Background CD4 count is a parameter of clinical significance in the management of HIV infection, especially in staging and treatment. There is no parameter that predicts the time of contracting the infection. This study aims to investigate the average time between testing positive for HIV screening and time of initial infection based on rate of decay in CD4 count among PLHIV MSM and to analyze its social implications.

Methods A total of 2491 MSMs who tested HIV positive were enrolled. The mean CD4 values were determined by age groups. The mean interval between between infection and seropositivity was estimated based on the average annual CD4 decay rate. Data analysis was performed using SPSS.

Results Upon diagnosis, the mean CD4 values were 372 cells/μl for those aged 20 and below, which was found to be significantly higher than 323 cells/μl for 21–30 group (p=0.007), 284 cells/μl for 31–40 group (p=0.0000), 279 cells/μl for 41–50 group (p=0.015). Thus, the significant difference among age groups and WHO CD4 staging (p<0.000). The average time between infection and testing is 5.81 years among ages 20 and below and 6.49 among 20–30 age group, estimating an average infection age of 13.2 and 19.5, respectively, implicating that 73.5% of the sample likely had been infected 20 years and below.

Conclusion Being diagnosed with a CD4 count of 200–499 cells/μl is common among all age groups. It is consistent with the count estimated from the average time of infection among all age groups. Three quarters of the patients were likely to have been infected below 20 years old. It is consistent with the 8.1 person-years incidence density among 21 years and below in the 2012–2016 data from the same facility. This emphasizes the need to empower the youth’s and healthcare providers’ positivity towards sexual health through legislation, education, and awareness.

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