

# Characterising hepatitis C virus transmission dynamics in a high-risk incarcerated population

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**Never Stand Still** 

Medicine

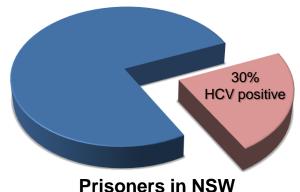
## Hepatitis C virus and incarceration worldwide

- HCV epidemic is driven by transmission in high-risk communities, notably people who inject drugs (PWID).
- PWID form a large proportion of the incarcerated population
  - 50% in the United States (Harrison P.M., et al., Bureau of Justice Statistics Bulletin, 2005)
  - 40% in Canada (Public Safety and Emergency Preparedness Portfolio, 2004)
  - 80% in Europe (European Monitoring Centre for Drugs and Drug Addiction Annual Report, 2006)
  - 40% in Australia (Butler T.M., New South Wales Inmate Health Survey, 2001)
- The global prevalence of HCV infection among prison inmates is approximately 30-40% (Larney, S. et al., Hepatology, 2013)



#### HCV in New South Wales prisons

- In New South Wales, Australia, approximately 10,000 prisoners are incarcerated due to illegal drug use:
  - 30% have been infected with HCV
  - 14% (CI: 9%-19%) HCV incidence rate in NSW prisons (Luciani, F. et. al., Addiction, 2014)
  - 49% have reported injecting drug use (IDU) during follow-up (Luciani, F. et. al., Addiction, 2014)



Kirby Institute and National Drug Research Institute. 2011.



#### **HCV** and incarceration

- NSW prisons form a highly dynamic setting consisting of multiple (n=34)
  centres in which prisoners are frequently moved.
  - 20,000 people incarcerated very year
  - prison sentences averaging 8 months
  - 150,000 movements per year
  - re-incarceration
- NSW prisons form an environment of high HCV incidence and prevalent injecting drug behaviour, which offers an opportunity to study ongoing HCV transmission



### Hypothesis

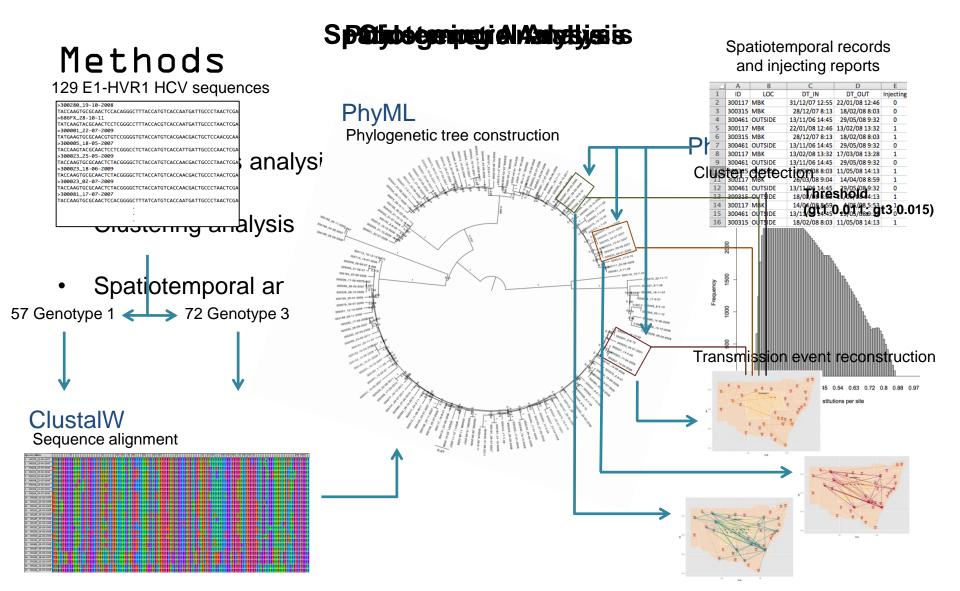
 Integrating molecular epidemiology, prison location and temporal records, and self-reported drug-injecting behavior may characterize HCV transmission dynamics and identify transmission clusters in a prison setting.



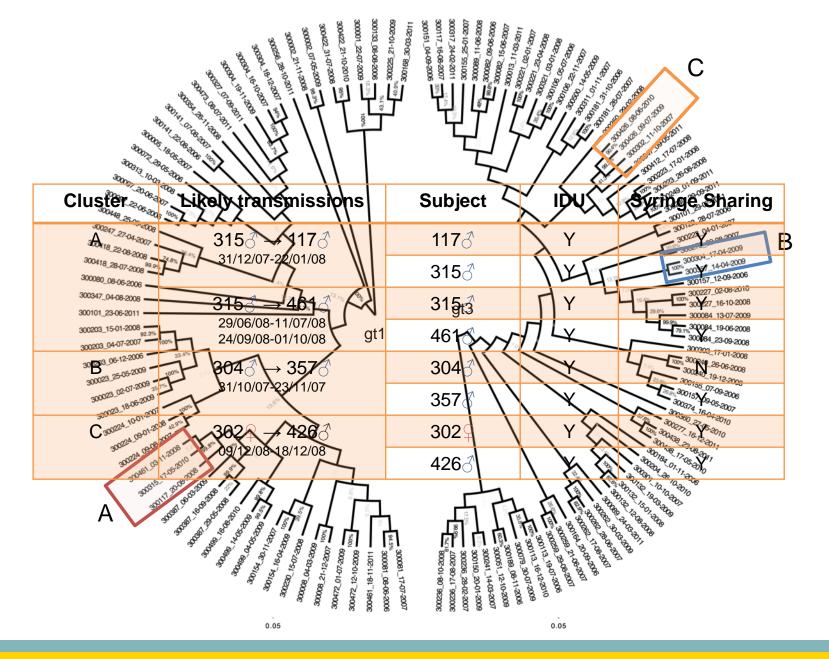
# Hepatitis C Incidence and Transmission in Prisons (HITS-p)

•	A prospective recruited and f	Characteristics	Study cohort (n=79)	soners
	recruited and i	Mean Age (in years)	28	
•	Blood samples	Male	62%	ined at
	baseline and $\epsilon$	Aboriginal	23%	
		Had <= 10 years education	77%	
•	The study con	Had been previously imprisoned	87%	
	o 129 HCV s	Ever had a tattoo	73%	
		Using illegal drugs during crime for which imprisoned	78%	
С	<ul><li>Self-report</li></ul>	Injected drugs in prisons	33%	
		Shared injecting equipment in prisons	29%	
		Mean duration of injecting (years)	8.3	

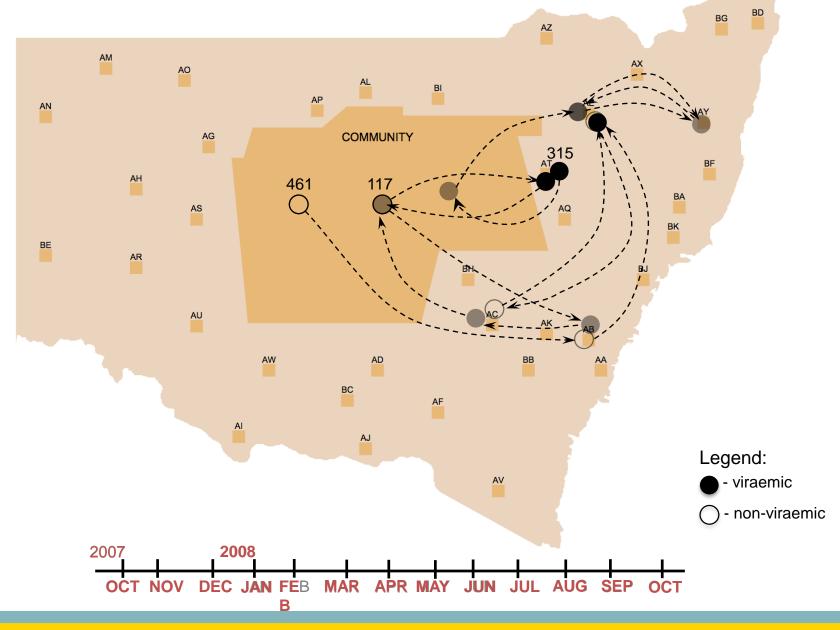




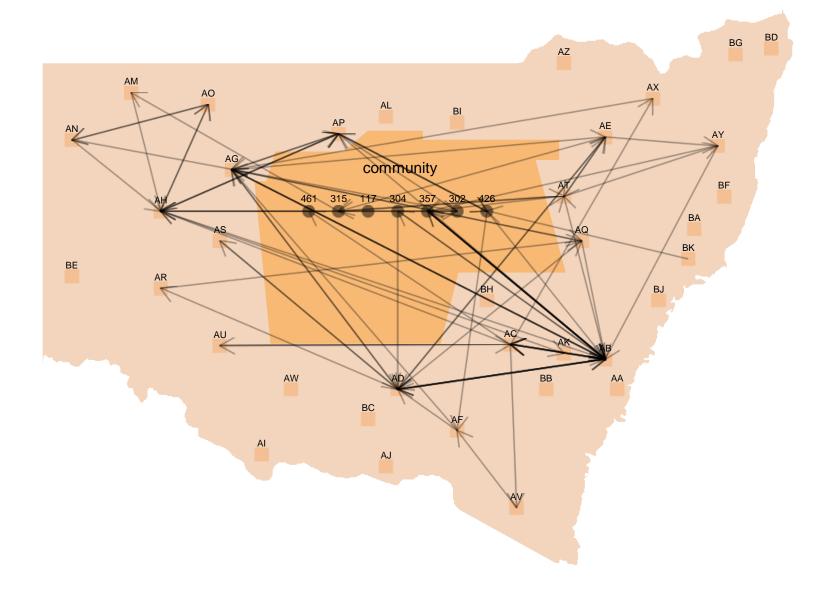














# Distribution of subject movements\* across prisons per year (n=79)

Year	Min	Max	Mean (per year)	Median
2005	1	9	4.75	4.5
2006	1	24	9.71	9
2007	1	19	8.81	8.5
2008	1	17	8.53	8
2009	1	14	7.08	7
2010	1	17	8.27	8
2011	1	22	8.43	7.5
2012	1	14	6	5.5
Overall	on vioita logo than		7.70	

<sup>\*</sup>Not including prison visits less than 24 hours.



# Distribution of subject release to the outside community (n=79)

Year	Min	Max	Mean	Median
2005	0	2	0.64	0
2006	0	5	0.97	0
2007	0	2	0.79	0
2008	0	4	0.98	1
2009	0	2	0.73	0
2010	0	3	0.91	0
2011	0	6	0.91	0
2012	0	3	0.6	0
Overall			0.82	



### Distribution of subject reincarceration events (n=79)

Year	Min	Max	Mean	Median
2005	0	2	0.16	0
2006	0	4	0.44	0
2007	0	2	0.44	0
2008	0	3	0.44	1
2009	0	2	0.29	0
2010	0	2	0.42	0
2011	0	5	0.57	0
2012	0	3	0.43	0
Overall			0.4	



#### Conclusion

- This study describes the application of molecular epidemiological analysis with spatiotemporal and behavioral risk data to describe an ongoing epidemic in a prison setting
- PWID move often between NSW prisons and exhibit high rates of movements between prisons and between prison and community
- Despite the large prevalence of chronic HCV, highly dynamic environment, and possible underreporting of injecting behavior, evidence of recent HCV transmission clusters has been showed
- This framework may be helpful in developing programs and policies to mitigate HCV transmission in NSW prisons



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