A reduction in HIV positive and an increase in hepatitis C positive subjects in methadone maintenance treatments

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Methadone maintenance treatment (MMT) has been available in Switzerland for more than 20 years. The prescription of methadone is part of a comprehensive policy aimed at reducing illicit opiate use, HIV risk behaviour and crime rates [3].

Although this practice is well established some still doubt the efficiency of MMT. In the canton of Basel City the use of methadone substitution in the treatment of opiate dependence is evaluated yearly [1, 2].

This study presents the results of a crosssectional survey (n = 1013) carried out in 2000. Patients were interviewed by their general practitioners and 89% of the questionnaires returned. The results presented pertain to this responder sample (n = 896).

Results

The majority of the patient population underwent HIV testing. In 2000, 9.4% of the sample was HIV positive. In 1992 the corresponding figure was 29%. The proportion of respondents with an unknown HIV status was 26.5% in 1995 and had fallen to 0.6% in 1999 (Table 1). These improvements indicate that substitution treatment and the offer of needle exchanges effective.

Whilst the results for HIV status are positive, the reports on hepatitis status remain alarming. Overall 63.5% of the population tested positive for hepatitis C (Table 2). The proportion of non-tested persons or those who failed to answer is high in this group at 27% respectively 13%.

In conclusion this aspect of drug taking behaviour induced sequelae needs to be examined more closely.

References

- 1 Petitjean S, Bucheli B, Kuntze M, Ladewig D. Resultate aus der Begleitevaluation der Methadonbehandlungen im Kanton Basel-Stadt Nr. 5; Dezember 2000.
- 2 Methadonbericht. Suchtmittelersatz in der Behandlung Heroinabhängiger in der Schweiz (3. Aufl.). Bundesamt für Gesundheit, Bern, 1996.
- 3 Marsch L.A. (1998). The efficacy of methadone maintenance interventions in reducing illicit opiate use, HIV risk behaviour and criminality: a meta-analysis. Addiction 1998;93(4):515-32.

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Table 1	Year	1992/93	1994/95	1996	1997	1999/2000
HIV prevalence between 1992 and 2000 in patients in MMT.	HIV	n = 501	n = 830	n = 919	n = 913	n = 896
	HIV positive (%)	29.0	12.5	10.8	11.5	9.4
	HIV negative (%)	34.0	61.0	75.8	84.6	90.0
	Unknown HIV state	37.0	26.5	13.4	3.9	0.6
	Total	100.0	100.0	100.0	100.0	100.0
Table 2	Hepatitis (n = 700*)	A		В	С	
Hepatitis A, B, and C seroprevalence in patients in MMT	negative (%)	4	5.7	34.4	36.5	
	positive (%)	-		3.9	55.5	
	positive vaccinated (%)	33	3.6	36.9	-	
	known positive (%)	20).7	24.8	8.0	

Total

Results from the responder sample (700 of 896 patients); overall 13% were not tested for

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hepatitis A, B and C; and 33% had an unknown hepatitis A state, 25% an unknown hepatitis B state, and 27% an unknown hepatitis C state.

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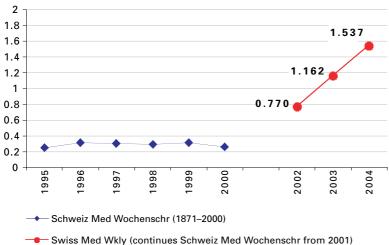
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