



KINGDOM OF SAUDI ARABIA

MINISTRY OF HEALTH

GLOBAL AIDS MONITORING REPORT

COUNTRY PROGRESS REPORT 2018

KINGDOM OF SAUDI ARABIA

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Overview

The Global AIDS Monitoring 2018 (GAM) report describes the progress achieved by Kingdom of Saudi Arabia (KSA) as of to December 2018 in the areas of HIV prevention, treatment and care as aligned to the ten Fast-Track commitments and expanded targets to end AIDS by 2030 for which the Kingdom of Saudi Arabia remains committed.

The process of data collection for the 2018 Global AIDS Monitoring report was undertaken between December 2018 and March 2019. The report writing for the Kingdom of Saudi Arabia (KSA) was guided by the leadership of the National AIDS Program Manager for KSA, along with guidance and support of the senior Ministry of Health Officials, and intensive inputs from the NAP staff. All key stakeholders involved in the AIDS response in KSA, were consulted and gave inputs through a series of meetings and interviews.

The GAM 2018 report reveals that Saudi Arabia has made substantial progress towards achieving or exceeding the 90-90-90 targets. In 2018, more than 94% who were aware of their status were accessing antiretroviral therapy, and more than 93% of people on treatment had suppressed viral loads.

Summary

1. The report incorporate data obtained from 23 HIV treatment centers located in nine regions of the Kingdom of Saudi Arabia.
2. There were 6744 people living with HIV and know their status by the end of 2018, which is equivalent to 84.3% of the estimated number of people living with HIV (PLHIV).
3. There were 6,321 adults and children receiving antiretroviral treatment as of 31 December 2018 (Males = 78.6%, Females = 19.6%, Children <15 years= 1.8%). Among these who are receiving antiretroviral treatment, 585 newly started ARV treatment during 2018 (Males = 76.1%, Females = 19.8%, Children <15 years= 4.1%).
4. By the end of 2018, 93% of adults and children were known to be on treatment 12 months after initiation in the previous year (n = 511).
5. About than ninety-four percent of patients on ARV treatment have achieved viral load suppression by the end of 2018 (n = 6,332).
6. Total number of reported AIDS related deaths has increased to 45 in 2018 compared to 33 in 2017.
7. All pregnant women known or identified to be living with HIV received antiretroviral medicines to reduce the risk of mother to child transmission of HIV (n = 43).
8. All infants born to mothers infected with HIV received HIV test within two months of delivery (n = 43).
9. Fifty six percent of the pregnant women attending ANC in 2018 were tested for syphilis (n =268,172).
10. The Percentage of pregnant women attending antenatal clinics with a positive (reactive) syphilis serology in 2018 was 0.003% (n = 150,935)
11. Percentage of prisoners who are living with HIV in 2018 was 0.2% (n = 46,943).
12. Percentage of people who inject drugs who tested for HIV in 2018 was 0.04% (n=7367).
13. The percentage of adults and children living with HIV newly enrolled in care who are detected having active TB disease was 1.5% (n = 606).

14. The Number of HIV-positive new and relapse TB patients started on TB treatment during 2018 who were already on antiretroviral therapy or started on antiretroviral therapy during TB treatment was 31 patients.
15. Number of patients started on treatment for latent TB infection, expressed as a percentage of the total number newly enrolled in HIV care during 2018 was 1.5% (n = 606)
16. More than 97% of persons started ARV treatment in 2018 were tested for Hepatitis B Virus (HBV). The number of persons diagnosed with HIV-HBV co-infection in HIV care during 2018 was 14, all of them started on combined treatment for both HIV and HBV.
17. The coverage rate with Hepatitis C Virus (HCV) testing among the PLHIV starting ARV therapy in 2018 was 97% (n = 606). Twenty-two persons were diagnosed with HIV-HCV co-infection in HIV care during 2018; all of them were started on treatment for Hepatitis C.

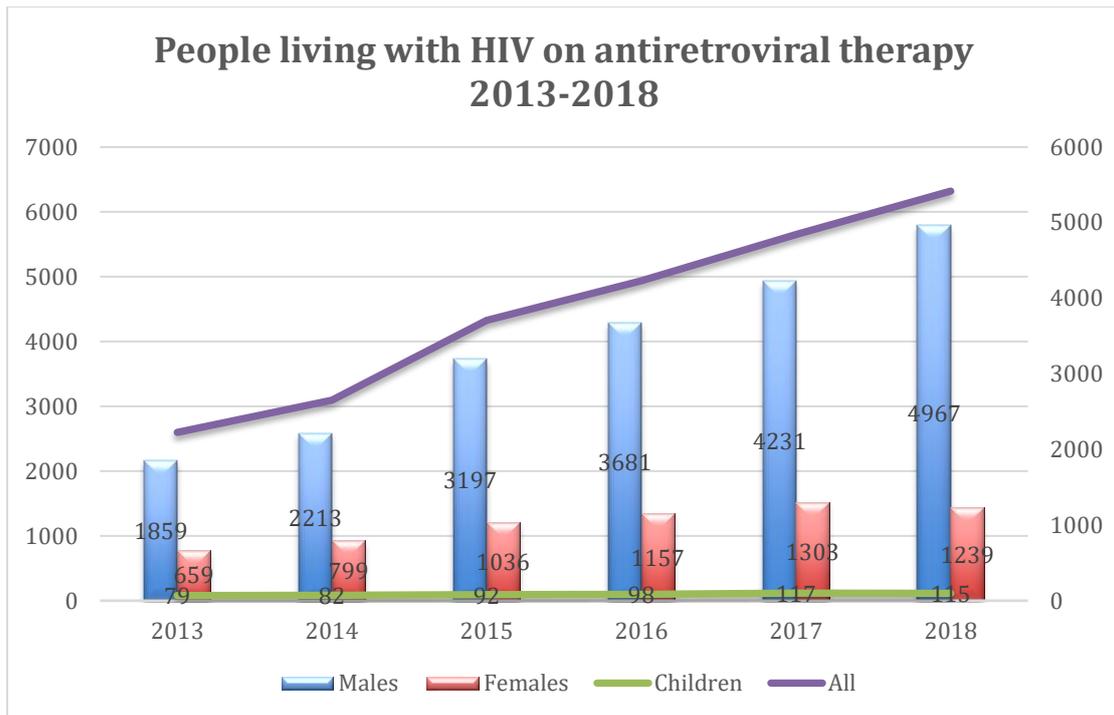
Commitment 1: Ensure that 30 million people living with HIV have access to treatment through meeting the 90–90–90 targets by 2020

People living with HIV who know their status

The total number of people living with HIV and know their status by the end of 2018 was 6,744 (77.2% males, 19.3% females, and 3.4% children <15years). The epidemic among Saudi Nationals continues to be predominated by men as they accounted for 80.7% of all the diagnosed infections (n = 8,148) and 85% of the newly reported HIV infections in 2018 (n = 533).

People living with HIV on antiretroviral therapy

KSA is on track towards achievement of the global treatment target of 90-90-90. Access to HIV care and treatment is provided free of charge to nationals of KSA through well-equipped and specialized treatment centers and in 2015 the Saudi National AIDS Program updated the National HIV treatment guidelines in order to increase access to HIV treatment and care services. By the end of December 2018, almost Ninety four percent (93.7%) of all diagnosed people living with HIV were on antiretroviral therapy. The number of adults and children receiving ART has been consistently increasing over the period 2013-2018. It has increased from 2597 in 2013 to 6321 in 2018.



Retention on antiretroviral therapy at 12 months

Retention on antiretroviral therapy after 12 months has increased from 92.4% in 2017 to 92.8% in 2018. Out of (511) adults and children initiating antiretroviral therapy in 2017, (474) were still alive and receiving antiretroviral after 12 months. Nine have died since starting antiretroviral therapy, (11) have stopped treatment and (17) PLHIV recorded as lost to follow-up at month 12.

Viral Load Suppression

5083 people on antiretroviral therapy who had access to routine viral load testing during 2018, 94% of them had suppressed viremia to below the level of quantification at the time of their last available HIV-RNA measurement.

Late HIV Diagnosis

Of all persons newly enrolled in HIV care in 2018, 97.8% had an initial CD4 count (n = 606). Those with first CD4 cell count < 350 cells/ μ L accounted for 59.4% while 22.3% had first CD4 cell count <200 cells/ μ L. This implies that a substantial proportion of newly diagnosed persons are presenting late for testing and hence there is still a great need for significantly scaling up HIV testing services and interventions in the general population and among key populations.

AIDS Mortality

Total number of people who have died from AIDS-related causes in 2018 was 45 persons accounting for a rate of 0.1 per 100 000 population. AIDS mortality remains low in the kingdom due to higher treatment coverage and better adherence to treatment.

Commitment 2: Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018

Early Infant Diagnosis

Saudi Arabia is implementing effective follow-up of HIV-exposed infants until a definitive diagnosis can be made. In 2018, 43 infants were reported to be born to HIV positive women. All of them received HIV testing within two months of delivery. All of them tested negative for HIV.

Preventing the mother-to-child transmission of HIV

During the year 2018, a total of 43 HIV Positive pregnant women were identified of which 38 pregnant mothers were known positives at entry. All HIV positive pregnant women received antiretroviral therapy to reduce the risk of mother to child transmission of HIV. A major milestone on the way to the elimination of mother-to-child transmission of HIV in KSA is the release of the National Act on HIV/AIDS Prevention and Protection of Rights and Responsibilities of People Living with HIV in Saudi Arabia in January 2018, which included the permission to conduct HIV counselling and testing among pregnant women. This will allow for diagnosing and providing lifelong antiretroviral therapy to almost all pregnant and breastfeeding women living with HIV.

Syphilis among pregnant women

Out of 268,172 women accessing antenatal care (ANC) services in 2018, 150,935 were tested for syphilis at first ANC visit with only 0.003% of them testing positive. No congenital syphilis cases was reported during 2018.

Commitment 3: Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners

HIV-prevention programmes for the general population focus on general HIV awareness-raising through mass-media IEC messages informing on basic information on HIV along with modes of transmission and dispelling the present myths and misconceptions. The NAP also supports a 24-hour hotline call-centre system that provides HIV information and counseling services for the general population. HIV-prevention programmes for

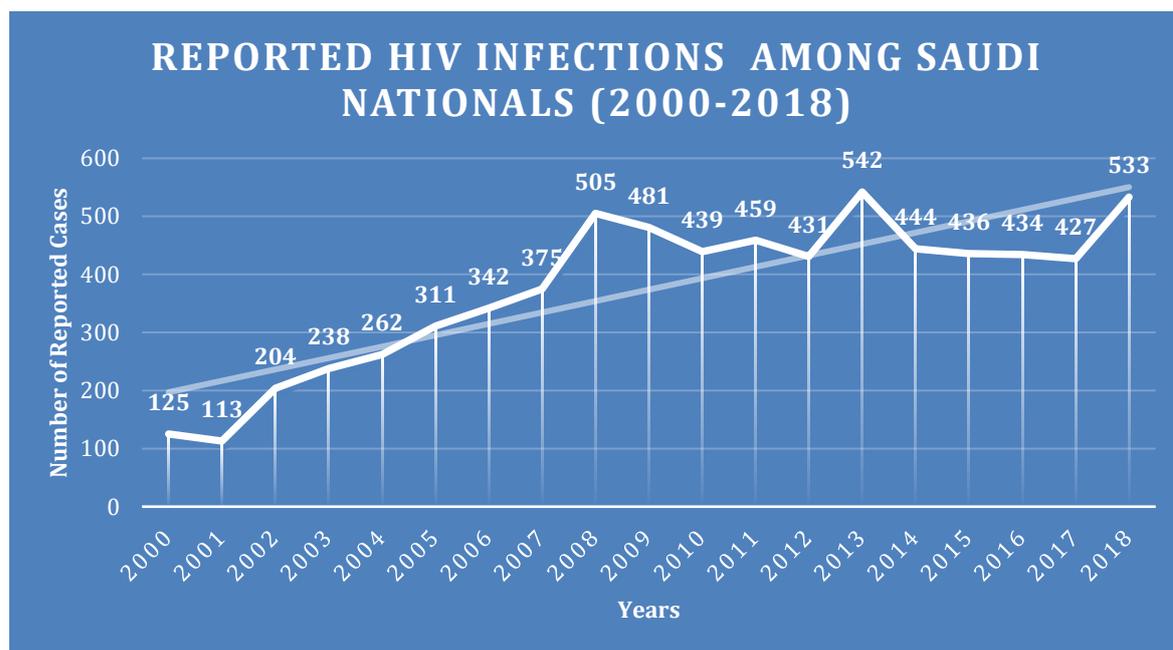
adolescents and youth focus on basic HIV knowledge in the curriculum of secondary schools.

In addition to general awareness-raising, other HIV-prevention interventions include condom promotion among discordant couples within PLHIV groups, as well as at STI clinics and in primary health-care centers. IEC materials are also disseminated and VCT services promoted at STI, TB and ART clinics.

Condoms are availed to discordant people living with HIV and to STIs patients and their spouses to prevent further spread of the infection.

HIV Incidence

The cumulative number of HIV infection among Saudi nationals over the period 1984-2018 was 8,148 including 533 newly diagnosed HIV infections, which were reported in 2018. In 2018, the largest proportion of HIV cases among Saudi Nationals were diagnosed among people aged 30-39 years (36%), followed by the 20–29 year age group (31%) while the least proportion of HIV cases were diagnosed among people aged 10-19 years (1.5%).



HIV prevention programmes in prisons

Addressing HIV among prisoners is an important component of the national response in KSA as prisoners are considered among key populations at risk of HIV in KSA. In 2018, 46,943 prisoners were screened for HIV with 0.2% of them were found to be HIV positive.

COMMITMENT 4. Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020

Stigma and discrimination are most often cited as the major obstacle to the HIV response in KSA. Early this year, the Council of Ministers approved National Act on HIV/AIDS Prevention and Protection of Rights and Responsibilities of People Living with HIV. The Act, which came in 29 articles, insured the preservation of the rights of PLHIV and their relatives, the statement of their duties, the necessary care and support for PLHIV and their right to continue education and work.

COMMITMENT 5. Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year

The National AIDS Program continue its awareness interventions which are aimed at increasing access to knowledge, and information about HIV risks and prevention amongst the sexually active sections of the population. The youths, both male and female, were the primary targets of such interventions because they are the most sexually active age groups and evidence shows that new detected HIV infections are higher in these age groups. HIV-prevention programmes for adolescents and youth focus on basic HIV knowledge in the curriculum of secondary schools.

COMMITMENT 10. Commit to taking AIDS out of isolation through people-centered systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C

Co-management of tuberculosis and HIV treatment

In 2018, 31 of the patients co-infected with TB and HIV were treated with both ART and TB drugs (27 males and 4 females). Subset of PLHIV newly enrolled in HIV care (n=579), 9 were diagnosed with active TB disease (1.5%) while only 9 PLHIV received preventive therapy to reduce the risk of developing active TB (1.5%).

Sexually Transmitted Infection

The total number of men reported with urethral discharge during the reporting period was 2,569 (17 per 100,000 population).

The total number of adult men reported with laboratory-diagnosed gonorrhoea in the past 12 months was 407 (3 per 100,000 population).

Hepatitis B testing and Treatment

The total number of people started on antiretroviral therapy who were tested for hepatitis B during the reporting period using hepatitis B surface antigen tests was 592 (97.7%), out of them 14 were diagnosed with HIV and HBV co-infection. All the persons co-infected with HIV and HBV received combined treatment with antiretroviral medicines effective against both HIV and HBV.

Hepatitis C testing and Treatment

The adults and children starting antiretroviral therapy who were tested for hepatitis C during the reporting period using the sequence of anti-HCV antibody tests followed by HCV polymerase chain reaction (PCR) for those who are anti-HCV was 590 (97.4%), out of them 22 persons were diagnosed with HIV and HCV co-infection. All the persons co-infected with HIV and HCV were started on HCV treatment

Table 1 GARPR Indicators Overview

<i>HIV prevention among general population</i>				
COMMITMENT 1. Ensure that 30 million people living with HIV have access to treatment through meeting the 90–90–90 targets by 2020				
1.1. <u>People living with HIV who know their status in 2018</u>	Males	Females	Children <15 yrs	Total
A- Cumulative number of people living with HIV diagnosed	6330	1418	400	8148
B- Cumulative number of AIDS-related deaths	1121	113	170	1404
C- Number of people living with HIV who know their status(A-B)	5209	1305	230	6744
1.2. <u>People living with HIV on antiretroviral therapy in 2018</u>	Males	Females	Children <15 yrs	Total
A- Number of adults and children receiving antiretroviral therapy at the end of the reporting period	4967	1239	115	6321
B- Persons newly initiating antiretroviral therapy during the last reporting year	445	116	24	585
1.3. <u>Retention on antiretroviral therapy at 12 months (2018)</u>	Males	Females	Children <15 yrs	Total
Percentage of adults and children with HIV known to be on treatment 12 months after initiating treatment among patients initiating ART	91.7%	96.6%	85.7%	92.8%
Number of adults and children who are still alive and on antiretroviral therapy at 12 months after initiating treatment	353	115	6	474
Total number of adults and children who initiated ART who were expected to achieve 12-month outcomes within the reporting period	385	119	7	511
1.4. <u>People living with HIV who have suppressed viral loads (2018)</u>	Males >15 yrs	Females >15yrs	Children 0-14 yrs	Total
Percentage of adults and children receiving ARV therapy who were virally suppressed in the reporting period (2018)	93.1%	96.3%	88%	93.6%
People who are virally suppressed among those tested (2018)	3727	946	84	4757
People receiving a routine viral load test among those on antiretroviral treatment (2018)	4005	982	96	5083
1.5. <u>Late HIV diagnosis (2018)</u>	Males >15 yrs	Females >15yrs	Children 0-14 yrs	Total
Total number of HIV-positive people with first CD4 cell count in 2018	446	117	30	593

Number and percentage of HIV positive persons with first CD4 cell count < 350 cells/μL in 2018	262 (58.7%)	74 (63.2%)	16 (53.3%)	352 (59.4%)
Number and percentage of HIV positive persons with first CD4 cell count < 200 cells/μL in 2018	94 (21.1%)	23 (19.7%)	15 (50%)	132 (22.3%)
1.6.AIDS Mortality (2018)				
	Males	Females	Total	
Number of people dying from AIDS-related causes during 2018	36	9	45	
Total number of people who have died from AIDS-related causes per 100 000 population during 2018	0.2	0.01	0.1	
COMMITMENT 2. Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018				
2.1. <u>Early infant diagnosis (2018)</u>				
Percentage (%) Percentage of HIV-positive pregnant women who received antiretroviral medicine to reduce the risk of mother-to-child transmission				100%
Numerator Number of infants who received an HIV test within two months of birth, during the reporting period. Infants tested should only be counted once				43
Test result - Positive:				0
Test result - Negative:				43
Denominator Number of HIV-positive pregnant women giving birth the last 12 months				43
2.2. <u>Mother-to-child transmission of HIV (2018)</u>				
Percentage (%) Percentage of infants born to HIV-positive women receiving a virological test for HIV within 2 months of birth				100%
Numerator Number of HIV-positive pregnant women who received antiretroviral drugs during the past 12 months to reduce the risk of mother-to-child transmission during pregnancy and delivery				43

Denominator Number of HIV-positive pregnant women who delivered within the past 12 months	43		
2.3. <u>Syphilis among pregnant women (2018)</u>			
Percentage of pregnant women accessing antenatal care (ANC) services who were tested for syphilis at any ANC visit	56.3%		
Numerator Number of pregnant women attending ANC services who were tested for syphilis at any ANC visit	150,935		
Denominator Number of pregnant women attending ANC services	268,172		
2.4. <u>Syphilis among pregnant women (2018)</u>			
Percentage of antenatal care attendees who were positive for syphilis	0.003%		
Numerator Number of pregnant women attending ANC services who were tested for syphilis at any ANC visit	4		
Denominator Number of antenatal care attendees who were tested for syphilis	150,935		
2.5. <u>Congenital syphilis rate (live births and stillbirth)</u>			
Percentage (%) of reported congenital syphilis cases (live births and stillbirth)	Zero%		
Numerator: Number of reported congenital syphilis cases (live births and stillbirths) in the 2018	Zero		
Denominator: Number of live births	600,000		
COMMITMENT 3. Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners			
3.1. <u>HIV Incidence (2018)</u>	Males	Females	Total
Number of newly diagnosed and reported HIV infections reported in 2018	453	80	533
3.2. <u>HIV Prevalence among prisoners (2018)</u>			
Percentage (%) of prisoners who are living with HIV	0.2%		
Numerator: Number of prisoners who test positive for HIV	112		
Denominator: Number of prisoners who tested for HIV	46,943		

COMMITMENT 4. Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020	
4.1. Discriminatory attitudes towards people living with HIV	
Release of the National Act on HIV/AIDS Prevention and Protection of Rights and Responsibilities of People Living with HIV in January 2018.	
COMMITMENT 5. Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year	
5.1. Demand for family planning satisfied by modern methods - NA	
COMMITMENT 6. Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020	
COMMITMENT 7. Ensure that at least 30% of all service delivery is community-led by 2020	
COMMITMENT 8. Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers	
COMMITMENT 9. Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights	
COMMITMENT 10. Commit to taking AIDS out of isolation through people-centered systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C	
10.1. Co-management of tuberculosis and HIV treatment (2018)	
Number of HIV-positive new and relapse TB patients started on TB treatment during the reporting period who were already on antiretroviral therapy or started on antiretroviral therapy during TB treatment within the reporting year.	31
10.2. Proportion of PLHIV newly enrolled in HIV care with active TB disease (2018)	
Percentage (%) Total number of people living with HIV having active TB expressed as a percentage of those who are newly enrolled in HIV care during the reporting period	1.5%
Total number of people who have active TB disease during the reporting period of those newly enrolled in HIV care	9
Total number of people newly enrolled in HIV care during the reporting period	606
10.3. Proportion of PLHIV newly enrolled in HIV care on TB preventive therapy (2018)	
Percentage (%) Number of patients started on treatment for latent TB infection, expressed as a percentage of the total number newly enrolled in HIV care during the reporting period	1.5%
Total number of people living with HIV newly enrolled in HIV care who start treatment for latent TB infection during the reporting period.	9
Total number of people newly enrolled in HIV care during the reporting period	606
10.4. Men with urethral discharge (2018)	
Percentage (%) Percentage of men reporting urethral discharge in the past 12 months	0.02%
Number of men reported with urethral discharge during the reporting period	2,569
Number of men aged 15 and older	14,660,934
10.5. Gonorrhoea among men (2018)	
Percentage (%) Percentage of men reporting urethral discharge in the past 12 months	0.003%
Number of men reported with urethral discharge during the reporting period	407
Number of men aged 15 and older	14,660,934
10.6. Hepatitis B testing (2107)	
Proportion of people starting antiretroviral therapy who were tested for hepatitis B	97.7%

Number of people started on antiretroviral therapy who were tested for hepatitis B during the reporting period using hepatitis B surface antigen tests	592
Number of people starting antiretroviral therapy during the reporting period	606
10.7. Proportion of people co-infected with HIV and HBV receiving combined treatment (2018)	
Proportion of people co-infected with HIV and HBV receiving combined treatment	100%
Number of people co-infected with HIV and HBV who receive treatment with antiretroviral medicines effective against both HIV and HBV during the reporting period	14
Number of people diagnosed with HIV and HBV coinfection in HIV care during a reporting period (12 months)	14
10.8. Hepatitis C testing (2018)	
Proportion of people starting antiretroviral therapy who were tested for hepatitis B	97%
Number of people started on antiretroviral therapy who were tested for hepatitis B during the reporting period using hepatitis B surface antigen tests	590
Number of people starting antiretroviral therapy during the reporting period	606
10.9. Proportion of people co-infected with HIV and HCV starting HCV treatment (2018)	
Proportion of people co-infected with HIV and HCV starting HCV treatment	100%
Number of people diagnosed with HIV and HCV coinfection starting treatment for HCV during a specified time frame	22
Number of people diagnosed with HIV and HCV coinfection enrolled in HIV care during a specified time period	22