Lithuanian policy and action programme for HIV prevention in IDUs

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HIV/AIDS in Lithuania
Population 3.4 mn.
1/12/2005
- 1992 cumulative HIV cases reported:
  - 862 (78.9%) got infected while using drugs
  - 112 (10.3%) hetero, 69 (6.3%) homo, 49 (4.5%) unknown
  - 946 (87.9%) HIV positive men, 132 (12.1%) women
  - 638 (58.4%) HIV cases identified in prisons:
    - 218 (20.1%) acquired HIV before imprisonment
    - 228 (25.2%) acquired HIV in Alytus prison
  - 314 (28.7%) HIV cases diagnosed in Klaipeda harbour
- 88% HIV/HCV coinfected
- 8% HIV/HBsAg carriers
- 93 developed AIDS
- 42 HIV diagnosed on AIDS stage
- 97 HIV positive died (40 of AIDS)
- 54 on HAART (36 in Lithuanian AIDS center)
Source: Lithuanian AIDS Center 2005

HIV Mode of transmission by year in Lithuania (%)

2005 01 01

Prevalence of drug use, 2004

- 8.2% of Lithuanian population have tried drugs at least once in their life
  - 13.1% men
  - 3.8% women

European Drug and Drug Use Monitoring Centre
HIV/AIDS in Lithuanian prison settings

At any given time approximately 8,000 people imprisoned (15% IDU, 250 aids HIV)

17 - 20,000 people pass annually Lithuanian penitentiary system

New inmates

Infected outside

Infected in prison

HIV/AIDS AWARENESS AMONG CONVICTS

- Convicts are aware of HIV/AIDS well enough:
  - 91.8% are aware of HIV risk through needle and syringe exchange
  - 87.3% are aware of HIV risk when having sex without condoms
- Despite HIV awareness, risk behaviour is still common in prison environment

Prison Department data, 2002

Syringes and needles exchange programmes operating in:

- Klaipeda
- Vilnius
- Alytus
- Druskininkai
- Mazeikiai
- Birzai
- Siauliai

The same terminology in different society could have different mean or implementation.

Drug Control Department data, 2005

Low-threshold site for IDUs of the Lithuanian AIDS Centre (LAC)

- Initiation of harm reduction campaign in 1991 (dialog)
- LTC for IDUs established in 1998 with an aim to improve IDUs servicing and to reduce HIV/STI spread in IDUs and in their sexual partners.
- The staff is also involved in motivation of behavioral changes and/or promotion of abstinence from drugs (preparation for detoxification and psychological social rehabilitation), in HIV and other blood-borne infection prevention, and in promotion of safer sex.
- Other activities of the site staff: monitoring of HIV, HBV, HCV and behaviour, improvement of patients' adaptation to the changing environment, assessment of individual needs of the clients, information and consultations on available social support, assistance in reintegration, stimulation of their social functioning, evaluation of their social situation, and assistance in problem overcome, etc.
- Free tests on HIV, hepatitis, other STIs are available on site.

The Lithuanian AIDS centre data, 2005

HIV/AIDS registered cases in Lithuania

Last month compared with last six month:

- The number of IDUs who do not exchange (share) needles and syringes has doubled
- The number of IDUs who use only sterile needles and syringes has tripled
- The number of IDUs who neither discard contaminated needles and syringes, nor share or sell them to other IDUs has tripled

LAC Low-threshold site for IDUs

IDUs Behaviour change

The Lithuanian AIDS Centre Data, 1999
Clients of LAC LTC

- 2408 IDU registered (1998 - 2005)
  - 90 HIV positive
  - 27 persons quit drugs
  - 69.93% HCV Ab positive

- In LTC IDs have possibility to meet IDUs from other isolated groups

- All (2057) are multiple drug users
- At least 87 clients presently attend methadone programme (out of 130)

Patients in substitution therapy (methadone) in Lithuania, 2002-2004

<table>
<thead>
<tr>
<th>Year</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vilnius</td>
<td>149</td>
<td>135</td>
<td>202</td>
</tr>
<tr>
<td>Kaunas</td>
<td>98</td>
<td>113</td>
<td>122</td>
</tr>
<tr>
<td>Klaipeda</td>
<td>43</td>
<td>37</td>
<td>50</td>
</tr>
<tr>
<td>Panevezys</td>
<td>13</td>
<td>26</td>
<td>41</td>
</tr>
<tr>
<td>Druskininkai</td>
<td>19</td>
<td>21</td>
<td>21</td>
</tr>
<tr>
<td>Totally</td>
<td>322</td>
<td>332</td>
<td>436</td>
</tr>
</tbody>
</table>

Quality of methadone programme in Lithuania

- 91.4% methadone programme attendants have used other drugs while in the programme
  - men: 91.1% and women: 92%
- Usually, intravenous drug and sedatives (dimedrol, relaxium, clonazepam) are used.
- One third of men and a half of women used heroin along with methadone.
- Aim of the use - getting high.

These data were also confirmed by anonymous questioning of methadone programme attendants performed by the Lithuanian AIDS Centre.

Place of HIV diagnosis in Klaipeda harbour

Low threshold center for street prostitutes in LAC

STI among focus group of Vilnius street prostitutes (n =56)

Percentage of IDUs prostitutes out in Vilnius streets:
- In 1998 23%
- In 2001 65%
- In 2004 78%

Prostitution tendency has changed from prostitution – drug use into drug use – prostitution

19 HIV cases diagnosed among women involved in prostitution (the rate of heterosexually infected women has also increased significantly)

Working with target groups: Drug use and prostitution
IDU and antiretroviral treatment

All persons infected with HIV is budgeted from the Compulsory Health Insurance Fund

- Total 6 IDUs received treatment in 2004:
  3 of them are non-active IDU - in these patients have been received good clinical, immunological and virological response,
  other 3 are participants of methadone program.

IDU patients on ART in methadone program

- Patient N.1 - regimen Combivir + Kaletra
  Before initiation of ART - CD4: 14/mm³, HIV RNA: 100 000 cop/mL
  2 month after - CD4: 177/mm³, HIV RNA: 178 cop/mL - good response.

- Patient N.2 - regimen Combivir + stavudine
  Before initiation of ART - CD4: 195/mm³, HIV RNA: 50 340 cop/mL
  6 month after - HIV RNA: 178 cop/mL - good response.

(these difficulties to take blood samples in this patient)

- Patient N.3 - regimen Combivir + stavudine
  Before initiation of ART - CD4: 103/mm³, HIV RNA: 5,3 log cop/mL
  1 month after - CD4: 186/mm³, HIV RNA: 5,62 log cop/mL - poor adherence, patient discontinued treatment.

Long-term psychological and social rehabilitation in Lithuania

- Vilnius Centre for Treatment of Addictive Disorders - 12 beds
- Lithuanian AIDS Centre – 13 beds
- 19 non governmental organizations, payment for services required
- Cost effectiveness of IDUs rehabilitation and reintegration in society

Key issues and interventions for IDUs

(according to one international expert, presented at international conference in Vilnius)

- Harm reduction
  - Provision of sterile injecting equipment to reduce HIV transmission
- Opioid substitution maintenance therapy
- Antiretroviral therapy for injecting drug users
- ? What social norms are we promoting?

Conclusions:
Specific patterns of Lithuanian situation and response

- Country of low HIV/AIDS prevalence
- No cases of mother to child transmission diagnosed
- 80% cases of HIV are IDUs
- 29% are Klaipeda residents
- 58% are prisoners and ex-prisoners
- 29% acquired HIV in Alytus correctional facility
- Increased danger of sexual transmission
- Unique structure and activities of the Lithuanian AIDS Centre including prevention, treatment, social rehabilitation of IDUs, HIV/STD data accumulation and analysis, services to the risk groups (low threshold centres)
- ARV treatment decentralised and available to all people with HIV/AIDS in need (even to drug users without social insurance)

HIV cumulative cases by country

2004 01 01
- HIV cumulative registered cases
- HIV newly diagnosed
- HIV prevalence 0.0000

The Lithuanian AIDS centre data, 2005
Conclusions:
Specfic challenges faced by Lithuania with respect to HIV prevention for IDUs

- Limited access to IDUs, insufficient coverage
- Health and social sector is not enough motivated to work with IDUs and other target groups
- Public health sector is still oriented to inspection mainly
- Family doctor (and other) role in diagnosing HIV infection, counselling, support and care must be increased
- Need to assure political commitment in municipality level through intensive advocacy programmes
- Stigma and marginalisation

Lithuanian HIV/AIDS and Drug Control Policy

- National Drug Control and Drug Use Prevention Programme 2004-2008
  - Approved by the Parliament on 8th April 2004, resolution No. IX-1110
- Coaradation
  - “Three Ones” UNAIDS key principles implemented
- Empowerment of the counties and districts to develop and implement local HIV/AIDS prevention and control programmes

Conclusions:
Intersectorial response based on cultural background and behaviour aspects

- "Institutional memory" in new democracy countries to be improved
- Special attention to be paid to the prison settings, and specific programmes to be developed
- Success of HIV prevention especially depends on behaviour change, treatment and social rehabilitation of drug users, less on "strip" harm reduction approaches

Trends of the intolerance towards vulnerable groups in Lithuania in % (1990-2003)

Conclusions:
United system of rights and responsibility is needed

- We must provide for drug dependant people possibility to get real support they need to abstain from drugs and reintegrate into society
- Accepting drug user as a person who needs our help we don't need to accept his/her criminal behavior
- This help should be individual
- Intersectoral programmes of tackling HIV/AIDS, STI, prostitution, drug use prevention and related issues must be coordinated and integrated, while monitoring and evaluation to be assured (no separated kingdoms)

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Thank you