INTRODUCTION

This is the third issue of "AIDS - New Zealand", a quarterly report of the Medical Research Council AIDS Epidemiology Group. AIDS is a notifiable disease in New Zealand. This means that a medical practitioner diagnosing a person as having the Acquired Immunodeficiency Syndrome (AIDS) must notify the local Medical Officer of Health. Notifications made in this way are coded and do not identify the person by name or address. These coded notifications are then forwarded to the AIDS Epidemiology Group who are responsible for the monitoring and surveillance of the spread of AIDS in New Zealand. This Group provides weekly summaries and detailed reports three monthly to the AIDS Task Force of the Department of Health.

It should be noted that although AIDS results from infection with the human immunodeficiency virus (HIV), the diagnosis of AIDS is made according to a set of internationally agreed clinical and laboratory criteria. HIV infection itself is not notifiable. Current data suggest that at least 50% of people with HIV infection do not develop AIDS until more than 5 - 10 years have elapsed from the time of infection. The collated HIV data are provided on a voluntary basis by the three laboratories in New Zealand which are undertaking confirmatory testing for the presence of human immunodeficiency virus.

AIDS IN NEW ZEALAND

As of October 31, 1989 there had been 53 people newly notified as having AIDS in New Zealand during this calendar year. This brings the total number of people notified in New Zealand since the first notification in January 1984, to 154. Of these, 67 people are known to have died.

The annual and cumulative number of people notified as having AIDS in New Zealand is shown in Figure 1.

Figure 2 depicts the number of AIDS cases notified on a quarterly basis. Wide fluctuation is evident. There were only five new diagnoses
of AIDS notified in the third quarter of 1989, but so far in the fourth quarter (i.e. October only) there have been eight people notified as having AIDS. In the first and second quarters of this year there were 24 and 16 notifications respectively.

Statistical analysis of the quarter-by-quarter data shows that, for reasons which are not known, third quarter notifications tend to be lower than the quarterly average by a factor of almost 25%. The first quarter of each year tends to have the highest number - about 15% above the quarterly average. Analysis of the quarterly data taking this trend into account shows that a quarterly total of five is not statistically significantly lower than what would be expected (at a 95% level of confidence). The wide fluctuations are highlighted by the fact that in just the first month of the fourth quarter there have been eight notifications.

**GEOGRAPHICAL DISTRIBUTION**

All of the notifications received in the third quarter and October have arisen from Auckland and Wellington. Figure 3 shows the AIDS notification rates by geographical region on a quarter-by-quarter basis. Table 1 shows the regional distribution as of 31 October, 1989.

<table>
<thead>
<tr>
<th></th>
<th>Regional Distribution: Number of AIDS Reports (Rate per 100,000 population)</th>
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<tbody>
<tr>
<td></td>
<td>As at 31 October 1989:</td>
</tr>
<tr>
<td>Auckland</td>
<td>92 (10.1)</td>
</tr>
<tr>
<td>Wellington</td>
<td>32 (8.3)</td>
</tr>
<tr>
<td>Other North Is.</td>
<td>20 (1.8)</td>
</tr>
<tr>
<td>South Island</td>
<td>10 (1.2)</td>
</tr>
<tr>
<td>NEW ZEALAND</td>
<td>154 (4.8)</td>
</tr>
</tbody>
</table>

**RISK BEHAVIOUR CATEGORY**

Figure 4a (page 4) summarises the information on risk behaviour category among people with AIDS in New Zealand.

**AGE AND SEX DISTRIBUTION**

Of the people notified as having AIDS, four are female and 150 are male. The mean age at time of notification for people with AIDS is 37.5 years with a standard deviation of 9.8 years.
HIV ANTIBODY POSITIVE TESTS

The total number of known HIV antibody positive test results reported by the laboratories doing confirmatory testing was 492 as of September 30, 1989 (the most recent cumulative report). An unknown number of these represent duplicate tests. Nineteen of these positive test results have occurred in females, 452 in males and in 21 instances, the sex is unknown. The risk behaviour categorisation is summarised graphically in Figure 4b.

Figure 4a - Risk Behaviour Category
(People with AIDS)

Figure 4b - Risk Behaviour Category
(HIV Antibody Positive Tests)

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