**HEPATITIS C AND RISK BEHAVIOR AMONG PERSONS WHO INJECT DRUGS IN NORWAY**

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**Introduction**: Since 2002, prevalence of HCV (hepatitis C virus) infections among PWIDs (persons who inject drugs) has been surveyed in Oslo. In 2015 this survey was extended to include the City of Bergen. The objectives included measuring the prevalence of HCV infection and risk behavior, in order to provide information to health authorities to evaluate current harm reduction measures and for planning future preventive measures.

**Methods**: The health survey was conducted as a cross-sectional study with interview-administered questionnaires and blood tests for anti-HCV with reflex to HCV RNA, at low-threshold centers for PWID in Bergen and Oslo. Informed consent was obtained, and a monetary incentive was given. If HCV was detected, participants were referred for treatment. We calculated HCV prevalence and tested for equivalence between the two cities using a two one-sided test (TOST) with a set equivalence margin of 15 percentage points.

**Results**: In Oslo and Bergen, 227 vs. 121 participants were tested for HCV. 68% vs. 81% were male. Median age was 38 vs. 36 years (range 19-62 vs. 18-61). 79% (Oslo) vs. 83% (Bergen) had detectable antibodies against HCV (largest margin 12 percentage points, considered equivalent). Among the anti-HCV positives, 58% (Oslo) vs. 61% (Bergen) had detectable HCV RNA (largest margin 14 percentage points, considered equivalent). 11% (Oslo) vs. 3% (Bergen) of participants stated they had shared syringes, and 27% vs. 19% had shared other paraphernalia during the last four weeks. 43% (Oslo) vs. 35% (Bergen) stated that they had been tested for HCV during the last 12 months.

**Conclusion**: HCV is a major infection among PWIDs in both Oslo and Bergen. Sharing syringes was less common than sharing other paraphernalia. These results highlight the importance of continued needle exchange programs, and to include paraphernalia in the programs. Continued surveillance is necessary to evaluate implemented measures.