

Scott County Board of Health

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Position Statement on Syringe Services Programs (SSPs)

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The Scott County Board of Health supports the implementation of Syringe Service Programs (SSPs), as a public health HIV/hepatitis C (HCV) prevention strategy for people who inject drugs (PWID). Recent data shows concerning trends in HIV and HCV infections and linkage to injection drug use:

HIV Data

- The sharing of syringes is the 2nd highest risk factor for acquiring HIV.
- In Iowa, HIV diagnoses in 2021 increased by 25% over 2020, reversing decreases in trends in recent years. This includes an increase in diagnoses among PWID.

Hepatitis C Data

- HCV diagnoses among lowans under 40 years of age have increased 1,100% since 2000.
- Most infections today are acquired through sharing needles and equipment when injecting drugs.
- Of lowans under the age of 40 diagnosed with HCV in 2021 and eligible for follow-up, 76% reported injection drug use as the mode of their HCV exposure.

Risk Vulnerability

• The Centers for Disease Control and Prevention (CDC) lists all counties in Iowa as jurisdictions experiencing or at risk of significant increases in hepatitis infection or an HIV outbreak due to injection drug use. Among Iowa counties, Scott County is in the top 10 for HIV and HCV vulnerability.

Syringe service programs are an important tool to help address these trends. For PWID who do not stop injecting drugs, using sterile injection equipment for each injection can reduce the risk of acquiring and transmitting infections and prevent outbreaks. The following data supports the value of SSPs in prevention of infectious diseases and other benefits:

- CDC estimates SSPs are associated with an estimated 50% reduction in HIV and HCV incidence.
- U.S. Health and Human Services guidance states that SSPs should be part of a comprehensive service program
 that includes education and counseling to reduce sexual, injection, and overdose risks; provides condoms to
 prevent transmission of viral hepatitis, HIV, or other sexually transmitted infections; offers HIV, viral hepatitis,
 STI, and tuberculosis screening; links to hepatitis A and hepatitis B vaccination; and other related services. These
 other components are present in lowa prevention work.
- When SSPs are combined with medications that treat opioid dependence, HIV and HCV transmission is reduced by more than two-thirds.
- CDC's National HIV Behavioral Surveillance system shows that more syringes distributed at SSPs per people who
 inject drugs in a geographic region, the more likely people who inject drugs in that region were to report safe
 disposal of used syringes, providing additional public safety benefits.

Scott County Board of Health concludes that SSPs are an effective public health intervention and may reduce the incidence of HIV and HCV. Scott County Board of Health supports changes in the lowa Code to allow SSPs and instructing the lowa Department of Health and Human Services to issue administrative code establishing, regulating the operation, monitoring, and reporting the efficacy of SSPs in the state of lowa.

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Centers for Disease Control and Prevention, *Viral Hepatitis Q&As for the Public*: https://www.cdc.gov/hepatitis/hcv/cfaq.htm#:~:text=The%20hepatitis%20C%20virus%20is,to%20prepare%20and%20inject%20drugs

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https://idph.iowa.gov/Portals/1/userfiles/40/2021%20End-of-Year%20Surveillance%20Report.pdf