Abstract (word count: 262)

**Background:** This presentation describes the prevalence and correlates of hepatitis C among Needle Exchange (NEX) clients (n=713) across 18 NEXs, surveyed in 2013.

**Method:** Consecutively attending clients were asked to complete an anonymous questionnaire and provide blood samples (DBS; Guthrie Card).

**Results:** Completed questionnaires and testable matching blood samples (DBS) were obtained for 689 people (including 194 matched venous/DBS samples to compare manual and automated testing methods). Respondents were 63% male, mean age 40 years (response rate 34%). The prevalence of HCV was 58.3%, a non-significant increase from the previous 2009 survey (p=0.28) once corrected for age. Imprisonment (Odds Ratio [OR]: 2.10) and receiving methadone treatment (OR: 3.57) were associated with higher rates of HCV. No association was found between HCV status and gender, ethnicity or recent injecting behaviours. Eighty-nine percent of respondents reported having been previously tested for HCV. Two respondents tested positive for HIV (0.2%). Sixty-six percent of the respondents reported using a new needle and syringe every time they injected drugs and another 27% reported doing so most of the time. Sharing of other equipment such as spoons and tourniquets was reported by over 45% of respondents.

**Conclusions:** Data from New Zealand’s 2013 seroprevalence survey show a non-significant increase in the prevalence of HCV among NEX clients, relative to 2009. While 93% of respondents reported using a new needle and syringe either every time they injected or most of the time, significant numbers were still sharing some injecting equipment. With duration of injecting strongly associated with HCV, directing harm reduction education at new and young injectors is crucial.