Region of the Americas General Overview

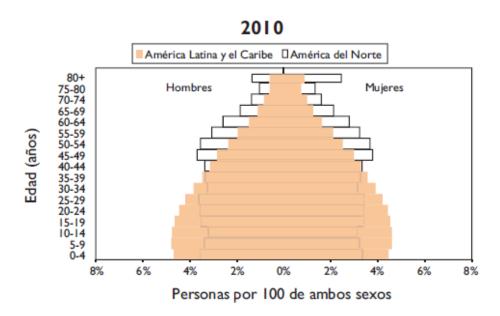
Population estimates forthe Americas Region stands at 981 million according to most updated information (2014), with anannual population growth rate of 1% and a global fecundity rate of 2.1 children per woman.

The GDP annual growth average between 2012 and 2013 was estimated in 2.5%, with variations among sub regions and countries. The Region of Americas has achieved progress in poverty reduction indicators, but despite this progress, by 2010,the estimates are that 31.4% of the population lives in poverty and 12.3% in extreme poverty and indigence.

	Population (thousands)	Urban population %	Life expectancy at birth (years)	Annual growth average GDP%	Maternal mortality rate per 100,000
					newborn
The	981,557	81.0	76.7	2.5	68
Americas					
North	358,178	82.9	79.3	1.9	27
America					
Latin	623,380	79.7	74.9	2.9	85
America and					
the					
Caribbean					

Source: Pan American Health Organization (PAHO) – Basic data and indicators 2014

Population pyramid in the Region of the Americas



Source: Pan American Health Organization (PAHO) – Health in the Americas 2012

The three diseases in the LAC Region – Epidemiological Situation

Malaria (1,2)

In the Americas, the number of confirmed malaria cases decreased from 1.2 million in 2000 to 427,000 cases in 2013. P. falciparum is responsible for <30% of malaria cases overall.

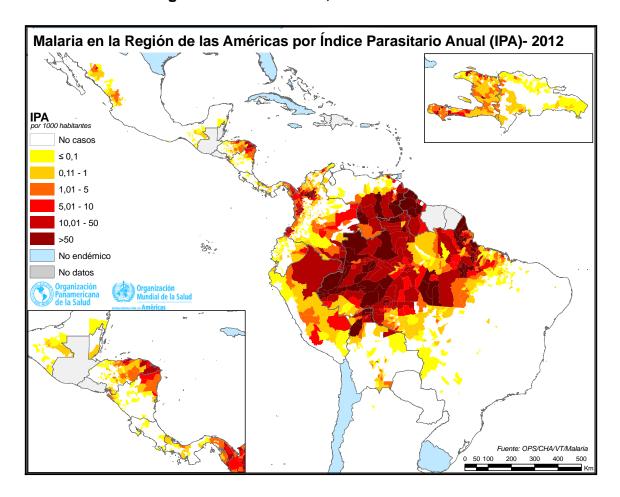
In Latin America, fifteen out of 21 countries are on track to reduce incidence by 75% by 2015, and three countries by 50–75%. Argentina and Paraguay reported zero indigenous cases in 2013. In the Americas, about 120 million people in 21 countries are estimated to be at some risk for malaria, with 25 million at high risk.

Two countries (Brazil and Colombia) are on track to achieve a 75% decrease in case incidence by 2015. Three countries (the Dominican Republic, Panama and Peru) are on track for a 50–75% decrease in case incidence by 2015. Increases in numbers of cases between 2000 and 2013 were reported by two countries (Guyana and the Bolivarian Republic of Venezuela). In Haiti, the number of reported malaria cases increased, but it is unclear whether the rise is real, or is simply due to improved diagnostic testing and reporting. The region reported 82 deaths due to malaria in 2013, a 79% decline compared with 2000. Brazil accounts for half of the deaths due to malaria in the region.

Argentina is in elimination phase and reported zero indigenous cases since 2011. The process of certification of malaria elimination has been initiated. Paraguay, in the pre-elimination phase, has reported zero indigenous cases and 11 imported cases since 2012. Ten countries in Central America and the Caribbean have joined a regional initiative that aims to eliminate malaria by 2020, with the support of the Global Fund to Fight AIDS, Tuberculosis and Malaria (Belize, Costa Rica, the Dominican Republic, El Salvador, Guatemala, Haiti, Honduras, Mexico [southern part only], Nicaragua and Panama).

Funding for malaria control in the region increased from US\$ 153 million in 2005 to US\$ 214 million in 2011, but decreased to US\$ 140 million in 2013. In five of the 21 countries, financing for malaria control exceeded US\$ 4 per capita per year during 2011–2013 (Costa Rica, El Salvador, Mexico, Paraguay and Suriname).

Malaria in the Region of the Americas, Annual Parasite Index - 2012



Source: Pan American Health Organization (PAHO)

HIV/AIDS(3)

For Latin America, there were an estimated 1.6 million [1.4 million–2.1 million] people livingwith HIV at the end of 2013. The bulk of the cases, nearly75%, are spread among four countries: Brazil, Colombia, Mexico and the Bolivarian Republic of Venezuela. Approximately 60% of people living with HIV in the region were men, including heterosexual men and gay men andother men who have sex with men. HIV prevalence amonggeneral adult population was estimated to be 0.4%. Central Americancountries, with 7% of Latin America's population, accounted for 9% ofpeople living with HIV in 2013. The epidemic is mostly concentrated in urban settings, along commercialroutes and in trading ports.

Most vulnerable key populations to HIV inLatin America include transgender women, gay men and othermen who have sex with men, male and female sex workers and inject drugs users. At least one third of new infections occur among youngpeople aged 15–24 years, with approximately 10 new HIV infections occurring every hour. In Latin America, there were an estimated **94,000** [71,000]

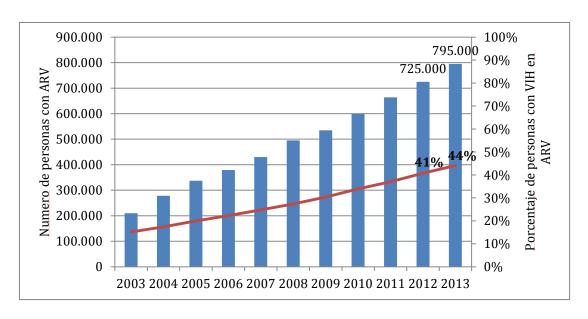
- 170,000] new HIV infections with a slow, almost stagnant, decline in newHIV infections, as demonstrated by the 3% decrease in the number of newinfections between 2005 and 2013. There were an estimated 47,000 [39,000 - 75,000] AIDS-related death; between 2015 and 2013 the number AIDS-related deaths have declined significantly (31%) in many countries, due to increased access to antiretroviral therapy. Latin America continues to be a region with a high antiretroviral coverage.

Approximately **45%** [**33 – 51**] of the 1.6 million people living with HIV have **access to antiretroviral therapy**, although variation between and within countries exists. The number of HIV infections among children were estimated in **1800** [<1000 – 7400].

Regarding the Caribbean, there are an estimated 250,000 [230,000-280,000] adults and children living with HIV. Five countries account for 96% of all people living with HIV in the region: Cuba, the Dominican Republic, Haiti, Jamaica and Trinidad and Tobago. Haiti alone accounts for 55% of all people living with HIV in the Caribbean. While the Caribbean region is home to only 0.7% of the global total of people living with HIV, infection ratesremain high. The overall HIV prevalence in the region is 1.1% [0.9-1.2%], with the highest prevalence of 3.2% [3.1-3.5%] found in the Bahamas. There were an estimated 12,000 **I9.400–14.0001** new HIV infections in the Caribbean in 2013. Haiti has seen a 44% reduction in the number of new HIV infections between 2005 and 2013. In 2013, there were an estimated **11,000** [8,300–14,000] AIDS-related deaths in the Caribbean. Between 2005 and 2013, AIDS-related deaths halved in the region. Haiti alone accounted for 59% of all AIDS-related deaths in the region. Across the region, 42% [37-47%] of people living with HIV 15 years and older were receiving antiretroviral therapy in 2013, an increase from 31% [28-36%] in 2011. There were less than 1,000 [<500 - <1000] new HIV infections among children.

In 2012, the Americas region launched an Initiative for the elimination of congenital syphilis and HIV mother to child transmission. Consequently, Cuba became the first country in the world to achieve elimination certification, while other 5 countries from the Caribbean are presenting the documentation to be certified.

PAHO's Strategic Fund is a mechanism of pooled procurement for supplies for diagnosis, prevention and treatment for the three diseases (HIV/AIDS, tuberculosis and malaria) which has enabled countries to improve access and extend coverage at convenient pricing and high quality standards.



Source: Pan American Health Organization (PAHO)

Tuberculosis (40)

In the year 2013, an estimated 285,200 (uncertainty range: 254,000–327,100) new TB cases occurred in the Americas, equivalent to 29 (26–34) per 100,000 population. More than two-thirds (69%) of all new TB cases occurred in South America's two sub-regions (Andean and Other). The incidence rate was highest in the Caribbean sub-region (70 per 100,000) followed by South America—Andean (63 per 100 000), South America—Other (41 per 100,000), and Mexico and Central America sub-region (28 per 100,000). Incidence was lowest in the North America sub-region (3.6 per 100,000). TB incidence is declining in all Americas sub-regions except Mexico and Central America, where it remained constant between 2007 and 2013.

In 2013, an estimated 17,000 (12,200–23,100) TB deaths occurred among people without HIV infection and an additional 6,100 (4,600–8,000) TB deaths occurred among HIV-positive people. TB mortality has substantially declined in the Americas since 1990.

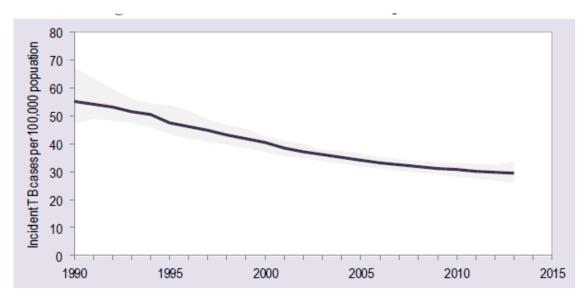
An estimated 6,900 (5,200–9,100) cases of multidrug-resistant tuberculosis (MDR-TB) occurred among notified TB cases in the Americas in 2013. MDR-TB cases represented an estimated 2.1% (1.5%–2.9%) of new pulmonary tuberculosis (PTB) cases and 13% (10%–17%) of re-treatment PTB cases. Peru and Brazil accounted for 55% of all estimated MDR-TB cases in the Americas.

An estimated 31,800 (uncertainty range: 29,700–34,600) new TB cases in the Americas were co-infected with HIV in 2013. Brazil and Haiti accounted for more than half of all HIV-positive incident TB cases in the region. The estimated prevalence of HIV coinfection among incident TB cases was 11%. HIV

prevalence varied across the sub-regions from 6.6% (North America) to 21% (Caribbean). At the country level, annual TB incidence is currently rising only in Belize, El Salvador, Nicaragua, and Uruguay.

In 2013, a total of 233,000 TB cases (220,500 new and relapse TB cases) were notified in the Americas. About 76% of new and relapse cases notified were bacteriologically confirmed. The region has met the 2015 global target for TB case detection (≥ 70%). The case detection rate (CDR) was 77% (67%–87%) of estimated incident TB cases. Case detection across the region has increased in recent years, particularly in the Caribbean, Mexico and Central America, and South America—Other sub-regions.

Estimated TB incidence, Americas region, 1990–2013*



*Shaded areas represent uncertainty intervals

Sources:

- (1) World Malaria Report 2014
- (2) Global Fund against AIDS, Tuberculosis and Malaria
- (3) UNAIDS GAP REPORT 2014
- (4) Tuberculosis in the Americas, Regional Report 2014. Epidemiology, control and Financing