



# Southern African HIV Clinicians Society 3rd Biennial Conference

13 - 16 April 2016  
Sandton Convention Centre  
Johannesburg

**Our Issues, Our Drugs,  
Our Patients**

[www.sahivsoc.org](http://www.sahivsoc.org)  
[www.sahivsoc2016.co.za](http://www.sahivsoc2016.co.za)

# 59<sup>th</sup> Session of Commission on Narcotic Drugs Vienna 14-22March 2016

Accepted resolution to take to UNGASS 19-21  
April

‘We reiterate our commitment to end by 2030 the epidemics of AIDS and tuberculosis, as well as combat viral hepatitis, other communicable diseases, inter alia among people who use drugs, including people who inject drugs’

UN Economic and Social Council E/cn.7/2016/L.12/Rev.1\*



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# 5<sup>th</sup> Session of the Africa Union Conference of Ministers of Drug Control – AU Plan of Action on Drug Control (2013-2017)

‘Against this background, the 5<sup>th</sup> Session of African Union Conference of Ministers on Drug Control adopted the AU Plan of Action on Drug Control (2013-2017) whose fundamental goal is to improve health, security and socio-economic well-being of people in Africa by reducing illicit drug use, trafficking and associated crimes.’

# Overview of Substance Use Disorder

Today drugs of abuse are made available via the internet and other unregulated outlets under names that sound attractive rather than suggesting that they can be dangerous. Youth can access information about these drugs via the internet and even obtain formulations and methods to produce them in their own kitchens

# Overview of Substance Use Disorder

Health professionals must stay abreast of the new drugs and marketing ruse to conceal the true nature of the substances

Misguided chemists constantly develop new psychoactive substances with pharmacology that mirror controlled or scheduled substances. Often the dangers associated with these new concoctions are greater than the originator drug.

# Overview of Substance Use Disorder

In spite of the research focusing on treating the underlying addictive processes, the successes have been minimal. Whereas methadone and now buprenorphine are used for narcotic maintenance the focus must remain on prevention.

**TABLE 1.** Global estimates of the use of various drugs, 2013

	Percentage of population that has used the drug	
	low	high
Cannabis	2.7	4.9
Opioids	0.6	0.8
Opiates	0.3	0.4
Cocaine	0.3	0.4
Amphetamines	0.3	1.1
“Ecstasy”	0.2	0.6
All illicit drug use	3.4	7.0

Source: UNODC, responses to annual report questionnaire.

Note: Estimates for adults aged 15-64, based on past-year use.

# THE DRUG SCENE

United Nations Office on Drugs and Crime,  
2014: Annex 1 estimates : 15-64 year old

- Cannabis 7.5% (World 3.8%)
- ATS 0.9% (World 0.7%)
- Cocaine 0.4% (World 0.4%)
- Opioids 0.3% (World 0.7%)
- Opiates 0.3% (World 0.4%)
- African countries account for the highest levels of cannabis production in the world = 25% of world supply



# AFRICA BLACK MARKETS VALUE (\$1,3 Billion)

Country	Population	Market Value US\$
Egypt	80 335 036	219.3 Million
Ivory Coast	17 654 843	23 Million
Kenya	34 707 817	260 Million
Morocco	33 757 175	226 Million
Nigeria	140 003 542	195 Million
South Africa	47 432 000	413 Million

# CURRENT TRENDS OF SUBSTANCES OF ABUSE

Data from the treatment centres surveyed indicates trends as follows:

- Alcohol is the primary substance of patients admitted in treatment centres in KwaZulu Natal, Eastern Cape, Free State, North West, and Northern Cape
- Cannabis is the most common substance abused by patients in the treatment centres in Gauteng, Mpumalanga and Limpopo
- Western Cape's use of various drugs remains high : 34% of patients are admitted for Methamphetamines /Tik; 31% for cannabis. 25% of under 20 years abuse alcohol

( SACENDU Report, 2014)



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# CURRENT PATTERNS OF SUBSTANCES OF ABUSE

Data from the Correctional Facilities are as follows:

- **Age:** Children under 18 years constitute 21% of offenders indicating substance use, while adults make up 79%
- **Gender:** The Majority (85%) of offenders who indicated using substances are male. While female offenders comprises 24%.
- **Racial Groups** indicated Substance use: Coloured offenders: 41%; Asian offenders: 37% ; Black offenders: 36% ; and White offenders: 37%.
- **Education:** 46% of offenders who indicated substance use were school drop outs; 20% are still receiving some form of education and 21% have completed school. 2% had no formal education. 7% have completed tertiary education
- **Employment:** 38% of offenders who indicated substance use were unemployed; 30% have some form of employment and 18% listed as scholars

(NICRO Report, 2015)



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# Substance Abuse problem in S.A.

- Approximately 270 991 citizens are problem drug users in 2010 report
- 1.97 million citizens are problem alcohol users
- About 50 per 1000 (5%) of school-entry children have Foetal Alcohol Syndrome Disorders (FASD)
- **Cannabis:** between 11.2%(WC) and 50.2% (Limpopo/Mpumalanga) of patients reported this as their drug of choice
- **Cocaine:** between 1.9%(WC) and 20.1% (EC) reported this as their primary drug of abuse
- **Heroin:** between 0.3% (FS,NC,NW) AND 29.5% (KZN) reported this as their primary drug of abuse

# Substance Abuse problem in S.A. Cont...

**ATS:** between 0.1%(KZN)AND 40.6% (WC)  
reported this as their primary drug of abuse

**OTS:** between 0.1 (WC) and 12.3% (EC) reported  
medication as their primary drug of abuse

## Access to Treatment

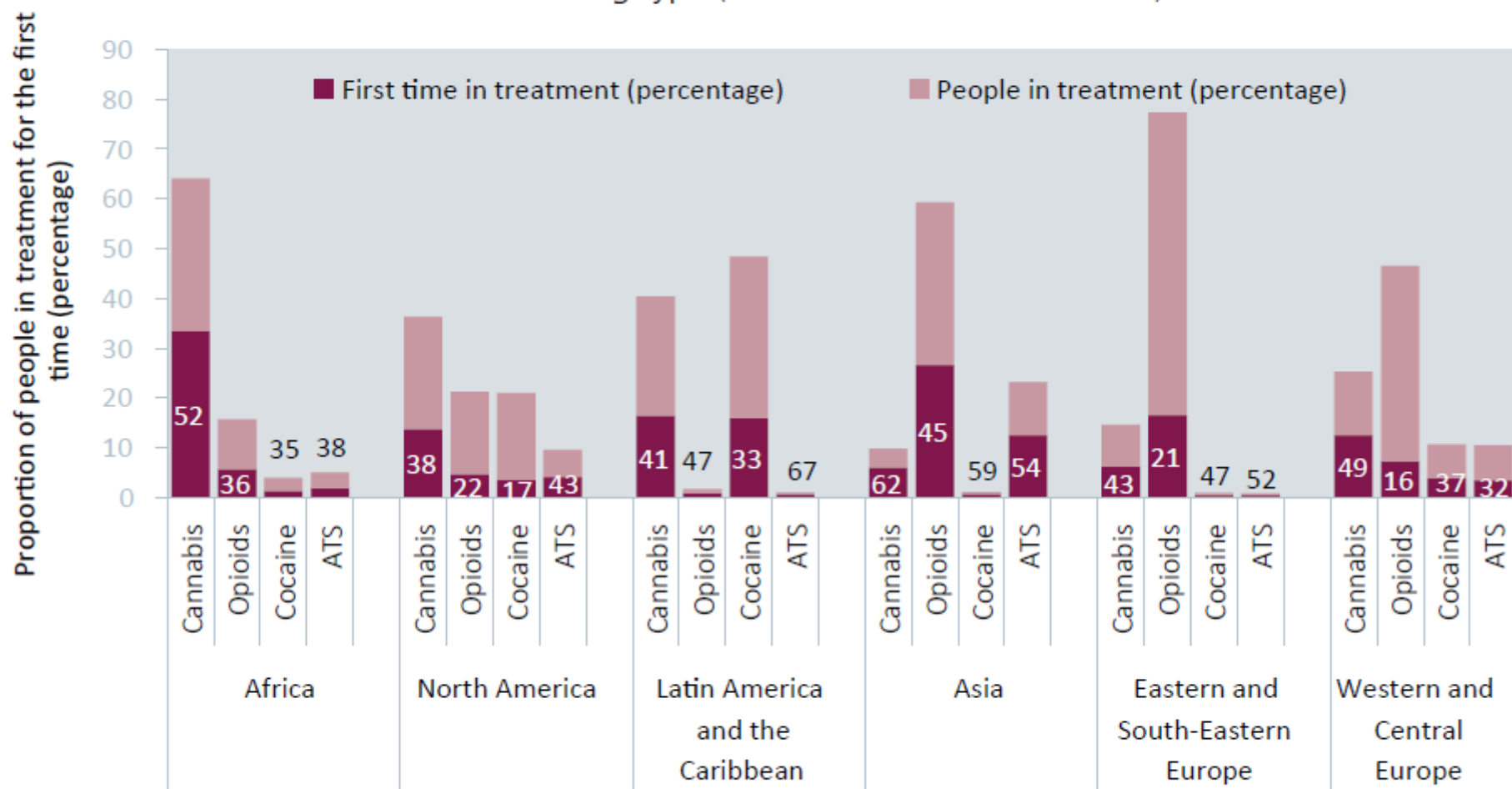
- 1 in 18 requesting treatment have access in SA
- 1 in 3 have access in North America
- 1 in 4 in Oceania

*International Narcotics Control Board for 2013 (United Nations, 2014:45)*



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**FIG. 4.** Percentage distribution of people in treatment, by primary drug type, by region and share of first-time entrants for each drug type (2013 or latest available data)



Source: UNODC, responses to annual report questionnaire.

# THE DRUG SCENE

Drug use patterns and sectors of special concern are: *polydrug use* (use of two or more substances simultaneously or sequentially), *injecting drug use (IDU)* as well as illicit drug use and IDU within *prison populations*. Concern about IDU relates to indications that the occurrence of IDUs living with HIV and/or Hepatitis C and B is relatively widespread and rising. Furthermore, IDU and in particular the use of contaminated injection equipment expose the individuals concerned to contracting HIV and Hepatitis C and B infection as well as to loss of life.

The 2014 *World Drug Report* (United Nations Office on Drugs and Crime, 2014:5)



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# Structural & social factors influencing HIV

## Drug use

### DIRECT RISK

- Needle & syringe reuse
- Ineffective cleaning
- Sharing

### INDIRECT RISK

- High risk sexual practices
- Low levels of knowledge
- Limited access to appropriate services
- Violence
- Stigma, discrimination & exclusion

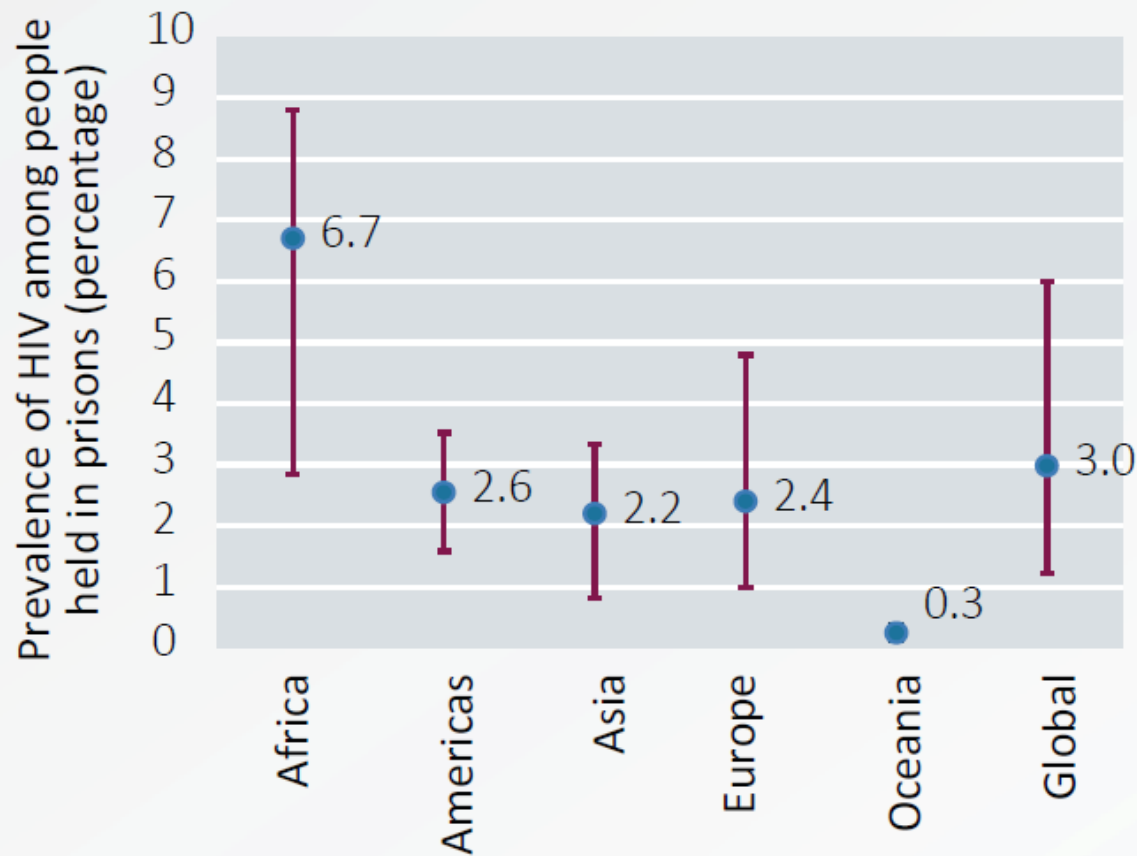
**HIV Infection**



# Sexual practices

Variable	GP Male (n=123)	GP Female (n=27)	Total
Age 1 <sup>st</sup> sex, years (IQR)	16 (14 – 17)	14 (13 – 17)	15 (14-17)
Sexual partners, last 12 mths	2 ( 1 - 3)	2 (1 – 3)	2 (1-4)
Condom used at last sex	41% (51/123)	44% (12/27)	48% (214/450)
Always uses condoms	24% (29/123)	19% (5/27)	29% (131/450)
Never uses condoms	12% (15/123)	19% (5/27)	20% (88/450)
Ever had same sex partner	30% (29/123)	27% (7/27)	28% (126/450)
STI symptoms in last 12 mths	15% (18/123)	19% (5/27)	25% (112/450)
Ever worked as a sex worker	19% (24/124)	31% (8/27)	22% (101/450)
Transactional sex for drugs	42% (52/123)	74% (20/27)	50% (224/450)

## Prevalence of HIV among people held in prison, by region (2013, or latest year available after 2008)



Source: UNODC, responses to annual report questionnaire; and Dolan and others, "HIV/AIDS in prison" (2014).

- Addiction complicates viral illness and Hep C and HIV treatment
- IVDU is source of viral exposure for most Hep C and many HIV Patients
- Intoxicated persons are far greater risk for impulsive behaviour and high-risk sexual activities and way drugs are obtained
- Intoxication may interfere with treatment adherence – up to 90% PWID infected with Hep C.

Alcohol reported to cause rapid progression of Hep C

Major depression, severe mental illness, personality disorders alone lead to high-risk behaviours maintaining Hep C epidemic

IDU directly and indirectly accounts for  $\pm$  36% of HIV/AIDS cases

Other infections caused by IDU = TB, STI, strep and staph infections, endocarditis, HIV encephalopathy

Large percentage of chronic drug users do not comply with medication regimens

Drug abusers are malnourished = suboptimal antioxidant micronutrients e.g. selenium, zinc = higher risk of mortality



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Combination of drug use and other infections such as HIV and HCV cause other health effects = neuropsychiatric complications, anxiety, depressive disorders, immune impairment, metabolic/endocrine disorders, lipid dystrophy, hepatic failure, etc.

Provision of drug abuse treatment is often key component to successful treatment of HIV disease

Social disintegration is accelerating under adverse influences of growing poverty, civil disobedience, tribal conflicts, droughts, massive displacements of populations.

# Stigma and discrimination

## Barriers to access health facilities

- 60% (268/450) participants felt they were treated in a negative way because of their drug use when they visited a health facility

*“They [health workers] treat them [drug users] like waste, especially if you tell them that you are using drugs – they have no time.”*

Black female PWID, Durban

## Delay health seeking behaviours

*“I only went there because I couldn’t talk. The only time I would go and get help is when I was like, ‘Oh my God’; when it [the health condition] was not manageable anymore.”*

White male PWID, Pretoria

HIV prevalence and risk among people who inject drugs in five South African cities: A Scheibe 2016



# Modern neuroscience

- Fundamentally a form of maladaptive memory
- Introduction of a substance or a behaviour intensifies  
BRAIN REWARD SYSTEM and CIRCUITS
- For some ( $\pm 16\%$ ) it creates conditioned association with outside cues
- The cues acquire strong salience that overwhelms other behaviour
- Person becomes drawn to involuntary compulsive repetition of experience (IMMEDIATE GRATIFICATION)  
– long term consequence and neglect responsibility

# Chronic disease

- Relapsing nature fulfils criteria for a chronic disease
- Voluntary component at beginning makes it controversial
- DSM-V Regardless of the particular substance, the diagnosis of a substance use disorder is based upon a pathological set of behaviours related to the use of that substance. These behaviours fall into four main categories:
  1. Impaired control
  2. Social impairment
  3. Risky use
  4. Pharmacological indicators (tolerance and withdrawal)



# THE DRUG PROBLEM

- “The size of the world’s illicit drug industry is equivalent to 0.9 percent of the world’s GDP or higher than 88 percent of the countries in the world.”

Reuters News Service

- Estimated to be 6.4% of GDP in South Africa
- Estimated 15% of SA population = problem drug users.



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# AU Plan of Action on Drug Control (2013-2017)

## ‘Background and Context

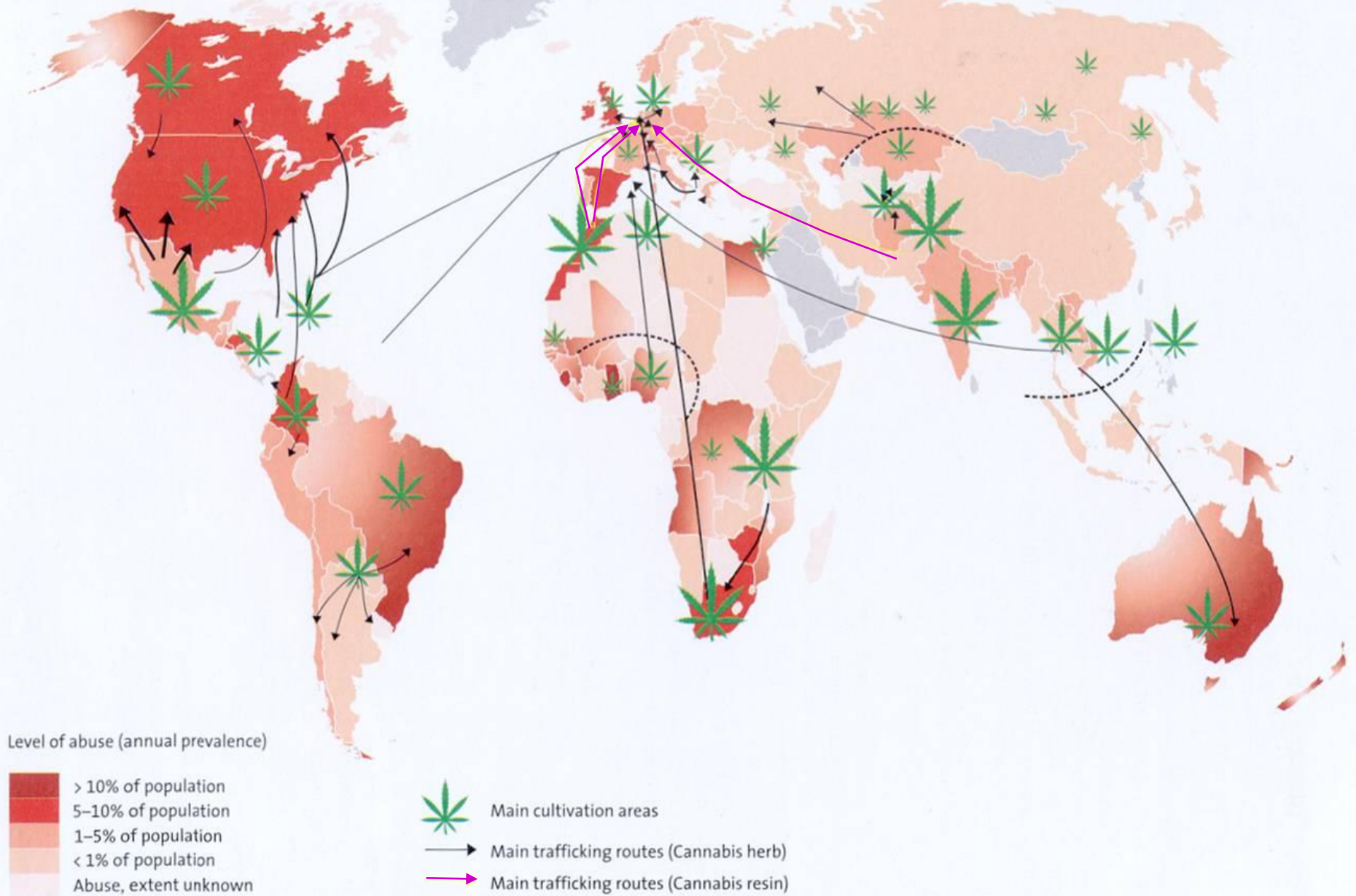
19. ...While HIV infection in Africa is largely heterosexual driven, with the use of cannabis, cocaine, and “crack” cocaine and amphetamine type stimulants by non-injection routes of administration also contributing to increased risks of HIV infection, in particular through unprotected sex’.

CAMDC5

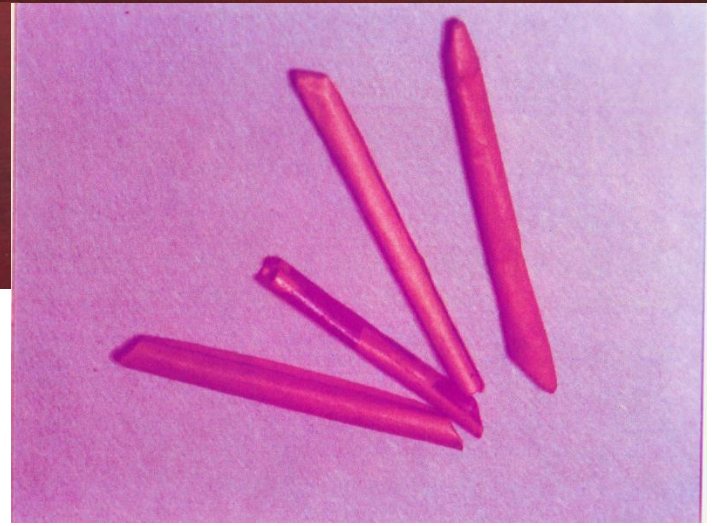


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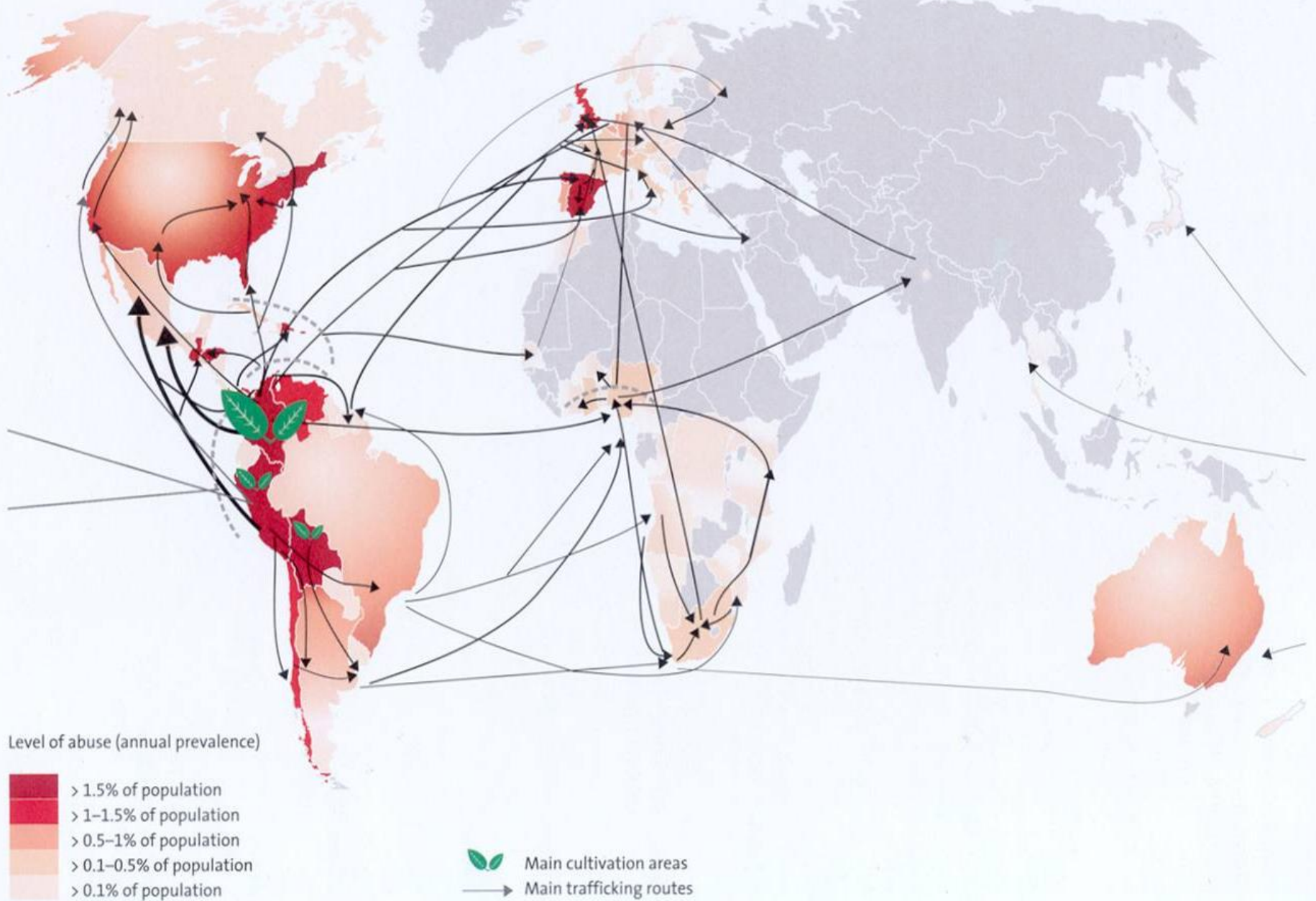
# TRAFFIC ROUTES FOR CANNABIS HERB & RESIN



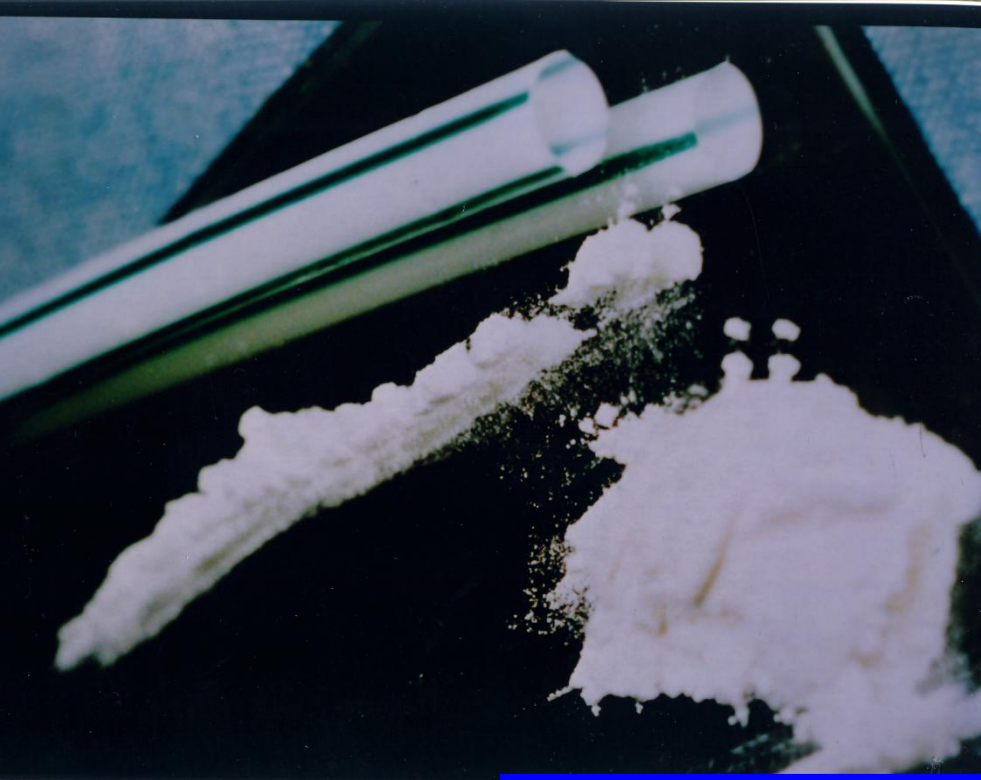
Note: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Routes shown are not necessarily documented actual routes, but are rather general indications of the directions of illicit drug flows.



# TRAFFIC ROUTES FOR COCAINE



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Opium/morphine/  
heroin powder





# TRAFFIC ROUTES FOR AMPHETAMINES & ECSTASY



Level of abuse (annual prevalence)

- > 1.5% of population
- > 1–1.5% of population
- > 0.5–1% of population
- > 0.1–0.5% of population
- > 0.1% of population

- Main manufacturing areas
- Main trafficking routes (amphetamines)
- Main trafficking routes (ecstasy)

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# Methamphetamine (TIK)



Scott Houston / Corbis Sygma



# New concerns

- NPS – New Psychoactive Substances

- Synthetic cannabinoids
- Synthetic cathinones
- Phenethylamines
- Piperazines
- Ketamine
- Tryptamines
- Kratom
- Salvia divinorum
- Krocodil



Aristegui Noticias

# Conclusion

- We don't have a drug problem we have a human/societal problem
- Bio-Psychosocial, Economic ,Political Problem
- It is about the past, the present and the future