

# PERFORMANCE AND IMAGE ENHANCING DRUGS

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Injectors' access to needle syringe programs

Presented at the 2014 National Drug Trends Conference  
Sydney ▪ 20 October 2014  
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# Overview

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- Background
- Survey results
- Discussion and next steps

## Kirkeaton Road Centre (KRC)

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- Service aim: to prevent, treat, and care for HIV/AIDS and other transmissible infections among the following target populations
  - People who inject drugs (PWID)
  - Sex workers
  - At risk young people (less than 25 years)
- Needle and Syringe, outreach, and Methadone Access Programs integrated into a targeted primary health care model



## Needle & Syringe Program (NSP)

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- An evidence based public health program that aims to protect the community from the spread of infections such as HIV and hepatitis C among people who inject drugs
- Effects sustainable behaviour change among some of the most marginalised groups in society
- Specifically designed to maximise access by people otherwise least likely to attend health services

## Background

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- Increasing use of performance and image enhancing drugs (PIEDs) in recent years
- Unknown size and nature of a largely ‘hidden’ population
- PIED injectors increasingly accessing NSP to obtain free injecting equipment
  - Significant cost and capacity implications
- Presents a significant public policy dilemma for the NSP, particularly in the context of removal of limits to increase coverage among PWID

## The Survey

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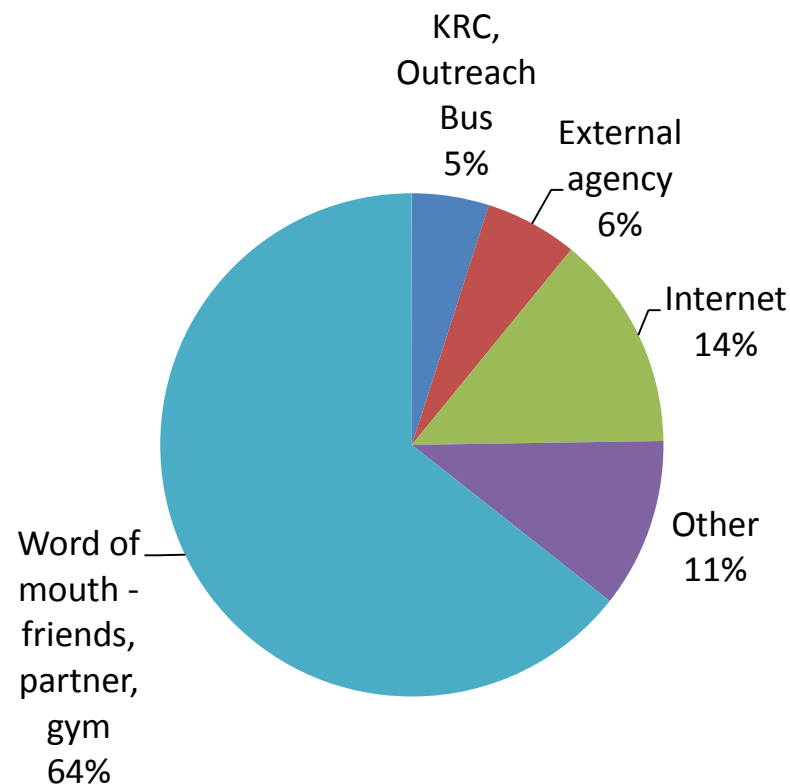
- Aim: to assess blood-borne infection (BBI) risk among PIEDs injectors who access NSP services to inform appropriate service delivery
- Participants: clients attending KRC's NSP services who reported injection of PIEDs
- Time period: November 2013 – January 2014
- Location: KRC and Clinic 180, both in Kings Cross

# KRC or Clinic 180 Service Access

## First attendance

	%
Less than 3 months ago	28
3 – 6 months ago	0
6 – 12 months ago	16
1 – 5 years ago	42
More than 5 years ago	14

## Referral sources



## Sources of Injecting Equipment

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- 44% obtain injecting equipment for others
- 55% obtain injecting equipment elsewhere
  - Pharmacy/chemist = 21 participants
  - Friends = 15 participants
  - Internet = 8 participants
  - Other NSPs = 7 participants
  - Doctor = 6 participants
  - Gym = 3 participants



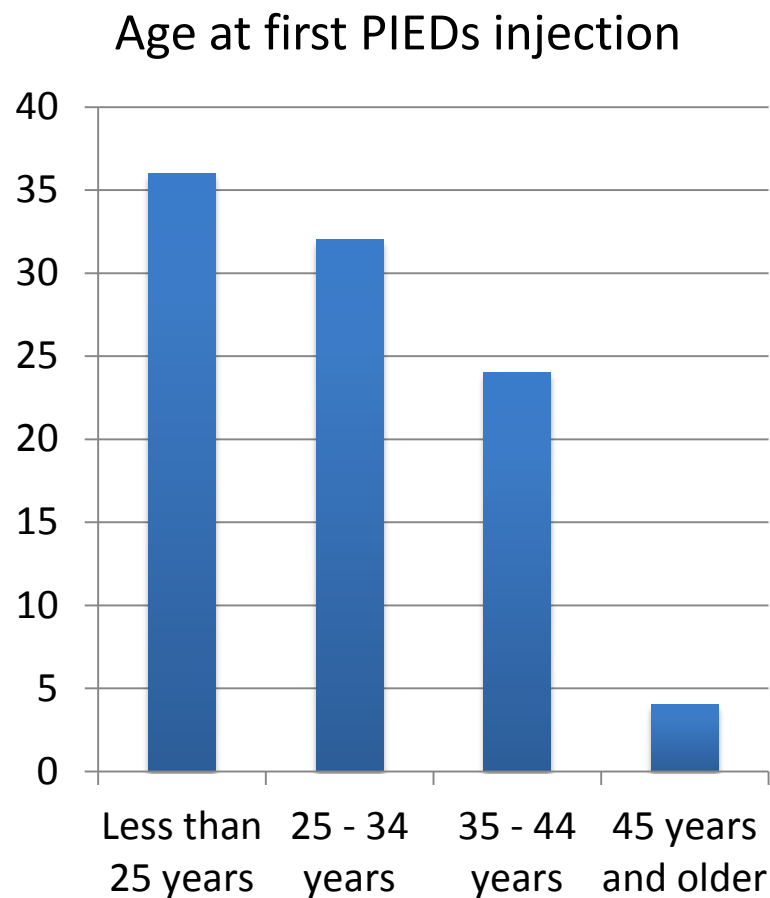
## Survey Participants

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- 103 participants
  - All but one participant was male
- Mean age = 32.6 ( $\pm$  8.5) years
- 42% identified as gay or bisexual

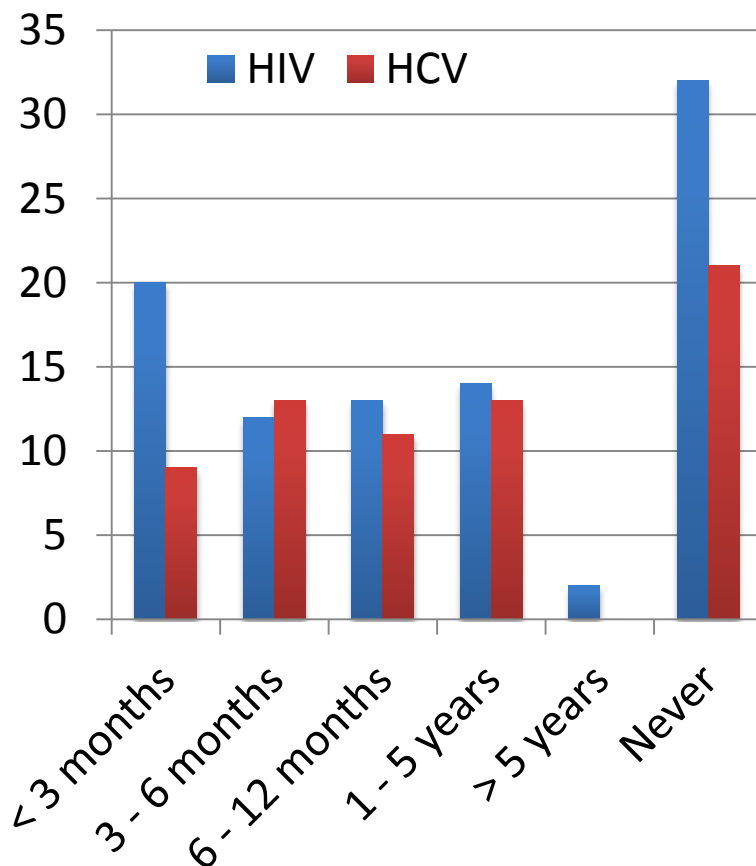
## Injecting History

- 101 reported never re-using injecting equipment after someone else
- 6 participants ever injected intravenously
  - Mean age = 27.6 years
  - None re-used or shared equipment
  - 1 HIV positive



# Blood-borne Infections

BBI Testing



- HIV prevalence
  - 4 positive participants
  - 52 never tested or did not answer
  
- Hepatitis C prevalence
  - 0 positive participants
  - 63 never tested or did not answer

## Comparing heterosexual and gay/bisexual participants

	Heterosexual		Gay or bisexual		P-value
	N	%	N	%	
<b>Age group</b>					0.002
Less than 25 years	15	25.4	1	2.3	
25 – 34 years	28	47.5	18	41.9	
35 – 44 years	10	16.9	18	41.9	
45 years and older	6	10.2	6	13.9	
<b>Age at first PIED injection</b>					0.001
Less than 25 years	29	52.7	7	17.5	
25 – 34 years	17	30.9	14	35.0	
35 – 44 years	7	12.7	17	42.5	
45 years and older	2	3.6	2	5.0	
<b>Ever injected intravenously</b>	3	5.2	3	7.0	0.704
<b>Ever tested for HIV</b>	26	47.3	35	92.1	< 0.001
<b>Ever tested for HCV</b>	22	57.9	24	82.8	0.030

## Other Factors

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- HIV positive (n=4)
  - All gay or bisexual and previously tested for HCV
  - 1 injected intravenously
  - None re-used equipment after someone else or been in prison
- Prison history (n=1)
  - Did not inject in prison, re-use equipment after someone else, or inject intravenously

## Health Service Needs

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Sale of HCG

Almost all said  
“no,” “none,” or  
“no thanks”

You guys are doing  
a great job!

Education on trending issues.  
Information on specific  
brands of drugs available on  
the black market. Education  
on harm minimisation.

Animal  
services

## Conclusions

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- PIEDs injectors attending KRC have low BBI risk
- Findings specific to KRC only
  - May be different in other NSP services
- Continue to focus public health effort on those people who inject drugs who are at continuing high risk of BBI

## Implications

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- Commenced provision of “stop-gap” packs
  - Limited quantity of needles and syringes, information re health risks specific to PIEDs use, injecting risk behaviour, BBIs, IRID, safer sex, and alternative sources of equipment
- Promote BBI testing and other relevant services
  - Provide referrals as needed
- Promote alternative sources of affordable equipment
  - Facilitate capacity of local pharmacies to meet needs



## Acknowledgements

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- KRC Frontline Services Unit
- KRC clients

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