

HCV TRANSMISSION AND RISK BEHAVIOUR IN NSW PRISONS

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Prison-based settings serve as a major reservoir of HCV infection given the high rates of imprisonment among people who inject drugs. Hepatitis C Incidence and Transmission Study—prisons (HITS-p), an NSW-based cohort study of prisoners with a history of injecting drug use, showed an HCV incidence of 11/100 person-years with a steady temporal trend (2006-2013). The Surveillance and Treatment of Prisoners with hepatitis C (SToP-C) study, conducted in four NSW prisons, indicated an association between HCV incidence and a history of injecting drug use, while those injecting in the prison were at the greatest risk (26/100 person-years among those injecting in the previous month in the prison). High HCV incidence among prisoners is primarily explained by ongoing high-risk injecting behaviours in the prison. Both SToP-C and HITS-p studies showed decreased frequency of injecting but increased sharing injecting equipment in the prison. Among SToP-C participants, 23% reported injecting drugs in the previous month in the prison, among whom 90% used a shared needle or syringe. In HITS-p study, 71% of participants reported injecting drugs prior to prison entry, while 27% injected drugs in the prison. While participants were less likely to inject drugs following incarceration, those who injected were more likely to share a needle or syringe in prison compared to outside of prison (29% prior to prison entry versus 73% in the prison). This study also showed that receiving opioid substitutional therapy or using Fincol to clean injecting equipment were not associated with decreased HCV transmission risk. In summary, the existing data demonstrated an ongoing HCV transmission in the prison setting. Comprehensive prevention strategies, including harm reduction, and an HCV treatment-as-prevention evaluation are required to control HCV epidemics in the prisons.