From the Director  Dr. Jonathan Mermin

The number of people who inject drugs (PWID) in the United States has grown with the opioid crisis, increasing the risk of transmission of blood-borne viruses, including HIV, hepatitis C (HCV), and hepatitis B (HBV) through use of shared injection equipment. To guide our public health efforts to detect, prevent, and respond quickly to outbreaks and potential outbreaks of HIV or HCV among networks of PWID, we must plan ahead. By identifying communities particularly vulnerable, we have a head start to facilitate an effective coordinated response. To support these types of planning efforts at the state and local levels, CDC just released, Managing HIV and Hepatitis C Outbreaks among People who Inject Drugs: A Guide for State and Local Health Departments. This document provides guidance on what to do in the event of an outbreak, including considerations for developing an outbreak response plan to minimize the impact of the outbreak on the community and stop further transmission. Working together and planning ahead, we can reduce the risks of infectious disease and also help end the opioid crisis.

Gonorrhea Treatment Recommendation

Reported gonorrhea cases increased 18.5% from 2015 to 2016, and N. gonorrhoeae has developed resistance to most antimicrobials used to treat the infection. Monitoring gonorrhea treatment practices can help identify opportunities to increase provider adherence, adequately treat existing cases, and delay emerging drug resistance. Currently, CDC recommends a dual therapy with ceftriaxone and azithromycin as treatment for gonorrhea. In a new analysis, “Adherence to CDC Recommendations for the Treatment of Uncomplicated Gonorrhea, STD Surveillance Network (SSuN), 2016,” published in CDC’s Morbidity and Mortality Weekly Report, CDC found that the majority of reported gonorrhea cases received dual therapy. Patients of STD, family planning, and reproductive health clinics were more likely to receive this regimen compared to cases diagnosed in urgent care, hospital emergency rooms, and by private providers. These data provide important insight into how well providers are adopting CDC’s gonorrhea treatment recommendations. Based on these findings, CDC recommends that state and local health departments continue to work with providers and patients to ensure timely detection and treatment of gonorrhea according to the current treatment recommendations.

TB Surveillance Data

Preliminary 2017 TB data from CDC’s National TB Surveillance System represent the lowest number of cases reported on record in the United States; but new, expanded approaches are needed to accelerate progress towards TB elimination. A total of 9,093 TB cases were reported in the United States in 2017, a decrease of nearly 2% from 2016. The overall TB rate decreased slightly to approximately 2.8 cases per 100,000. The declines in TB case counts and rates are in large part a credit to the work of local TB control programs in finding and treating people with TB disease. We can prevent TB and reach our TB elimination goals in the United States through our public health partnerships and sustained programs that are comprehensive, innovative, and focused on diagnosing, treating, and monitoring latent TB infection; ongoing engagement in global TB control efforts; and enhanced efforts to prevent TB transmission in the United States.

New from CDC

Pregnancy and HIV, Viral Hepatitis, STD, & TB Prevention website
HIV Among Youth
HIV Among Transgender People
HIV Among American Indians and Alaska Natives
CME: Delivering HIV Prevention and Care to Transgender People

Upcoming Events

May: Hepatitis Awareness Month
May 19: National Hepatitis Testing Day
May 19: National Asian and Pacific Islander HIV/AIDS Awareness Day
June 27: National HIV Testing Day

On the Web

PrEP locator

The NPIN database includes more than 1,800 public and private PrEP providers across the U.S. npin.cdc.gov/preplocator

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Office of the Director

National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention