

Harm Reduction Approaches for the Prevention of HCV Transmission via Injection Drug Use

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Disclosures

• Dr. Corcorran does not have any disclosures.



Objectives

 Review the epidemiology of hepatitis C virus (HCV) infection and injection drug use.

Briefly review other infectious complications of injection drug use.

- Discuss harm reduction strategies to prevent the transmission of HCV among people who inject drugs (PWID).
 - Syringe service programs (SSPs)
 - Medications for opioid use disorder (MOUD)



Injection Drug Use and Risk for HCV

 Injection drug use remains the most common risk factor for acquiring HCV in the United States.

 In 2020, among persons with acute HCV and available risk behavior information, 66% reported a history of injection drug use in the prior 6 months.

 Injection drug use is also a driving risk factor for reinfection with HCV, with reinfection rates estimated to be between 5 and 6 per 100 personyears.



Epidemiology of Injection Drug Use in the United States

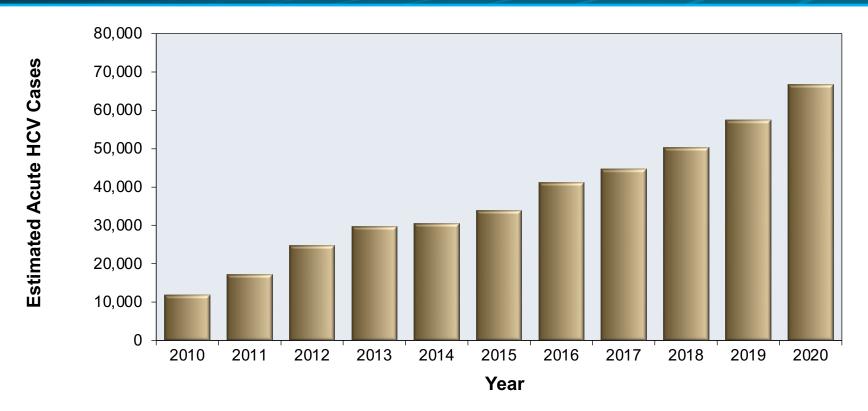
 In the past decade, there has been an increase in injection drug use across the U.S., owing to the opioid epidemic and rising rates of stimulant and synthetic opioid use.

- 2011: 774,434 PWID (0.30% of U.S. population ≥13yrs)
 - Likely considerable underestimate d/t basis on pop-level survey data

2018: 3,694,500 (1.46% of adult population)

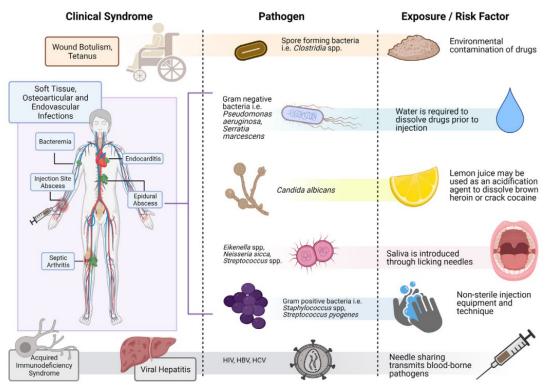


Estimated Case Numbers of Acute Hepatitis C Virus Infection United States, 2010-2020





Other Infectious Complication of Injection Drug Use





What is Harm Reduction?

 In the context of substance use, harm reduction is a set of practices and ideas focused on reducing the negative consequences associated with drug use.

 A harm reduction philosophy accepts that substance use occurs in our society and aims to minimize the harmful effects of substance use through strategies that are respectful, non-judgmental, and meet people "where they're at."



Syringe Service Programs

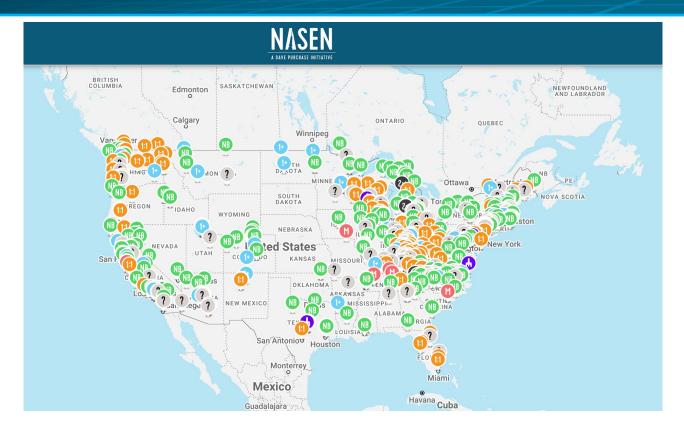


Injection Drug Use Equipment





Syringe Service Program Locations





Medications for Opioid Use Disorder (MOUD)

Buprenorphine-naloxone and methadone reduce risk of:

- Acquiring HCV in PWID
- Illicit opioid use, injection drug use, and sharing of injection equipment
- Overdose death among persons on treatment.



Options for MOUD

Methadone

- Full opioid agonist prescribed and dosed through a methadone maintenance program.
- Patients visit the methadone program daily for dosing.
- Many formulations are available, but the oral liquid form is used in most methadone clinics.

<u>Buprenorphine</u>

- Partial opioid agonist that can be prescribed like other prescription medications in an office setting
- Often co-formulated with naloxone (Suboxone)
- Typically administered transmucosally 1-3 times a day; however, a monthly extendedrelease injection is also available.













Clinical Consultation









Hepatitis C Online

A free educational website from the University of Washington Infectious Diseases Education & Assessment (IDEA) program



Funded by Centers for Disease Control and Prevention (CDC)

HCV Medications

Medication Summaries Prescribing Information Clinical Studies Slide Decks

Learn about medications to treat HCV »





HCV Course Modules

Screening and Diagnosis of Hepatitis C Infection

For any clinician who may encounter persons with hepatitis C virus infection and would like to establish core competence in testing for hepatitis C, counseling patients on preventing hepatitis C transmission, and diagnosing acute hepatitis C infection.

Overview / Quick Reference >

Rapidly access info about Screening and Diagnosis of Hepatitis C Infection

Self-Study 3rd Edition CNE/CME

Track your progress and receive CE credit

Clinical Challenges

Expert opinions for challenging and controversial cases

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