	0	0
Centre	Slovenia	0	0	0	0	0	0	0	0	0	0	2
West	Spain	3	3	3	5	1	2	4	1	1	1	989
West	Sweden	–	–	–	–	–	–	–	–	–	–	22
West	United Kingdom	13	14	5	7	5	6	3	3	1	7	734
	Total EU/EEA	**48**	**58**	**44**	**65**	**29**	**29**	**21**	**24**	**24**	**17**	**4 369**
Non-EU/EEA												
Centre	Albania	0	1	2	4	0	0	0	1	0	1	11
West	Andorra	0	0	0	0	0	0	0	0	0	–	0
East	Armenia	1	1	0	4	7	2	0	2	3	1	28
East	Azerbaijan	1	1	3	3	2	0	1	0	0	1	16
East	Belarus	13	12	4	3	9	10	5	2	1	2	126
Centre	Bosnia and Herzegovina	0	0	0	0	0	0	0	0	0	0	0
East	Georgia	11	8	1	3	2	0	0	1	4	1	69
West	Israel	1	1	1	1	0	0	0	0	1	0	40
East	Kazakhstan	6	4	2	5	1	5	3	7	3	4	62
East	Kyrgyzstan	0	3	4	1	0	5	1	2	1	2	22
West	Monaco	0	0	0	0	0	0	0	0	0	–	0
Centre	Montenegro	0	0	0	0	0	0	0	0	0	0	1
Centre	North Macedonia	1	0	1	1	0	0	0	0	0	–	6
East	Republic of Moldova	4	7	6	10	8	2	4	5	5	2	82
East	Russian Federation	0	–	–	–	–	–	–	–	–	–	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	0
Centre	Serbia	1		1	1	–	1	–	–	1	–	29
Centre	Serbia excluding Kosovo[1]	1	0	0	1	0	0	0	0	0	0	26
Centre	Kosovo[1]	–	–	1	–	–	1	–	–	1	–	3
West	Switzerland	2	0	1	1	0	0	0	1	0	0	110
East	Tajikistan	1	7	6	15	10	4	6	6	8	2	66
Centre	Turkey	0	0	1	0	1	3	0	1	0	4	21
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	0
East	Ukraine	129	118	88	59	60	48	67	93	81	57	1 424
East	Uzbekistan	8	–	–	–	–	–	–	–	–	–	22
	Total non-EU/EEA	**179**	**163**	**121**	**111**	**100**	**80**	**87**	**121**	**108**	**77**	**2 135**
WHO European Region												
West	West	40	40	32	44	20	21	18	14	15	12	4 069
Centre	Centre	13	18	18	26	10	12	1	12	10	9	492
East	East	174	163	115	106	99	76	89	119	107	73	1 943
	Total WHO European Region	**227**	**221**	**165**	**176**	**129**	**109**	**108**	**145**	**132**	**94**	**6 504**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Table 21. AIDS diagnoses in 2019, by country of report, transmission mode and sex, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Sex between men		Injecting drug users			Heterosexual			Mother-to-child transmission		
		Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]
EU/EEA												
West	Austria	23	23	2	4	6	9	12	21	0	0	0
West	Belgium	–	–	–	–	–	–	–	–	–	–	–
Centre	Bulgaria	28	28	4	14	18	8	14	22	0	0	0
Centre	Croatia	17	17	0	0	0	2	0	2	0	0	0
Centre	Cyprus	1	1	0	0	0	1	1	2	0	0	0
Centre	Czechia	17	17	2	2	4	8	8	16	0	0	0
West	Denmark	8	8	0	0	0	7	7	14	0	0	0
East	Estonia	0	0	1	8	9	5	9	14	0	0	0
West	Finland	1	1	0	0	0	4	7	11	0	0	0
West	France	109	114	1	15	16	91	126	218	1	2	3
West	Germany	35	35	1	3	4	13	6	19	0	0	0
West	Greece	29	29	1	8	9	19	15	34	0	0	0
Centre	Hungary	37	37	0	0	1	7	7	14	0	0	0
West	Iceland	3	3	0	0	0	0	0	0	0	0	0
West	Ireland	2	2	0	0	0	2	1	3	0	0	0
West	Italy	181	181	12	58	70	85	181	266	0	0	0
East	Latvia	3	3	5	27	32	28	18	46	0	1	1
–	Liechtenstein	0	0	0	0	0	0	0	0	0	0	0
East	Lithuania	0	0	2	9	11	3	6	9	0	0	0
West	Luxembourg	0	0	0	0	0	2	1	3	0	0	0
West	Malta	0	0	0	0	0	0	0	0	0	0	0
West	Netherlands	42	44	1	1	2	11	13	24	0	0	0
West	Norway	3	3		1	1	5	10	15	0	0	0
Centre	Poland	17	17	1	7	8	6	11	17	0	0	0
West	Portugal	27	27	2	11	13	52	69	121	0	1	1
Centre	Romania	35	35	3	34	37	72	120	192	3	1	4
Centre	Slovakia	1	1	0	0	0	0	0	0	0	0	0
Centre	Slovenia	2	2	1	0	1	3	0	3	0	0	0
West	Spain	100	100	7	18	25	37	59	96	0	1	1
West	Sweden	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	87	87	0	6	6	53	87	140	4	3	7
	Total EU/EEA	**808**	**815**	**46**	**227**	**273**	**533**	**788**	**1 322**	**8**	**9**	**17**
Non-EU/EEA												
Centre	Albania	2	2	–	–	0	14	23	37	–	1	1
West	Andorra	–	–	–	–	–	–	–	–	–	–	–
East	Armenia	7	7	–	14	14	44	106	150	1	–	1
East	Azerbaijan	8	8	2	58	60	43	81	124	–	1	1
East	Belarus	7	7	20	64	84	118	161	279	–	2	2
Centre	Bosnia and Herzegovina	3	3	–	–	0	2	3	5	–	–	0
East	Georgia	26	26	1	60	61	64	113	177	1	–	1
West	Israel	2	2	–	2	2	8	11	19	–	–	0
East	Kazakhstan	6	6	33	152	185	109	123	232	4	–	4
East	Kyrgyzstan	1	1		3	3	16	19	35		2	2
West	Monaco	–	–	–	–	–	–	–	–	–	–	–
Centre	Montenegro	4	4	–	–	0		3	3	–	–	0
Centre	North Macedonia	–	–	–	–	–	–	–	–	–	–	–
East	Republic of Moldova	3	3	3	20	23	88	138	226	1	1	2
East	Russian Federation	–	–	–	–	–	–	–	–	–	–	–
West	San Marino	–	0	–	–	0	–	–	0	–	–	0
Centre	Serbia	–	0	–		0	–	–	0	–	–	0
Centre	Serbia excluding Kosovo[1]	41	41	1	1	2	11	3	14	–	–	0
Centre	Kosovo[1]	3	3			0	1	1	2	–	–	0
West	Switzerland	15	15	–	4	4	9	17	26	–	–	0
East	Tajikistan		0	1	25	26	31	60	91	1	1	2
Centre	Turkey	15	15	–	–	0	7	28	35	2	2	4
East	Turkmenistan	–	–	–	–	–	–	–	–	–	–	–
East	Ukraine	82	82	254	1 662	1 916	2 566	2 877	5 443	23	34	57
East	Uzbekistan	–	–	–	–	–	–	–	–	–	–	–
	Total non-EU/EEA	**225**	**225**	**315**	**2 065**	**2 380**	**3 031**	**3 667**	**6 698**	**33**	**44**	**77**
WHO European Region												
West	West	667	674	27	131	158	407	622	1 030	5	7	12
Centre	Centre	223	223	12	59	71	142	222	364	5	4	9
East	East	143	143	322	2 102	2 424	3 115	3 711	6 826	31	42	73
	Total WHO European Region	**1 033**	**1 040**	**361**	**2 292**	**2 653**	**3 664**	**4 555**	**8 220**	**41**	**53**	**94**

[a] Country-specific comments are in Annex 5.

[b] Cumulative total is the total number of cases reported by the country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Nosocomial			Haemophiliac/transfusion			Unknown			Total[b]	Country, territory or area[a]
Female	Male	Total[b]	Female	Male	Total[b]	Female	Male	Total[b]		
										EU/EEA
0	0	0	0	0	2	0	4	4	56	Austria
–	–	–	–	–	–	–	–	–	–	Belgium
0	0	0	0	0	0	0	0	0	68	Bulgaria
0	0	0	0	0	0	0	1	1	20	Croatia
0	0	0	0	0	0	0	0	0	3	Cyprus
0	1	1	0	0	0	0	0	0	38	Czechia
0	0	0	0	0	0	0	0	0	22	Denmark
0	0	0	0	0	0	3	2	5	28	Estonia
0	1	1	0	0	0	2	3	5	18	Finland
0	0	0	1	1	2	18	58	77	430	France
0	0	0	0	0	0	5	11	16	74	Germany
0	0	0	0	0	0	3	11	14	86	Greece
0	0	0	0	1	1	0	0	0	53	Hungary
0	0	0	0	0	0	1	0	1	4	Iceland
0	0	0	0	0	0	0	1	1	6	Ireland
0	0	0	0	0	0	8	46	54	571	Italy
0	0	0	0	0	0	4	4	8	90	Latvia
0	0	0	0	0	0	0	0	0	0	Liechtenstein
0	0	0	0	0	0	0	1	1	21	Lithuania
0	0	0	0	0	0	0	0	0	3	Luxembourg
0	0	0	0	0	0	0	0	0	0	Malta
1	1	2	0	0	0	5	16	21	93	Netherlands
0	0	0	0	0	0	0	0	0	19	Norway
0	0	0	0	0	0	8	35	43	85	Poland
0	0	0	2	0	2	4	4	8	172	Portugal
0	0	0	0	0	0	8	6	14	282	Romania
0	0	0	0	0	0	0	2	2	3	Slovakia
0	0	0	0	0	0	0	1	1	7	Slovenia
0	0	0	0	0	0	2	27	29	251	Spain
–	–	–	–	–	–	–	–	–	–	Sweden
0	0	0	0–	2	2	7	20	27	269	United Kingdom
1	**3**	**4**	**3**	**6**	**9**	**78**	**253**	**332**	**2 772**	**Total EU/EEA**
										Non-EU/EEA
–	–	0	–	–	0	–	–	0	40	Albania
–	–	–	–	–	–	–	–	–	–	Andorra
1	–	1	–	–	0	–	–	0	173	Armenia
–	–	0	–	–	0	1	2	3	196	Azerbaijan
–	–	0	–	–	0	1	7	8	380	Belarus
–	–	0	–	–	0	–	–	0	8	Bosnia and Herzegovina
–	–	0	–	–	0	–	–	0	265	Georgia
–	–	0	–	–	0	–	–	0	23	Israel
1	2	3	–	–	0	7	4	11	441	Kazakhstan
–	–	0	–	–	0	4	1	5	46	Kyrgyzstan
–	–	–	–	–	–	–	–	–	–	Monaco
–	–	0	–	–	0	–	3	3	10	Montenegro
–	–	–	–	–	–	–	–	–	–	North Macedonia
–	–	0	–	–	0	13	18	31	285	Republic of Moldova
–	–	–	–	–	–	–	–	–	–	Russian Federation
–	–	0	–	–	0	–	–	0	0	San Marino
–	–	0	–	–	0	–	–	0	0	Serbia
–	–	0	–	–	0	3	8	11	68	Serbia excluding Kosovo[1]
–	–	0	–	–	0	–	–	0	5	Kosovo[1]
–	–	0	–	1	1	–	13	13	59	Switzerland
–	–	0	1	–	1	9	12	21	141	Tajikistan
1	–	1	–	–	0	10	47	57	112	Turkey
–	–	–	–	–	–	–	–	–	–	Turkmenistan
–	–	0	1	–	1	6	6	12	7 511	Ukraine
–	–	–	–	–	–	–	–	–	–	Uzbekistan
3	**2**	**5**	**2**	**1**	**3**	**54**	**121**	**175**	**9 763**	**Total non-EU/EEA**
										WHO European Region
1	2	3	3	6	9	55	214	270	2 156	West
1	1	2	0	0	1	29	103	132	802	Centre
2	2	4	2	0	2	48	57	105	9 577	East
4	**5**	**9**	**5**	**7**	**12**	**132**	**374**	**507**	**12 535**	**Total WHO European Region**

Table 22. The most common AIDS-indicative diseases diagnosed in 2019,[a] ordered by frequency

Diseases	Men		Women		Children		Total	
	N	%	N	%	N	%	N	%
EU/EEA								
Pneumocystis carinii pneumonia	567	21.5	178	21.1	2	4.9	747	21.2
Wasting syndrome due to HIV	307	11.6	88	10.4	10	24.4	405	11.5
Candidiasis; oesophageal	309	11.7	90	10.7	2	4.9	401	11.4
Kaposi's sarcoma	287	10.9	36	4.3	0	0.0	323	9.2
Mycobacterium tuberculosis; pulmonary in an adult or an adolescent (aged 13 years or over)	180	6.8	77	9.1	2	4.9	259	7.3
Cytomegalovirus disease (other than liver, spleen or nodes) in a patient over 1 month of age	157	5.9	42	5.0	3	7.3	202	5.7
Toxoplasmosis of brain in a patient over 1 month of age	102	3.9	69	8.2	2	4.9	173	4.9
Mycobacterium tuberculosis; extrapulmonary	102	3.9	47	5.6	0	0.0	149	4.2
Encephalopathy; HIV-related	101	3.8	35	4.1	6	14.6	142	4.0
Pneumonia; recurrent in an adult or an adolescent (aged 13 years or over)	54	2.0	22	2.6	4	9.8	80	2.3
Non-EU/EEA								
Wasting syndrome due to HIV	247	16.0	123	18.6	18	26.5	388	17.1
Mycobacterium tuberculosis; pulmonary in an adult or an adolescent (aged 13 years or over)	244	15.9	72	10.9	8	11.8	324	14.3
Candidiasis; oesophageal	216	14.0	81	12.3	5	7.4	302	13.3
Pneumocystis carinii pneumonia	146	9.5	57	8.6	10	14.7	213	9.4
Mycobacterium tuberculosis; extrapulmonary	133	8.6	39	5.9	0	0.0	172	7.6
Encephalopathy; HIV-related	78	5.1	42	6.4	4	5.9	124	5.5
Pneumonia; recurrent in an adult or an adolescent (aged 13 years or over)	41	2.7	21	3.2	5	7.4	67	3.0
Kaposi's sarcoma	42	2.7	7	1.1	0	0.0	49	2.2
Herpes simplex: chronic ulcer(s) (› 1 month duration); or bronchitis; pneumonitis; or oesophagitis in a patient over 1 month of age	20	1.3	10	1.5	5	7.4	35	1.5
Cytomegalovirus disease (other than liver, spleen or nodes) in a patient over 1 month of age	22	1.4	9	1.4	3	4.4	34	1.5
West								
Pneumocystis carinii pneumonia	489	23.5	147	24.0	1	10.0	637	23.6
Candidiasis; oesophageal	254	12.2	68	11.1	0	0.0	322	11.9
Kaposi's sarcoma	262	12.6	36	5.9	0	0.0	298	11.0
Wasting syndrome due to HIV	180	8.7	41	6.7	1	10.0	222	8.2
Cytomegalovirus disease (other than liver, spleen or nodes) in a patient over 1 month of age	146	7.0	41	6.7	1	10.0	188	7.0
Toxoplasmosis of brain in a patient over 1 month of age	91	4.4	51	8.3	0	0.0	142	5.3
Mycobacterium tuberculosis; pulmonary in an adult or an adolescent (aged 13 years or over)	94	4.5	38	6.2	0	0.0	132	4.9
Mycobacterium tuberculosis; extrapulmonary	81	3.9	40	6.5	0	0.0	121	4.5
Encephalopathy; HIV-related	71	3.4	16	2.6	0	0.0	87	3.2
Lymphoma; Burkitt (or equivalent term)	47	2.3	13	2.1	0	0.0	60	2.2
Centre								
Wasting syndrome due to HIV	162	21.0	58	22.6	9	23.7	229	21.4
Pneumocystis carinii pneumonia	105	13.6	29	11.3	1	2.6	135	12.6
Mycobacterium tuberculosis; pulmonary in an adult or an adolescent (aged 13 years or over)	87	11.3	35	13.6	2	5.3	124	11.6
Candidiasis; oesophageal	79	10.2	27	10.5	2	5.3	108	10.1
Encephalopathy; HIV-related	42	5.4	19	7.4	6	15.8	67	6.3
Pneumonia; recurrent in an adult or an adolescent (aged 13 years or over)	30	3.9	15	5.8	3	7.9	48	4.5
Kaposi's sarcoma	44	5.7	2	0.8	0	0.0	46	4.3
Toxoplasmosis of brain in a patient over 1 month of age	15	1.9	15	5.8	2	5.3	32	3.0
Mycobacterium tuberculosis; extrapulmonary	23	3.0	7	2.7	0	0.0	30	2.8
Cytomegalovirus disease (other than liver, spleen or nodes) in a patient over 1 month of age	23	3.0	3	1.2	3	7.9	29	2.7
East								
Wasting syndrome due to HIV	212	16.0	112	17.6	18	29.5	342	16.9
Mycobacterium tuberculosis; pulmonary in an adult or an adolescent (aged 13 years or over)	243	18.3	76	11.9	8	13.1	327	16.1
Candidiasis; oesophageal	192	14.5	76	11.9	5	8.2	273	13.5
Pneumocystis carinii pneumonia	119	9.0	59	9.3	10	16.4	188	9.3
Mycobacterium tuberculosis; extrapulmonary	131	9.9	39	6.1	0	0.0	170	8.4
Encephalopathy; HIV-related	66	5.0	42	6.6	4	6.6	112	5.5
Pneumonia; recurrent in an adult or an adolescent (aged 13 years or over)	30	2.3	18	2.8	5	8.2	53	2.6
Toxoplasmosis of brain in a patient over 1 month of age	14	1.1	15	2.4	0	0.0	29	1.4
Kaposi's sarcoma	23	1.7	5	0.8	0	0.0	28	1.4
Progressive multifocal leukoencephalopathy	19	1.4	8	1.3	0	0.0	27	1.3

[a] Numbers and percentages relate to AIDS-indicative disease events reported; some people diagnosed with AIDS have more than one event reported at the time of diagnosis.

Table 23. AIDS-related deaths,[a] by geographic area, country and year of death (2010–2019) and cumulative totals in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[b]	Year of diagnosis										Cumulative total[c]
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	40	39	34	41	42	37	32	43	40	24	1 662
West	Belgium	19	31	30	37	35	23	29	26	14		2 136
Centre	Bulgaria	14	17	16	14	13	8	9	10	9	17	209
Centre	Croatia	7	6	9	7	5	15	3	2	2	4	202
Centre	Cyprus	3	4	5	5	4	4	5	3	3	2	132
Centre	Czechia	10	14	17	13	15	12	18	20	18	7	311
West	Denmark	3	6	2	4	0	1	2		–	–	2 020
East	Estonia	2	7	5	2	2	2	2	4	4	1	121
West	Finland	10	6	13	8	5	6	5	9	6	1	238
West	France	210	173	158	134	127	103	129	123	174	139	37 067
West	Germany	117	126	87	111	101	76	77	71	71	34	14 970
West	Greece	48	50	52	43	47	50	42	43	40	36	1 939
Centre	Hungary	15	17	11	11	19	11	11	9	18	19	459
West	Iceland	0	1	1	0	0	0	1	0	0	0	40
West	Ireland	5	4	1	0	0	1	1	1	0	0	417
West	Italy	645	644	636	653	573	561	533	511	–	–	45 861
East	Latvia	57	80	88	107	75	45	41	37	29	30	898
–	Liechtenstein	0	0	0	0	0	0	0	0	0	0	6
East	Lithuania	12	9	10	18	16	12	23	15	14	5	241
West	Luxembourg	1	5	7	3	2	4	4	1	1	4	152
West	Malta	0	1	2	0	1	1	3	0	0	0	65
West	Netherlands	70	92	89	85	89	90	100	90	82	63	2 074
West	Norway	0	1	1	2	3	2	0	2	1	1	634
Centre	Poland	53	68	57	48	42	41	27	20	23	15	1 428
West	Portugal	338	308	260	273	208	176	189	167	155	91	10 793
Centre	Romania	134	216	188	199	239	196	193	190	175	151	4 915
Centre	Slovakia	1	1	3	0	0	4	2	1	3	2	51
Centre	Slovenia	2	1	2	7	4	6	3	2	1	2	119
West	Spain	458	428	375	311	234	185	179	110	76	24	48 991
West	Sweden	–	–	–	–	–	–	–	–	–	–	1 323
West	United Kingdom	313	161	157	161	151	117	106	110	96	101	16 690
	Total EU/EEA	**2 587**	**2 516**	**2 316**	**2 297**	**2 052**	**1 789**	**1 769**	**1 621**	**1 055**	**774**	**196 164**
Non-EU/EEA												
Centre	Albania	12	11	13	10	13	13	12	4	11	8	184
West	Andorra	0	0	0	0	0	3	0	0	0	–	4
East	Armenia	23	26	36	45	50	62	53	74	61	59	643
East	Azerbaijan	46	44	50	39	51	38	31	26	22	75	1 057
East	Belarus	146	159	188	129	170	126	119	80	110	127	3 638
Centre	Bosnia and Herzegovina	0	0	0	2	1	4	2	0	2	2	68
East	Georgia	80	97	83	82	68	70	132	96	100	77	1 303
West	Israel	25	33	31	31	33	26	29	14	14	8	1 035
East	Kazakhstan	192	205	189	189	160	207	235	255	283	305	3 045
East	Kyrgyzstan	26	19	19	6	9	38	20	27	23	12	318
West	Monaco	0	0	0	0	0	0	0	0	0	–	18
Centre	Montenegro	5	2	1	1	2	6	2	4	2	4	60
Centre	North Macedonia	1	4	0	3	0	0	0	2	1	–	67
East	Republic of Moldova	85	98	67	90	98	83	91	82	37	54	1 109
East	Russian Federation	0	–	–	–	–	–	–	–	–	–	0
West	San Marino	0	0	0	0	0	0	0	0	0	0	8
Centre	Serbia	26	33	21	18	10	16	13	14	25	23	1 203
Centre	Serbia excluding Kosovo[1]	26	31	17	17	10	15	10	14	24	21	1 155
Centre	Kosovo[1]		2	4	1	–	1	3	–	1	2	48
West	Switzerland	23	13	3	4	5	5	1	4	2	1	5 905
East	Tajikistan	55	58	95	94	95	126	128	185	144	108	1 179
Centre	Turkey	0	0	0	10	11	4	4	5	8	4	120
East	Turkmenistan	0	0	0	–	–	–	–	–	–	–	1
East	Ukraine	3 096	3 736	3 870	3 514	3 426	3 032	3 253	3 298	3 448	2 977	51 433
East	Uzbekistan	66	–	–	–	–	–	–	–	–	–	323
	Total non-EU/EEA	**3 907**	**4 538**	**4 666**	**4 267**	**4 202**	**3 859**	**4 125**	**4 170**	**4 293**	**3 755**	**71 170**
WHO European Region												
West	West	2 325	2 122	1 939	1 901	1 656	1 467	1 462	1 325	772	527	194 042
Centre	Centre	283	394	343	348	378	340	304	286	301	260	9 528
East	East	3 886	4 538	4 700	4 315	4 220	3 841	4 128	4 179	4 275	3 830	65 309
	Total WHO European Region	**6 494**	**7 054**	**6 982**	**6 564**	**6 254**	**5 648**	**5 894**	**5 790**	**5 348**	**4 618**	**268 879**

[a] This table includes deaths reported as due to AIDS and excludes deaths reported as not due to AIDS-related cases. In countries and years for which cause of death (AIDS or non-AIDS-related) was unknown or could not be reported, deaths among persons (ever) diagnosed with AIDS were included. Spain has changing national coverage of AIDS reporting during the period (see Annex 5) and trends should be interpreted with caution.

[b] Country-specific comments are in Annex 5.

[c] Cumulative total is the total number of deaths reported by country since the start of reporting.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

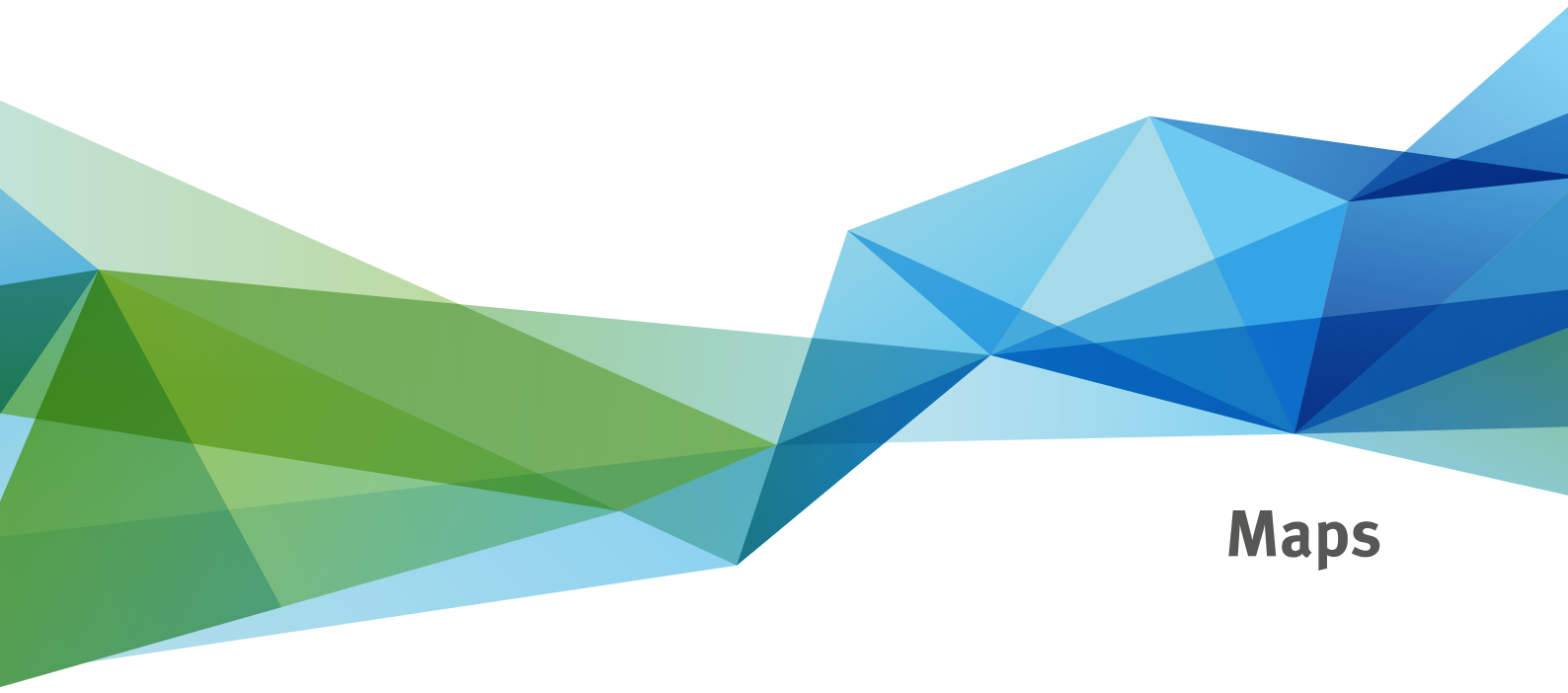
Table 24. Number of HIV tests performed, excluding unlinked anonymous testing and testing of blood donations, by country and year (2010–2019) and number of tests per 1000 population in 2019, in EU/EEA and other countries of the WHO European Region

Area	Country, territory or area[a]	Number of HIV tests										Tests/1 000 population
		2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
EU/EEA												
West	Austria	–	–	–	–	–	–	–	–	–	–	–
West	Belgium	651 095	679 655	703 486	695 433	697 684	692 679	726 457	714 382	729 603	–	–
Centre	Bulgaria	160 000	180 000	190 000	–	230 000	290 000	–	–	360 000	360 000	51.4
Centre	Croatia	–	–	–	–	–	–	–	–	–	–	–
Centre	Cyprus	48 385	49 074	54 120	50 235	–	–	52 385	–	–	–	–
Centre	Czechia	353 507	334 569	349 205	341 583	349 448	345 274	350 234	351 650	353 425	359 327	33.7
West	Denmark	168 923	137 877	134 709	–	–	–	–	–	–	–	–
East	Estonia	78 054	85 025	73 367	82 279	82 266	87 587	90 136	102 863	112 487	125 273	94.6
West	Finland	–	–	–	–	–	–	–	–	–	–	–
West	France	5 007 171	5 238 567	5 251 272	5 239 389	5 282 844	5 390 760	5 503 259	5 614 818	5 828 267	6 170 133	92.1
West	Germany	–	–	–	–	–	–	–	–	–	–	–
West	Greece[b]	31 070	31 918	34 622	32 241	240 116	192 150	196 257	176 966	187 627	–	–
Centre	Hungary	89 137	84 464	93 060	95 861	93 289	91 793	–	–	–	–	–
West	Iceland	7 318	–	–	–	–	–	–	–	–	–	–
West	Ireland[b]	180 055	184 521	175 488	150 597	168 028	178 267	192 956	223 609	239 571	–	–
West	Italy	–	–	–	–	–	–	–	–	–	–	–
East	Latvia	58 826	58 799	60 491	58 302	60 614	65 552	79 715	82 608	90 368	98 651	51.4
–	Liechtenstein	–	–	–	–	–	–	–	–	–	–	–
East	Lithuania	178 554	102 234	101 042	102 161	108 781	105 486	104 132	113 917	109 825	133 810	47.9
West	Luxembourg	–	–	–	–	–	–	71 200	100 529	–	–	–
West	Malta	–	–	–	–	–	–	–	–	–	–	–
West	Netherlands	–	–	–	–	–	–	–	–	–	–	–
West	Norway	–	–	–	–	–	–	–	–	–	–	–
Centre	Poland	229 783	317 286	358 953	313 341	272 102	318 458	440 365	430 266	382 953	421 039	11.1
West	Portugal[b]	–	–	–	–	–	–	–	–	257 485	–	–
Centre	Romania		306 679	293 204	302 898	332 422	346 032	360 893	338 898	323 468	334 410	17.2
Centre	Slovakia	109 261	110 025	110 506	114 574	126 187	127 109	104 876	111 340	177 498		
Centre	Slovenia	36 977	38 110	33 602	33 457	35 498	34 366	35 788	37 315	38 570	40 462	19.4
West	Spain	–	–	–	–	–	–	–	–	–	–	–
West	Sweden	–	–	–	–	–	–	–	–	–	–	–
West	United Kingdom	–	–	–	–	–	–	–	–	–	–	–
Non-EU/EEA												
Centre	Albania	2 168	3 260	3 140	3 063	4 156	5 442	5 582	7 149	–	13 261	4.6
West	Andorra	2 678	2 590	2 062	2 310	2 378	2 212	2 340	2 591	2 712	–	–
East	Armenia	60 731	68 449	71 957	83 431	94 122	117 012	99 270	119 628	132 509	164 933	55.8
East	Azerbaijan	353 772	365 090	514 434	482 282	612 860	714 621	500 469	657 704	753 568	–	–
East	Belarus	517 625	621 780	683 125	770 136	1 157 072	1 249 712	1 464 386	1 514 635	1 627 169	1 488 199	157.4
Centre	Bosnia and Herzegovina	20 793	–	–	–	–	–	–	–	–	–	–
East	Georgia	25 370	21 799	15 562	18 091	86 290	78 261	119 868	207 175	188 142	441 119	110.4
West	Israel	286 995	274 294	233 516	–	–	–	–	–	–	–	–
East	Kazakhstan	1 786 289	1 897 476	2 026 174	2 127 136	2 190 757	2 388 347	2 587 065	2 742 741	2 760 324	2 877 706	155.1
East	Kyrgyzstan	297 959	381 295	470 355	370 160	410 331	376 284	331 609	376 431	356 765	384 988	60.0
West	Monaco	–	–	–	–	–	–	–	–	–	–	–
Centre	Montenegro	6 492	6 914	6 781	6 970	6 571	6 607	6 324	5 606	6 890	6 575	10.5
Centre	North Macedonia	18 721	17 811	18 105	24 562	27 430	28 601	30 211	36 248	–	–	–
East	Republic of Moldova	207 018	207 830	212 964	146 105	133 476	146 762	124 010	160 947	154 575	182 196	45.1
East	Russian Federation[b]	25 982 486	25 812 467	27 286 151	28 327 314	29 878 681	30 750 547	32 855 597	36 445 059	40 485 246	47 206 251	323.6
West	San Marino	5 090	3 961	3 845	4 004	3 427	1 548	3 600	3 685	3 411	2 200	65.0
Centre	Serbia	–	–	–	–	–	–	–	–	–	–	–
Centre	Serbia excluding Kosovo[1]	51 727	56 086	64 031	65 829	56 282	61 877	65 827	76 367	76 653	88 490	12.6
Centre	Kosovo[1]	1 141	1 189	1 335	1 250	–	1 312	2 599	4 551	4 877	2 018	1.1
West	Switzerland	–	–	–	–	–	–	–	–	–	–	–
East	Tajikistan	280 281	438 532	447 636	514 701	634 791	597 426	509 092	612 123	–	1 062 509	114.0
Centre	Turkey	5 010 334	5 693 965	5 952 148	6 515 931	6 663 547	7 203 959	6 263 020	7 107 551	7 457 674	9 123 920	109.4
East	Turkmenistan	–	–	–	–	–	–	–	–	–	–	–
East	Ukraine	2 319 946	2 392 970	2 343 099	2 941 748	1 853 626	1 695 926	1 697 479	1 816 023	1 868 565	1 961 711	46.7
East	Uzbekistan	1 506 724	–	–	–	–	–	–	–	–	–	–

[a] Country-specific comments are in Annex 5.

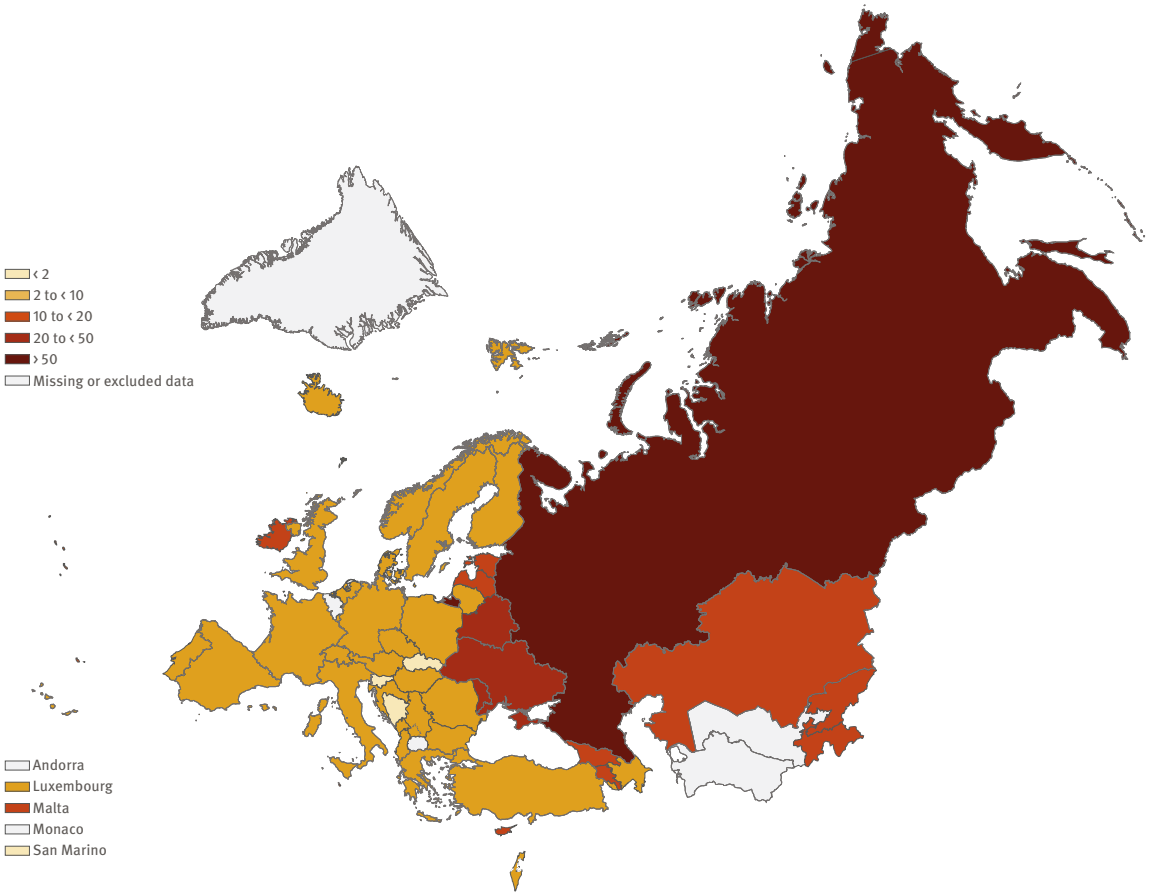
[b] HIV tests in Greece refer only to those performed in reference centres and do not include all tests carried out in public hospitals or private laboratories. Number of tests in Portugal refers only to those requested at public primary health-care centres and does not include those requested in hospitals and the private sector. Number of tests in Ireland includes antenatal tests in the total and, for 2018, include community-based rapid testing. HIV tests in the Russian Federation include blood donors.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).



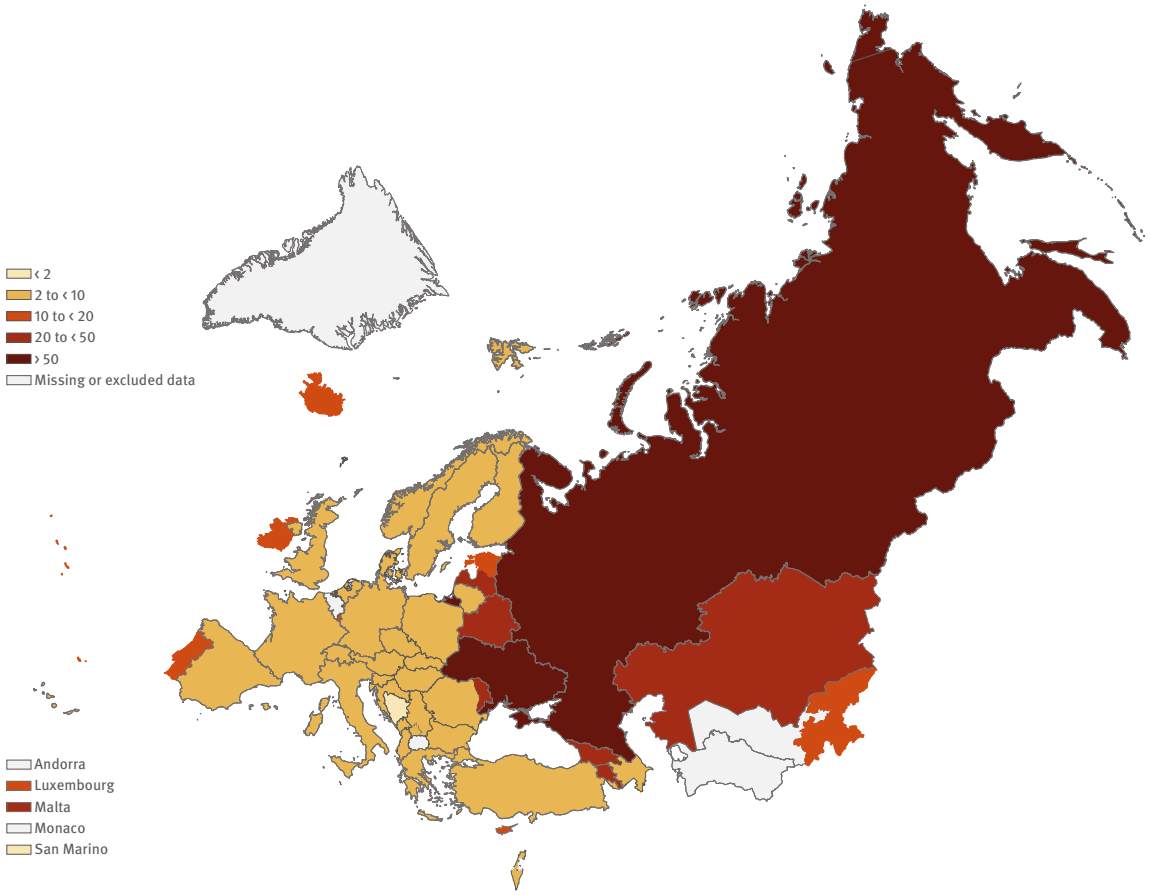
Maps

Map 1. New HIV diagnoses, per 100 000 population, 2019

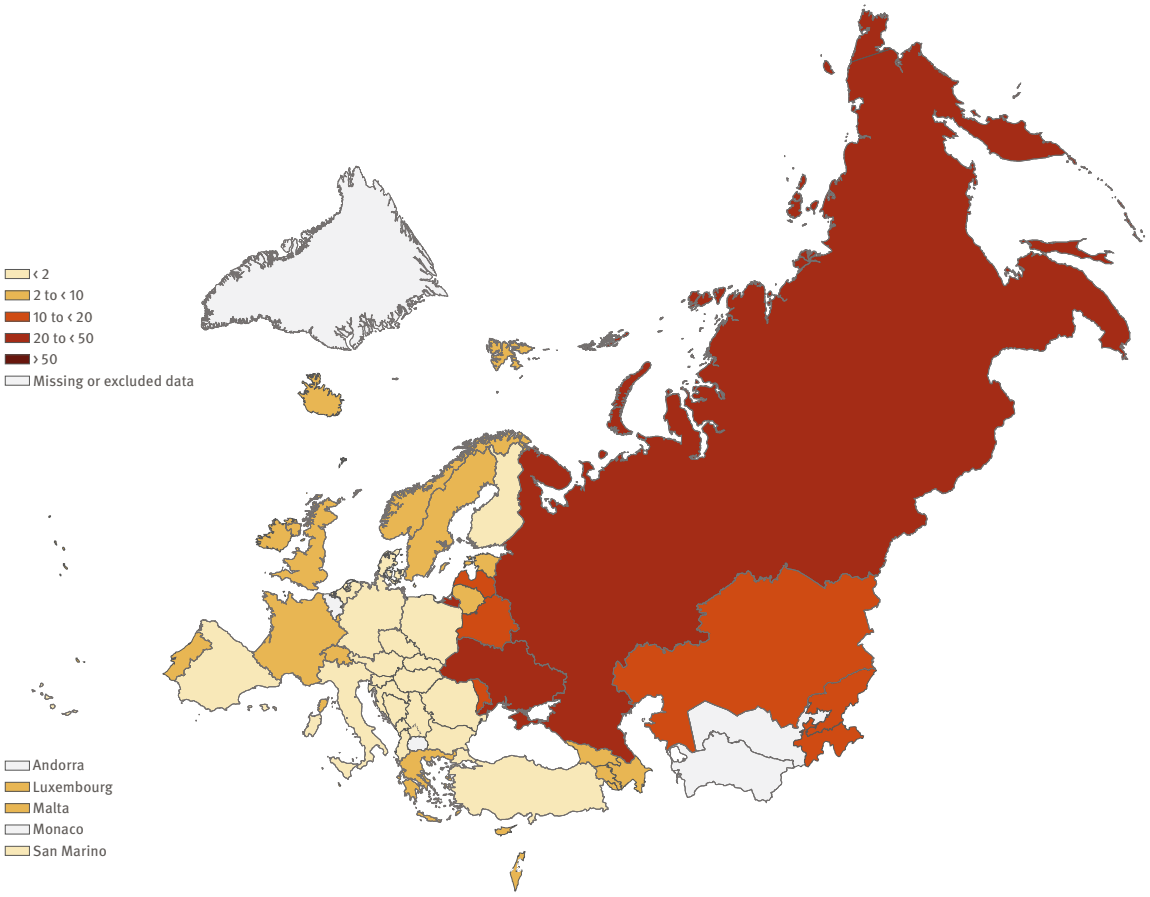


Note: all data presented were reported to ECDC/the WHO Regional Office for Europe through the European Surveillance System (TESSy).

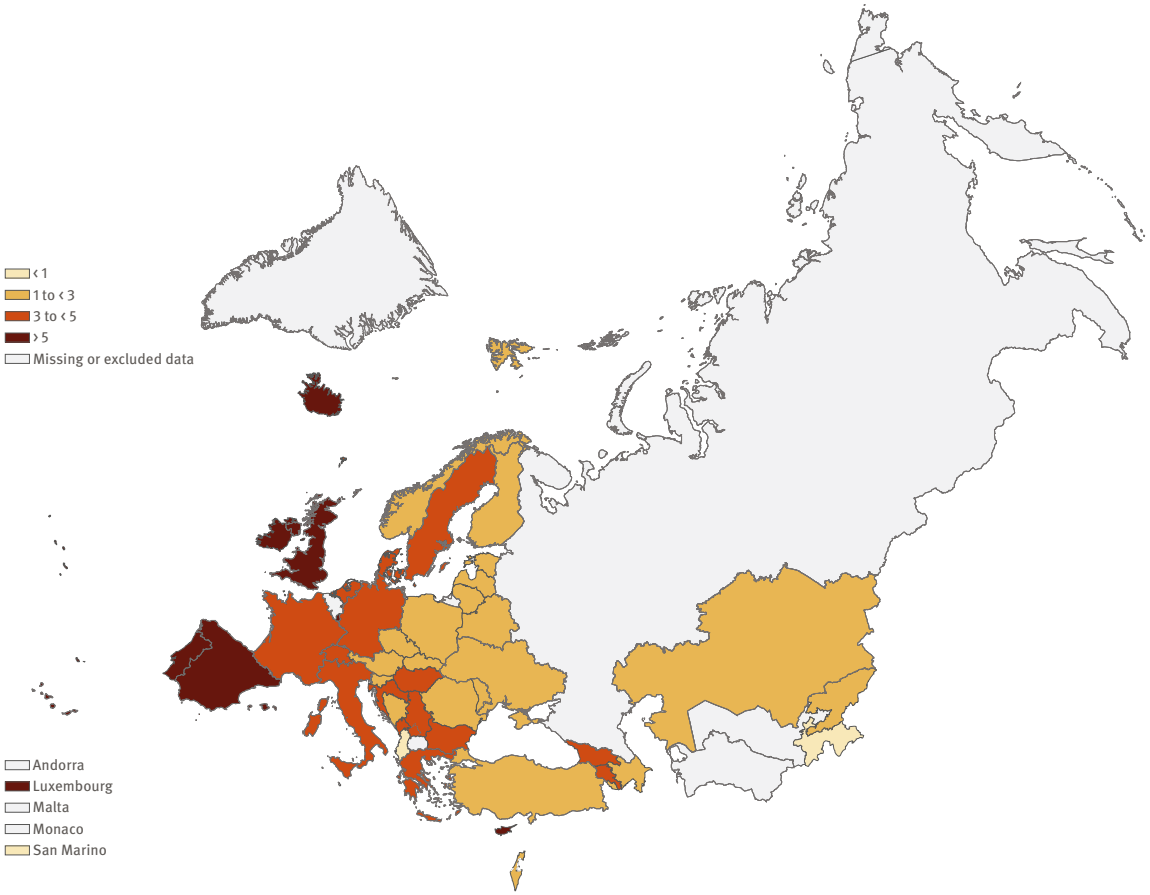
Map 2. New HIV diagnoses in men, per 100 000 male population, 2019



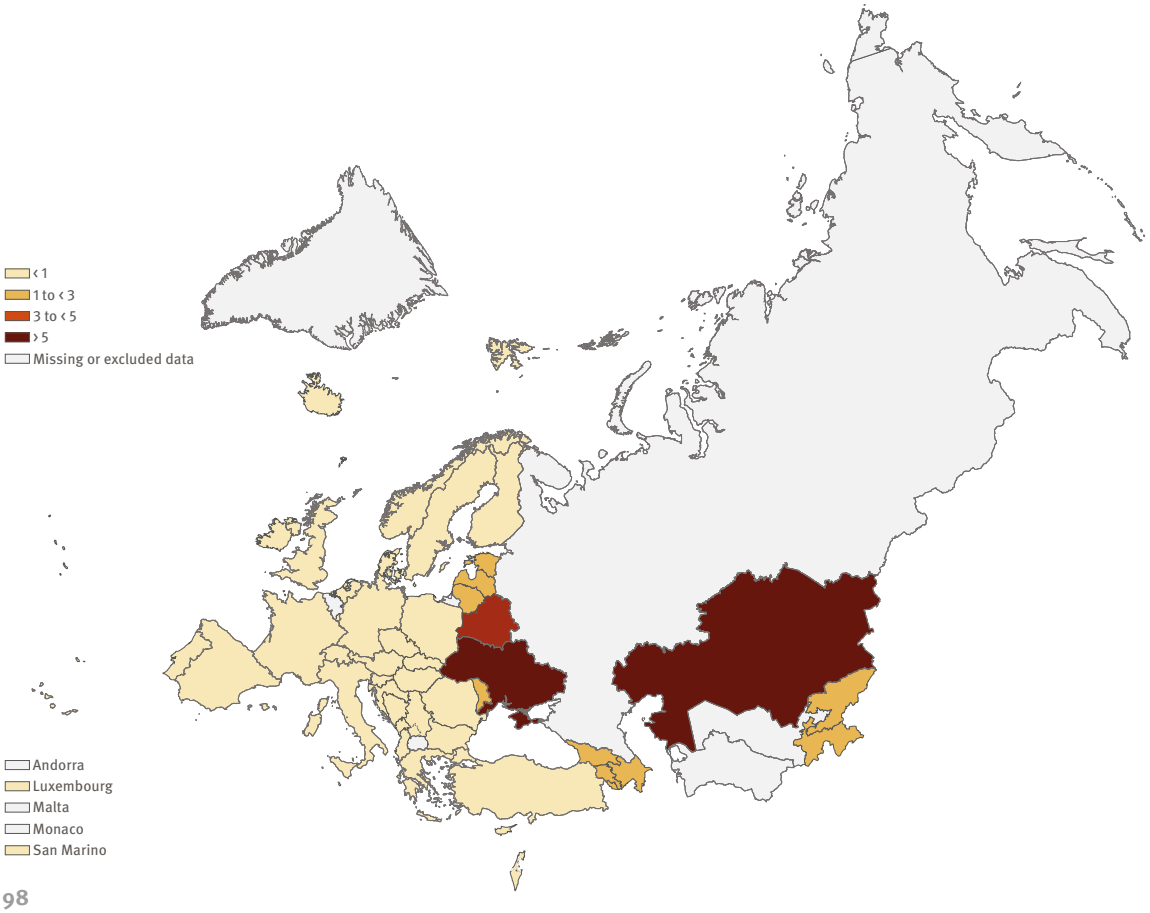
Map 3. New HIV diagnoses in women, per 100 000 female population, 2019



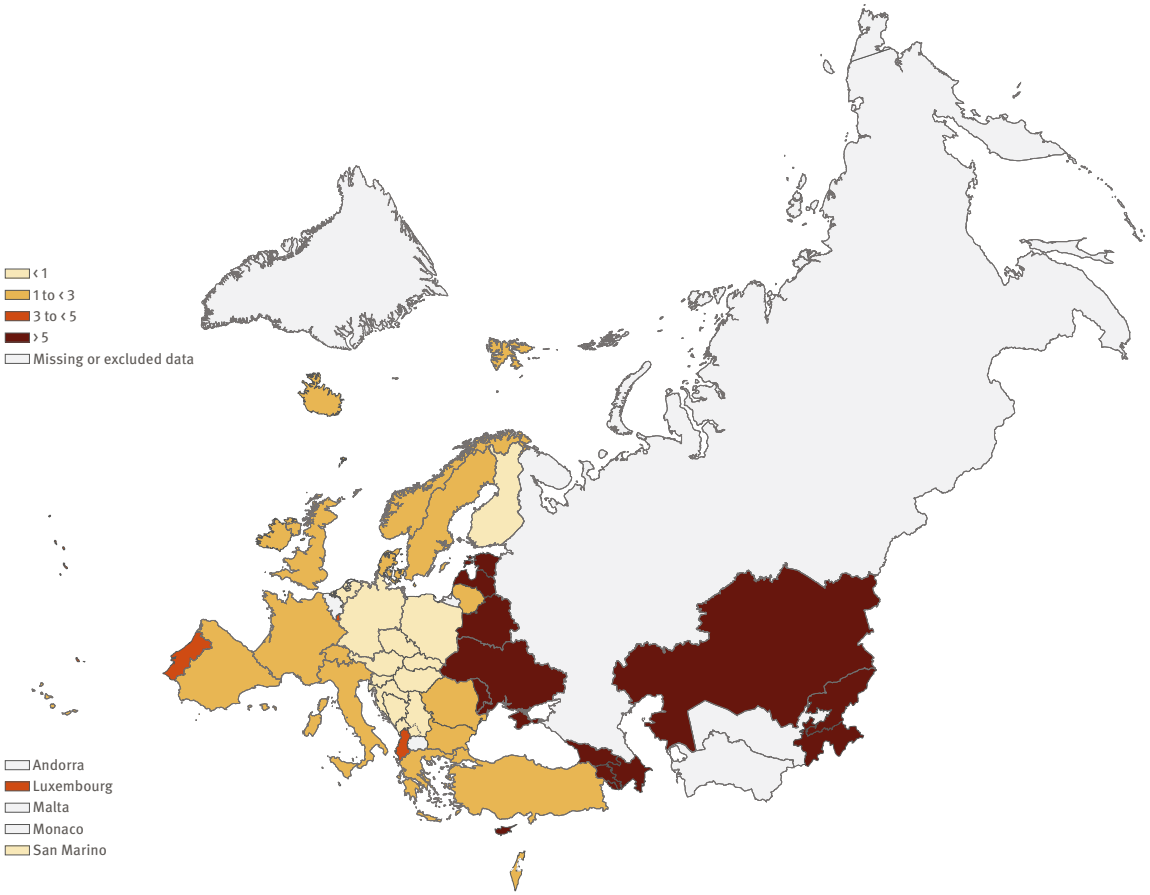
Map 4. New HIV diagnoses in men who have sex with men, per 100 000 male population, 2019



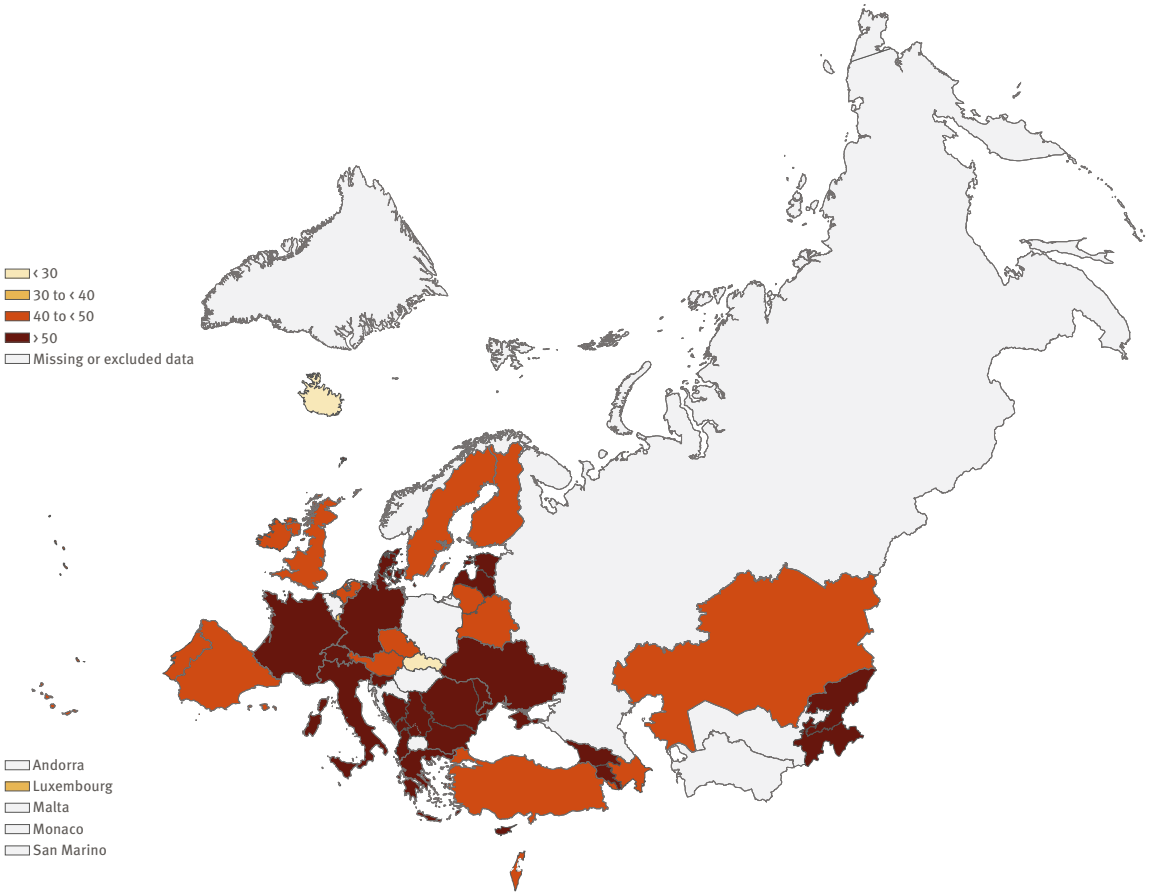
Map 5. New HIV diagnoses acquired through injecting drug use, per 100 000 population, 2019



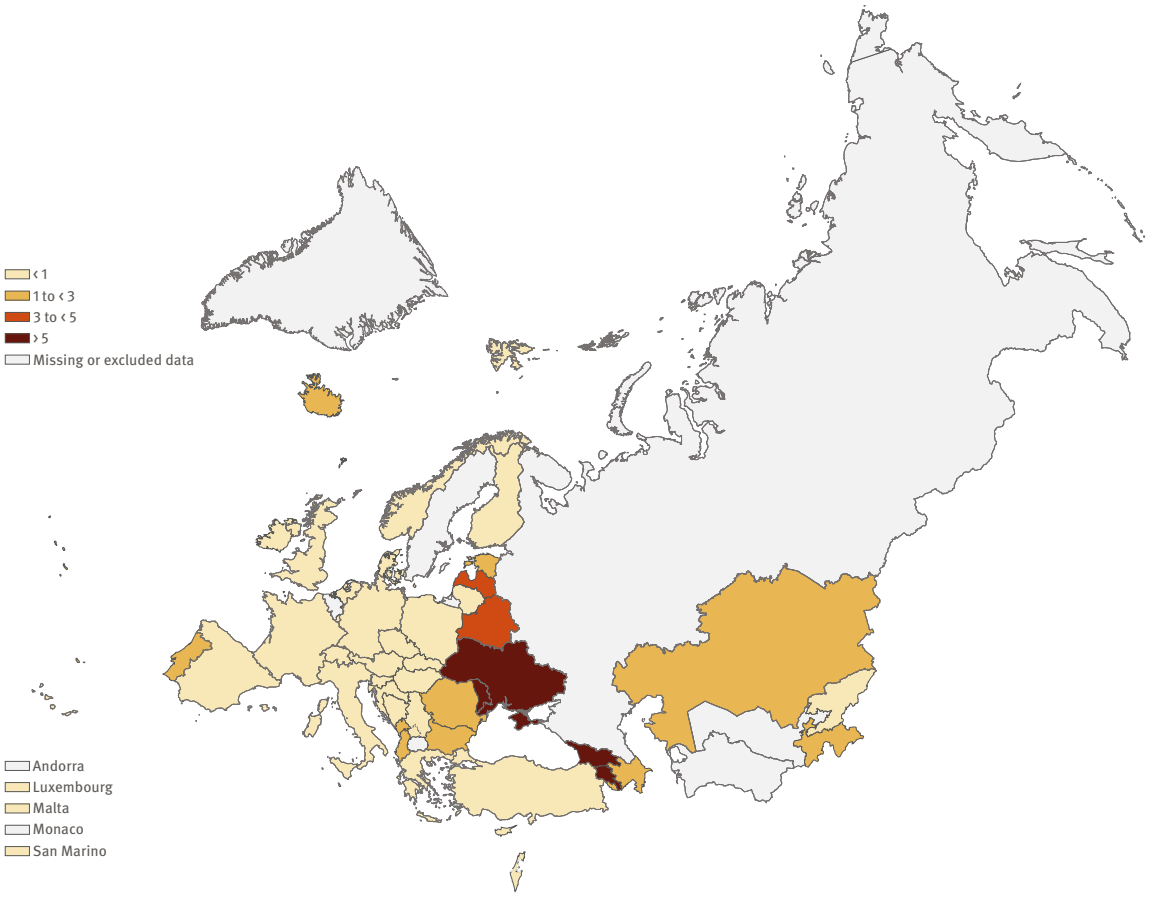
Map 6. New HIV diagnoses acquired through heterosexual transmission, per 100 000 population, 2019



Map 7. Percentage of adult (> 14 years) HIV diagnoses with CD4 < 350 cells/mm³ at diagnosis, 2019



Map 8. AIDS diagnoses reported, per 100 000 population, 2019



Annexes

Annex 1. Framework for data collection, validation and presentation

Reporting

The Member States' Coordinating Competent Bodies in European Union (EU) and European Economic Area (EEA) (jointly referred to as EU/EEA) countries have nominated national operational contact points for HIV/AIDS surveillance to work on reporting surveillance data to the joint European Centre for Disease Prevention and Control (ECDC) and WHO Regional Office for Europe database for HIV/AIDS surveillance. For non-EU/EEA countries, nominations for national HIV/AIDS surveillance focal points were received directly by the WHO Regional Office for Europe via the respective ministries of health.

Data are submitted directly by reporting countries through a web-based platform to a joint database known as The European Surveillance System (TESSy). Four types of data are collected: HIV (case-based and aggregate), AIDS (case-based and aggregate), HIVAIDS (case-based data that link HIV and AIDS diagnoses) and number of HIV tests performed (aggregate). AIDS-related deaths are reported as part of case-based AIDS or HIVAIDS data. All new HIV diagnoses, irrespective of whether the case is diagnosed simultaneously with AIDS or reported as a new AIDS diagnosis, are classified as HIV cases.

Implementation of WHO and EU case definitions for HIV and AIDS surveillance means that only confirmed cases are reported at European level *(1,2)*. It is recognized that the HIV and AIDS case definitions currently used in a number of countries may differ across the WHO European Region, but the EU and WHO case definitions are compatible for surveillance purposes. Since 2016, the case definitions have been changed in the Russian Federation. Updated Forms (N61) of the Federal Statistical Surveillance are submitted by medical facilities to the Ministry of Health and include the number of individuals newly diagnosed with HIV infection; 2009–2015 data therefore cannot directly be compared to 2016–2019. A built-in set of validation rules in TESSy ensures verification of the data within the database during the data-uploading process, improving data quality and allowing each country to test their datasets prior to submission. Further validation checks are carried out by ECDC and the WHO Regional Office in collaboration with the countries before the data are considered of sufficient quality to be used for analysis.

Andorra, Belgium, Monaco, North Macedonia, Turkmenistan and Uzbekistan did not report any HIV data through the TESSy system for 2019 (or previous years for some of the countries, see Table 1). Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan and Uzbekistan did not report any AIDS data for 2019 (or previous years for some of the countries, see Table 14).

Completeness of key variables is presented for the EU/EEA and the WHO European Region as a whole in Annex 2 and by country in Annex 3.

Surveillance systems – data sources

To describe the national source of data and specify the national surveillance system from which the reported data originate, information on the country data source is included as a compulsory part of reporting; this is detailed in Annex 4a and 4b. Some cross-country data comparisons are hampered by differences in surveillance systems as well as by the quality and coverage of national surveillance. During the early part of the period covered in this report (2010–2019) in particular, some countries did not have national HIV/AIDS data. These issues are detailed in Annex 5 and should be taken into account when interpreting and comparing trends across countries.

Data collection and validation

Data collection 2019

The 2019 data submission for HIV and AIDS surveillance took place between 15 March and 11 October 2020. Data presented in this report were extracted from the joint database on 11 October 2020.

Individual country datasets

Data were uploaded, validated and approved in the joint database for HIV/AIDS surveillance by the reporting countries. Once the data were submitted, individual datasets were reviewed by ECDC and the WHO Regional Office and validated by countries. The HIVAIDS record type was used for the first time in 2014 to collect case-based joined HIV and AIDS data (Annex 4a and 4b). Forty countries used the joint record type for combined HIVAIDS 2019 reporting, and an additional two used it for HIV-only reporting – an increase on the 33 countries that used it when initially it was implemented in 2014. The joined record type allows understanding of the relationship between the HIV and AIDS events and diagnosis dates. Of the 40 countries that used the joined record type, 27 uploaded all historical data in the new format, allowing for retrospective updates of missing variables, de-duplication of cases, or reporting on outcomes such as death. The remaining countries using the new format uploaded only 2019 data, or data for a few years. Additional details on record type used per country can be found in Annexes 4a and 4b.

Reporting of aggregated HIV and AIDS data has an impact on the data presentation and analysis and the epidemiological overview of HIV/AIDS in Europe because fewer variables are available from the aggregated datasets, reducing the amount of data that can be presented in certain tables and figures.

Data re-coding and adjustments

Dates used for data presentation

HIV and AIDS data are presented in this report by date of diagnosis. If countries could not provide this date or preferred to present their data by the date of statistics to avoid discrepancies with their national surveillance reports, this date was used instead. This was the case for six countries: Armenia, Belarus, Georgia, Kazakhstan, San Marino and Ukraine.

Region of origin

Where available, countries were encouraged to provide data on the specific country of origin or nationality of the case. This information was used first and, if absent, the variable "region of origin" was used to group cases into region of origin, presented in Table 10 (stratified by reporting country) and Table 11 (all countries stratified by mode of transmission).

Origin of reported cases

Cases originating from countries outside of the reporting country are highlighted in some of the analyses presented here. This approach has been taken to inform epidemiological understanding and guide public health resource allocation and prevention efforts. To compare the impact of the epidemic on all transmission modes, cases reported as originating from regions or countries of sub-Saharan Africa were used as a proxy for countries with generalized HIV epidemics (in Tables 10, 11 and in selected figures). As most of the cases originating from sub-Saharan Africa were reported from west European countries within the EU/EEA, this information is presented in detail in Chapter 1.

Reporting delay

Reporting delays refer to the time delay between HIV/AIDS diagnosis and the report of this event at national level, identified by date of notification. Due to delays in reporting, HIV trends analysed at European level are often biased downwards for the most recent year (2019) and, to a lesser extent, for the two to three years prior to the reporting period. To provide a more precise picture of trends, surveillance data should be corrected to describe the trends in HIV diagnoses more accurately.

This report applies a statistical approach, as described by Heisterkamp et al. *(3)* and adapted by Rosinska et al. *(4)*, to adjust the surveillance data for reporting delays. Annual reporting delay probabilities were estimated using historical data from 2006 to 2016. Due to the unprecedented situation of the COVID-19 pandemic, which some European countries report has affected their surveillance capacity and systems from early 2020, the previous approach to adjusting for reporting delay may not fully address additional delays that have arisen as a result of the pandemic.

Countries were excluded from reporting delay adjustment when:

- they showed an inconsistent and non-stationary pattern in their reporting delay distribution during the period 2010–2019; or
- they reported aggregated data during the period 2010–2019.

Adjusting for reporting delay can help to indicate HIV trends in recent years more precisely. Adjustments also provide insight into the timeliness of data collection and reporting from subnational to national and European levels.

Adjustment for reporting delays was applied to the graphs, showing trends where noted. The list of countries with the number of reported diagnoses adjusted for reporting delay are presented in Annex 6.

Missing transmission data

Data on missing transmission were imputed for EU/EEA countries to provide a more precise picture of trends by transmission mode. This was done following a method described by Rosinska et al. *(4)* using the ECDC HIV Estimates Accuracy Tool *(5)*. Imputed trends are presented in Fig. 1.13.

Data presentation

Geographical presentation

Data are presented for the WHO European Region and the EU/EEA. The EU comprises 28 Member States and the EEA an additional three countries (Iceland, Liechtenstein and Norway) which are included in the overview of the EU/EEA. Because the report reflects data for 2019, the United Kingdom is presented as part of the EU/EEA.

The tables are presented for EU/EEA countries, non-EU/EEA countries and as totals. The 53 Member States of the WHO European Region are also subdivided into three geographical areas, based on epidemiological considerations and in accordance with the division used in previous reports on HIV/AIDS surveillance in Europe: West (23 countries), Centre (15 countries) and East (15 countries) (Fig. A1.1). The division reflects similarities in epidemiological dynamics such as epidemic levels, trends over time and transmission patterns. Of the EU/EEA countries, 19 Member States are classified as being in the West, nine in the Centre and three in the East.

Liechtenstein is not a WHO Member State so its data are included in the totals for the EU/EEA but not for the WHO European Region. Totals for West, Centre and East therefore may not always equal the EU/EEA and non-EU/EEA totals. Data from Serbia include HIV cases notified in Kosovo[33] in all figures although these are stratified in

33 All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

tables to allow separate epidemiological presentation of the reported data.

Population data and rates

Data are presented in absolute numbers and rates as cases per 100 000 population.

The population estimates up to 2019 were derived from Eurostat for all EU/EEA countries and from the United Nations Population Division for non-EU/EEA countries *(6)*. The Eurostat data are from May 2020 *(7)* and the United Nations Population Division statistics are from the 2019 round of estimates *(8)*.

The population data used for HIV and AIDS in Spain and for HIV in Italy were adjusted according to the extent of subnational coverage for the relevant years historically (see Annex 5 for details).

Rates for data presented by gender and age were calculated using relevant male and female population denominators from the sources described above. For maps presenting figures for men who have sex with men, rates were calculated using the male population.

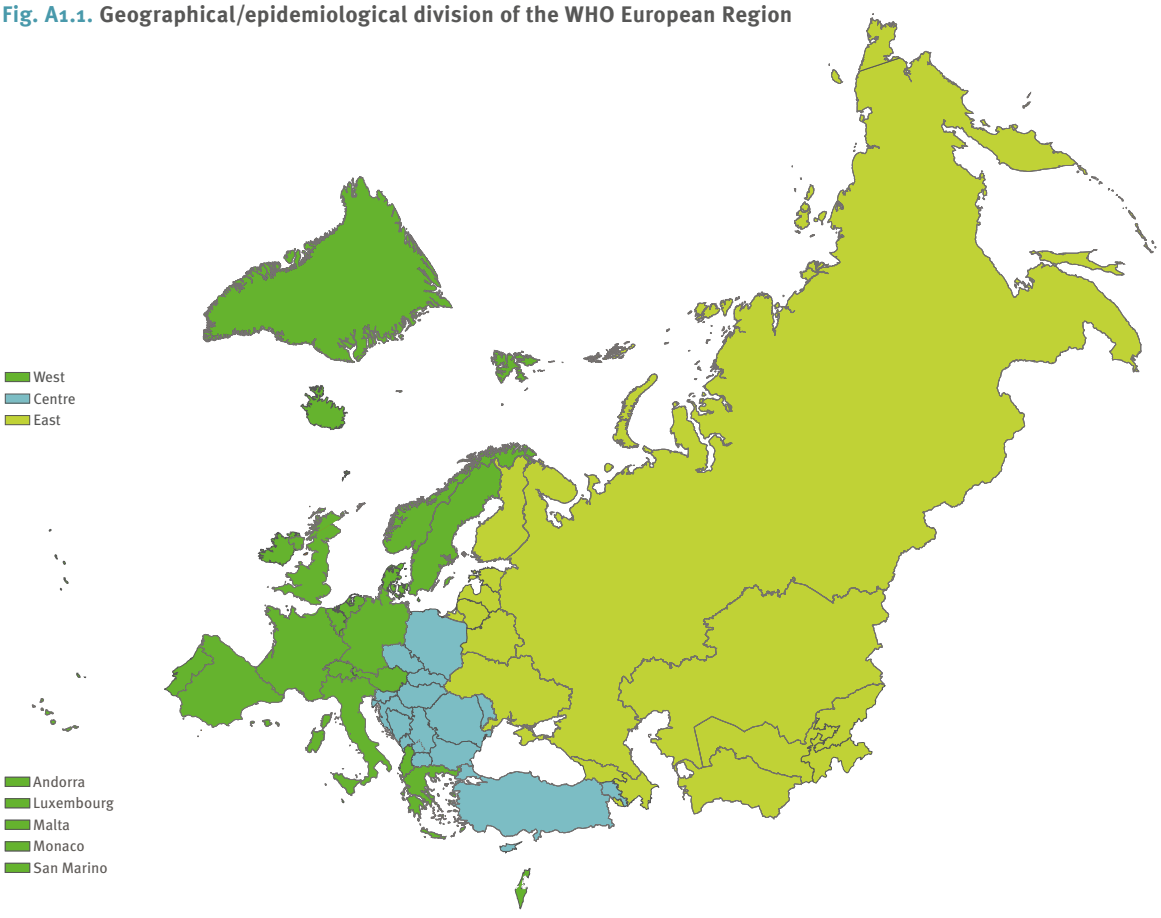
Data are presented by year but also as cumulative totals per country. The cumulative total includes all data reported by that particular country since the beginning of national reporting and is not limited to the selected number of years presented in that given table.

Trend data

Only countries reporting consistently were included for presentation of the overall trends; these are noted in the footnotes to the trend graphs.

When presenting HIV trends for 2010–2019, countries reporting data inconsistently (Andorra, Belgium, Monaco, North Macedonia, Turkmenistan and

Fig. A1.1. Geographical/epidemiological division of the WHO European Region



The countries covered by the report are grouped as follows:

- West, 23 countries: Andorra, Austria,[a] Belgium,[a] Denmark,[a] Finland,[a] France,[a] Germany,[a] Greece,[a] Iceland, Ireland,[a] Israel, Italy,[a] Luxembourg,[a] Malta,[a] Monaco, Netherlands,[a] Norway, Portugal,[a] San Marino, Spain,[a] Sweden,[a] Switzerland, United Kingdom.[b]
- Centre, 15 countries: Albania, Bosnia and Herzegovina, Bulgaria,[a] Croatia,[a] Cyprus,[a] Czechia,[a] Hungary,[a] Montenegro, North Macedonia, Poland,[a] Romania,[a] Serbia, Slovakia,[a] Slovenia,[a] Turkey.
- East, 15 countries: Armenia, Azerbaijan, Belarus, Estonia,[a] Georgia, Kazakhstan, Kyrgyzstan, Latvia,[a] Lithuania,[a] Republic of Moldova, Russian Federation, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.

[a] Countries constituting the European Union as of 1 July 2020.

[b] The United Kingdom left the European Union on 31 January 2020.

Uzbekistan) and those reporting on transmission mode inconsistently or incompletely (such as Malta, Poland and Turkey) were excluded from relevant figures reporting trends by transmission mode. Countries with varying geographic coverage of the national surveillance system over time (Italy and Spain) were also excluded from graphs showing HIV trends but are included in graphs presenting rates per population.

AIDS trends for 2010–2019 excluded countries not reporting consistently over the period (Andorra, Belgium, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan, Uzbekistan).

When presenting trends for AIDS deaths, only countries reporting consistently were included (Andorra, Belgium, Denmark, Italy, Monaco, North Macedonia, the Russian Federation, Sweden, Turkmenistan and Uzbekistan were not included in the presentation of trends for AIDS).

Data limitations

Surveillance systems are not identical across Europe, and differences in testing policies and data-collection methods could affect the results and introduce bias into comparisons between countries. Factors such as underreporting and reporting delay may influence the country figures and rankings presented in the report.

The data in the report for recent years are to be considered as provisional because they are subject to regular updates (such as detection and deletion of duplicate cases, and inclusion of new information about cases already reported). The limitations described below, the country comments in Annex 5 and the information on HIV and AIDS case reporting systems available in Annex 4 and 5 should be taken into account when interpreting the data presented here.

Official reports of newly diagnosed HIV cases do not represent true incidence. Newly reported HIV diagnoses include recently infected individuals as well as those who were infected several years ago but only recently tested for HIV. These reports are also influenced by several factors, such as the uptake of HIV testing, patterns of reporting, the long incubation period and a slow progression of the disease. To better interpret trends in HIV case-reporting data, the total numbers of HIV tests performed annually for diagnostic purposes (excluding unlinked anonymous tests and screening of blood donations) are presented to help provide some background on HIV testing patterns.

Although the table in Annex 6 adjusts for reporting delay for those countries where this is possible, no overall regional adjustments are made for underreporting or underascertainment bias. Few European countries have evaluated their surveillance systems for underreporting and published the results *(9)*. Previous estimates of underreporting range from 0% to 41% for AIDS cases (Francoise Cazein, Sante Publique France, personal communication, 2020), while national estimates of underreporting for HIV can range from 10% (Iceland and Italy) to around 40% (Germany and the United Kingdom) *(10)*. Estimates on the underreporting of AIDS-related deaths are not available, but according to a country survey from 2006, only about a third of countries were able to comprehensively link HIV and AIDS surveillance death registries with national statistics or death certificate information, which results in underreporting of AIDS-related deaths (Francoise Cazein, Sante Publique France, personal communication, 2020).

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10. EuroHIV. EuroHIV 2006 survey on HIV and AIDS surveillance in the WHO European Region. Saint-Maurice: Institut de veille sanitaire (French National Institute of Health Surveillance); 2007.

34 All weblinks were accessed on 12 November 2020.

Annex 2

Table A2.1. Completeness of variables for data reported in 2018 and 2019

Variables	2018				2019			
	Number of countries	Completeness %	Minimal	Maximal	Number of countries	Completeness %	Minimal	Maximal
EU/EEA countries								
Age	30	99.7	84.9	100.0	29	99.7	78.8	100.0
Gender	30	99.4	88.6	100.0	29	99.5	87.5	100.0
Date of diagnosis	30	100.0	100.0	100.0	29	100.0	100.0	100.0
Date of notification	28	88.1	80.1	100.0	27	88.6	88.6	100.0
Transmission	30	80.3	32.8	100.0	28	76.4	27.8	100.0
Country of birth	23	52.6	30.4	100.0	22	47.8	30.8	100.0
Region of origin	24	81.8	52.1	100.0	23	78.7	45.0	100.0
CD_4 cell count[a]	26	67.0	14.9	97.5	25	61.8	3.9	98.2
Probable country of infection	22	42.1	2.5	99.5	21	40.0	4.0	99.4
WHO European Region								
Age	51	40.2	40.2	100.0	47	41.3	41.3	100.0
Gender	52	99.5	38.0	100.0	48	99.9	87.5	100.0
Date of diagnosis	52	100.0	100.0	100.0	48	100.0	100.0	100.0
Date of notification	48	38.0	38.0	100.0	45	39.3	39.3	100.0
Transmission	50	34.8	32.8	100.0	46	35.1	27.8	100.0
Country of birth	41	19.8	19.8	100.0	38	19.2	19.2	100.0
Region of origin	43	34.5	34.5	100.0	40	35.1	35.1	100.0
CD_4 cell count[a]	46	29.0	14.9	100.0	43	29.3	3.9	98.2
Probable country of infection	34	14.6	2.5	100.0	32	14.4	4.0	100.0

[a] CD_4 completeness is calculated on all new diagnoses; Table 13 (see Tables section) completeness calculations are restricted to new diagnoses in countries reporting the variables CD_4Cells or FirstCD_4Count.

Annex 3

Table A3.1. Completeness by country and variable, 2019

Area	Country, territory or area[a]	Date of diagnosis	Age	Gender	Transmission	CD4 cell count	Country of birth/ region of origin[b]
EU/EEA							
West	Austria	100.0	100.0	100.0	89.8	98.2	99.6
West	Belgium	–	–	–	–	–	–
Centre	Bulgaria	100.0	100.0	100.0	100.0	89.5	100.0
Centre	Croatia	100.0	100.0	100.0	94.1	3.9	98.0
Centre	Cyprus	100.0	100.0	100.0	92.0	94.0	100.0
Centre	Czechia	100.0	100.0	100.0	96.8	95.0	100.0
West	Denmark	100.0	100.0	100.0	100.0	70.5	100.0
East	Estonia	100.0	100.0	100.0	64.0	26.4	68.5
West	Finland	100.0	100.0	100.0	63.8	77.9	91.3
West	France	100.0	100.0	100.0	60.4	52.2	67.2
West	Germany	100.0	99.6	99.9	76.9	29.0	90.6
West	Greece	100.0	100.0	100.0	81.6	70.3	98.7
Centre	Hungary	100.0	82.5	94.2	82.4	0.0	0.0
West	Iceland	100.0	100.0	100.0	85.7	71.4	100.0
West	Ireland	100.0	100.0	99.4	46.9	13.5	51.4
West	Italy	100.0	94.2	100.0	90.5	87.9	99.5
East	Latvia	100.0	100.0	100.0	58.0	16.3	0.0
–	Liechtenstein	–	–	–	–	–	–
East	Lithuania	100.0	100.0	100.0	84.1	70.2	100.0
West	Luxembourg	100.0	97.9	100.0	97.9	68.8	97.9
West	Malta	100.0	79.7	87.5	0.0	0.0	100.0
West	Netherlands	100.0	100.0	97.5	88.1	91.3	99.3
West	Norway	100.0	100.0	100.0	100.0	0.0	100.0
Centre	Poland	100.0	97.5	99.5	27.8	0.0	45.0
West	Portugal	100.0	100.0	100.0	96.3	78.1	97.8
Centre	Romania	100.0	100.0	100.0	99.6	97.4	99.4
Centre	Slovakia	100.0	100.0	100.0	78.2	35.6	89.1
Centre	Slovenia	100.0	100.0	100.0	94.1	85.3	97.1
West	Spain	100.0	99.9	100.0	91.5	87.6	93.8
West	Sweden	100.0	100.0	100.0	87.5	81.5	98.0
West	United Kingdom	100.0	100.0	99.8	83.9	84.7	86.2
Non-EU/EEA							
Centre	Albania	100.0	100.0	100.0	100.0	39.6	100.0
West	Andorra	–	–	–	–	–	–
East	Armenia	100.0	100.0	100.0	99.6	89.5	100.0
East	Azerbaijan	100.0	100.0	100.0	95.0	78.8	100.0
East	Belarus	100.0	100.0	100.0	98.9	85.7	100.0
Centre	Bosnia and Herzegovina	100.0	100.0	100.0	100.0	93.3	100.0
East	Georgia	100.0	100.0	100.0	99.1	89.5	100.0
West	Israel	100.0	99.7	100.0	75.2	56.6	100.0
East	Kazakhstan	100.0	100.0	100.0	96.9	75.3	100.0
East	Kyrgyzstan	100.0	100.0	100.0	84.9	68.8	99.8
West	Monaco	–	–	–	–	–	–
Centre	Montenegro	100.0	100.0	100.0	73.1	84.6	100.0
Centre	North Macedonia	–	–	–	–	–	–
East	Republic of Moldova	100.0	100.0	100.0	83.5	81.2	100.0
East	Russian Federation	100.0	–	100.0	–	–	–
West	San Marino	–	–	–	–	–	–
Centre	Serbia	100.0	100.0	100.0	92.9	90.5	100.0
Centre	Serbia excluding Kosovo[1]	100.0	100.0	100.0	92.9	90.5	100.0
Centre	Kosovo[1]	100.0	100.0	100.0	100.0	60.0	100.0
West	Switzerland	100.0	99.7	98.3	71.0	65.3	81.7
East	Tajikistan	100.0	100.0	100.0	86.9	55.1	–
Centre	Turkey	100.0	100.0	100.0	42.5	15.2	98.0
East	Turkmenistan	–	–	–	–	–	–
East	Ukraine	100.0	100.0	100.0	99.9	91.8	100.0
East	Uzbekistan	–	–	–	–	–	–

[a] Completeness not computed on countries, territories or areas with fewer than five diagnoses reported in 2019 (Liechtenstein and San Marino) or countries that reported in the aggregated record type which did not allow reporting of all variables (Russian Federation).

[b] Completeness provided is based on country of birth, region of origin or, for Italy and Switzerland, country of nationality.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Annex 4a

Table A4a.1. HIV surveillance system overview: data source information

Country, territory or area	HIV data source	Record type[a] for 2018 reporting	Period	Legal[b]	Coverage[c]	Comments
EU/EEA						
Austria	AT-HIV	HIVAIDS	1980–2019	V	Co	–
Belgium	BE-HIV/AIDS	HIVAIDS	1985–2018	V	Co	Did not report 2019 data
Bulgaria	BG-HIV	HIVAIDS	1986–2019	C	Co	HIV aggregate record type used through 2006; HIV record type 2007–2013
Cyprus	CY-HIV/AIDS	HIVAIDS	1986–2019	C	Co	–
Croatia	HR-CNIPH	HIVAIDS	1985–2019	C	Co	HIV record type used prior to 2016
Czechia	CZ-HIV/AIDS	HIVAIDS	1985–2019	C	Co	–
Denmark	DK-HIV	HIVAIDS	1990–2019	C	Co	HIV record type used 1990–2013
Estonia	EE-NAKIS	HIVAIDS	1988–2019	C	Co	Data source EE-HIV used 1988–2012; HIV aggregate record type used through 2006; HIV record type prior to 2015
Finland	FI-NIDR	HIVAIDS	1980–2019	C	Co	HIV record type used prior to 2016
France	FR-HIVAIDS	HIVAIDS	2003–2019	C	Co	Although compulsory, HIV diagnoses are not exhaustively reported; underreporting was estimated at 31% in 2018
Germany	DE-SURVNET@RKI7.3-HIV		1993–2019	C	Co	Data source DE-HIV-Pre-IfSG used 1993–2001; HIV recordtype used to report data up to 2016
Greece	EL-HIV/AIDS	HIVAIDS	1984–2019	C	Co	–
Hungary	HU-HIV/AIDS	HIVAIDS	1985–2019	C	Co	–
Iceland	IS-SUBJECT_TO_REGISTRATION	HIVAIDS	1983–2019	C	Co	HIV record type used prior to 2017
Ireland	IE-CIDR	HIVAIDS	1985–2019	C	Co	Data source IE-HIV/AIDS used for years 1981–2011; HIV aggregate used for reporting through 2002; HIV record type 2003–2011
Italy	IT-COA-ISS	HIV	1985–2019	C	Co	See country comments about historical coverage; HIV aggregate record type used through 2009
Latvia	LV-HIV/AIDS	HIVAIDS	1987–2019	C	Co	HIV record type used 1987–2013; HIVAIDS record type used from 2014
Liechtenstein	CH-SFOPH-LI	HIV	1985–2019	V	NS/unk	Cases reported through Switzerland's surveillance system using another data source
Lithuania	LT-AIDS_CENTRE	HIVAIDS	1988–2019	C	Co	–
Luxembourg	LU-HIVAIDS	HIVAIDS	1983–2019	V	Co	–
Malta	MT-DISEASE_SURVEILLANCE	HIVAIDS	2001–2019	C	Co	HIV record type used in years 1986–2014
Netherlands	NL-HIV/AIDS	HIVAIDS	1980–2019	V	Co	–
Norway	NO-MSIS_B	HIVAIDS	1984–2019	C	Co	HIV record type used in years 1980–2013
Poland	PL-HIV	HIVAIDS	1985–2019	C	Co	–
Portugal	PT-HIVAIDS	HIVAIDS	1985–2019	C	Co	–
Romania	RO-RSS	HIVAIDS	1987–2019	C	Co	–
Slovakia	SK-EPIS	HIVAIDS	1985–2019	C	Co	HIV record type used in years 1985–2013
Slovenia	SI-HIVAIDS	HIVAIDS	1985–2019	C	Co	–
Spain	ES-HIV	HIV	2003–2019	C	Co	See country comments about historical coverage and 2018 coverage
Sweden	SE-SmiNet	HIVAIDS	1983–2019	C	Co	Data source SE-SweHIVReg used 1983–2009; HIV record type used prior to 2014
United Kingdom	UK-HIVAIDS	HIVAIDS	1981–2019	V	Co	–
Non-EU/EEA						
Albania	AL-NIoPH	HIVAIDS	1993–2019	C	Co	–
Andorra	AD-MoHWFH	HIVAIDS	2004–2018	V	Co	–
Armenia	AM-NAC	HIVAIDS	1988–2019	V	Co	–
Azerbaijan	AZ-AIDS-CENTER-NEW	HIVAIDS	1987–2019	V	Se	–
Belarus	BY-NAC	HIVAIDS	1981–2019	C	Co	HIVAIDS record type used only for HIV reporting (no linked HIV and AIDS reporting); HIV record type used in years 1981–2013
Bosnia and Herzegovina	BA-FMoH-MoHSWRS	HIVAIDS	1986–2019	C	Co	HIV record type used in years 1993–2013
Georgia	GE-IDACIRC	HIVAIDS	1989–2019	C	Co	–
Israel	IL-MOH	HIVAIDS	1981–2019	C	Co	–
Kazakhstan	KZ-RCfAPC	HIVAIDS	1987–2019	NS/unk	NS/unk	–
Kyrgyzstan	KG-HIV KG 2008	HIVAIDS	1987–2019	V	Co	HIV record type used in years 1987–2000
Montenegro	ME-IOPH	HIVAIDS	1989–2019	C	Co	–
Monaco	MC-MoSH-GEN	HIV	1987–2018	C	Co	–
North Macedonia	MK-NHASS	HIVAIDS	1993–2018	C	Co	HIV record type used in years 1993–2016
Republic of Moldova	MD-NAC	HIVAIDS	1987–2019	V	Other	–
Russian Federation	RU-MOH	HIVAGGR	2009-2019	C	Co	–
San Marino	SM-AIDS/HIV	HIVAGGR	1985–2019	C	Co	–
Serbia[1]	RS-NAC	HIVAIDS	1984–2019	C	Co	HIV aggregate record type used in years 1984–2001
Switzerland	CH-FOPH	HIV	1985–2019	C	Co	–
Tajikistan	TJ-RHAC	HIVAIDS	1991–2019	C	Co	–
Turkey	TR-MOH	HIV	1985–2019	C	Co	–
Turkmenistan	TM-NAC	–	1990–2012	V	Co	–
Ukraine	UA-NAC	HIVAIDS	1987–2019	V	Other	HIVAIDS record type used only for HIV reporting (no linked HIV and AIDS reporting); HIVAGGR record type used in years 1987–2015.
Uzbekistan	UZ-RAC	–	1981–2010	V	Co	Did not report data 2011–2017; used HIV record type in years 1981–2010

[a] Type: HIVAIDS (HIV and AIDS joined case-based record type); HIV (HIV case-based record type); AIDS (AIDS case-based record type); HIVAGGR (HIV aggregate record type); AIDSAGGR (AIDS aggregate record type).

[b] Legal: voluntary reporting (V); compulsory reporting (C); not-specified/unknown (NS/unk).

[c] Coverage: sentinel system (Se); comprehensive (Co); not-specified/unknown (NS/unk).

[1] Data from Kosovo, in accordance with Security Council resolution 1244 (1999), were reported through data source XK-HIVAIDS for 1986–2018; HIVAIDS record type used for all years.

Annex 4b

Table A4a.1. AIDS surveillance system overview: data source information

Country, territory or area	AIDS Data source	Record type[a] for 2018 reporting	Period	Legal[b]	Coverage[c]	Comments
EU/EEA						
Austria	AT-AIDS	HIVAIDS	1982–2019	V	Co	–
Belgium	BE-HIV/AIDS	HIVAIDS	1983–2018	V	Co	Did not report 2019 data
Bulgaria	BG-AIDS	HIVAIDS	1987–2019	C	Co	AIDS record type was used for cases prior to 2014
Cyprus	CY-HIV/AIDS	HIVAIDS	1986–2019	C	Co	–
Croatia	HR-CNIPH	HIVAIDS	1986–2019	C	Co	AIDS record type used prior to 2016
Czechia	CZ-HIV/AIDS	HIVAIDS	1986–2019	C	Co	–
Denmark	DK-HIV	HIVAIDS	1980–2019	C	Co	AIDS record type from data source DK-MIS used 1980–2013
Estonia	EE-NAKIS	HIVAIDS	1992–2019	C	Co	AIDS record type used prior to 2015
Finland	FI-NIDR	HIVAIDS	1983–2019	C	Co	AIDS record type used prior to 2016
France	FR-HIVAIDS; FR-AIDS	HIVAIDS	1982–2019	C	Co	Additional data from record type AIDS used for cases with HIV diagnosis before 2003 or with unknown date of HIV diagnosis; although compulsory, AIDS diagnoses are not exhaustively reported – underreporting was estimated 41% in 2007–2009
Germany	DE-AIDS		1981–2019	V	Co	Did not report 2017 data, AIDS record type used through 2016
Greece	EL-HIV/AIDS	HIVAIDS	1981–2019	C	Co	–
Hungary	HU-HIV/AIDS	HIVAIDS	1986–2019	C	Co	–
Iceland	IS-SUBJECT_TO_REGISTRATION	HIVAIDS	1985–2019	C	Co	AIDS record type used prior to 2017
Ireland	IE-CIDR	HIVAIDS	1983–2019	V	Co	Data source IE-HIV/AIDS and AIDS record type used for years 1981–2011
Italy	IT-COA-ISS	AIDS	1982–2019	C	Co	–
Latvia	LV-AIDS	HIVAIDS	1990–2019	C	Co	Same data source in AIDS record type used for 1990–2013
Liechtenstein	CH-SFOPH-LI	AIDS	1989–2019	V	NS/unk	Cases reported through Switzerland's surveillance system
Lithuania	LT-AIDS_CENTRE	HIVAIDS	1988–2019	C	Co	–
Luxembourg	LU-HIVAIDS	HIVAIDS	1983–2019	V	Co	–
Malta	MT-DISEASE_SURVEILLANCE	HIVAIDS	1986–2019	C	Co	Same data source and AIDS record type used 1986–2014
Netherlands	NL-HIV/AIDS	HIVAIDS	1999–2019	V	Co	–
Norway	NO-MSIS_B	HIVAIDS	1983–2019	C	Co	Data source NO-MSIS-A and record type AIDS used in years 1980–2013
Poland	PL-HIV	HIVAIDS	1986–2019	C	Co	–
Portugal	PT-HIVAIDS	HIVAIDS	1985–2019	C	Co	–
Romania	RO-RSS	HIVAIDS	1985–2019	C	Co	–
Slovakia	SK-EPIS	HIVAIDS	1985–2019	C	Co	AIDS record type used in years 1985–2013
Slovenia	SI-HIVAIDS	HIVAIDS	1986–2019	C	Co	–
Spain	ES-AIDS	AIDS	1981–2019	C	Co	See country comments about coverage
Sweden	–	–	1982–2007	V	Co	AIDS surveillance discontinued in 2008
United Kingdom	UK-HIVAIDS	HIVAIDS	1981–2019	V	Co	–
Non-EU/EEA						
Albania	AL-NIoPH	HIVAIDS	1993–2019	C	Co	–
Andorra	AD-MoHWFH	HIVAIDS	2004–2018	V	Co	–
Armenia	AM-NAC	HIVAIDS	1988–2019	V	Se	–
Azerbaijan	AZ-AIDS-CENTER-NEW	HIVAIDS	1995–2019	V	Co	–
Belarus	BY-NAC	AIDS	1991–2019	C	Co	–
Bosnia and Herzegovina	BA-FMoH-MoHSWRS	HIVAIDS	1986–2019	C	Co	AIDS record type used in years 1986–2013
Georgia	GE-IDACIRC	HIVAIDS	1989–2019	C	Co	–
Israel	IL-MOH	HIVAIDS	1981–2019	C	Co	–
Kazakhstan	KZ-RCfAPC	HIVAIDS	1993–2019	NS	NS	–
Kyrgyzstan	KG-HIV KG 2008	HIVAIDS	1999–2019	V	Co	AIDS record type used in years 1987–2000
Montenegro	ME-IOPH	HIVAIDS	1990–2019	C	Co	–
Monaco	MC-MoSH-GEN	AIDS	1985–2018	C	Co	–
North Macedonia	MK-NHASS	HIVAIDS	1989–2018	C	Co	AIDS record type used in years 1993–2016
Republic of Moldova	MD-NAC	HIVAIDS	1989–2019	V	Co	–
Russian Federation	–	–	–	–	–	–
San Marino	SM-AIDS/HIV	AIDS	1986–2019	C	Co	–
Serbia[1]	RS-NAC	HIVAIDS	1985–2019	C	Co	AIDS record type used in years 1985–2001
Switzerland	CH-FOPH	AIDS	1980–2019	C	Co	–
Tajikistan	TJ-RHAC	HIVAIDS	1998–2019	C	Co	–
Turkey	TR-MOH	AIDS	1985–2019	C	Co	–
Turkmenistan	TM-NAC	–	2002–2012	V	Co	–
Ukraine	UA-NAC	AIDSAGGR	1988–2019	V	Co	HIVAIDS record type used only for HIV reporting (that is, no linked HIV and AIDS reporting)
Uzbekistan	UZ-RAC	–	1992–2010	V	Co	Did not report data 2011–2017; used AIDS record type in years 1992–2010

[a] Type: HIVAIDS (HIV and AIDS joined case-based record type); HIV (HIV case-based record type); AIDS (AIDS case-based record type); HIVAGGR (HIV aggregate record type); AIDSAGGR (AIDS aggregate record type).

[b] Legal: voluntary reporting (V); compulsory reporting (C); not-specified/unknown (NS/unk).

[c] Coverage: sentinel system (Se); comprehensive (Co); not-specified/unknown (NS/unk).

[1] Data from Kosovo, in accordance with Security Council resolution 1244 (1999), were reported through data source XK-HIVAIDS for 1986–2018; HIVAIDS record type used for all years.

Annex 5

Table A5.1. Country-specific comments regarding national HIV and AIDS reporting

Country	Comments
Belgium	Belgian data were not reported for 2019 due to technical issues but will be reported in future rounds.
Bulgaria	Case-based reporting of HIV is available from 2007 onwards.
Czechia	Foreigners with short-term stays in Czechia are not included in cases notified.
Denmark	–
Estonia	The surveillance system was modified substantially in 2008. Previously, the probable mode of HIV transmission was not reported by Estonia (from 2003 to 2007, Estonia supplied partial information on people who inject drugs only).
France	Case-based data reported through TESSy are not exhaustive because of reporting delays (cases reported several months or years after the diagnosis) and underreporting (cases that are diagnosed but never reported). The most recent estimates of underreporting in France are 41% in 2007–2009 for AIDS and 31% in 2018 for HIV. To assess the real numbers and trends of HIV and AIDS diagnoses in France, it is essential to use adjusted data, which take into account reporting delays, underreporting and missing data (incomplete reports). Data on new diagnoses adjusted for reporting delay and underreporting are 6 629 (2010), 6 461 (2011), 6 622 (2012), 6 688 (2013), 6 559 (2014), 6 443 (2015), 6 417 (2016), 6 583 (2017) and 6 155 (2018). HIV/AIDS surveillance was changed in 2016. Since then, HIV and AIDS diagnoses should be reported online, and physicians should report HIV diagnoses spontaneously, without waiting for the laboratory report. Probable country of infection is collected as "France/Abroad/Unknown". In Table 12, the number 3 829 in the "Unknown" column includes 941 cases probably infected abroad, and 2 888 cases with unknown country of infection.
Ireland	HIV was made a notifiable disease in September 2011. The HIV reporting system was modified substantially in 2012. AIDS cases and deaths among AIDS cases are now only reported if at the time of HIV diagnosis. HIV diagnoses include a growing proportion of so-called previous-positive people, who are transferring their HIV care when moving to Ireland and tested positive and were notified within the Irish system when moving to the country. There was a change in the implementation of the case definition in 2015 (requiring confirmatory testing on a single sample rather than two samples) which resulted in more people being notified to the surveillance system.
Italy	Data on new HIV diagnoses have been collected since 1985 in some regions of Italy. New HIV diagnoses were reported by 10 of the 21 Italian regions between 2004 and 2006, 11 regions in 2007, 12 in 2008, 18 in 2009 and all of the 21 regions of Italy since 2012. Between 2004 and 2011, population denominators were based on the annual resident population in the regions reporting cases. From 2012, the coverage of the surveillance system has been national, so the total Italian population is used as a denominator. AIDS deaths are not reported after 2017 due to lack of updated data from the national mortality register.
Liechtenstein	Liechtenstein, with only 35 000 inhabitants, has small numbers of communicable diseases. Public health authorities therefore refrain from collecting data due limited public health added value. In 1970, Liechtenstein adopted the Swiss Law of Epidemiology. Since then, all communicable disease data are reported to officials in Switzerland, as demanded by the Federal Office of Public Health. These data are reported through Switzerland to TESSy but may not represent all cases diagnosed in Liechtenstein.
Luxembourg	HIV tests reported through 2010 include only tests performed at two major public laboratories, so underestimate the total number of HIV tests performed during those years. From 2011, tests reported include all laboratories in the country.
Malta	A new HIV reporting system started in 2004.
Netherlands	HIV surveillance is based on the ATHENA cohort, which includes 98% of people who entered HIV care in the Netherlands. Data collection started from 1996 onwards and HIV diagnoses before 1996 are incomplete.
Portugal	The PT-HIV database is now fully case-based, containing details of cases diagnosed from 1983. In 2013 and 2014, the Portuguese HIV/AIDS programme implemented a strategy to address underreporting and reporting delay, resulting in significant increases in the number of reported cases diagnosed between 1983 and 2012.
Spain	HIV reporting has existed since the 1980s in some of the 19 Autonomous Regions of Spain. For 2003–2011, HIV data are available only for nine regions: Asturias, Balearic Islands, Basque Country, Canary Islands, Catalonia, Ceuta, Extremadura, La Rioja and Navarre. Since 2004, HIV data are available for 10 regions (+ Galicia). Since 2007, data are available for 11 regions (+ Madrid). Since 2008, data are available for 14 regions (+ Aragón, Castilla-La Mancha and Melilla). Since 2009, HIV data are available for 17 regions (+ Cantabria, Castilla-León and Murcia). For 2012, data are available for 18 regions (+ Valencia). For 2013–2017, data are available for all the 19 regions of Spain (+ Andalucía), but for 2018, due to extraction issues, data for Catalonia are not available. Due to the COVID-19 pandemic, some regions have reported provisional data for 2019 and others (Asturias, Aragón, Cantabria and Melilla) have not reported any data. Rates are based on the corresponding populations for each year. It has not been possible to include data from several regions for AIDS reporting in 2014–2019, so rates for those years are based on the corresponding population.
Sweden	Due to changes in the HIV/AIDS surveillance system, AIDS reporting has not been mandatory since 2000. Since 2008, AIDS data are not reported from Sweden because the national AIDS surveillance system had been discontinued.
United Kingdom	The United Kingdom figures presented in the European report are based on a preliminary version of the United Kingdom database which subsequently was updated. Consequently, some totals in the report may differ very slightly to the United Kingdom national totals published.
Non-EU/EEA	
Belarus	All data are presented by "date of statistics" (instead of "date of diagnosis").
Bosnia and Herzegovina	–
Georgia	Data are presented by "date of statistics" (instead of "date of diagnosis").
North Macedonia	AIDS cases include only people diagnosed with AIDS at the time of HIV diagnosis.
Russian Federation	The data reported by the Russian Federation (by the Ministry of Health) was limited to new HIV diagnosis by sex for 2009–2018 and data on HIV testing, which enabled the inclusion of the country's data in Tables 1–3 and 25 and in the figures showing the trend of HIV diagnosis. Since 2016, case definitions have been changed in the Russian Federation. Updated Forms (N61) of the Federal Statistical Surveillance are submitted by medical facilities to the Ministry of Health and include the number of individuals newly diagnosed with HIV infection. Data for 2009–2015 cannot thefore be compared directly with those for 2016–2018.
Serbia	Data on HIV tests refer to the number of people tested and do not include people tested in the reference laboratory or private laboratories.
Tajikistan	Due to technical problems, no data export for 2018 from Tajikistan was available.
Turkey	Reported HIV cases exclude people diagnosed with AIDS at the time of HIV diagnosis. Reported AIDS cases only include people diagnosed with AIDS at the time of HIV diagnosis. Table 14 (see Tables section): CD4 cell count data exclude people diagnosed with AIDS at the time of HIV diagnosis. All data are presented by "date of statistics" (instead of "date of diagnosis").
Ukraine	All data are presented by "date of statistics" (instead of "date of diagnosis").

Annex 6

Table A6.1. New HIV diagnoses and rate per 100 000 population, adjusted for reporting delay and adjustment coefficients,[a] 2016–2019

Country, territory or area[b]		2016		2017		2018		2019		Adjustment coefficients			
		N	Rate	N	Rate	N	Rate	N	Rate	2016	2017	2018	2019
EU/EEA													
West	Austria	325	3.7	348	4.0	237	2.7	283	3.2	1.12	1.15	1.19	1.26
West	Belgium	909	8.0	899	7.9	882	7.7	–	–	1.00	1.00	1.00	1.00
Centre	Bulgaria	202	2.8	241	3.4	311	4.4	258	3.7	1.00	1.00	1.00	1.00
Centre	Croatia	109	2.6	106	2.6	94	2.3	102	2.5	1.00	1.00	1.00	1.00
Centre	Cyprus	80	9.4	85	9.9	78	9.0	100	11.4	1.00	1.00	1.00	1.00
Centre	Czechia	286	2.7	254	2.4	208	2.0	222	2.1	1.00	1.00	1.00	1.00
West	Denmark	244	4.3	242	4.2	219	3.8	190	3.3	1.00	1.00	1.00	1.00
East	Estonia	229	17.4	219	16.6	190	14.4	178	13.4	1.00	1.00	1.00	1.00
West	Finland	180	3.3	158	2.9	153	2.8	149	2.7	1.00	1.00	1.00	1.00
West	France[c]	5 444	8.2	5 410	8.1	5 164	7.7	5 529	8.2	1.00	1.00	1.02	1.12
West	Germany	3 378	4.1	3 155	3.8	2 867	3.5	3 093	3.7	1.00	1.00	1.00	1.00
West	Greece	652	6.0	645	6.0	724	6.7	657	6.1	1.00	1.00	1.01	1.04
Centre	Hungary	228	2.3	223	2.3	229	2.3	238	2.4	1.00	1.00	1.00	1.00
West	Iceland	28	8.4	24	7.1	38	10.9	28	7.8	1.00	1.00	1.00	1.00
West	Ireland	511	10.8	499	10.4	508	10.5	533	10.9	1.00	1.00	1.00	1.00
West	Italy	3 707	6.1	3 609	5.9	3 113	5.1	2 724	4.5	1.01	1.01	1.04	1.07
East	Latvia	369	18.7	376	19.3	328	17.0	295	15.4	1.00	1.00	1.00	1.00
–	Liechtenstein	2	5.3	0	0.0	0	0.0	0	0.0	1.00	1.00	1.00	1.00
East	Lithuania	214	7.4	263	9.2	160	5.7	151	5.4	1.00	1.00	1.00	1.00
West	Luxembourg	92	16.0	80	13.6	75	12.5	70	11.4	1.14	1.20	1.32	1.46
West	Malta	63	14.0	45	9.8	73	15.3	80	16.2	1.00	1.00	1.00	1.00
West	Netherlands	903	5.3	854	5.0	746	4.3	666	3.9	1.01	1.03	1.08	1.18
West	Norway	220	4.2	213	4.1	191	3.6	183	3.4	1.00	1.00	1.00	1.07
Centre	Poland	1 319	3.5	1 420	3.7	1 217	3.2	1 585	4.2	1.00	1.00	1.01	1.08
West	Portugal	1 725	16.8	1 611	15.7	1 465	14.2	1 344	13.0	1.14	1.21	1.32	1.73
Centre	Romania	774	3.9	796	4.1	732	3.7	690	3.6	1.00	1.00	1.00	1.00
Centre	Slovakia	88	1.6	72	1.3	102	1.9	114	2.1	1.00	1.00	1.00	1.13
Centre	Slovenia	60	2.9	40	1.9	37	1.8	34	1.6	1.00	1.00	1.00	1.00
West	Spain	4 175	9.0	3 795	8.2	2 527	6.4	2 483	5.6	1.00	1.00	1.00	1.00
West	Sweden	429	4.4	434	4.3	481	4.8	449	4.4	1.00	1.00	1.00	1.00
West	United Kingdom	5 231	8.0	4 653	7.1	4 537	6.8	4 116	6.2	1.00	1.00	1.00	1.00
	Total EU/EEA	**32 293**	**6.3**	**30 932**	**6.0**	**27 798**	**5.4**	**27 231**	**5.4**	**1.01**	**1.02**	**1.03**	**1.10**
Non-EU/EEA													
Centre	Albania	127	4.4	94	3.3	102	3.5	101	3.5	1.00	1.00	1.00	1.00
West	Andorra	3	3.9	6	7.8	12	15.6	–	–	1.00	1.00	1.00	1.00
East	Armenia	304	10.4	355	12.1	420	14.2	446	15.1	1.00	1.00	1.00	1.00
East	Azerbaijan	556	5.7	567	5.8	656	6.6	721	7.2	1.00	1.00	1.00	1.00
East	Belarus	2 391	25.3	2 468	26.1	2 386	25.2	2 137	22.6	1.00	1.00	1.00	1.00
Centre	Bosnia and Herzegovina	24	0.7	15	0.4	24	0.7	30	0.9	1.00	1.00	1.00	1.00
East	Georgia	719	17.9	631	15.7	672	16.8	668	16.7	1.00	1.00	1.00	1.00
West	Israel	368	4.5	415	5.0	452	5.4	408	4.8	1.00	1.00	1.00	1.00
East	Kazakhstan	2 898	16.3	3 014	16.7	3 215	17.5	3 673	19.8	1.00	1.00	1.00	1.00
East	Kyrgyzstan	764	12.6	840	13.6	876	13.9	850	13.2	1.00	1.00	1.00	1.00
West	Monaco	0	0.0	3	7.8	0	0.0	–	–	1.00	1.00	1.00	1.00
Centre	Montenegro	34	5.4	26	4.1	23	3.7	26	4.1	1.00	1.00	1.00	1.00
Centre	North Macedonia	30	1.4	44	2.1	45	2.2	–	–	1.00	1.00	1.00	1.00
East	Republic of Moldova	832	20.5	835	20.6	905	22.3	922	22.8	1.00	1.00	1.00	1.00
East	Russian Federation	86 855	59.8	85 802	59.0	85 995	59.0	80 124	54.9	1.00	1.00	1.00	1.00
West	San Marino	2	6.0	1	3.0	3	8.9	0	0.0	1.00	1.00	1.00	1.00
Centre	Serbia	179	2.0	186	2.1	188	2.1	215	2.0	1.00	1.00	1.00	1.00
Centre	Serbia excluding Kosovo[1]	168	2.4	183	2.6	180	2.6	210	2.4	1.00	1.00	1.00	1.00
Centre	Kosovo[1]	11	0.6	3	0.2	8	0.4	5	0.3	1.00	1.00	1.00	1.00
West	Switzerland	533	6.4	446	5.3	425	5.0	421	4.9	1.00	1.00	1.00	1.00
East	Tajikistan	1 038	12.0	1 205	13.6	1 421	15.6	1 320	14.2	1.00	1.00	1.00	1.00
Centre	Turkey	2 438	3.1	2 844	3.5	3 248	3.9	3 229	3.9	1.00	1.00	1.00	1.00
East	Turkmenistan	–	–	–	–	–	–	–	–	1.00	1.00	1.00	1.00
East	Ukraine	14 241	33.4	15 625	36.8	15 686	37.2	16 357	39.0	1.00	1.00	1.00	1.00
East	Uzbekistan	–	–	–	–	–	–	–	–	1.00	1.00	1.00	1.00
	Total non-EU/EEA	**114 336**	**31.3**	**115 422**	**31.4**	**116 754**	**31.6**	**111 648**	**30.1**	**1.00**	**1.00**	**1.00**	**1.00**
WHO European Region													
	West	29 200	6.8	27 644	6.4	24 953	5.9	23 971	5.7	1.01	1.02	1.03	1.10
	Centre	5 978	3.1	6 447	3.3	6 638	3.4	6 944	3.5	1.00	1.00	1.00	1.04
	East	111 410	43.4	112 200	43.6	112 910	43.7	107 845	41.7	1.00	1.00	1.00	1.00
	Total WHO European Region	**146 588**	**16.6**	**146 291**	**16.5**	**144 502**	**16.4**	**138 760**	**15.9**	**1.00**	**1.00**	**1.01**	**1.02**

[a] The coefficients present the adjustments for the current year of reporting. Number of diagnosed cases for the last four years were adjusted compared to Table 1 (see Tables section) only if the adjusted number of cases for year of diagnosis was higher than the number of cases uploaded for that specific year. The sum of country totals may not equal regional totals due to independent calculation of reporting delay totals for the region from those of some countries.

[b] Country-specific comments are in Annex 5.

[c] French data for 2015–2018 are adjusted but not fully according to the national method, which includes underreporting. For this reason, numbers here may differ from those presented in the national report.

[1] All references to Kosovo in this document should be understood to be in the context of the United Nations Security Council resolution 1244 (1999).

Annex 7

Table A7.1. HIV/AIDS surveillance in Europe: participating countries and national institutions

Country	National institutions
EU/EEA	
Austria	Federal Ministry of Health, Family and Youth
Belgium	Scientific Institute of Public Health
Bulgaria	Ministry of Health
Croatia	Croatian National Institute of Public Health
Cyprus	Ministry of Health
Czechia	National Institute of Public Health
Denmark	Statens Serum Institut
Estonia	Health Board
Finland	National Public Health Institute (KTL)
France	Santé Publique France (French National Public Health Agency)
Germany	Robert Koch Institute
Greece	Hellenic National Public Health Organization
Hungary	National Centre for Epidemiology (Országos Epidemiológiai Központ)
Iceland	Health Protection Agency Centre for Infections
Ireland	Health Protection Surveillance Centre (HPSC)
Italy	Ministry of Health DG Prevention – Unit V
Latvia	Centre for Disease Prevention and Control of Latvia
Liechtenstein	Principality of Liechtenstein
Lithuania	Centre for Communicable Diseases and AIDS
Luxembourg	National Service of Infectious Diseases, Centre Hospitalier
Malta	Department of Health Promotion and Disease Prevention
Netherlands	National Institute for Public Health and the Environment (RIVM)
Norway	Norwegian Institute of Public Health – Department of Infectious Disease Epidemiology
Poland	National Institute of Public Health – National Institute of Hygiene (NIZP-PZH)
Portugal	Directorate-General of Health (Direção-Geral da Saúde) and National Institute of Health Dr Ricardo Jorge (Instituto Nacional de Saúde Doutor Ricardo Jorge, I.P.)
Romania	Institute of Public Health and National Institute for Infectious Diseases "Prof. Dr. Matei Bals"
Slovakia	Regional Public Health Authority of capital Bratislava
Slovenia	National Institute of Public Health
Spain	Instituto de Salud Carlos III Centro Nacional de Epidemiologia
Sweden	Public Health Agency of Sweden
United Kingdom	Public Health England
Non-EU/EEA	
Albania	National Institute of Public Health
Andorra	Ministry of Health, Social Welfare and Family
Armenia	National Centre for AIDS Prevention
Azerbaijan	Azerbaijan AIDS Centre
Belarus	National Centre for Hygiene, Epidemiology and Public Health
Bosnia and Herzegovina	Ministry of Civil Affairs of Bosnia and Herzegovina; Federal Ministry of Health; Ministry of Health and Social Welfare the Republica Srpska and Public Health Institutes of the Federation of Bosnia and Herzegovina and Republica Srpska
Georgia	Infectious Diseases, AIDS & Clinical Immunology Research Centre
Israel	Ministry of Health
Kazakhstan	National Centre for the Prevention and Control of AIDS
Kyrgyzstan	Republican Centre for AIDS Prevention and Control
Monaco	Ministry of Social Health
Montenegro	Institute of Public Health of Montenegro
North Macedonia	Public Health Institute
Republic of Moldova	National AIDS Centre; National Centre for Preventative Care
Russian Federation	Ministry of Health of the Russian Federation
San Marino	Ospedale di Stato
Serbia[1]	Institute of Public Health of Serbia
Switzerland	Bundesamt für Gesundheit
Tajikistan	Republican HIV/AIDS Centre
Turkey	Public Health Institute of Turkey, Ministry of Health
Turkmenistan	National AIDS Prevention Centre
Ukraine	State Institution "Public Health Centre of the Ministry of Health of Ukraine"
Uzbekistan	Republican AIDS Centre

[1] Data for Kosovo (in accordance with Security Council resolution 1244 (1999)) were provided by the public health institute.

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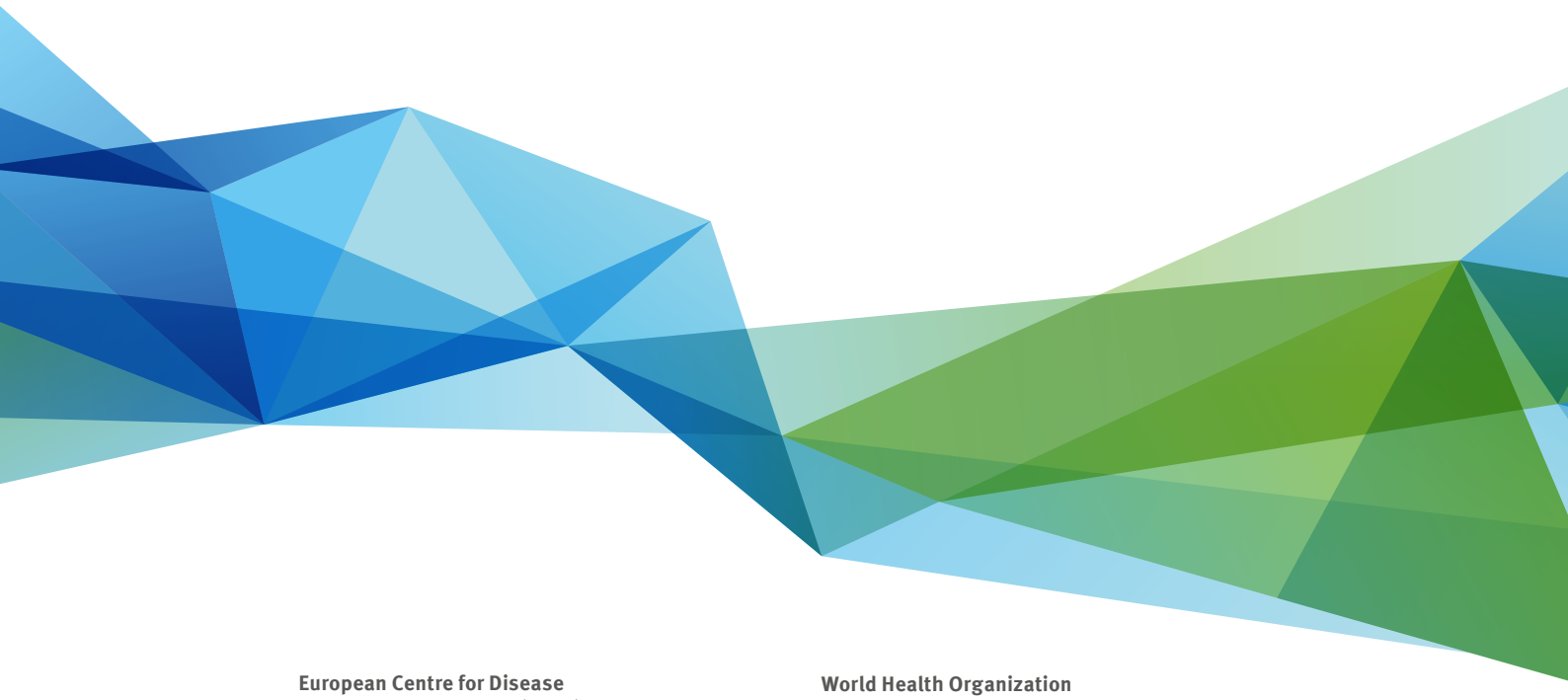

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