Hepatitis in New York City

In 2020, 42 New York City (NYC) residents with confirmed hepatitis A (HAV) infection were reported to the NYC Department of Health and Mental Hygiene (Health Department); in 2021, 90 NYC residents with confirmed HAV infection were reported; and in 2022, 47 NYC residents with confirmed HAV infection were reported. The reduced number of cases in 2020 is likely a result of decreases in international travel, more limited person-to-person contact, and changes in health care-seeking behavior during the first year of the COVID-19 pandemic.

In 2020, 20 NYC residents with confirmed acute hepatitis B virus (HBV) infection and 4,002 NYC residents with confirmed chronic HBV infection were reported to the NYC Health Department; in 2021, 44 NYC residents with confirmed acute HBV infection and 5,360 NYC residents with confirmed chronic HBV infection were reported; and in 2022, 19 NYC residents with confirmed acute HBV infection and 5,534 residents with confirmed chronic HBV infection were reported. In 2020, the lowest number of confirmed chronic HBV cases were reported since hepatitis B case reporting began in NYC, as fewer people accessed health care and screening services during the first year of the COVID-19 pandemic. Reports of newly diagnosed chronic hepatitis B increased in 2021 and 2022, approaching the level seen in 2019.

In 2020, 185 NYC residents with confirmed acute hepatitis C virus (HCV) infection and 2,791 NYC residents with confirmed chronic HCV infection were reported to the NYC Health Department; in 2021, 130 NYC residents with confirmed acute HCV infection and 2,832 NYC residents with confirmed chronic HCV infection were reported; and in 2022, 139 NYC residents with confirmed acute HCV infection and 2,805 residents with confirmed chronic HCV infection were reported. In 2020, NYC implemented a new case definition for acute HCV (following an update to the case definition by the Council of State and Territorial Epidemiologists), which drove the increase in reported acute HCV cases in NYC compared to prior years.

For additional information, see the NYC Health Department's Hepatitis A, B, and C in New York City Annual Reports for 2022, 2021, and 2020. The NYC Health Department is currently collecting and analyzing hepatitis A, B, and C surveillance data for 2023 to be released in late 2024.

HIV in New York City

The number of new HIV diagnoses in NYC reported to the NYC Health Department was 1,442 in 2020, 1,645 in 2021, and 1,624 in 2022. The relatively stable number of new HIV diagnoses from 2021 to 2022, compared with the marked one-year declines seen in previous recent years (for example, a 7.5% decrease in new HIV diagnoses from 2018 to 2019), may reflect ongoing "catch-up" of HIV diagnoses not made as readily during the first year of the COVID-19 pandemic.

For additional information, see the NYC Health Department's HIV Surveillance Annual Reports for 2022, 2021, and 2020. The above data on new HIV diagnoses in 2020 and 2021 are adjusted to reflect ongoing surveillance activities. Updated data appear in the NYC Health Department's HIV Annual Surveillance Statistics tables for 2022, 2021, and 2020. The NYC Health Department is currently collecting and analyzing HIV surveillance data for 2023 to be released in late 2024.

Tuberculosis in New York City

In 2021, 529 NYC residents with confirmed tuberculosis (TB) were reported; in 2022, 534 NYC residents with confirmed TB were reported; and in 2023, 684 NYC residents with confirmed TB were reported. The reduction in TB cases in 2021 and 2022 compared to prior years may be due to changes in care access and travel related to the COVID-19 pandemic; COVID-19 prevention measures may also have had an impact.

For additional information, see the NYC Health Department's Tuberculosis Surveillance Annual Report for 2023.

Measles in New York City

There were no cases of measles among NYC residents in 2021, 2022, or 2023; there were 9 measles cases among NYC residents as of June 13, 2024.