



## Infectious Diseases Continue to Spread Among People Who Inject Drugs

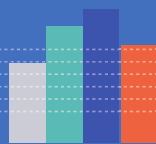
People who inject drugs are at risk of HIV and other infectious diseases, especially when syringes are reused or shared with others. The current overdose crisis in Philadelphia and the more recent widespread prevalence of fentanyl in the city's illicit drug supply has contributed to the rise of new HIV cases among this population. Use of fentanyl, a synthetic opioid with a shorter duration of action than other opioids, results in people needing to inject more frequently to prevent withdrawal symptoms. This in turn increases the demand for sterile syringes and the risk that syringes will be reused and shared if sterile syringes are unavailable. In addition to HIV, the reuse and sharing of syringes in the fentanyl era has also contributed to a rise in other infections related to injection drug use, including viral hepatitis, skin and soft tissue infections, bacteremia, and infective endocarditis.

Syringe service programs are evidence-based programs that provide sterile syringes and other health and social services to communities affected by substance use. In 1992, Philadelphia's syringe service program Prevention Point Philadelphia opened. This program increases access to sterile syringes, thereby helping prevent the spread of HIV and other infectious diseases among people who inject drugs (PWID). This issue of CHART highlights the increasing incidence of HIV and infectious diseases among Philadelphia residents who use drugs and the need for expanded syringe services in the city.

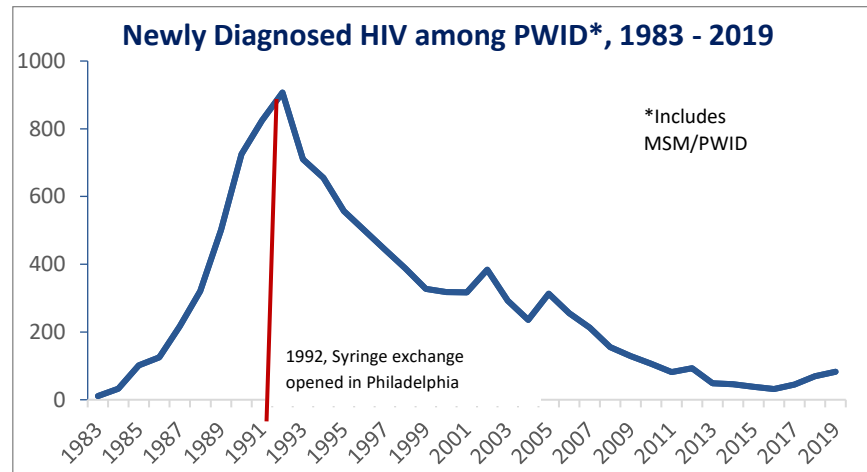
Since 2016, HIV infections have increased by 151% among people who inject drugs.

The percentage of PWID surveyed reporting always using clean syringes has declined by 30% since 2012.

Since 2016, the prevalence of fentanyl in drugs seized by law enforcement has increased by 560%.



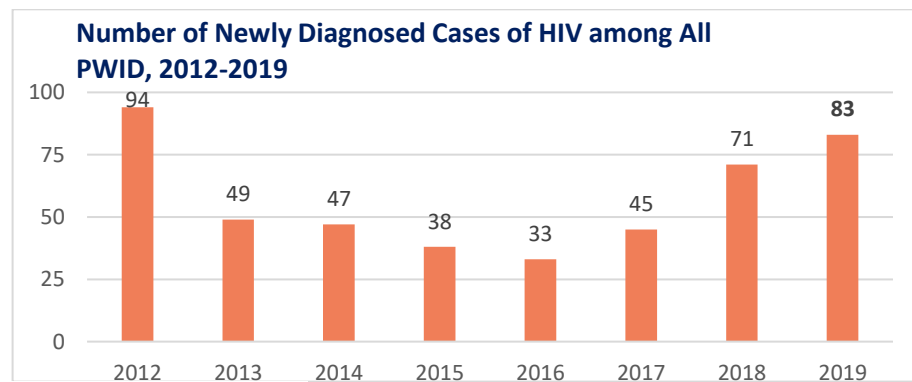
Syringe service programs have helped prevent HIV among people who inject drugs in Philadelphia.



Source: PDPH, AACO, 1983-2019

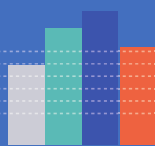
- The number of new HIV diagnoses in PWID peaked in Philadelphia in 1992. Between 1992 and 2016, new HIV diagnoses in this population declined by 95%, a public health success greatly attributed to the implementation of a syringe service program.
- In the first 10 years of the syringe service program, an estimated 10,000 diagnoses of HIV were averted in Philadelphia alone.<sup>1</sup> Each year, \$243 million are saved in Philadelphia from averted cases of HIV.<sup>1</sup>

The number of new HIV infections among PWID has increased since 2016.

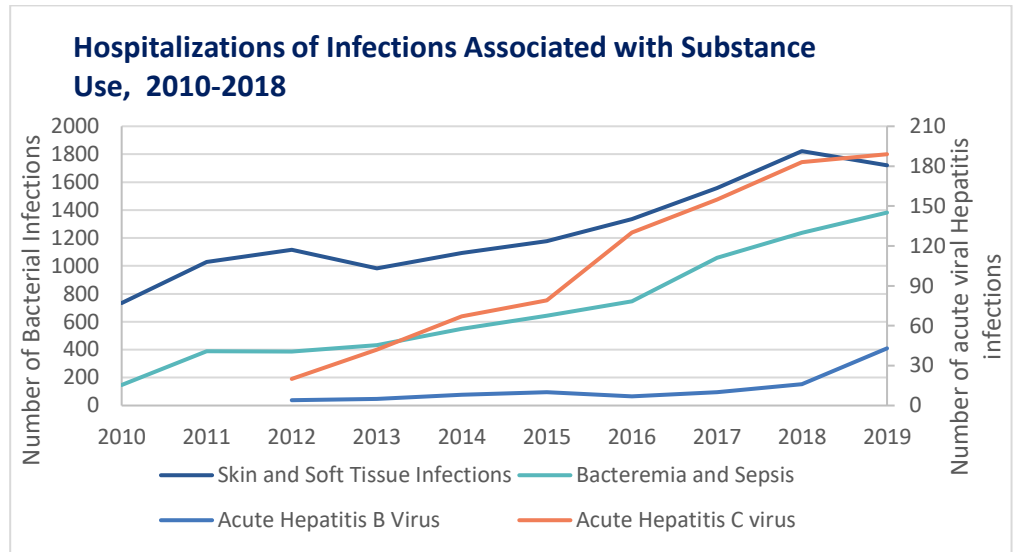


Source: PDPH, AACO, 2012-2019

- From 2016 to 2019, the number of new HIV diagnoses among PWID increased 151%, from 33 cases in 2016 to 83 cases in 2019.
- In 2020, the COVID-19 pandemic led to a 90% decline in community-based HIV testing. This will likely result in more PWID who are infected with HIV and unaware of their status, because persons with HIV who are unaware of their status are more likely to spread HIV to their sexual and syringe sharing partners.
- PWID diagnosed with HIV as part of the current outbreak are less likely to be linked to care than other populations diagnosed with HIV. People living with HIV who receive HIV treatment and become virally suppressed have no risk of spreading HIV to their sexual partners. Lower rates of suppression in PWID are likely contributing to the increase in transmission.



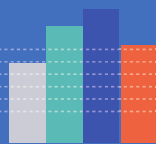
Hospitalizations for infections related to injection drug use have increased since 2010.



Sources: Pennsylvania Healthcare Cost Containment Council, 2010-2019; PDPH Viral Hepatitis Program

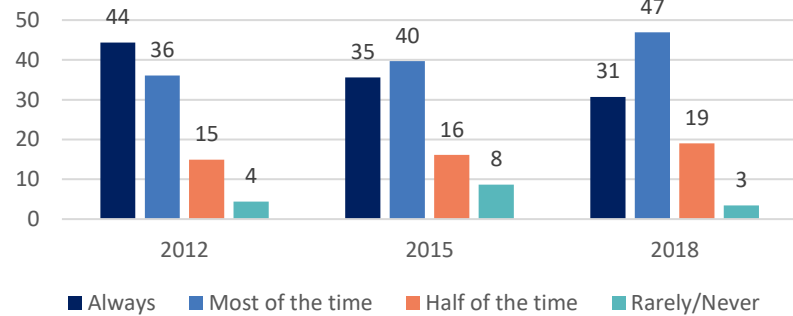
- Infections can be caused by the spread of pathogens that result from re-using contaminated injecting equipment or not cleaning the injection area prior to use.
- Hospitalizations for injection drug use-related infections have increased 263% since 2010 in Philadelphia.
- In 2019, there were 1,721 hospitalizations for SSTI associated with injection drug use.
- In 2019, there were 1,382 hospitalizations for bacteremia and sepsis, a 12% increase since 2018.
- From 2015 to 2019, there was a 139% increase in confirmed acute HCV cases. From 2018 to 2019, there was a 169% increase in confirmed acute HBV cases.
- Expanded access to sterile syringes can help prevent infections associated with substance use.

# CHART



Using clean syringes has declined over the past few years.

**Frequency of Using Clean Syringes in Past 12 Months, 2012-2018**

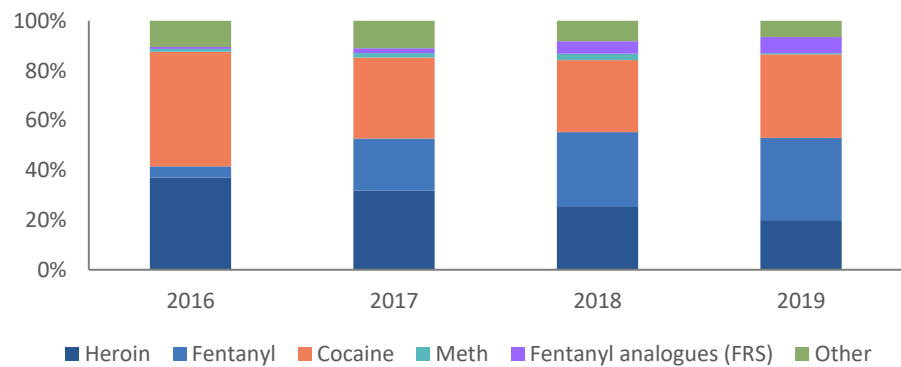


Source: National HIV Behavioral Surveillance System, People Who Injects Drugs, Philadelphia 2012-2018, PDPH AACO

- The percentage of people who inject drugs in Philadelphia that always use sterile syringes declined from 44% in 2012 to 31% in 2018.
- In 2018, 47% reported using clean syringes most of the time, 19% about half the time, and 3% rarely.
- In 2018, 89% of survey participants indicated injecting more than once per day; 48% injecting more than four times per day

The prevalence of fentanyl in drugs seized by law enforcement has increased since 2016.

**Drugs Seized by Law Enforcement in Philadelphia, 2016 - 2019**



Source: Philadelphia Medical Examiner's Office, 2010-2019

- Since 2016, the prevalence of fentanyl in drugs seized by law enforcement has increased by 560%. In 2019, 33% of all drugs seized contained fentanyl.
- The number of overdose deaths with fentanyl or a fentanyl analogue present has dramatically increased since 2016. In 2019, 878 or 76% of all overdose deaths involved fentanyl or a fentanyl analogue (data not shown).



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# CHART



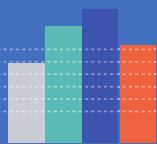
## WHAT CAN BE DONE

### 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.
- Continuing the expansion of community-based HIV testing and re-opening community-based 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), which can include treatment involving a single pill taken once per day.
- Expanding programs that provide sterile syringes in exchange for used syringes to persons who inject drugs in different Philadelphia neighborhoods.
- Distributing naloxone, fentanyl test strips, and other harm reduction services to persons who use drugs

### Health care providers should:

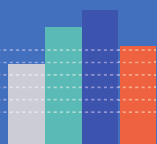
- Provide testing for HIV and other infectious diseases, including in emergency departments and hospital settings.
- Offer testing to high-risk persons. The Health Department recommends HIV, hepatitis B, hepatitis C, and sexually transmitted infection testing and repeat testing every three months for all persons at high risk for HIV infection, including persons who may use or inject drugs, people who are experiencing homelessness, and people who engage in transactional sex.
- Provide referrals to effective harm reduction services, like Prevention Point Philadelphia. Sterile syringes and drug use equipment save lives and prevent new HIV and other infections.
- Provide risk-reduction counseling for all patients, which includes discussions about sexual behaviors and drug use.
- Provide PrEP in primary care practices, substance use disorder treatment programs, and specialized HIV treatment programs.
- Report all new cases of HIV infection in people who inject drugs to the Health Department 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.



## WHAT CAN BE DONE

### People can:

- Get tested for HIV, hepatitis B, and hepatitis C if you have ever injected drugs or have a partner who injects drugs.
  - If HIV positive, promptly begin treatment with antiretroviral therapy.
  - If HIV negative and injecting drugs or have a partner who is injecting drugs, talk with your doctor to learn about PrEP, which is a daily pill to prevent HIV.
  - 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.
  - 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.
  - 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.
  - Get vaccinated against hepatitis B and A.
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## REFERENCES

- 1) Ruiz, M et al. (2019). Using Interrupted Time Series Analysis to Measure the Impact of Legalized Syringe Exchange on HIV Diagnoses in Baltimore and Philadelphia. *Journal of Acquired Immune Deficiency Syndromes*, 82(2): S148–S154. Doi: 10.1097/QAI.0000000000002176

## RESOURCES

### Drug treatment referrals and education:

888-545-2600;

<http://dbhids.org/addiction-services/>

### List of health care providers that provide PrEP:

<https://go.usa.gov/xngJp>

### HIV testing sites in Philadelphia:

<https://www.phila.gov/health/aaco/AACOTesting.html>

### 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)

## Suggested citation:

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