

History of HIV and AIDS overview



KEY POINTS:

The history of the HIV and AIDS epidemic began in illness, fear and death as the world faced a new and unknown virus. However, scientific advances, such as the development of antiretroviral drugs, have enabled people with access to treatment to live long and healthy lives with HIV.

Here, we go through the key historical moments that have defined the HIV epidemic over the past 30 years. You can also explore our [interactive timeline](#) which features video, photos, data, audio and more.

Pre-1980

It is widely believed that [HIV originated in Kinshasa, in the Democratic Republic of Congo around 1920 when HIV crossed species from chimpanzees to humans](#). Up until the 1980s, we do not know how many people were infected with HIV or developed AIDS. HIV was unknown and transmission was not accompanied by noticeable signs or symptoms.

While sporadic cases of AIDS were documented prior to 1970, available data suggests that the current epidemic started in the mid- to late 1970s. By 1980, HIV may have already spread to five continents (North America, South America, Europe, Africa and Australia). In this period, between 100,000 and 300,000 people could have already been infected.¹

1980s

1981

In 1981, cases of a rare lung infection called *Pneumocystis carinii pneumonia (PCP)* were found in five young, previously healthy gay men in Los Angeles.² At the same time, there were reports of a group of men in New York and California with an unusually aggressive cancer named *Kaposi's Sarcoma*.³

In December 1981, the first cases of PCP were reported in [people who inject drugs](#).⁴

By the end of the year, there were 270 reported cases of severe immune deficiency among gay men - 121 of them had died.⁵

1982

In June 1982, a group of cases among gay men in Southern California suggested that the cause of the immune deficiency was sexual and the syndrome was initially called gay-related immune deficiency (or GRID).⁶

Later that month, the disease was reported in haemophiliacs and Haitians leading many to believe it had originated in Haiti.^{7 8}

In September, the CDC used the term 'AIDS' (acquired immune deficiency syndrome) for the first time, describing it as

a disease at least moderately predictive of a defect in cell mediated immunity, occurring in a person with no known case for diminished resistance to that disease.⁹

AIDS cases were also being reported in a number of European countries.^{10 11 12}

In [Uganda](#), doctors reported cases of a new, fatal wasting disease locally known as 'slim'.¹³

By this point, a number of AIDS-specific organisations had been set up including the San Francisco AIDS Foundation (SFAF) in the [USA](#) and the Terrence Higgins Trust in the [UK](#).¹⁴

1983

In January 1983, AIDS was reported among the female partners of men who had the disease suggesting it could be passed on via heterosexual sex.¹⁵

In May, doctors at the Pasteur Institute in France reported the discovery of a new retrovirus called Lymphadenopathy-Associated Virus (or LAV) that could be the cause of AIDS.¹⁶

In June, the first reports of AIDS in children hinted that it could be passed via casual contact but this was later ruled out and it was concluded that they had probably directly acquired AIDS from their mothers before, during or shortly after birth.¹⁷

By September, the CDC identified all major routes of transmission and ruled out transmission by casual contact, food, water, air or surfaces.¹⁸

The CDC also published their first set of recommended precautions for healthcare workers and

allied health professionals to prevent "AIDS transmission".[19](#)

In November, the World Health Organization (WHO) held its first meeting to assess the global AIDS situation and began international surveillance.[20](#)

By the end of the year the number of AIDS cases in the USA had risen to 3,064 - of this number, 1,292 had died.[21](#)

1984

In April 1984, the National Cancer Institute announced they had found the cause of AIDS, the retrovirus HTLV-III. In a joint conference with the Pasteur Institute they announced that LAV and HTLV-III are identical and the likely cause of AIDS.[22](#) A blood test was created to screen for the virus with the hope that a vaccine would be developed in two years.[23](#)

In July, the CDC state that avoiding injecting drug use and sharing needles "should also be effective in preventing transmission of the virus."[24](#)

In October, bath houses and private sex clubs in San Francisco were closed due to high-risk sexual activity. New York and Los Angeles followed suit within a year.[25](#)

By the end of 1984, there had been 7,699 AIDS cases and 3,665 AIDS deaths in the USA with 762 cases reported in Europe.[26](#)

In Amsterdam, the Netherlands, the first [needle and syringe programme](#) was set up with growing concerns about HTLV-III/LAV.[27](#)

1985

In March 1985, the U.S Food and Drug Administration (FDA) licensed the first commercial blood test, ELISA, to detect antibodies to the virus. Blood banks began to screen the USA blood supply.[28](#)

In April, the U.S. Department of Health and Human Services (HHS) and the World Health Organization (WHO) hosted the first International AIDS Conference in Atlanta Georgia.[29](#)

Ryan White, a teenager from Indiana, USA who acquired AIDS through contaminated blood products used to treat his haemophilia was banned from school.[30](#)

On 2 October, the actor Rock Hudson dies from AIDS - the first high profile fatality. He left \$250,000 to set up the American Foundation for AIDS Research (amfAR).[31](#)

In December, the U.S. Public Health Service issued the first recommendations for [preventing mother to child transmission](#) of the virus.[32](#)

By the end of 1985, every region in the world had reported at least one case of AIDS, with 20,303 cases in total.[33](#)

1986

In May 1986, the International Committee on the Taxonomy of Viruses said that the virus that causes AIDS will officially be called HIV (human immunodeficiency virus) instead of HTLV-III/LAV.[34](#)

By the end of the year, 85 countries had reported 38,401 cases of AIDS to the World Health Organization. By region these were; Africa 2,323, Americas 31,741, Asia 84, Europe 3,858, and Oceania 395.[35](#)

1987

In February 1987, the WHO launched The Global Program on AIDS to raise awareness; generate evidence-based policies; provide technical and financial support to countries; conduct research; promote participation by NGOs; and promote the rights of people living with HIV.[36](#)

In March, the FDA approved the first antiretroviral drug, zidovudine (AZT), as treatment for HIV.[37](#)

In April, the FDA approved the western blot blood test kit, a more specific HIV antibody test.[38](#)

In July, the WHO confirmed that HIV could be passed from mother to child during breastfeeding.[39](#)

In October, AIDS became the first illness debated in the United Nations (UN) General Assembly.[40](#)

By December, 71,751 cases of AIDS had been reported to the WHO, with 47,022 of these in the USA. The WHO estimated that 5-10 million people were living with HIV worldwide.[41](#)

1988

In 1988, the WHO declared 1st December as the first World AIDS Day.[42](#)

The groundwork was laid for a nationwide HIV and AIDS care system in the USA that was later funded by the Ryan White CARE Act.[43](#)

1989

In March 1989, 145 countries had reported 142,000 AIDS cases. However, the WHO estimated there were up to 400,000 cases worldwide.[44](#)

In June, the CDC released the first guidelines to prevent PCP - an opportunistic infection that was a major cause of death among people with AIDS.[45](#)

The number of reported AIDS cases in the USA reached 100,000.

1990s

1990

On 8 April 1990, Ryan White died of an AIDS-related illness aged 18.[46](#)

In June, the 6th International AIDS Conference in San Francisco protested against the USA's immigration policy which stopped people with HIV from entering the country. NGOs boycotted the conference.[47](#)

In July, the USA enacted the Americans with Disabilities Act (ADA) which prohibits discrimination against those with disabilities including people living with HIV.[48](#)

In October, the FDA approved the use of zidovudine (AZT) to treat [children](#) with AIDS.[49](#)

By the end of 1990, over 307,000 AIDS cases had been officially reported with the actual number estimated to be closer to a million. Between 8-10 million people were thought to be living with HIV worldwide.[50](#)

1991

In 1991, the Visual AIDS Artists Caucus launched the Red Ribbon Project to create a symbol of compassion for people living with HIV and their carers. The red ribbon became an international symbol of AIDS awareness.[51](#)

On 7 November, professional basketball player Earvin (Magic) Johnson announced he had HIV and retired from the sport, planning to educate [young people](#) about the virus. This announcement helped begin to dispel the stereotype, still widely held in the US and elsewhere, of HIV as a 'gay' disease.[52](#)

A couple of weeks later, Freddie Mercury, lead singer of rock group Queen, announced he had AIDS and died a day later.[53](#)

1992

The 1992 International AIDS Conference scheduled to be held in Boston, USA was moved to Amsterdam due to USA immigration rules on people living with HIV.[54](#)

Tennis star Arthur Ashe revealed he became infected with HIV as the result of a blood transfusion in 1983.[55](#)

In May, the FDA licensed a 10 minute testing kit which could be used by healthcare professionals to detect HIV-1.[56](#)

1993

In March 1993, the USA Congress voted overwhelmingly to retain the ban on entry into the country for people living with HIV.[57](#)

The CDC added pulmonary tuberculosis, recurrent pneumonia and invasive cervical cancer to the list of AIDS indicators.[58](#)

Over 700,000 people were thought to have the virus in [Asia and the Pacific](#).[59](#)

By the end of 1993, there were an estimated 2.5 million AIDS cases globally.[60](#)

1994

In August 1994, the USA Public Health Service recommended the use of AZT to prevent the mother-to-child transmission of HIV.[61](#)

In December, the FDA approved an oral HIV test - the first non-blood HIV test.

1995

In June 1995, the FDA approved the first protease inhibitor beginning a new era of highly active antiretroviral treatment (HAART). Once incorporated into clinical practice HAART brought about an immediate decline of between 60% and 80% in rates of AIDS-related deaths and hospitalisation in those countries which could afford it.[62](#)

By the end of the year, there were an estimated 4.7 million new HIV infections - 2.5 million in southeast Asia and 1.9 million in [sub-Saharan Africa](#).[63](#)

1996

In 1996, the Joint United Nations Programme on AIDS (UNAIDS) was established to advocate for global action on the epidemic and coordinate the response to HIV and AIDS across the UN.⁶⁴

The 11th International AIDS Conference in Vancouver highlighted the effectiveness of HAART leading to a period of optimism.⁶⁵

The FDA approved the first home testing kit; a viral load test to measure the level of HIV in the blood; the first non-nucleoside transcriptase inhibitor (NNRTI) drug (nevirapine); and the first HIV urine test.⁶⁶

New HIV outbreaks were detected in [Eastern Europe](#), the former Soviet Union, [India](#), Vietnam, Cambodia and [China](#) among others.

By the end of 1996, the estimated number of people living with HIV was 23 million.⁶⁷

1997

In September 1997, the FDA approved Combivir, a combination of two antiretroviral drugs, taken as a single daily tablet, making it easier for people living with HIV to take their medication.⁶⁸

UNAIDS estimated that 30 million people had HIV worldwide equating to 16,000 new infections a day.⁶⁹

1999

In 1999, the WHO announced that AIDS was the fourth biggest cause of death worldwide and number one killer in Africa. An estimated 33 million people were living with HIV and 14 million people had died from AIDS since the start of the epidemic.⁷⁰

2000s

2000

In July, UNAIDS negotiated with five pharmaceutical companies to reduce antiretroviral drug prices for developing countries.⁷¹

In September, the United Nations adopted the Millennium Development Goals which included a specific goal to reverse the spread of HIV, malaria and TB.⁷²

2001

In June 2001, the United Nations (UN) General Assembly called for the creation of a "global fund" to support efforts by countries and organisations to combat the spread of HIV through prevention, treatment and care including buying medication.⁷³

After generic drug manufacturers, such as Cipla in India, began producing discounted, generic forms of HIV medicines for developing countries, several major pharmaceutical manufacturers agreed to further reduce drug prices.

In November, the World Trade Organization (WTO) announced the Doha Declaration which allowed developing countries to manufacture generic medications to combat public health crises like HIV.⁷⁴

2002

In April 2002, the Global Fund approved its first round of grants totalling \$600 million.⁷⁵

In July, UNAIDS reported that AIDS was now by far the leading cause of death in sub-Saharan Africa.⁷⁶

Also in July, South Africa's Constitutional Court orders the government to make the HIV drug nevirapine available to all HIV-positive pregnant women and their newborn children following a legal challenge by the Treatment Action Campaign. ⁷⁷

In November, the FDA approved the first rapid HIV test with 99.6% accuracy and a result in 20 minutes.⁷⁸

2003

In January 2003, President George W. Bush announced the creation of the United States President's Emergency Plan For AIDS Relief (PEPFAR), a \$15 billion, five-year plan to combat AIDS, primarily in countries with a high number of HIV infections.⁷⁹

In December, the WHO announced the "3 by 5" initiative to bring HIV treatment to 3 million people by 2005.⁸⁰

2006

In 2006, [male circumcision](#) was found to reduce the risk of female-to-male HIV transmission by 60%.⁸¹ Since then, the WHO and UNAIDS have emphasised that male circumcision should be considered in areas with high HIV and low male circumcision prevalence.⁸²

2007

In May 2007, the WHO and UNAIDS issued new guidance recommending "provider-initiated" HIV testing in healthcare settings. This aimed to widen knowledge of HIV status and greatly increase access to HIV treatment and prevention.⁸³

2010s

2010

In January 2010, the travel ban preventing HIV-positive people from entering the USA was lifted.⁸⁴

In July, the CAPRISA 004 microbicide trial was hailed a success after results showed that the microbicide gel reduces the risk of HIV infection in [women](#) by 40%.⁸⁵

Results from the iPrEx trial showed a reduction in HIV acquisition of 44% among men who have sex with men who took pre-exposure prophylaxis (PrEP).⁸⁶

2011

In 2011, results from the HPTN 052 trial showed that early initiation of antiretroviral treatment reduced the risk of HIV transmission by 96% among serodiscordant couples.⁸⁷

In August, the FDA approved Complera, the second all-in-one fixed dose combination tablet, expanding the treatment options available for people living with HIV.⁸⁸

2012

In July 2012, the FDA approved PrEP for HIV-negative people to prevent the sexual transmission of HIV.[89](#)

For the first time, the majority of people eligible for treatment were receiving it (54%).[90](#)

2013

In 2013, UNAIDS reported that AIDS-related deaths had fallen 30% since their peak in 2005.[91](#)

An estimated 35 million people were living with HIV.[92](#)

2014

In September 2014, new UNAIDS “Fast Track” targets called for the dramatic scaling-up of HIV prevention and treatment programmes to avert 28 million new infections and end the epidemic as a public health issue by 2030.[93](#)

UNAIDS also launched the ambitious 90-90-90 targets which aim for 90% of people living with HIV to be diagnosed, 90% of those diagnosed to be accessing antiretroviral treatment and 90% of those accessing treatment to achieve viral suppression by 2020.[94](#)

2015

In July 2015, UNAIDS announced that the Millennium Development Goal (MDG) relating to HIV and AIDS had been reached six months ahead of schedule. The target of MDG 6 - halting and reversing the spread of HIV - saw 15 million people receive treatment.[95](#)

In September, the WHO launched new treatment guidelines recommending that all people living with HIV should receive antiretroviral treatment, regardless of their CD4 count, and as soon as possible after their diagnosis.[96](#)

In October, UNAIDS released their 2016-2021 strategy in line with the new Sustainable Development Goals (SDGs), that called for an acceleration in the global HIV response to reach critical HIV prevention and treatment targets and achieve zero discrimination.[97](#)

2016

The number of people in Russia living with HIV reached one million. Newly released figures also showed 64% of all new HIV diagnoses in Europe occurred in Russia. [98](#)

UNAIDS announced that 18.2 million people were on ART, including 910 000 children, double the number five years earlier. However, achieving increased ART access means a greater risk of drug resistance and the WHO released a report on dealing with this growing issue.[99](#)

AVERT marked its 30th anniversary - having provided HIV and AIDS information from the start of the epidemic we continue our work to empower people through knowledge to avert HIV.

2017

For the first time ever, more than half of the global population living with HIV are receiving antiretroviral treatment, a record of 19.5 million people.[100](#)

Organisations around the world endorse “Undetectable = Untransmittable”(U=U). This anti-stigma

slogan launched by the Prevention Access Campaign is based on robust scientific evidence that people who have adhered to treatment and achieved an undetectable viral load cannot pass the virus on. In 2017 'U=U' becomes a defining message of the HIV response in many well-resourced countries, but fails to have the same impact in lower resource settings, where viral-load monitoring is more difficult.¹⁰¹

New infections have fallen by a third in East and Southern Africa over the last six years, with particular decreases among young women and girls. It is thought that this is partly due to the success of the DREAMS initiative, which aimed to reduce HIV infections among women and girls in sub-Saharan Africa by providing them with economic opportunities as well as better HIV services and education.¹⁰²

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