

HEPATITIS C & NEEDLE EXCHANGE PROGRAMS

Hepatitis C is the most common blood-borne virus in the United States, with 3-4 million Americans currently infected. Injection drug use with shared syringes or equipment is the leading cause of hepatitis C, and the majority of people who inject drugs are infected. If left untreated, hepatitis C can cause serious liver disease, including cirrhosis and liver cancer. Needle exchange programs are an essential strategy to prevent hepatitis C infection.

Mortality from hepatitis C increased 123% in less than a decade: "We analyzed hepatitis C mortality rates derived from US Census and multiple-cause-of-death data for 1995-2004. A total of 56,409 hepatitis C-related deaths were identified. Mortality rates increased 123% during the study period." *Source: Wise, et al Changing Trends in Hepatitis C-Related Mortality in the United States, 1995-2004 HEPATOLOGY, Vol. 47, No. 4, 2008*

The costs of treating hepatitis C are staggering: California's Office of Statewide Health Planning and Development estimated total hospitalization costs associated with liver disease/cancer in patients infected with HCV. For just one year, 2006, the grand total of hospital costs in California alone was **1.4 billion dollars**. *Source: CA Office of Statewide Health Planning and Development, 2009.*

The majority of hepatitis C cases are due to injection drug use behaviors: Injection drug use accounts for 68% of current infections in the U.S. *Source: Alter MJ. Prevention of spread of hepatitis C. Hepatology 2002; 36:S93-98.*

Syringe exchange programs provide an essential link to health services for populations that do not have access to traditional health care settings: A long term California study found that 76% of program participants received their medical and preventive services **exclusively** through SEPs. *Source: Heinzerling KG, Kral AH, Flynn RL, et al (2006). Unmet need for recommended preventive health services among clients of California syringe exchange programs: implications for quality improvement. Drug and Alcohol Dependence 81 (2006) 167-78.*

Syringe exchange programs reduce hepatitis C prevalence: Hepatitis C was close to saturation among injection drug users in NYC prior to large scale syringe exchange: 91% prevalence overall. After large scale implementation of syringe exchange, HCV prevalence is far below saturation level, among IDUs who began injecting after syringe exchange implementation at 56% prevalence, but is still a major concern. *Source: Des Jarlais, D Reducing HIV and HCV Transmission among Injecting Drug Users in New York, Presentation May 10, 2008, International Harm Reduction Conference.*

The Harm Reduction Coalition (HRC), a national health and human rights advocacy group working to reduce drug-related harm, supports syringe exchange programs as an essential strategy to prevent hepatitis C infection. For more information about the Harm Reduction Coalition, visit <http://www.harmreduction.org/>

East Coast Office

22 West 27th Street, 5th Floor
New York, NY 10001
(212) 213-6376
hrc@harmreduction.org

West Coast Office

1440 Broadway, Suite 510
Oakland, CA 94612
(510) 444-6969
hrcwest@harmreduction.org