ASSESSING THE EXTENT OF HEPATITIS C (HCV) INFECTION AMONG MEN WHO INJECT ANABOLIC ANDROGENIC STEROIDS IN THE UK: AN URGENT NEED TO ADDRESS UNCERTAINTY IN KEY PARAMETERS TO BETTER UNDERSTAND THE IMPACT ON HCV ELIMINATION.

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Background:
Harms associated with anabolic androgenic steroids (AAS) use are well-established. Robust estimates of the numbers using AAS and of the prevalence of harms are needed to estimate numbers affected to inform responses. Data on these are limited, there is currently no sampling frame and sections of the AAS using communities are reluctant to acknowledge risk. Available UK data is used to explore the possible number of men injecting AAS with HCV.

Methods:
Estimates of the size of the AAS using population, proportion of men using AAS who inject, and HCV antibody prevalence among men injecting AAS in the UK were identified through literature searches. Potential biases and limitations were assessed. Available data were used to simply estimate the number of men recently injecting AAS with HCV antibodies to assess uncertainty.

Results:
The estimated number of men recently using AAS ranged from 32,000-447,000; estimates were limited by methodological issues. Data indicate between 75%-85% of men using AAS inject, assuming 80% inject gives an estimated 26,000-358,000 (mean 230,000) injecting AAS. HCV prevalence was available from an unlinked-anonymous survey, that may have oversampled higher risk sub-groups. HCV prevalence varied across survey waves (3.6%-5.4%) and excluding those with history of injecting psychoactive drugs or reporting sex with other men reduced prevalence. HCV antibody prevalences of 1% and 5%, would indicate 260-3,600 (mean 2,300) and 1,300-17,900 (mean 11,500) men recently injecting AAS with HCV antibodies, respectively. Indicating 200-13,400 chronic infections if 25% spontaneously clear.

Conclusion:
Current data prohibit robust estimation of the number of men injecting AAS ever HCV infected, chronically infected and requiring care. More robust data are needed on population size (current and past use) and chronic HCV prevalence. Available UK data suggest the numbers affected, though smaller than among those injecting psychoactive drugs, could be sufficient to impact on HCV elimination.

Disclosure of Interest Statement:
No interest to disclose.

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