

# Miami Beach: A hot spot for new HIV infections

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A ZIP code in Miami Beach, known for its vibrant nightlife, is a hot spot for new HIV infections.

The area that lures thousands of tourists a year, has some of the most attractive hotels and nightclubs in the nation, and stretches along the famous Ocean Drive in South Beach falls into the ZIP code 33139. Its annual new HIV infection rate is in excess of four times the national average, according to newly released 2021 data from AIDSvu, an online mapping tool that visualizes the impact of the HIV epidemic on communities across the United States.

On Friday, the [international community](#) observed World AIDS Day, recognizing the enormous progress in preventing, detecting, and treating HIV since it became recognized as a disease 42 years ago.

However, in Florida, HIV continues to surge.

The state has six [metropolitan areas](#) with some of the highest rates of new infections in the U.S.: Miami, Fort Lauderdale, West Palm Beach, Tampa, Orlando and Jacksonville. Also, Miami-Dade, Broward and Palm Beach counties rank in the top 5% of U.S. counties for their high infection rates. In South Florida, the continued spread is not just confined to Miami Beach; cities like Wilton Manors, Overtown and Doral have high rates of new diagnosis, too.

"The situation doesn't seem to be improving," said Dr. Mario Stevenson, an infectious disease specialist and HIV researcher with the University of Miami. "The problem has become white noise. A lot of people come to the area to party hard, and they are not aware of the HIV risk. It is so important to get the message out so people know the risk."

Stevenson says local ZIP codes with large Hispanic populations in particular struggle with controlling the spread. Hispanics account for a rising share of new infections in the state. "Some of the messaging distributed around HIV awareness doesn't translate well," he said. "It's not culturally tailored to resonate with vulnerable communities of color."

To be sure, South Florida has made strides. Organizations like AIDS Health Foundation and efforts by the University of Miami and Florida's Department of Health to prevent, test, treat and improve the quality of life for those affected by HIV have been effective.

Mobile units now go into the communities to test and treat in an effort to keep people from infecting others without knowing. Florida, like other states, has placed an emphasis on PrEP, medication taken by those at risk to prevent contracting HIV. PrEP can significantly reduce the risk of HIV transmission, but a substantial disparity still exists in PrEP usage among minorities and women.

Experts say HIV still has a stigma and too often those infected don't want to get tested. To see real progress, they say, Florida needs to ramp up its efforts to tackle its HIV epidemic using a three-pronged approach: Identify people who have it, get them into treatment, and get people uninfected but at risk on prevention treatment.

"All three things have to be done simultaneously to stop the epidemic," said Dr. Marcus Conant, who was one of the first specialists in the country to treat AIDs patients in San Francisco.

Some states have made HIV testing part of routine screening in hospital emergency rooms or at places like the Department of Motor Vehicles. Dr. Maranda Ward, a professor at George Washington University and a leader of a national public health initiative focused on HIV, says making testing easily accessible and routine has helped curb spread in states that have adopted it. For example, in Washington, D.C., anyone who goes to the emergency room is tested. "In 2007, D.C. had an epidemic. Now DC is a model city for HIV prevention," she said.

Because of Florida's large HIV population, the area is a hotbed for research among those who test and learn their status. Although HIV can

be suppressed using antiretroviral therapy, it cannot yet be cured. For now, individuals with HIV must be on medication for the rest of their lives to keep the virus levels suppressed. But clinical trials are underway throughout South Florida to research new treatments and potential vaccines.

The University of Miami's new CONNECT mobile unit is going into some of the ZIP codes in Miami-Dade and Broward counties with high rates of HIV infection to enroll more diverse groups of patients into studies. One of those studies targets 530 women and men in Miami to determine the impact of chronic conditions, including heart, lung, blood, and sleep disorders, on people living with HIV.

"By making research more accessible and inclusive, CONNECT will help to ensure that the most vulnerable communities benefit from the latest scientific advances." said Dr. Maria Alacaide, professor of medicine in the Division of Infectious Diseases at the University of Miami Miller School of Medicine.

At Fort Lauderdale's AHF Healthcare Center, Dr. Zachary Henry said he is enrolling patients in two clinical trials for novel treatments. One will test a monoclonal antibody injection that can potentially be given every four months as an alternative to a daily medication treatment. The other is a monoclonal antibody treatment that would act as a functional cure, keeping the levels of HIV suppressed indefinitely.

"It basically would put HIV in remission," Henry said. "They are both long-term trials."

Dr. Daniel Driffin, project manager with HIV vaccine trials network for the AIDS Health Foundation said [clinical trials](#) are evolving to be more inclusive. In areas like South Florida, where minorities are impacted disproportionately, the push is on to get them into prevention and

treatment trials. "There are even a couple of prevention trials hosted by pharmaceutical companies that are prioritizing black women," he said.

Conant, now the chief medical officer at American Gene Technologies, said HIV is complicated in how it replicates and mutates and evades the immune system. Over time, at least 25 drugs have come on the market to treat HIV and about 250 different vaccines have been researched. While research continues, he is overseeing a gene therapy clinical trial that he feels has the potential to cure HIV.

"If you catch HIV, you are catching a gene that is integrating into your genome, and it is there until there is a strategy to block or remove that gene," he said. "We are not going to have a treatment unless we keep working on it."

Curing HIV with [gene therapy](#) could be at least five years away, he said. But he offers hope: "This is exciting stuff and we have seen some promise with early trials."

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