

I. NATIONAL AND LOCAL CONTEXT

The report of the HIV Health Promotion Strategy Review Group produced by the Scottish Executive this year sets a national framework. Their conclusions, based on prevalence, ease of transmission and continuous rise in Hepatitis C, are that it is no longer appropriate to focus effort and resources on one blood borne Virus (HIV) however important.

The Ayrshire & Arran Blood Borne Viruses Strategy 2000-2005 considers HIV, Hepatitis C and other blood borne viruses.

HIV/AIDS

The Acquired Immune Deficiency Syndrome, (AIDS), is a condition in which the immune system is no longer able to protect the body against serious infection and cancers. AIDS is the result of infection with The Human Immunodeficiency Virus HIV.

HIV is spread by

- ***Sexual intercourse; heterosexual and men to men***
- ***Inoculation or transfer of infected blood from an infected woman to her child during pregnancy or breast feeding***
- ***Injecting drug use***

HIV is life long and there is no cure. Until more effective treatment is developed the majority of people infected by HIV will probably develop AIDS. HIV/AIDS has not progressed to the pandemic level once feared. Nevertheless, new infections still occur in significant numbers in Scotland and there is no sign that they are on a downward track.

The advent of the new combination drug therapies (highly active anti retroviral therapies), delivering at least relative well being to many people with HIV, has been a significant development. However, the aim of prevention of infection can only be achieved by promotion of healthy lifestyles, prevention of risky sexual and drug use behaviour and creation of healthy environments.

According to The Aids Control Act Report 1999-2000 the cumulative total of known HIV infected persons in Ayrshire is 58. This is 6 more than in the previous year.

Analysis of the epidemiology highlights the need to ensure that prevention is aimed at a range of target groups. 76% of those living with HIV locally acquired the infection either because of sexual intercourse between men or between men and women. The former highlights the need to focus prevention on gay men while the latter indicates a need to continue with population based approaches. National information suggests that young people travelling abroad on holiday may be a key group who should be targeted for prevention.

Within Ayrshire and Arran there are no new cases of HIV reported from injecting drug use in the last 2 years. This does not reflect the national picture which indicates that people are still being infected by this route. Continued success with this group locally depends on effective needle exchange programmes. For further details please refer to the chapter on Alcohol and Drugs.

The cumulative HIV infection rate for Ayrshire and Arran residents is low amongst Scottish Health Boards.

Hepatitis C

Since the last Joint Community Care Plan Hepatitis C infection has become a major public health problem affecting 35,000 of Scotland's population of whom approximately 10,000 are diagnosed and less than 3,000 are actively being followed up.

Hepatitis C is a disease of the liver caused by a virus (HCV). Around 80% of people have no symptoms at the time of infection. Up to 90% of those infected develop chronic hepatitis which can lead to cirrhosis, liver failure and cancer.

Locally in Ayrshire and Arran it is estimated that there are around 1,300 people with Hepatitis C of whom approximately 25% are known to services.

The virus is spread by contaminated blood or blood stained body fluids. The group most at risk of contracting Hepatitis C is injecting drug users. Focusing preventative activity on this group is critical in preventing the spread of Hepatitis C.

For further information please refer to the chapter on Alcohol and Drugs.

2. ACHIEVEMENTS SINCE THE LAST COMMUNITY CARE PLAN

Objective

- *A continuum of Health and Social Care Services for people with HIV/AIDS*

ACTION	ACHIEVEMENTS
Training and awareness raising on HIV/AIDS	<ul style="list-style-type: none"> • Health Promotion services across Ayrshire have used a combination of general health education approaches and initiatives targeted at high risk groups • Prevention activity has focused on people who work or travel abroad, adults in custody and in care, people with sensory impairment, people with physical and mental disabilities
Development of local services within South Ayrshire	<ul style="list-style-type: none"> • Regular training courses on blood borne viruses for professional staff co-ordinated by Primary Care Trust Harm Reduction Services • One stop clinics for women to address blood borne virus testing, family planning, breast screening, smear tests and harm reduction • Domiciliary visits available to test and offer counselling • For other services relating to needle exchanges see section on Alcohol and Drugs

ACTION PLAN 2001 – 2004

Objective: To minimise the risk of blood borne virus infection in South Ayrshire

- *The Ayrshire and Arran Blood Borne Virus strategy will be implemented by working with people where they live, work, spend their leisure time and where they seek help.*
- *The Health Authorities will work in close partnership with the local authorities and voluntary organisations to target those most at risk of infection.*
- *Work in the community will*
 - *promote harm reduction*

- *develop prompt risk reduction*
- *network with appropriate agencies*
- *further develop women's clinics and a range of services e.g. breast screening, blood borne virus testing, family planning*
- *For services relating to needle exchanges see section on Alcohol and Drugs*