



Public Health
England

30 years of HIV and viral hepatitis surveillance in people who inject drugs through the Unlinked Anonymous Monitoring Survey in England, Wales and Northern Ireland

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Background

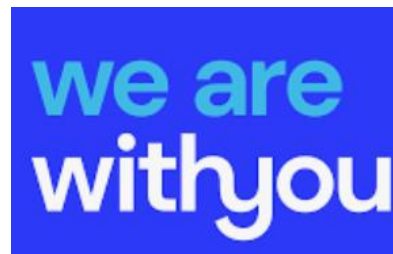
- People who inject drugs (PWID) are vulnerable to a wide range of blood-borne viral and bacterial infections.
- Risk through sharing of injecting equipment amplified by structural barriers to accessing testing, care and treatment
- Highlights importance of public health surveillance of infections and behaviours among this population to inform prevention efforts and identify inequalities
- **Aim:** to describe the **Unlinked Anonymous Monitoring (UAM) Survey** of PWID and key findings to mark its 30th anniversary



Survey methodology

- Annual, cross-sectional bio-behavioural survey
- England & Wales since 1990 and Northern Ireland since 2002
- Collaboration between PHE and 60+ specialist drug services across EW&NI
- Nationally reflective sample of PWID attending services (2,000-3,000/year)

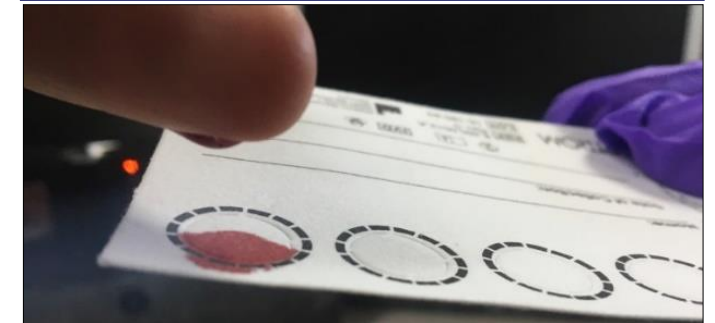
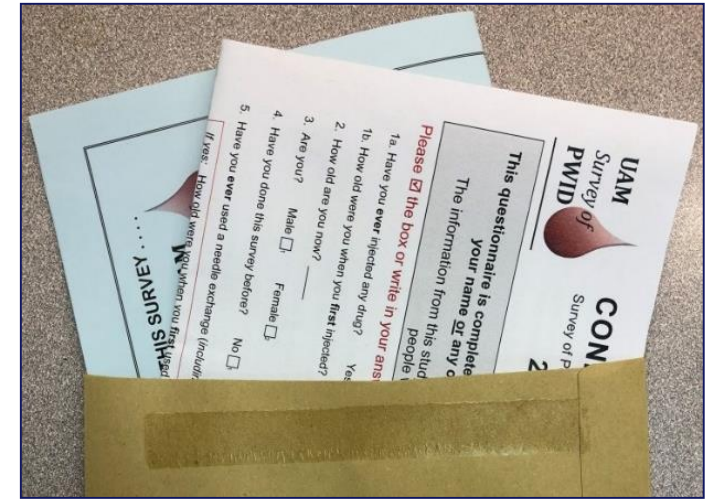
ACHIEVE RECOVERY
BOLTON • SALFORD • TRAFFORD





Survey methodology

- Recruits current and former injectors
- Participants provide a biological sample and complete a short questionnaire.
- Acknowledgement for participation (Love2Shop voucher)
- Ethical approval from PHE and the London Research Ethics Committee (98/2/051)
- Methods have evolved over time – laboratory testing and questionnaire





Survey methodology

1990

Testing for HIV and hepatitis B (HBV) core antibodies

1998

Hepatitis C (HCV) antibody testing added

2010

Biological sample collected changed from oral fluids to dried blood spots (DBS)

2011

Testing for HBV Surface Antigen (HBsAg) added

2016

Questionnaire revised on a number of occasions

2017

HCV RNA testing added

2018

Automation of laboratory testing and introduction of testing for human T-lymphotropic virus (HTLV)



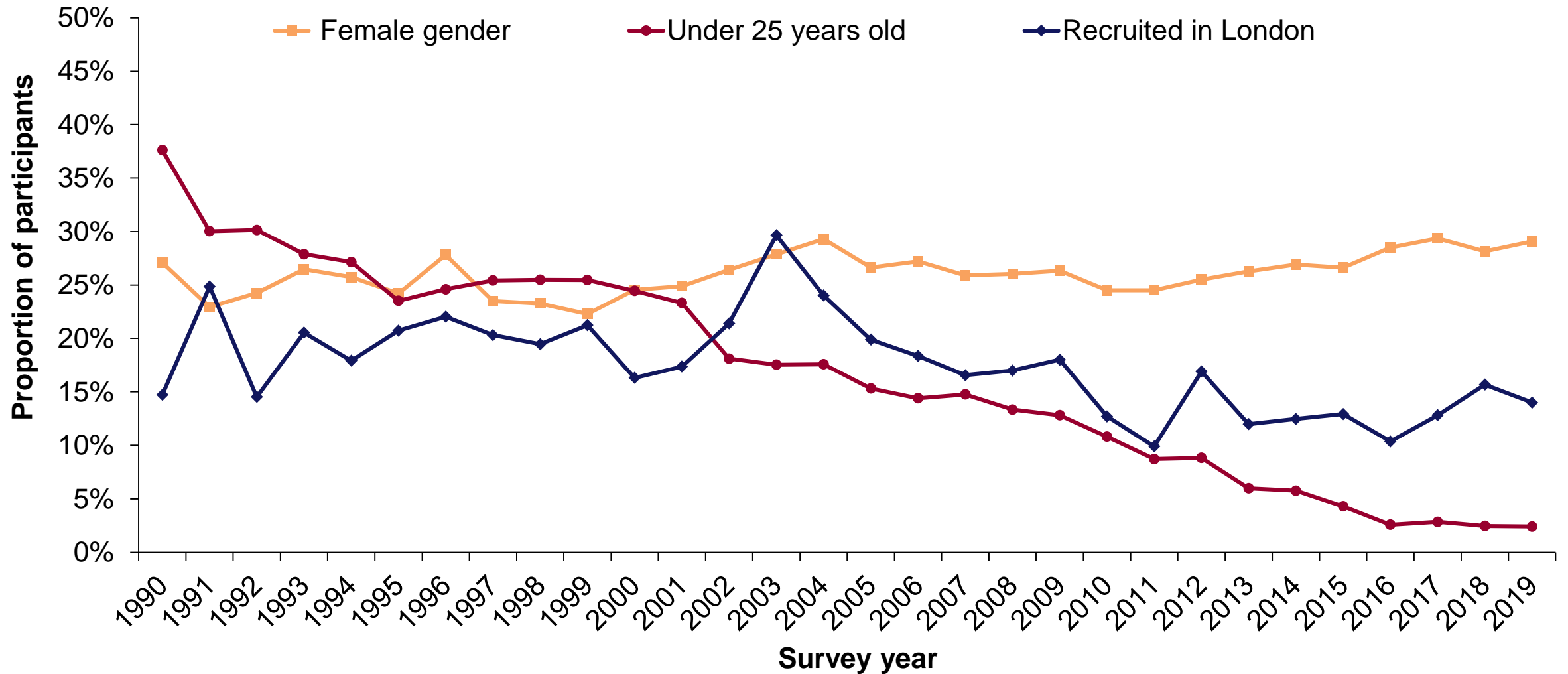
Survey methodology

- Survey provides:
 - Data on proportion of PWID with HCV, HBV, HIV and HTLV
 - Information on risk and protective behaviours
- Data used to inform policy, practice, national strategy and commissioning
- Unlinked and anonymous - results are not dependent on people coming forward for named testing.



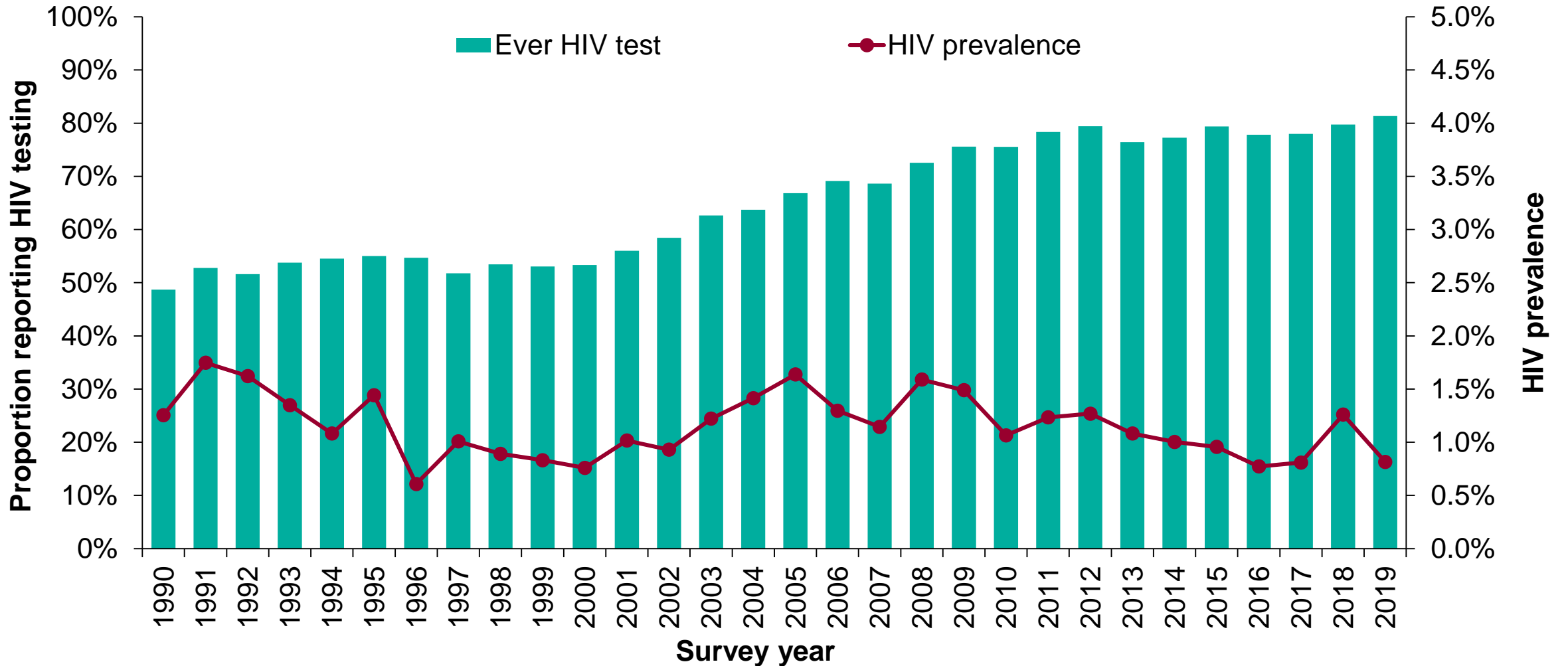


Participant demographics



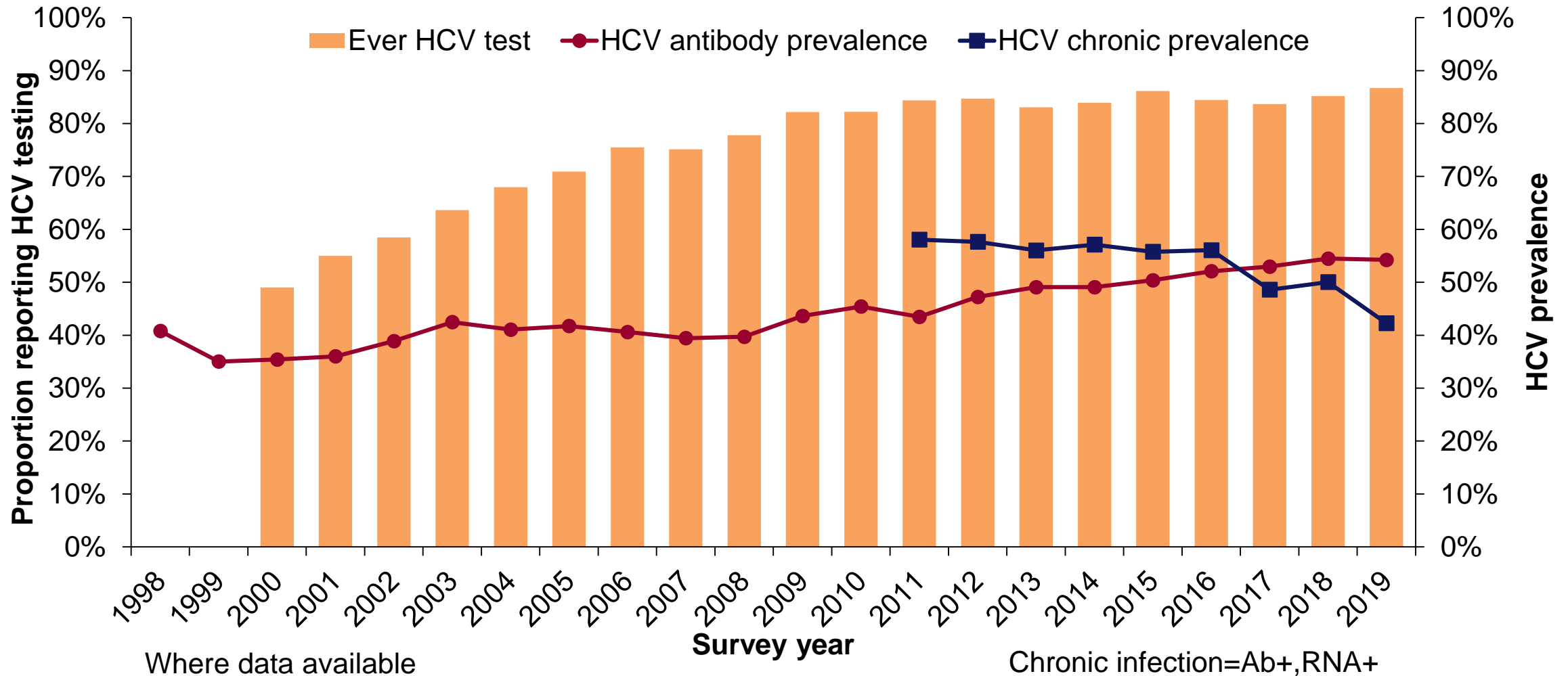


HIV testing and prevalence



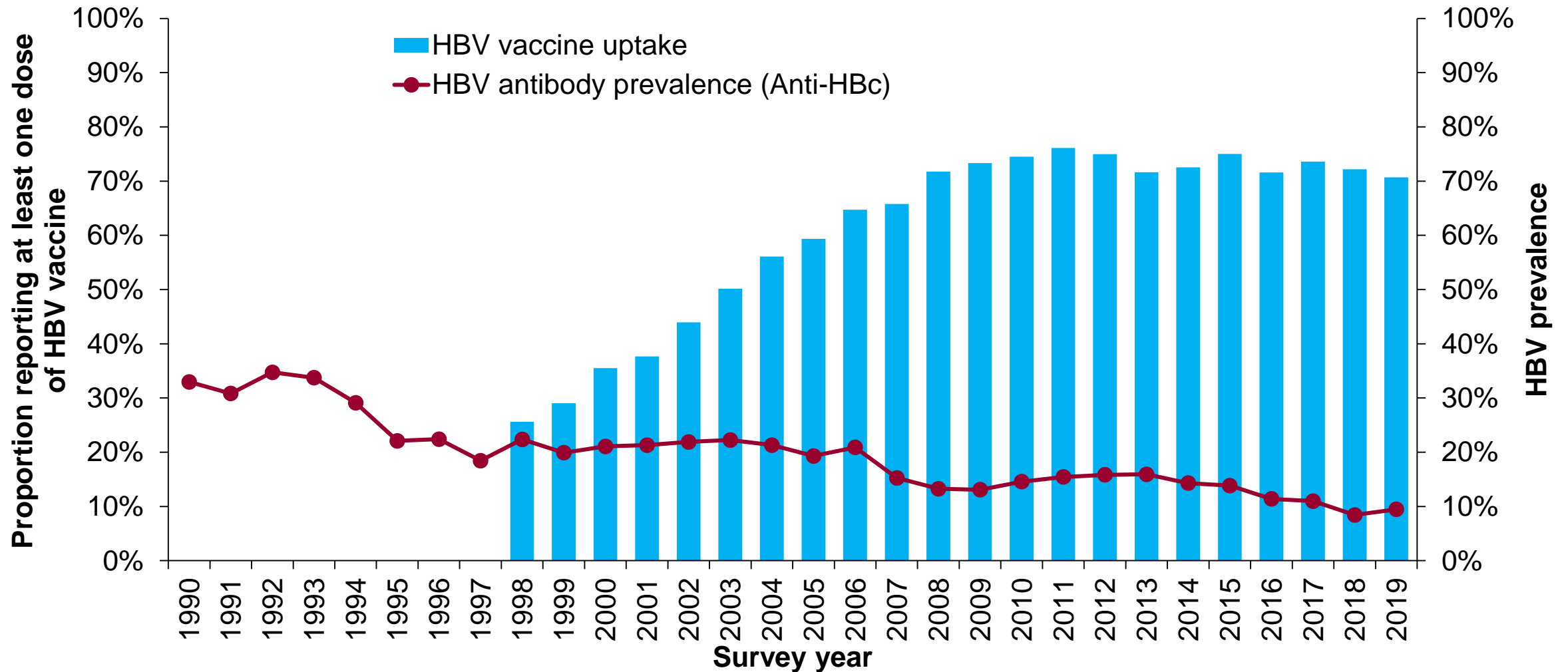


HCV testing and prevalence



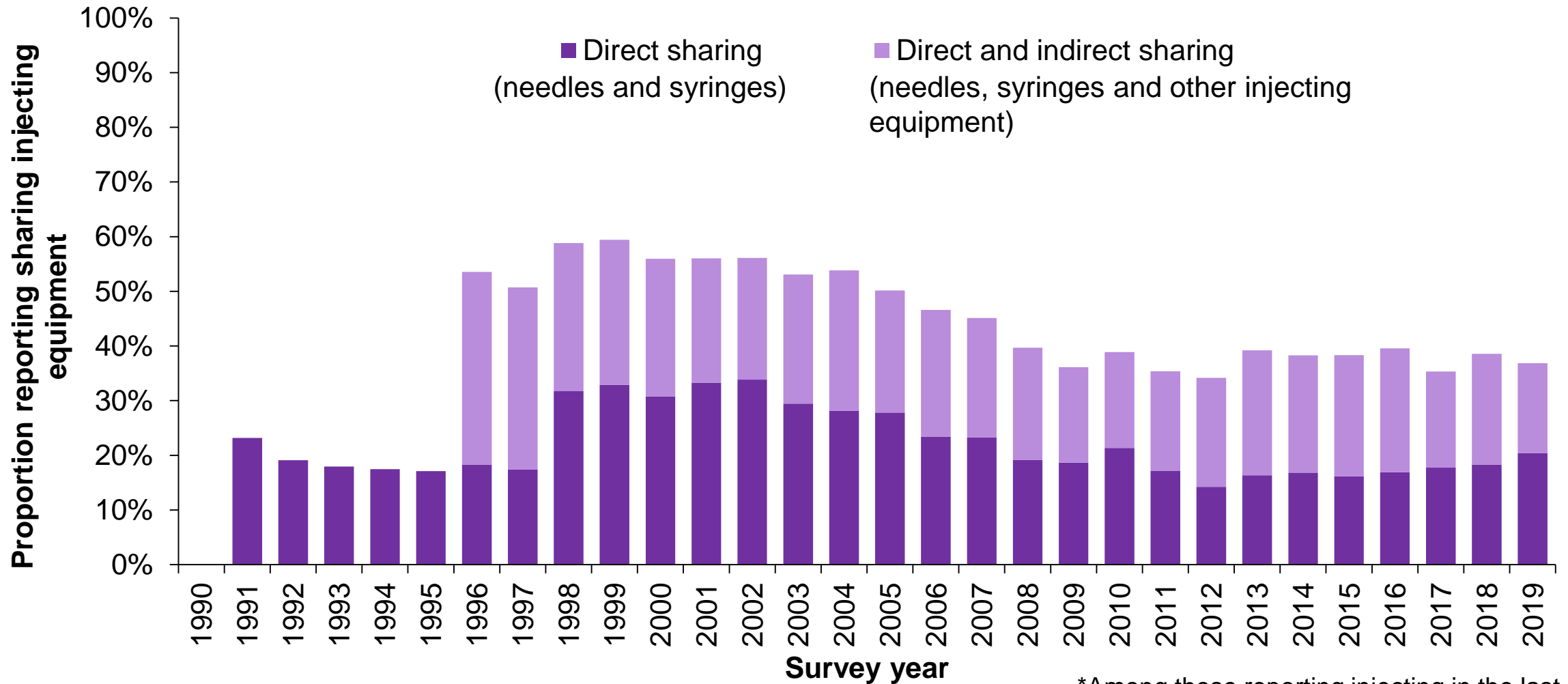


HBV vaccination and prevalence





Sharing of injecting equipment*



*Among those reporting injecting in the last month



Conclusions

- The UAM Survey is the longest running national bio-behavioural survey of PWID in the world.
- UAM Survey data provide valuable insights into infections, risk and behaviours among PWID:
 - Unlinked-anonymous methodology allows for monitoring of trends in the prevalence of blood-borne viruses both diagnosed and undiagnosed
 - Context of underlying behaviours and uptake of interventions
- Individuals continue to be at risk through their injecting practices.
- Need to maintain and strengthen effective public health interventions to sustain low HIV/HBV prevalence and to reduce HCV prevalence in PWID



Acknowledgements

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