

EMCDDA-update HIV/HCV among people who inject drugs: situation and response

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EU Think Tank HIV/AIDS: 24-25 November 2015, Luxembourg

Latest European overview

- Multi-indicator based analysis
- Update on HIV, hepatitis and other injecting-related harms in Europe
- Stimulant injecting and new risk behaviours
- Prisons as risk settings
- Trends in harm reduction funding

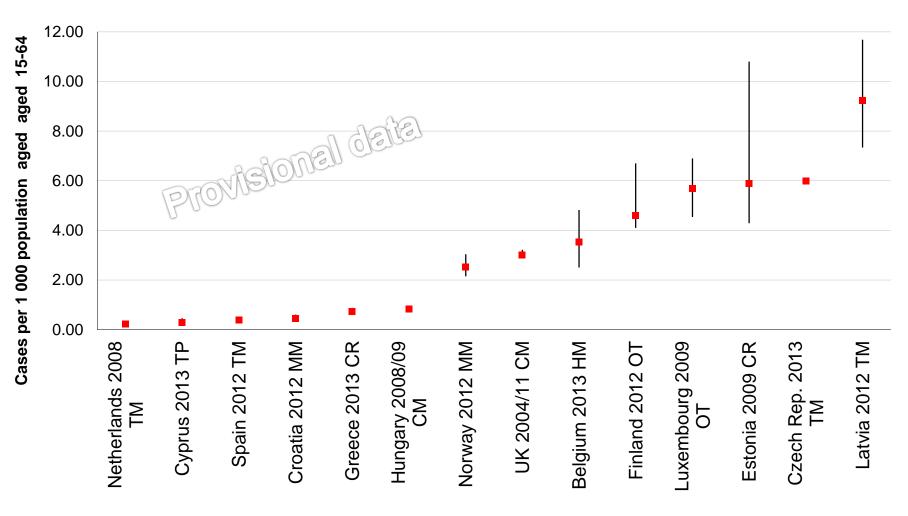
Released in 09/2015





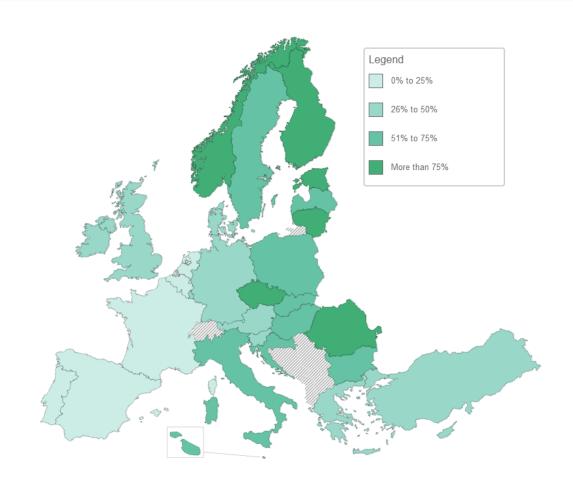
Estimates of the prevalence of injecting drug use

(rate per 1 000 population aged 15-64), 2007-14 data collection (last study available)



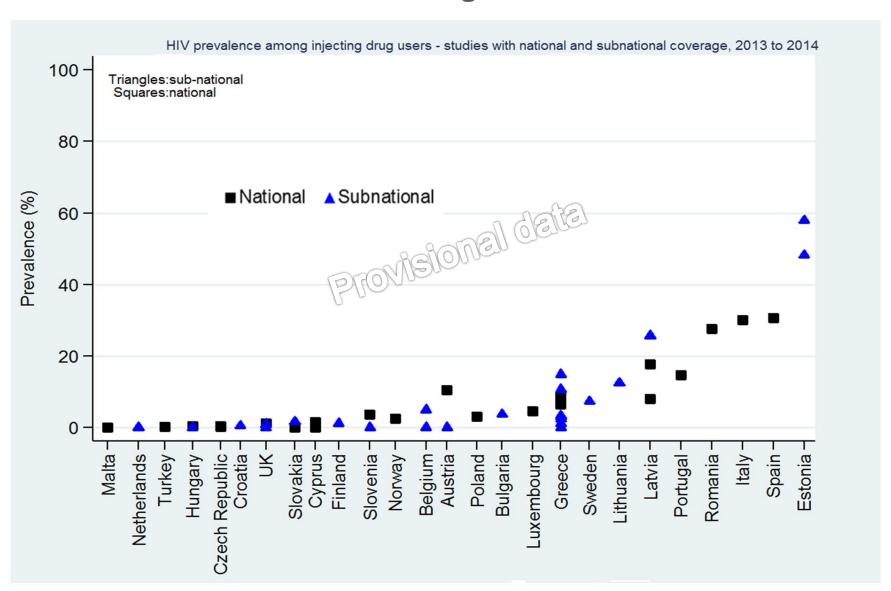


Prevalence of injection among clients entering treatment with opioid as their primary drug





HIV prevalence among injecting drug users – studies with national and subnational coverage 2013-2014

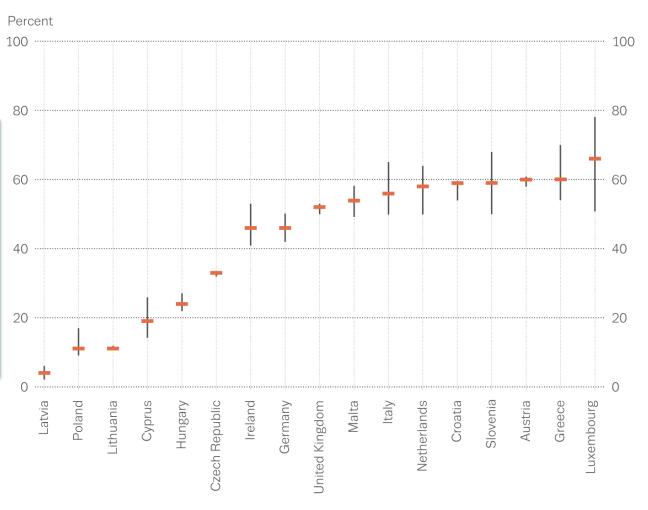


Country profiles: Health and social responses to drug use

Treatment profiles Harm reduction profiles Countries: health and social responses: Interactive maps Harm reduction Social reintegration Prison settings Timeline Czech Republic Adult population: Opioid substitution clients Syringe provision (thousands) 7 188 211 10 000 10 000 Problem opioid users (POU): 10 700 5 000 5 000 Injecting drug users (IDU): 42 700 Drug-induced deaths: Geographical distribution Highly targeted responses of NSP (%) Heroin-assisted treatment No Peer Naloxone No 50 100 Drug consumption rooms No See more data in the 'Harm reduction profile' for Czech Republic »

Significant level of drug treatment provision

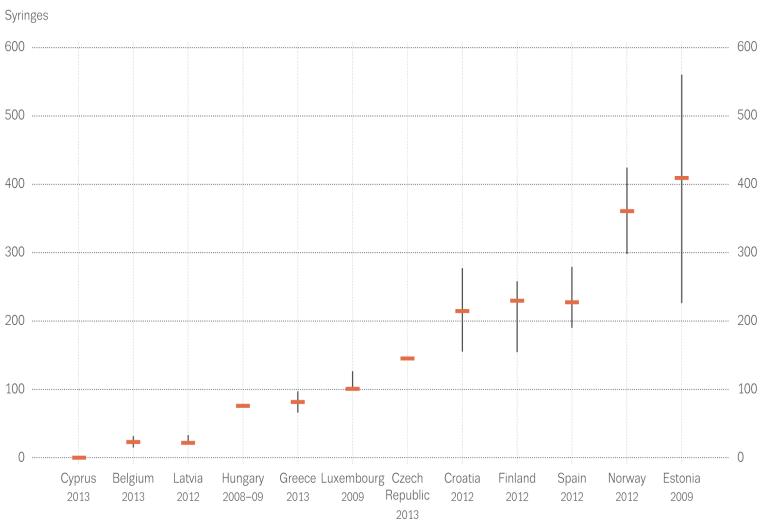
More than half of the 1,3 million problem opioid users are in opioid substitution treatment





NB: Data displayed as point estimates and uncertainty intervals.

Variable levels of syringe provision





Multi-indicator risk assessment

HIV situation among PWID:

- new case reports attributed to drug injecting, trends
- HIV prevalence and trends

Risk indicators:

High or increasing HCV prevalence
High or increasing injecting drug use
Market changes, e.g. appearance of new psychoactive substances/switching, new risk behaviours

Intervention coverage:

OST, syringe provision

Increasing level of stimulant injecting

Risk assessments NPS

Stimulants, such as cathinones leading to increased frequency of injecting; increased infection risks, sexual transmission...

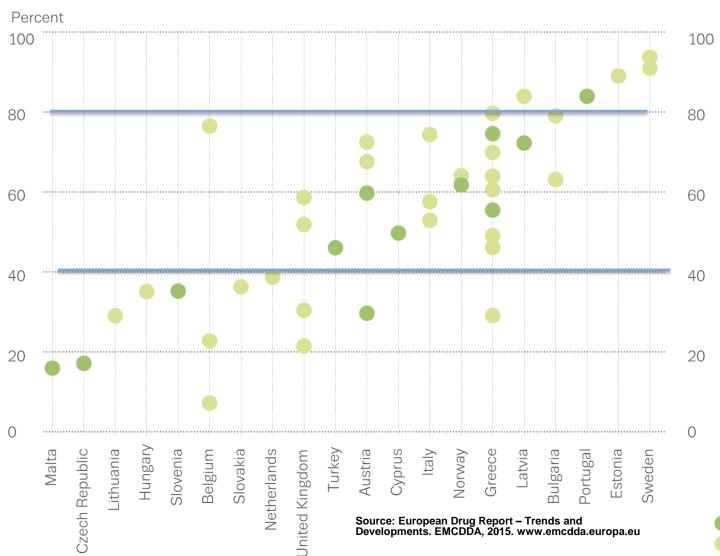
- in HU, majority of injectors use new psychoactive substances; HCV prevalence rose to 74%, syringe sharing 48%; sharing other equipment 71%;
- in Dublin, increase of HIV linked to synthetic cathinone injecting traditional heroin users unstable housing;
- increases in number of NSP clients in Wales, who are primary users of new psychoactive substances, increase physical consequences, risk behaviour.



transmission risk and prevention coverage in 30 European countries

Country	HIV-related indicators		Indicators of transmission risk		Intervention coverage indicators		
	HIV case trend (')	HIV prevalence trend	HCV prevalence increasing or high HCV prevalence	Injecting drug use prevalence increasing or high	Problem opioid users in substitution treatment (%) (*)	Syringes distributed by specialised programmes (per injecting drug user per year) (**)	
Austria					60		
Belgium						23	
Bulgaria							
Croatia					41	215	
yprus					19	0	
Zech Republic					34	145	
lenmark							
stonia						407	
inland						226	
rance					80		
iermany					46		
ireece					62	81	
lungary					24	76	
reland					41		
taly					56		
atvia					4	27	
ithuania					11		
uxembourg					65	101	
Malta					54		
letherlands					58		
lorway					>50	359	
oland					11		
ortugal							
tomania							
ilovakla					8		
illovenia					47		
ipaln					>50	226	
iweden							
Turkey							
Jnited Kingdom					45		
	None of the following risk factors identified: increase in HIV case reports or prevalence of HIV or HCV; increase in transmission risk; low intervention coverage.						
	Risk factors possibly present: HIV or HCV prevalence or transmission risk showing increase at subnational level consistent but non-significant increase at national level.					tional level or	
		Risk factor present: significant increase in HIV case reports or HIV or HCV prevalence; increase in transmission risk; low intervention coverage. Source: EMCDDA (2015) Drug-related infectious diseases in Europe. Up					
	Information not av	Information not available to ECDC or the EMCDDA. from the EMCDDA expert network. Rapid Communication, September 2					

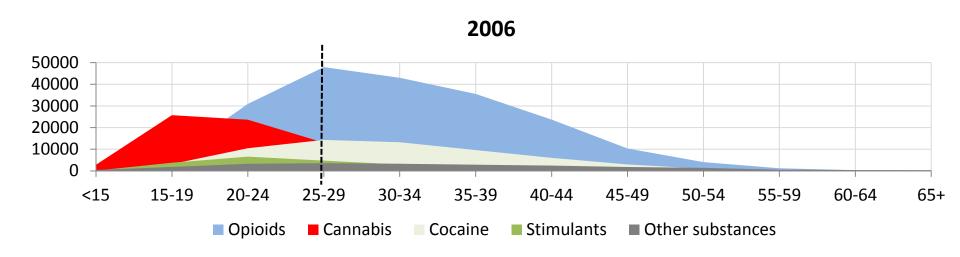
HCV antibody prevalence among PWID 2012-13



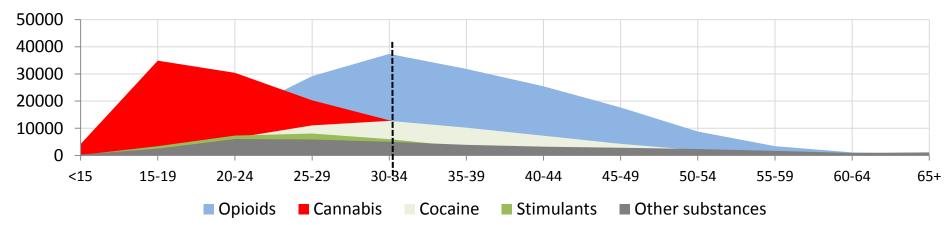


Samples with national Samples with sub-national

Trends in age structure of clients entering treatment by primary drug

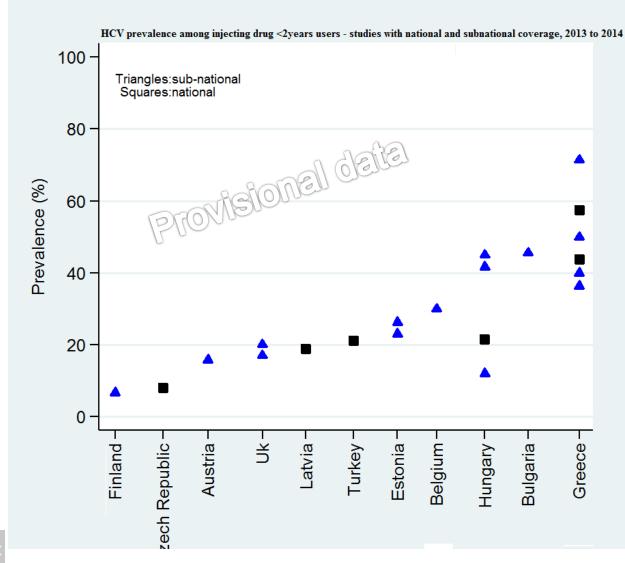








Recent/on-going transmission: HCV antibody prevalence amongst recent PWID (<2 yrs)



Indication of
likely recent
contamination
and on going
transmission among
PWID



Hepatitis C among PWID: issues to be addressed

PWID likely to be a major if not the main risk group among those infected with HCV in Europe, but:

- Low level of testing (~ 50%),
- Many unaware of infection, delaying entry into effective treatment;
- Medication price high;
- Referral and treatment pathways unclear;
- Need to improve staff training & collaboration between clinical/hepatology and addiction services;
- Reinfection risk.

EMCDDA Insights :HCV treatment for PWID (early 2016)



Outlook 2016-2018

Mainstay: Multi-indicator based monitoring, trend analyses, Knowledge exchange and Best Practice.

- Prevalence of drug use, Early Warning System NPS,
- Prevalence of injecting, HIV, hepatitis, DRD
- Treatment systems
- Coverage of key-interventions
- Threat assessments
- + Improving timeliness of information: rapid information assessment tool "Trendspotter" (eg. Responses to NPS)
- + Improving quality of information: European Facility Survey Questionnaire
- + Upon request: support services for relevant European policy and technical activities [JA's; Dublin Reporting].





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