### **Technical Reports**

# AIDS surveillance in Europe: Status at 31st December 1992

By 31st December 1992, a cumulative total of 87428 AIDS cases had been reported in the countries of the WHO European region. The 21466 new cases reported during 1992 represent an increase of 16% compared to 1991, very similar to the 15.7% increase noted between 1990 and 1991, very similar to the 15.7% increase noted between 1990 and 1991. Adjustment for reporting delays leads to an estimate of 94607 cumulative AIDS cases diagnosed by 31st December 1992. Just over half of all reported AIDS cases are known to have died 44375/87428). However, deaths are less well reported than cases and fatality rates are therefore underestimated.

The newly independent states of the former USSR (CIS and Baltic States) and Yugoslavia are gradually participating in the surveillance of AIDS.

Cumulative rates of AIDS cases per million population range from zero (Albania, Azerbaijan) to over 200 (Denmark, France, Italy, Monaco, Spain, Switzerland). The latter six countries account for 68.4% (59764/87428) of all cases reported in Europe, while the 17 countries with rates below 30 per million account for only 1.1% (985 cases). However, the proportion of cases reported from these 17 "low prevalence" countries has been increasing progressively, from 0.9% prior to 1990 to 1.4% in 1992. Within this same group of countries, the number of newly reported cases increased by 31% between 1990 and 1991 and by 42% between 1991 and 1992, compared with the overall increases of around 16%.

Among cases diagnosed in 1992, 17.5% were female and 86% were aged between 20 and 49 years. The previously noted trend towards increasing age at diagnosis has continued, for both male and female cases: between 1990 and 1992, the percentage of cases aged 30 years or over increased progressively from 65.8% to 72.7% among males and from 38.6% to 52.3% among females.

In the European region as a whole, adjusted incidence continued to increase, both overall and in each of the three main transmission groups, which together account for an estimated 83.2% of cases diagnosed in 1992. Among cases diagnosed since 1991, injecting drug users (IDU) represent the largest transmission group (in 1992, an estimated 37.4% of cases were IDUs, 34.5% were homosexual or bisexual men and 11.3% were infected by heterosexual contact). The largest percentage in-

crease occurred in the heterosexual transmission group, with an estimated increase of 24.8% between 1991 and 1992. Adjusted incidence continued to increase in most countries of the region, although rates appear to have become relatively stable in a number of countries.

A cumulative total of 3834 paediatric cases (children under 13 years of age) have been reported. Excluding those reported from Romania (due mainly to blood-borne or nosocomial transmission of HIV), 78.4% (1358/1733) of these cases are related to mother-to-child transmission.

### AIDS cases among heterosexual injecting drug users

A cumulative total of 30,190 cases among heterosexual IDUs was reported in the WHO European region by 31st December 1992. Of these, 87% (26267) were reported by three countries (France, Italy and Spain) and a further 7.5% (2254) by F. R. Germany and Switzerland. Moreover, in three other countries (Ireland, Poland, F. R. Yugoslavia), over 40% of all AIDS cases were reported in this group. In twelve countries, zero cases were reported among IDUs. The number of AIDS cases reported among heterosexual IDUs increased rapidly between 1984 and 1990. In 1991 and 1992, more cases were diagnosed in the IDU group than in any other single transmission group.

To study the distribution by age at diagnosis, sex and year of diagnosis, the European Non Aggregate AIDS Data Set (ENAADS) was used. ENAADS contains all reported IDU cases except those from Ireland (N = 127) and San-Marino (N = 1).

The distribution of male and female heterosexual IDU cases by age group at diagnosis shows that females are younger than males. The median age of both females and males lies between 25 and 29 years but more females than males are under 25 years of age (18.4% versus 11.5%, p < 0.0001), and 62.2% of females compared to 52.2% of males are aged less than 30 years (p < 0.0001). Age distributions in the selected countries are presented in Table 9. The median age lies between 25 and 29 years in France, Italy and Spain and between 30-39 years in F. R. Germany and Switzerland. In each of these five countries, age at diagnosis has increased since the last analysis in March 1990.

Observed percentages of cases over 29 years of age, increased from 39% to 47% in France, from 62% to 69% in F. R. Germany, from 33% to 45% in Italy, from 32% to 40% in Spain, and from 40% to 51% in Switzerland. Among countries with fewer AIDS cases, the median age group was 25–29 years in Poland and 30–39 in F. R. Yugoslavia.

Overall trends in incidence over time show a general increase in both sexes until at least 1991. Data for 1992 are incomplete due to reporting delays. The male-to-female sex ratio of cumulative cases is 3.6 (23491/6569). A marked increase in the sex ratio occurred in 1989.

Trends in incidence by age at diagnosis and sex show a decrease in the age groups under 25 years and a rapid increase of cases aged 30 or more, for both males and females. For the age group 25–29 years, smaller increases are noted since 1989 among males whereas among females this slowing down is less marked.

Similar trends are observed in each of the five incidence countries (France, F. R. Germany, Italy, Spain and Switzerland) except that in F. R. Germany and in Switzerland a decrease is observed also in the 25–29 year age group. In countries with few AIDS cases, trends are difficult to interpret. In

F. R. Yugoslavia, a rapid increase is observed in the group aged 30 years and over, with small increases in the 25-29 year age group and very few cases under 25 years. In Poland, a higher proportion of cases has been reported in the younger age groups (<25 years), but the very small number of cases makes any interpretation extremely hazardous.

In 1991 and 1992, more cases were diagnosed in the IDU group than in any other single transmission group.

Females tend to be younger than males. Overall age at diagnosis is increasing with time. In both sexes, incidence has decreased in the age group under 25 years and increased in the older groups (25–29 years and 30 years and over). These trends are noted in all countries with more than a thousand IDU AIDS cases. In countries with few AIDS cases but with high proportions in the IDU group, trends are difficult to interpret.

Changes in age distribution of IDU AIDS cases reflect, at least in part, the fact that cases with longer incubation periods are now being diagnosed. They could however also reflect a change of drug-related behaviour.

European Centre for Epidemiological Monitoring of Aids, Paris

# World Health Day: Prevent violence and negligence!

At least three and a half million people on our planet die every year as a result of injury caused by violence, accidental or intentional. In an attempt to stop this disastrous trend the World Health Organization (WHO) had decided to devote World Health Day 1993 to the prevention of injuries. The selected slogan – "Handle Life with Care: Prevent Violence and Negligence" – shows clearly that accidents and violence are far from being unavoidable. Let alone intentional injuries, suicides, murders and other crimes, most accidents occuring on the road, in the workplace or in the home could be prevented.

#### Victims of the road

About 700 000 lives are lost yearly on the road. In addition, between 10 and 15 million persons are estimated to be injured, which represents a death every 50 seconds, and an injury every two seconds around the world. Developing countries, which account for almost two-thirds of mortality, are the hardest hit. But even worse, mortality trends are on the rise, unlike in industrialized countries, where better roads, seat belts and speed limits have resulted in a 18% decrease in mortality on roads over 10 years.

Among 33 developed and developing countries surveyed, Ethiopia, with only one vehicle per 1000 population, reported 150 deaths per 10000 vehicles – the world's worst safety record. The best level of traffic safety is that of the United States, the most motorised country in the world with 771 vehicles per thousand people, which reports 2.5 deaths per 10000 vehicles.

In developing countries, children under 15 account for 20% of all mortal vehicle fatalities, twice as much as industrialized nations. Pedestrians account for about 20% of all those killed on the road in industrialized nations and between 30 and 50% in developing countries.

High mortality rates, especially among young drivers, are attributed in large part to the influence of alcohol, especially in the developing nations, where there is little awareness of the relationship between the bottle and the wheel.

Although manufacturers have built safer cars, they still make them faster and faster. In 1967, for instance, only 10% of cars built in France could reach the speed of 150 km per hour; and 1987 75% could. Speed and engine power are extolled in advertisements.