



Center for Health Statistics



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DATA SUMMARY
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This Data Summary is one of a series of leading cause of death reports.

Highlights

- HIVD was the eighth leading cause of death for Black males in 1999, 2000, and 2001.
- 2001 age-adjusted HIVD death rate was unchanged from the 4.3 rate per 100,000 population in 2000.
- San Francisco County had the highest average HIVD age-adjusted death rate in 2001 at 21.3.
- California has not yet met the Healthy People 2010 National Objective for HIVD of no more than 0.7 age-adjusted deaths per 100,000 population.

Human Immunodeficiency Virus Disease Deaths California 2001

By Steven Shippen

Introduction

At the end of 2001, nearly 363,000 people were living with the human immunodeficiency virus disease (HIVD) in the United States reflecting a 16.0 percent increase from persons living with HIVD in 1999.¹ A recent Centers for Disease Control and Prevention report provided the following statement, "During the mid-to-late 1990's, advances in HIV treatments led to dramatic declines in AIDS deaths and slowed the progression from HIV to AIDS. However, in recent years, the rate of decline for both cases and deaths began to slow, and in 1999, the annual number of AIDS cases appears to be leveling, while the decline in AIDS deaths has slowed considerably."²

Prior to 1999, the International Classification of Diseases (ICD), Ninth Revision (ICD-9) was used to code mortality causes of death. Beginning in 1987, in accordance with the National Center for Health Statistics (NCHS), the new ICD Codes 042-044 for acquired immune deficiency syndrome (AIDS) and human immunodeficiency virus (HIV) infection were used. Beginning with 1999 data and the adoption of the International Classification of Diseases, Tenth Revision (ICD-10), the title of these causes of death is HIVD and the codes are B20 – B24.³

The NCHS reports that the change in mortality coding methodology from ICD-9 to ICD-10 shows a comparability ratio for HIVD of 1.0637, denoting about 6 percent more deaths due to HIVD using the new ICD-10 methodology.³

As with other diseases, "survival analysis" is the most appropriate statistical technique for determining whether survival has increased. Therefore, the mortality data within this report should be supplemented with incidence data to adequately measure the impact of the HIVD epidemic. Data related to the incidence of HIVD in California can be obtained from the Department of Health Services, Office of AIDS.

¹Centers for Disease Control and Prevention, *HIV/AIDS Surveillance Report, 2001; Volume 13 (No.2)*.

²Centers for Disease Control and Prevention, Divisions of HIV/AIDS, *Surveillance: A Glance at the HIV Epidemic, May 2003, page 3*.

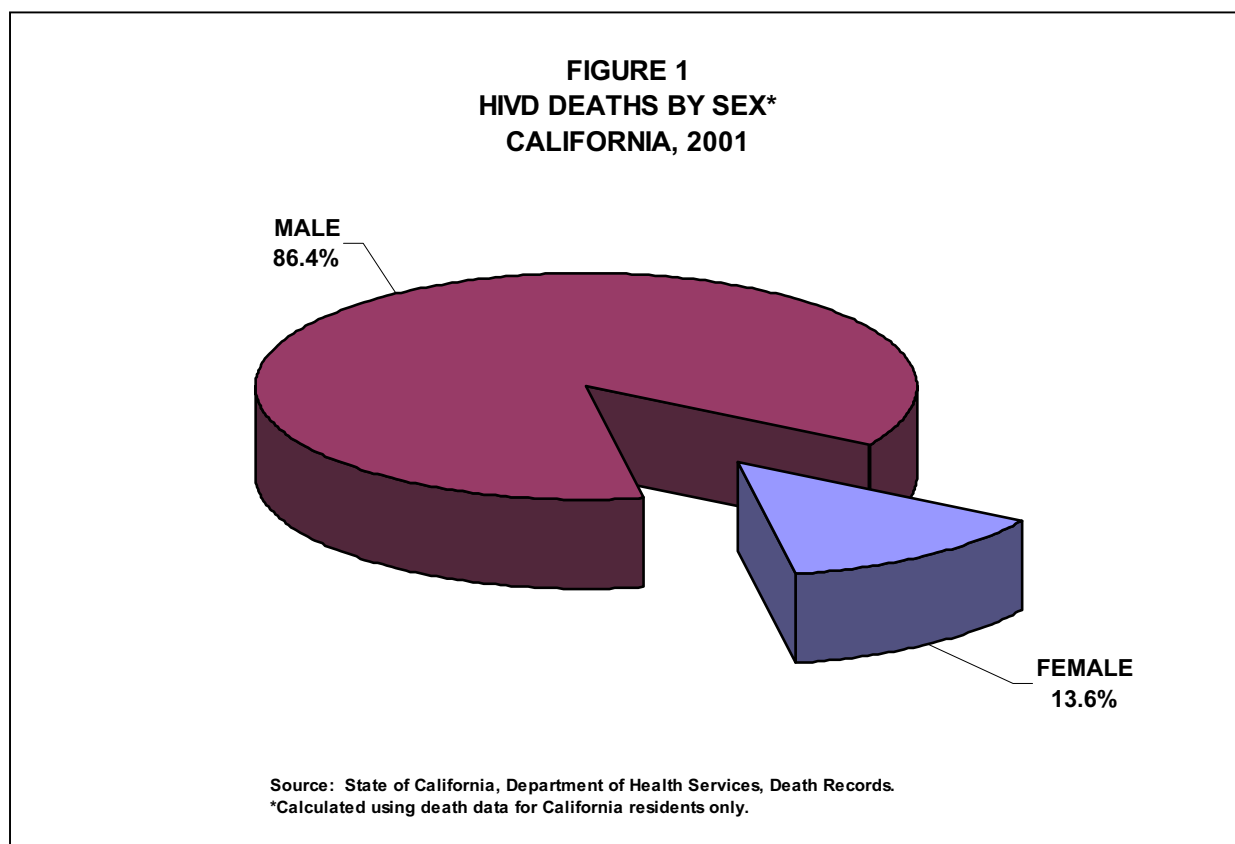
³Anderson RN, Minino AM, Hoyert DL, Rosenberg HM. *Comparability of Cause of Death Between ICD-9 and ICD-10: Preliminary Estimates*. National Vital Statistics Reports; Vol. 49 No. 2. Hyattsville, Maryland: National Center for Health Statistics, 2001.

A description of [methods](#) with a brief overview of [data limitations](#) and [qualifications](#) are provided at the end of this report.

This report presents data on California HIVD deaths in 2001, including analysis of crude and age-adjusted death rates for California residents by sex, age, and race/ethnicity. Data were extracted from California's vital statistics records with death attributed to HIVD as defined by ICD-10 codes B20-B24, in accordance with the National Center for Health Statistics Reports.⁴

HIVD Deaths

Table 1 (page 9) shows HIVD death data for California residents by race/ethnicity, age group, and sex. Overall, in 2001, HIVD deaths increased by 42 or 2.9 percent over HIVD deaths in 2000.⁵ Nearly 70 percent (69.2) of all HIVD deaths in 2001 occurred among people in the age groups 35 to 54. These same age groups accounted for 70.3 percent of HIVD deaths in 2000.



HIVD deaths among California residents were significantly higher for males than for females. As shown in **Figure 1**, males accounted for 1,291 or 86.4 percent of the total HIVD deaths and females accounted for 204 or 13.6 percent. The ratio of male to female deaths was the same for 2000, with males having six times the number of HIVD deaths.

As shown in **Table 1** (page 9), in 2001 Whites had the highest number of HIVD deaths, 682 or 45.6 percent of all HIVD deaths. Hispanics followed with 393 deaths or 26.3 percent; Blacks had 385 deaths or 25.8 percent; and Asian/Other had 35 deaths or 2.3 percent.

⁴National Center for Health Statistics. Vital Statistics, Instructions for Classifying the Underlying Cause of Death. NCHS Instruction Manual, Part 9. Hyattsville, Maryland: Public Health Service, 1999.

⁵Schmidt C. *Human Immunodeficiency Virus Disease Deaths California 1999-2000*. Center for Health Statistics, January 2003.

See the [Methodological Approach Section](#) later in this report for an explanation of crude, age-specific, and age-adjusted death rates.

In 2001 Whites were the only race/ethnic group to have fewer HIVD deaths than in 2000. Deaths for Whites decreased by 26 or 3.7 percent, Hispanic deaths increased by 38 or 10.7 percent, Black deaths increased by 28 or 7.8 percent, and Asian/Other deaths increased by 2 or 6.1 percent.

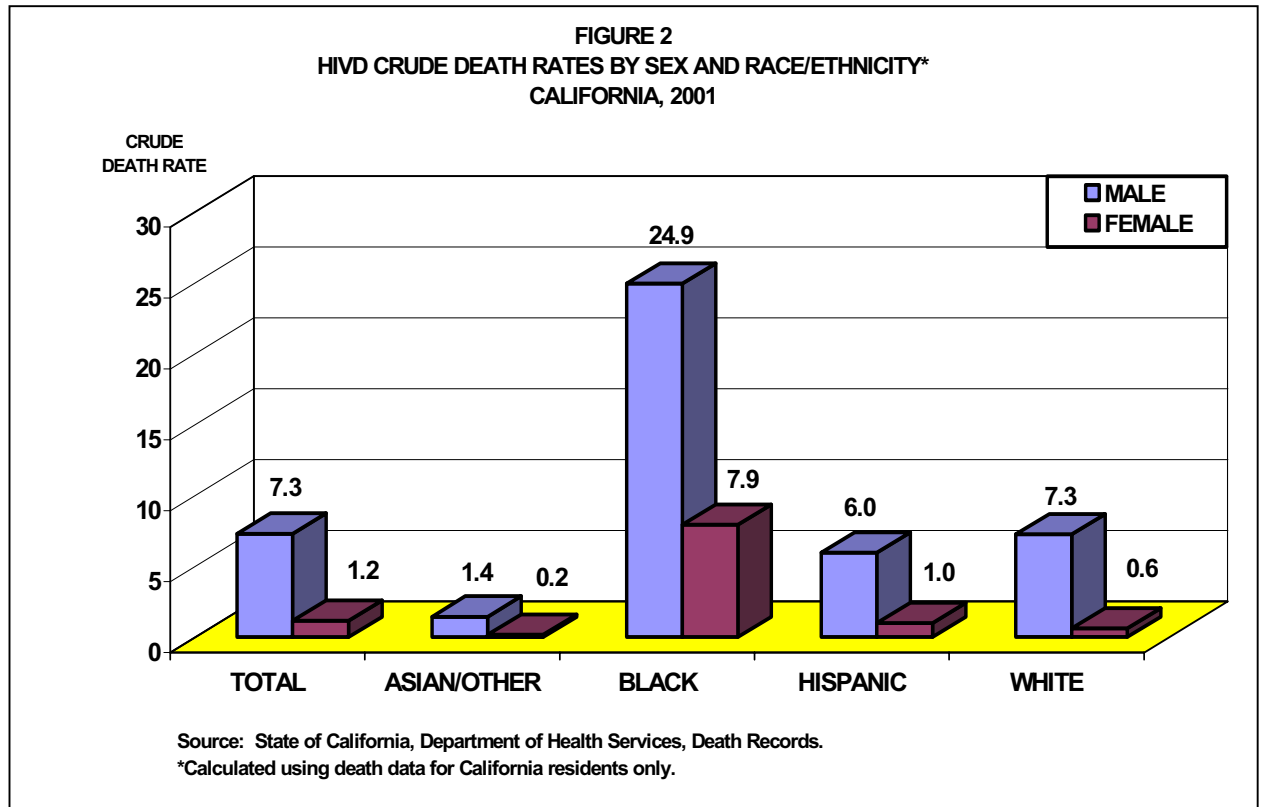
HIVD deaths among each of the four major race/ethnic groups were significantly higher for males than for females in 1999, 2000, and 2001. For the same period, HIVD was the eighth leading cause of death among Black males in California.

HIVD Crude Death Rates

Table 1 (page 9) shows California's HIVD crude death rate in 2001 was 4.2 per 100,000 population, unchanged from the crude death rate reported in 2000.⁵

California's crude death rates among males and females were slightly higher in 2001 compared with 2000 rates.⁵ The crude death rate among males increased 1.4 percent from 7.2 to 7.3 per 100,000 population, and among females the rate increased 9.1 percent from 1.1 to 1.2.

As shown in **Table 1** (page 9), Blacks had the highest crude death rate (16.3), followed by Whites (3.9), Hispanics (3.6), and Asian/Other (0.8). The crude death rate for Blacks was significantly higher than all other race/ethnic groups. Compared with 2000, Whites were also the only race/ethnic group with a lower crude death rate in 2001, a decline of 4.9 percent from 4.1 to 3.9 per 100,000 population; however, the difference was not statistically significant.



⁵Schmidt C. Human Immunodeficiency Virus Disease Deaths California 1999-2000. Center for Health Statistics, January 2003.

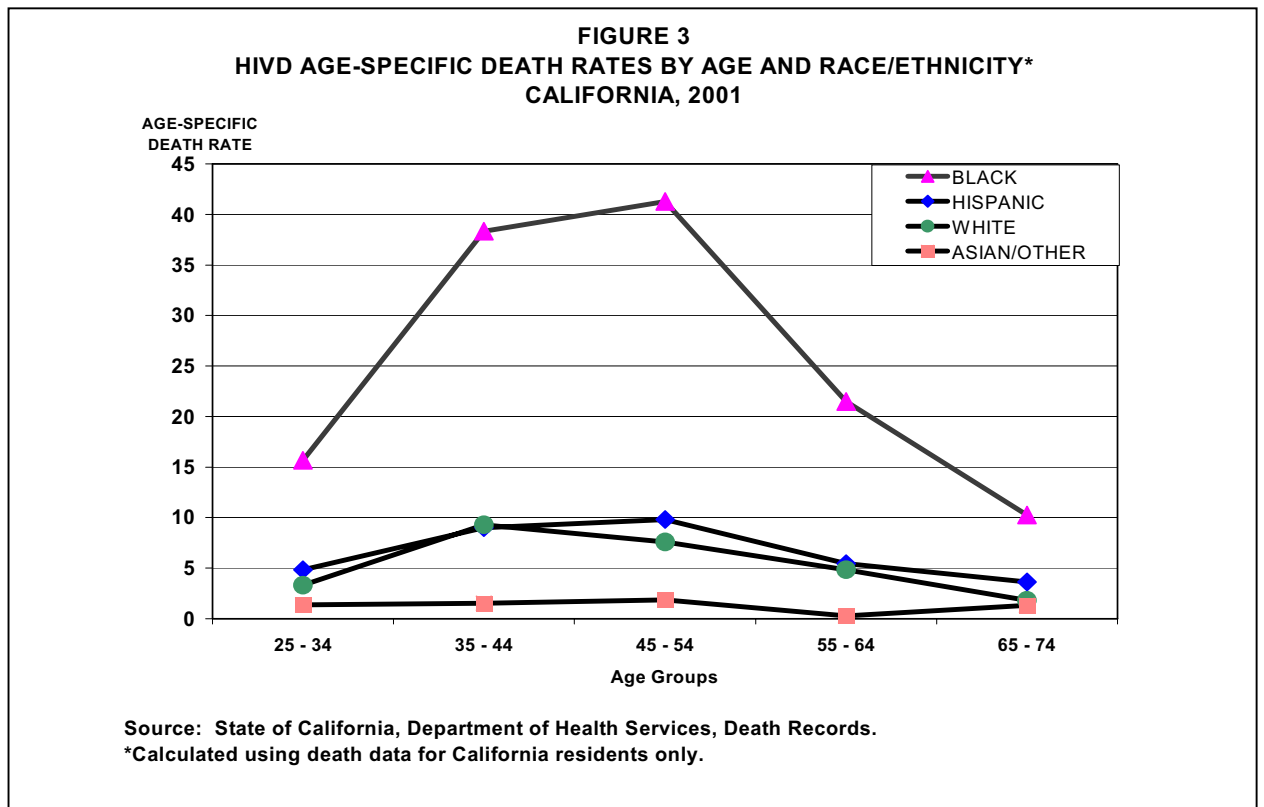
See the Vital Statistics Query System (VSQ) at our Web site www.dhs.ca.gov/hisp/Applications/vsq/vsq.cfm to create your own vital statistics tables.

Figure 2 (page 3) shows that among males in 2001, Black males had the highest crude death rate (24.9 per 100,000 population) followed by White males (7.3), Hispanic males (6.0), and Asian/Other males (1.4). Among females, Blacks had the highest crude death rate (7.9), followed by Hispanics (1.0), and Whites (0.6). The crude death rate for Asian/Other females was not reliable. Of reliable rates, males had significantly higher crude death rates than females for each of the race/ethnic groups in 2001.

HIVD Age-Specific Death Rates

As shown in **Table 1** (page 9), reliable male age-specific death rates were higher than corresponding rates for females overall and for each race/ethnic group in 2001. Among California residents, males experienced the highest age-specific death rate in the 35 to 44 age group (17.5). Females in the 35 to 44 and 45 to 54 age groups had the highest age-specific death rate due to HIVD (2.6). In 2000, the highest age-specific death rate among males occurred in the 45 to 54 age group (17.6) and occurred among females in the 35 to 44 age group (2.7).⁵

Figure 3 shows the age-specific death rates for 2001 by race/ethnicity and age group. Blacks had the highest rates in all age groups shown (ages 25 to 74 years). Among the race/ethnic groups with reliable rates, Hispanics had the second highest rate (9.8) in the 45 to 54 age group. Whites had the second highest rate (9.3) in the 35 to 44 age group. None of the Asian/Other age-specific rates were reliable.



Similar patterns were reported in 2000. The highest age-specific death rate among Blacks and Hispanics occurred in the 45 to 54 age group, 44.8 and 9.6 respectively. Whites had the highest age specific rate in the 35 to 44 age group (9.6).⁵

You can read more about crude and age-adjusted death rates on the National Center for Health Statistics Web site at www.cdc.gov/nchs

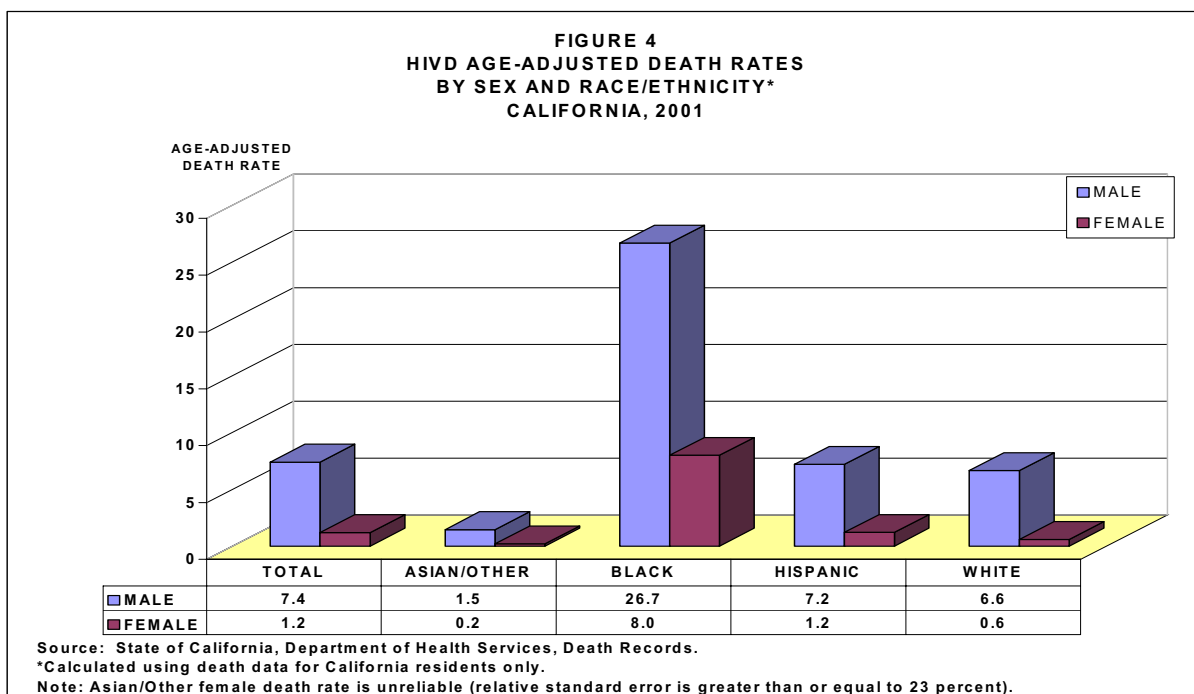
HIVD Age-Adjusted Death Rates

As shown in **Table 1** (page 9), California's age-adjusted death rate in 2001 was 4.3 per 100,000 population, the same as the age-adjusted rate in 2000.⁵ Although the 2001 rate was below the U.S. age-adjusted death rate of 5.0 in 2001, California did not meet the Healthy People 2010 National Health Objective of reducing the number of HIVD deaths to an age-adjusted death rate of no more than 0.7 per 100,000 population.^{6,7}

Compared with 2000, California's 2001 male age-adjusted death rate increased 1.4 percent from 7.3 to 7.4 per 100,000 population. Conversely, the female age-adjusted death rate of 1.2 per 100,000 population was the same in both years. Males were six times more likely to die from HIVD than were females. Of the reliable rates, the differences between the male and female age-adjusted rates within age group were statistically significant.

Among the major race/ethnic groups in 2001, Blacks had the highest age-adjusted death rate (16.9 per 100,000 population), followed by Hispanics (4.3), Whites (3.6), and Asian/Other (0.8). From 2000 to 2001, the age-adjusted death rates increased for Blacks (5.0 percent) and Hispanics (7.5 percent) and decreased for Whites (5.3 percent), however, these changes were not statistically significant. The Asian/Other age-adjusted death rate was unchanged from the prior year.

Figure 4 shows age-adjusted death rates by race/ethnicity and sex. Male age-adjusted death rates were significantly higher than corresponding female rates within race/ethnic group. The age-adjusted rate for White males was 11.0 times higher than the rate for White females. Among other race/ethnic groups the ratio between male and female age-adjusted rates was 7.5 for Asian/Other, 6.0 for Hispanics and 3.3 for Blacks.



⁶U.S. Department of Health and Human Services. *Healthy People 2010 Objectives* (Second Edition, in Two Volumes). Washington, D.C., January 2001.

⁷Arias E, Smith BL. *Deaths: Preliminary Data for 2001*. National Vital Statistics Reports; Vol. 51, No. 5. Hyattsville, Maryland: National Center for Health Statistics, 2003.

For more data, see DHS Center for Health Statistics, Home Page at www.dhs.ca.gov/org/hisp/chs/chsindex.htm

Black males (26.7) and Black females (8.0) had significantly higher age-adjusted death rates than their counterparts among the race/ethnic groups. Asian/Other females were the only gender specific race/ethnic group with unreliable age-adjusted death rates.

In 2001 the age-adjusted death rate for Black males increased 2.7 percent from 2000. The age-adjusted death rate for Asian/Other males increased 15.4 percent, the Hispanic male death rate increased 9.1 percent, and the White male death rate decreased 2.9 percent. Age-adjusted death rates for each race/ethnic group among females changed from 2000 rates as follows: Blacks increased 12.7 percent, Whites decreased 14.3 percent, and Hispanics increased 9.1 percent. Changes in the age-adjusted death rates were not statistically significant.

HIVD Death Rates for California Counties

Table 2 (page 10) shows the number of HIVD deaths averaged over a three-year period from 1999 to 2001 with crude and age-adjusted death rates for California and its 58 counties.

The highest average number of deaths occurred in Los Angeles County (548.3), followed by San Francisco County (196.3), and San Diego County (133.0).

Among the 11 counties with reliable crude death rates, San Francisco County had the highest rate (24.8), followed by Alameda County (5.6), and Los Angeles County (5.6). Santa Clara County had the lowest reliable crude rate at 1.9 HIVD deaths per 100,000 population.

Among the 11 counties with reliable age-adjusted death rates, San Francisco County had the highest age-adjusted rate at 21.3 per 100,000 population, nearly 13 times higher than the lowest rate of 1.7, occurring in Santa Clara County.

The Healthy People 2010 National Objective to reduce HIVD deaths to an age-adjusted rate of no more than 0.7 deaths per 100,000 population was met by five counties (none with reliable age-adjusted death rates). California as a whole did not meet the objective with an average age-adjusted death rate of 4.4 for the three-year period.

HIVD Deaths among the Three City Health Jurisdictions

Table 3 shows the three-year average (1999-2001) number of HIVD deaths and crude death rates for California's three city health jurisdictions. Age-adjusted death rates were

TABLE 3
DEATHS DUE TO HIV/AIDS
AMONG THE CITY HEALTH JURISDICTIONS*
CALIFORNIA, 1999-2001
(By Place of Residence)

CITY HEALTH JURISDICTION	NUMBER OF DEATHS (Average)	2000 POPULATION	CRUDE DEATH RATE
BERKELEY	4.7	102,500	4.6 **
LONG BEACH	52.3	459,900	11.4
PASADENA	10.7	133,600	8.0 **

Note: Rates are per 100,000 population, ICD-10 codes B20-B24.

* Calculated using death data for California residents only.

** Death rate unreliable (relative standard error is greater than or equal to 23 percent).

Sources: State of California, Department of Finance, E-4 Historical City/County Population Estimates 1991-2000, with 1990 Census Counts, March 2002
State of California, Department of Health Services, Death Records.

not calculated for city health jurisdictions because city population data by age are not available.

Long Beach had the highest average number of deaths (52.3), followed by Pasadena (10.7), and Berkeley (4.7). The crude death rates were 4.6 per 100,000 population for Berkeley, 11.4 for Long Beach, and 8.0 for Pasadena. However, the rates for Berkeley and Pasadena were not reliable.

Methodological Approach

The methods used to analyze vital statistics data are important. Analyzing only the number of deaths has its disadvantages and can be misleading because the population at risk is not taken into consideration. Crude death rates show the actual rate of dying in a given population, but because of the differing age compositions of various populations, crude rates do not provide a statistically valid method for comparing geographic areas and/or multiple reporting periods. Age-specific death rates are the number of deaths per 100,000 population in a specific age group and are used along with standard population proportions to develop a weighted average rate. This is referred to as an age-adjusted death rate and removes the effect of different age structures of the populations whose rates are being compared. Age-adjusted death rates therefore provide the preferred method for comparing different race/ethnic groups, sexes, and geographic areas and for measuring death rates over time. The year 2000 population standard is used as the basis for age-adjustments in this report.

Data Limitations and Qualifications

The HIVD death data presented in this report are based on vital statistics records with ICD-10 codes B20-B24 as defined by the NCHS.³ Deaths by place of residence means that the data include only those deaths occurring among residents of California and its counties, regardless of the place of death.

The term “significant” within the text indicates statistically significant based on the difference between two independent rates ($p < .05$).

As with any vital statistics data, caution needs to be exercised when analyzing small numbers, including the rates derived from them. Death rates calculated from a small number of deaths and/or population tend to be unreliable and subject to significant variation from one year to the next. To assist the reader, 95 percent confidence intervals are provided in the data tables as a tool for measuring the reliability of death rates. Rates with a relative standard error (coefficient of variation) greater than or equal to 23 percent are indicated with an asterisk (*).

Beginning in 1999 cause of death is reported using ICD-10.⁸ Cause of death for 1979 through 1998 was coded using ICD-9. Depending on the specific cause of death, the number of deaths and death rate are not comparable between ICD-9 and ICD-10. This is the first year that rates in **Tables 2** and **3** are based upon three-year averages using ICD-10 coding for the HIVD cause of death.

The race/ethnic groups presented in the tables are mutually exclusive. White, Black, and Asian/Other exclude Hispanic ethnicity, while Hispanic includes any race/ethnic group.

⁸World Health Organization. *International Statistical Classification of Diseases and Related Health Problems*. Tenth Revision. Geneva: World Health Organization. 1992.

In order to remain consistent with the population data obtained from the Department of Finance, the “White race/ethnic group” includes: White, Other (specified), Not Stated, and Unknown; and the “Asian/Other race/ethnic group” includes: Aleut, American Indian, Asian Indian, Asian (specified/unspecified), Cambodian, Chinese, Eskimo, Filipino, Guamanian, Hawaiian, Japanese, Korean, Laotian, Other Pacific Islander, Samoan, Thai, and Vietnamese. In addition, caution should be exercised in the interpretation of mortality data by race/ethnicity. Misclassification of race/ethnicity on the death certificate may contribute to death rates that may be underestimated among Hispanics and Asian/Other.⁹

Beginning in 2000 federal race/ethnic reporting guidelines changed to allow the reporting of up to three races on death certificates. The race/ethnic groups in this report were tabulated based on the first listed race on those certificates for which more than one race was listed. Therefore race/ethnic comparison should not be made with race/ethnic data prior to year 2000.

Effective 1999 the standard population for calculating mortality data age-adjustments was changed from the 1940 population standard to the year 2000 population standard, in accordance with new statistical policy implemented by the National Center for Health Statistics. The new population standard affects measurement of mortality trends and group comparisons. Of particular note are the effects on race comparison of mortality.¹⁰ Age-adjusted rates presented in this report are not comparable to rates calculated with different population standards.

In addition, the population data used to calculate the crude rates in **Table 3** (page 6) differ from the population data used to calculate the crude rates in **Table 2** (page 10). Consequently, caution should be exercised when comparing the crude rates among the three health jurisdictions with the rates among the 58 California counties. Age-adjusted rates for city health jurisdictions were not calculated.

For a more complete explanation of the age-adjustment methodology used in this report, see the “Healthy People 2010 Statistical Notes” publication.¹⁰ Detailed information on data quality and limitations is presented in the appendix of the annual report “Vital Statistics of California.”¹¹ Formulas used to calculate death rates are included in the technical notes of the “County Health Status Profiles” report.¹²

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⁹Rosenberg HM, et al. *Quality of Death Rates by Race and Hispanic Origin: A Summary of Current Research*, 1999. Vital and Health Statistics, Series 2 No. 128, National Center for Health Statistics, DHHS (PHS) Pub. No. 99-1328, September 1999.

¹⁰Klein RJ, Schoenborn CA. *Healthy People 2010 Statistical Notes: Age Adjustment using the 2000 Projected U.S. Population*. National Center for Health Statistics, DHHS Publication, No. 20, January 2001.

¹¹Riedmiller K, Ficenc S, Bindra K, Christensen J. *Vital Statistics of California, 1999*. Center for Health Statistics, California Department of Health Services, April 2002.

¹²Schmidt C., Wilson C, *County Health Status Profiles 2003*. Center for Health Statistics, California Department of Health Services, April 2003.

TABLE 1
DEATHS DUE TO HIVD BY RACE/ETHNICITY, AGE, AND SEX
CALIFORNIA, 2001
(By Place of Residence)

AGE GROUPS	DEATHS			POPULATION			RATES			95% CONFIDENCE LIMITS					
	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL		MALE		FEMALE	
										LOWER	UPPER	LOWER	UPPER	LOWER	UPPER
TOTAL															
UNDER 1	0	0	0	560,999	286,873	274,126	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
1 - 4	0	0	0	2,243,262	1,147,543	1,095,719	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
5 - 14	3	1	2	5,672,643	2,906,408	2,766,235	0.1 *	0.0 *	0.1 *	0.0	0.1	0.0	0.1	0.0	0.2
15 - 24	17	11	6	4,753,513	2,467,107	2,286,406	0.4 *	0.4 *	0.3 *	0.2	0.5	0.2	0.7	0.1	0.5
25 - 34	220	181	39	4,918,489	2,594,607	2,323,882	4.5	7.0	1.7	3.9	5.1	6.0	8.0	1.2	2.2
35 - 44	588	516	72	5,765,426	2,956,340	2,809,086	10.2	17.5	2.6	9.4	11.0	15.9	19.0	2.0	3.2
45 - 54	446	385	61	4,674,074	2,325,619	2,348,455	9.5	16.6	2.6	8.7	10.4	14.9	18.2	1.9	3.2
55 - 64	155	139	16	2,862,622	1,396,328	1,466,294	5.4	10.0	1.1 *	4.6	6.3	8.3	11.6	0.6	1.6
65 - 74	50	42	8	1,976,584	916,584	1,060,000	2.5	4.6	0.8 *	1.8	3.2	3.2	6.0	0.2	1.3
75 - 84	14	14	0	1,337,545	547,455	790,090	1.0 *	2.6 *	0.0 +	0.5	1.6	1.2	3.9	-	-
85 & OLDER	2	2	0	468,178	149,547	318,631	0.4 *	1.3 *	0.0 +	0.0	1.0	0.0	3.2	-	-
UNKNOWN	0	0	0												
TOTAL	1,495	1,291	204	35,233,335	17,694,411	17,538,924	4.2	7.3	1.2	4.0	4.5	6.9	7.7	1.0	1.3
AGE-ADJUSTED							4.3	7.4	1.2	4.1	4.5	7.0	7.8	1.0	1.3
ASIAN/OTHER															
UNDER 1	0	0	0	69,275	35,440	33,835	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
1 - 4	0	0	0	274,035	140,219	133,816	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
5 - 14	0	0	0	682,107	351,057	331,050	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
15 - 24	0	0	0	626,372	320,815	305,557	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
25 - 34	9	9	0	663,350	335,748	327,602	1.4 *	2.7 *	0.0 +	0.5	2.2	0.9	4.4	-	-
35 - 44	11	8	3	709,159	345,299	363,860	1.6 *	2.3 *	0.8 *	0.6	2.5	0.7	3.9	0.0	1.8
45 - 54	11	11	0	596,166	282,159	314,007	1.8 *	3.9 *	0.0 +	0.8	2.9	1.6	6.2	-	-
55 - 64	1	1	0	334,827	159,091	175,736	0.3 *	0.6 *	0.0 +	0.0	0.9	0.0	1.9	-	-
65 - 74	3	2	1	224,875	99,888	124,987	1.3 *	2.0 *	0.8 *	0.0	2.8	0.0	4.8	0.0	2.4
75 - 84	0	0	0	131,980	56,160	75,820	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
85 & OLDER	0	0	0	41,442	17,481	23,961	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
UNKNOWN	0	0	0												
TOTAL	35	31	4	4,353,588	2,143,357	2,210,231	0.8	1.4	0.2 *	0.5	1.1	0.9	2.0	0.0	0.4
AGE-ADJUSTED							0.8	1.5	0.2 *	0.5	1.1	0.9	2.0	0.0	0.4
BLACK															
UNDER 1	0	0	0	37,075	18,968	18,107	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
1 - 4	0	0	0	148,109	75,817	72,292	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
5 - 14	2	1	1	413,833	209,845	203,988	0.5 *	0.5 *	0.5 *	0.0	1.2	0.0	1.4	0.0	1.5
15 - 24	6	3	3	364,172	192,652	171,520	1.6 *	1.6 *	1.7 *	0.3	3.0	0.0	3.3	0.0	3.7
25 - 34	54	36	18	344,312	182,447	161,865	15.7	19.7	11.1 *	11.5	19.9	13.3	26.2	6.0	16.3
35 - 44	148	118	30	385,985	188,545	197,440	38.3	62.6	15.2	32.2	44.5	51.3	73.9	9.8	20.6
45 - 54	125	92	33	302,852	142,935	159,917	41.3	64.4	20.6	34.0	48.5	51.2	77.5	13.6	27.7
55 - 64	37	32	5	172,047	79,765	92,282	21.5	40.1	5.4 *	14.6	28.4	26.2	54.0	0.7	10.2
65 - 74	11	7	4	107,106	47,268	59,838	10.3 *	14.8 *	6.7 *	4.2	16.3	3.8	25.8	0.1	13.2
75 - 84	2	2	0	61,885	23,844	38,041	3.2 *	8.4 *	0.0 +	0.0	7.7	0.0	20.0	-	-
85 & OLDER	0	0	0	18,436	5,511	12,925	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
UNKNOWN	0	0	0												
TOTAL	385	291	94	2,355,812	1,167,597	1,188,215	16.3	24.9	7.9	14.7	18.0	22.1	27.8	6.3	9.5
AGE-ADJUSTED							16.9	26.7	8.0	15.2	18.6	23.6	29.8	6.4	9.6
HISPANIC															
UNDER 1	0	0	0	272,023	139,031	132,992	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
1 - 4	0	0	0	1,070,328	547,371	522,957	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
5 - 14	0	0	0	2,398,512	1,225,596	1,172,916	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
15 - 24	7	6	1	1,664,220	861,697	802,523	0.4 *	0.7 *	0.1 *	0.1	0.7	0.1	1.3	0.0	0.4
25 - 34	86	71	15	1,767,279	977,600	789,679	4.9	7.3	1.9 *	3.8	5.9	5.6	9.0	0.9	2.9
35 - 44	153	136	17	1,701,500	916,547	784,953	9.0	14.8	2.2 *	7.6	10.4	12.3	17.3	1.1	3.2
45 - 54	103	90	13	1,050,953	536,610	514,343	9.8	16.8	2.5 *	7.9	11.7	13.3	20.2	1.2	3.9
55 - 64	29	24	5	532,881	260,356	272,525	5.4	9.2	1.8 *	3.5	7.4	5.5	12.9	0.2	3.4
65 - 74	12	10	2	331,669	152,519	179,150	3.6 *	6.6 *	1.1 *	1.6	5.7	2.5	10.6	0.0	2.7
75 - 84	2	2	0	172,771	71,849	100,922	1.2 *	2.8 *	0.0 +	0.0	2.8	0.0	6.6	-	-
85 & OLDER	1	1	0	58,574	19,479	39,095	1.7 *	5.1 *	0.0 +	0.0	5.1	0.0	15.2	-	-
UNKNOWN	0	0	0												
TOTAL	393	340	53	11,020,710	5,708,655	5,312,055	3.6	6.0	1.0	3.2	3.9	5.3	6.6	0.7	1.3
AGE-ADJUSTED							4.3	7.2	1.2	3.9	4.7	6.4	8.0	0.9	1.5
WHITE															
UNDER 1	0	0	0	182,626	93,434	89,192	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
1 - 4	0	0	0	750,790	384,136	366,654	0.0 +	0.0 +	0.0 +	-	-	-	-	-	-
5 - 14	1	0	1	2,178,191	1,119,910	1,058,281	0.0 *	0.0 +	0.1 *	0.0	0.1	-	-	0.0	0.3
15 - 24	4	2	2	2,098,749	1,091,943	1,006,806	0.2 *	0.2 *	0.2 *	0.0	0.4	0.0	0.4	0.0	0.5
25 - 34	71	65	6	2,143,548	1,098,812	1,044,736	3.3	5.9	0.6 *	2.5	4.1	4.5	7.4	0.1	1.0
35 - 44	276	254	22	2,968,782	1,505,949	1,462,833	9.3	16.9	1.5	8.2	10.4	14.8	18.9	0.9	2.1
45 - 54	207	192	15	2,724,103	1,363,915	1,360,188	7.6	14.1	1.1 *	6.6	8.6	12.1	16.1	0.5	1.7
55 - 64	88	82	6	1,822,867	897,116	925,751	4.8	9.1	0.6 *	3.8	5.8	7.2	11.1	0.1	1.2
65 - 74	24	23	1	1,312,934	616,909	696,025	1.8	3.7	0.1 *	1.1	2.6	2.2	5.3	0.0	0.4
75 - 84	10	10	0	970,909	395,602	575,307	1.0 *	2.5 *	0.0 +	0.4	1.7	1.0	4.1	-	-
85 & OLDER	1	1	0	349,726	107,076	242,650	0.3 *	0.9 *	0.0 +	0.0	0.8	0.0	2.8	-	-
UNKNOWN	0	0	0												
TOTAL	682	629	53	17,503,225	8,674,802	8,828,423	3.9	7.3	0.6	3.6	4.2	6.7	7.8	0.4	0.8
AGE-ADJUSTED							3.6	6.6	0.6	3.3	3.9	6.1	7.2	0.4	0.7

Note: ICD-10 codes B20-B24; rates are per 100,000 population. White, Black, and Asian/Other exclude Hispanic ethnicity. The race/ethnic groups on this table were tabulated based on the first race on those certificates where more than one race was listed.

* Death rate unreliable (relative standard error is greater than or equal to 23 percent.
- Confidence limit is not calculated for no (zero) events.
+ Standard error indeterminate, death rate based on no (zero) deaths.

Year 2000 U.S. standard population is used for age-adjusted rates.

Source: State of California, Department of Finance, 2001 Population Projections with Age, Sex and Race/Ethnic Detail, December 1998.
State of California, Department of Health Services, Death Records.

TABLE 2
DEATHS DUE TO HIVD
CALIFORNIA COUNTIES, 1999-2001
(By Place of Residence)

COUNTY	1999 - 2001 DEATHS (AVERAGE)	PERCENT	2000 POPULATION	CRUDE RATE	AGE-ADJUSTED RATE	95% CONFIDENCE LIMITS	
						LOWER	UPPER
CALIFORNIA	1,502.0	100.0	34,653,395	4.3	4.4	4.2	4.6
ALAMEDA	81.7	5.4	1,470,155	5.6	5.3	4.1	6.4
ALPINE	0.0	0.0	1,239	0.0 +	0.0 +	-	-
AMADOR	0.7	a	34,853	1.9 *	1.5 *	0.0	5.3
BUTTE	3.3	0.2	207,158	1.6 *	1.6 *	0.0	3.4
CALAVERAS	1.0	0.1	42,041	2.4 *	3.0 *	0.0	8.7
COLUSA	0.3	a	20,973	1.6 *	1.6 *	0.0	7.1
CONTRA COSTA	33.7	2.2	931,946	3.6	3.5	2.3	4.6
DEL NORTE	0.3	a	31,155	1.1 *	1.0 *	0.0	4.3
EL DORADO	3.0	0.2	163,197	1.8 *	1.8 *	0.0	3.9
FRESNO	31.3	2.1	811,179	3.9	4.3	2.8	5.8
GLENN	0.3	a	29,298	1.1 *	1.3 *	0.0	5.6
HUMBOLDT	5.3	0.4	128,419	4.2 *	4.1 *	0.6	7.6
IMPERIAL	3.7	0.2	154,549	2.4 *	3.0 *	0.0	6.0
INYO	0.0	0.0	18,437	0.0 +	0.0 +	-	-
KERN	13.0	0.9	677,372	1.9 *	2.1 *	1.0	3.2
KINGS	4.3	0.3	126,672	3.4 *	3.4 *	0.1	6.8
LAKE	2.7	0.2	60,072	4.4 *	5.7 *	0.0	12.5
LASSEN	0.3	a	35,959	0.9 *	1.0 *	0.0	4.6
LOS ANGELES	548.3	36.5	9,838,861	5.6	5.6	5.1	6.1
MADERA	4.7	0.3	126,394	3.7 *	4.3 *	0.4	8.3
MARIN	7.0	0.5	248,397	2.8 *	2.6 *	0.7	4.5
MARIPOSA	0.0	0.0	16,762	0.0 +	0.0 +	-	-
MENDOCINO	2.0	0.1	90,442	2.2 *	2.4 *	0.0	5.8
MERCED	5.0	0.3	215,256	2.3 *	2.5 *	0.3	4.7
MODOC	0.3	a	10,481	3.2 *	3.9 *	0.0	17.2
MONO	0.3	a	10,891	3.1 *	2.5 *	0.0	10.9
MONTEREY	8.7	0.6	401,886	2.2 *	2.2 *	0.7	3.8
NAPA	3.0	0.2	127,084	2.4 *	2.4 *	0.0	5.1
NEVADA	1.3	0.1	97,020	1.4 *	1.3 *	0.0	3.5
ORANGE	57.7	3.8	2,833,190	2.0	2.0	1.5	2.5
PLACER	3.3	0.2	243,646	1.4 *	1.4 *	0.0	2.9
PLUMAS	0.3	a	20,852	1.6 *	1.0 *	0.0	4.5
RIVERSIDE	73.7	4.9	1,570,885	4.7	5.1	3.9	6.3
SACRAMENTO	50.0	3.3	1,212,527	4.1	4.1	2.9	5.2
SAN BENITO	0.7	a	51,853	1.3 *	1.3 *	0.0	4.4
SAN BERNARDINO	58.7	3.9	1,727,452	3.4	3.6	2.6	4.5
SAN DIEGO	133.0	8.9	2,943,001	4.5	5.0	4.1	5.9
SAN FRANCISCO	196.3	13.1	792,049	24.8	21.3	18.3	24.3
SAN JOAQUIN	15.0	1.0	579,712	2.6 *	2.8 *	1.4	4.2
SAN LUIS OBISPO	4.3	0.3	254,818	1.7 *	1.9 *	0.1	3.7
SAN MATEO	18.0	1.2	747,061	2.4 *	2.3 *	1.2	3.3
SANTA BARBARA	5.3	0.4	412,071	1.3 *	1.3 *	0.2	2.4
SANTA CLARA	33.0	2.2	1,763,252	1.9	1.7	1.1	2.3
SANTA CRUZ	9.0	0.6	260,248	3.5 *	3.3 *	1.1	5.5
SHASTA	2.3	0.2	175,777	1.3 *	1.4 *	0.0	3.2
SIERRA	0.0	0.0	3,457	0.0 +	0.0 +	-	-
SISKIYOU	0.0	0.0	45,194	0.0 +	0.0 +	-	-
SOLANO	18.0	1.2	399,841	4.5 *	4.4 *	2.4	6.5
SONOMA	17.3	1.2	459,258	3.8 *	3.5 *	1.9	5.2
STANISLAUS	10.3	0.7	459,025	2.3 *	2.4 *	0.9	3.9
SUTTER	2.3	0.2	82,040	2.8 *	3.1 *	0.0	7.0
TEHAMA	0.7	a	56,666	1.2 *	1.3 *	0.0	4.3
TRINITY	0.3	a	13,490	2.5 *	3.2 *	0.0	14.2
TULARE	4.3	0.3	379,944	1.1 *	1.3 *	0.1	2.6
TUOLUMNE	1.7	0.1	56,125	3.0 *	3.1 *	0.0	7.9
VENTURA	15.3	1.0	753,820	2.0 *	2.0 *	1.0	3.1
YOLO	3.3	0.2	164,010	2.0 *	2.5 *	0.0	5.2
YUBA	2.0	0.1	63,983	3.1 *	3.6 *	0.0	8.6

Note: ICD-10 codes B20-B24; rates are per 100,000 population
Year 2000 U.S. standard population is used for age-adjusted rates.

a Represents a percentage of more than zero but less than 0.05.
* Death rate unreliable (relative standard error is greater than or equal to 23 percent).
+ Standard error indeterminate, death rate based on no (zero) deaths.
- Confidence limit is not calculated for no (zero) events.

Source: State of California, Department of Health Services, Death Records.
State of California, Department of Finance, 2000 Population Projections with Age, Sex and Race/Ethnic Detail, December 1998.