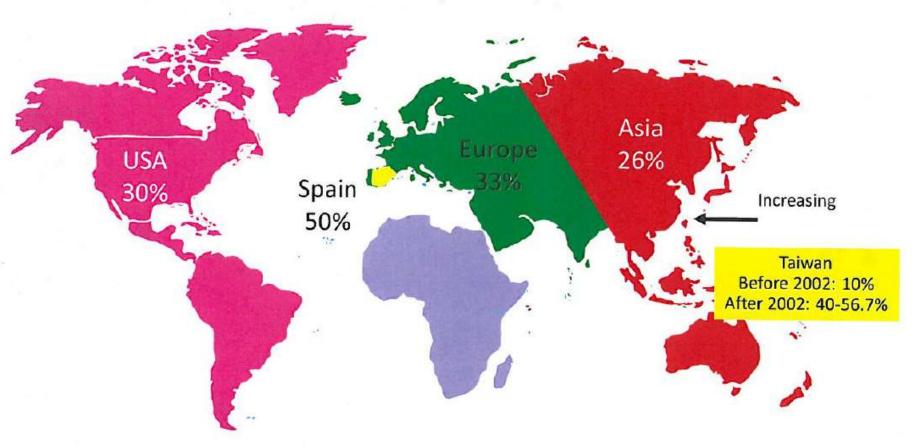
Prevalence of HCVHIV Co-infection

4-5 million carriers (HIV + HCV) worldwide



Sherman KE, et al. Antiviral Ther 2000; 5(Suppl 1):64–65
Lauer GM, et al. N Engl J Med 2001;345:41–45
Hung CC, et al. Int J STD AIDS 2005;16:42-48
Lee HC, et al. J Formos Med Assoc 2008;107:404-411





Contact us S 警費中文



Search

A Suspect Cluster of Indigenous Shigellosis in Taipei, Taiwan, 2015 (2015-06-09) 🚹 🕮 🚺



DOI: 10.6525/TEB.20150609.31(11).003

Mei-Lan Hung, Ying-Shih Su, Yu-Fang Tsai, Jiunn-Shyan Julian Wu*, Jer-Jea Yen

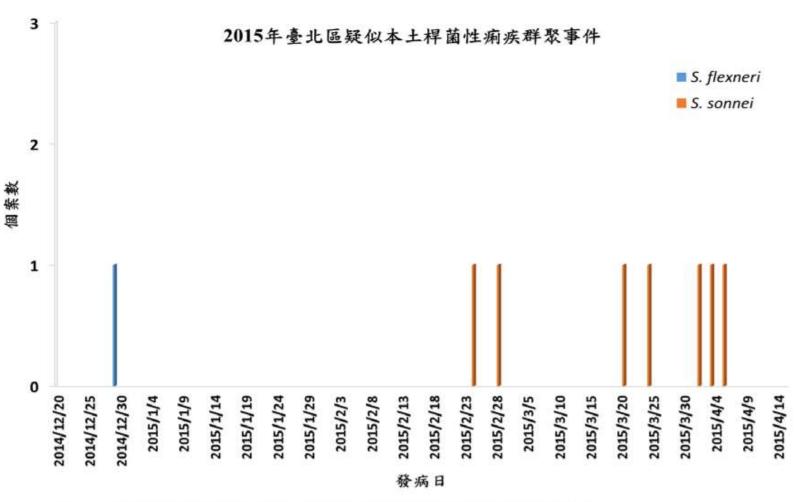
Taipei Regional Center, Centers for Disease Control, Ministry of Health and Welfare, Taiwan



2015/6 Volume 31 Number 11

Correspondence Author: Jiunn-Shyan Julian Wu

From January 1 to April 13,2015, eight cases of Shigella infection were reported to the Taipei Regional Center of Taiwan Centers for Disease Control(TRC, TCDC). Seven persons were confirmed as Shigella sonnei(serogroup D) and the other one was confirmed as S. flexneri (serogroup B) from their stool samples by the Research, Diagnostics and Vaccine Development Center of TCDC. Epidemiologic investigation reveled that all eight cases were human immunodeficiency virus(HIV) infected males



圖一、2015年臺北區疑似本土桿菌性痢疾群聚事件流行曲線圖

A Suspect Cluster of Indigenous Shigellosis in Taipei, Taiwan, 2015

- nine non-imported Shigella sonnei infections among HIV-infected Taiwanese MSM
- Risks: engagement in oral-anal sex before illness onset.
 - with a syphilis report within 12 months (aOR 8.6; 95% CI 1.05-70.3)
 - no HIV OPD follow-up within 12 months (aOR 22.3; 95% CI 2.5-201).
- PFGE: multiple sources outbreak and possible under-recognition of infection among Taiwanese MSM.
- The outbreak isolates were characterized to be variants of the intercontinentally transmitted SS18.1 clone

⁻ Chiu CS, Lo YC. DOI: http://dx.doi.org/10.1016/j.cmi.2015.12.021-



Outline



- > Introduction
- >Major problem
- >Strategy
- **>**Outcome





Public health



Inter-bureau cooperation

Safer sex education



Screening & Testing



Case management

































Bidirectional Dissemination of Information Line - Volunteer community network





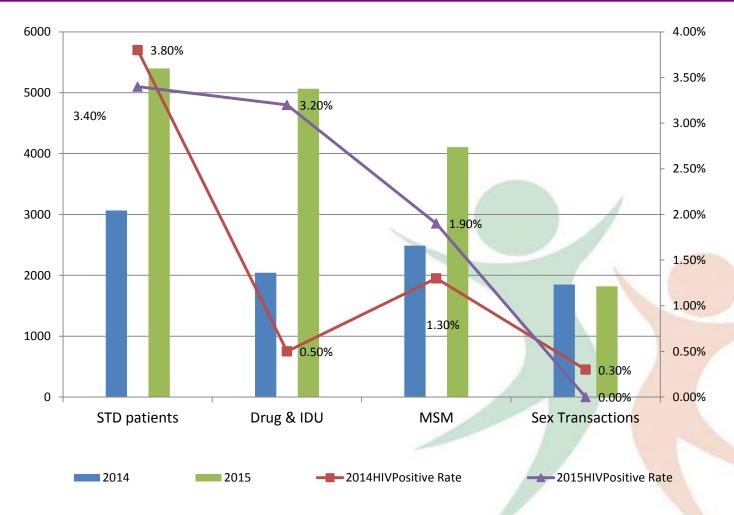






Secondary prevention: Screening







Tertiary Case management



Goal: End the AIDS Epidemic by 2030

Target: Treatment 90 - 90 - 90 by 2020

90% Diagnosed

Expand HIV testing and counselling for key population

90% on Treatment

- Provide ART to all HIV infection
- Improve the available of HIV treatment and care

90% Virally Suppressed

- Sustained monitor
- Effective adherence support intervention

Source: 90-90-90, UNAIDS. 2014

The Current Situation of

Taiwan HIV/AIDS Prevention & Control

90-90-90 strategy

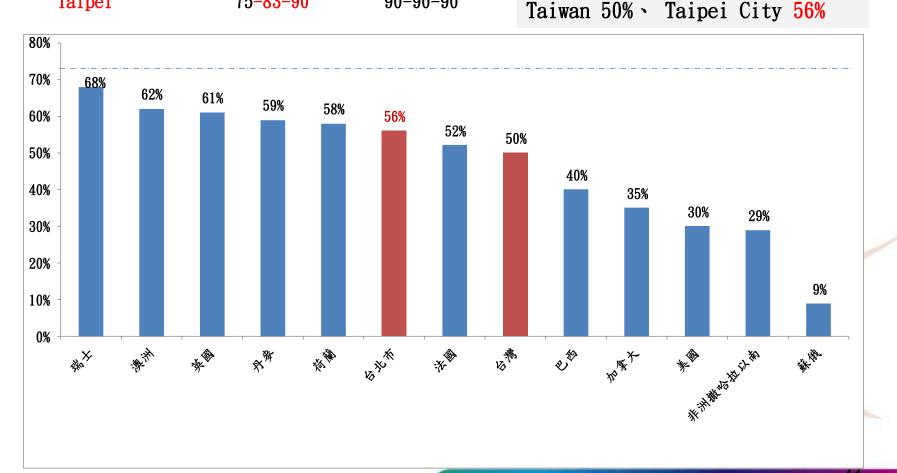
2014

2020

Taiwan Taipei 75-79-85 75-83-90 90 - 90 - 90

90-90-90

UNAIDS 90-90-90 goal viral load undetected 73% (90%*90%*90%=73%)





Strategy of Reduce Group 2 Cases (Meth-amphetamine)

- Harm reduction to help drug abuser.
 - Apply the successful experience of harm reduction strategy like heroin addicts (MMT, NEP)
- Reduce psychological stigmatization and social prejudice.
- Combine addiction science, public health, human rights protection and others to form multi-direction intervention





Strategy of Reduce Group 2 Cases (Meth-amphetamine)

- Change the attitude when publicized
 - Real Drug Education, avoid scare tactics
 - Change the attitude of zero tolerance
- Integrated drug abuse intervention service
 - Offer more method of intervention and psychological and mental health service
 - Making customized plan for diversity group (Meeting the needs)
 - Teenager group, recreational drug group
 - Abstinence-based treatment
 - Non-abstinence based treatment
 - (EX: Treat melancholia and psychosis cause by amphetamine)

