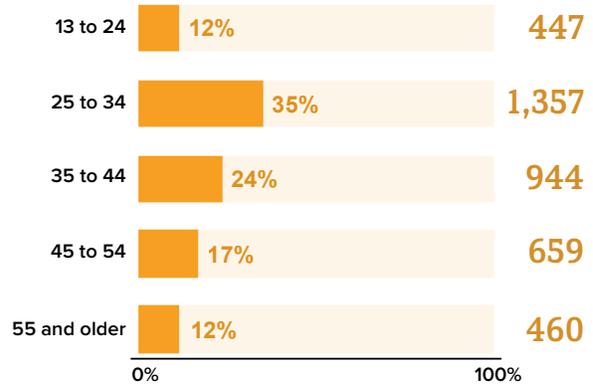


HIV and People Who Inject Drugs



People who inject drugs (PWID)* made up 10% (3,864) of the **37,968 NEW HIV DIAGNOSES** in the US and dependent areas[†] in 2018.

People aged 13 to 34 made up nearly half of all new HIV diagnoses among PWID.

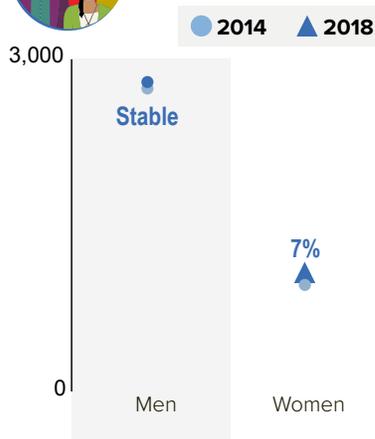


The numbers have been statistically adjusted to account for missing transmission categories. Values may not equal the total number of PWID who received an HIV diagnosis in 2018.

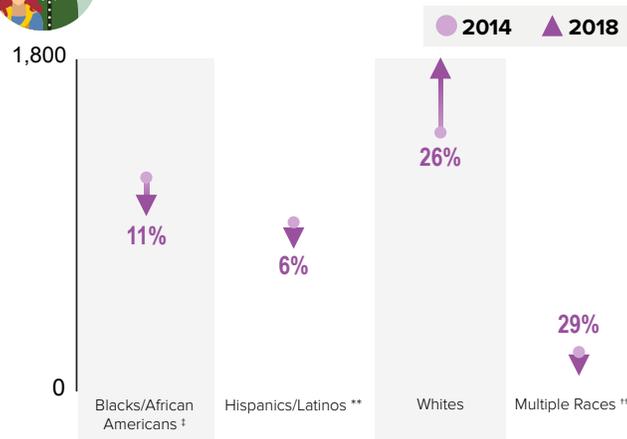
From 2014 to 2018, HIV diagnoses remained stable among PWID overall. While progress has been made with reducing HIV diagnoses among some groups of PWID, efforts will continue to focus on lowering diagnoses among all PWID.



Trends by Sex



Trends by Race/Ethnicity



* Includes infections attributed to male-to-male sexual contact *and* injection drug use (men who reported both risk factors).

[†] American Samoa, Guam, the Northern Mariana Islands, Puerto Rico, the Republic of Palau, and the US Virgin Islands.

[‡] *Black* refers to people having origins in any of the Black racial groups of Africa. *African American* is a term often used for people of African descent with ancestry in North America.

^{**} Hispanic/Latino people can be of any race.

^{**} Changes in subpopulations with fewer HIV diagnoses can lead to a large percentage increase or decrease.

^{‡‡} In 50 states and the District of Columbia.



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PWID who don't know they have HIV can't get the care and treatment they need to stay healthy.



At the end of 2018, an estimated **1.2 MILLION PEOPLE** had HIV. Of those, 186,500 were among people with HIV attributed to injection drug use.##

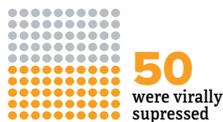
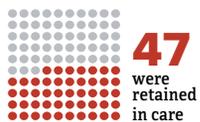
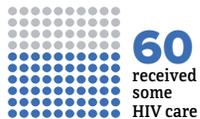
9 in 10
PWID knew they had the virus.



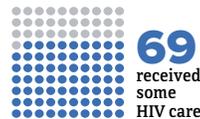
It is important for PWID to know their HIV status so they can take medicine to treat HIV if they have the virus. Taking HIV medicine every day can make the viral load undetectable. People who get and keep an undetectable viral load (or remain virally suppressed) can stay healthy for many years and have effectively no risk of transmitting HIV to their sex partners. Keeping an undetectable viral load also likely reduces the risk of transmitting HIV through shared needles, syringes, or other drug injection equipment, though we don't know by how much.

Compared to all people with HIV, male PWID have lower viral suppression rates, female PWID have about the same viral suppression rates, and gay and bisexual male PWID have higher viral suppression rates. More work is needed to increase these rates.

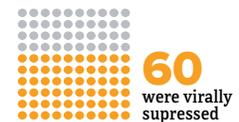
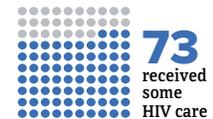
For every 100 male PWID with HIV:
(not including gay and bisexual men)



For every 100 female PWID with HIV:



For every 100 gay and bisexual male PWID with HIV:



For comparison, for every **100 people overall** with HIV,
65 received some care, **50 were retained in care**, and **56 were virally suppressed**.

There are several challenges that place some PWID at higher risk for HIV.

Opioid Crisis



The prescription opioid and heroin crisis in nonurban areas has led to increased numbers of PWID and new populations being at risk. These areas have limited access to HIV services and substance use disorder treatment.

Other Diseases



PWID are at risk for getting blood-borne diseases such as viral hepatitis and other sexually transmitted diseases (STDs). Having another STD can greatly increase the likelihood of getting or transmitting HIV through sex.

Lack of Treatment



PWID may not have access to treatment, including medication-assisted treatment (MAT) and medication for opioid use disorder (MOUD). MAT and MOUD can lower HIV risk by reducing injection drug use.

Lack of Prevention Programs



Some PWID may not have access to effective syringe services programs (SSPs). SSPs provide access to sterile needles and syringes, facilitate safe disposal of used syringes, and most provide HIV testing and linkage to care.

How is CDC making a difference for PWID?



Collecting and analyzing data and monitoring HIV trends.



Supporting community organizations that increase access to HIV testing and care.



Conducting prevention research and providing guidance to those working in HIV prevention.



Promoting testing, prevention, and treatment through the *Let's Stop HIV Together* campaign.



Supporting health departments and community-based organizations by funding HIV prevention work and providing technical assistance.



Strengthening successful HIV prevention programs and supporting new efforts funded through the *Ending the HIV Epidemic* initiative.

For more information about HIV surveillance data, read the "Technical Notes" in the HIV surveillance reports at www.cdc.gov/hiv/library/reports/hiv-surveillance.html

For more information visit www.cdc.gov/hiv