

## **30 YEARS OF HIV AND HEPATITIS SURVEILLANCE IN PEOPLE WHO INJECT DRUGS THROUGH THE UNLINKED ANONYMOUS MONITORING SURVEY IN ENGLAND, WALES AND NORTHERN IRELAND**

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**Background:** People who inject drugs (PWID) are vulnerable to blood borne viruses (BBVs), transmitted through the reuse of injecting equipment such as needles and syringes. The Unlinked Anonymous Monitoring (UAM) Survey monitors HIV, hepatitis B (HBV) and hepatitis C (HCV) and associated risk and protective behaviours among PWID in contact with specialist services. We describe the survey and key findings to mark its 30<sup>th</sup> anniversary in 2020.

**Methodology:** The UAM survey has run annually in England and Wales since 1990, and in Northern Ireland since 2002. Those who have ever injected drugs self-complete a questionnaire and provide a biological sample tested for HIV antibodies (since 1990), HBV core antibodies (since 1990), HCV antibodies (since 1998), HBV surface antigen and HCV RNA (both since 2011).

**Results:** Around 3,000 people participate annually. Three-quarters are male, with average age increasing from 27 years in 1990 to 40 years in 2018. HIV prevalence has remained at ≈1%. HBV antibody prevalence decreased from 44% in 1990 to 9% in 2018, concomitant with increased HBV vaccination uptake from 25% in 1998 to 72% in 2018. Ever infection with HCV (antibody prevalence), has increased; from 44% in 1998 to 54% in 2018. In 2018, 0.42% had a current HBV infection, and 27% had a current HCV infection. The proportion ever tested for BBVs has increased (HIV, 50% in 1990 to 80% in 2018; HCV, 50% in 2000 to 85% in 2018). Needle and syringe sharing decreased from 32% to 18% between 1998-2008, but has not improved since.

**Conclusion:** The UAM survey continues to provide valuable insights into BBV prevalence and associated risk and protective behaviours among PWID. Effective interventions need to be maintained and optimised to sustain low HIV and HBV prevalence and to reduce HCV prevalence in PWID.

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