PREVELENCE OF HEPATITIS AMONG OPIOD DRUG USERS RECEIVING METHADONE ASSISTED THERAPY IN SOUTHERN HIGHLANDS ZONE (SHL), TANZANIA.

<u>Peter A¹</u>, Chalamila E¹, Maganga DH¹, Wazee H¹, Mbogela J¹, Lucas D¹, Kayange A³, Akom E^{2,3}, Nyandindi C⁴.

¹Henry M. Jackson Foundation for Medical Research International, Walter Reed Program –Tanzania ²International HIV Prevention and Treatment (IHPT) In support of the U.S. Military HIV Research Program (MHRP)

³Walter Reed Army Institute of Research-Tanzania ⁴Drug control and enforcement authority-Tanzania

Background: People with opioid use disorders are more at risk of contracting infectious diseases such as HIV, hepatitis B and C. Increasing hepatitis screening particularly among vulnerable population is key to achieve World Health Organization's goal of eliminating viral hepatitis by 2030. This study aims to estimate prevalence of hepatitis among people with opioid use disorders receiving (MAT) in SHL.

Methodology: Data analysis was conducted among opioid drug user attending methadone clinics at MZRH and Tunduma MAT clinics in the southern highland zone, Tanzania from November 2021 to January 2022. Hepatitis B test was done by rapid HBsAg, and hepatitis C virus (HCV) was tested using rapid anti-hepatitis C antibody while HIV test was done following national HIV testing a logarithm to all 213 active clients.

Results: Overall positivity for Viral hepatitis (either hepatitis B surface antigen or anti-hepatitis C antibodies) among PWUD/PWID was 9.3% while of that of hepatitis C infections was 6.7% and hepatitis B was 6.7%. Prevalence of HCV among PWIDs was found to be around 15.1%. Prevalence of HIV among participants was 13%. 4 clients (2%) had HIV and HCV co-infection. Viral hepatitis was strongly associated with older age >30 years (p<0.05). positive HCV was strongly associated with injecting drug (p<0.05).

Conclusion: The study provides baseline prevalence of viral hepatis among opioids drug users receiving MAT in SHL. The prevalence of HCV was found to be higher than the general population in the country which estimated to be 2%, this requires additional RT-PCR tests to determine active infection and viral load to rule-out possible complication associated with hepatitis. further work to remove barrier in diagnosis and treatment of viral hepatitis among PWUD/PWIDs is required in elimination of hepatitis as well as prevention of development of chronic liver diseases.

Disclosure of Interest: None