

# **Intensive behavioral interventions needed to reduce amphetamine use, which is linked to HIV risk**

July 20 2010

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A paper in The *Lancet* Series on HIV in people who use drugs looks at the relationship between amphetamine drug use and HIV. Among the conclusions are that because of the increased HIV risk associated with amphetamine use, amphetamine users should have ready access to HIV prevention interventions, including HIV testing. Furthermore, treatment for amphetamine dependence should be more integrated with HIV prevention and care in populations with high levels of both amphetamine use and HIV, such as men who have sex with men. In this rigorous meta-analysis, the authors found that only intensive, multi-session treatment programmes reduced amphetamine use. This paper is by Dr Grant Colfax, Director of HIV Prevention and Research, San Francisco Department of Public Health, CA, USA, and colleagues.

While there is obviously a relationship, the authors say that the contribution of amphetamine-group substances to the global HIV epidemic cannot be quantified, and the contribution of non-injection use of amphetamine-group substances to the HIV epidemic has been understudied. Improved efforts are needed to quantify and monitor the extent to which amphetamine-group substances are used, and the role of amphetamine-group substances in the HIV/AIDS epidemic, especially in developing countries (most research has been done in rich nations on men who have sex with men).

The authors say: "Greater understanding is needed of the developmental,

psychological, social, and [environmental factors](#) contributing to amphetamine-group substance use and sexual risks and other harms related to amphetamine-group substances... The prevalence of other drug use among users of amphetamine-group substances needs quantification, and the contribution of specific patterns and combinations of amphetamine-group substance use with other drugs to risk of HIV infection needs to be established."

They highlight that the absence of effective drug treatments for amphetamine-group substance use is a major treatment gap. Scientific research is needed to fully understand the mechanisms of action of amphetamine-group substances, and drug-development efforts should focus on development and testing of compounds which target specific receptors or pathways related to amphetamine-group substance use. They say: "Rigorous trials of behavioural and pharmacological interventions for amphetamine-group substance use are needed with drug-related and HIV-related biological outcomes.

The focus must be on scalable and cost-effective interventions. Findings of our meta-analysis showed that as a group, high-intensity interventions reduced use of amphetamine-group substances."

The authors conclude: "In populations using amphetamine-group substances, simple interventions such as testing for HIV and other sexually transmitted infections should be widespread and prioritised, particularly if [HIV infection](#) is prevalent and incidence of infection is substantial. Global efforts must be made to integrate, coordinate, and evaluate [HIV](#) testing and care strategies with treatment for amphetamine-group substance use."

Provided by Lancet

Citation: Intensive behavioral interventions needed to reduce amphetamine use, which is linked to HIV risk (2010, July 20) retrieved 17 April 2024 from

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