



November 29, 2017

Kathy Stone, Director  
Division of Behavioral Health  
Bureau of HIV, STD, and Hepatitis  
Iowa Department of Public Health  
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321 East 12<sup>th</sup> Street  
Des Moines, IA 50319-0075  
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Dear Ms. Stone,

The Iowa Department of Public Health (IDPH) submitted a determination of need request to the Centers for Disease Control and Prevention (CDC) with data examining whether the state is experiencing or at risk for an increase in viral hepatitis or HIV infection due to injection drug use. Consulting with CDC to determine need is a requirement in the process of seeking approval to use federal funds to support syringe services programs (SSPs). All such requests are reviewed by a panel of CDC subject matter experts who evaluate submitted data in accordance with the *U.S Department of Health and Human Services (HHS) Implementation Guidance to Support Certain Components of Syringe Services Programs, 2016*.

Based on the data presented, CDC concurs with IDPH that there is a statewide need for SSPs. Between 2009 and 2016, diagnoses of hepatitis C virus (HCV) infection among persons age <30 years increased 375%. Although the proximal cause (e.g., non-sterile injection drug use) for these HCV infections was not available, nationwide increases in HCV among young persons during the past decade have been overwhelmingly due to non-sterile drug injection. IDPH provided additional compelling evidence that the increase in HCV infections were most likely due to increased non-sterile injection of drugs. These data included a five-year increase in admissions for substance use treatment due specifically to injection of opioids (58%) and injection of methamphetamine (73%), a six-year increase in emergency department visits for poisonings (e.g., overdose) from these two drugs (91% and 217%, respectively), and a five-year increase in overdose deaths from heroin of 258%.

This notice may be used by state, local, territorial, or tribal health departments or eligible HHS-funded recipients to apply to direct federal funds to support SSPs. As there is no expiration date for this notice, Iowa may elect to either (1) immediately request to direct current federal funding to support SSPs or (2) delay requests to direct funds to support SSPs until a subsequent fiscal year. The State is strongly encouraged to discuss plans to direct funds for SSPs with your federal funding agencies. Only CDC directly funded, eligible awardees should submit a request to CDC for direct funding for SSP activities.

Thank you for your interest in the public health implications of injection drug use in Iowa. If you have any questions or require further technical assistance, please do not hesitate to send an email to [SSPCoordinator@cdc.gov](mailto:SSPCoordinator@cdc.gov).

Sincerely,  
CDC SSP Determination Panel