HIV and co-infections in people who inject drugs

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Outline

- Epidemiology
- Response
- Gaps, needs, opportunities
Epidemiology of HIV

- 34 million people living with HIV
- HIV incidence peaked in late 1990s
  - Global HIV prevalence stable
  - Deaths declined in last years
  - Great heterogeneity, concentrated epidemics

David Wilson, World Bank
Prevalence of Injecting Drug Use (IDU)

UN Reference Group on HIV and Injecting Drug Use, 2008

148 countries, 16 million IDU
3-4 million IDU living with HIV

Mathers et al. 2008.
Tuberculosis

- 10-30 times higher in PWID
- 10-50 times higher in prisoners
- HIV increases risk of developing TB

1 in 3 PWID with TB co-infected with HIV
2 in 3 PWID with TB co-infected with HCV
High estimated rates of MDR-TB where HIV is driven by injecting drug use.
Viral hepatitis B and C

- 34 million persons worldwide have HIV
- 240 million persons worldwide have chronic HBV infection
  - 6-26% of all people with HIV co-infected with HBV
- 170 million persons worldwide have chronic HCV infection
  - 25-30% with all people with HIV co-infected with HCV
  - 72-95% of PWID with HIV co-infected with HCV

~10 million PWID have HCV (77 countries)

- 80% in 12 countries
- 60-80% in 25 countries

~ 6.4 million PWID infected with HBV (59 countries)

~ 1.2 million PWID with chronic infection
  - > 10% in 10 countries
  - 5-10% in 21 countries

Harm reduction in context of HIV

- A comprehensive package of evidence based interventions that aims to reduce drug related harm
  - Emphasis on **public health** and **human rights**
  - Emphasis on public health indicators of harm, in particular HIV

- Scientific evidence has demonstrated that
  - Comprehensive programmes are **effective**
  - Epidemics can be **prevented**, slowed or **reversed**
Comprehensive package of interventions

1. Needle and syringe programmes
2. Opioid Substitution Therapy
3. Voluntary Counseling and Testing
4. Anti-retroviral treatment
5. STI prevention and treatment
6. Condom programming
7. Targeted Information, Education and Communication
8. Vaccination, diagnosis and treatment of viral hepatitis
9. Diagnosis and treatment of tuberculosis
The Economic and Social Council,

Recalling its resolution 2007/32 of 27 July 2007,

19. Recognizes the need for UNAIDS to significantly expand and strengthen its work with national governments ....... to address the gap in access to services for injecting drug users in all settings, including prisons; to develop comprehensive models of appropriate service delivery for injecting drug users; ............ including harm reduction programmes in relation to HIV as elaborated in the WHO/UNODC/UNAIDS: “Technical Guide for countries to set targets for Universal Access to HIV prevention, treatment and care for injecting drug users”, ........
NSP Coverage

Globally, 2 needles per person who injects drugs per month

- 82 countries have NSP
- 76 countries with IDU have no NSP
OST Coverage

For every 100 people who inject drugs, only 8 are receiving OST

- 74 countries have OST
- 87 countries with IDU have no OST
### Proportion of people who inject drugs receiving ART in low- and middle-income countries in the WHO European Region

<table>
<thead>
<tr>
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<th>2002</th>
<th>2005</th>
<th>2006</th>
<th>2010*</th>
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<tbody>
<tr>
<td><strong>Number of reporting countries among 26 low and middle income countries surveyed</strong></td>
<td>17</td>
<td>21</td>
<td>23</td>
<td>19</td>
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<td><strong>Cumulative reported HIV cases among people who inject drugs (% among cumulative reported HIV cases with a known transmission route)</strong></td>
<td>46 052 (71%)</td>
<td>221 849 (77%)</td>
<td>249 982 (77%)</td>
<td>185 565 (62%)</td>
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<td><strong>People who inject drugs receiving ART (% among the total reported people receiving ART with a known transmission route)</strong></td>
<td>130 (20%)</td>
<td>4670 (26%)</td>
<td>5275 (26%)</td>
<td>7646 (22%)</td>
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Where are we now

- Tools and guidelines for HIV and TB
  - soon also for hepatitis

- High level political endorsement
  - Still contentious

- Donor support
  - not enough resources
Next steps

- Improve access, coverage and quality of services for PWID
  - In particular NSP, OST, and ART
  - Integrated service delivery to address co-infections

- How
  - Commitment of Member States, continued advocacy
  - Strengthening of CSO involvement, activism
    - Meaningful involvement of PWID to create safe and accessible services
  - Collaboration and coordination between stakeholders
  - Financial and human resources
Time to act

- Address real needs of drug users
- Make services available, accessible and effective
- Remove access barriers

Focus on public health impact
Emphasis on human rights

http://www.who.int/hiv/topics/idu/en/index.html
Forthcoming WHO guidance on hepatitis

- Launch of WHO guidance for prevention in PWID in July 2012
  - The comprehensive package
  - HBV vaccination
  - Peer led interventions
  - Type of syringes

- Guidance on surveillance - 2012

- HCV treatment guidelines – 2013

- HIV management in people co-infected with HBV/HCV (WHO consolidated ART guidelines) – 2013