Hepatitis C Prevention

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Our People, Our Problem:

Hepatitis C

It's time to start talking.

Hepatitis C Harm Reduction Project
http://www.hepcproject.org
Why is HCV Prevention Important?

- HCV Mortality has surpassed HIV mortality
- HCV Treatment expensive
- HCV Infection leads to 70-80% chronic infection
- 40-90% of IDU/PWID HCV+ (depending on geographic location)
- IDU/PWID lack access to Care & Treatment
KNOW THE FACTS
In the US, Hepatitis C (HCV) is...

A. The leading cause of liver transplants
B. The most common bloodborne infection
C. 2-4 times more common than HIV
D. The leading cause of death among HIV+ persons
E. All of the above
Question 2

Hepatitis C Virus is transmitted in the SAME body fluids as HIV?

TRUE or FALSE

FALSE
Hepatitis C Transmission

- Hep C Infected Blood
- Risk Behavior
- Opening into the Blood stream
Sharing injection equipment is the #1 cause of new Hepatitis C (HCV) infections?

TRUE or FALSE

TRUE
It’s All About the Blood .....
Other Injecting

PIEDS
Performance & Image Enhancing Drugs
- Hormones
- Steroids
- Botox
- Silicone

Vitamins/Antibiotics
Why is HCV Prevention Important?

- World: 170 Million
- ~ 17,000 new cases of Hepatitis C (HCV) infection every year in U.S.
- HCV is 10\textsuperscript{th} leading cause of death in U.S. (CDC)
- ~ 8,000 - 10,000 people will die from HCV Complications every year in U.S. (CDC)
- > 4 million have been HCV infected (compare to ~ 1 million HIV+ in US)
- 1/3 of PLWHA (HIV+) have HCV
How many people in the US are NEWLY infected each year with HIV & HCV due to syringe & equipment sharing?

A. 10,000 HIV & 5,000 HCV
B. 8,000 HIV & 15,000 HCV
C. 1,000 HIV & 3,000 HCV
D. 4,000 HIV & 9,000 HCV
Question 4

Sexual transmission of Hepatitis C is common?

TRUE or FALSE
Hep C Risk Behaviors

Sexual Transmission: **RARE**
Possible when **BLOOD** is present during sex

TINY amounts of HCV Virus present in seminal and vaginal fluids: not enough to be infectious

VERY low transmission rates in long term studies of sero-discordant couples
Hep C Risk Behaviors

Sexual Transmission:
Present in some MSM communities
Increase likelihood:
• If HIV+
• If have other STI’s
• More sexual partners
• Rough sexual practices
Hep C Risk Behaviors

Medical:

• People who received blood products or transplants prior to 1992

• Lack of infection control procedures.

• Occupational Exposure
Hep C Risk Behaviors

Potential:

• Tattooing & Body piercing using un-sterilized equipment
• Razors or nail clippers
• Sharing snorting straws and pipes
• Mother to child transmission - associated only with blood, not breast milk.
Question 5

ALL people that get infected with HCV will become *chronically* infected with HCV?

TRUE or FALSE
Natural History of HCV Infection

100%

Acute Infection

Resolved
15 - 25%

Chronic
75 - 85%

Cirrhosis
20%

Slowly Progressive
75%

Liver failure, cancer, transplant death 25%

Stable
80%

Alcohol, HIV, hepatitis B
HCV Prevention Attitudes

- HCV infection is INEVITABLE
- HCV infection is INCONSEQUENTIAL
- HCV infection is INDETERMINATE

.........but is it?
Hep C Messages:
Are they Realistic?

Safer Injecting DON’Ts:
• Don’t start injecting
• Don’t have contact with other people’s blood
• Don’t share needles for shooting
• Don’t share water, cookers, or cottons
Interventions to Prevent HCV by Reducing Unsafe Injections?

Combinations of any of these:

- Substance Use Treatment
- Individual Behavioral Interventions
- Syringe disinfection
- Supervised Injection Facilities

- Syringe Access
What do syringe access services look like?

- Fixed Site & Street-based
- Home delivery/SRO Outreach
- Pharmacy
- Prescribed by Doctor
- Peer delivered (PDSE) & secondary exchange
- Mobile (Vans/Backpacks/Walk-about)
- Community Clinics & Hospitals
- Vending machines
What do they do?

• Dispense & Dispose of Injecting Equipment
• HIV/HCV services
• Outreach Services
• Client Intake/Triage
• Drop-in Center
• Group & Individual level interventions
• Medical, Dental & Mental health services
• Counseling and referral
• Case Management
• Housing services
• Safer sex supplies & education
• OD prevention

.....& more!!!
Syringe access does NOT…..

X .. encourage drug use
X .. increase crime rates
X .. increase needlestick injuries

Syringe access DOES…..

✓ .. reduce HIV infection
✓ .. reduce risk for hepatitis C infection
✓ .. link participants to drug treatment, medical care, housing and other social services
It’s All About the Blood ..... 

But is it?
Barriers to HCV Prevention

- Many IDUs not using SAPs
- More than half acquire syringes from potential unsterile source
- Nearly half report “sharing” syringes and other equipment
- Generally participants of SAPs have been injecting for some time
- Large number of IDUs already infected with HCV
- Likelihood of HCV infection from 1st injection 1.5 years – 3.5 years (source: H Hagan)
When Drug Users Fear Interaction with Law Enforcement

Unsafe Injecting Practices
- 1 ½ times more likely to share needles
- Inject in a hurry, unhygienic, damage veins, etc
- Don’t “test” strength drug to avoid OD
- Discard of syringes inappropriately
- Don’t collect/carry enough injecting equipment to meet injecting needs

Also
- Reduces IDUs attending SEPs
- Displaces DU’s, difficult to outreach
- Don’t access other health services
- Don’t report OD
HOW CAN YOU PREVENT HEP C?

IF YOU SHARE YOUR DRUGS, DON'T SHARE YOUR BLOOD

Works, sets, rigs, gizmos. Cooker, spoon, cotton, filter, water. Whatever you call them, use them safely when you inject drugs. Hepatitis C is a virus spread through blood that can cause liver disease. So go to a needle exchange or ESAP pharmacy and take care of yourself and your friends: use a new set each time you inject.

Hepatitis C Harm Reduction Project

www.hepcproject.org

Your Life is worth it
Long-Term Prevention.....is it possible?

- Investigate IDUs who have been injecting 8-15 years in NYC and have remained HIV & HCV negative NDRI, (NIDA grant)

How do “They” do it?

- Staying Safe: Training Injection Drug Users in Strategies to avoid HCV & HIV
High-Risk Situations?

- Being dope sick
- Needle shortages
- Homelessness / unstable housing
- Losing social ties with non-users (family & friends)
- Facing stigma by not taking care of yourself
- Losing a job or other steady income (*Cost of Drug < $ Available*)
- Arrest, incarceration and release
HRC thanks you for your participation in this workshop!

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