South Dakota Health Alert Network

SD HAN 26-009

Increased HIV Transmission Among People Who Inject Drugs (PWID) in South Dakota

Counties: State-wide

Situation:

The South Dakota Department of Health (SDDOH) is notifying healthcare providers that among people newly diagnosed with HIV, the risk factor of injection drug use made up a higher percentage of new HIV infections. During 2026, approximately 50% of new HIV infections have been reported among persons who inject drugs (PWID). The average for the past five years has been below 30%.

As of July 2026, 34 newly diagnosed cases of HIV have been reported. The five-year average during this same period was 21 cases, representing a 62% increase.

Current transmission is primarily affecting:

- Individuals experiencing homelessness or housing instability.
- Individuals with a history of incarceration
- Native American communities where newly diagnosed persons have been identified.

Early diagnosis is essential to interrupt ongoing transmission. Individuals who are diagnosed promptly can begin antiretroviral therapy, achieve viral suppression, improve their health outcomes, and prevent transmission of HIV.

Healthcare providers play a critical role in identifying undiagnosed HIV infections and preventing further transmission.

The South Dakota Department of Health recommends that providers:

- Routinely offer HIV screening using an opt-out approach whenever appropriate.
- Assess patients for HIV risk factors, including injection drug use, sexual exposure risks, homelessness or housing instability, and recent sexually transmitted infections.
- Test patients immediately if they present with symptoms consistent with acute HIV infection, regardless of previous test results.

- Ensure patients with reactive HIV screening tests receive confirmatory testing and are rapidly linked to HIV medical care.
- Discuss HIV prevention strategies, including Pre-Exposure Prophylaxis (PrEP) for patients at ongoing risk, and offer Post-Exposure Prophylaxis (PEP) when indicated.

CDC recommends an HIV test for all individuals ages 13–64 years at least once as part of routine health care. Additional testing is recommended for the following:

- At least annual HIV testing for individuals at increased risk, including:
    - People who inject drugs.
    - Individuals who share injection equipment.
    - Sexual partners of people with HIV.
    - Individuals with multiple sexual partners or recent sexually transmitted infections.
    - Men who have sex with men (MSM), with more frequent testing (every 3–6 months) for those at highest risk.
- HIV testing during every pregnancy, with repeat testing during the third trimester for pregnant persons at increased risk or living in areas with elevated HIV incidence.

Patients with acute HIV infection often present with nonspecific viral symptoms, including fever, rash, sore throat, fatigue, lymphadenopathy, myalgias, or headache.

Antibody tests might be negative during early infection. Clinicians should consider ordering an HIV antigen/antibody test with HIV RNA testing when acute HIV infection is suspected.

HIV infection is reportable in South Dakota as a Category II disease, reportable within 3 days. Reports can be submitted electronically and securely at sd.gov/diseasereport.

For consultation regarding HIV testing, linkage to care, PrEP, PEP, or HIV prevention services, please contact:

South Dakota Department of Health
Office of Disease Prevention Services

HIV Prevention Program
Phone: 605-367-7202
Toll Free (South Dakota): 1-800-592-1861