

## Highlights of the Revised Surveillance Case Definitions for HIV Infection Among Adults, Adolescents, and Children Aged <18 Months and for HIV Infection and AIDS Among Children Aged 18 Months to <13 Years-United States, 2008.

You will find the entire article at [www.CDC.gov](http://www.CDC.gov). The article was published in the December 5, 2008 Morbidity and Mortality Weekly Report (MMWR).

Several times since the beginning of the human immunodeficiency virus (HIV) epidemic, the Centers for Disease Control and Prevention (CDC) have revised the case definition to respond to diagnostic and therapeutic advances in the disease. These revisions have helped to improve standardization and comparability of surveillance data. It is important to note that these revised, “case definitions are intended for public health surveillance only and not as a guide for clinical diagnosis.”<sup>(1)</sup>

“Public health surveillance data are used primarily for monitoring the HIV epidemic and for planning on a population level, not for making clinical decisions for individual patients. CDC and the Council of State and Territorial Epidemiologists recommend that all states and territories conduct case surveillance of HIV infection and AIDS using the 2008 surveillance case definitions, effective immediately.”<sup>(2)</sup> Our colleagues at CDC have asked that we make a paradigm shift from HIV and AIDS as being two different entities to simply HIV Infection with AIDS being the third stage. We will begin seeing this new terminology in articles, tables and presentations.

The table below lists the new stages. The new definition requires laboratory-confirmed evidence of HIV infection to meet the case definition among adults, adolescents, and children aged 18 months to < 13 years.

**Table 1<sup>(3)</sup>:**

**TABLE. Surveillance case definition for human immunodeficiency virus (HIV) infection among adults and adolescents (aged ≥13 years) — United States, 2008**

Stage	Laboratory evidence*	Clinical evidence
Stage 1	Laboratory confirmation of HIV infection <i>and</i> CD4+ T-lymphocyte count of ≥500 cells/μL or CD4+ T-lymphocyte percentage of ≥29	None required (but no AIDS-defining condition)
Stage 2	Laboratory confirmation of HIV infection <i>and</i> CD4+ T-lymphocyte count of 200–499 cells/μL or CD4+ T-lymphocyte percentage of 14–28	None required (but no AIDS-defining condition)
Stage 3 (AIDS)	Laboratory confirmation of HIV infection <i>and</i> CD4+ T-lymphocyte count of <200 cells/μL or CD4+ T-lymphocyte percentage of <14 <sup>†</sup>	or documentation of an AIDS-defining condition (with laboratory confirmation of HIV infection) <sup>‡</sup>
Stage unknown <sup>§</sup>	Laboratory confirmation of HIV infection <i>and</i> no information on CD4+ T-lymphocyte count or percentage	<i>and</i> no information on presence of AIDS-defining conditions

\* The CD4+ T-lymphocyte percentage is the percentage of total lymphocytes. If the CD4+ T-lymphocyte count and percentage do not correspond to the same HIV infection stage, select the more severe stage.

<sup>†</sup> Documentation of an AIDS-defining condition (Appendix A) supersedes a CD4+ T-lymphocyte count of ≥200 cells/μL and a CD4+ T-lymphocyte percentage of total lymphocytes of ≥14. Definitive diagnostic methods for these conditions are available in Appendix C of the 1993 revised HIV classification system and the expanded AIDS case definition (CDC, 1993 Revised classification system for HIV infection and expanded surveillance case definition for AIDS among adolescents and adults. MMWR 1992;41[No. RR-17]) and from the National Notifiable Diseases Surveillance System (available at [http://www.cdc.gov/epo/dphsi/casedet/case\\_definitions.htm](http://www.cdc.gov/epo/dphsi/casedet/case_definitions.htm)).

<sup>§</sup> Although cases with no information on CD4+ T-lymphocyte count or percentage or on the presence of AIDS-defining conditions can be classified as stage unknown, every effort should be made to report CD4+ T-lymphocyte counts or percentages and the presence of AIDS-defining conditions at the time of diagnosis. Additional CD4+ T-lymphocyte counts or percentages and any identified AIDS-defining conditions can be reported as recommended. (Council of State and Territorial Epidemiologists. Laboratory reporting of clinical test results indicative of HIV infection: new standards for a new era of surveillance and prevention [Position Statement 04-ID-07]; 2004. Available at <http://www.cste.org/ps/2004pdf/04-ID-07-final.pdf>.)

**References:** (1) (2) (3) CDC. Revised Surveillance Case Definitions for HIV Infection Among Adults, Adolescents, and Children Aged <18 Months and for HIV Infection and AIDS Among Children Aged 18 Months to < 13 Years- United States, 2008. MMWR 2008; 57; 1-7.