

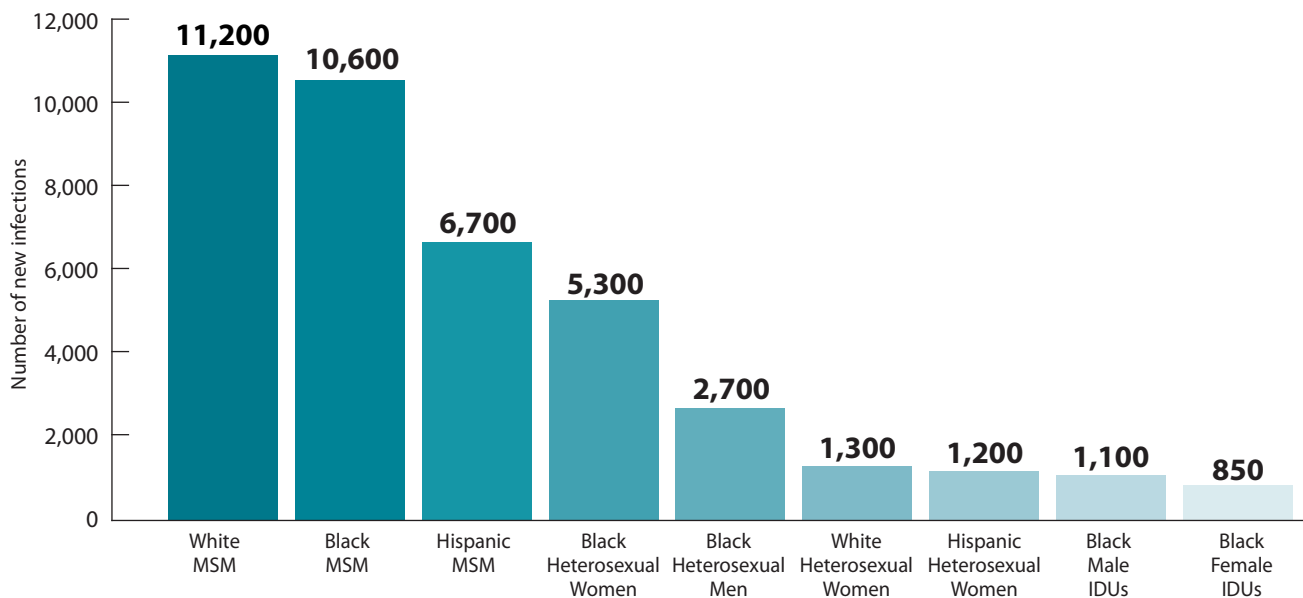
# HIV among Gay and Bisexual Men

Gay and bisexual men — referred to in CDC surveillance systems as men who have sex with men (MSM)<sup>1</sup> — of all races continue to be the risk group most severely affected by HIV. CDC’s most recent data show that between 2008 and 2010, the number of new infections among MSM increased 12 percent, with an even steeper increase among the youngest MSM. These data clearly show the urgent need to expand access to proven HIV prevention programs for gay and bisexual men, and to develop new approaches to fight HIV in this population.

## A Snapshot

- Overall, MSM — including those who inject drugs — account for more than half of the 1.1 million people living with HIV in the United States (57%, or an estimated 657,800 persons) and approximately two-thirds of all new HIV infections each year (66%, or an estimated 31,400 infections).
- Comparing 2008 to 2010, there was a 12 percent increase in the number of new infections among MSM. Among the youngest MSM — those aged 13–24 — new infections increased 22 percent, from 7,200 infections in 2008 to 8,800 in 2010.
- While CDC estimates that only 4 percent of men in the United States are MSM, the rate of new HIV diagnoses among MSM in the United States is more than 44 times that of other men (range: 522–989 per 100,000 MSM vs. 12 per 100,000 other men).<sup>2</sup>
- White MSM continue to represent the largest number of new HIV infections among MSM (11,200), followed closely by black MSM (10,600) and Hispanic MSM (6,700).

**Figure 1. Estimated New HIV Infections in the United States, 2010, for the Most-Affected Subpopulations**



<sup>1</sup> The term men who have sex with men is used in CDC surveillance systems because it indicates the behaviors that transmit HIV infection, rather than how individuals self-identify in terms of their sexuality.

<sup>2</sup> Purcell D et al. Estimating the population size of men who have sex with men in the United States to obtain HIV and syphilis rates. *The Open AIDS Journal* 2012; 6(Suppl 1: M6): 114–123.



- Young, black MSM are severely affected and now account for more new infections in the United States (4,800 in 2010) than any other subgroup by race/ethnicity, age, and sex.
- In a study of MSM in 20 major U.S. cities in 2011, nearly one in five MSM participating in the study was infected (18 percent). While MSM of all races and ethnicities were severely affected, black MSM were particularly impacted.
- CDC estimates that, nationally, about 19 percent of MSM living with HIV (or 113,300 men) do not know they are infected. Data suggest that young MSM and MSM of color are least likely to know they are infected.
- Even among MSM who have been diagnosed with HIV, across-the-board gaps in HIV care challenge prevention efforts.
  - In 2010, among MSM diagnosed with HIV, 78 percent were linked to care within three months of diagnosis, but only 51 percent were retained in care.
  - In large part because many were not in care, 50 percent of MSM diagnosed with HIV were prescribed antiretroviral therapy and only 42 percent achieved viral suppression (i.e., the virus is under control at a level that helps keep people healthy and reduces the risk of transmitting the virus to others).
  - Young MSM and African-American MSM were the least likely to receive care and treatment.
- AIDS continues to claim the lives of too many MSM. Since the beginning of the epidemic, more than 302,000 MSM with AIDS have died.

## Complex Factors Increase Risk

- **High prevalence of HIV:** The existing high prevalence of HIV among gay and bisexual men means MSM face a greater risk of being exposed to infection with each sexual encounter, especially as they get older. For young black MSM, partnering with older black men (among whom HIV prevalence is high) may also lead to increased risk.
- **Lack of knowledge of HIV status:** Studies show that individuals who know they are infected take steps to protect their partners. Yet many MSM are unaware of their status and may unknowingly be transmitting the virus to others. Additionally, some MSM may make false assumptions or have inaccurate information about their partner's HIV status. It is critical to ensure that sexually active MSM get tested for HIV at least annually, or more frequently as needed.
- **Social discrimination and cultural issues:** For some MSM, social and economic factors, including homophobia, stigma, and lack of access to health care may increase risk behaviors or be a barrier to receiving HIV prevention services.
- **Substance abuse:** Some MSM use alcohol and illegal drugs, contributing to increased risk for HIV infection and other STDs. Substance use can increase the risk for HIV transmission through risky sexual behaviors while under the influence and through sharing needles or other injection equipment.

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