



European Monitoring Centre
for Drugs and Drug Addiction

EMCDDA systematic review of HCV among people who inject drugs in Europe: one method for multiple purposes

Marica Ferri, Lucas Wiessing EMCDDA

INTRODUCTION

- peginterferon / ribavirin, could play an important role as preventative measure in chronic HCV in PWID;
- data on the epidemiology of chronic HCV and the exact role of PWID is scarce;
- better knowledge is needed to estimate the effect of antiviral treatment in the prevention of transmission of HCV and the prevention of HCV-related complications among PWID,
- data on the dynamics and characteristics of HCV infections in PWID remain scarce despite their central importance to planning treatment and prevention capacity.



INTRODUCTION

We perform a systematic review of the literature on the epidemiology of HCV in the past decade with regard to the role of PWID in Europe (the EU 27).

We will contact a large European expert network for additional publications.

The results will be complemented with data routinely collected at EMCDDA on prevalence, incidence proxies and notifications.



OBJECTIVE

To assess the availability and quality of key epidemiological data to inform the scale up of treatment for PWID with HCV in Europe



RESEARCH QUESTIONS

What is the **incidence** of HCV infection in PWID in Europe?

What are **characteristics of new and chronic infections** among PWID in Europe, in terms of **genotypes, HIV coinfection**?

What proportion of infected PWID is being diagnosed and what proportion enters treatment?

What estimates exist of future burden of disease in European countries?



METHODS

Literature review

Population: PWID (ever injectors) HCV infected

Intervention / exposition: – not relevant

Comparison: – not relevant

Outcome: To be defined per topic

Type of study: Cohort /longitudinal, Cross-sectional,
Modelling,
Less likely to be included: Trials, Case-control



METHODS

Literature review

Geographic scope: EU 27

Dates: Between 1 January 2000 and 31 August 2012

Databases: Pubmed, Cochrane, EMBASE

Languages: no restriction to English

Grey literature: yes,

EMCDDA expert network will be contacted for
complementing studies



METHODS

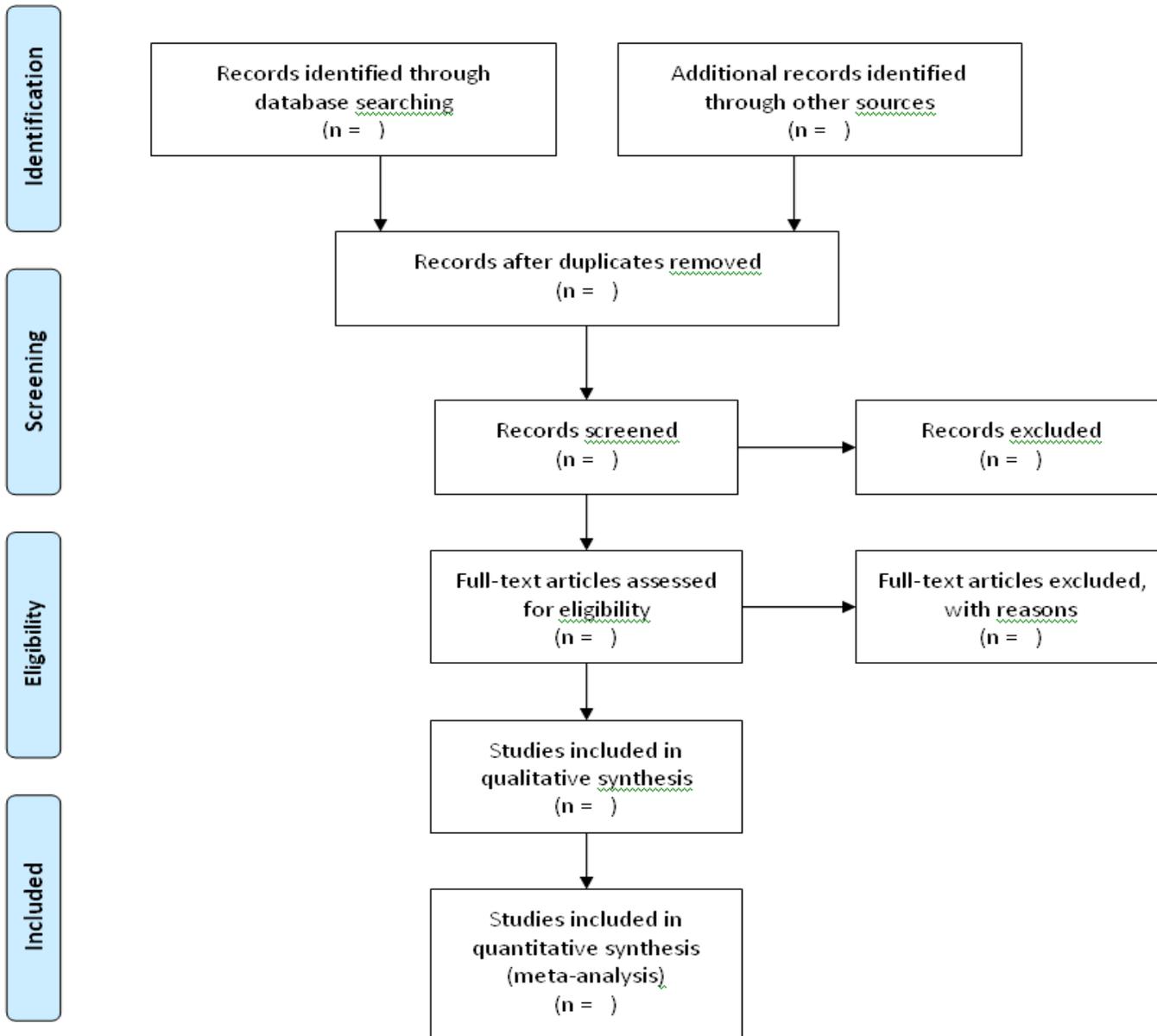
Methodological assessment

Quality criteria (to develop cut-off level for each)

- loss to follow up
- sample size
- selective reporting
- representativeness of sample (characteristics of patients)
- other (study design specific checklists)



Prisma statement



EXPECTED RESULTS

proportion of PWID among newly diagnosed HCV cases in Europe

trends in acute and chronic cases? (How can notifications be interpreted)

Incidence and incidence proxies in PWID

genotype distribution in PWID

proportion of new infections that become chronic

proportion of undiagnosed cases in PWID

Proportion of cases coinfecting with HIV

estimates of future burden of disease (What proportion of this could be avoided)



EXPECTED RESULTS

Complementary data available at EMCDDA – beside the literature review:

Notifications, estimates of IDU prevalence / population size, data on prevalence in young and new PWID, LSHTM/EMCDDA co-infection dataset



LIMITATIONS of REVIEW

Possible lack of incidence studies, difficulties in identifying and follow-up the source population

Higher publication bias for non-RCTs (barriers to finding them)

Lack of studies based on hospital or ambulatory records

Geographical heterogeneity of availability of studies

Lack of information on implementation and cost of treatment



POSSIBLE LIMITATIONS of STUDY TO ACHIEVE the OBJECTIVE

information on cost of treatment;

information on patients/carer preferences;

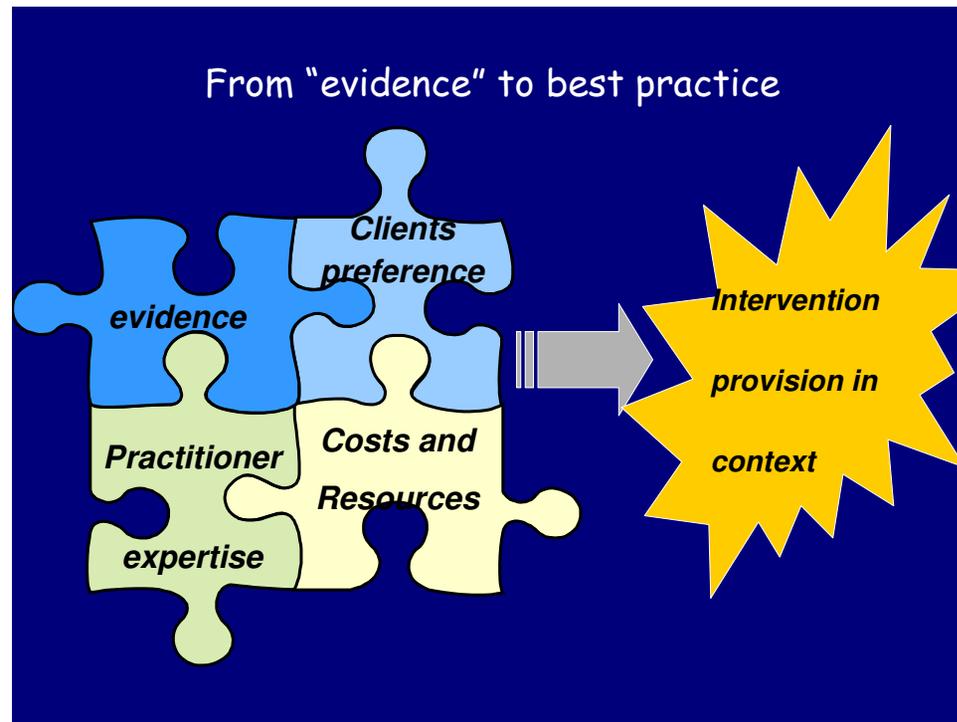
information on implementation obstacles;

guidelines.....



Evidence does not make decisions, people do

Haynes RB *BMJ* 2002;324:1350



Adapted from A. Liberati 2001 personal communication

Authors (in alphabetical order)

Marica Ferri, Bart Grady, Angelos Hatzakis, Vivian Hope, Daphne Hotho, Maria Kantzanou, Jeff Lazarus, Cathy Mathei, Maria Prins, Peter Vickerman, Lucas Wiessing



ADDED VALUE

Standards for high quality international collaboration on EMCDDA products:

Standardized centralized search strategy;

Homogeneous selection and assessment criteria;

Central collection of references;

Systematic working group teleconferences

