

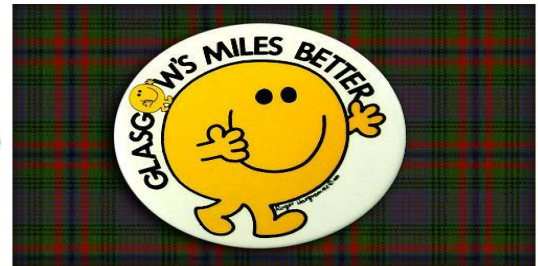
The forgotten group: a new HIV outbreak amongst people who inject drugs

**Patricia Anderson
Lead CNS BBV Brownlee Centre**

No conflicts to declare



PEOPLE
MAKE
GLASGOW



Potted History

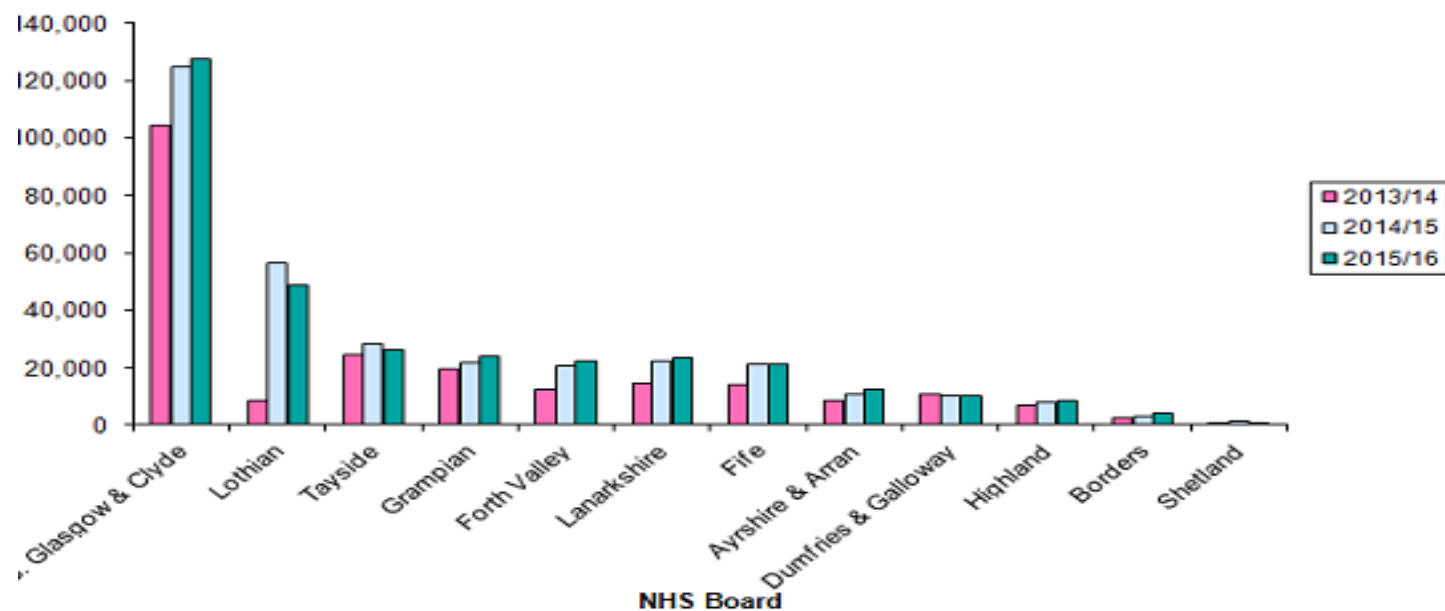
- 1981 Modern wave of drug misuse Glasgow soared from 34-174 (heroin)
- 1983 outbreak of HIV among IV drug users in Edinburgh: over 60%infected in 6 months
- 1987 First needle exchange set up in Edinburgh - 1989 Glasgow
- 1988 Methadone prescribing introduced in Edinburgh by GP's— 1992 Glasgow

Needle exchange 1989

- Pharmacy needle exchange rejected by Scottish Health Minister
- Hospital gate 2 half days – inaccessible
- Easterhouse – drug project – evening
- 5 months later moved to Easterhouse Health Centre – 100 clients daily
- Replicated in other parts of the city
- 5 needles on first visit – 15 subsequent visits

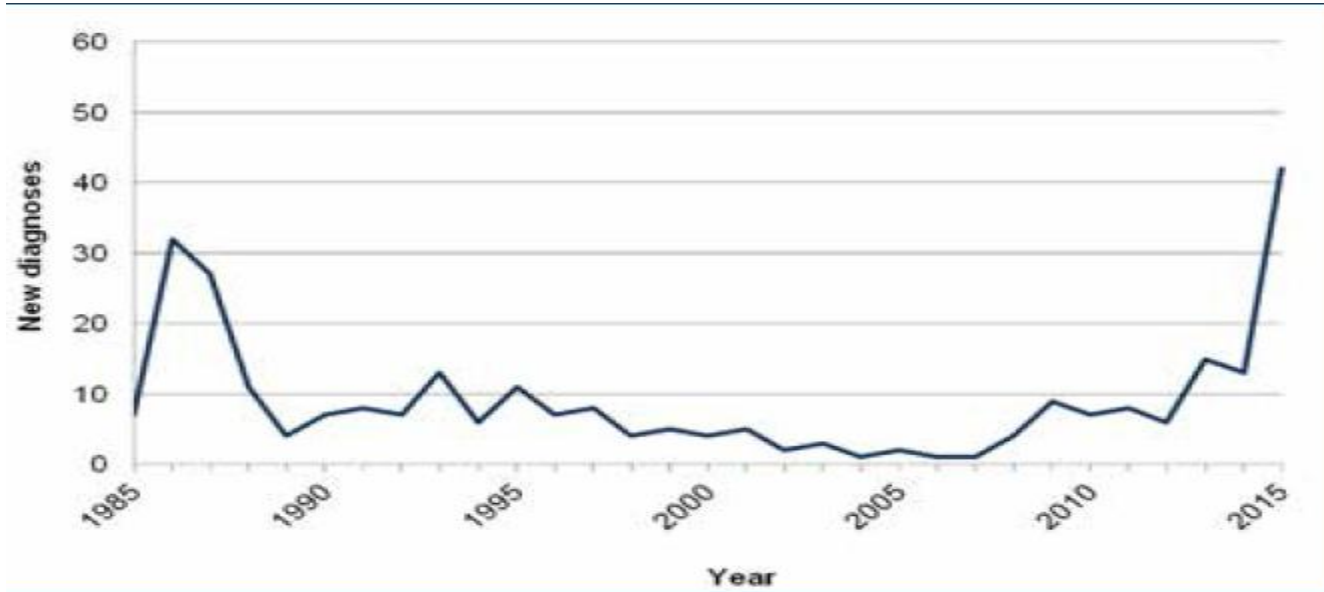
Glasgow Drug Crisis Centre

- Opened 1994
- City Centre – accessible to all comers
- “One stop” facility, homelessness, physical and mental health, legal and child care issues
- 24 hour needle exchange
- In1997/1998 over 3,000 individuals used the service



Number of Reported Injecting Equipment Provision Attendances by Financial Year, NHS Boards; 2013/14-2015/16 3,4,5,6

New HIV diagnoses among people who inject drugs GGC



PWID HIV outbreak

- 120 new infections since November 2014 amongst PWIDs in Glasgow city
 - 2015=48
 - 2016=30
 - 2017=37
 - 2018=5 (to May)
 - Extensive use of IEP services
 - Epidemiologically and virologically linked
- Clade C virus

PWIDs - 'Socially excluded'

- Homelessness
- Addictions
- Criminalisation
 - Drugs/sex work
- Financial
- Barriers to accessing healthcare
 - traditional model of care
- High rates of violence (*women)
 - drug/debt related

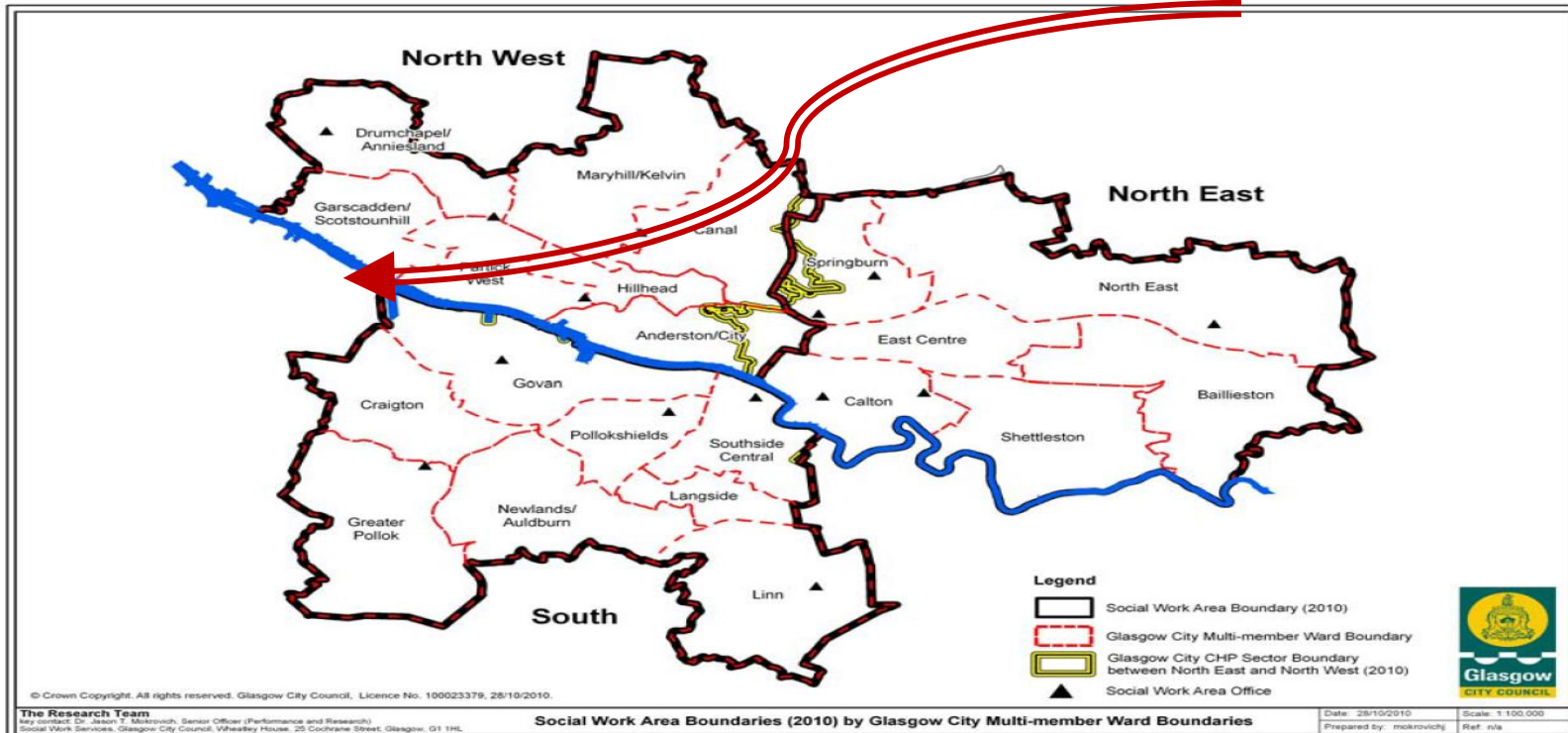


What happened ?

- We Took our eye off the ball



Brownlee Centre



Awareness / Education



Spreading the word by all services in contact with the population group is essential

Broader context



Used syringes are sign of a East End 'drugs epidemic'

A COMMUNITY has demanded action on a 'drugs epidemic' in the East End of Glasgow.



Glasgow's invisible citizens: 800 left to sleep rough on city streets



Glasgow's invisible citizens: 800 left to sleep rough on city streets

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Scottish methadone policy 'should continue', says review

🕒 22 August 2013 | [Scotland](#) | 🇬🇧

Methadone should continue to be used to treat heroin addicts in Scotland, a review commissioned by the Scottish government has concluded.

The Scottish Drug Strategy Delivery



...Anthrax, botulism, Staph aureus bacteraemia, drug deaths.....

Daily priorities

- Accommodation
- Opiate replacement therapy
- Finance
- Drugs/alcohol
- Avoiding others
- Health needs



A tent is used as a makeshift home. Picture: John Doolin

Healthcare attitudes

- Drug/alcohol intoxication
- 'Difficult' patients
- Present in crisis
- Adherence to medication
- Drug-drug interactions
- Non attendance for investigations
- Multiple co-morbidities
- Complex co-morbidities
- 16 Deaths 12% of cohort
- **Stigma**



What to do?



Effective HIV Prevention Interventions and the Need for Rapid Mobilization to Address HIV Outbreaks Among At-Risk Populations

Philip et al *The Journal of Infectious Diseases*, Volume 215, Issue 10, 15 May

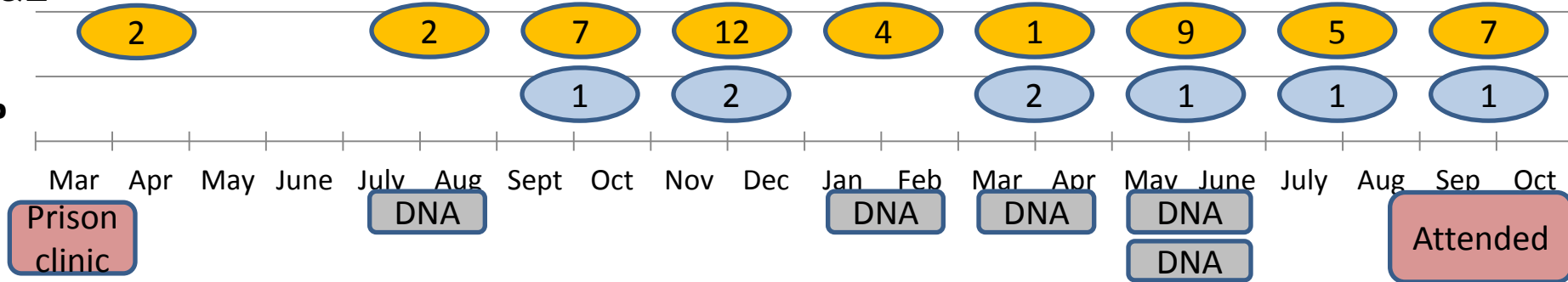
Accessing healthca



- In and out of prison
- Sleeping rough on streets
- Drug & alcohol use affects priorities

A&E

IP



HIV service

Change model of service?



OP	10 Aug 2016	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	DNA	
OP	18 May 2016	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	DNA	
OP	19 Apr 2016	Gartnavel General Hospital	Infectious Diseases	Gillian Mulholland		R	DNA	
OP	02 Mar 2016	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	DNA	
OP	03 Feb 2016	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	A	
OP	15 Dec 2015	Gartnavel General Hospital	Infectious Diseases	Gillian Mulholland		R	DNA	
OP	02 Dec 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	DNA	
AE	20 Nov 2015	Glasgow Royal Infirmary	Accident and Emergency	Colin Bell	20 Nov 2015			
AE	19 Nov 2015	Glasgow Royal Infirmary	Accident and Emergency	Colin Bell	19 Nov 2015			
OP	04 Nov 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	A	
OP	27 Oct 2015	Gartnavel General Hospital	Infectious Diseases	Gillian Mulholland		R	A	
OP	01 Oct 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	DNA	
OP	09 Sep 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	A	
OP	11 Aug 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	A	
OP	03 Jul 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	A	
OP	05 Jun 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	A	
OP	04 Jun 2015	Gartnavel General Hospital	Infectious Diseases	Seija Peters		R	A	

Adapting to need

- Adapt services to meet the needs of the vulnerable
- Alternative service model
 - ‘in reach’ model – homeless health services
 - addictions services, mental health, homeless health
 - combined GUM/ID expertise to provide input to sexual, reproductive and medical issues
 - Links with other services, voluntary sector, ED
 - HIV medication dispensed in community
 - ‘outreach model’ – nurse led
- a **holistic** approach to providing HIV/BBV care

A day in the life of...



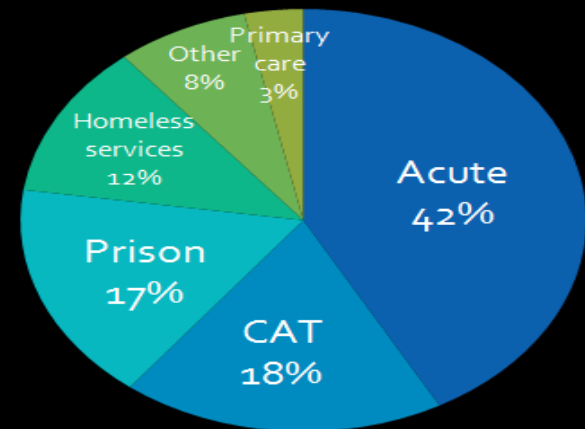
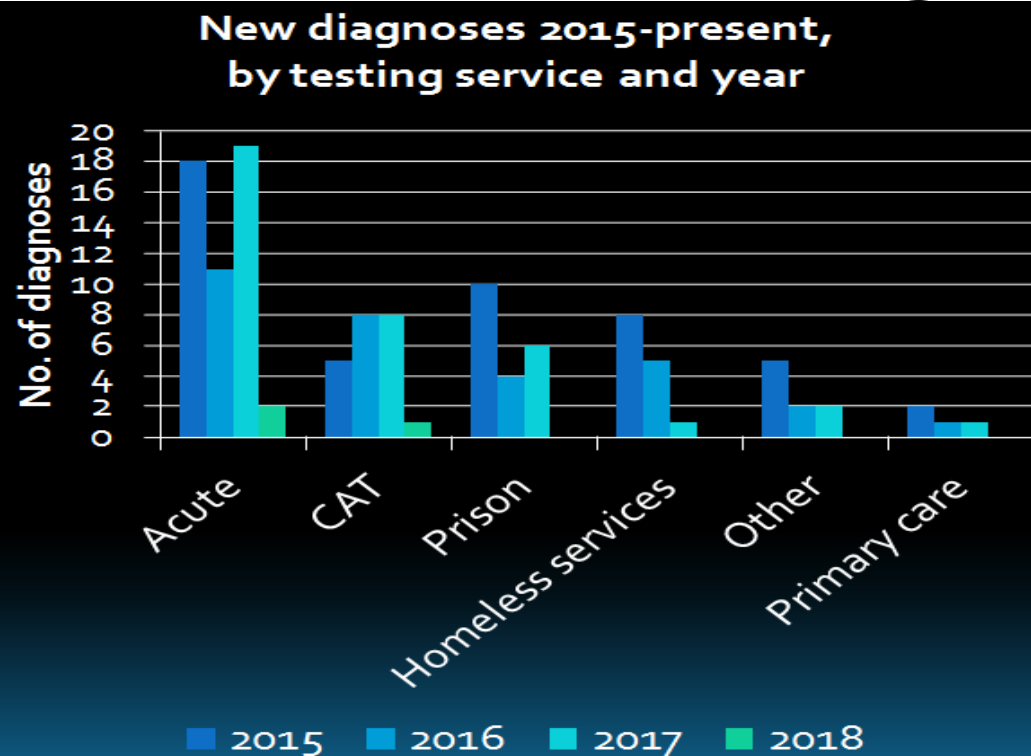
Does it work?

- HIV medication
 - **102/104 (98%)** have ever received ART
 - **95/104 (91%) are currently receiving ART**
 - **45/104 (42%)** currently receiving via community pharmacy
- Adherence varies from **10% to 99%**
 - **72/104 (69%)** have an HIV viral load <40 copies/ml
- Nurse-Led BBV clinic in homeless health service
 - **43/104 (41%)** have attended (NMP)

What still needs to be done?

- 100% engagement in care
 - Needs adequate dedicated nursing staff
 - Multiagency integration
 - Prisons
 - Addictions
 - Mental health
 - Third sector
- Treatment of hepatitis C
 - At least 40 requiring treatment
- Ongoing care and support...lifetime risks
- Other possibilities
 - Injectable treatment (+/- PrEP)
 - PrEP

HIV testing



DRUG CONSUMPTION

- Place where problem drug users are allowed to bring their illegally-obtained drugs and take them in a supervised, hygienic environment. Sterile injecting equipment. Closely observed, in order to give medical assistance should they overdose.
- c. 90 DCRs operating in 10 countries: Switzerland, Germany, the Netherlands, Spain, Norway, Luxembourg, Australia, Canada, Denmark and Greece. Advanced plans in France

DCR

- “There is no legal framework for the provision of drug consumption rooms in the UK and we have no plans to introduce them,” the Home Office said.
- Operating an injection facility would be likely to mean committing a range of offences including “encouraging or assisting the possession and supply of controlled drugs”, it added

Vancouver



Zurich



Summary

- ‘Hard to reach groups’
 - Much more than ‘managing HIV’
 - Risk vs benefit clinical decisions
 - Multidisciplinary and multiagency approach
 - Building relationships/trust
 - Outreach work invaluable
 - Develop and adapt service models to suit cohort
 - Communication is key
 - HIV prevention is complex