

HIV/AIDS & Injection Drug Use

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1.

"Through 2007, an estimated total of 1,051,875 persons in the United States and dependent areas were diagnosed with AIDS (Table 1). At the end of 2006, an estimated 446,098 persons in the United States and dependent areas were living with AIDS (Table 1)."

Source:

Centers for Disease Control and Prevention. Deaths among persons with AIDS through December 2006, HIV/AIDS Surveillance Supplemental Report, 2009. Vol. 14(No. 3): p. 4.

http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2009supp_vo...

2.

The estimated lifetime cost of treating an HIV positive person is at least \$195,188.

Source:

Holtgrave, DR, Pinkerton, SD. "Updates of Cost of Illness and Quality of Life Estimates for Use in Economic Evaluations of HIV Prevention Programs." Journal of Acquired Immune Deficiency Syndromes and Human Retrovirology, Vol. 16, pp. 54-62 (1997).

3.

"Of the estimated 398,057 male adults and adolescents living with HIV/AIDS, 64% had been exposed through male-to-male sexual contact, 16% through injection drug use, 12% through high-risk heterosexual contact, and 7% through both male-to-male sexual contact and injection drug use. Of the estimated 146,692 female adults and adolescents living with HIV/AIDS, 72% had been exposed through high-risk heterosexual contact, and 26% had been exposed through injection drug use." (The CDC defines high-risk heterosexual contact as "heterosexual contact with a person known to have, or to be at high risk for, HIV infection," p. 7)"

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007. Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: p. 9].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

4.

Research published in the Journal of Urban Health estimated that in 1998, there were 1,364,874 injection drug users in the US.

Source:

Friedman, Samuel R., Barbara Tempalski, Hannah Cooper, Theresa Perlis, Marie Keem, Risa Friedman & Peter L. Flom, "Estimating Numbers of Injecting Drug Users in Metropolitan Areas for Structural Analyses of Community Vulnerability and for Assessing Relative Degrees of Service Provision for Injecting Drug Users," Journal of Urban Health (New York, NY: NY Academy of Medicine, 2004), Vol. 81, No. 3, p. 380.

5.

"Through 2007, a total of 1,030,832 persons in the United States and dependent areas had been reported as having AIDS (Table 16). Three states (California, Florida, and New York) reported 43% of the cumulative AIDS cases and 36% of AIDS cases reported to CDC in 2007. In the 50 states and the District of Columbia, the rate of reported AIDS cases in 2007 was 12.4 per 100,000 population. When the U.S. dependent areas were included, the rate of reported AIDS cases ranged from zero per 100,000 (American Samoa, Guam, and the Northern Mariana Islands) to 148.1 per 100,000 (District of Columbia)."

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007. Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: p. 9].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

6.

According to the CDC, from the beginning of the AIDS epidemic through the end of 2007 there have been a total of 1,051,875 cases of AIDS reported in the US and US dependent areas. Of these, 487,695 were reported to have been transmitted through male-to-male sexual contact, 255,859 were reported to have been transmitted through injection drug use, 71,242 were reportedly transmitted through male-to-male sexual contact and injection drug use, and 176,157 were reported to have been transmitted through "high-risk heterosexual contact."

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007 (2009). Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: Table 4, p. 15].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

7.

According to the CDC, from the beginning of the AIDS epidemic through the end of 2007 a total of 9,156 cases of AIDS have been reported in the US among children under 13 years of age at the time of diagnosis.

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007 (2009). Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: Table 16, p. 32].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

8.

A total of 14,561 persons in the US and dependent areas were estimated to have died from AIDS in 2007. From the beginning of the epidemic through 2007, an estimated 583,298 persons in the US and dependent areas are estimated to have died from AIDS.

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007 (2009). Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: Table 8, p. 20].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

9.

The Centers for Disease Control reported that in 2003, HIV disease was the 22nd leading cause of death in the US for whites, the 9th leading cause of death for blacks, and the 13th leading cause of death for Hispanics.

Source:

Heron, Melonie P., PhD, Smith, Betty L., BsED, Division of Vital Statistics, "Deaths: Leading Causes for 2003," National Vital Statistics Reports, Vol. 55, No. 10 (Hyattsville, MD: National Center for Health Statistics, CDC, March 15, 2007), p. 10, Table E, and p. 12, Table F.

10.

The CDC reported that in 2003, HIV disease was the seventh leading cause of death in the US for those aged 20-24, the sixth leading cause of death for those aged 25-34, the fifth leading cause for those aged 35-44, and the eighth leading cause for those aged 45-54

Source:

Heron, Melonie P., PhD, Smith, Betty L., BsED, Division of Vital Statistics, "Deaths: Leading Causes for 2003," National Vital Statistics Reports, Vol. 55, No. 10 (Hyattsville, MD: National Center for Health Statistics, CDC, March 15, 2007), p. 18, Table 1.

11.

The CDC estimates that of the 10,339 male adult or adolescent AIDS victims who died in 2007, 5,373 of the cases were reportedly transmitted through male-to-male sexual contact (MSM), 2,397 were reportedly transmitted through injection drug use, 1,054 were reportedly transmitted through male-to-male sexual contact and injection drug use, 1,433 were reportedly transmitted through high-risk heterosexual contact, and 83 were attributed to "other."

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007 (2009). Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: Table 8, p. 19].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

12.

The CDC estimates that of the 3,714 female adults or adolescent AIDS victims who died in 2007, 1,446 of the cases were reportedly transmitted through injection drug use, 2,211 were reportedly transmitted through high-risk heterosexual contact, and 57 were attributed to "other."

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007 (2009). Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: Table 8, p. 19].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

13.

"The estimated number of deaths of adults and adolescents with AIDS decreased among MSM and IDUs and remained stable among persons exposed through high-risk heterosexual contact."

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007. Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: p. 8].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

14.

"Survival was greatest among MSM and among children with perinatally acquired HIV infection (Table 15). Survival was intermediate among male and female adults and adolescents who had heterosexual contact with someone known to be HIV infected or at high risk for HIV infection, as well as among MSM who also were IDUs. Survival was lowest among male and female adults and adolescents who were IDUs."

Source:

Centers for Disease Control and Prevention. HIV/AIDS Surveillance Report, 2007. Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009: p. 10].

<http://www.cdc.gov/hiv/topics/surveillance/resources/reports/2007report/...>

15.

"On December 31, 2004, 1.9% of State prison inmates and 1.1% of Federal prison inmates were known to be infected with the human immunodeficiency virus (HIV). Correctional authorities reported that 21,366 State inmates and 1,680 Federal inmates were HIV positive. The number known to be HIV positive totaled 23,046, down from 23,663 at yearend 2003.

"Of those known to be HIV positive in all U.S. prisons at yearend 2004, an estimated 6,027 were confirmed AIDS cases, up from 5,944 in 2003. Among State inmates, 0.5% had AIDS; among Federal inmates, 0.4%."

Source:

Maruschak, Laura M. "HIV In Prisons, 2004," NCJ-213897 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Nov. 2006), p. 1.

16.

"In every year since 1991, the rate of confirmed AIDS has been higher among prison inmates than in the general population (figure 1). At yearend 2004 the rate of confirmed AIDS in State and Federal prisons was more than 3 times higher than in the total U.S. population. About 50 in every 10,000 prison inmates had confirmed AIDS, compared to 15 in 10,000 persons in the U.S. general population."

Source:

Maruschak, Laura M. "HIV In Prisons, 2004," NCJ-213897 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Nov. 2006), p. 5.

17.

"Inmates held on a property offense in State and Federal prisons had the highest HIV-positive rate (both 2.6%) (table 11). Among State inmates, public-order offenders (0.9%) were least likely to report being HIV positive; among Federal prisoners, drug offenders (0.7%) were least likely to report being HIV positive."

Source:

Maruschak, Laura M. "HIV In Prisons, 2004," NCJ-213897 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Nov. 2006), p. 10.

18.

"The percentage of State prison inmates who were HIV positive was □

"1.3% of those who never used drugs

"1.7% of those who had ever used drugs

"1.9% of those who used drugs in the month before their current offense

"2.8% of those who had used a needle to inject drugs

"5.1% of those who had shared a needle.

"Like State inmates, Federal inmates who used a needle and shared a needle had higher rates of HIV infection than those inmates who reported ever using drugs or using drugs in the month before their current offense."

Source:

Maruschak, Laura M. "HIV In Prisons, 2004," NCJ-213897 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Nov. 2006), p. 10.

19.

"In personal interviews conducted in 2002, nearly two-thirds of local jail inmates reported ever being tested for HIV; of those, 1.3% disclosed that they were HIV positive."

Source:

Maruschak, Laura M. "HIV In Prisons and Jails, 2002," NCJ-205333 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Dec. 2004), p. 1.

20.

"Among jail inmates in 2002 who had ever been tested for HIV, Hispanics (2.9%) were more than 3 times as likely as whites (0.8%) and twice as likely as blacks (1.2%) to report being HIV positive."

Source:

Maruschak, Laura M. "HIV In Prisons and Jails, 2002," NCJ-205333 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Dec. 2004), p. 1.

<http://www.ojp.usdoj.gov/bjs/pub/pdf/hivpj02.pdf>

21.

"The percentage of jail inmates reporting that they were HIV positive varied by level of prior drug use. Of jail inmates who reported never using drugs, 0.4% were HIV positive. An estimated 1.5% of inmates who had ever used drugs, 1.5% of those who used drugs in the month before their current offense, 3.2% of those who had used a needle to inject drugs, and 7.5% of those who had shared a needle reported being HIV positive."

Source:

Maruschak, Laura M. "HIV In Prisons and Jails, 2002," NCJ-205333 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Dec. 2004), p. 9.

<http://www.ojp.usdoj.gov/bjs/pub/pdf/hivpj02.pdf>

22.

"Those inmates held for a property offense in local jails reported the highest HIV positive rate (1.8%) (table 10). Drug offenders reported a slightly lower rate (1.6%). The percentage of public-order offenders who were HIV positive was 1.1%; the percentage of violent offenders, 0.7%."

Source:

Maruschak, Laura M. "HIV In Prisons and Jails, 2002," NCJ-205333 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Dec. 2004), p. 9.

<http://www.ojp.usdoj.gov/bjs/pub/pdf/hivpj02.pdf>

23.

"In 2004 for every 100,000 State inmates, 14 died from AIDS-related causes. The most AIDS-related deaths were reported in

the South (84), followed by the Northeast (60). Together, these two regions accounted for more than three-quarters of AIDS-related deaths in State prisons."

Source:

Maruschak, Laura M. "HIV In Prisons, 2004," NCJ-213897 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Nov. 2006), p. 8.

24.

"In 2002 the number of AIDS-related deaths in local jails was 42, down from 58 in 2000 (table 11). The rate of AIDS-related deaths was down from 9 per 100,000 inmates in 2000 to 6 per 100,000 in 2002. Of the 42 inmates who died from AIDS-related illnesses in 2002, 38 were male and 4 were female. Those who died from AIDS-related illnesses were most likely black (31 inmate deaths) and between the ages 35 and 44 (21 inmate deaths). Over the 3-year period beginning in 2000, a total of 155 local jail inmates died from AIDS-related causes."

Source:

Maruschak, Laura M. "HIV In Prisons and Jails, 2002," NCJ-205333 (Washington, DC: Department of Justice, Bureau of Justice Statistics, Dec. 2004), p. 10.

<http://www.ojp.usdoj.gov/bjs/pub/pdf/hivpj02.pdf>

25.

"Russia now has a 1 percent HIV prevalence rate among its young people and the fastest growing HIV/AIDS epidemic in the world. While the epidemic is still predominantly fuelled by injecting drug users and confined to their ranks, there are clear signs that the epidemic continues to spread to the general population, especially the youth."

Source:

UNODC, "Illicit Drug Trends in the Russian Federation," (UNODC Regional Office for Russia and Belarus, April 2008), p. 6.

<http://www.unodc.org/documents/regional/central-asia/Illicit%20Drug%20Tr...>

26.

"In 2007, 48,892 newly diagnosed HIV cases (76 per million population) were reported from 49 of the 53 countries in the WHO European Region (no data from Austria, Italy, Monaco and the Russian Federation). In the three parts of the WHO European Region, the rate of newly reported cases of HIV per million population was highest in the East (Table 1); whereas among individual countries, the highest rates were reported in: Estonia (472 per million), Ukraine (285 per million), Portugal (217 per million) and the Republic of Moldova (204 per million). Between 2000 and 2007, the annual rate of newly reported cases of HIV per million population has increased from 39 to 75 per million (90% increase) among the 44 countries that have consistently reported."

Source:

van de Laar MJ, Likatavicius G, Stengaard AR, Donoghoe MC. HIV/AIDS surveillance in Europe: update 2007. Euro Surveill. 2008;13(50)

<http://www.euro.who.int/document/e92074.pdf>

27.

"Eastern Europe, the Commonwealth of Independent States, and significant parts of Asia are experiencing explosive growth in new HIV infections, driven largely by injecting drug use (UNAIDS, 2006). While the primary route of transmission in most of these areas is sharing of contaminated injecting equipment, sexual and perinatal transmission among IDUs and their partners also plays an important and growing role. In many highly affected countries, rapid growth in the number of IDUs infected with HIV has already created a public health crisis. Countries where the level of HIV infection is still relatively low have the chance -- if they act now -- to slow the spread of HIV."

Source:

Committee on the Prevention of HIV Infection among Injecting Drug Users in High-Risk Countries, "Preventing HIV Infection among Injecting Drug Users in High Risk Countries: An Assessment of the Evidence" (Washington, DC: National Academy Press, 2006), p. 141.

28.

"There is some controversy over the number of narcotic drug users in Russia. Dr. Vadim Pokrovsky of the Federal AIDS Center said that estimates of the number of active drug users in Russia in February 2004 ranged from 1 to 4 million, and he believed the high end of that range reflected the reality. On February 20, 2004, Alexander Mikhailov, the deputy director of the State Drug Control Committee (SDCC), a federal body, was cited in Pravda as saying that Russia had over 4 million drug users, and that the "gloomy prediction" of his office was that Russia could have over 35 million drug users by 2014. In early

January 2004, the executive secretary of the Commonwealth of Independent States, which includes twelve former Soviet states, predicted that in 2010 the twelve countries would have 25 million drug users of whom 10 million would be living with HIV/AIDS, the vast majority in Russia."

Source:

Human Rights Watch, "Lessons Not Learned: Human Rights Abuses and HIV/AIDS in the Russian Federation," April 2004, Vol. 16, No. 5, pp. 14-15.

29.

"The epidemic disproportionately affects IDUs who comprise 87% of the cumulative number of registered HIV cases, however, with the epidemic becoming more mature, the infection tendency away from IDUs to heterosexual is also increasing with 68% of newly registered cases by the end of 2004 corresponding to IDU and 30% to heterosexuals (In the previous year heterosexual transmission accounted for 23.4% of new infections). The interpretation of the tendency towards less new infections diagnosed is not an indication of a slowing of the epidemic but rather reflective of the changes in HIV testing policy, the smaller number of tests performed in population groups with high-risk behaviors and also a shortage of test kits."

Source:

UNODC, "Illicit Drug Trends in the Russian Federation, 2005" (UNODC Regional Office for Russia and Belarus, Nov. 2006), p. 14.

30.

"The Russian Federation is facing a deadly epidemic of acquired immune deficiency syndrome (AIDS). It is driven in part by abuses of the human rights of those most at risk to get the disease and of the over 1 million Russians already living with the human immunodeficiency virus (HIV). The principal means of HIV transmission in Russia has been and remains injection drug use. But the Russian state has done little to support low-cost measures that would enable drug users to realize their right to be protected from this incurable disease. Instead, Russia has been a model of repression of drug users and stigmatization of HIV-positive people, putting the country squarely on the path of very high AIDS mortality and continued abuse of people affected by HIV/AIDS."

Source:

Human Rights Watch, "Lessons Not Learned: Human Rights Abuses and HIV/AIDS in the Russian Federation," April 2004, Vol. 16, No. 5, p. 1.

31.

"In 2002, an estimated 93 percent of persons registered by the government as HIVpositive since the beginning of the epidemic were injection drug users. In contrast, in 2002 an estimated 12 percent of new HIV transmission was sexual -- that figure climbed to 17.5 percent in the first half of 2003 -- indicating the foothold that the epidemic is gaining in the general population. The European Centre for the Epidemiological Monitoring of AIDS (EuroHIV), a center affiliated with the World Health Organization, noted that HIV prevalence may have "reached saturation levels in at least some of the currently affected drug user populations" in eastern Europe, including in Russia, but cautioned against complacency "as new outbreaks could still emerge among injection drug users", particularly within the vast expanse of the Russian Federation." Rhodes and colleagues in a February 2004 article echo this conclusion, noting evidence of recent examples of severe HIV outbreaks among drug users in Russia."

Source:

Human Rights Watch, "Lessons Not Learned: Human Rights Abuses and HIV/AIDS in the Russian Federation," April 2004, Vol. 16, No. 5, p. 10.

32.

"Researchers have found that police harassment is one of the most important factors that exacerbate risky behavior among drug users in Russia. In a 2002 study of drug use in five Russian cities, 44 percent of drug users said they had been stopped by the police in the month prior to being interviewed, and two third of these said that their injecting equipment had been confiscated by the police. Over 40 percent added that they rarely carried syringes for fear of encountering the police with them. In the Togliatti study, Rhodes and colleagues found that fear of being arrested or detained by the police was the most important factor behind the decision of drug users not to carry syringes, which in turn was an important determinant of sharing syringes during injection. This study concluded that drug users who had been arrested or detained by the police for drug-related offenses were over four times more likely than other users to have shared syringes in the previous four weeks. Drug users who feared the police in Togliatti tended to avoid not only syringe exchange services but also drug stores that sold syringes because police frequently targeted people buying syringes at such locations, a result also highlighted in a 2003 study of drug users in Moscow."

Source:

Human Rights Watch, "Lessons Not Learned: Human Rights Abuses and HIV/AIDS in the Russian Federation," April 2004, Vol. 16, No. 5, p. 17.

33.

"State action that impedes people from protecting themselves from a deadly epidemic is blatant interference with the right of

Russians to the highest obtainable standard of health. There is no dispute as to the effectiveness of sterile syringes for preventing HIV, hepatitis C and other blood-borne infections. Public health experts are virtually unanimous in the view that providing access to sterile syringes neither encourages drug use nor dissuades drug users from entering drug treatment programs. In reality, the near absence of humane treatment programs for drug addiction in Russia and the very nature of drug use guarantee that there will always be people who either cannot or will not stop using drugs. Impeding this population from obtaining or using sterile syringes amounts to prescribing death as a punishment for illicit drug use."

Source:

Human Rights Watch, "Lessons Not Learned: Human Rights Abuses and HIV/AIDS in the Russian Federation," April 2004, Vol. 16, No. 5, p. 3.

34.

"Being in prison or other state detention is an important risk factor for HIV in Russia. A very high percentage of drug users in the FSU find themselves in state custody at some time in their lives. Injection drug use is reportedly widespread in Russian prisons, and HIV prevention services such as provision of sterile syringes, disinfectant materials for syringes and condoms are virtually absent. Official statistics indicate that from 1996 to 2003, HIV prevalence in Russian prisons rose more than thirty-fold from less than one per 1,000 inmates to 42.1 per 1,000 inmates. According to a 2002 report, about 34,000 HIV-positive persons—over 15 percent of the persons officially counted as HIV-positive in the country—were in state custody, of which the large majority found out about their HIV status in prison. The Kresty pretrial detention facility in Saint Petersburg was reported in 2002 to have about 1,000 HIV-positive persons among its 7,800 inmates. Some 300,000 prisoners are released each year from penal institutions in Russia, representing an important public health challenge."

Source:

Human Rights Watch, "Lessons Not Learned: Human Rights Abuses and HIV/AIDS in the Russian Federation," April 2004, Vol. 16, No. 5, pp. 11-12.

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