The risk assessment on HIV in injecting drug users in Greece and Romania

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HIV infections diagnosed 2010
Injecting Drug Use, EU/EEA

Rate as number per 100 000 population

- < 0.2
- 0.2 to < 1
- 1 to < 3
- ≥ 3
- Missing or excluded data

HIV incidence among IDUs in EU/EEA steadily decreasing since the early 2000’s;

during 2011 - increases in HIV infection among IDUs: Greece (June-July 2011) and Romania (notified via the EMCDDA early warning system from Romanian MoH data November 2011);

15. November 2011: request from DG SANCO to ECDC and EMCDDA to carry out RRA at EU level.
Situation in Greece

190 newly diagnosed HIV cases among IDUs (til 10-2011), up from 9-16 cases in 2009-2010.

Low prevention coverage over years:

- Long treatment waiting times,
- NSP geographically limited (1 city),
- average provision/year: six syringes per IDU.
Situation in Romania

62 newly diagnosed HIV cases among IDUs (until Sept. 2011), up from 12 in 2010 and 3-5 in 2007-2009;
29 cases confirmed CD4 cell count → recent infections

Increase coinciding with:
- Rise in ATS injecting (synthetic cathinones);
- low OST coverage, despite some increase in 2010;
- NSP geographically limited (1 city),
- syringe provision declines from 97 per IDU in 2009 to 53 in 2010 + further reduction in 2011.
Methods RRA

Rapid inquiry among ECDC HIV surveillance contact points and EMCDDA national drug focal points / infectious disease expert network EU/EEA on recent changes in HIV case reports/prevalence, injecting risk, prevention coverage;

Combined analysis of:
1. Results of a rapid inquiry,
2. HIV surveillance data (through 2010)
3. HIV and HCV prevalence data (through 2010)- EMCDDA
4. Prevention coverage information (through 2010)- EMCDDA
2011 HIV surveillance / prevalence studies:
- 6 countries: Increases
- 17 countries: no change
- 4 countries: lower prevalence
- 2 countries: no data
Results: Prevention coverage

Opioid substitution treatment clients as a percentage of the estimated number of problem opioid users, 2010 or most recent year available

Source: EMCDDA Statistical Bulletin 2011, Figure HSR-1 (2010 updates for LV, PL, SK, LT, EL, UK (England))
Availability of at least 1 needle and syringe provision site (NUTS 2 level) – coverage within countries/coverage of NSPs at ‘district’ level

Source: EMCDDA 2011
Syringes distributed through specialised programmes in the EU*, per estimated IDU per year (2004-2009) - coverage variable

*EU, plus Croatia and Norway
Potential risk factors

Routine HIV and HCV surveillance data and information on prevention coverage:

- change to stimulant injecting (4 countries);
- increase in HCV prevalence among IDUs (6 countries);
- OST coverage < 30% (6 countries);
- syringe coverage < 100/IDU (8 countries).

Potential risk factors identified in 13 countries, incl. several countries with multiple risk factors.
## Results

| Country | AT | BE | BG | HR | CY | CZ | DK | EE | FI | FR | DE | EL | HU | IS | IE | IT | LV | LI | LT | LU | MT | NL | NO | PL | PT | RO | SK | SI | ES | SE | TR | UK |
|---------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| Increase in HIV case reporting and/or prevalence | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Increase in transmission risk indicators (↑ HCV, IDU prevalence, risk increase) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Low prevention coverage (< 30% OST or <100 syringes/IDU/yr) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NO ALERT - no evidence for increase/low coverage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ALERT - evidence for increase/low coverage | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Information unknown/not reported to ECDC/EMCDDA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
Conclusion

Half of EU/EEA countries report low HIV incidence of HIV cases in IDUs; and at regional level, overall incidence is still declining;

Increases in number of case-reports combined with injecting risk indicators and low prevention coverage may indicate risk for future outbreaks;

→ Critical review of prevention and control programmes;
→ Scaling up of prevention interventions where needed.

Prevention and control of infectious diseases among people who inject drugs
Seven key recommended interventions

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

COMBINE THESE KEY INTERVENTIONS TO ENHANCE PREVENTION SYNERGY AND EFFECTIVENESS
Why is this guidance important?

- Convergence of responses and policies in EU
- Cooperation between stakeholders addressing drug use and infectious diseases
- Supports policy makers to prioritize scaling up relevant interventions
- Part of growing EU framework for responding to public health and drug problems – EU neighbourhood
Translation:
Requests for permission to translate into 12 languages

Feedback from countries:
“For us the timing is very good – the documents provide good framework and material for discussions on national level – by February 2012 our Ministry of Social Affairs requires input for the next action plans for both HIV and drug use strategies.” [Estonia]

“Impressive work, very much needed” [Norway]

“Excellent document based on a good review of the evidence” [France]
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