
International Doctors for Healthy Drug Policies Supports the Global Commission on Drug Policy's Report, "The negative impact of the War on Drugs on Public Health: The hidden hepatitis C epidemic" May 2013

IDHDP thanks the GCDP for their excellent and much-needed report on the hidden hepatitis C epidemic, illustrating how this epidemic is being fuelled by failed drug policies and the devastating health consequences it is having on people who use drugs. We support their call for immediate, major reforms of the global drug prohibition regime to correct the policy distortions that favor criminal justice over public health evidence-based interventions such as methadone and buprenorphine maintenance treatments, and the provision of sterile drug using equipment and overdose prevention and training with naloxone for all who need and want them.

Hepatitis C is a highly prevalent chronic viral infection, which is an important cause of morbidity and mortality in people who use drugs and it is both preventable and curable, but continues to receive little attention. As the Global Commission on Drug Policy's report states, global access to preventative, diagnosis and treatment services is very poor, prohibitively expensive and inaccessible to those who need it. Public, political and professional awareness of hepatitis C is low, in spite of the fact that of the 16 million people who inject drugs worldwide, approximately 10 million are living with hepatitis C. Many of these people also are co-infected with HIV, increasing their likelihood of mortality and morbidity.

Hepatitis C infection is one of the many negative consequences of the 'war on drugs', which continues to expand. Enormous amounts of money are spent on punishing people who use drugs and not on providing care. Mass incarceration and punitive approaches create high-risk environments for the transmission of hepatitis viruses and stigma, discrimination and abuses in medical care prevent people who use drugs from accessing potentially lifesaving services. If opioid substitution therapy were made readily available globally, it could prevent up to 130,000 new HIV infections annually, reduce the spread of hepatitis C and other blood-borne diseases, and decrease deaths from opioid overdose by 90 percent. (*"Human Rights and Drug Policy: Controlled Essential Medicines" Briefing Paper #5 IHRA http://www.ihra.net/files/2010/11/01/IHRA_BriefingNew_5.pdf*)

We call on our fellow doctors to speak out for drug policies and practices that emphasize the health of communities and respect the human rights of people who use drugs. Doctors, with our understanding of science and our medical expertise, must speak out and help others realize that repressive drug policies that emphasize punishment over health responses to drug problems are serving to fuel epidemics of HCV and other blood borne infections such as HIV and TB.

IDHDP member Dr Philip Bruggmann, of ARUD Zurich, one of the report's key advisors, puts it this way:

"To fight the hepatitis C epidemic among people who use drugs taboos must be broken. Decriminalisation of drug use is one of the most important measures to overcome current barriers to hepatitis C care. Current and future HCV medication must be offered at affordable prices worldwide, otherwise treatment will never unfold its preventative potential. These and further important points are addressed in the 3rd report of the Global Commission on Drug policy."

IDHDP joins the Global Commission on Drug Policy in calling for leadership in ending drug policies that fuel HCV and ignore the medical needs of people who use drugs at the expense of us all. Let doctors be leaders and demand the social and political support for policies that focus on the primacy of the health of the public over the hyper-criminalization of drugs.