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Strategies of drug users to avoid infection with hepatitis C

Results from five European countries

Dr. Heike Zurhold

zurhold@uke.de



Universitätsklinikum
Hamburg-Eppendorf

Klinik für Psychiatrie und Psychotherapie
Zentrum für Psychosoziale Medizin

Zentrum für Interdisziplinäre
Suchtforschung
der Universität Hamburg



Background – HCV is a major health concern

Harm reduction (DCR, NSP, substitution treatment) has an impact on the reduction of

- HIV (prevalence is stabilizing across the EU below 10%)
- But not on HCV
 - Hepatitis C is still highly prevalent as on average 60% of IDUs in Europe are infected (EMCDDA 2010, Cornberg et al. 2011)
- Special groups at particular risk of infection
 - Young drug users below the age of 25
 - Drug users injecting less than two years

Low knowledge of
HCV transmission
and prevention

The European study

Objectives

1. To review the evidence base for and practice of HCV prevention
2. To explore how the risk group of drug users manage to avoid an infection with hepatitis C
3. To develop recommendations for HCV prevention addressed to young DUs

Approaches

- Part 1** Scientific evidence for effective for HCV prevention
- Part 2** Collection of guidelines + standards for HCV prevention in each EU MS
- Part 3** Overview on implemented HCV prevention measures in five EU regions / cities
- Part 4** Interviews with young HCV-negative drug users and with experts
- Part 5** Local conferences to present and discuss results

Partners and cities involved

Germany: CIAR

- Hamburg – drug treatment, HR, prison

Netherlands: Mainline Foundation

- Amsterdam, Leiden, Almelo, Leeuwarden – drug treatment, HR, prisons

Lithuania: EHRN (Eurasian Harm Reduction Network)

- Vilnius, Klaipeda – HR

Catalonia: Barcelona Health Department of Catalonia

- Barcelona, Lleida, Sant Adrià del Besòs – HR, prisons

Greece: Kethea drug treatment provider

- 4 Kethea treatment & counselling centres in Piraeus, Athens



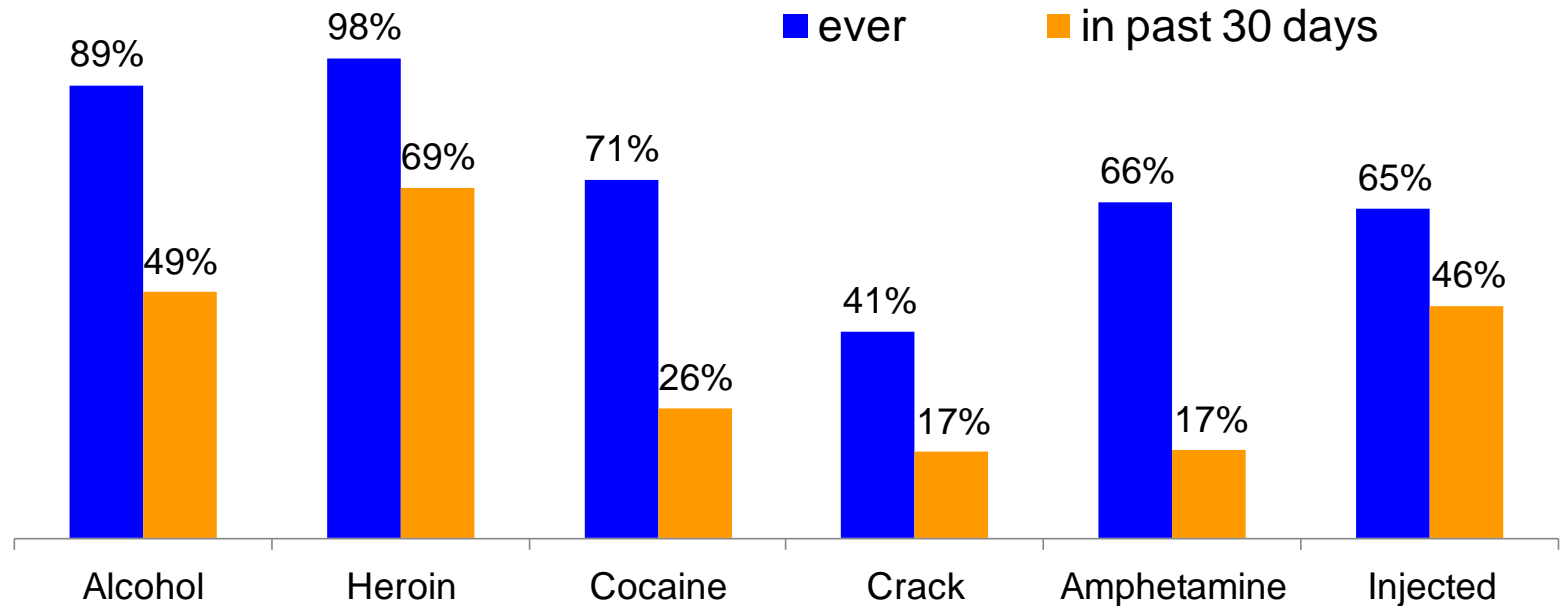
Methods for interviews with drug users

- **Inclusion criteria:** Current drug users who are
 - below the age of 30 - **has been extended to 35**
 - hepatitis C negative or who are not sure if they are infected,
 - use heroin, cocaine powder, crack or amphetamines regularly – (at least 3 days a week)
- **Structured questionnaire** on
 - Drug use behaviour
 - Strategies to prevent infection with hepatitis C
 - Knowledge on hepatitis C (quiz on HCV)
- Interviews were conducted under supervision and guidance of staff in low-threshold centres, drug treatment, outreach work, counselling centres, prisons
- Intention was to include **100** drug users in each of the five European countries

Database - Questionnaires

	Germany	Netherlands	Lithuania	Catalonia	Greece	Total
N	66	21	89	97	104	377
Age	26.9	25.8	25.5	27.1	24.9	26
Female (%)	43.9	9.5	40.4	38.1	14.4	31.6
In last 12 months tested for (%)						
HIV	78.8	42.9	71.9	68.8	58.0	66.9
HBV	79.7	38.1	28.1	57.9	59.9	53.9
HCV	80.0	38.1	41.6	67.4	58.7	59.4
Infected with (%)						
HIV	1.5 (n=1)	0	0	3.1 (n=3)	0	1.1
HBV	3.0	0	6.7	4.2	1.0	3.5
HCV	0	0	0	0	0	0

Substances used (n=377)



In past 30 days

69% used **heroin** – mostly in Catalonia, followed by Greece

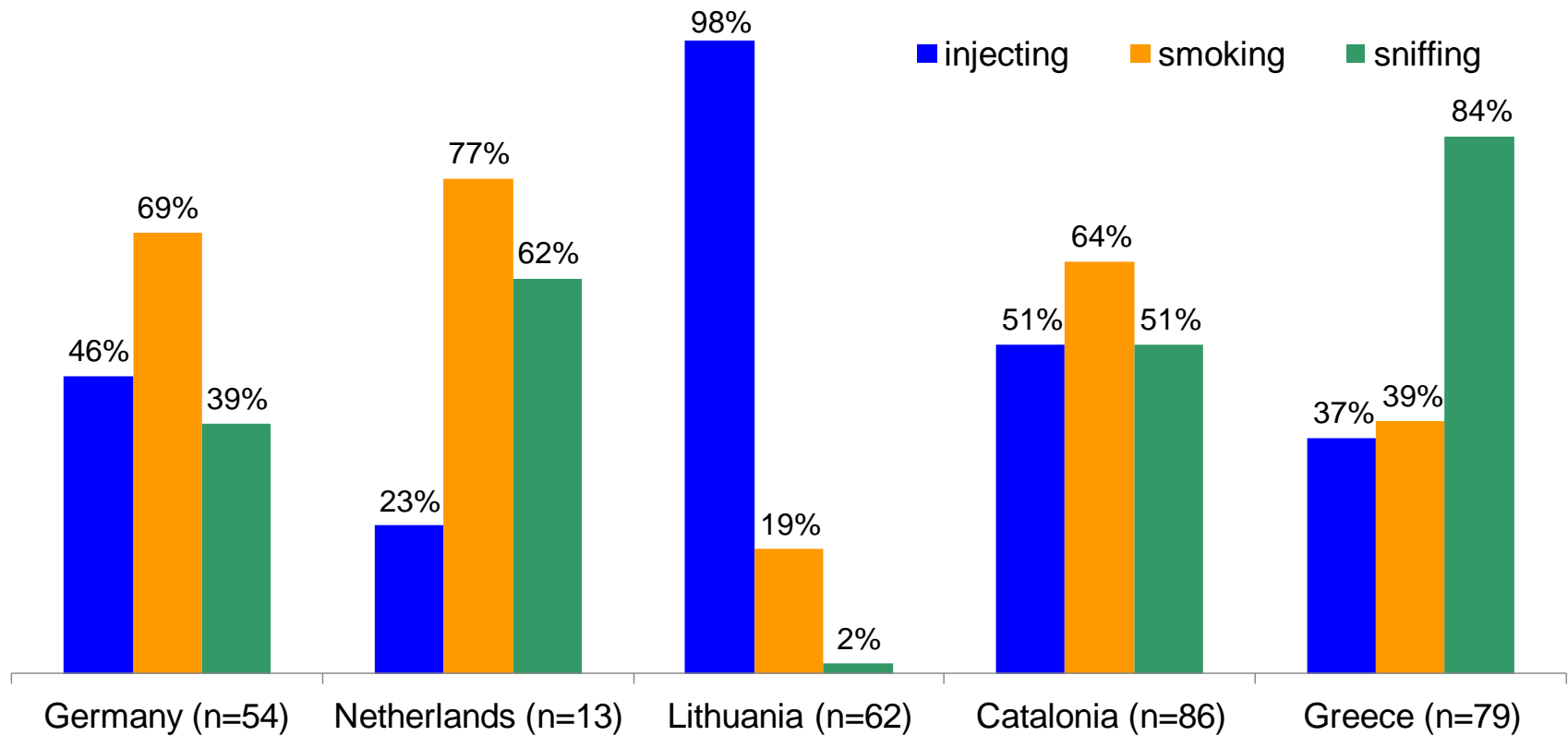
26% used **cocaine** – most often in Germany and Catalonia

17% used **crack** – mainly in Germany

17% used **amphetamines** – mainly in Netherlands, followed by Lithuania

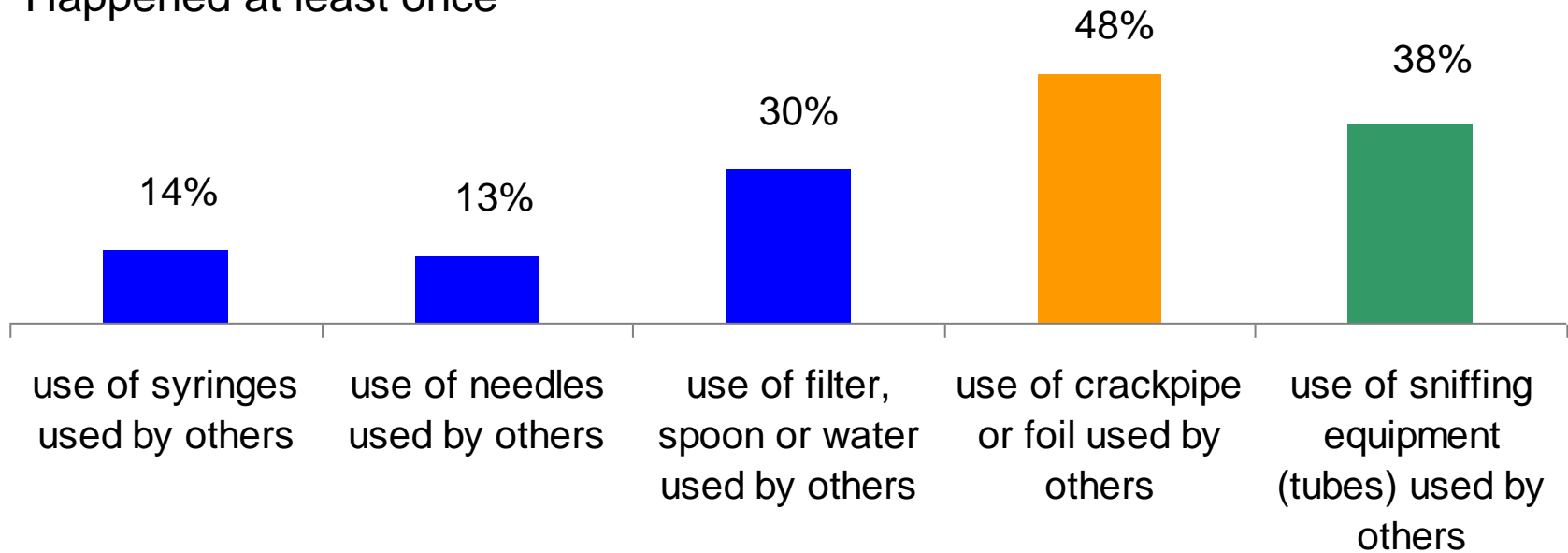
Routes of administration – in past 30 days (n=294)

Those who injected, smoked or sniffed substances in the past 30 days



Risk behaviour in past 30 days (n=294)

Happened at least once



Injected in past 30 days (n = 159)

Smoked in past 30 days (n = 136)

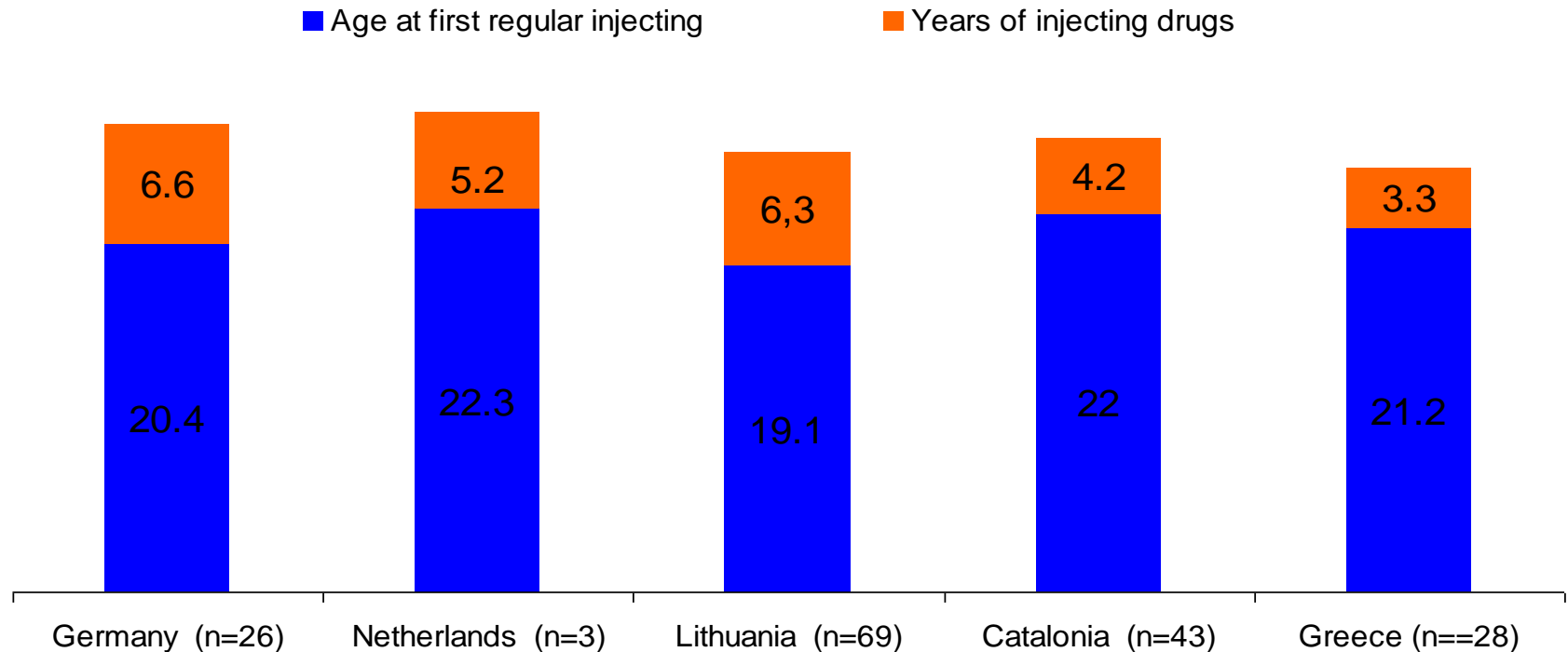
Sniffed in past 30 days (n = 138)

Risk behaviour and use of harm reduction

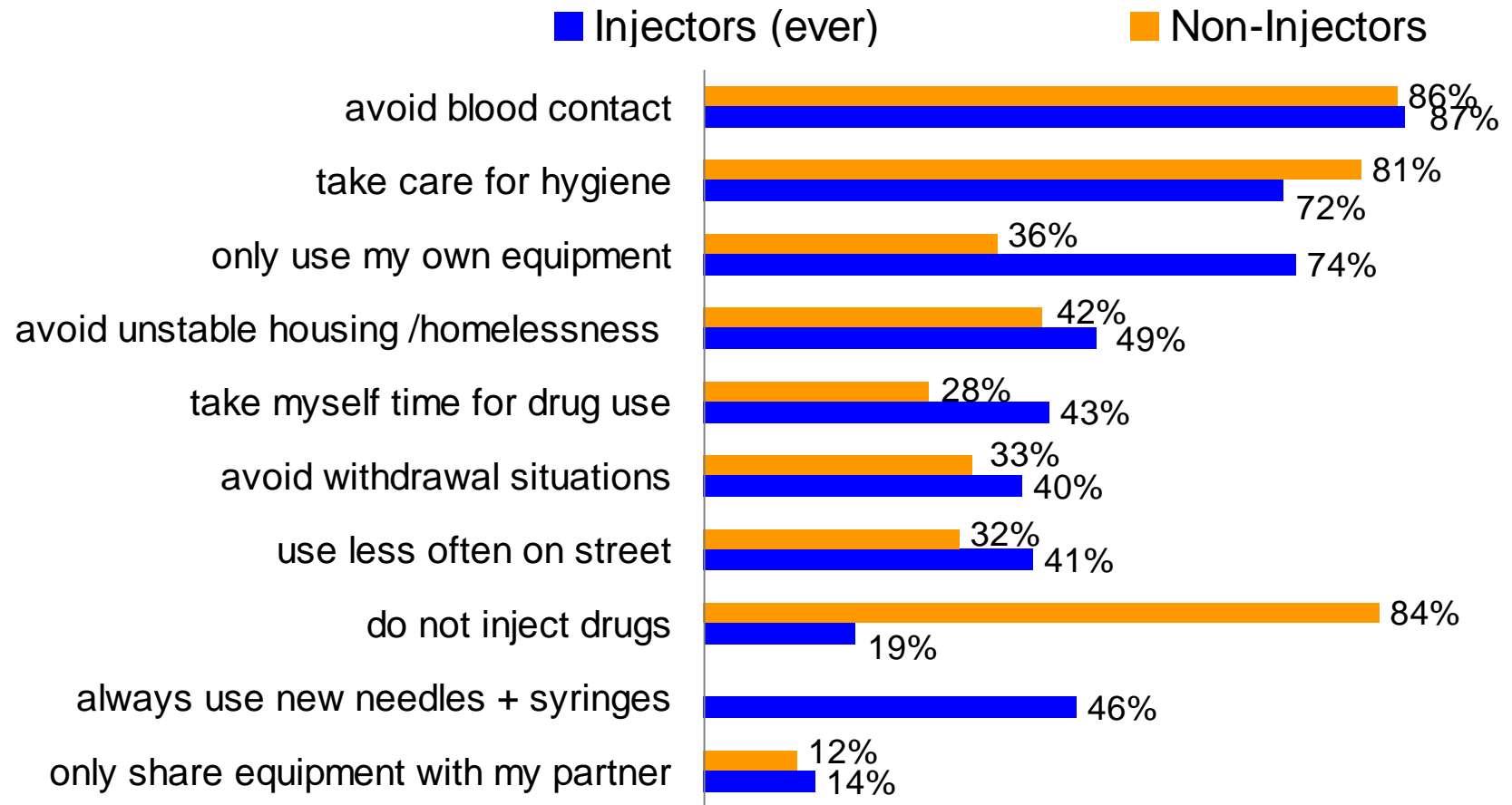
Harm reduction services used in past 30 days	Used by Injectors (n=254)	Used by Non-injectors (n=129)
Any service used	82%	61%
Syringe exchange	59%	0
Received smoking foil	13%	36%
Education for hygiene	30%	16%
Advice on safer use	48%	26%
Testing for HIV and hepatitis	54%	39%
Use of services has helped to remain HCV-negative	57%	55%
Currently in substitution treatment	40%	34%
Months in substitution treatment	10.7	11.8

HCV-free years among IDUs who injected in past 30 days (n=169)

65% of all respondents have ever injected
On average they inject since 5.3 years and remained negative for HCV



Strategies to prevent HCV infection (n=377)



Main reasons for avoiding HCV infection

- Not sharing drug use equipment - appears to be very different
 - Partly not sharing any equipment at all
 - Partly not sharing needles
 - Be the first one preparing the drug if sharing with others
 - Smoking instead of injecting if no clean needles and syringes are available
- Avoid blood contact
 - Safer sex
 - Using drugs only alone, avoid contact with injectors
 - Not sharing with those users known to be infected
 - No tattoos in prison, not sharing razors
- Hygiene
 - Try to avoid sharing of injecting and smoking equipment
 - Only sharing with well known persons such as brother, partner
 - Taking care for own body, using disinfectants
 - Keeping distance to people infected

Summary

- Risk behaviour occurs
 - Even though high risks such as sharing of needles and syringes is quite rare
 - But sharing of paraphernalia and smoking equipment is rather widespread
- Main prevention strategies to remain HCV negative
 - **For injectors**
 - Utilisation of harm reduction services, in particular NSP, education in safer use and testing
 - Avoid sharing of drug use equipment
 - Take more time for drug use
 - **For smokers and sniffers**
 - Also testing
 - „Blood awareness” = avoid blood contact, not injecting, hygiene = distance to injectors