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Consolidated Guidelines Geneva, 2016





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I. Acronyms

APRI acquired immunodeficiency syndrome aminotransferase/platelet ratio index

ART antiretroviral therapy

ASSIST Alcohol, Smoking and Substance Involvement Screening Test

CHB chronic hepatitis BCI confidence interval

CPT co-trimoxazole preventive therapy

DAA direct-acting antiviral (drug)DIH drug-induced hepatotoxicity

DNA deoxyribonucleic acid

FIB-4 Fibrosis-4 score

GRC Guideline Review Committee

HBV hepatitis B virus

HBsAg hepatitis B surface antigenHBeAg hepatitis B e antigenHCV hepatitis C virus

HIV human immunodeficiency virus

HTS HIV testing service

IGRA interferon-gamma release assay
IPT isoniazid preventive therapy

LTBI latent TB infection

MDR-TB multidrug resistant tuberculosis

mh-GAP mental health Gap Action Programme

NAT nucleic acid testing

NGO nongovernmental organizationNSP needle and syringe programmeOST opioid substitution therapyPEP post-exposure prophylaxis

PEPFAR President's Emergency Plan for AIDS Relief

PrEP pre-exposure prophylaxisPWID people who inject drugsPWUD people who use drugsRCT randomized controlled trial

RNA ribonucleic acid

STI sexually transmitted infection

TB tuberculosis

TST tuberculin skin test **UN** United Nations

UNAIDS Joint United Nations Programme on HIV/AIDSUNODC United Nations Office on Drugs and Crime

WHO World Health Organization

II. Definition of key terms

People who inject drugs (PWID) refers to people who inject psychotropic (or psychoactive) substances for non-medical purposes. These drugs include opioids, amphetamine-type stimulants, cocaine, hypnotics/sedatives and hallucinogens. Injection may be through intravenous, intramuscular or subcutaneous routes. The definition does not include people who self-inject medicines for medical purposes, or individuals who self-inject non-psychotropic substances (e.g. steroids or other hormones) for body shaping or to improve athletic performance.

People who use drugs (PWUD) includes people who use psychotropic substances through any route of administration, including injection, oral, inhalation, transmucosal (sublingual, rectal or intranasal) or transdermal. For the purposes of this document, the definition does not include the use of such widely used substances as tobacco, or beverages and foods that contain alcohol or caffeine.

Prisons and closed settings. For the purposes of this document, the term "prisons and closed settings" refers to all places of detention within a country. The terms "prisoners" and "detainees" refer to all those detained in criminal justice and prison facilities (including adult and juvenile males and females), during the investigation of a crime, while awaiting trial, after conviction, before sentencing and after sentencing. These terms also include those detained without charge, or those sentenced to compulsory treatment and to rehabilitation centres.

Harm reduction, for the purposes of this document, refers to an evidence-based approach to reducing the harms associated with drug use. WHO, in collaboration with the United Nations (UN) Office on Drugs and Crime and the Joint UN Programme on HIV/AIDS has defined a package of nine evidence-based interventions, referred to as the "comprehensive package" (1). This package comprises two drug-use specific interventions – needle and syringe programmes, and opioid substitution therapy and other evidence-based drug dependence treatment – plus HIV testing services; antiretroviral therapy; prevention and treatment of sexually transmitted infections; condom programmes; targeted information, education and communication; prevention, vaccination, diagnosis and treatment of viral hepatitis; and prevention, diagnosis and treatment of tuberculosis. In 2014, naloxone for the management of opioid overdose was added. Although the comprehensive package focuses primarily on injecting drug use, it also recognizes the importance of harm reduction interventions for PWUD but who do not inject and are in need of the services.

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