

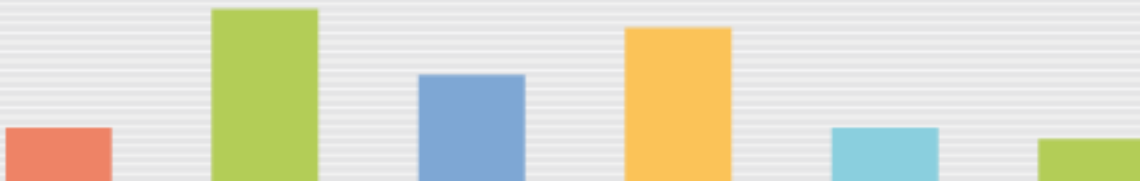


European Monitoring Centre  
for Drugs and Drug Addiction

# EMCDDA-update HIV/HCV among people who inject drugs: situation and response

Dagmar Hedrich

The EU HIV/AIDS Civil Society Forum: 23-24 November 2015, Luxembourg



# Latest European overview

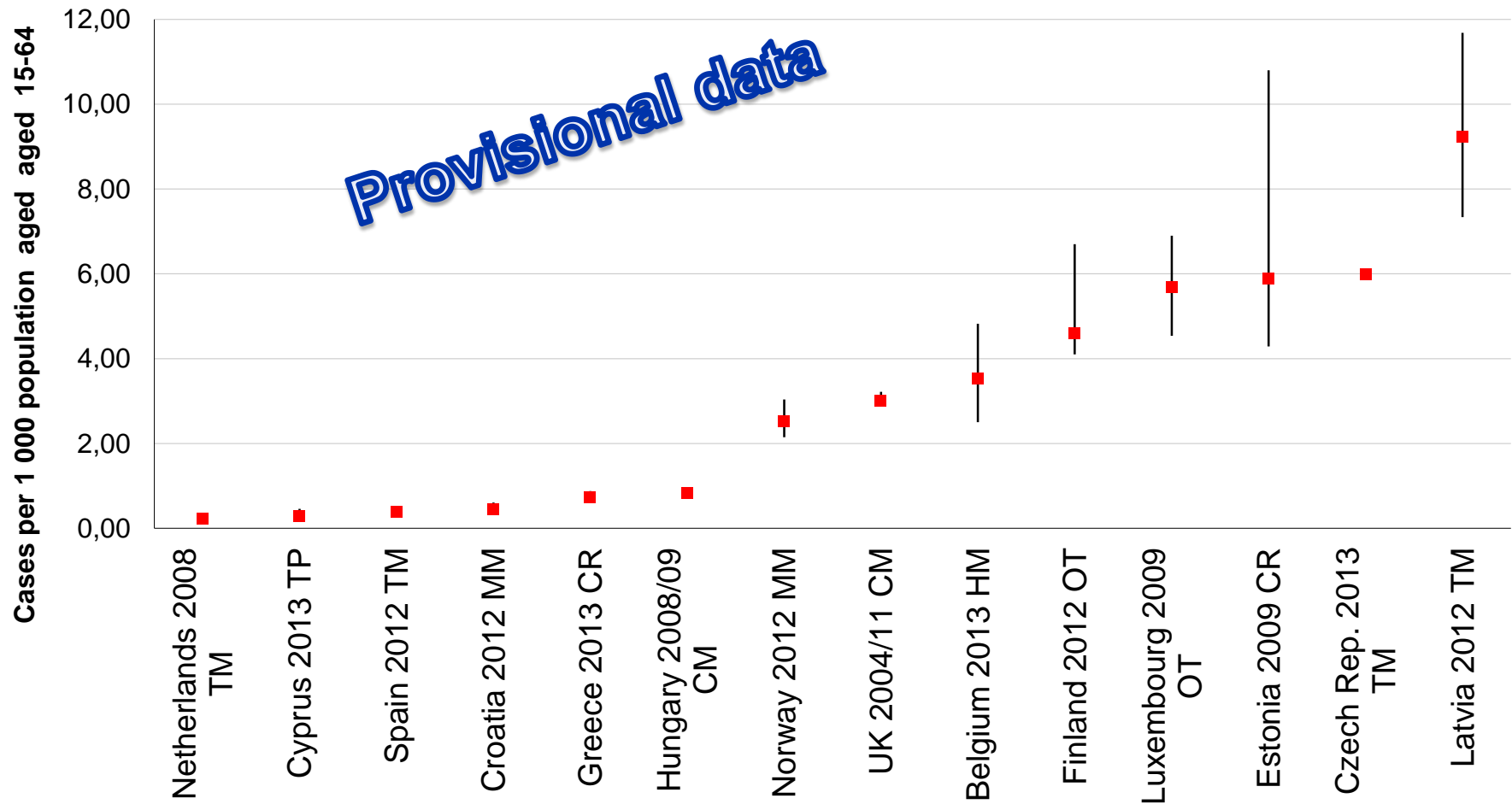
- Multi-indicator based analysis
- Update on HIV, hepatitis and other injecting-related harms in Europe
- Stimulant injecting and new risk behaviours
- Prisons as risk settings
- Trends in harm reduction funding

**Released in 09/2015**

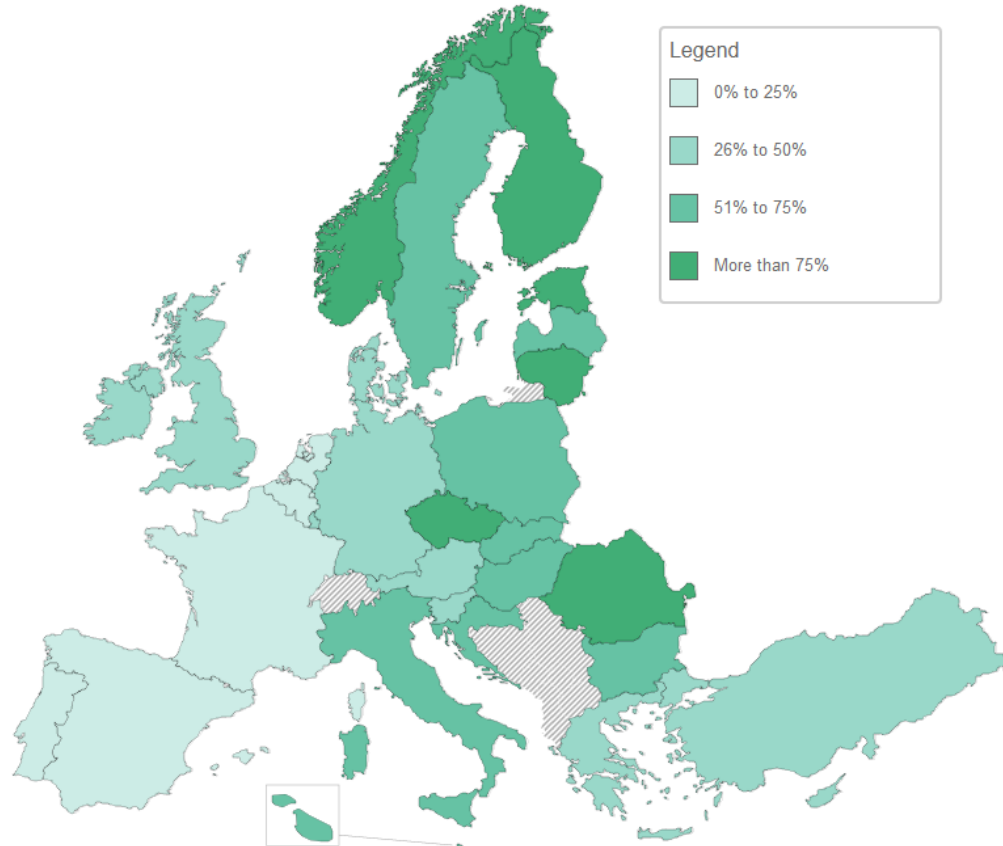


# Estimates of the prevalence of injecting drug use

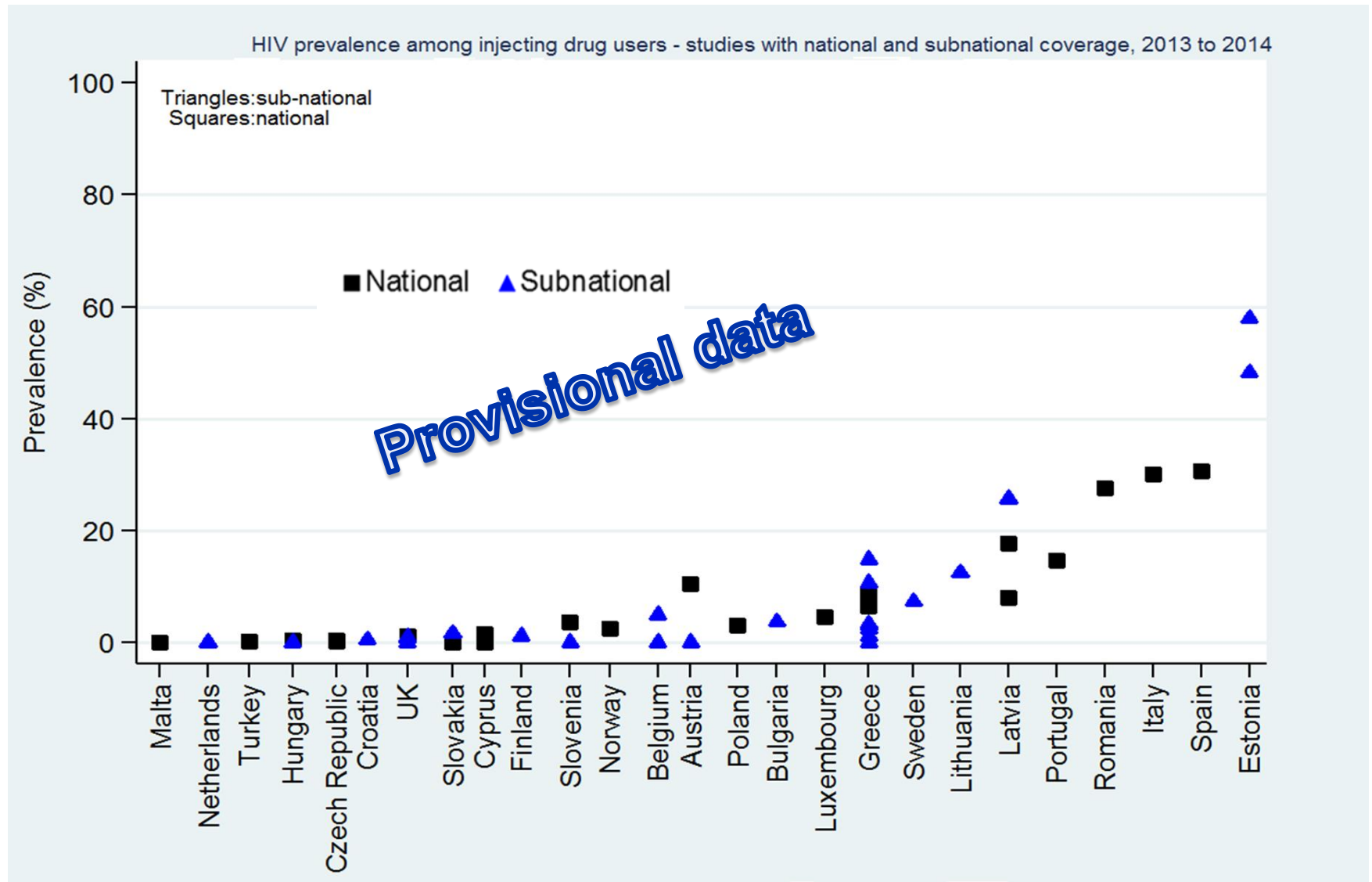
(rate per 1 000 population aged 15–64), 2007–14 data collection (last study available)



# Prevalence of injection among clients entering treatment with opioid as their primary drug



# HIV prevalence among injecting drug users – studies with national and subnational coverage 2013-2014



# Health and social responses to drug use

Countries: health and social responses: [Interactive maps](#) [Treatment profiles](#) [Harm reduction profiles](#)

## Czech Republic

Adult population:

7 188 211

Problem opioid users (POU):

10 700

Injecting drug users (IDU):

42 700

Drug-induced deaths:

38

[Start page](#)

[Treatment](#)

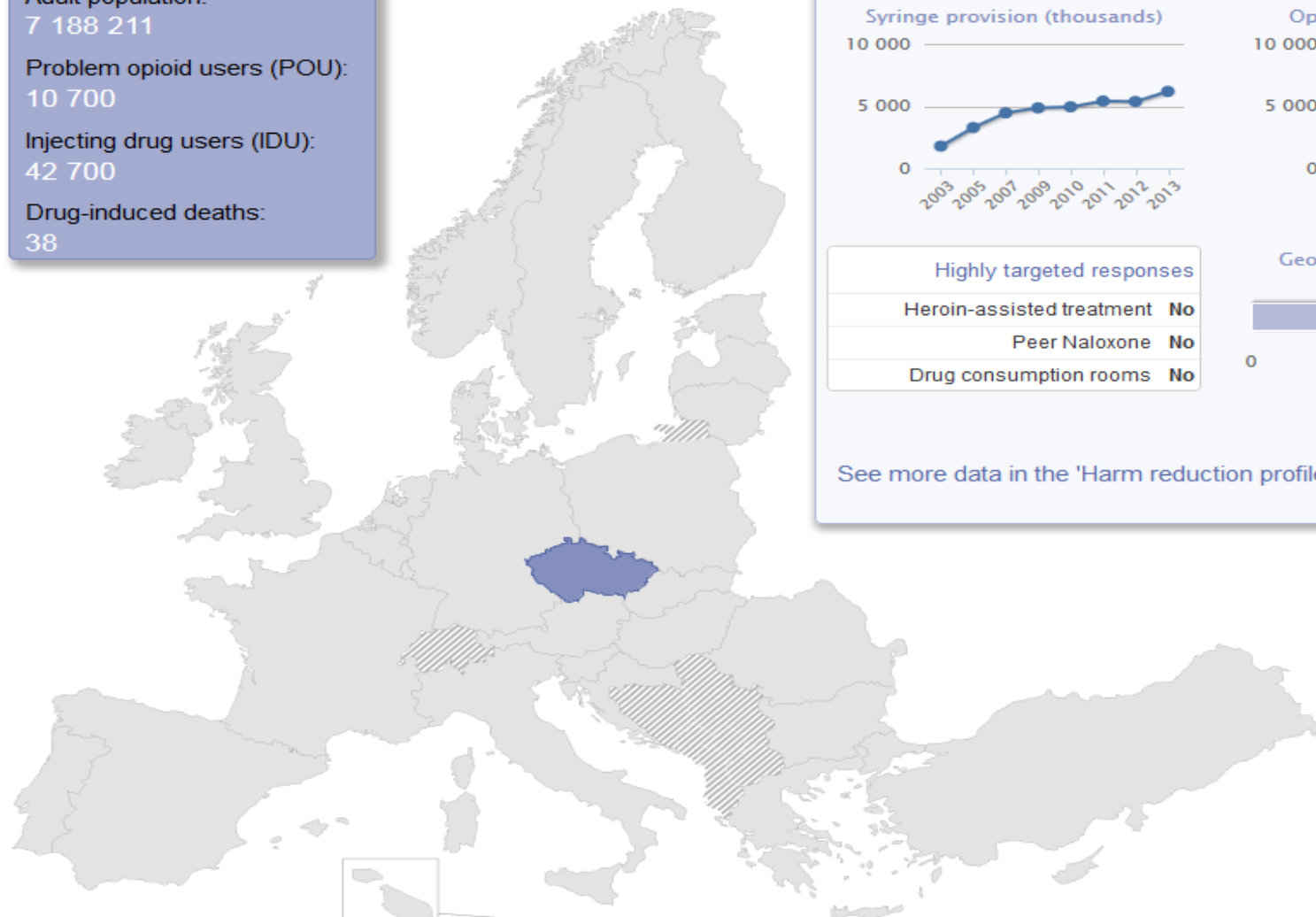
**[Harm reduction](#)**

[Social reintegration](#)

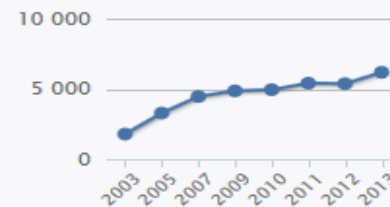
[Prison settings](#)

[Timeline](#)

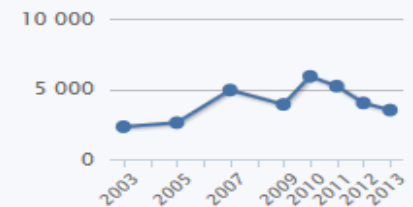
[Help](#)



Springer provision (thousands)



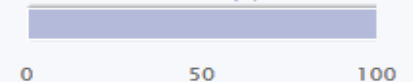
Opioid substitution clients



### Highly targeted responses

Heroin-assisted treatment	No
Peer Naloxone	No
Drug consumption rooms	No

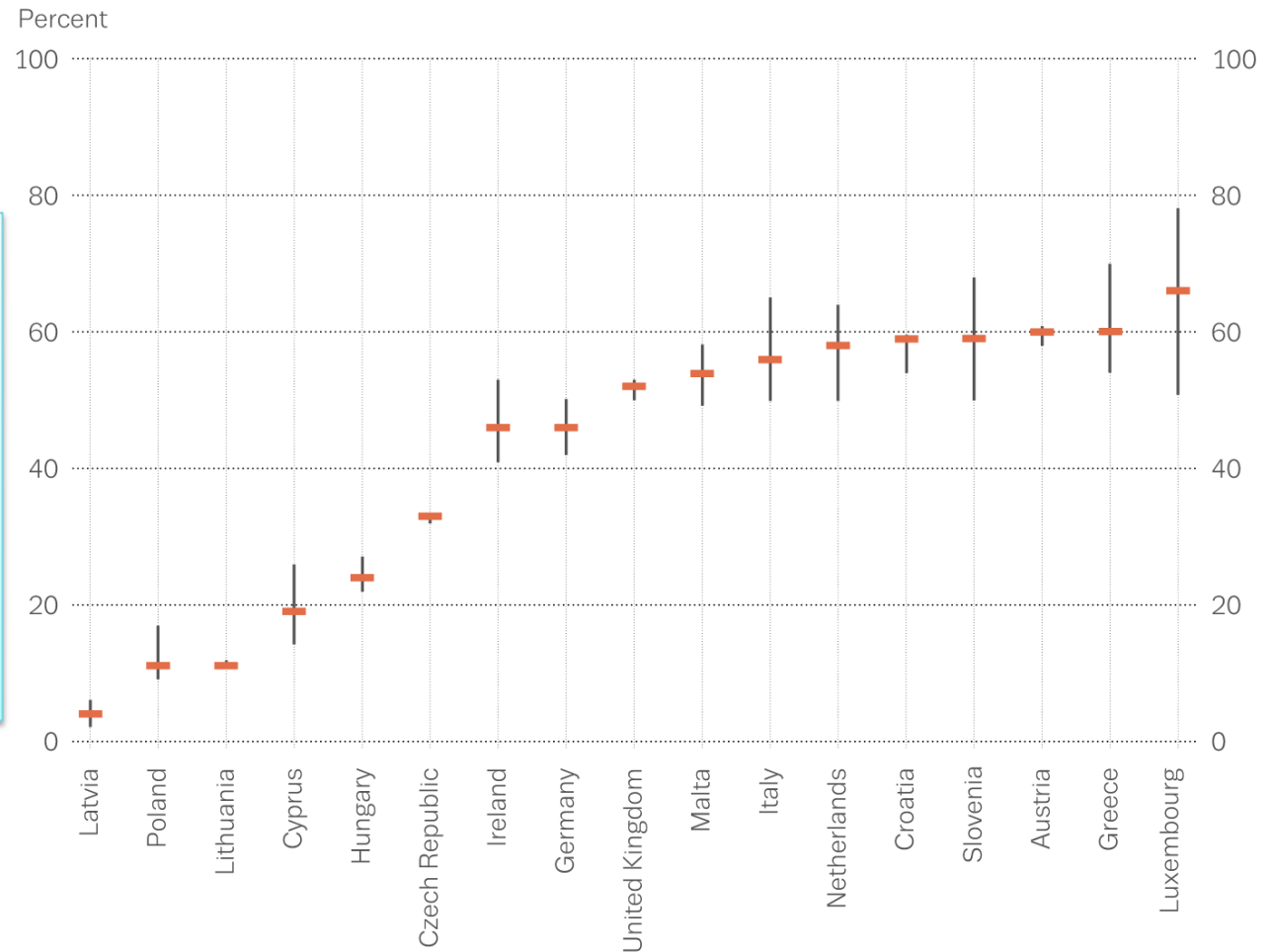
### Geographical distribution of NSP (%)



[See more data in the 'Harm reduction profile' for Czech Republic »](#)

# Significant level of drug treatment provision

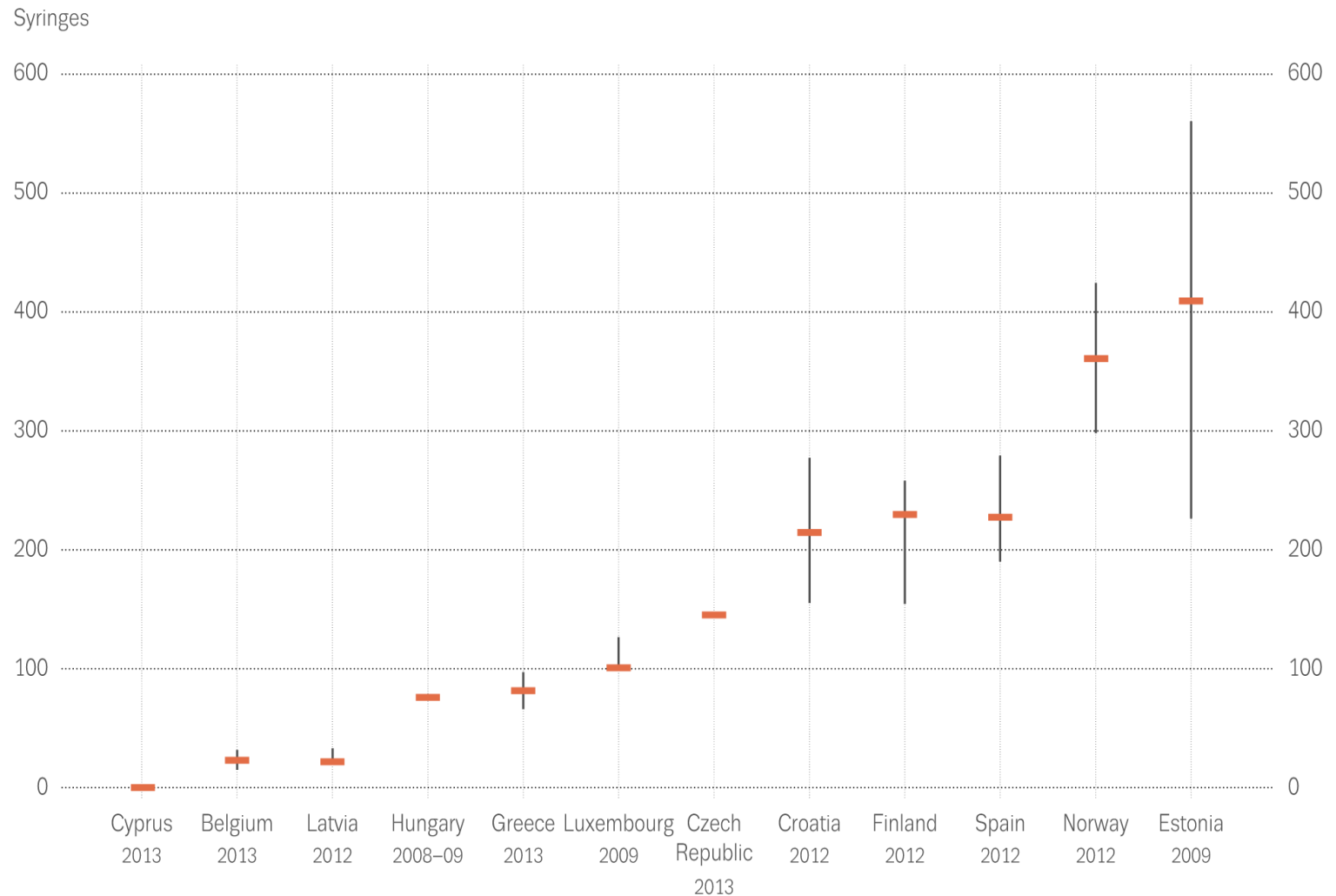
More than half of the 1,3 million problem opioid users are in opioid substitution treatment



NB: Data displayed as point estimates and uncertainty intervals.



# Variable levels of syringe provision



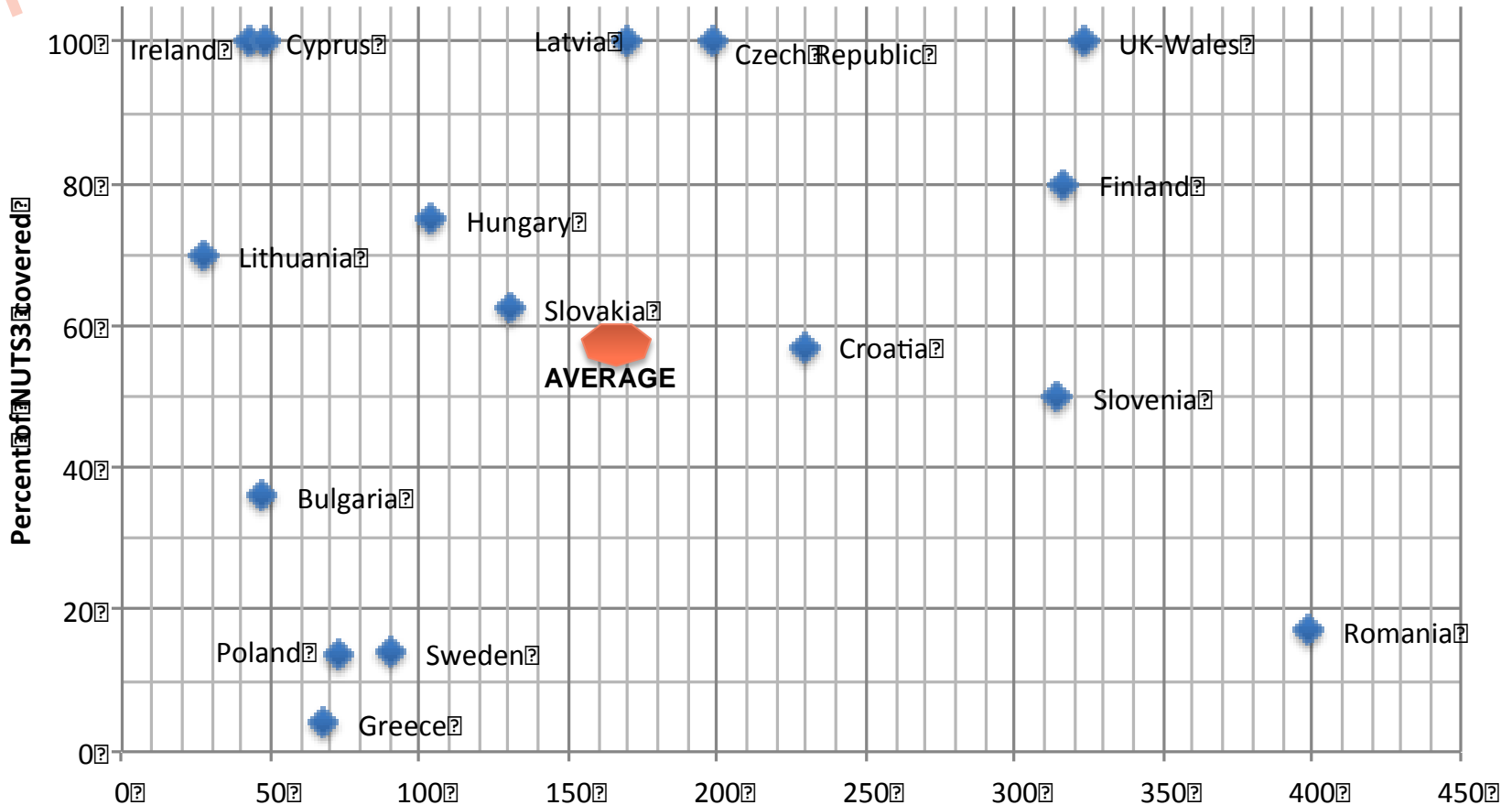
NB: Data displayed as point estimates and uncertainty intervals.





# NSP-sites: geographical coverage and performance

Provisional data



Performance: Syringes per NSP client



## Appendix 2

**Risk assessment — supplementary table. Indicators of HIV notification trend, HIV and HCV prevalence estimates, transmission risk and prevention coverage in 30 European countries**

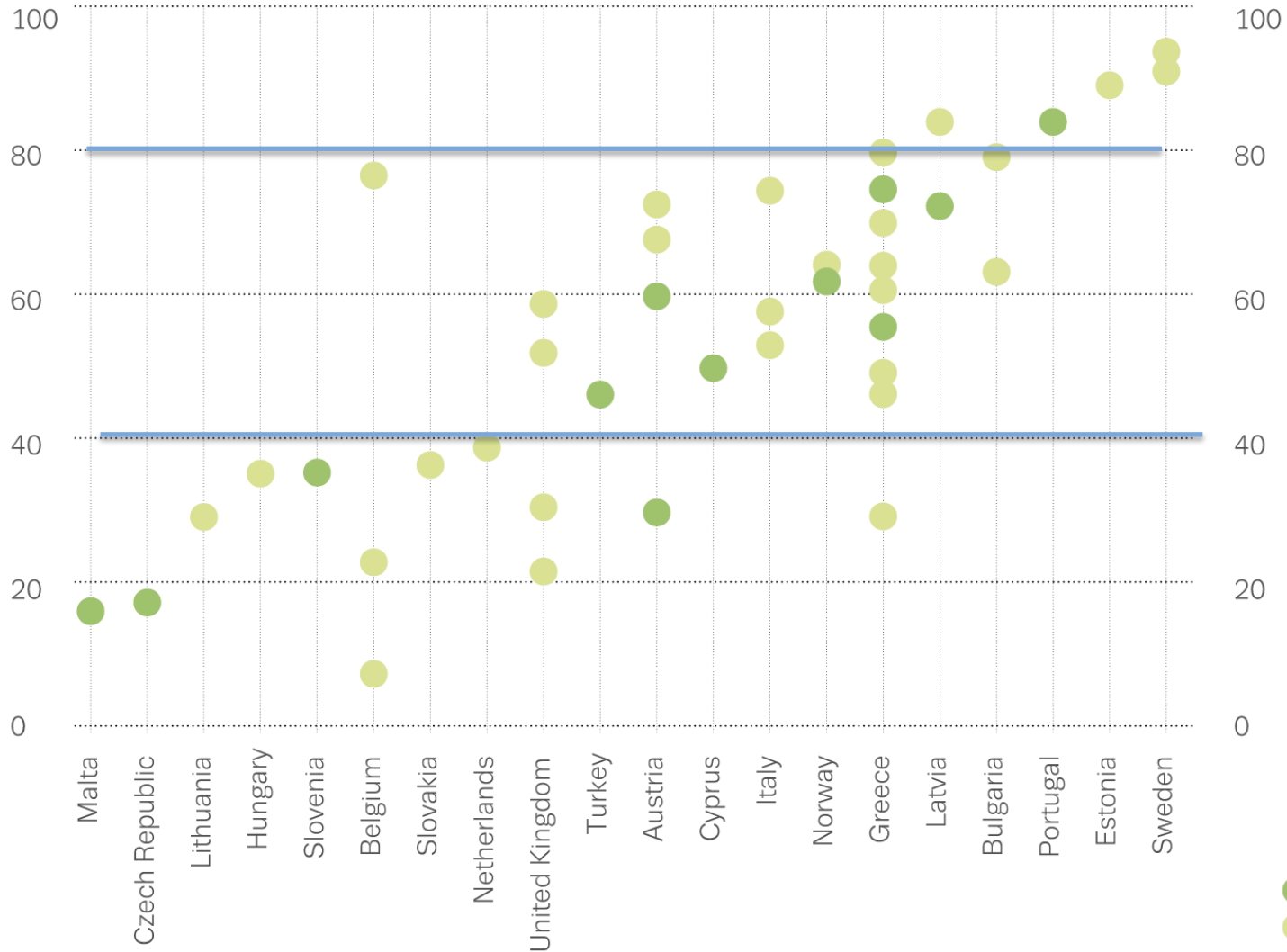
Country	HIV-related indicators		Indicators of transmission risk		Intervention coverage indicators	
	HIV case trend (1)	HIV prevalence trend	HCV prevalence increasing or high HCV prevalence	Injecting drug use prevalence increasing or high	Problem opioid users in substitution treatment (%) (2)	Syringes distributed by specialised programmes (per injecting drug user per year) (3)
Austria					60	
Belgium						23
Bulgaria						
Croatia					41	215
Cyprus					19	0
Czech Republic					34	145
Denmark						
Estonia						407
Finland						226
France					80	
Germany					46	
Greece					62	81
Hungary					24	76
Ireland					41	
Italy					56	
Latvia					4	27
Lithuania					11	
Luxembourg					65	101
Malta					54	
Netherlands					58	
Norway					>50	359
Poland					11	
Portugal						
Romania						
Slovakia					8	
Slovenia					47	
Spain					>50	226
Sweden						
Turkey						
United Kingdom					45	

None of the following risk factors identified: increase in HIV case reports or prevalence of HIV or HCV; increase in transmission risk; low intervention coverage.

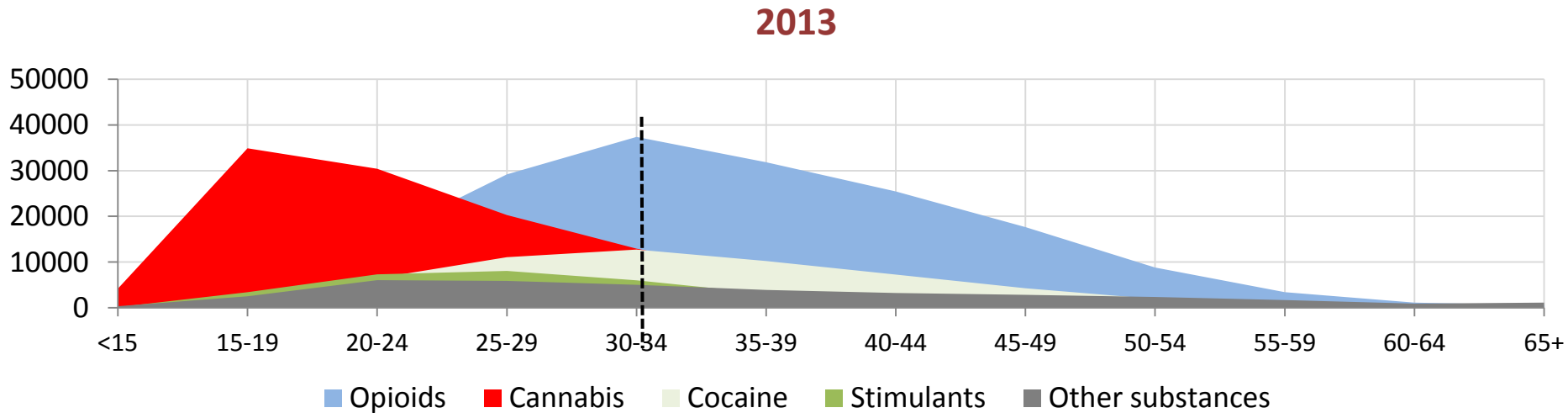
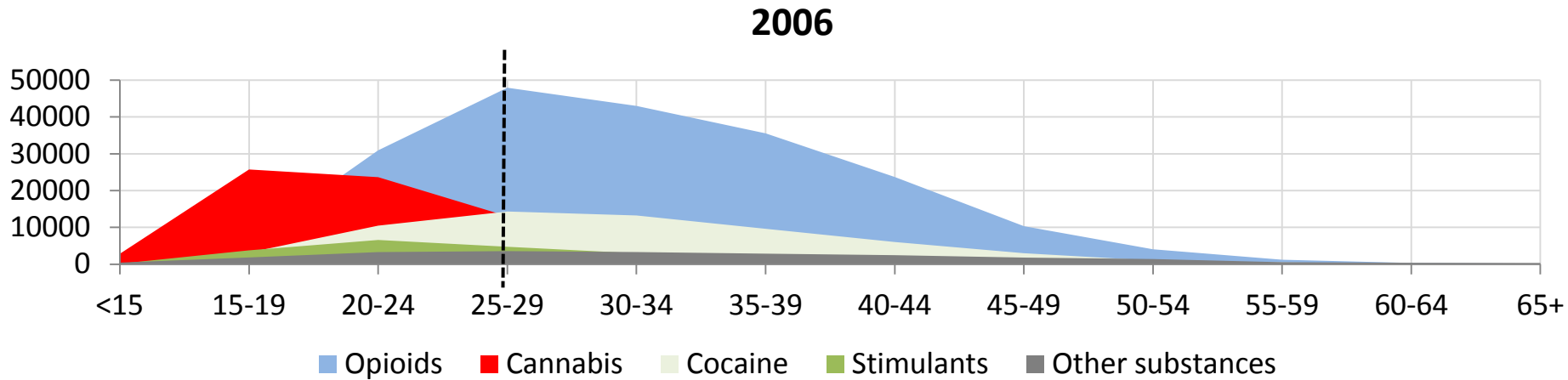
Risk factors possibly present: HIV or HCV prevalence or transmission risk showing increase at subnational level or

# HCV antibody prevalence among PWID 2012–13

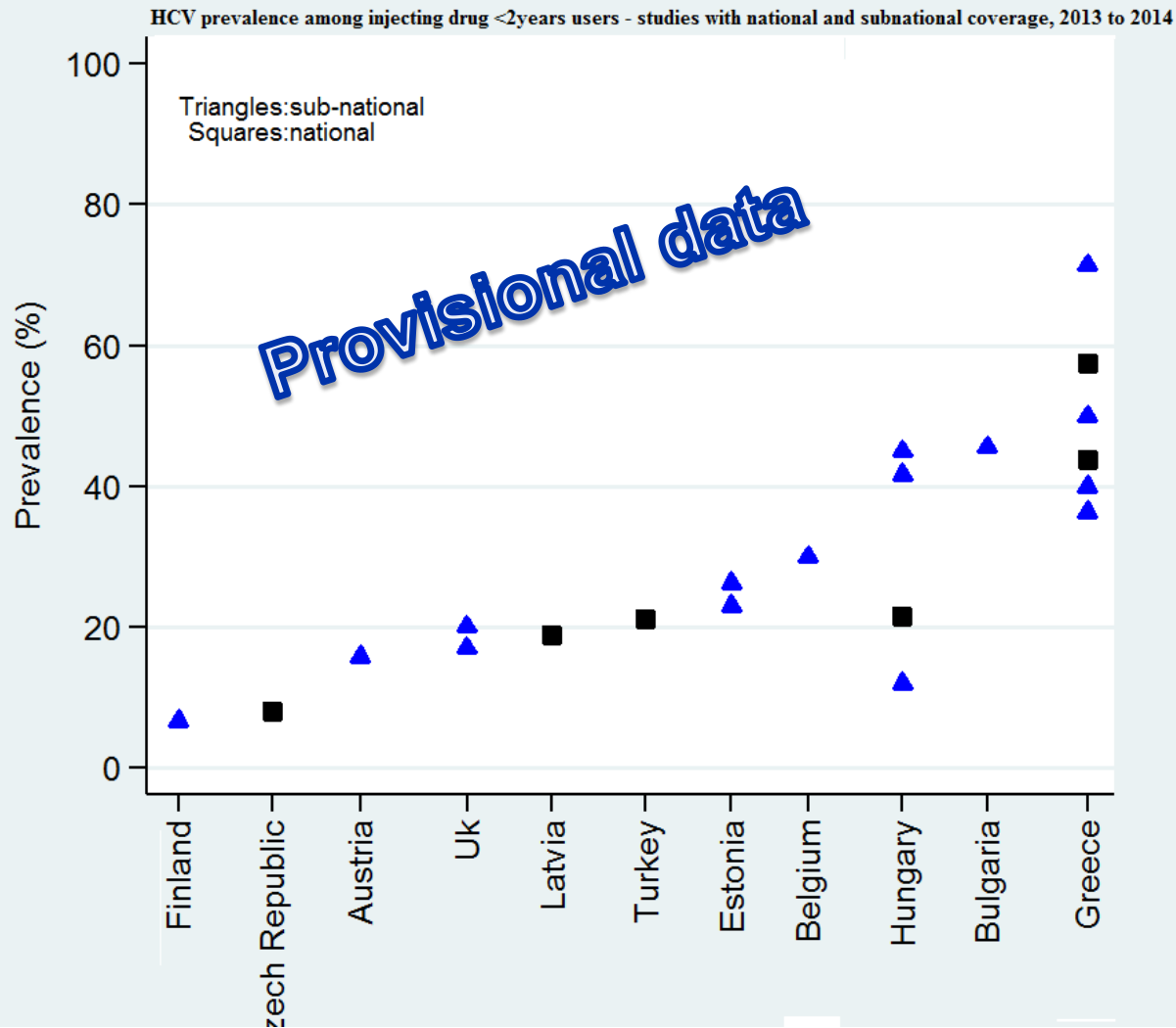
Percent



# Trends in age structure of clients entering treatment by primary drug



# Recent/on-going transmission: HCV antibody prevalence amongst recent PWID (<2 yrs)





## PERSPECTIVES ON DRUGS

# Hepatitis C treatment for injecting drug users

Transmitted through the sharing of needles, syringes and other injecting equipment, hepatitis C is the most common infectious disease among people who inject drugs in Europe today. In this analysis, the EMCDDA looks at some of the positive advances in treating the disease, including a new generation of medicines.

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## Hepatitis C treatment for injecting drug users

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### Introduction

Last update: 04.06.2015

Transmitted through the sharing of needles, syringes and other injecting equipment, hepatitis C is the most common infectious disease among injecting drug users in Europe today. In this analysis, the EMCDDA looks at some of the positive advances in treating the disease, including a new generation of medicines.

*Part of the 'Perspectives on drugs' (PODs) series, launched alongside the annual European Drug Report, these designed-for-the-web interactive analyses aim to provide deeper insights into a selection of important issues.*



[Download PDF version](#)



1. Analysis: hepatitis C and drug use



2. Video



3. Facts and figures



4. Current treatment and new medicines



# Access to DAAs

Wiessing et al., 2015 (PlosOne): Systematic Review

- Level of chronic infection in anti-HCV positive drug users 53%-97% (Md 72%);
- HIV co-infection varied btw. 0%-70%;
- Proportion of diagnosed PWID entering HCV treatment 1-19% (Md 9,5%);
- High level of undiagnosed HCV infections among PWID (24%-76%, Md 49%).

**“Data on epidemiology, care and disease burden among PWID in Europe are sparse, but suggest many undiagnosed infections and poor treatment uptake”**



Harvoni is among the most expensive medicines

but the size of the targeted population is huge

**MOST EXPENSIVE DRUGS CURRENTLY BILLED THROUGH THE U.S. PHARMACY BENEFIT**

MEDICATION	PRIMARY INDICATION	NUMBER OF POTENTIAL U.S. PATIENTS	COST PER 30-DAY RX
Ceprotrin	Protein C deficiency	20	> \$70K
Carbaglu	NAGS (enzyme) deficiency	20	
Erwinaze	E. coli-sensitive acute lymphoblastic leukemia	1,000	
NovoSeven RT	Hemophilia A & B with inhibitors	5,000	
Feiba NF	Hemophilia A & B with inhibitors	5,000	
Adagen	Adenosine deaminase (enzyme) deficiency in certain patients with SCID	50	
Mononine	Hemophilia B	4,000	\$50K - \$70K
Naglazyme	Mucopolysaccharidosis VI (enzyme deficiency)	50	
Cinryze	Hereditary angioedema	8,000	\$40K - \$50K
Beriner	Hereditary angioedema	8,000	
H.P. Acthar	Infantile spasms	9,000	\$30K - \$35K
AlphaNine SD	Hemophilia B	4,000	
<b>Harvoni</b>	<b>Hepatitis C, genotype 1</b>	<b>2,400,000</b>	
Elaprase	Mucopolysaccharidosis II (enzyme deficiency)	50,000	
Myalept	Leptin deficiency in lipodystrophy	500	
Zavesca	Gaucher disease type 1	8,000	
Ravicti	Urea cycle disorders	1,500	\$30K - \$35K
Kogenate FS	Hemophilia A	12,500	

Miller, S. (2014)

Miller, S. (23-10-2014b), 'Harvoni: Orphan Drug Pricing for a Non Orphan Drug', SPECIALTY MEDICATIONS ----



**Purpose: collect data on prices charged in Europe to the new and the previous generation of medicines for HCV**

## **Prefilled questionnaire**

- **8 medicines**

- **2 from the previous generation**

- *Telaprevir (Invico) and Boceprevir (Victrelis)*

- **6 from the new generation**

- *Sofosbuvir (Sovaldi), Simeprevir (Olysio), Declatasvir (Daklinza), Ledipasvir + Sofosbuvir (Harvoni), Ombitasvir + Paritaprevir + Ritonavir (Viekirax) and Desabuvir (Exviera)*

- **Authorization date**

- **Reference prices (exfactory and general public)**

Period: Between May and July 2015

Process: Voluntary

Sources: National Focal Points or National Pricing and Reimbursement Authorities

# Results of survey on HCV medication pricing

Conducted May-July 2015  
Replies from 21 countries  
“Reference prices”

Previous generation (data from 16 countries):  
Boceprevir: 12.843-26.188 €  
(24-week course)

Interferon-free (data from 12 countries):  
Sofosbuvir: 39.462-58.449€  
(12-week course)



# Hepatitis C among PWID: issues to be addressed

**PWID likely to be a major if not the main risk group among those infected with HCV in Europe, but:**

- **Low level of testing,**
- **Many unaware of infection, delaying entry into effective treatment;**
- **Medication price high;**
- **Referral and treatment pathways unclear;**
- **Need to improve staff training & collaboration between clinical/hepatology and addiction services;**
- **Reinfection risk.**



# Women and Drugs, 24 November 2015, Lisbon

**Women and drugs is the focus theme of today's  
“Reitox Extended Network meeting”**

**Knowledge sharing and debate with delegates from  
43 European countries**

<http://www.emcdda.europa.eu/events/2015/women-and-drugs>

**Twitter feed @emcdda\_live  
#WomenAndDrug.**

Commemorating the International Day for the Elimination of Violence  
against Women – 25 November 2015





European Monitoring Centre  
for Drugs and Drug Addiction

[www.emcdda.europa.eu](http://www.emcdda.europa.eu)

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