



## HIV, AIDS, and Drug Use

EXPAND ALL

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### What is HIV/AIDS?



HIV/AIDS has been a global epidemic for more than 30 years. People born after 1980 have never known a world without it. The Centers for Disease Control and Prevention (CDC) estimates that more than 1.2 million people are living with HIV.<sup>1</sup>

HIV (human immunodeficiency virus) is the virus that causes AIDS (acquired immune deficiency syndrome). AIDS is a disease of the immune system that can be treated, but not

cured. Most people say “HIV/AIDS” when talking about either the virus (HIV) or the syndrome it causes (AIDS).

HIV destroys certain cells, called CD4+ cells, in the immune system—the body’s disease-fighting system. HIV converts the CD4+ T cells into “factories” that produce more HIV virus to infect other healthy cells. Without these cells, a person with HIV can’t fight off germs and becomes more prone to illness and common infections. AIDS is diagnosed when a person has one or more of these infections and a low number of CD4+ cells in their body.

A person can have HIV for many years, and the virus may or may not progress to the disease of AIDS. This is why a person may appear healthy or uninfected when, in fact, they carry the HIV virus. A medical test is the only way to know if a person has HIV.

From the efforts of medical science, HIV is no longer necessarily fatal. A big part of this success is the treatment called HAART (highly active antiretroviral therapy). HAART is a combination of three or more medications that can hold back the virus and prevent or decrease symptoms of illness.



<sup>1</sup> Centers for Disease Control and Prevention. *HIV in the United States: At A Glance*. Atlanta, GA, June 2016. Available at <http://www.cdc.gov/hiv/statistics/basics/ataglance.html>.

## What is the link between drug use and HIV/AIDS?

Drug use and HIV/AIDS are connected in a few different ways.

**Injection drug use.** Lots of people know that injection drug use and needle sharing contribute to the risk of spreading HIV/AIDS. Injection drug use is when a drug is injected into a tissue or vein with a needle. When people share “equipment”—such as needles, syringes, and other drug injection tools—HIV can be passed between users because the bodily fluid (for example, blood) from the infected person can remain on the equipment. Other infections—such as hepatitis C—can also be spread this way. Hepatitis C can cause liver disease and permanent liver damage.

**Poor judgment and risky behavior.** Drugs and alcohol affect the way a person makes choices and can lead to unsafe sexual practices, which put them at risk for getting HIV or giving it to someone else.

**Biological effects of drugs.** Drug use and addiction can make HIV and its consequences worse, especially in the brain. For example, research has shown that HIV causes more harm to nerve cells in the brain and greater cognitive (thinking) damage among people who use [methamphetamine](#) than among people with HIV who do not use drugs.

Learn more about [how the brain works and what happens when a person uses drugs](#).

## How is HIV spread?

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HIV can spread when blood or other bodily fluids of someone who is infected comes in contact with the blood, broken skin, or mucous membranes (e.g., the genital area) of an uninfected person. The two main ways HIV is spread are: 1) through unprotected sex; and 2) by sharing needles or other equipment used for injection drug use.

## How many teens have HIV?

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Among people ages 13 to 19, close to 1,800 were newly diagnosed with HIV in 2015.<sup>2</sup> However, this does not represent the number of youth that were already diagnosed or those that have not (yet) been diagnosed. In fact, CDC estimates 51 percent of youth with HIV in the United States do not know they are infected.<sup>3</sup>

In youth, as in adults, some populations are more affected than others. For example, among adolescents, most (more than 80 percent) of HIV infection diagnoses are among males. In addition, blacks/African Americans age 13 to 19 represent only 15 percent of the U.S. teenage population, but they accounted for nearly 60 percent of the HIV infections among people age

13 to 19 in 2010. The reasons for this gap aren't completely understood; in fact, black/African American youth have lower rates of drug use than whites and Hispanics.<sup>4</sup>

In general, middle and late adolescence is a time when young people take risks that may put them in danger of getting HIV. Regardless of whether a young person takes drugs, unsafe sex increases a person's risk of getting HIV. But drugs and alcohol can increase the chances of unsafe behavior by affecting how a person makes decisions.

For the latest HIV/AIDS statistics by age, visit the [Centers for Disease Control and Prevention website](#).

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<sup>2</sup> Centers for Disease Control and Prevention. *HIV in the United States: At A Glance*. Atlanta, GA, June 2017. Available at <http://www.cdc.gov/hiv/statistics/basics/ataglance.html>.

<sup>3</sup> Centers for Disease Control and Prevention. *Vital Signs. HIV Among Youth*. Atlanta, GA, April 2017. Available at <https://www.cdc.gov/hiv/group/age/youth/index.html>.

<sup>4</sup> Centers for Disease Control and Prevention. *Vital Signs. HIV Among Youth in the US. Protecting a Generation*. Atlanta, GA, January 2013. Available at <http://www.cdc.gov/vitalsigns/hivamongyouth/>.

## What can be done to prevent the spread of HIV?

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Because of the strong link between drug use and the spread of HIV, drug use treatment can be an effective way to prevent HIV. When people who have a drug problem enter treatment, they stop or reduce their drug use and related risk behaviors, including drug use with needles and unsafe sex. Drug treatment programs also play an important role in getting out good information about HIV/AIDS and related diseases, providing counseling and testing services, and offering referrals for medical and social services.

In addition, NIDA's research has shown that tailoring prevention intervention programs for specific populations can reduce HIV risk behaviors. For example, research shows that school- and community-based prevention programs designed for inner-city African American boys can be effective in reducing high-risk behaviors, including drug use and risky sexual practices that can lead to HIV infection.

## What should I do if someone I know needs help?

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If you see or hear about someone misusing opioids, talk to a coach, teacher, or other trusted adult.

If you, or a friend, are in crisis and need to speak with someone now, please call:

- **National Suicide Prevention Lifeline at 1-800-273-TALK** (they don't just talk about suicide—they cover a lot of issues and will help put you in touch with someone close by).

If you need information on treatment and where you can find it, you can call:

- **Substance Abuse Treatment Facility Locator at 1-800-662-HELP** or visit [www.findtreatment.samhsa.gov](http://www.findtreatment.samhsa.gov).

For more information on how to help a friend or loved one, visit our [Have a Drug Problem, Need Help? page](#).

## Where can I get more information?

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### Drug Facts

#### NIDA:

- [Research Report Series: HIV/AIDS](#)

#### Centers for Disease Control and Prevention:

- [HIV Basics](#)
- [HIV Among Youth](#)

### Statistics and Trends

#### NIDA:

- [DrugFacts: High School and Youth Trends](#)

#### Monitoring the Future (University of Michigan):

- [Monitoring the Future](#)

### Substance Abuse and Mental Health Services Administration:

- [National Survey on Drug Use and Health](#)

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