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MEDIA RELEASE

HEPATITIS C RATES DROP IN SYDNEY'S INJECTING DRUG USERS

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THE incidence of hepatitis C among Sydney's injecting drug users appears to have dropped over the past decade, according to research published in the *Medical Journal of Australia*.

Data were analysed from 129 participants from three Sydney regions who were aged 16 years or older, tested hepatitis C virus (HCV) antibody or RNA negative, and had injected drugs in the past 12 months, enrolled between November 2008 and October 2011.

Dr Bethany White and Professor Lisa Maher, from UNSW's Kirby Institute, and colleagues found that HCV incidence was 7.9 cases per 100 person-years between 2009 and 2011, a significant drop from 30.8 per 100 person-years seen in a similar cohort between 1999 and 2001.

The result, the researchers wrote, was "consistent with other data sources indicating that the epidemiology of HCV among people who inject drugs (PWID) in Australia is changing".

Younger age was significantly associated with an increased risk of HCV infection, as was daily or more frequent injecting of drugs. However, the researchers found that participation in opioid substitution therapy (OST) was protective against incident HCV infection, with a greater than fivefold reduced risk among those who mainly injected heroin or other opioids.

"The potential role of OST in preventing HCV infection is encouraging, given improving access in the Australian setting", the authors wrote.

"The number of people receiving OST nationally has almost doubled since 1998, from 1.3 to 2.1 per 1000 population, and this has been accompanied by a concurrent reduction in the population size of PWID.

"These two factors are the likely key drivers of reduced HCV incidence, including the lower incidence observed in our study."

Despite the encouraging reduction in HCV incidence, the researchers pointed out that "young PWID in Australia remain at risk".

"Other prevention and education initiatives, such as increased access to sterile injecting equipment and innovative health service delivery models, will remain essential."

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