

HIV prevalence and risk behaviour in needle exchange attenders: a national study

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An important route of transmission for bloodborne viruses has been the sharing of injecting equipment among injecting drug users. Compared with many overseas studies, Australian studies have reported a low prevalence of HIV among injecting drug users,^{1,2} but experience in other countries has shown that the prevalence of HIV in this population can change rapidly.^{3,4}

Optimal approaches to disease prevention require regular and accurate estimates of disease prevalence. It is difficult to obtain a representative sample of injecting drug users for this purpose because the population is defined by an illegal and socially stigmatised behaviour. Sampling methods have ranged from recruitment of volunteers to enrolling injecting drug users who attend specific health services. However, only one study measuring the rate of HIV among injecting drug users was able to provide a response rate.¹

Needle and syringe exchange programs, which provide sterile needles and syringes free or at a minimal cost for injecting drug users, are a convenient means of monitoring the prevalence of bloodborne viral infections among large numbers of injecting drug users who are

Abstract

Objective: To determine whether needle and syringe exchange programs represent feasible sites to describe the prevalence of HIV and related risk behaviour among injecting drug users.

Design: Cross-sectional survey.

Setting: 21 needle and syringe exchange programs in all Australian jurisdictions.

Participants: All persons attending the needle and syringe exchange programs over one week in March 1995 were eligible to participate in the study once.

Intervention: Needle and syringe exchange attenders were asked to complete a brief, self-administered questionnaire and provide a finger-prick blood sample.

Main outcome measures: Prevalence of HIV antibody, drug injecting and sexual behaviour, and survey cost.

Results: Completed questionnaires with blood samples suitable for testing were provided by 1005 (42%) of 2373 individuals who attended the needle and syringe exchange programs during the survey week. Women were more likely than men to participate in the survey but there was no difference in the response rate by age group. The HIV prevalence was 2.1% and was significantly higher in men who described themselves as homosexual, compared to men who described themselves as heterosexual (22.5% v. 0.7%; $P < 0.001$). Thirty-one per cent of respondents reported using a syringe after someone else in the preceding month.

Conclusion: Cross-sectional surveys of needle exchange clients offer a practical method for monitoring risk behaviour and seroprevalence of bloodborne viral infections.

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currently injecting drugs. Nearly six million needles and syringes were distributed in Australia in 1993-1994 through the needle exchange program.⁵

The purpose of our study was to

determine whether needle exchanges represent feasible sites to describe the prevalence of HIV infection and HIV-related risk behaviour among injecting drug users in Australia.

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Methods

Ethical approval for this study was obtained from the institutional ethics committees associated with the National Centre in HIV Epidemiology and Clinical Research and with each needle and syringe exchange centre.

Survey participants

All injecting drug users attending 21 needle and syringe exchange centres during one week in March 1995 were asked to complete a brief self-administered questionnaire and provide a finger-prick blood spot sample for HIV antibody testing.

The needle and syringe exchange cen-