

PREVALENCE OF HEPATITIS C AMONG PEOPLE WHO INJECT DRUGS IN NEW YORK STATE

Authors:

Udo T¹, Barranco M¹, Shufelt S¹, Flanigan CA², Wilberschied LA², Parker, MM³, Ryman, NL³ & Rosenberg ES^{1,4}

¹ School of Public Health, University at Albany, ² New York State Department of Health AIDS Institute, ³ New York State Department of Health Wadsworth Center, ⁴ New York State Department of Health Office of Public Health

Background:

In 2018, New York State (NYS) announced its commitment to eliminate hepatitis C virus (HCV) infection by 2030. Incidence of HCV among persons who inject drugs (PWID) was identified as one of three primary metrics to monitor progress towards elimination. In June 2021, the NYS Incidence Survey for Infectious Disease Elimination (InSIDE) study was launched to estimate prevalence, incidence, and correlates of HCV infection using an annual cross-sectional sample of PWID in NYS. This presentation summarizes prevalence findings from the 2021-2022 cycle of InSIDE.

Methods:

This study included 527 PWID (38.5% women, 65.2% Non-Hispanic White, 40.7 years old [SD=10.9]) residing in NYS who reported injection drug use in the past 12 months. Participants were recruited from June 2021-December 2022 from six state-funded syringe service programs (SSPs) and surrounding communities using respondent-driven sampling. All participants completed a web-based survey for self-reported HCV care history and risk assessment, HCV rapid antibody test, and HCV RNA test from dried blood spot (DBS).

Results:

HCV antibody seroprevalence was 63.3% HCV RNA positivity was 27.8% in the total sample, indicating 43.7% with current infection among HCV antibody seropositive participants. Of the HCV RNA positive participants, 64.2% reported that they were already aware of HCV infection at the time of study enrollment, with 33.0% reporting a history of HCV treatment completion. RNA positivity among participants reporting a history of HCV treatment was 27.8%, potentially indicating reinfection or treatment failure. Frequency of sharing needles or other equipment at least once in the past 12 months was 34.9% and 49.4%, respectively.

Conclusion:

Our findings of high HCV burden highlight the urgency for aggressive efforts to promote harm reduction strategies and uptake of HCV treatment to alleviate both primary infection and reinfection among PWID to align with NYS HCV elimination goals.

Disclosure of Interest Statement:

The authors report no conflict of interest. The study was supported by funding from the New York State Department of Health (MOU00612).