

# SANKOFA FACT SHEET

April 2008

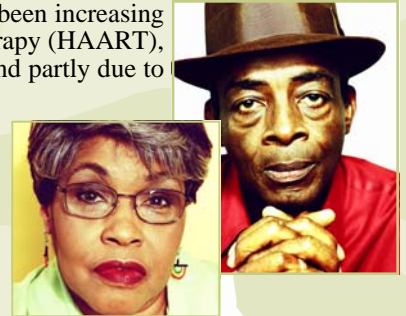
No. 17

## HIV/AIDS Prevalence among Persons Aged 50 and Older

The number of persons aged 50 years and older living with HIV/AIDS has been increasing in recent years. This increase is partly due to highly active antiretroviral therapy (HAART), which has made it possible for many HIV-infected persons to live longer, and partly due to newly diagnosed infections in persons over the age of 50.

In 2005, Persons Aged 50 and Older accounted for:

- 5% of new HIV/AIDS diagnoses
- 24% of persons living with HIV/AIDS (increased from 17% in 2001)
- 19% of all AIDS diagnoses
- 29% of persons living with AIDS
- 35% of all deaths of persons with AIDS

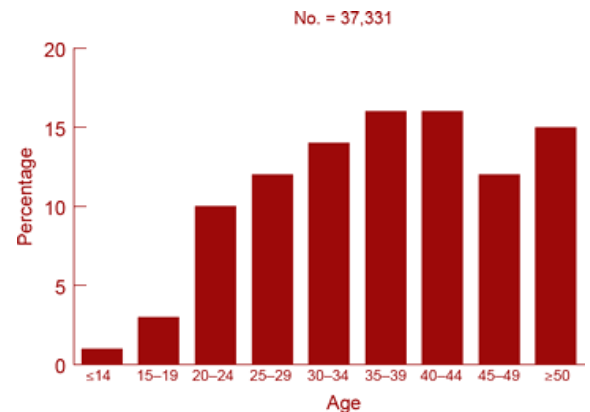


The rates of HIV/AIDS among persons 50 and older were 12 times as high among blacks (51.7/100,000) and 5 times as high among Hispanics (21.4/100,000) compared with whites (4.2/100,000).

### PREVENTION CHALLENGES

- Persons over the age of 50 may have many of the same risk factors for HIV infection that younger persons have.
- Many older persons are sexually active but may not be practicing safer sex to reduce their risk for HIV infection. Older women may be especially at risk because age-related vaginal thinning and dryness can cause tears in the vaginal area.
- Some older persons inject drugs or smoke crack cocaine, which can put them at risk for HIV infection. HIV transmission through injection drug use accounts for more than 16% of AIDS cases among persons aged 50 and older in 2005.
- Some older persons, compared with those who are younger, may be less knowledgeable about HIV/AIDS and therefore less likely to protect themselves. Many do not perceive themselves as at risk for HIV, do not use condoms, and do not get tested for HIV.

### Estimated Numbers of Cases of HIV/AIDS by Age - 2005



Source: Centers for Disease Control and Prevention. HIV/AIDS among Persons Aged 50 and older. Based on data from 33 states with long-term, confidential name-based HIV reporting.

- Older persons of minority races/ethnicities may face discrimination and stigma that can lead to later testing, diagnosis, and reluctance to seek services.
- Health care professionals may underestimate their older patients' risk for HIV/AIDS and thus may miss opportunities to deliver prevention messages, offer HIV testing, or make an early diagnosis that could help their patients get early care.
- Physicians may miss a diagnosis of AIDS because some symptoms can mimic those of normal aging, for example, fatigue, weight loss, and mental confusion. Early diagnosis, which typically leads to the prescription of HAART and to other medical and social services, can improve a person's chances of living a longer and healthier life.
- The stigma of HIV/AIDS may be more severe among older persons, leading them to hide their diagnosis from family and friends. Failure to disclose HIV infection may limit or preclude potential emotional and practical support.

Source: Centers for Disease Control and Prevention. HIV/AIDS among Persons Aged 50 and older. Divisions of HIV/AIDS Prevention. National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. February 28, 2008. Retrieved June, 9, 2008 from <http://www.cdc.gov/hiv/topics/over50/resources/factsheets/over50.htm>