Progress towards UNAIDS 95-95-95 targets among PWID living with HIV over 10 years in Punjab, India

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BACKGROUND

- UNAIDS aims to achieve 95-95-95 targets for testing, treatment and viral suppression for people living with HIV (PWH) by 2030
- 0.1% of Indian male population have ever injected illicit drugs with ~850,000 people who inject drugs (PWID) across India
- PWID face persistent barriers to engaging in consistent care for HIV
- We explored temporal trends in UNAIDS indicators over ~10 years in 2 Indian cities in Punjab, which has an growing drug use epidemic

METHODS

- **Setting**: Amritsar and Ludhiana, India
- **Time periods**: 2013, 2016, 2023-2024
- **Study Population**: PWID ≥18 years and injected drugs in past 2 years
- **Study Design**: Serial cross sectional surveys using respondent driven sampling (RDS)
- **Data collection**: Participants completed behavioural surveys and laboratory testing (onsite HIV antibody; HIV RNA on stored specimens)
- **Analysis**: Among PWH, we estimated in each survey RDS-II weighted HIV prevalence and UNAIDS treatment indicators:1) awareness of HIV status among those living with HIV 2) ART use among those aware and 3) viral suppression among those on ART.

RESULTS

- A total of 5315 PWID were recruited from 2 Indian cities (Amritsar n=2622, Ludhiana n=2693) across 3 cross-sectional surveys
- Median age for PWH across surveys was similar - 30 years (Amritsar), 28 years (Ludhiana)
- All PWID were male
- HIV prevalence increased in both cities
  - Amritsar: 21% to 20% to 35%
  - Ludhiana: 18% to 22% to 43%

Among PWID living with HIV, awareness of HIV status and viral suppression increased between 2013 and 2016 but decreased in 2023, while HIV prevalence increased steadily over 10 years in 2 cities in Punjab, India

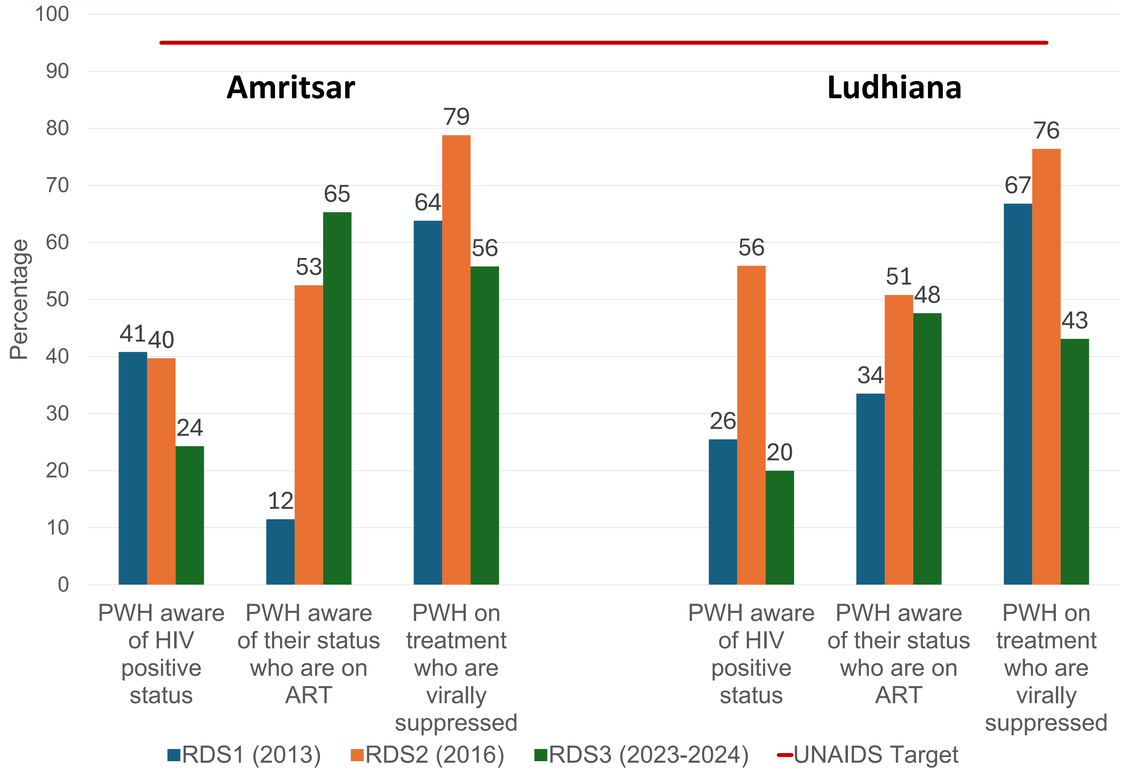


Figure: Progress towards UNAIDS 95-95-95 targets among PWID living with HIV over 10 years in Punjab, India

- Awareness of HIV status was stable or increasing between 2013-2016 but declined by >50% in both cities by 2023 (**Figure**)
- The percentage on ART increased and remained stable in Amritsar; in Ludhiana ART use increased initially (2013-2016) but then decreased.
- Among those on ART, viral suppression increased between 2013-2016 but decreased by 2023

Amritsar			
n (%)	2013 (n=186)	2016 (n=210)	2023-24 (n=271)
Heroin	60 (32)	84 (40)	270 (99)
Buprenorphine (Illicit use)	167 (90)	109 (52)	7 (3)
Daily injection	75 (33)	118 (45)	240 (87)
Needle/syringe sharing	69 (33)	113 (14)	152 (48)
Ludhiana			
n (%)	2013 (n=187)	2016 (n=101)	2023-24 (n=298)
Heroin	4 (5)	63 (63)	288 (97)
Buprenorphine (Illicit use)	176 (77)	52 (52)	23 (8)
Daily injection	32 (13)	40 (14)	122 (27)
Needle/syringe sharing	30 (10)	37 (20)	143 (42)

Table: Injection drug use practices over 10 years in Amritsar and Ludhiana, Punjab

- There was a shift to injecting heroin in both cities with commensurate increases in needle sharing and daily injection in both cities (**Table**)

CONCLUSIONS

- It is concerning that despite initial gains in these two Indian cities, we observed declines in awareness of HIV status and viral suppression alongside increasing HIV prevalence.
- Transition to heroin injection and higher risk practices may be driving some of this change and may warrant different interventions to mitigate harms

ADDITIONAL KEY INFORMATION

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