Background
Currently prevention services (interviews, partner notification, and counseling) are offered to persons with a newly diagnosed HIV infection and persons with a newly diagnosed STD and a prior HIV infection diagnosis.

Data that measure what is actually done is needed to guide decisions.

Objective
To determine and compare the partner index for persons diagnosed with a new HIV infection and persons that were previously reported as HIV positive, whom are currently diagnosed with a new STD.

Methods
Data was extracted from the state data files reported in 2010. The partner index was calculated for persons diagnosed with a new HIV infection and persons that were previously reported as HIV positive, whom are currently diagnosed with a new STD.

Results
Persons with a new HIV infection (n= 2,465) were interviewed in Florida. 2,211 partners were named which resulted in a partner index of 0.90.

Persons with a previously diagnosed HIV infection (1,318 unique patients) and a new STD diagnosis were interviewed (1,358 unique interviews) in Florida. 779 partners were named which resulted in a partner index of 0.65.

Conclusion
The partner index for persons with a previously diagnosed HIV infection and a new STD diagnosis is significantly less than (p<.001) the partner index for persons with a new HIV infection.

If more people with an old HIV diagnosis were interviewed the partner index may rise, which could prevent the further spread of the disease.

Definitions
STD cases are linked to the State’s data files of reported HIV cases. The initial date of HIV diagnosis is data captured for each reported STD.

Persons with a new HIV infection: Persons interviewed for HIV with a disposition of 2 or 5, indicating a new, not previously reported case of HIV.

Persons with a previously diagnosed HIV infection: Persons with a reported case of syphilis, gonorrhea or chlamydia that had a cases of HIV with an initial diagnosis date 90 days prior to the diagnosis date of the STD.

Hypothesis: The distribution of the number of named-partners is the same for the two categories of persons interviewed (newly diagnosed HIV cases vs previously diagnosed HIV cases with a new STD).

A number of non-parametric tests were run, using SPSS, which showed that the distribution of the number of named-partners was not the same for the two categories of persons interviewed (newly diagnosed HIV cases vs previously diagnosed HIV cases with a new STD).

Implications for Programs, Policy, and Research
Programs considering rationing services as a means to increase program effectiveness must consider the synergistic effects of their actions.

For a Healthy Tomorrow: Prevent STDs Today!
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* In previous versions of this abstract, if the original patient was interviewed for more than 1 STD, the total number of persons interviewed and partners named were counted multiple times.

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