



July 3, 2019

TO: Oregon healthcare providers

FROM: Tim W. Menza, MD, PhD, Medical  
Director

RE: HIV and other infectious diseases among people who use drugs

Dear Colleague,

Recently, the Oregon Health Authority's HIV/STD/TB Program detected an increase in the number of cases of HIV infection among people who use methamphetamine and inject drugs in [Multnomah County](#).

Some notable features of the cases diagnosed with HIV include:

- Almost 90% reported using methamphetamine alone or in combination with opioids; non-injection use of methamphetamine was very common.
- Many cases had been diagnosed with syphilis or hepatitis C infection prior to their HIV diagnosis.
- Many of the women diagnosed with HIV reported that they had had a sex partner who they knew to be living with HIV; only one reported ever taking pre-exposure prophylaxis, PrEP, a daily medication proven to prevent HIV infection.
- Almost 70% of the men who inject drugs newly diagnosed with HIV also reported sex with men.
- Over 60% reported unstable housing.
- Forty percent of new diagnoses among people who inject drugs were made at one of several different hospitals in the county.

In Oregon as a whole, we have seen an increase in HIV infections and syphilis among people who inject drugs, particularly among those who use methamphetamine alone or in combination with other drugs, including opioids. We have also observed an increase in hepatitis C infections among people under 30 years of age, a group presumed to be recently infected through injection drug use. To learn more about the trends and contextual factors we see in our data, take a look at a recent [talk](#) our team prepared on the trends and costs of the infectious disease complications of injection drug use.

People who use drugs deserve our care and compassion. We ask that if you see people who use methamphetamine or inject drugs in your clinics, hospitals, or emergency rooms that you:

- Recognize the important impact that you can have on the lives of people who use drugs.
- Test for HIV, syphilis, and hepatitis C infection; your local public health authority can assist with informing patients of their results and linking patients to care.
- Prescribe HIV-negative patients pre-exposure prophylaxis, PrEP, a once-daily medication to prevent HIV infection. You can also refer patients to one of many [PrEP](#) providers in the state.
- Know that if someone tests positive for HIV, help is available. HIV case management is available throughout the state to link individuals to HIV care. OHA's [CAREAssist](#) program can help eligible individuals with out of pocket medical expenses, including insurance premiums, medications, and medical services.
- Vaccinate for hepatitis A and B.
- Refer patients to syringe exchange [programs](#) in your community.
- Prescribe naloxone to prevent overdose death; many of those using methamphetamine also use opioids.
- Refer patients to local providers of substance use disorder treatment.

A [CD Summary](#) on the infectious disease complications of injection drug use provides detailed guidance and resources for the care of people who inject drugs. If you or your colleagues desire more in-depth training on HIV/STI prevention and treatment and preventive care for people who inject drugs, the Oregon AIDS Education and Training Center (OR AETC) provides trainings ranging from large-group lectures to one-on-one provider detailing. You can reach out to OR AETC via electronic mail to [info@oraetc.org](mailto:info@oraetc.org).

If you have questions or concerns, please do not hesitate to reach out to the HIV/STD/TB Program at the Oregon Health Authority at 971-673-0153.

We appreciate your commitment to improving the health of people who use drugs and your work to end new HIV infections in Oregon.

Sincerely,

A handwritten signature in black ink that reads "T. Menza". The signature is written in a cursive, flowing style.

Tim W. Menza, MD, PhD