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# Strategies of drug users to avoid infection with hepatitis C

Results from five European countries

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# Background – HCV is a major health concern

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Harm reduction (DCR, NSP, substitution treatment) has an impact on the reduction of

- HIV (prevalence is stabilizing across the EU below 10%)
- But not on HCV
  - Hepatitis C is still highly prevalent as on average 60% of IDUs in Europe are infected (EMCDDA 2010, Cornberg et al. 2011)
- Special groups at particular risk of infection
  - Young drug users below the age of 25
  - Drug users injecting less than two years

Low knowledge of  
HCV transmission  
and prevention

# The European study

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## Objectives

1. To review the evidence base for and practice of HCV prevention
2. To explore how the risk group of drug users manage to avoid an infection with hepatitis C
3. To develop recommendations for HCV prevention addressed to young DUs

## Approaches

- Part 1** Scientific evidence for effective for HCV prevention
- Part 2** Collection of guidelines + standards for HCV prevention in each EU MS
- Part 3** Overview on implemented HCV prevention measures in five EU regions / cities
- Part 4** Interviews with young HCV-negative drug users and with experts
- Part 5** Local conferences to present and discuss results



# Partners and cities involved

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## Germany: CIAR

- Hamburg – drug treatment, HR, prison

## Netherlands: Mainline Foundation

- Amsterdam, Leiden, Almelo, Leeuwarden – drug treatment, HR, prisons

## Lithuania: EHRN (Eurasian Harm Reduction Network)

- Vilnius, Klaipeda – HR

## Catalonia: Barcelona Health Department of Catalonia

- Barcelona, Lleida, Sant Adrià del Besòs – HR, prisons

## Greece: Kethea drug treatment provider

- 4 Kethea treatment & counselling centres in Piraeus, Athens



# Methods for interviews with drug users

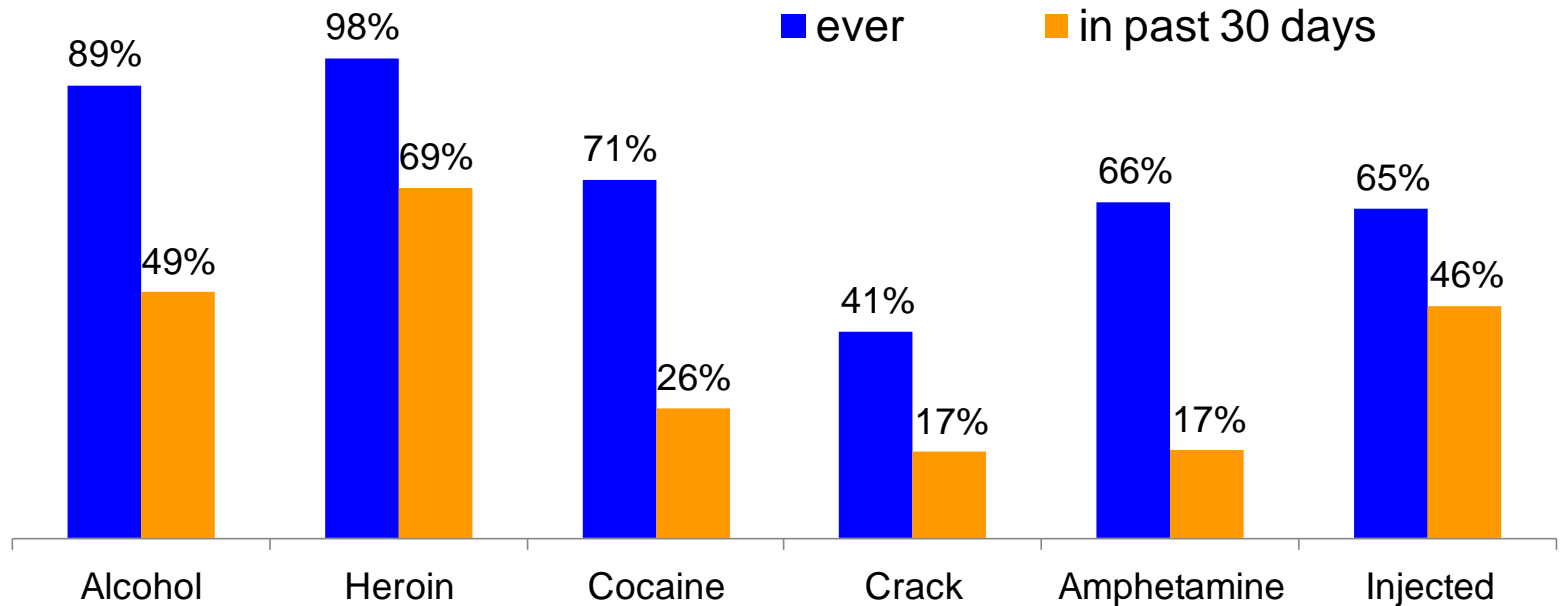
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- **Inclusion criteria:** Current drug users who are
  - below the age of 30 - **has been extended to 35**
  - hepatitis C negative or who are not sure if they are infected,
  - use heroin, cocaine powder, crack or amphetamines regularly – (at least 3 days a week)
- **Structured questionnaire** on
  - Drug use behaviour
  - Strategies to prevent infection with hepatitis C
  - Knowledge on hepatitis C (quiz on HCV)
- Interviews were conducted under supervision and guidance of staff in low-threshold centres, drug treatment, outreach work, counselling centres, prisons
- Intention was to include **100** drug users in each of the five European countries

# Database - Questionnaires

	Germany	Netherlands	Lithuania	Catalonia	Greece	Total
N	66	21	89	97	104	377
Age	26.9	25.8	25.5	27.1	24.9	26
Female (%)	43.9	9.5	40.4	38.1	14.4	31.6
In last 12 months tested for (%)						
HIV	78.8	42.9	71.9	68.8	58.0	66.9
HBV	79.7	38.1	28.1	57.9	59.9	53.9
HCV	80.0	38.1	41.6	67.4	58.7	59.4
<b>Infected with (%)</b>						
HIV	1.5 (n=1)	0	0	3.1 (n=3)	0	1.1
HBV	3.0	0	6.7	4.2	1.0	3.5
HCV	0	0	0	0	0	0

# Substances used (n=377)



## In past 30 days

69% used **heroin** – mostly in Catalonia, followed by Greece

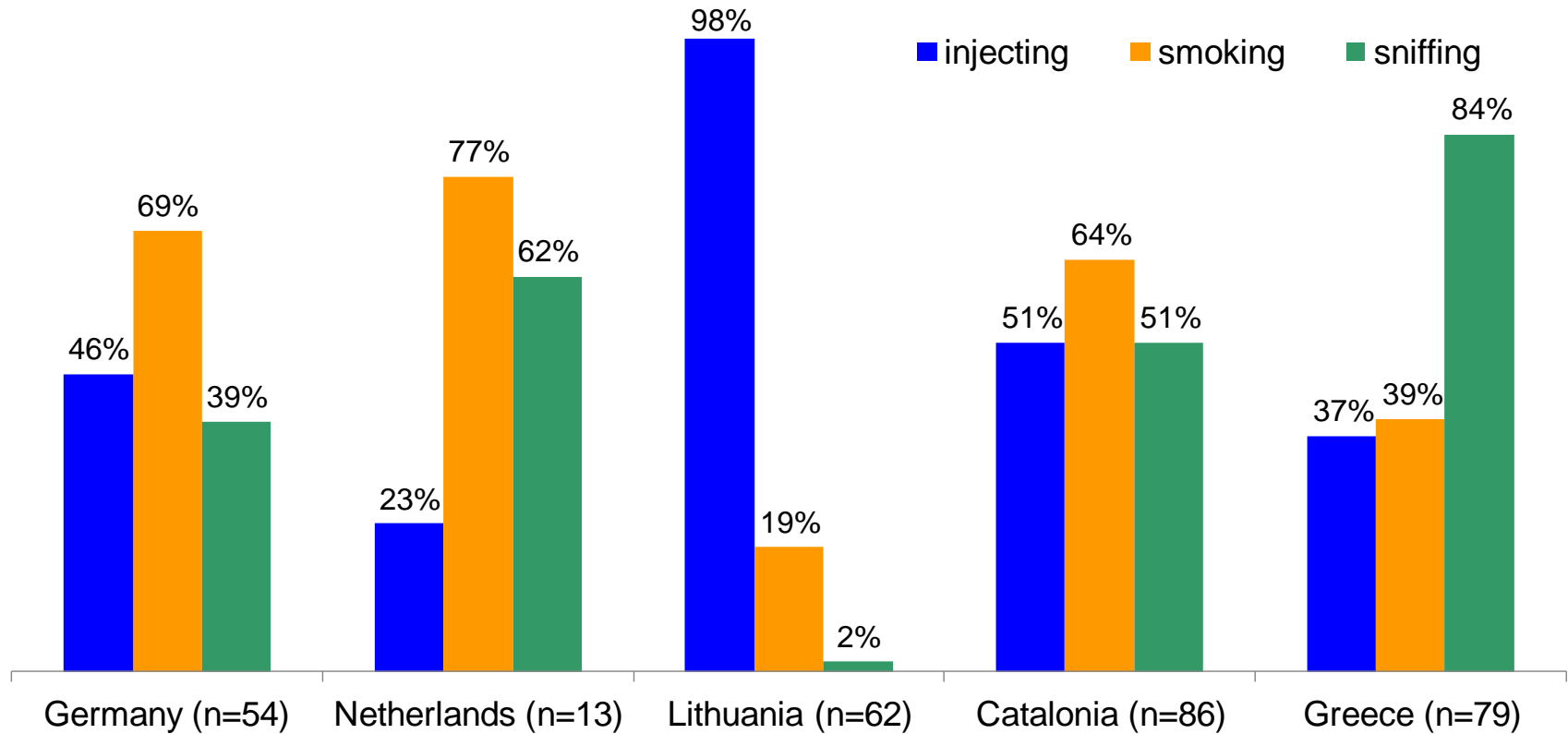
26% used **cocaine** – most often in Germany and Catalonia

17% used **crack** – mainly in Germany

17% used **amphetamines** – mainly in Netherlands, followed by Lithuania

# Routes of administration – in past 30 days (n=294)

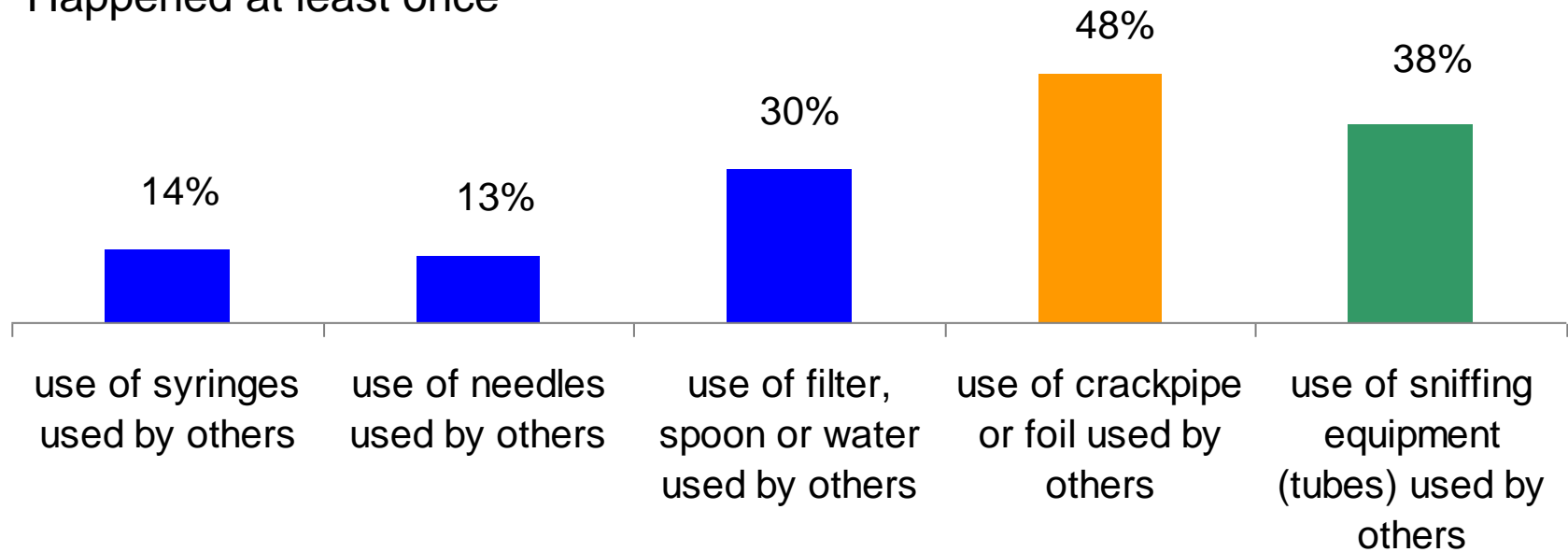
Those who injected, smoked or sniffed substances in the past 30 days





# Risk behaviour in past 30 days (n=294)

Happened at least once



Injected in past 30 days (n = 159)

Smoked in past 30 days (n = 136)

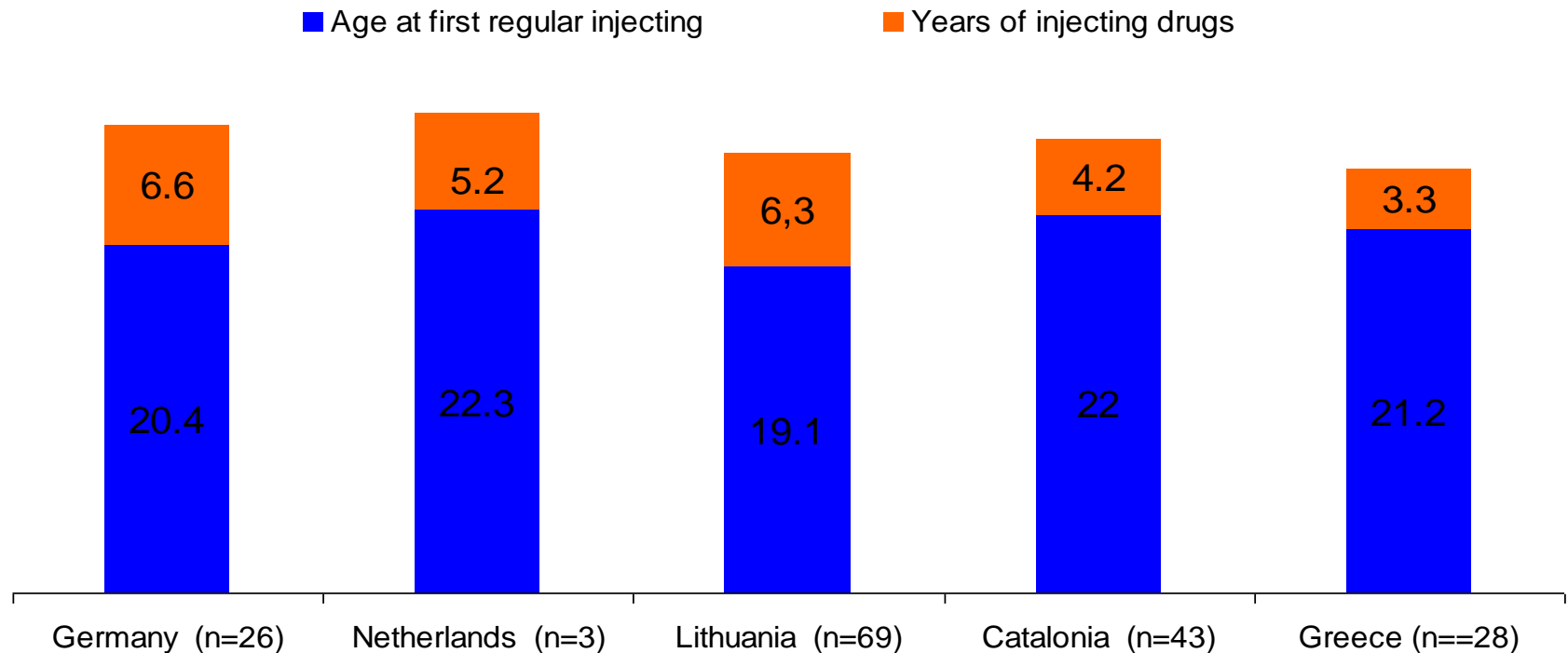
Sniffed in past 30 days (n = 138)

# Risk behaviour and use of harm reduction

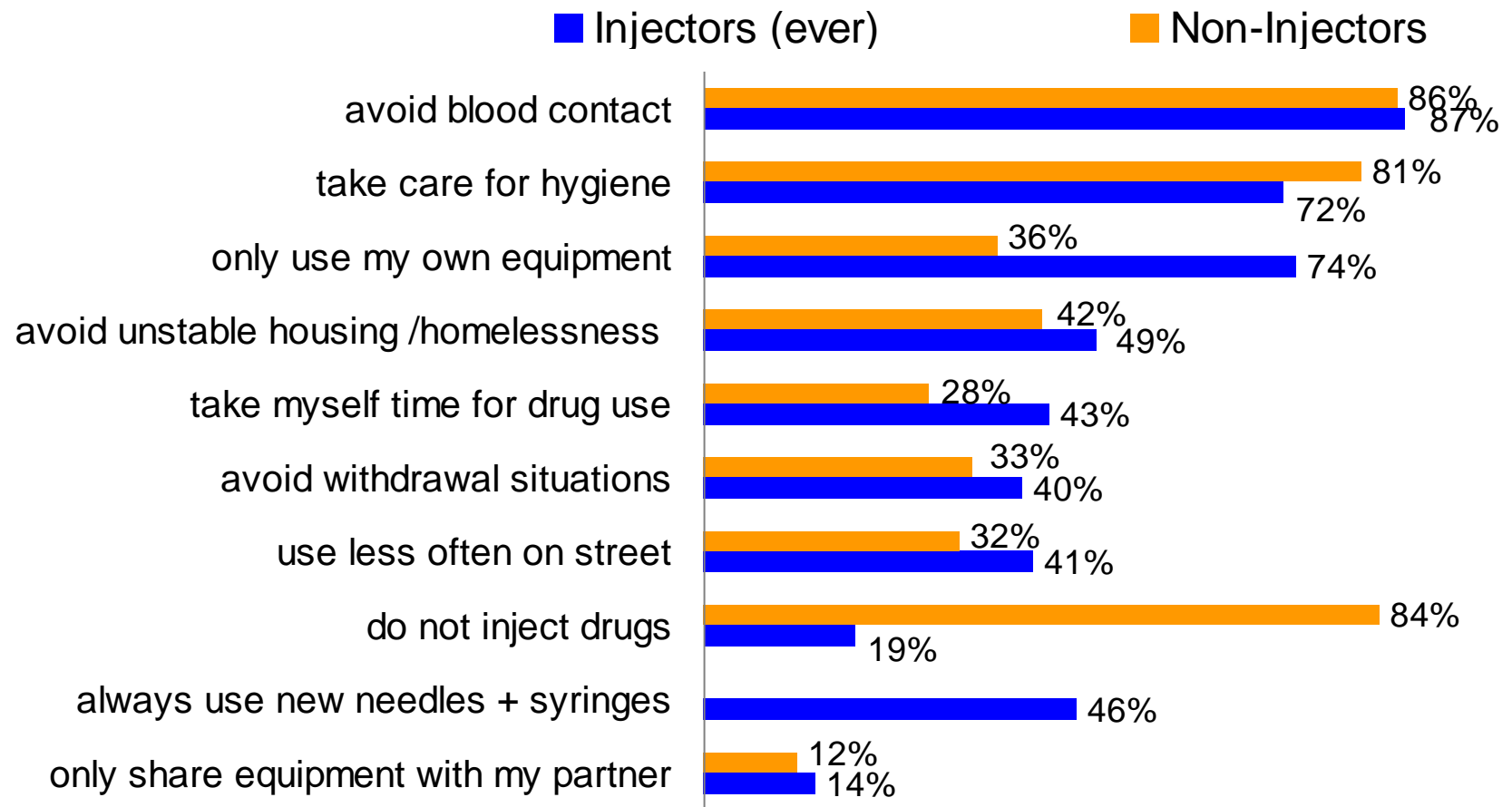
Harm reduction services used in past 30 days	Used by Injectors (n=254)	Used by Non-injectors (n=129)
Any service used	82%	61%
Syringe exchange	59%	0
Received smoking foil	13%	36%
Education for hygiene	30%	16%
Advice on safer use	48%	26%
Testing for HIV and hepatitis	54%	39%
Use of services has helped to remain HCV-negative	57%	55%
Currently in substitution treatment	40%	34%
Months in substitution treatment	10.7	11.8

# HCV-free years among IDUs who injected in past 30 days (n=169)

65% of all respondents have ever injected  
On average they inject since 5.3 years and remained negative for HCV



# Strategies to prevent HCV infection (n=377)



# Main reasons for avoiding HCV infection

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- Not sharing drug use equipment - appears to be very different
  - Partly not sharing any equipment at all
  - Partly not sharing needles
  - Be the first one preparing the drug if sharing with others
  - Smoking instead of injecting if no clean needles and syringes are available
- Avoid blood contact
  - Safer sex
  - Using drugs only alone, avoid contact with injectors
  - Not sharing with those users known to be infected
  - No tattoos in prison, not sharing razors
- Hygiene
  - Try to avoid sharing of injecting and smoking equipment
  - Only sharing with well known persons such as brother, partner
  - Taking care for own body, using disinfectants
  - Keeping distance to people infected

# Summary

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- Risk behaviour occurs
  - Even though high risks such as sharing of needles and syringes is quite rare
  - But sharing of paraphernalia and smoking equipment is rather widespread
- Main prevention strategies to remain HCV negative
  - **For injectors**
    - Utilisation of harm reduction services, in particular NSP, education in safer use and testing
    - Avoid sharing of drug use equipment
    - Take more time for drug use
  - **For smokers and sniffers**
    - Also testing
    - „Blood awareness” = avoid blood contact, not injecting, hygiene = distance to injectors