

Although the first cases of AIDS in Asia were reported mid-1980s, the more extensive spread of HIV began late compared with the rest of the world, occurring in Cambodia, India, Myanmar and Thailand in the early 1990s (Ruxrungtham, Brown and Phanuphak, 2004[29]; UNAIDS, 2013[30]). Asia is second only to sub-Saharan Africa as the region with the greatest number of people with HIV. The UN set a SDG target to end the epidemic of AIDS as a public threat by 2030.

In Asia-Pacific, the prevalence of HIV infection varied importantly, ranging from one in 1 000 adults aged 15 to 49 in Australia, Nepal, New Zealand, Pakistan and the Philippines to 11 out of 1 000 adults aged 15 to 49 in Thailand in 2018 (Figure 3.28, left panel). Although HIV prevalence is low, the absolute number of people living with HIV was high at more than 4.2 million in reporting countries in 2018, because of Asia-Pacific's large population (Figure 3.28, right panel). Over 2.1 million people living with HIV were in India.

Expanded access to antiretroviral therapy (ART) has increased the survival rates of people living with HIV, but about half of the people eligible for HIV treatment do not receive it worldwide (UNAIDS, 2018[31]). The estimated ART coverage among person living with HIV in 2018 was less than one quarter in Bangladesh, Indonesia and Pakistan, whereas more than three quarters had access to ART Thailand, Singapore, Japan, Cambodia and Australia (Figure 3.29).

Over past years, many countries in Asia-Pacific responded to HIV/AIDS successfully and incidence rates have declined. Between 2010 and 2018, new cases of HIV infection were reduced by more than 50% in Sri Lanka, Nepal, Cambodia, Thailand, Viet Nam and Singapore. However, two new cases of HIV infections per 10000 uninfected population were reported in Myanmar and Papua New Guinea in 2018 (Figure 3.30). Moreover, the Philippines more than tripled the new cases of HIV infection between 2000 and 2018 (UNAIDS, 2019[32]).

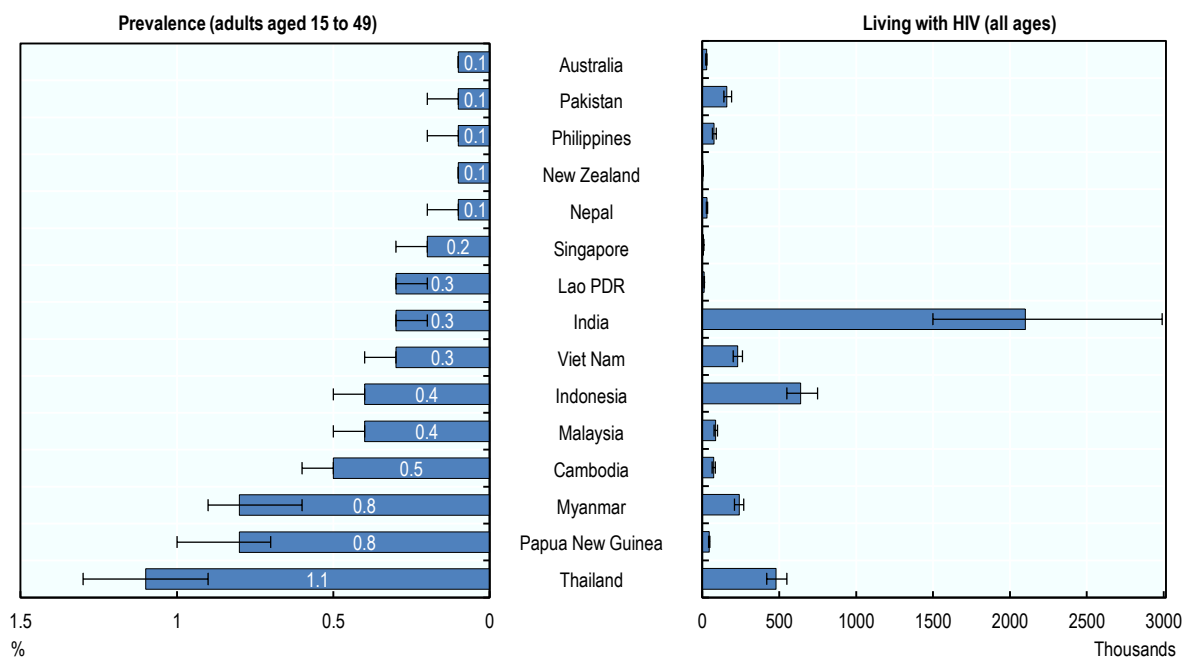
Advances in HIV prevention and treatment could end AIDS as a public health threat in the region. Recent evidence has emerged showing that antiretroviral drugs not only improves the health and prolong the lives of people living with HIV, but also prevents HIV transmission. The rapid scale up antiretroviral therapy in recent years in Asia and the Pacific provides unprecedented opportunity to successfully implement antiretroviral-based interventions for prevention. The benefits of ART can be fully realised only if people living with HIV are diagnosed and successfully linked to care. This will require targeted efforts and removing barriers especially among key affected populations, as most of Asia's epidemics occur among sex workers and their clients, men who have sex with men, transgender persons and injection drug users.

Definition and comparability

Human immunodeficiency virus (HIV) is a retrovirus that destroys or impairs the cells of the immune system. As HIV infection progresses, a person becomes more susceptible to infections. The most advanced stage of HIV infection is acquired immunodeficiency syndrome (AIDS). It can take 10-15 years for an HIV-infected person to develop AIDS, although antiretroviral drugs can slow down the process.

The HIV prevalence among adults aged 15 to 49 is the number of persons aged 15 to 49 estimated to be living with HIV divided by the total number of persons aged 15 to 49 at a particular time

Figure 3.28. Estimated number of people living with HIV, 2018

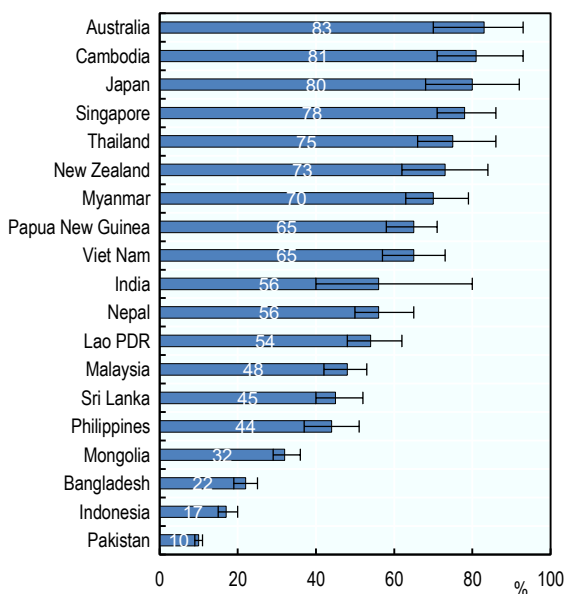


H represents lower and upper bounds.

Source: WHO GHO 2019.

StatLink <https://stat.link/ahobus>

Figure 3.29. Estimated antiretroviral therapy coverage among people living with HIV, 2018

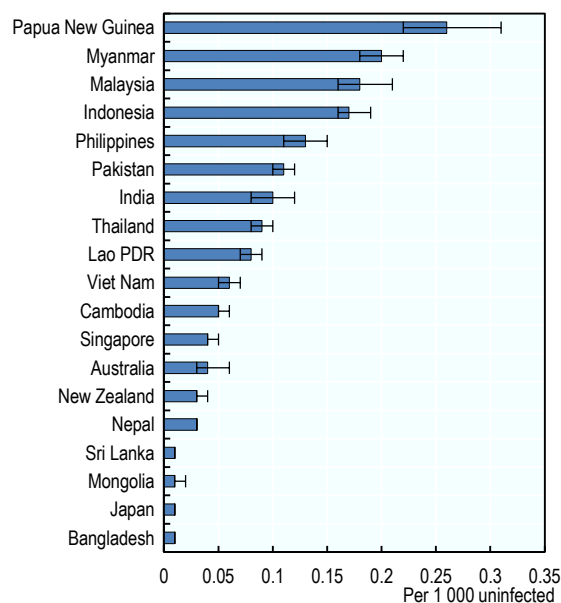


H represents lower and upper bounds.

Source: WHO GHO 2019.

StatLink <https://stat.link/5sot42>

Figure 3.30. New HIV infections per 1 000 uninfected population, 2018



H represents lower and upper bounds.

Source: WHO GHO 2019.

StatLink <https://stat.link/kz1xin>



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