



Coinfections in Injection Drug Users Should be Interpreted Carefully

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I read with interest the recently published article by Norouzian et al. (1). The epidemiology of hepatitis B virus (HBV) and hepatitis C virus (HCV) infections has changed during the recent years and their endemicity is low (2, 3), but the prevalence of such infections in inmates with high-risk behaviors is still high (4). Norouzian et al. perfectly showed the main risk factors for such infections. The harm reduction program is an advanced one in Iran, which results in lower rates of such infections in the injection drug users (IDUs). HIV and HCV coinfection is directly related to the route of HIV transmission in the communities such as Turkey, which the most cases are related to sexual contact and the coinfection with HCV infection is low (5); while, in Iranian community it is related to intravenous drug abuse. Finally, I would like to mention that anti-HCV antibody-positive is not parallel to HCV infection and may be reported in some patients with the history of anti-HCV therapy or the ones who lost the infection. I suggest HCV RNA testing in the ones with anti-HCV antibody-positive response.

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