CDC Offers This Advice for Tackling West Virginia's HIV Outbreak

A surge in West Virginia HIV cases linked to injection drug use spurred the CDC to recommend solutions, including hepatitis C testing.

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The best way to tackle the ongoing HIV outbreak in Kanawha County, West Virginia, is to improve access to syringe exchange programs, offer more testing and treatment for HIV and hepatitis C, and bring streamlined harm reduction services to people who inject drugs, which is the population group most affected by the HIV outbreak.

Those are the top-line recommendations from the federal Centers for Disease Control and Prevention (CDC) following an investigation into the surge of HIV cases. The recommendations were made public this week in a press release from the West Virginia Department of Health & Human Services, which, along with the Kanawha-Charleston Health Department, worked with the CDC.

The advice arrives amid controversy over syringe exchange programs. In April, the state's Republican governor, Jim Justice, signed a law that would limit access to clean syringes effective July 9, but a federal judge issued a temporary restraining order, allowing a local chapter of the American Civil Liberties Union to make its case that the law is unconstitutional.

According to the CDC's report, Kanawha County reported that between January 1, 2019, and March 13, 2021, a total of 63 people tested positive for HIV linked to injection drug use. This compares with 36 in 2018 in New York City, which has over 8 million more residents than Kanawha County (population: 178,000). Before 2019, fewer than five people on average linked to injection drug use tested positive each year in Kanawha County, which includes the state capital, Charleston.

Half of the people implicated in this HIV outbreak were connected to HIV care within 30 days of their diagnosis, but 60% of the overall diagnoses were made in hospital settings. The report's authors say this suggests this population lacks access to regular testing and treatment services. You can read the CDC's full Epi-Aid report on WCHSTV.com, Channel 8 News.

The HIV outbreak, which has been making headlines for the past two years, led federal health officials to launch an Epi-Aid investigation into the situation. Such investigations are initiated whenever urgent public health issues arise that require leadership and assistance.

According to the state health department's press release, the CDC offered these main recommendations and suggested they should "be approached with urgency":

- Expanding and improving access to sterile syringes, testing and treatment by:
  - Meeting people who inject drugs where they are by reducing barriers to participation in harm reduction programs and bringing services to them through mobile and street outreach and one-stop shop models of harm reduction services.
  - Making HIV and hepatitis C testing routine with opt-out screening in health care and other settings where people who inject drugs may engage in care.
  - Co-locating services for people who inject drugs to facilitate a seamless transition to needed support, care and treatment for HIV, hepatitis C, substance use and mental health services.

- Involving the community in efforts to address the outbreak through increased engagement and dissemination of information, particularly including facilitating community discussion with key stakeholders and engaging people who inject drugs in the design and delivery of programs and services.

- Conducting additional data analysis to understand the extent of injection drug use in Kanawha County and to prioritize outreach to other West Virginia counties to improve HIV testing, prevention and care services in communities at highest risk for HIV or hepatitis C outbreaks among people who inject drugs.

In related news, read the AIDS United blog post titled "We Can't Beat HIV, Hepatitis and Overdoses if We Close Syringe Services."

Both HIV and hepatitis C can be transmitted via blood-to-blood contact, including through shared needles and drug equipment that has come in contact with blood. Hepatitis refers to inflammation of the liver. There can be many causes, but hepatitis C is the result of a virus and can result in a lifelong infection, mild to serious scarring of the liver (fibrosis and cirrhosis, respectively), liver cancer, liver failure and death. The good news is that hep C is curable in most cases. To learn more, see the Hepatitis C section of Hep magazine's Hepatitis Basics, which includes an introduction to viral hepatitis as well as other forms of hepatitis and liver disease such as non-alcoholic fatty liver disease (NAFLD), non-alcoholic steatohepatitis (NASH), alcoholic liver disease,

autoimmune hepatitis and primary biliary cholangitis (PBC). And for a collection of articles in POZ about the intersection of hep C virus and HIV, click the hashtag #Hepatitis C.

HIV, in contrast, is a virus that attacks the immune system. Over several years, the immune system becomes depleted, and the body isn't able to fight infections, leading to an AIDS diagnosis. Although there is no cure for HIV, many safe and effective treatments—often just one pill a day—are available. The medications help people living with HIV enjoy long and healthy lives and keep them from transmitting the virus to others. For more, see the Basics of HIV/AIDS in POZ.com, a sister publication of HepMag.com.

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