



European Monitoring Centre
for Drugs and Drug Addiction

ECDC and EMCDDA Guidance:

Prevention and control of infectious diseases among people who inject drugs

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Hepatitis C in injecting drug users in Europe

Reference:

EMCDDA Statistical Bulletin 2011 – DRID

Acknowledgements: Lucas Wiessing

Basic epidemiology



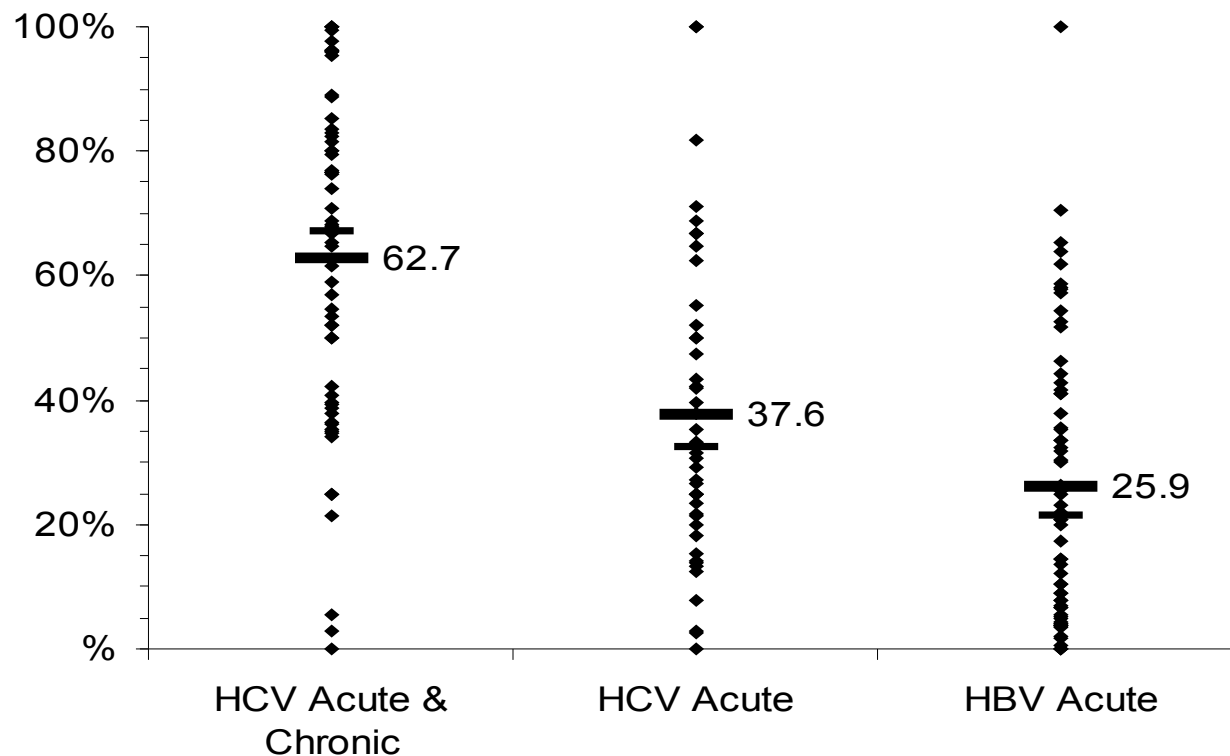
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Injecting drug users (IDUs) constitute a large (>40%) proportion of the notified cases of hepatitis C (and B) where risk factor information is available

Prevalence of serological markers is very high in this group, across Europe

% IDUs among HCV and HBV notifications with known risk factor information, EU 2004-09

% IDUs among HCV and HBV notifications with known risk factor information, EU 2004-2009



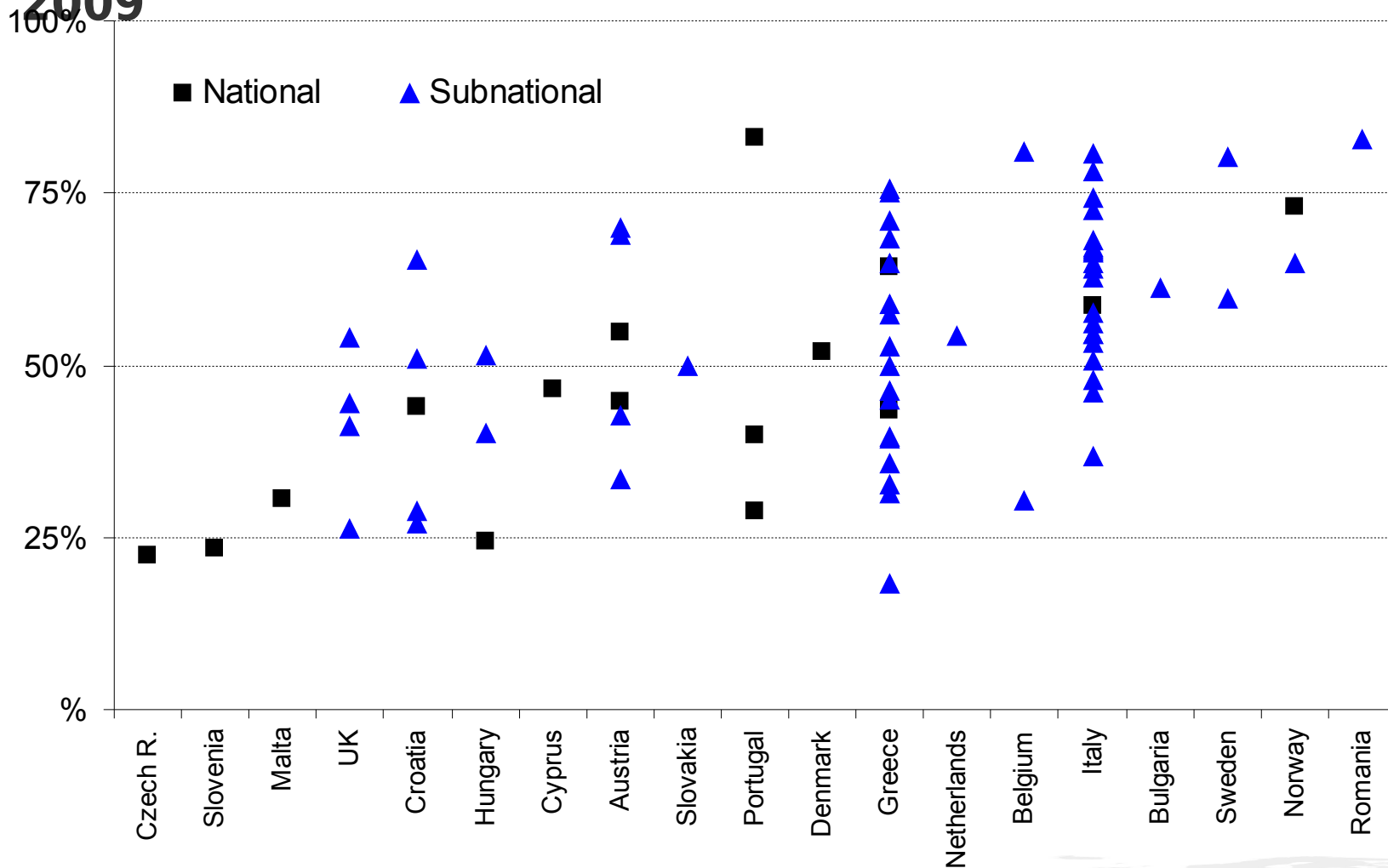
Average (larger bar) and median are shown, data from 19 countries (HCV), 16 countries (HBV)

Hepatitis C virus antibodies prevalence among injecting drug users in Europe, 2008-2009 or most recent data available

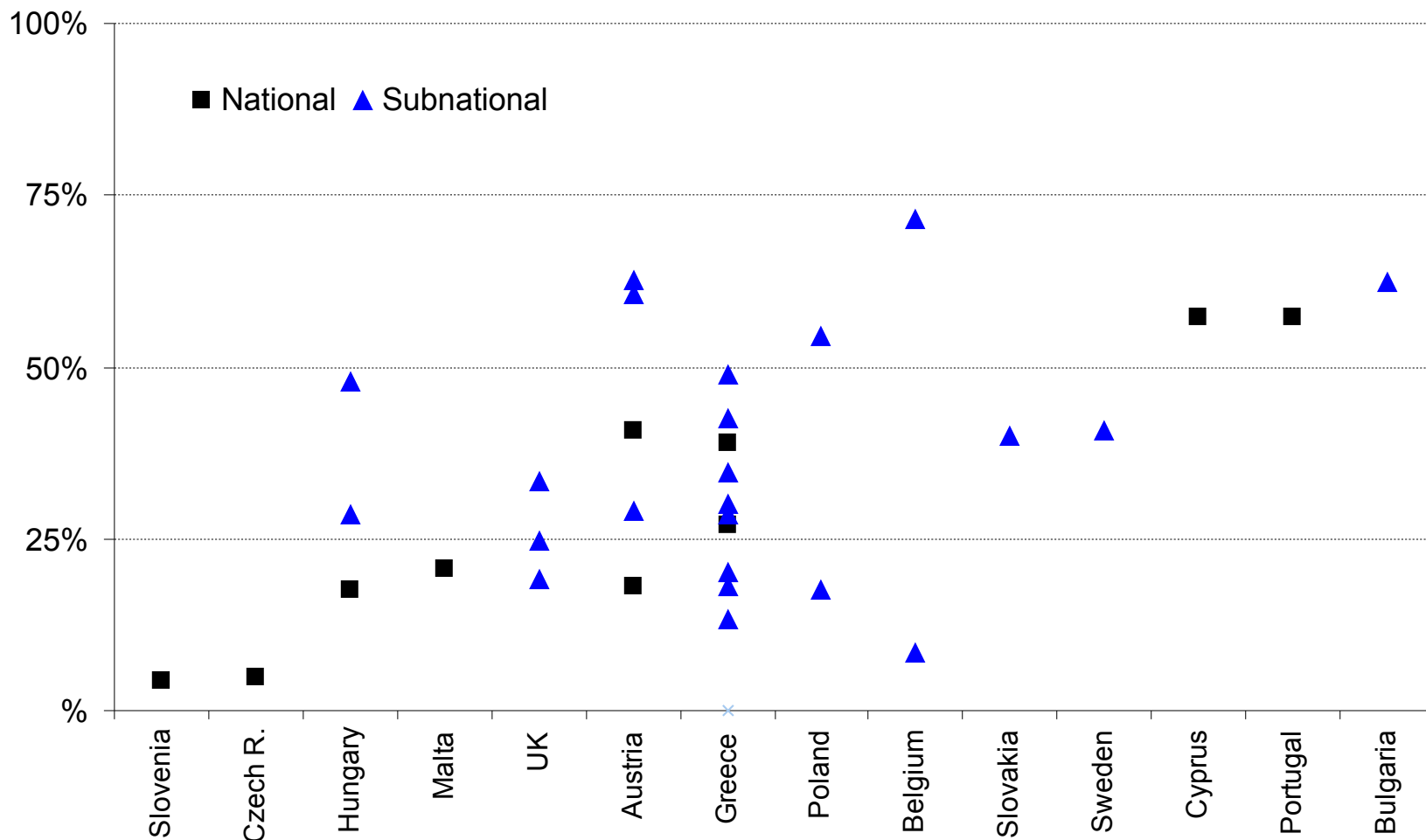
0 < 40%
40 < 60%
≥ 60%
unknown

Source: EMCDDA and Reitox National Focal Points (EU); IHRA, EHRN and WHO/Europe (other countries)
Colour indicates midpoint of national data, or if not available, of local data.

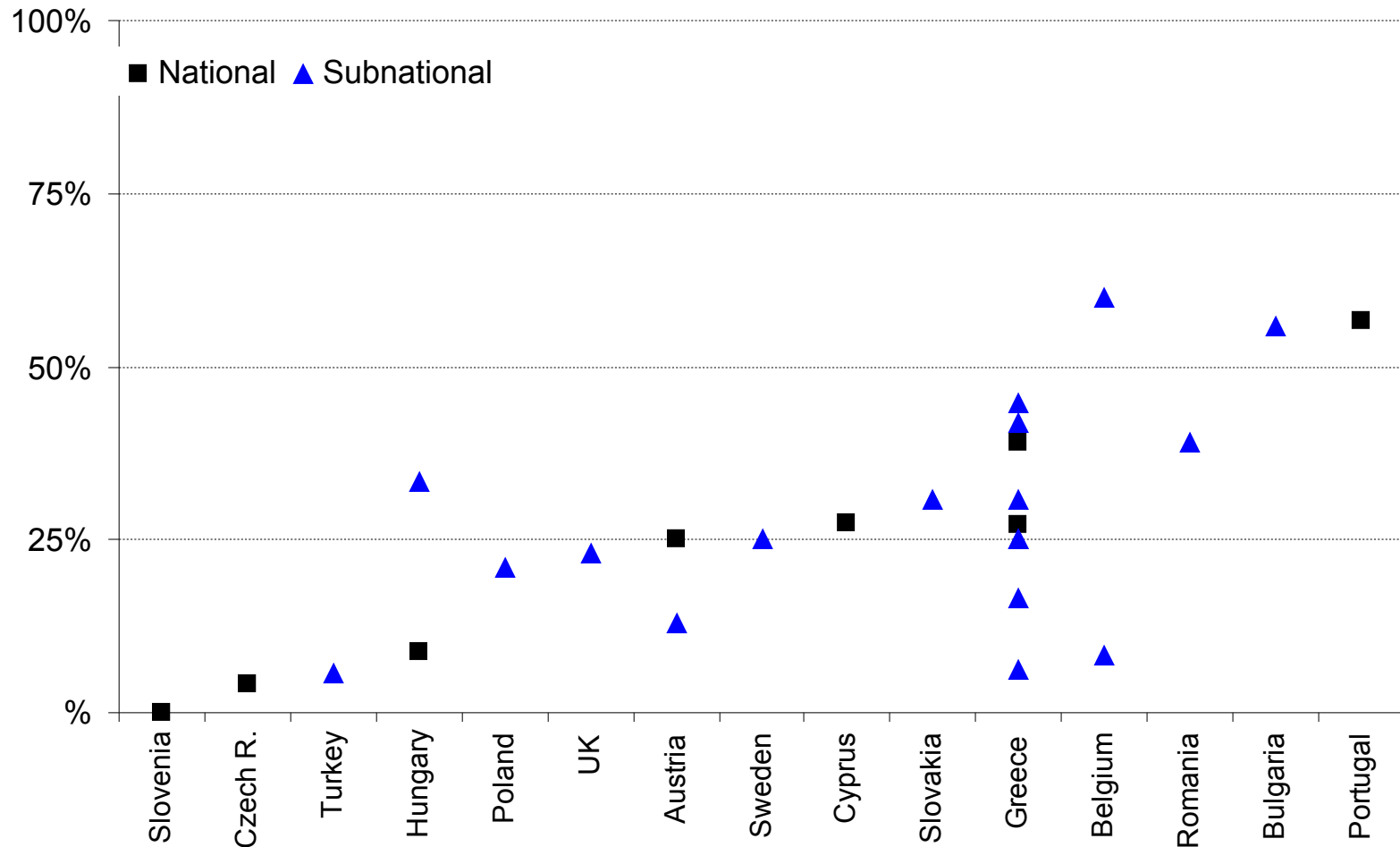
HCV antibody prevalence among injecting drug users - studies with national and subnational coverage 2008-2009



HCV prevalence in samples of young injecting drug users (under age 25), national & subnational studies 2008-09



HCV prevalence in samples of new injecting drug users (<2 years), national & subnational studies 2008-2009





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ECDC-EMCDDA Joint Guidance

Components of the Joint Guidance

- Comprehensive Guidance document
- Based on evidence and fully referenced (50 pages)
- Guidance “in brief”
- Condensed recommendations (8 pages)
- Two part evidence assessment
- Needle and syringe programmes and other interventions for preventing hepatitis C, HIV and injecting risk behaviour
- Drug treatment for preventing hepatitis C, HIV and injecting risk behaviour



Scope of the guidance



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- Inform development, monitoring and evaluation of national strategies and programmes to reduce and prevent infections among people who inject drugs
- Provide comprehensive overview of the best current knowledge in the field, expanding previous work to include combinations of key interventions
- Relies on a foundation of “core values” guiding a set of “practical principles of prevention and service provisions”
- Is in coherence with existing EU-wide policies in the field of drugs and infectious diseases

Complements and builds on existing guidance

ECDC Guidance on HIV Testing in the EU (2010)

EMCDDA Guidelines for testing HIV, viral hepatitis and other infections in injecting drug users (2010)

WHO, UNAIDS, UNODC global target setting guide for HIV prevention, treatment and care among injecting drug users (2009)



Assessing evidence for effectiveness of interventions



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- Comprehensive review of evidence using “review of reviews” methodology
- Assessed the evidence for the seven key interventions and combinations thereof
- Complemented by primary literature search for selected areas
- Supported by expert assessment for areas not covered by literature (Technical Advisory Group)
- Evidence for effectiveness assessed, graded and summarized

Service provision

Principles of service provision

- Engage
- Engage and promote participation
- Adopt a practical approach to the provision of services
- Refrain from ideological judgements.
- Maintain a realistic hierarchy of goals.

7 interventions

Seven key recommended interventions



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- **INJECTION EQUIPMENT**
- **VACCINATION**
- **DRUG DEPENDENCE TREATMENT**
- **TESTING**
- **INFECTIOUS DISEASE TREATMENT**
- **HEALTH PROMOTION**
- **TARGETED DELIVERY OF SERVICES**

Seven key recommended interventions



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- INJECTION EQUIPMENT
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- HEALTH PROMOTION
- TARGETED DELIVERY OF SERVICES

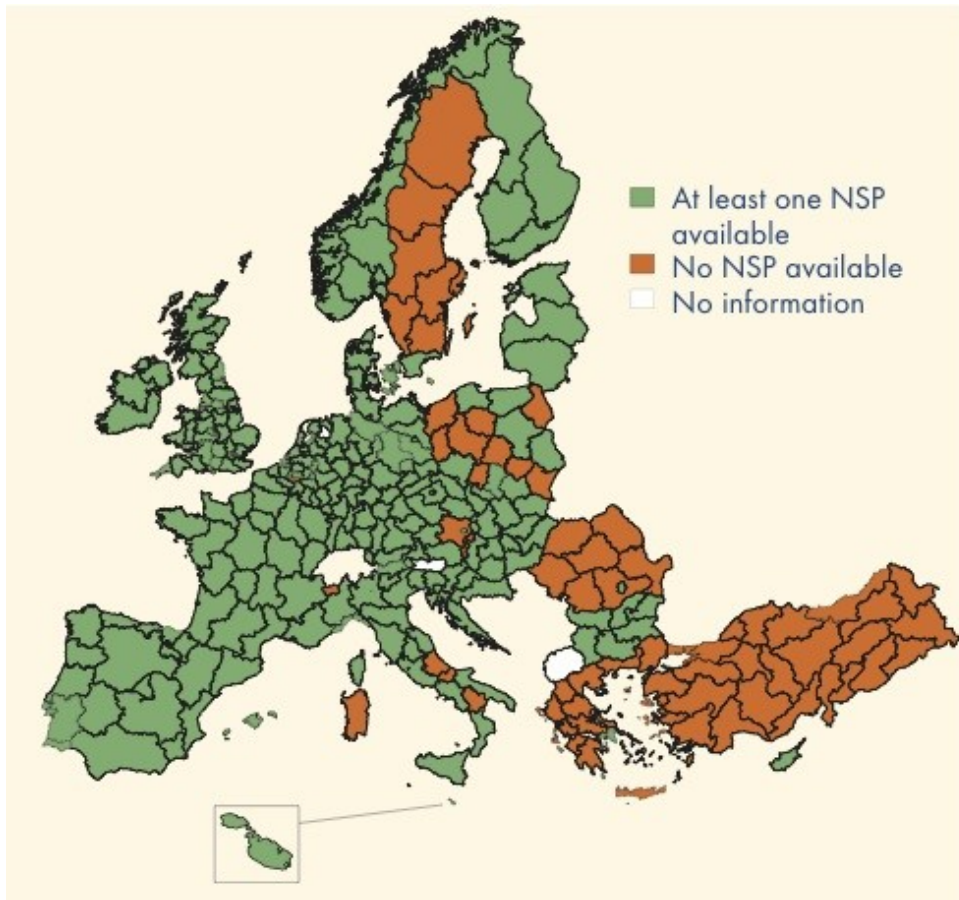
**COMBINE THESE KEY INTERVENTIONS TO ENHANCE
PREVENTION SYNERGY AND EFFECTIVENESS**

INJECTION EQUIPMENT

Provision of, and legal access to a sufficient supply of clean drug injection equipment



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Availability of at least 1 needle and syringe provision site (NUTS 2 level) – coverage within countries/ coverage of NSPs at ‘district’ level

VACCINATION

Hepatitis B and A, tetanus, and influenza vaccines and, in particular for HIV-infected individuals, the pneumococcal vaccine.



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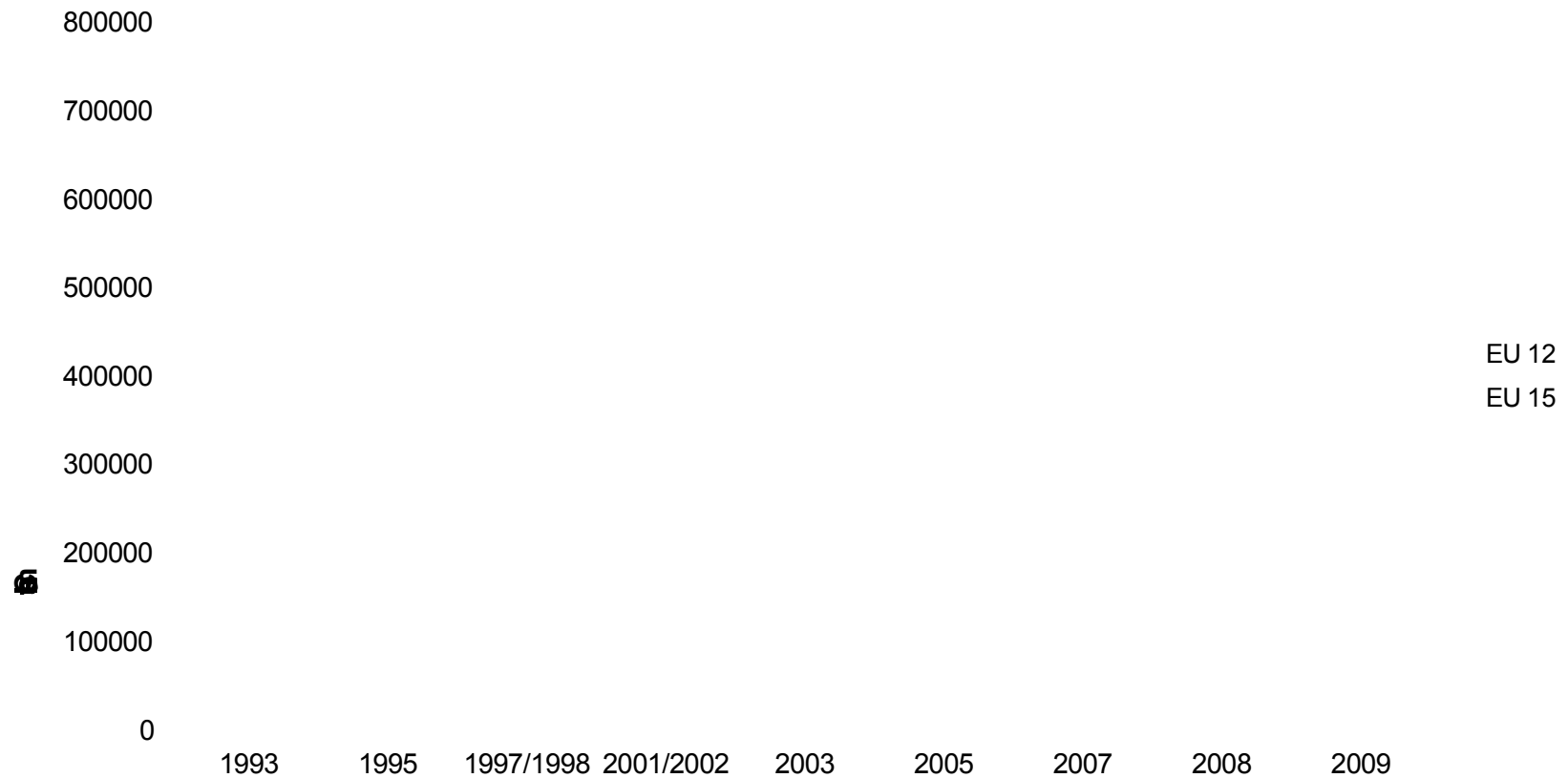


DRUG DEPENDENCE TREATMENT

Opioid substitution treatment and other forms of effective drug dependence treatment.



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TESTING

Voluntary and confidential testing with informed consent for HIV, HCV (HBV for unvaccinated) and other infections including TB should be routinely offered and linked to referral to treatment.



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INFECTIOUS DISEASE TREATMENT

Antiviral treatment based on clinical indications for those who are HIV, HBV or HCV infected. Anti-tuberculosis treatment for active TB cases.



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HEALTH PROMOTION

Focused on safer injecting behaviour; sexual health including condom use; and disease prevention, testing and treatment.

TARGETED DELIVERY OF SERVICES

- Combine services and deliver them according to user needs
- Includes outreach and fixed site settings, offering a range of services

Why is this guidance important?

- Supports convergence of responses and policies to infectious diseases in EU region
- Promotes cooperation between stakeholders addressing drug use and infections
- Supports policy makers to prioritize and scale up relevant interventions
- Signal towards European neighborhood
- Forms part of growing EU framework for responding to public health and drug problems

Where do we go next?



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- Scaling up and integration of interventions
- Treatment of infections:
 - We need to increase our knowledge of how many drug users are receiving treatment (HCV)
 - We need to provide guidance how to provide effective HCV-treatment and prevent re-infection
- EU 'can do better': Hepatitis framework
- Prison as 'core-ingredient' for impact
- Cost-effectiveness

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Seven interventions, one aim:
no infections

