

# Testing for drug-related infectious diseases – a crucial step towards meeting international health goals

Testing for drug-related infectious diseases among people who inject drugs (PWID) is crucial if international health targets are to be met. This is among the conclusions of a new EMCDDA report out today: [Drug-related infectious diseases in Europe](#). The update, from the agency's drug-related infectious disease network, stresses that early diagnosis through testing, and improving links to treatment and care, are crucial steps towards reaching global health goals.

Launched during [European Testing Week](#) (15–22 May), the report offers an overview of drug-related infectious diseases among PWID in Europe, including the prevalence and incidence of HIV and viral hepatitis. It also tracks progress on health targets and showcases successfully implemented evidence-based interventions. It underlines the need to ramp up prevention and testing and signals that European countries are lagging behind when it comes to treating hepatitis C virus (HCV) and HIV among PWID.

HIV and chronic viral hepatitis are highly prevalent among people who inject drugs, being transmitted through the sharing of injecting equipment, such as needles and syringes. Addressing the needs of this group is critical to achieve the [UN Sustainable Development Goal of Good Health and Well-being \(SDG 3\)](#), which calls for ending the AIDS epidemic and combatting viral hepatitis as a public health threat by 2030 ([SDG 3.3](#))<sup>(1)</sup>.

Notifications of newly diagnosed HIV infections among PWID fell in most European countries between 2009 and 2018 (see report, Figure 1). In 2018, 996 new HIV diagnoses linked to injecting drug use were reported in the EU, Norway and Turkey, yet, according to the report, over half of these were diagnosed late, suggesting that opportunities for early interventions and better treatment outcomes are being missed. The policy of 'test and treat' for HIV – with antiretroviral therapy (ART) starting directly after diagnosis – can save lives and reduce transmission. But the report states that Europe is 'far from meeting global targets on ART coverage and viral suppression among PWID', indicating the need for better linkage to care.

Viral hepatitis, particularly infection caused by HCV, is highly prevalent among PWID across Europe and several countries report current infection rates of over 40%. Without access to treatment, many will develop chronic infection, which can lead to liver cirrhosis and cancer. Harm reduction services are often the first point of entry for diagnosis and links to treatment and play an essential role in preventing new or recurring infections. However, the report reveals that EU countries are not achieving WHO 2020 targets for needle and syringe programmes (NSP) and opioid substitution treatment (OST) coverage <sup>(2)</sup>. To date, only one EU Member State (Luxembourg) has reached the target for both NSP and OST coverage (Figure 4).

While outbreaks of HIV and bacterial infections among PWID are relatively rare, they continue to be reported in the EU and are a significant cause for concern. The report presents the latest update on local outbreaks of bacterial infections and HIV among this group in Europe, where injecting stimulant drugs may have been an important risk factor (Figure 7).

‘Despite the availability of a treatment to cure hepatitis C virus (HCV) infection and therapies to achieve viral suppression of HIV, financial and social barriers still prevent many PWID from accessing treatment’, the report says.

The EMCDDA has developed an ‘[elimination barometer](#)’ for hepatitis B and C among PWID to help countries monitor progress towards meeting WHO elimination targets. In addition, an [EMCDDA harm-reduction initiative on hepatitis C](#) aims to support countries in contributing to its elimination by increasing access to testing and referrals to care through drug services.

**EMCDDA Director Alexis Goosdeel** says: ‘For the past 25 years, we have been monitoring drug-related infectious diseases in Europe and assessing the risks faced by people who inject drugs. This has helped guide evidence-based interventions, reduce transmission and save lives. Diagnosing early through testing and increasing referrals to treatment and care are simple, yet vital, steps to protect this vulnerable group and contribute to a healthier and more secure Europe’.