

TRENDS IN HEPATITIS C AND HIV PREVALENCE AND INCIDENCE AMONG PEOPLE WHO INJECT DRUGS ACCESSING A HARM REDUCTION SERVICE IN BUCHAREST, ROMANIA, 2013 – 2022

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Background

HIV and HCV incidence have never been estimated among people who inject drugs (PWID) in Romania, despite a large HIV outbreak among PWID in 2010. We examined trends in HIV and HCV prevalence and incidence among PWID receiving HIV and HCV testing at a harm-reduction service in Bucharest over 2013–2022.

Methods

We analysed longitudinal programmatic data collected through the Romanian Associations Against AIDS (ARAS), a long-running harm-reduction service providing sterile syringes, blood-borne virus testing (including rapid HIV and HCV-antibody), opioid agonist maintenance treatment (OAMT) and healthcare for PWID. Trends in HIV and HCV prevalence were estimated using individual's first recorded tests. HIV and HCV incidence were estimated among individuals who tested negative at their first test and had ≥ 1 repeat tests. Associations between socio-demographics and OAT receipt with prevalent HIV and HCV status were examined using logistic regression.

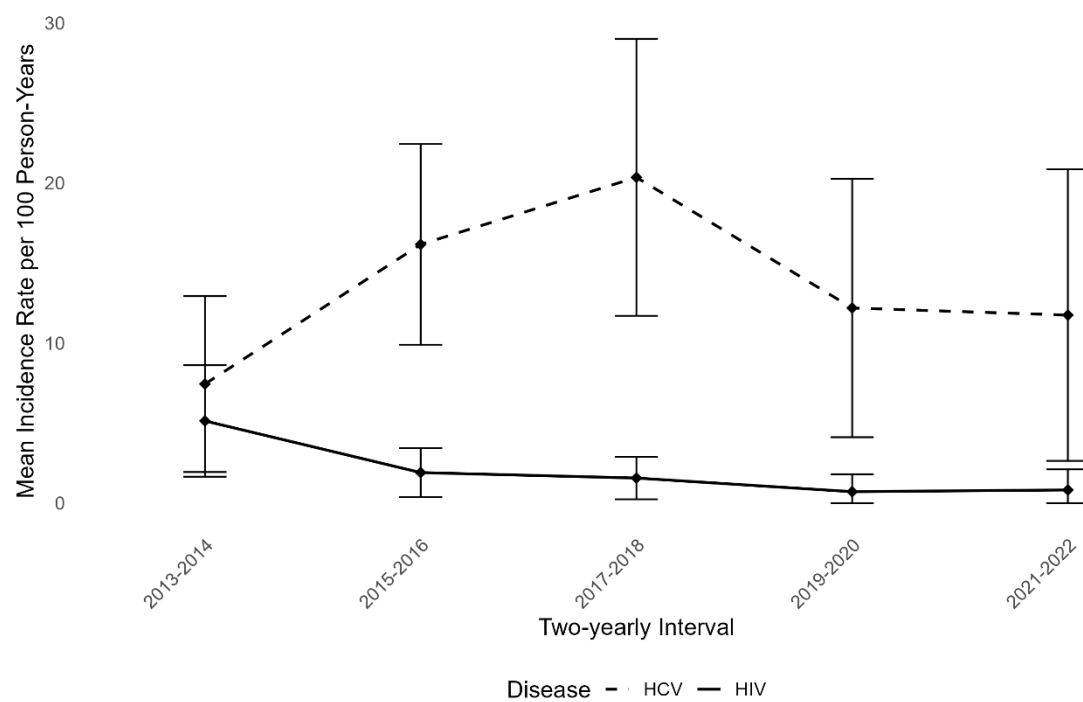
Results

Over 2013–2022, 12,683 individuals accessed the service, of which 2,416 and 2,481 received ≥ 1 HCV and HIV tests, respectively. Overall HCV incidence was high (14.2/100 person-years (/100pyrs); 95% Confidence Interval (95%CI): 11.3–17.1; Figure). Overall HIV incidence was 1.8/100pyrs (95%CI: 1.2–2.5), highest in 2013–2014 (5.1/100pyrs; 95%CI: 1.7–8.6), after which it declined, reaching 0.8/100pyrs; 95%CI: 0.1–2.1) in 2021–2022. Overall HCV and HIV prevalence were 41.1% (994/2416) and 13.5% (336/2481), respectively. HCV prevalence and HIV prevalence followed similar trends to incidence, with decreasing HIV prevalence and stable HCV prevalence. Older age, being male and Roma ethnicity were associated with both HCV and HIV prevalence. OAMT receipt was associated with lower odds of prevalent HIV infection (odds ratio (OR): 0.62; 95%CI: 0.48–0.80) but not HCV (OR: 1.16; 95%CI: 0.98–1.37).

Conclusion

The decline in HIV incidence among PWID in Bucharest is encouraging and coincides with expanded access to antiretroviral therapy. However, persistently high HCV incidence likely reflects ongoing restrictions surrounding treatment access alongside funding cuts to harm-reduction.

Figure. Two-yearly incidence of HIV and HCV per 100 person-years among people who inject drugs attending a harm reduction service in Bucharest, Romania, 2013–2022



Disclosure of Interest Statement:

None to declare.