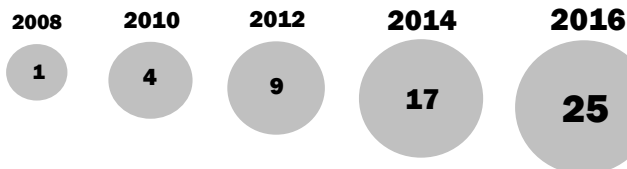




Number of Newly Diagnosed with HIV per day:



NEWLY DIAGNOSED HIV CASES IN THE PHILIPPINES

Table 1. Quick Facts

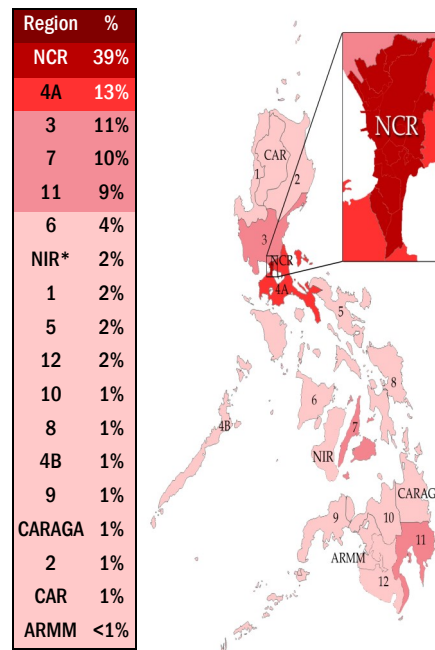
Demographic Data	March 2016	Jan-Mar 2016	Jan 2011 - Mar 2016	Cumulative Jan1984 - Mar 2016
Total Reported Cases	736	2,291	26,632	32,647
Asymptomatic Cases	656	2,001	24,662	29,805
AIDS Cases	80	290	1,970	2,842
Male	712	2,211	25,439	30,136 ^a
Female	24	80	1,193	2,500 ^a
Age Range (Median)	8-63 (28)	1-66 (28)	1-82 (28)	1-82 (28)
Less than 15 y/o	1	3	37	92 ^b
15-24 y/o	204	644	7,525	8,738 ^b
25-34 y/o	408	1,232	14,073	16,697 ^b
35-49 y/o	107	371	4,380	6,100 ^b
50 y/o & above	16	41	617	946 ^b
Pregnant WLHIV	7			
Newly Started on ART	520			
Total PLHIV on ART				13,387
Reported Deaths	26	145		1,675

^aNo data available on sex for (11) cases
^bNo data available on age for (74) cases

In March 2016, there were 736 new HIV Ab sero-positive individuals reported to the HIV/AIDS & ART Registry of the Philippines (Table 1). This was 10% higher compared to the same period last year (667) [Figure 1]. Eighty-nine percent of the cases were asymptomatic at the time of reporting (Figure 3).

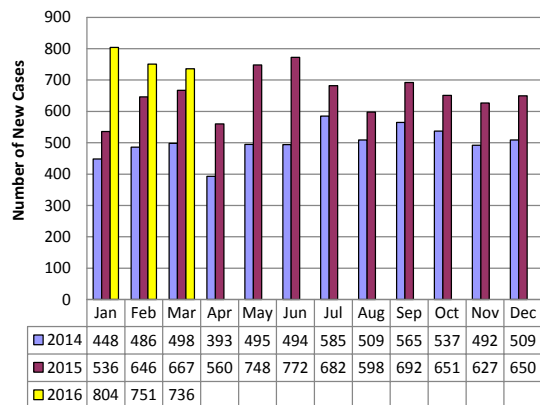
Most (97%) were male. The median age was 28 years old (age range: 8 years-63 years). More than half belong to the 25-34 year age group while 27% were youth aged 15-24 years.

Figure 2. Percentage of Newly Diagnosed Cases per Region (March 2016)



*Negros Island Region (Executive Order No. 183)

Figure 1. Number of New HIV Cases by Month (2014-2016)

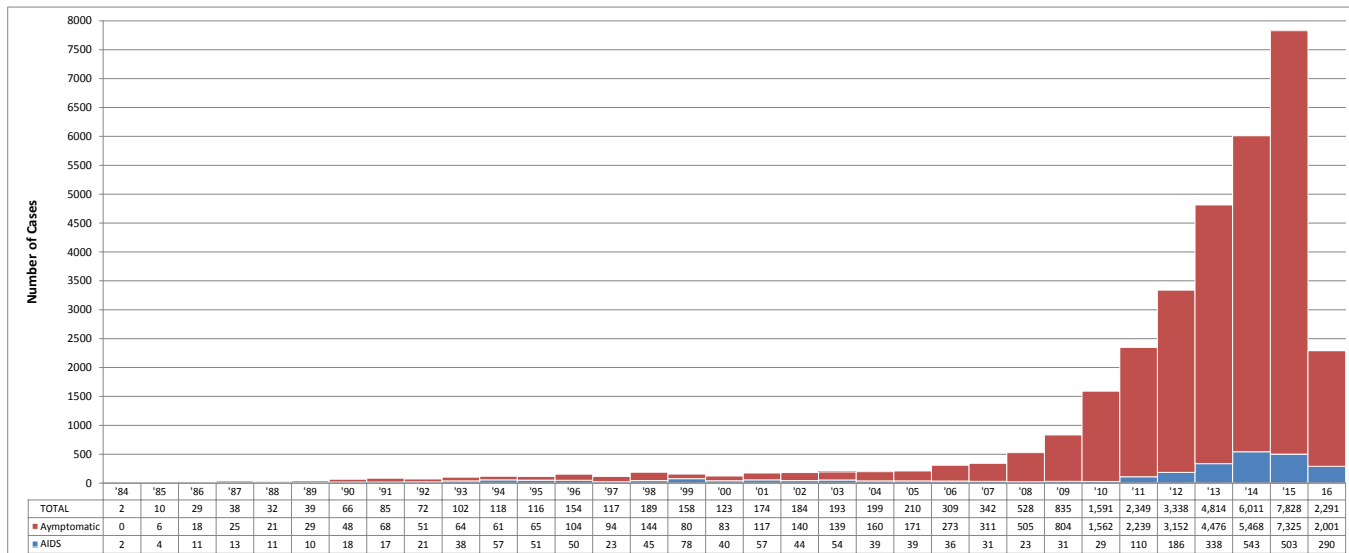


The regions with the highest number of reported cases for March 2016 were: National Capital Region (NCR) with 284 (39%) cases, Region 4A with 94 (13%) cases, Region 3 with 82 (11%) cases, Region 7 with 71 (10%) cases, and Region 11 with 65 (9%) cases. One hundred forty (19%) cases came from the rest of the country (Figure 2).

Reported modes of transmission (MOT) were sexual contact (709), needle sharing among injecting drug users (IDU) [26] and mother-to-child transmission (1). Eighty-six percent of those transmitted through sexual contact were among males who have sex with males (MSM^a).

^amale-male sex and sex with both males & females

Figure 3. Number of HIV Cases Reported in the Philippines by Year, January 1984 to March 2016 (N=32,647)



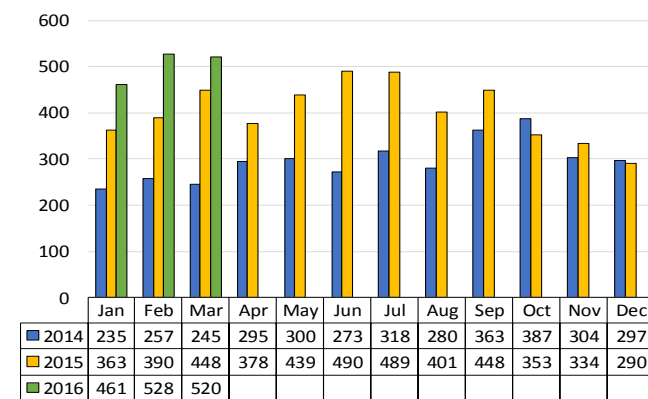
PLHIV on Anti-Retroviral Therapy (ART)

In March 2016, there were 520 People Living with HIV (PLHIV) who were newly-initiated on ART. This was 16% higher than the same period last year (n=448) [Figure 4]. The median CD4 of these patients upon enrollment was 151 cells/mm³.

A total of 13,387* PLHIV were presently on ART as of March 2016. Most (96%) were males. The median age of patients was 31 years (range: 11 months-77 years). Ninety-six percent were on first line regimen, 3% were on second line regimen and <1% were on mixed first and second line regimen.

**Note: This is the total number of adult and pediatric patients currently enrolled and accessing antiretroviral drugs (ARV) in the 40 treatment hubs and satellites. It does not include patients who were previously taking ARV but have already died, have left the country, have been lost to follow up, or opted not to take ARV anymore. The "lost to follow up" criteria was also moved to 3 months after date of next pick up from the previous 6 months.*

Figure 4. Number of Newly-Initiated on ART by Month (2014-2016)



HIV/AIDS EPIDEMIC TRENDS IN THE PHILIPPINES (January 1984–March 2016)

The first case of HIV infection in the Philippines was reported in 1984. From January 1984 to March 2016, there has been 32,647 HIV Ab sero-positive cases reported to the HARP (Table 1). Ninety-one percent (29,805) of the total reported cases were asymptomatic at the time of reporting. Ninety-two percent (30,136) were male and 2,500 were female*. The median age* was 28 years old (age range: 1 year- 82 years). More than half (16,697 or 51%) were from the 25-34 year age group while 8,738 (27%) were youth aged 15-24 years (Figure 5).

In the early years of the epidemic (1984-1990), 62% (133 of 216 cases) were female. Beginning in 1991, more males were reported to be infected with HIV in the Philippines (Figure 6). From 2011 to 2016, males comprised 96% (25,439) of the reported 26,632 cases.

Eighty-two percent (26,632) of all the 32,647 diagnosed cases in the Philippines were reported from January 2011 to March 2016 (Table 1). Most (93%) of these cases were still asymptomatic at the time of reporting.

The age group with the biggest proportion of cases has become younger: from 2001 to 2005, it was 35-49 years; and starting from 2006 to 2016, it was 25-34 years (Figure 5). Notably, the proportion of HIV cases in the 15-24 year age group increased from 25% in 2006-2010 to 28% in 2011-2016.

**Note: From 1984–March 2016, 74 did not report AGE, 11 did not report SEX while 11 did not report both AGE and SEX*

Figure 5. Distribution of HIV Cases by Age Group, January 1984-March 2016

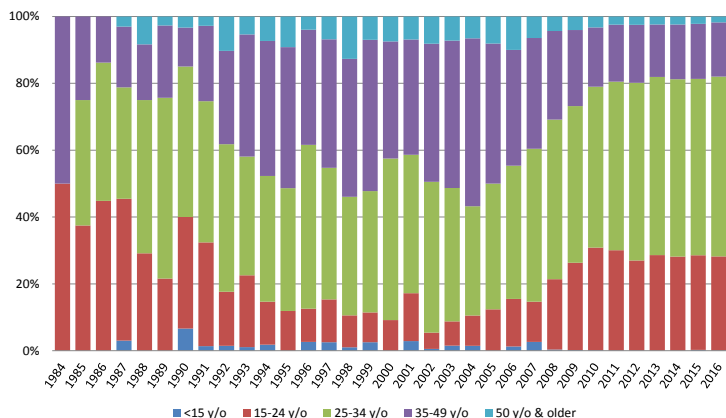
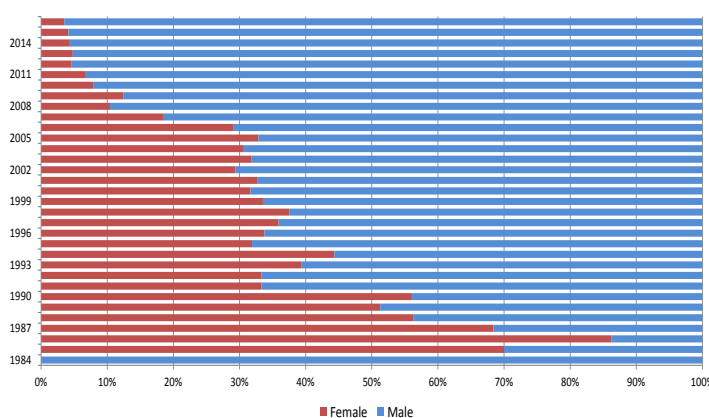


Figure 6. Distribution of HIV Cases by Sex, January 1984-March 2016



Geographical Distribution

From January 1984 to March 2016, the regions with the most number of reported cases were NCR with 14,102 (43%) cases, Region 4A with 4,477 (14%) cases, Region 7 with 2,882 (9%) cases, Region 3 with 2,707 (8%) cases, and Region 11 with 1,936 (6%) cases. Seventeen percent (5,397) of the cases came from the rest of the country (ROTC) while 1,146 (4%) had no data on region (Table 2).

Table 2. Percentage of HIV Cases per Region

Region	March 2016 (N=736)	Jan-Mar 2016 (N=2,291)	Jan 2011 - Mar 2016 (N=26,632) ^a	Cumulative Jan 1984–Mar 2016 (N=32,647) ^b
NCR	284 (39%)	949 (41%)	11,655 (44%)	14,102 (43%)
4A	94 (13%)	348 (15%)	3,868 (15%)	4,477 (14%)
7	71 (10%)	242 (11%)	2,503 (9%)	2,882 (9%)
3	82 (11%)	207 (9%)	2,164 (8%)	2,707 (8%)
11	65 (9%)	159 (7%)	1,714 (6%)	1,936 (6%)
ROTC	140 (19%)	386 (17%)	4,669 (18%)	5,397 (17%)

Of the 2,500 females reported with HIV, 622 (25%) were from NCR, 436 (17%) were from Region 3, 261 (10%) were from Region 7, 221 (9%) were from Region 4A and 960 (39%) were from other regions.

The regions with the most number of Overseas Filipino Workers (OFW) reported to the HARP were NCR with 1,478 cases, Region 4A with 686 cases, and Region 3 with 429 cases.

^aFrom January 2011-March 2016, no particular region were reported for 59 cases
^bFrom January 1984-March 2016, no particular region were reported for 1,146 cases

Table 3. Reported Modes of HIV Transmission

Mode of Transmission	March 2016 (N=736)		Jan-Mar 2016 (N=2,191)		Jan 2011- Mar 2016 (N=26,632)		Cumulative Jan1984–Mar 2016 (N=32,647) ^a	
	M	F	M	F	M	F	M	F
Sexual Contact	686	23	2,114	77	24,201	1,108	28,444	2,281
Male-Female Sex ^b	75	23	201	77	2,691	1,108	4,006	2,281
Male-Male Sex ^c	366	0	1,154	0	13,001	0	14,853	0
Sex with Males & Females ^d	245	0	759	0	8,509	0	9,585	0
Blood/Blood Products	0	0	0	0	0	1	5	15
Sharing of Infected Needles	25	1	95	2	1,213	69	1,350	87
Needle Prick Injury	0	0	0	0	0	0	2	1
Mother-to-Child	1	0	2	1	20	15	48	39
No Data Available	0	0	0	0	5	0	287	77

^aFrom January 1984–March 2016 11 did not report sex

were at <1% of the total cases reported. The cases among IDU spiked in 2010 comprising 9% (147) of the total cases reported. However, new cases among people who injected drugs decreased to ≤ 5% in succeeding years.

Different modes of transmission are predominant in different regions. Almost half (49%) of the MSM ever reported were from NCR; 99% of the IDU were from Region 7; and 45% of females who engaged in transactional sex were from Region 3.

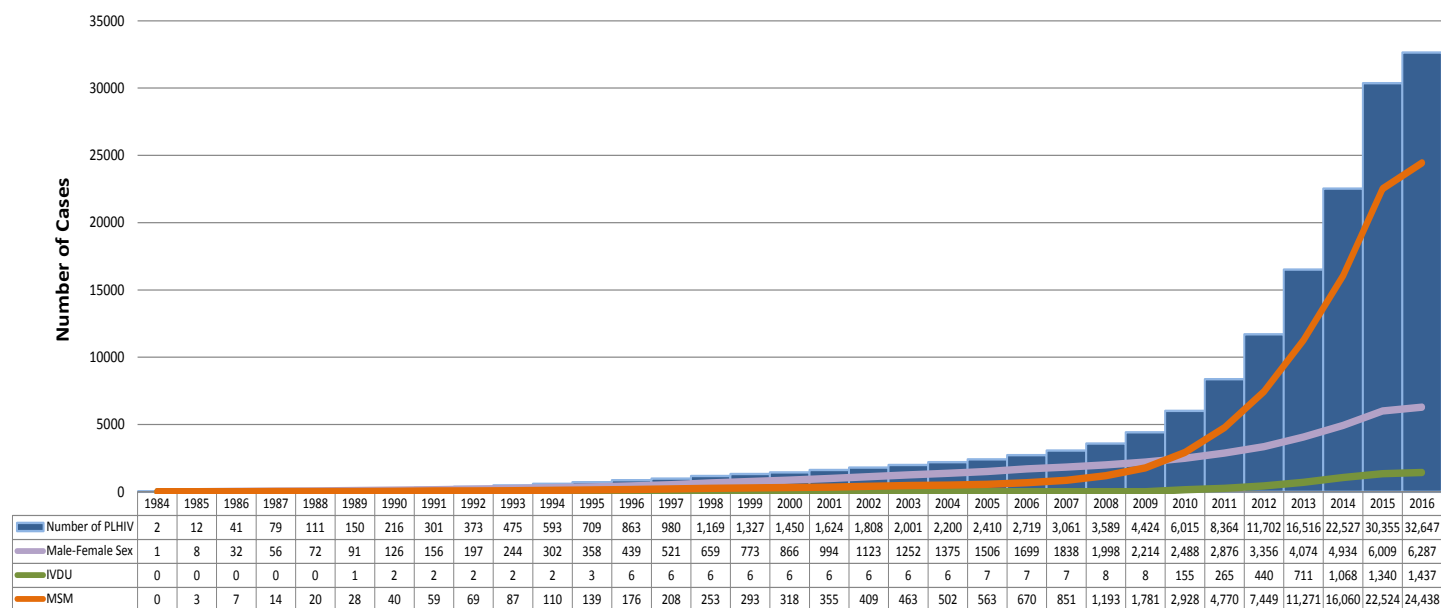
Modes of Transmission (MOT)

From January 1984 to March 2016, MSM was the predominant (24,438 or 81%) mode of transmission among males, followed by male-female sex (4,006 or 13%), and sharing of infected needles (1,350 or 4%) [Table 3]. More than half (13,120 or 54%) of cases among MSM belong to the 25-34 year age group while 7,214 (30%) were youth 15-24 years old. Among females, male-female sex was the most common MOT (2,281 or 91%) followed by sharing of infected needles (87 or 3%). A total of 81 children (less than 10 years old) and 6 adolescents were reported to have acquired HIV through mother-to-child transmission (Table 3).

From 1984 to 2009, the predominant mode of transmission was male-female sex. Beginning 2010, the trend shifted to male-male sex as the predominant MOT and continually increased since then. From January 2011 to March 2016, 85% (21,510) of new infections through sexual contact were among MSM.

From 1984 to 2009, transmission through sharing of infected needles

Figure 7. Cumulative Number of HIV Transmission by Year, January 1984-March 2016 (N=32,647)



REPORT ON SPECIAL POPULATIONS

Youth (15-24 years old)

In March 2016, 204 (28%) cases were among youth aged 15-24 years. Most (96%) were male. Ninety-nine percent (203) were infected through sexual contact (17 male-female sex, 110 male-male sex, 76 sex with both males & females) and 1 (<1%) through needle sharing among IDU.

From January 1984–March 2016, 8,738 (27%) of the reported cases were 15-24 years old. Eighty-six percent (7,525) of all the youth were reported from 2011 to 2016. From 1984 to 2002, more than half of the cases among the youth were females (179 or 71%). However, in 2003, there was an equal number of males and females reported. Since then, the trend reversed to male predominance. Ninety-five percent (8,293) were infected through sexual contact (1,079 male-female sex, 4,511 male-male sex, 2,703 sex with both males & females); and 385 were infected through sharing of infected needles among IDU.

Note: From January 1984–March 2016, 60 did not report mode of transmission

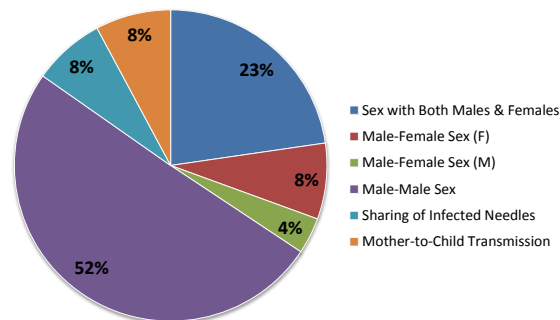
REPORT ON SPECIAL POPULATIONS (continuation)

Children (<10 years old) and Adolescents (10-19 years old)

In March 2016, 35 adolescents aged 17-19 years were reported to HARP, while one child was infected through mother-to-child transmission. All adolescents were infected through sexual contact (4 male-female sex, 21 male-male sex, 10 sex with both males & females).

From January 1984 to March 2016, 1,125 (3%) of the reported cases were 19 years old and below. Of these, 84 (7%) were children. Eighty-three percent (930) of these children and adolescents were reported from 2011-2016. Eighty-one children were infected through mother-to-child transmission, 1 through blood transfusion and 2 had no specified MOT. Among the adolescents, 941 (90%) were male. Majority (90%) were infected through sexual contact (130 male-female sex, 562 male-male sex, 253 sex with both males & females), 83 (8%) were infected through sharing of infected needles and 6 (1%) through mother-to-child transmission (Figure 8).

Figure 8. Modes of Transmission Among Children and Adolescents, Jan 1984– Mar 2016 (N=1,125)



Note: 9 with no MOT reported

Overseas Filipino Workers (OFW)

Forty-eight OFWs were reported to the HARP in March 2016, comprising 7% of the total newly diagnosed cases for the month (Figure 9). Ninety-four percent (45) were male. Forty-seven were infected through sexual contact (11 male-female sex, 19 male-male sex, 17 sex with both males & females) while 1 (2%) was infected through sharing of infected needles [Figure 10]. The ages of male OFWs ranged from 21 years-52 years (median: 30 years) and 69% belonged to the 25-34 year age group. Among the female OFWs, the ages were 27 years-35 years (median: 33 years) and 2 were in the 25-34 year age group.

From January 1984 to March 2016, out of the 32,647 cases, 4,117 (13%) were HIV positive OFWs. Of these, 3,451 (84%) were male. More than half (2,268) were MSM (1,268 male-male sex and 1,000 sex with both males & females). The ages of male OFWs ranged from 16 years-80 years (median: 33 years). Among female OFWs, ages ranged from 20 years-73 years (median: 34 years old).

Figure 9. Number of Reported OFW diagnosed with HIV, Jan 1984–Mar 2016 (N=4,117)

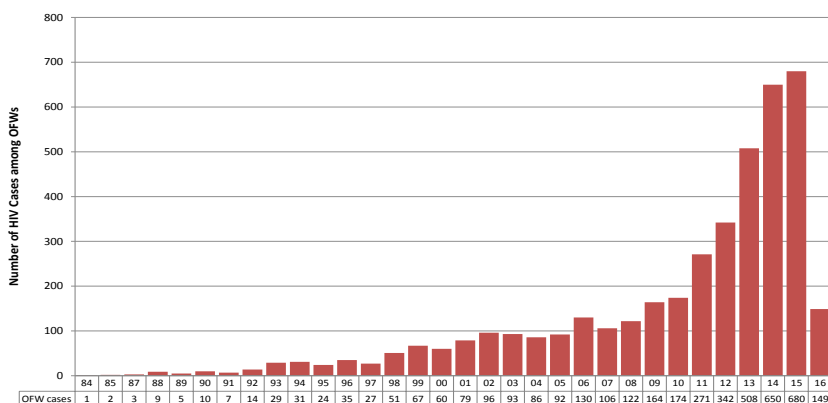
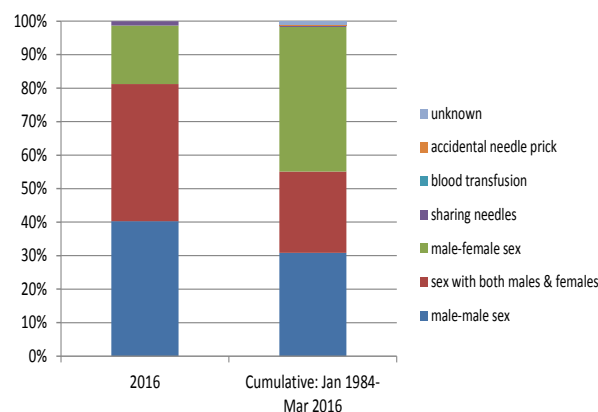


Figure 10. Modes of Transmission among OFW, Jan 1984–Mar 2016



People who Engage in Transactional Sex

People who engage in transactional sex are those who report that they pay for sex, regularly accept payment for sex or do both.

In March 2016, 12% (90) of the reported cases engaged in transactional sex. Most (96%) were male (Table 4) whose ages ranged from 18 years-54 years (median: 28 years) while 4 were female whose ages ranged from 23 years-34 years (median: 25 years). Forty percent (35) of males who engaged in transactional sex were the ones who paid for sex while 2 of the females engaged in both.

A total of 2,787 cases reported in HARP from December 2012 to March 2016 were people who engaged in transactional sex. Ninety-six percent (2,666) were male. Of the 2,787 cases, 1,506 (54%) paid for sex, 832 (30%) accepted payment for sex, and 449 (16%) engaged in both.

Table 4. HIV Cases Among People who Engage in Transactional Sex

Type of Transactional Sex	March 2016 (N=90)	Jan-Mar 2016 (N=250)	Cumulative Dec 2012-Mar 2016 (N=2,787)
Accepted payment for sex only:	38 (42%)	87 (35%)	832 (30%)
Male	36	82	766
Female	2	5	66
Age Range (Median) in Years	18-37 (26)	16-50 (26)	15-67 (26)
Paid for sex only:	35 (39%)	111 (44%)	1,506 (54%)
Male	35	110	1,496
Female	0	1	10
Age Range (Median) in Years	25-54 (33)	20-56 (32)	16-79 (31)
Engaged in both:	17 (19%)	52 (21%)	449 (16%)
Male	15	44	404
Female	2	8	45
Age Range (Median) in Years	23-43 (28)	16-51 (27)	16-59 (28)

Note: Inclusion of transactional sex in the HARP database was initiated in December 2012

DEATHS AMONG PEOPLE WITH HIV

The Department of Health (DOH) established a separate reporting mechanism for deaths in 2012. Prior to this, deaths were infrequently reported to the HIV/AIDS Registry. It is likely that the number reflected here is an underestimate of the total number of deaths among people with HIV in the Philippines.

For the month of March 2016, there were 26 reported deaths. Ninety two percent (24) were male while 78% (2) were female (Table 5). Fifteen (58%) of the reported deaths belong to the 25-34 year age group, 8 were in the 35-49 year age group, 2 were youth aged 15-24 years old and 1 belongs to the 50 years & older age group. All were infected through sexual contact (4 male-female sex, 14 male-male sex, 8 sex with both males & females). [Figure 11].

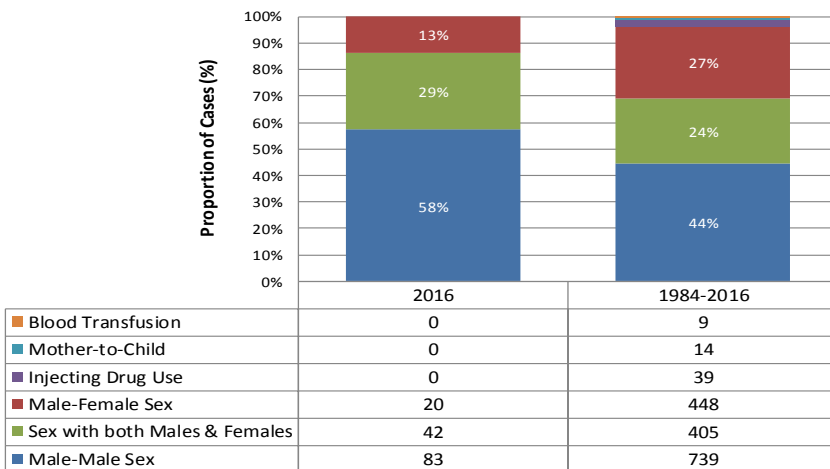
A total of 1,675 deaths were reported from January 1984 to March 2016. Eighty-seven percent (1,454) were male (Table 5). Of the reported deaths. Almost half (784 or 47%) belong to 25-34 year age group, 505 (30%) were in 35-49 year age group, while 225 (14%) were youth aged 15-24 years old. Sexual contact (95%) was the most common mode of HIV transmission (448 male-female sex, 739 male-male sex, 405 sex with both males & females). There were 39 reported deaths among IDU (Figure 11).

Table 5. Demographic data of reported deaths among PHIV

Demographic Data	March 2016	Jan-Mar 2016	Cumulative* Jan 1984- Mar 2016
Total Reported Deaths	26*	145	1,675
Male	24	137	1,454
Female	2	8	221
Less than 15 y/o	0	0	14
15-24 y/o	2	27	225
25-34 y/o	15	75	784
35-49 y/o	8	37	505
50 y/o & above	1	6	144

*Note: This includes deaths from Jan-Feb 2016 reported in March 2016.

Figure 11. Modes of transmission of reported deaths among PHIV**



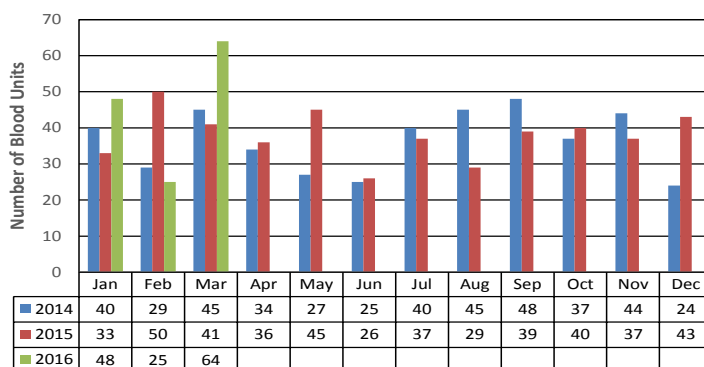
**Note: No mode of transmission reported for 21 cases

BLOOD UNITS CONFIRMED FOR HIV

In March 2016, 64 blood units were confirmed positive for HIV by Research Institute for Tropical Medicine. There is no available data yet on the total number of blood units donated.

These were confirmed positive blood units, not blood donors. One donor can donate more than one blood unit. HIV positive blood donors are not in the HIV & AIDS Registry unless they underwent voluntary counseling and testing.

Figure 12. Number of Confirmed HIV Positive Blood Units by Month (2014-2016)



National HIV/AIDS & STI Surveillance and Strategic Information Unit

NHSSS
Epidemiology Bureau,
Department of Health, 2/F Bldg. 19,
San Lazaro Compound,
Sta. Cruz, Manila 1003 Philippines
Tel: +632 651-7800 local 2926, 2952
Fax: +632 495-0513
Email: HIVepicenter@gmail.com
Website: http://www.doh.gov.ph

HIV/AIDS & ART Registry of the Philippines (HARP) Report Editorial Team

- Arielle G. Aranzangel, RN**
HIV Surveillance Assistant
- Bettina Kaye D. Castañeda, RN**
Asst. HIV Surveillance Officer
- Krizele Anne G. Ronquillo, RSW**
HIV Surveillance Officer
- Patricia Isabel G. Amillo, RN, MSPH**
HIV Surveillance Officer
- Ma. Justina S. Zapanta, RN, PHSAE**
HIV Surveillance Officer
- Noel S. Palaypayon, RN, MGM-ESP**
Deputy Manager, HIV Unit
- Genesis May J. Samonte, MD, MSc, PHSAE**
Manager, HIV Unit
- Agnes J. Segarra, MD, PHSAE**
Chief, SRAE Division, Epidemiology Bureau
- Irma L. Asuncion, MD, MHA, CESCO IV**
Director IV, Epidemiology Bureau

HIV/AIDS & ART Registry of the Philippines (HARP)

The Philippine HIV/AIDS & ART Registry of the Philippines (HARP) is the official record of the total number of laboratory-confirmed HIV positive individuals, AIDS cases and deaths, and HIV positive blood units in the Philippines. All individuals in the registry are confirmed by the STD/AIDS Cooperative Central Laboratory (SACCL) at San Lazaro Hospital. While all blood units are confirmed by the Research Institute for Tropical Medicine (RITM). Both are National Reference Laboratories (NRL) of the Department of Health (DOH).

Mandatory HIV testing is unlawful in the Philippines (RA 8504). The process of reporting to the HARP is as follows: All blood samples from accredited HIV testing facilities that are screened HIV reactive are sent to SACCL (individuals) or RITM (blood units) for confirmation. Confirmed HIV positive individuals and blood units are reported to the DOH-Epidemiology Bureau (EB), and are recorded in the HARP.

The HARP is a passive surveillance system. Except for HIV confirmation by the NRL, all other data submitted to the HARP are secondary and cannot be verified. An example would be an individual's reported place of residence. The HARP is unable to determine if this reported address is where the person got infected, or where the person lived after being infected, or where the person is presently living, or whether the address is valid. This limitation has major implications to data interpretation. Thus, readers are cautioned to carefully weigh the data and consider other sources of information prior to arriving at conclusions.

LIST OF TREATMENT HUBS AND SATELLITES*

Regions	Treatment Hubs	Address	Contact Information
1	Ilocos Training and Regional Medical Center	Parian, San Fernando City, La Union	(072) 607-6418 / (072) 607-6422 Loc. 153 (Physician)
2	Cagayan Valley Medical Center	Dalan na Pagayaya, Carig Sur, Tuguegarao, Cagayan	(078) 304-1410 / (078) 304-1810
3	Jose B. Lingad Memorial Regional Hospital / Bahay Lingad	Brgy. San Dolores, San Fernando, Pampanga	(045) 435-6801 / 0933-6215028
	James L. Gordon Memorial Hospital / L.E.A.D. Shelter	#1 New Asinan, Olongapo City	(047) 602-3436
4B	Ospital ng Palawan	220 Malvas St. Puerto Prinsesa City	0917-5777518 / 0927-2925527 / 0926-6724770
5	Bicol Regional Training and Teaching Hospital	Rizal St., Legazpi City	(052) 483-0014 loc. 4277
6	Western Visayas Medical Center	Q. Abeto St., Mandurriao, Iloilo City	(033) 321-1631
7	Vicente Sotto Memorial Medical Center	B. Rodriguez St., Cebu City	(032) 254-4155 / 0933-1336163
	Gov. Celestino Gallares Memorial Hospital	M. Parras St., Tagbilaran City	(038) 411-4868
8	Eastern Visayas Regional Medical Center	Magsaysay Boulevard, Tacloban City	0919-4893367 / 0927-3120143
9	Zamboanga City Medical Center	Dr. Evangelista St., Sta. Catalina, Zamboanga City	0917-7187913 / 0905-3170753 / 0977-8092277
10	Northern Mindanao Medical Center	Provincial Capitol Compound Cagayan de Oro City	(082) 856-4147
11	Southern Philippines Medical Center	J. P. Laurel St., Bajada, Davao City	(082) 227-2731 loc. 5041 / (082) 321-7061
CAR	Baguio General Hospital and Medical Center	Gov. Pack Rd., Baguio City	(074) 442-4216 loc 381
CARAGA	CARAGA Regional Hospital	Rizal St. National Road, Surigao City	(086) 826-0568 / 0917-3068186
	Butuan Medical Center	Km 5 Baan, Butuan City	
NCR	San Lazaro Hospital	Quiricada St., Sta. Cruz, Manila	(02) 732-3106 loc. 215 / 212 / 115 / (02) 310-3128
	Philippine General Hospital	Taft Ave., Manila	(02) 554-8400 loc. 3249
	Research Institute for Tropical Medicine	Filinvest Corporate City, Alabang, Muntinlupa City	(02) 807-2628 loc. 332
	The Medical City / I-REACT Clinic	Ortigas Ave., Pasig City	(02) 958-1000 loc. 6765
	Makati Medical Center	#2 Amorsolo St., Legaspi Village, Makati City	(02) 888-8999 loc. 2134 (CTTM) / 0917-8014314
NIR	Corazon Locsin Montelibano Memorial Regional Hospital	HACT office 2nd flr. OPD bldg. CLMMRH Cor. Burgos, Lacson St. Bacolod City	(034) 707-2280 / 0912-3651864

Regions	Satellite Treatment Hubs	Address	Contact Information
6	Dr. Rafael Tumbokon Memorial Hospital—Kalibo, Aklan	Mabini St, Kalibo, Aklan	(036) 268-6299
7	Cebu Social Hygiene Clinic	General Maxilom Ave., Ext., Carreta, Cebu City	(032) 233-0987
12	General Santos Social Hygiene Clinic	City Health Office, Fernandez St., Lagao, General Santos City	(083) 552-2805
NCR	Klinika Bernardo—Quezon City	Ermin Garcia St., Brgy. Pinagkaisahan, Quezon City	0932-4033412
	Manila Social Hygiene Clinic	208 Quiricada St., Sta. Cruz, Manila	(02) 711-6942
	Marikina City Satellite Treatment Hub	Shoe Ave., Sto. Niño, Marikina City	(02) 942-0831

OTHER FACILITIES PROVIDING HIV CARE

Regions	Facility	Address	Contact Information
3	Bataan General Hospital	Manahan St. Brgy Tenejero, Balanga City	(047) 237-1275 loc. 102/103
4A	Antipolo Social Hygiene Clinic	M. Santos St., Brgy. San Roque, Antipolo City	(02) 696-4097
	Dasmariñas Social Hygiene Clinic	Zone 2, Manggubat St., City Health Office I, Dasmariñas, Cavite	(046) 416-0279 / 0917-7902168
	Laguna Medical Center	J. De Leon St, Santa Cruz, Laguna	(049) 543-3351
	Batangas Medical Center	Kumintang Ibaba, Batangas City	(043) 7230911
NCR	Las Piñas Social Hygiene Clinic	Barrio Hall, Alabang-Zapote Road, Almansa, Las Piñas City	(02) 800-6406
	Mandaluyong Social Hygiene Clinic	20 M. Lerma St. cor. Vicencio St, Mandaluyong City	(02) 546-7799
	Muntinlupa Social Hygiene Clinic	2nd Floor, Putatan Health Center, National Road, Putatan, Muntinlupa City	(02) 834-5997
	Pasig Social Hygiene Clinic	Rm. 5, 5/F City Hall Bldg., Caruncho Ave., San Nicolas, Pasig City	(02) 643-1111 loc. 393
	RITM Satellite Clinic - Mandaluyong (ANGLO)	715-A 3/F Anglo Bldg., rm. 5, Shaw Blvd., Mandaluyong City	0915-3665683
	Taguig Social Hygiene Clinic	3/F Goldilocks Bldg., Gen. Luna St., Taguig City	
	Valenzuela Social Hygiene Clinic	Valenzuela City Hall, Poblacion II, Malinta, Valenzuela City	(02) 352-6000

*as per Department Memorandum No. 2015-0139: Updated List of DOH-Designated Treatment Hubs and Satellite Treatment Hubs