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Global epidemiology of injecting drug use, HIV, viral hepatitis and harm reduction services among people who inject drugs



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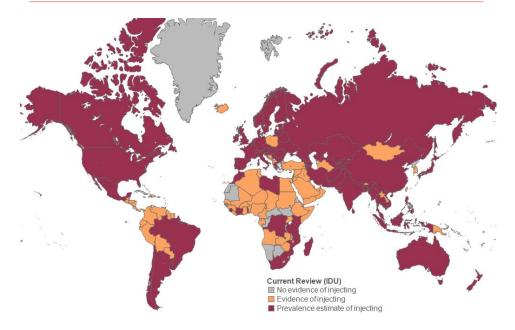
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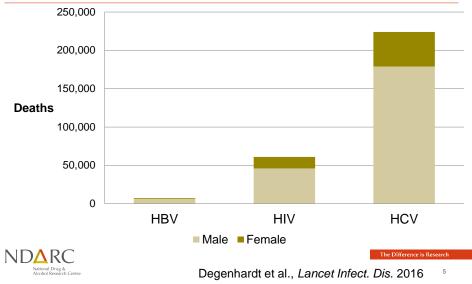
Key theme

- Existing data are limited in quantity and quality
- Better data are needed to inform and monitor progress towards hepatitis C elimination



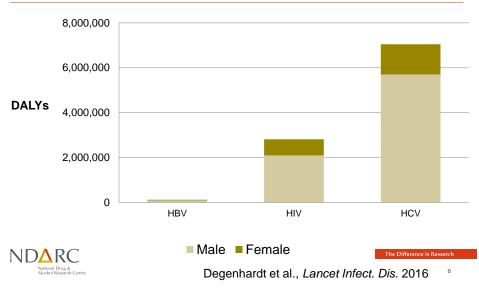
Injecting drug use is a global phenomenon



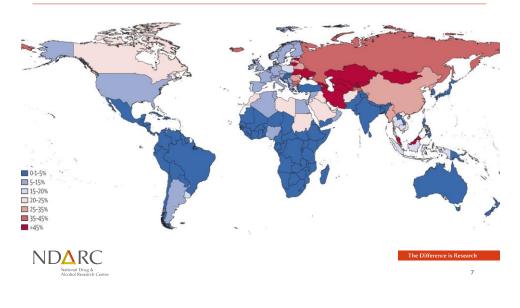


Infectious disease deaths, lifetime history of injecting drug use, 2013

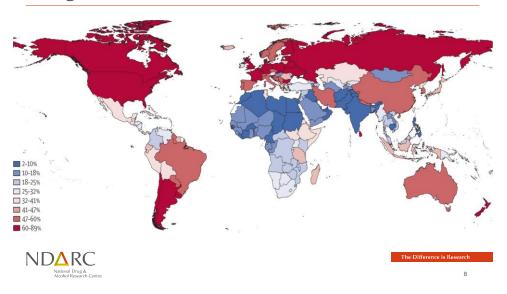
Infectious disease disability-adjusted lifeyears, lifetime injecting drug use, 2013



Proportion of HIV DALYs, lifetime injecting drug use, 2013



Proportion of HCV DALYs lifetime injecting drug use, 2013



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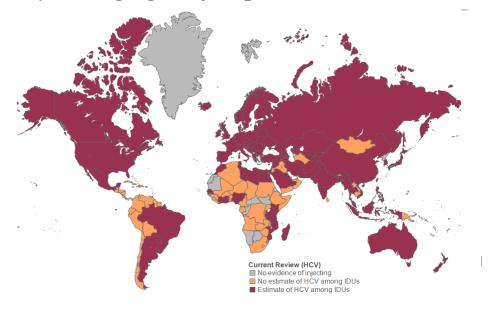
Data on HIV and viral hepatitis prevalence among recent injectors



HIV prevalence among people who inject drugs: mostly well characterised, but also critical gaps



Anti-HCV prevalence among people who inject drugs: greatly improved



Very few studies of viremic HCV infection among people who inject drugs



Coverage of harm reduction programmes



Needle and syringe program implementation

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Opioid substitution therapy implementation

Harm reduction in prisons and jails

- NSP in at least one prison: Armenia, Kyrgyzstan, Moldova, Tajikistan, Germany, Luxembourg, Spain, Switzerland
- OST in at least one prison in 52 countries
 - Usually very limited

From: Harm Reduction International, *Global State* of Harm Reduction 2016



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Conclusions: Key epidemiological research that is needed

- Injecting drug use population sizes
 - By age, sex, racial/ethnic minority status
 - Age of onset, duration of injecting
- Prevalence of HCV testing, treatment access, cure, active HCV infection, re-infection



Forthcoming:

Degenhardt et al. Global epidemiology of injecting drug use, HIV and viral hepatitis among people who inject drugs. *Lancet Global Health*

Larney et al. Global, regional and national coverage of HIV and hepatitis C prevention and management in people who inject drugs. *Lancet Global Health*

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