

EXPOSING THE NEED FOR VIRAL HEPATITIS C SERVICES FOR PEOPLE WHO INJECT DRUGS IN SOUTH AFRICA: FINDINGS FROM A THREE-CITY CROSS SECTIONAL SURVEY

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Background:

South Africa's absent hepatitis C virus (HCV) response for people who inject drugs (PWID) is largely due to the epidemiological data gap. Needle/syringe services have operated in Cape Town, Durban and Pretoria since 2015. We investigated the HCV serological and viraemic (RNA positive) prevalence and risks among PWID who access needle/syringe services in these cities.

Methods:

We recruited 941 PWID between August 2016 and October 2017 in our cross-sectional study. We administered an assessment enquiring about demographics, substance use and risk practices. We performed HCV point-of-care (OraQuick®) and HCV viral load (COBAS® AmpliPrep/ COBAS TaqMan® HCV test) testing. We calculated proportions, frequencies and bivariate associations with HCV viraemia.

Results:

Participants were mostly male (87%), black (42%), homeless (68%) and had a median age of 30. All PWID had injected in the last month and half injected 4 - 6 times daily. At last injecting, 98% injected heroin, 80% used a new needle/syringe and 18% had shared their needle/syringe. In the last month 44% were sexually active and 57% had used a condom during their last sexual encounter. Most participants (73%) had previously accessed harm reduction services. HCV sero-prevalence was 55% (515/941)(Pretoria (84%), Cape Town (44%), Durban (35%)). HCV viraemic prevalence was 45% (403/892)(73%, 34% and 29% in the respective cities). Male sex (odds ratio (OR) 1.6 p=0.019), homelessness (OR 1.6, p<0.001), black race (OR 1.6, p=0.001), living in Pretoria (OR 1.2, p < 0.001), previous health screening (OR 1.4, p=0.018), new needle/syringe at last injection (OR 0.5, p<0.001) and recent sexual activity (OR 0.4, p<0.001) were associated with HCV viraemia.

Conclusion:

HCV prevalence among PWID is high in these cities. Some HCV infections may have preceded needle/syringe services. Prevention interventions should expand and treatment interventions should address the needs of PWID who are male, black and homeless and PWID in Pretoria should be prioritised.

Disclosure of Interest Statement:

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