The Intersection of the Opioid and Heroin Epidemic and Hepatitis

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The week of May 9th was unofficially dubbed "Opioid Awareness Week" by House Majority Leader Kevin McCarthy of California. The name came about as Congress considers a series of acts aimed at curbing and resolving the nation's prescription drug and opiate epidemics beginning May 9th.

The opioid epidemic has ravaged communities for years, but only recently caught the attention of the media and national policymakers. Incidents such as the HIV and hepatitis C outbreak among drug users in Scott County, Indiana trained the national spotlight on the alarming trend of heroin and opioid use across the country. Recent data from the Centers for Disease Control and Prevention (CDC) highlights alarming increases in overdose deaths related to heroin and prescription opioid use.

While the crisis has particularly devastated white suburban and rural areas, many have observed similar trends in drug use and overdose in communities of color for decades. A recent Frontline investigation of the opioid treatment industry reveals startling trends between deaths from heroin overdoses and ethnicity.

The investigation revealed that between 2010 and 2014, heroin overdose deaths tripled among African Americans. During that same time, the rate of overdose deaths for whites increased 267%, Native Americans overdose deaths increased by 236%, and Hispanic overdose deaths jumped 137%.

Amid the outcry for treatment services for people struggling with drug addiction, the explosion of heroin and opioid abuse also places drug users at high risk for chronic blood-borne illnesses, such as hepatitis B and C.

Sharing equipment to inject drugs has unfortunately proven an efficient method of transmitting hepatitis B and C. This equipment includes syringes as well as other equipment people use to inject—such as cookers, cottons, rinse water, tourniquets, etc.—that could have blood on them. Researchers have estimated that transmission of hepatitis C through sharing drug equipment is ten times more efficient than that of HIV.

Recent data highlight a parallel increase in overdose deaths from drug use and hepatitis B and C in people who use and inject drugs. In 2014, the HCV surveillance data revealed an emerging

epidemic of HCV infection. Data analysis revealed that approximately 30,000 acute cases of hepatitis C occurred in 2013, a 150% nationwide increase since 2010.

Certain rural regions seem to bear the brunt of new hepatitis infections. In 2015, CDC reported an increase in new hepatitis C cases in Appalachia among people who first began drug use with prescription opioids. The report estimated a 364% increase in new hepatitis C infections occurred in Kentucky, Tennessee, Virginia, and West Virginia.

Most states report these rising numbers of HCV infections are due to increased use of injected prescription opioid drugs and heroin.

In the same breath, rates of hepatitis B transmission have also risen due to the heroin and opioid epidemic. In 2013, approximately 20,000 new cases of hepatitis B occurred, the first increase in acute cases of hepatitis B since 1990.

In 2016, CDC released a report on the increases in new hepatitis B cases in Appalachia, which described a 114% increase in acute hepatitis B from in Kentucky, Tennessee, and West Virginia. These rates are particularly troubling, as hepatitis B is a vaccine-preventable disease.

The increase in acute hepatitis B and C infections are cause for alarm among advocates combatting viral hepatitis. It is clear that the viral hepatitis epidemic and the heroin and opioid/overdose epidemics are intimately linked. Would we choose to pursue action on one epidemic without including the other?

Of course not.

Along with federal advocacy for increased hepatitis B and C testing, prevention, linkage to care, and treatment access, NVHR's 2016 policy initiatives also include advocacy around hepatitis and drug user health. NVHR supports drug policy initiatives aimed at increasing access to harm reduction services, drug treatment options, and prevention of hepatitis B and C through addressing the opioid/heroin addiction crisis.

The heroin and opioid/overdose epidemic is wreaking havoc in rural and urban areas in the United States. In moments when organizations call for a national policy response, we must ensure viral hepatitis is represented and recognized as a serious repercussion of the heroin and opioid epidemic. This is why collaboration to ensure that policies to address the heroin and opioid epidemics are informed by the viral hepatitis community is crucial.

As we reflect on the unofficial Opioid Awareness Week and its significance for drug users, overdose survivors, and those who love them, we are proud to work with a variety of partners to advance these initiatives, including the Coalition for Syringe Access, Harm Reduction Coalition, AIDS United, the National Association of State and Territorial AIDS Directors (NASTAD), and many others.

But our work is far from over. To stay up-to-date on how NVHR is working to advance drug policy initiatives, follow us on Facebook and Twitter! You can also join our mailing list for the most

updated viral hepatitis information and ways to take action.

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