HIV spread among people who inject drugs

This issue of CHART highlights a rise in new HIV non-AIDS diagnoses among people who inject drugs in Philadelphia.

- In recent years, the HIV epidemic in Philadelphia has been highly concentrated in men who have sex with men. The number of people newly diagnosed with HIV infection through injection drug use has been falling since the syringe exchange program in Philadelphia was implemented in 1992.
- Between 2015 and 2017, between 28 and 32 people who inject drugs per year were newly diagnosed with HIV (non-AIDS) annually in Philadelphia, representing a stable 5% of all new reported HIV diagnoses.
- In the 12 months ending August 31, 2018, the Health Department identified 46 newly diagnosed cases of HIV (non-AIDS) among persons who inject drugs, compared to 31 cases in the previous 12 months; representing a 48% increase.
- Persons newly diagnosed with HIV infection that has not progressed to AIDS represent more recently acquired infection.
People who inject drugs with newly diagnosed HIV infection are diverse

This increase is likely caused by the opioid crisis

- 74% of the new HIV non-AIDS diagnoses among people who inject drugs were male.
- 46% of the new HIV non-AIDS diagnoses among people who inject drugs were non-Hispanic whites, 28% were Hispanics, and 26% were non-Hispanic Blacks.
- 50% of cases were 30-39 years of age and 24% were 40-49 years of age.
- 57% of the new HIV non-AIDS diagnoses among people who inject drugs were also infected with Hepatitis C.

This increase is likely caused by the opioid crisis

- Previous reductions in HIV infections from injection drug use in Philadelphia were likely due to several protective factors, including: access to sterile syringes through Prevention Point Philadelphia, access to drug treatment, and behavioral changes among experienced users.
- Philadelphia is now experiencing an epidemic in use of and addiction to opioids. This epidemic is characterized by the introduction of fentanyl in the illicit drug supply, a rise in the number of people who inject drugs, an increase in homelessness among drug users, an increase in Hepatitis C transmission, and sharp increases in fatal and non-fatal drug overdoses.
- Fentanyl has a shorter duration of effect than heroin, so people who inject fentanyl may be injecting more frequently, increasing their likelihood of sharing used syringes.
- It is too early to conclude that Philadelphia is experiencing a new trend in HIV infection. However, the recent increase in HIV infections represents a warning that all drug users and their partners may be experiencing a rising and renewed risk for HIV infection.
What can be done

The Health Department is:

- Contacting sex and needle-sharing partners of persons with HIV infection anonymously to offer HIV testing and ensure that persons in need of HIV care are linked to treatment.
- Mobilizing One Stop Shops to provide comprehensive healthcare services for people living with and/or at risk for HIV and Hepatitis C infection.
- Expanding community-based HIV testing in key areas to identify undiagnosed HIV infection and rapidly link persons to treatment.
- Linking persons at high-risk of HIV infection to pre-exposure prophylaxis (PrEP), a once a day pill that prevents HIV infection.
- Expanding programs that provide sterile syringes to persons who inject drugs.

Health care providers can:

- Offer testing to high-risk persons. The Health Department recommends HIV and Hepatitis C testing and repeat testing for all persons at high risk for HIV infection, including persons who may use or inject drugs, people who are experiencing homelessness, and people who exchange sex for money or drugs.
- Provide referrals to effective harm reduction services, like Prevention Point Philadelphia. Sterile syringes and drug use equipment save lives and prevent new HIV and Hepatitis C infections.
- Provide counseling for all patients, which includes discussions about sexual behaviors and drug use.
- Report all new cases of HIV infection in people who inject drugs to the Health Department promptly by phone to 215-685-4789 with as much risk history, clinical, and demographic data as you can obtain.
- Assist in HIV partner notification and linkage to HIV medical care, support services, and insurance. Partner Services can be reached at 215-685-6612.

People can:

- Encourage friends and family who may be at risk for HIV and/or Hepatitis C through drug use to be tested and retested for HIV and Hepatitis C.
- Begin drug treatment if you are dependent on opioids or other drugs. Call 888–545–2600 for help finding a treatment program. If you continue to use drugs, use clean needles and injection equipment each time; do not share needles or injection equipment.
- Use condoms regularly to prevent HIV and/or Hepatitis C transmission through sexual activity.
- Remain engaged in HIV treatment, if you are living with HIV. Everyone with HIV in Philadelphia can get the care and medication they need to treat HIV and live a long and healthy life, even if they can't pay or don't have insurance.
- Talk with your doctor to learn about PrEP, which is a daily pill to prevent HIV, if you think you are at risk of getting HIV.
- Seek Hepatitis C treatment, if you are living with Hep C. With new medications, Hepatitis C is curable in most people in 8-12 weeks with no or minimal side effects.
Resources

- Drug treatment referrals and education: 888-545-2600; [http://dbhids.org/addiction-services/](http://dbhids.org/addiction-services/)
- List of health care providers that provide PrEP: [https://go.usa.gov/xngJp](https://go.usa.gov/xngJp)
- PDPH AIDS Activities Coordinating Office Health Information Line: 215-985-2437
- Harm reduction resources and education, including syringe exchange and infectious disease screening: Prevention Point of Philadelphia – 215-634-5272; [www.ppponline.org](http://www.ppponline.org)