

to having heterosexual sex with an injecting drug user. Eleven percent of heterosexually transmitted AIDS cases among females were attributed to sex with a bisexual male, and 2% to sex with a recipient of contaminated blood products (a hemophiliac or transfusion/transplant recipient). In 1995 an increase was observed, as for males, in the category of sex with a person with unspecified HIV/AIDS risk at 62% of 1995 female cases. Declines were observed for sex with men who were IDUs (30%) and with men who have sex with men (5%). Sex with recipients of contaminated blood products represented approximately the same risk to females in 1995 as for the entire observation period (1982-1995).

The highest proportions of AIDS cases attributed to heterosexual sex were in Southeast Tennessee (16%) and Shelby County (13%). Regions with the lowest proportions were Knox County and Mid Cumberland at 6% each.

Eighty-four percent of Tennessee AIDS cases were associated with a single exposure category. Of the remaining 16%, only 1% were linked to more than two risk factors. The category of men having sex with men emerged as a risk factor in 72% of cases. Where this was the sole risk factor listed, it accounted for 62% of total cases. Injecting drug use, the second most prominent risk factor, was linked to 21% of AIDS cases diagnosed through 1995. Heterosexual contact, ranking third in importance, was documented as a risk factor in 14% of cases. Injecting drug use and heterosexual contact were each linked as sole risk factors to 10% of total cases. Only in 2% of the AIDS cases was a risk factor neither identified nor reported.

Kaposi's sarcoma and, to a lesser extent, pneumocystis carinii pneumonia were more frequently reported among AIDS cases whose exposure was either MSM or the combination of MSM and IDU.

Pulmonary tuberculosis was much more often reported among AIDS cases where exposure is IDU as compared to other exposure categories.

Wasting syndrome was somewhat more often reported among cases where exposure was IDU, heterosexual sex or receipt of contaminated blood products.

A higher percentage of AIDS cases who were recipients of contaminated blood products were reported to have esophageal candidiasis than other exposure categories.

5.7. Geographical Distribution of AIDS by County and Region

Shelby and Davidson Counties had the highest absolute numbers of AIDS cases in the State. They had four to five times the number of AIDS cases as the other two metropolitan counties, and their dominance has persisted over time. Trends for Davidson and Shelby Counties were similar over time.