On September 9, I participated in the United States Conference on AIDS (USCA) in Washington D.C. For 21 years, USCA has brought together stakeholders from across the country and the world to discuss progress in confronting the HIV epidemic. I was joined by Dr. Anthony Fauci, Director, National Institute of Allergy and Infectious Diseases, National Institute of Health, and Dr. Laura Cheever, Associate Administrator for HIV/AIDS Bureau, Health Resources and Services Administration, for a plenary on the Federal perspective on HIV research, scientific advances, prevention, treatment, and strategies to end the epidemic. Between 2008 and 2014, there were about 33,000 fewer HIV infections nationally, saving $14.9 billion in lifetime medical costs. We saw decreases in diagnoses among men, women, people who inject drugs (PWID), and heterosexuals, as well as some age groups of gay, bisexual, and other men who have sex with men (MSM). However, there were increases among Latino MSM and continued high incidence of HIV among some groups, including African American MSM. Throughout the conference, there was increased appreciation of anti-retroviral therapy (ART) as a prevention tool and the cost-effectiveness of empowering people with HIV and helping them get diagnosed, linked to or reengaged in care, and regularly take ART. There were also numerous discussions highlighting the need to continue to provide people with accurate information, expand the use of pre-exposure prophylaxis (PrEP) to those who would benefit, and support syringe service programs and the use of molecular epidemiology so we can identify outbreaks while they are occurring and intervene before they spread. Attending USCA validated my belief that today, more than any time in the past 30 years, we have the tools, knowledge, and momentum to reverse what is one of the worst epidemics in recorded history.

Health and Academics Project

CDC’s recent MMWR highlights the connection between student health and academic performance. CDC’s Youth Risk Behavior Survey (YRBS) data confirms the close relationship between academics and health. The report showed that regardless of sex, race/ethnicity and grade-level, high school students reporting lower academic marks also reported greater health risk behaviors associated with substance use, violence, poor nutrition, lack of physical activity and sex. Across nearly 30 health behaviors, the students with lower grades reported higher levels of health risk behaviors or negative outcomes. On the other hand, students who reported positive academic outcomes were more likely to report healthy behaviors. Working together, schools, parents, and communities can help to improve student health and raise academic achievement. Please check out the article and the new fact sheets just published.

National TB Surveillance Center

CDC is pleased to announce the establishment of the National Tuberculosis Molecular Surveillance Center (NTMSC) at the Michigan Department of Health and Human Services (MDHHS) Bureau of Laboratories. The center will be equipped to perform both conventional genotyping and whole genome sequencing (WGS) for all isolates of Mycobacterium tuberculosis. WGS is a type of genotypic testing that provides a full picture of an isolate’s entire genome and can assist state and local health departments in identifying and rapidly responding to Tuberculosis outbreaks. The United States will be one of a handful of countries to offer WGS on a national level. The NTMSC is supported by funding available through CDC’s Epidemiology and Laboratory Capacity for Infectious Diseases Cooperative Agreement (ELC) and is a new activity for CDC’s Antibiotic Resistance Laboratory Network aimed at strengthening national TB surveillance for outbreak detection and drug resistance.