

SAFER INJECTION PRACTICES: THE RESULTS OF *STAYING SAFE* A RCT AIMED AT REDUCING HCV RISK AMONG YOUNG PEOPLE WHO INJECT DRUGS IN NEW YORK CITY.

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Background:

Injection drug use continues to be a major risk for HCV infections among young people who inject drugs (YPWID) even in localities with high harm reduction coverage. We developed Staying Safe (Ssafe) an HCV prevention intervention (4 two and half hours sessions) based on strategies and practices of long term PWID who remained HCV uninfected.

Methods:

169 participants were recruited for a clinical trial evaluating Staying Safe. Participants were randomly assigned to Ssafe (n=83) or an attention-matched Control (n=86). Eligibility criteria included: age 18-29; used opioid/heroin 12+times in past 30 days (verified by urine drug screen); recent IDU (at least once in past 6 months); and HCV and HIV antibody negative. Participants' drug use and injection sharing practices were assessed at baseline and 4 follow-up periods (3,6,9 &12 months post-intervention); HCV/HIV antibody status was tested on-site at baseline, 6 and 12 months. This analysis is based on generalized mixed-effects piecewise regression models.

Results:

Participants (mean age=25.2) first injected drugs at age 20 (SD=6.2). 27% were female, 31% Latinx, 55% Non-Hispanic White, 5% Non-Hispanic Black or Multiracial. At baseline, 31% were currently homeless; 91% met criteria for severe OUD; and 82% shared injection paraphernalia in past 3 months. 77% of participants (Ssafe) and 74% (Control) attended at least 1 session.

At 3 months post intervention, Ssafe participants reported backloading with significantly fewer people ($p=.027$) in the past 3 months than control participants. This effect was maintained at 6 and 12 months. Compared to baseline, participants in both arms were significantly less likely to share injection paraphernalia other than syringes at all post-intervention time points.

Conclusion:

Participants in both arms significantly reduced injection risk behavior during the trial. These results suggest that repeated antibody testing and regularly inquiring about sharing practices might be sufficient to significantly reduce injection risk among YPWID.

Disclosure of Interest Statement:

No conflicts of interest to disclose