HEPATITIS C - USA (02): (MINNESOTA)

A ProMED-mail post
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Health officials suspect the rising rate of heroin use in Minnesota may be tied to the increase of people being diagnosed with hepatitis C in the state, Minnesota Public Radio reports. Officials fear the spread of hepatitis C, a disease that can destroy one's liver, is being exacerbated by the sharing of needles.

"Certainly, hepatitis C is transmitted through injection drug use, so people who inject drugs are at high risk of getting hepatitis C," Minnesota Department of Health epidemiologist Kristin Sweet tells MPR. "If we see increases in injection drug use, it makes sense that we'd see hepatitis C as well." The CDC says the most common way that hepatitis C virus is spread is "sharing needles or other equipment to inject drugs."

Sweet tells MPR that 32 Minnesotans were diagnosed with hepatitis C in 2012; but the actual number of people who contract the disease is more because many people do not develop symptoms and as a result, don't get tested. In May 2013, the department estimated about 39,000 people were living with the disease statewide, [KSTP-TV] said.

Advocates tell MPR that needle exchange programs, which provide new syringes to users and destroy old ones are effective in stopping the spread of HIV and hepatitis C, but there's a stigma that it also encourages drug use. That stigma in turn makes it difficult to obtain funding for such programs.

MPR says only 3 stand alone needle exchanges operate in the state.

Meanwhile, counties in the metro area are trying to get a handle on the rising number of heroin-related deaths. In February 2014, Hennepin County Sheriff Rich Stanek said 54 people died of heroin overdose in the county in 2013, making it the deadliest year yet for such deaths in the county. Stanek said the number was 7 times higher than just 3 years prior, when 8 people died from heroin overdoses.

In addition, Anoka County officials held 3 community forums in January and February 2014 to address the escalating problem of heroin use. Anoka County law enforcement officials say the number of deaths due to heroin overdoses in the county has tripled in the last 2 years.
According to KSTP, USA Senator Amy Klobuchar was at the 17 Feb 2014 forum to talk about her strategy to urge the Drug Enforcement Agency to focus on the jump in heroin use.

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[Neither the statement that a needle exchange program (NEP) encourages increased drug use among program participants or the recruitment of 1st-time drug users, nor the parallel statement that the availability of the "morning after" pill encourages increased sexual contact are at all true.

The following reference is presented in support of NEPs:

Abstract
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Injecting drug users (IDUs) are at high risk for infection by human immunodeficiency virus (HIV) and other blood-borne pathogens. In the United States, IDUs account for nearly one-third of the cases of acquired immunodeficiency syndrome (AIDS), either directly or indirectly (heterosexual and perinatal cases of AIDS where the source of infection was an IDU). IDU also account for a substantial proportion of cases of hepatitis B (HBV) and hepatitis C (HCV) virus infections.

The primary mode of transmission of HIV among IDUs is parenteral, through direct needle sharing or multiperson use of syringes. Despite high levels of knowledge about risk, multiperson use of needles and syringes is due primarily to fear of arrest and incarceration for violation of drug paraphernalia laws and ordinances that prohibit manufacture, sale, distribution, or possession of equipment and materials intended to be used with narcotics.

It is estimated that in 1997 there were approximately 110 needle exchange programs (NEPs) in North America. In part, because of the ban on the use of Federal funds for the operation of needle exchange, it has been difficult to evaluate the efficacy of these programs.

This chapter presents data from the studies that have evaluated the role of NEPs in HIV prevention. Evidence for the efficacy of NEPs comes from three source: (1) studies originally focused on the effectiveness of NEPs in non-HIV blood-borne infections, (2) mathematical modeling of data on needle exchange on HIV seroincidence, and (3) studies that examine the positive and negative impact of NEPs on HIV and AIDS. Case-control studies have provided powerful data on the positive effect of NEPs on reduction of 2 blood-borne viral infections
(HBV and HCV). For example, a case-control study in Tacoma, Washington, showed that a 6-fold increase in HBV and a 7-fold increase in HCV infections in IDUs were associated with nonuse of the NEP. The 1st federally funded study of needle exchange was an evaluation of the New Haven NEP, which is legally operated by the New Haven Health Department. Rather than relying on self-report of reduced risky injection drug use, this study utilized mathematical and statistical modeling, using data from a syringe tracking and testing system. Incidence of HIV infection among needle exchange participants was estimated to have decreased by 33 percent as a result of the NEP.

A series of Government-commissioned reports have reviewed the data on positive and negative outcomes of NEPs. The major reports are from the National Commission on AIDS; the US General Accounting Office; the Centers for Disease Control/University of California; and the National Academy of Sciences. The latter 2 reports are used in this chapter. The aggregated results support the positive benefit of NEPs and do not support negative outcomes from NEPs. When legal restrictions on both purchase and possession of syringes are removed, IDUs will change their syringe-sharing behaviors in ways that can reduce HIV transmission. NEPs do not result in increased drug use among participants or the recruitment of first-time drug users."

The increase in reported cases of hepatitis C in IVDU (intravenous drug users) more recently can also reflect increased screening of individuals for the infection due to increased awareness of physicians and more advertising by big pharma. Furthermore, increased overdose deaths can be in part caused by changes in the content of the injected substances. Despite these statements, the aggressive use of NEPs will decrease the spread of blood borne pathogens and, until the availability of an effective HCV vaccine, is the best approach to decrease HCV transmission. - Mod.LL

A HealthMap/ProMED-mail map can be accessed at: <http://healthmap.org/r/3eo9>.