CONGRESS & ADMINISTRATION ADDRESSING INFECTIOUS DISEASE CONSEQUENCES OF OPIOID CRISIS

House & Senate Considering “Eliminating Opioid Related Infectious Diseases Act of 2018”

Washington, DC – As Congress and the Administration combat the nation’s opioid epidemic, The AIDS Institute is pleased there is a growing recognition of the need to address the infectious disease consequences, including HIV and viral hepatitis, due to injection drug use. Both the House and Senate are advancing the “Eliminating Opioid Related Infectious Diseases Act of 2018” while the Trump Administration has proposed nearly $200 million as part of its FY19 budget, although at the expense of cuts to other HIV programs.

Most recently, the bipartisan Senate HELP Committee discussion draft of the “Opioid Crisis Response Act of 2018”, which is scheduled to be marked up on April 24th, includes the “Eliminating Opioid Related Infectious Diseases Act of 2018” (S. 2579).

The Senate bill would authorize a $40 million effort at the CDC to assist state and local governments and others to enhance surveillance systems to track opioid use-related infectious diseases; increase HIV and hepatitis testing and prevention; and improve linkage to HIV and hepatitis treatment and substance use disorder treatment.

Introduced by Sens. Todd Young (R-IN), Edward Markey (D-MA), and Tammy Baldwin (D-WI), the bill enjoys bipartisan support in the House of Representatives, where it was originally introduced by Reps. Leonard Lance (R-NJ) and Joseph Kennedy III (D-MA). The House Energy and Commerce Health Subcommittee
held a hearing on the bill (HR 5353) in March, and expects to mark it up the week of April 24th.

“We are extremely pleased Congress is working in a bipartisan, bicameral manner to respond to the opioid crisis and its infectious disease consequences,” said Carl Schmid, deputy executive director of The AIDS Institute. “The opioid crisis has led to greater injection drug use and has dramatically increased the number of new cases of HIV and hepatitis. This bill, if enacted, will help reverse that trend. While we believe more than $40 million is needed, The AIDS Institute strongly supports this legislation.”

“Resources for state and local health departments and community-based organizations have been stretched thin by the opioid crisis” said Frank Hood, hepatitis policy associate at The AIDS Institute. “This bill will help the CDC direct resources to those areas most at-risk for an HIV or viral hepatitis outbreak and possibly prevent them from happening in the first place.”

The President’s budget request proposed a new $40 million CDC demonstration project that would increase elimination efforts in select states/jurisdictions at high-risk for new cases of infectious disease, including those with high rates of opioid-related transmission. The budget also proposed a $150 million program at the Substance Abuse and Mental Health Services Administration (SAMHSA) focusing on “reducing injection drug use, HIV/AIDS, and hepatitis.” However, at the same time, the Administration has proposed a $40 million cut to CDC’s HIV prevention programs and elimination of SAMHSA Minority AIDS Initiative’s $116 million programming. Additionally, the budget maintains funding for CDC viral hepatitis programs at Fiscal Year 2017 levels of only $34 million.

According to the CDC, new cases of hepatitis C increased by 290 percent between 2010 and 2015. At least 70 percent of those new cases are attributable to injection drug use. The CDC also reports that the number of people diagnosed with HIV due to injection drug use is increasing among the young, in the Midwest and the West, and those living in rural areas. Between 2006 and 2013 in Kentucky, Tennessee, and West Virginia alone, hepatitis B cases increased by 114 percent, mostly due to injection drug use.

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The AIDS Institute is a national nonprofit organization that promotes action for social change through public policy, research, advocacy and education.

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