Abstract 640

TITLE: Methadone Maintenance as Effective HIV Risk Reduction
AUTHORS: Kwiatkowski, CF.; Booth, RE.

BACKGROUND/OBJECTIVES: Behavioral interventions are currently the only means available to reduce the spread of HIV individuals in the U.S. Interventions, such as street outreach and HIV testing and counseling, have been shown to be successful in reducing HIV risk behaviors. However, not all IDUs reduce their risk, and relapse to high risk, and relapse to high-risk behaviors is not uncommon. Thus additional risk reduction strategies are needed. This study investigated the effectiveness of methadone maintenance treatment in reducing HIV risk behaviors among IDUs.

METHODS: Out-of-treatment IDUs were recruited through street outreach in Denver. CO beginning in February 1996. Subjects were randomly assigned to receive one of two interventions stressing either harm reduction or drug treatment reduces HIV risk. All subjects were provided free HIV testing and counseling and drug treatment on-demand; half were randomly assigned to receive free drug treatment. As of February 1999, 280 opiate injectors enrolled in the study had received a baseline and six month follow-up interview. Data from these subjects were analyzed to determine if subjects who participated in methadone treatment for at least 90 days had reduced their HIV risk behaviors more than those who did not enter treatment or had participated for less than 90 days. HIV risk was measured by the number of times subjects injected drugs; injected cocaine only; injected heroin only; used previously used, unclean needles; and shared drug paraphernalia (cotton, cooker and water). Changes from baseline to follow-up were analyzed using repeated measures ANOVA, controlling for baseline differences in the dependent variables.

RESULTS: Nearly half of the subjects entered drug treatment; 27% remained in treatment for at least 90 days. HIV risk behaviors decreased from baseline to follow-up for subjects who were in treatment for 90 days and for those who were not. Those in drug treatment, however, showed significantly greater reductions in the total number of injections, the number of heroin injections, injections with used needles and shared drug paraphernalia (pc. 05).

CONCLUSIONS: Participation in methadone treatment for at least 90 days is an effective means of reducing HIV risk. Street outreach intervention, HIV testing and counseling and treatment-on-demand is effective means of encouraging out-of-treatment IDUs to enter methadone treatment and to reduce their risk behaviors. Increased collaboration between drug treatment facilities and HIV risk reduction programs is called for in order to increase the awareness and effectiveness of drug treatment as risk reduction.

PRESENTER CONTACT INFORMATION

Name: Carol F. Kwiatkowski
Address: 1643 Boulder Street
Denver, CO 80211
Telephone: (303) 433-4669 ext. 14
Fax: (303) 458-6772
E-mail: carol.kwiatkowski@uchsc.edu