



# Harm Reduction is Just Good Public Health

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# People Who Inject Drugs (PWID) Characteristics



- Further, stigma and misinformation surrounding PWIDs also lead to healthcare disparities for this population.
- PWIDs represent one of society's most heavily **stigmatized** populations.
- PWID health disparities are not dissimilar to other marginalized populations, such as racial/ethnic minorities, homeless people, and mentally ill populations.
- PWIDs experience disproportionately high morbidity and mortality from manageable infections, including viral hepatitis.
- Healthcare providers often have a misconception that PWIDs do not care about their health.

# Who Are PWID?

Estimates of current PWIDs in the USA range from 354,000 to over 1.3 million.

PWID occurs in every socioeconomic, racial, and ethnic group, and in urban, suburban, and rural areas

1/4 to 1/3 of PWIDs are women (majority men)

- Source: Baciewicz GJ, et al. Injecting Drug Use. *Medscape Reference: Drugs, Diseases and Procedures*.  
<http://emedicine.medscape.com/article/286976-overview#a0199>

# 4 Main Reasons a Person Decides to Inject

- Seeing someone inject- This takes the fear out of the act, the sky didn't fall, the cops didn't rush in, no one died, no big deal. We call this normalizing a behavior.
- Hearing people talk about the rush and other benefits of injecting- better, harder, faster etc.
- Feeling like the odd one out or that you're missing out: on a better high with a better drug experience, bonding with friends
- Learning that initially it is more economical to inject vs snorting or smoking
- Source: Neil Hunt, United Kingdom, Break the Cycle

# Colorado Harm Reduction Legislation

## **Syringe Access Programming—Senate Bill 189**

Senate Bill 189, signed into law on May 26, 2010, allowed Colorado to join the 35 states currently providing syringe access. On February 8, 2012, HRAC began providing syringe access after 21 months of delay due to legislative and zoning issues.

# Fun Facts About Syringe Access Programs (SAP)

## **Reduction of injection-related diseases (HIV, Hepatitis C) and the risk for injection-related bacterial infections**

New York City (1990-2001): reduction in HCV rates from 50% to 15% after SAP implementation

## **Improvement of Public Safety**

In Portland, OR, improper syringe disposal dropped by almost two-thirds after the establishment of SAPs

## **Protection of Law Enforcement**

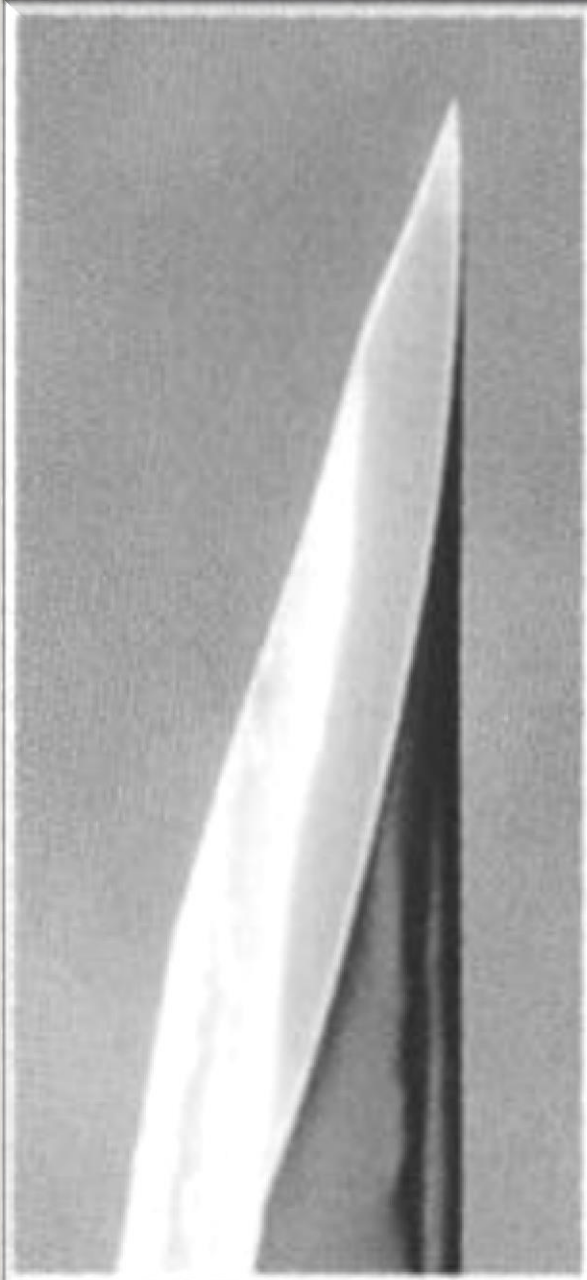
A study of Connecticut police officers found that needle stick injuries were reduced by two-thirds after implementing SAPs.

## **Taxpayer Money Savings**

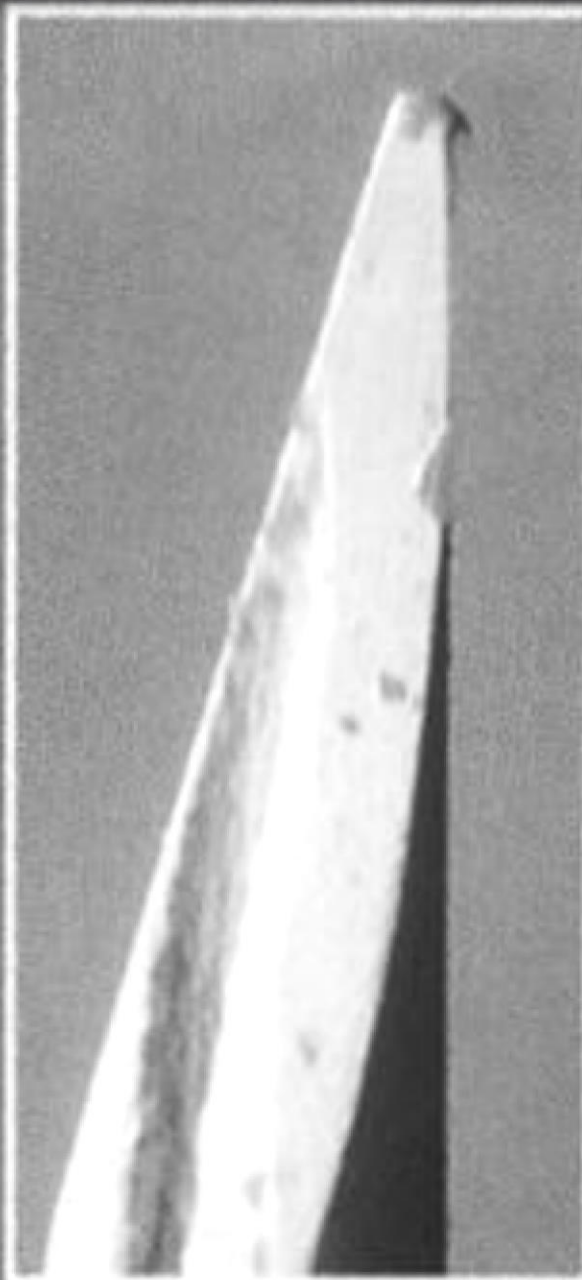
People are living longer with HIV/AIDS; needles cost a dime.

## **Evidence-Based**

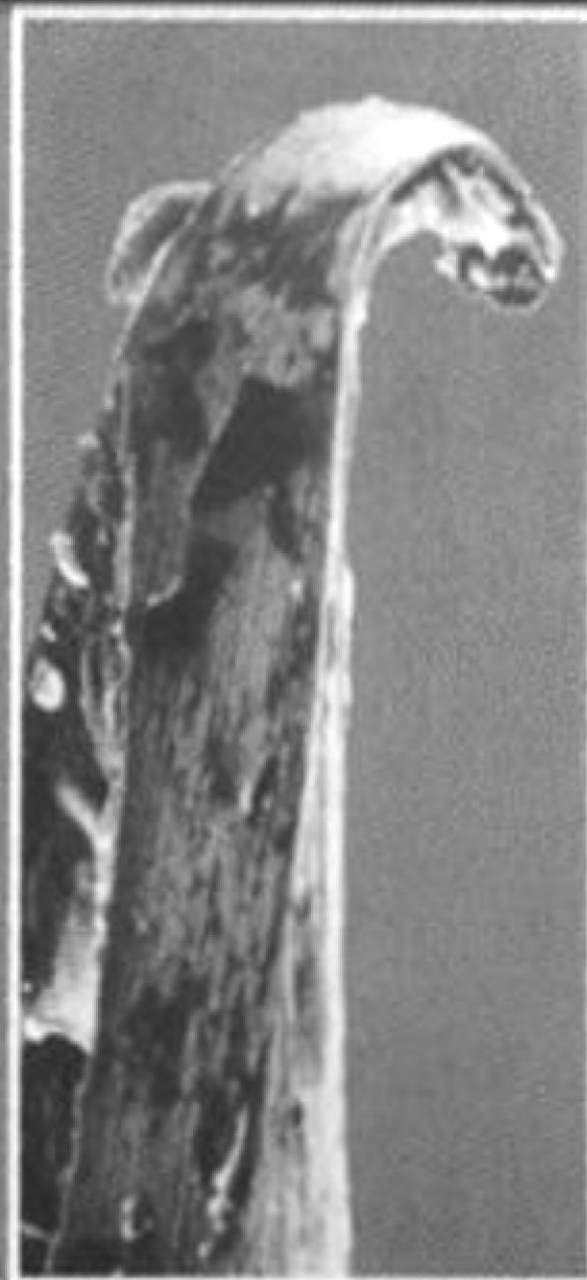
SAPs are based on rigorously tested best practices to treat addiction as a health issues, NOT a moral issue



BEFORE USE



AFTER 1 USE



AFTER 6 USES



# Colorado Harm Reduction Legislation

## Statewide Injection Paraphernalia Exemption—Senate Bill 208

In May of 2013, Senate Bill 208 granted card-carrying Colorado SAP participants the right to carry clean and used syringes. By decriminalizing syringe possession, SB 208 encourages the return of used syringes for proper disposal.

Decriminalizing the syringe has been shown to reduce the overall rates of needle stick injuries to law enforcement by 66%

*“I am a Commander with the (Metro Denver) Police Department. Attached is the e-mail I sent out regarding educating our officers with this program. I appreciate your contact and I support programs that help your patients and keep our officers safe. The sergeants at roll call will pass on this information. I also forwarded this bulletin to our training unit along with the investigation division. Please contact me further if I can answer any questions or help you in any manner.”*


Promotes proper syringe disposal

# Example of an Exemption Card

**Harm Reduction Action Center**  
Participant Identification Card

Identification Code: LJR79F

Date Issued: 12-8-14  
Expires 1 Year After Issue

  
Lisa Raville, Executive Director  
231 E. Colfax Avenue  
Denver, CO 80203  
(303) 572-7800

The cardholder is an active participant in a certified, County-approved syringe exchange program registered under Colorado law (C.R.S. 25-1-520).

The cardholder is exempt from C.R.S drug paraphernalia laws 18-18-425 through 18-18-430 as a participant in an approved syringe exchange program (C.R.S 18-18-430.5 "Drug paraphernalia -exemption").

Possession of syringes, obtained from the Harm Reduction Action Center to reduce the spread of HIV and other blood-borne pathogens, is authorized by law.

# Senate Bill 15-116: Needle Stick Prevention

## The Problem

Under Colorado state law SB 13-208, participants of authorized syringe access programs (SAP) are **exempt** from possession of injection devices (syringes). Currently there are 10 SAPs in Colorado. You can also purchase syringes from pharmacies. **However, those that purchase from a pharmacy are not exempt, which can result in a class 2 misdemeanor per new or used syringe, people are ticketed, and it can enhance a sentence if arrested with another crime.**

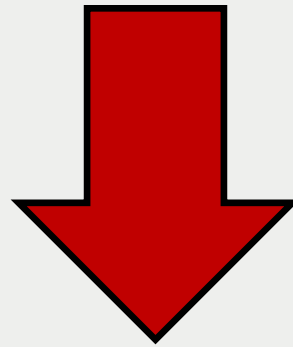
Criminalization of the syringe promotes improper syringe disposal.

People may also be afraid to alert officers, *because of legal consequences*, that they have a syringe on them, which can cause unnecessary needle sticks.

## The Solution

SB 15-116 creates an exception to ticketing, arrest, and filing of charges for the crime of possession of drug paraphernalia if the person prior to being searched by a peace officer informs the peace officer that he or she has a needle or syringe on his or her person or in his or her vehicle or home that is subject to a search.

# HRAC and Law Enforcement



<http://harmreductionactioncenter.org/law-enforcement/>

# HRAC Programs & Services

- Health Education Classes – STRIVE, Vein care, & Overdose
- HIV/HCV/STI testing
- Referrals
- PWID Advisory Committee
- Re-register drug users, homeless, and former felons to vote
- Acupuncture, homeless outreach worker, etc.
- Methadone assistance along with other treatment options
- Access to mail and phone
- Advocacy
- Syringe access during drop-in hours
- Mobile syringe exchange

# Syringe Access Programming Results at HRAC

(February 8, 2012- June 30, 2017)

**~6,551 unique clients to date! = largest SAP in CO**

**83,463 syringe access episodes**

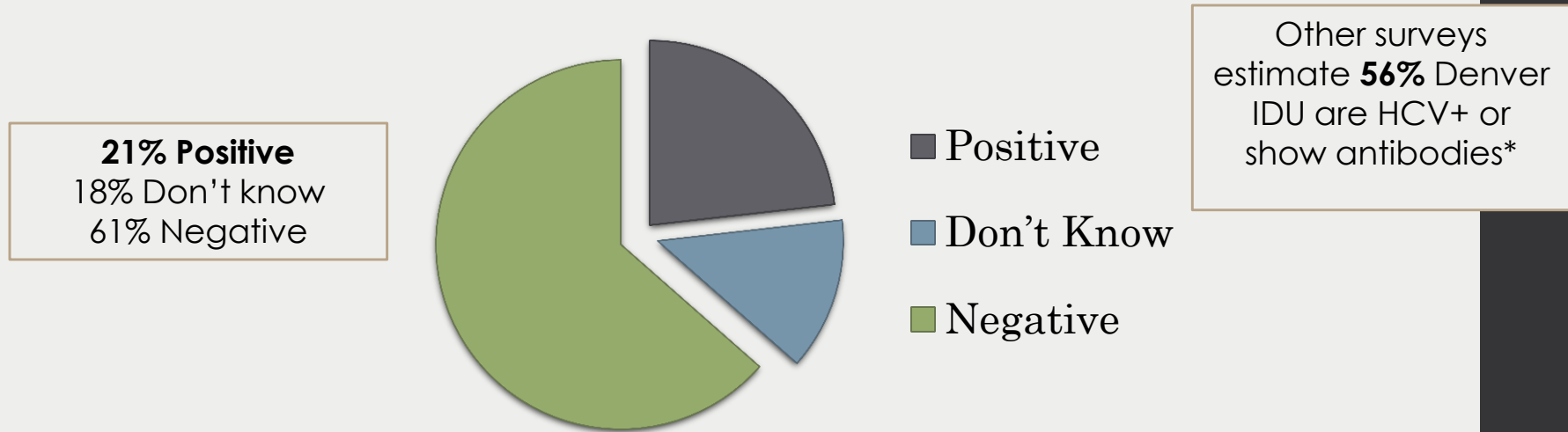
- Average number of people represented per exchange: 2.6

**39,170 referrals** (testing, substance abuse treatment, mental health, etc.)  
1,977 mental health and substance abuse treatment referrals

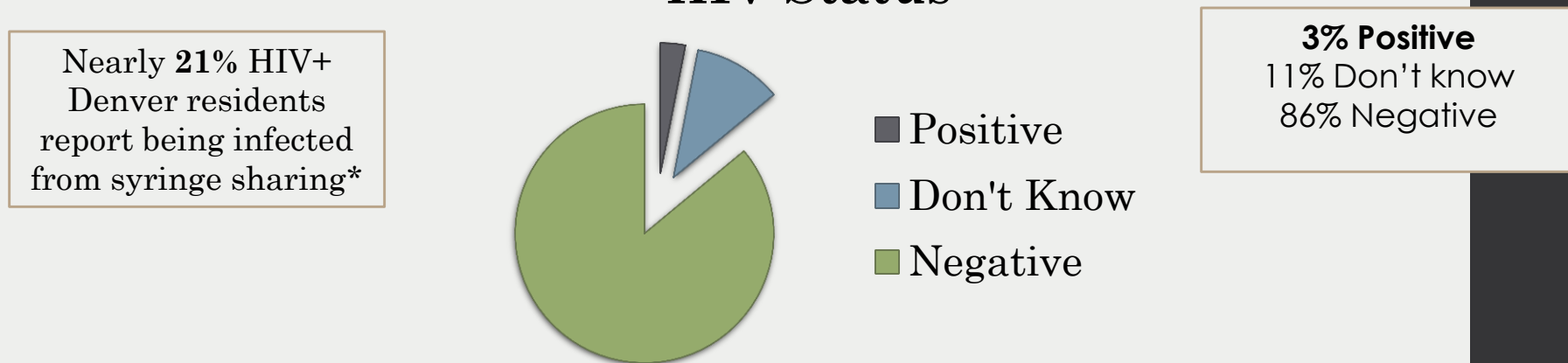
**1,920,561 syringes disposed** (74% disposal rate)

# HCV & HIV status at intake

## Hepatitis C Status



## HIV Status





*WHEREAS, International Overdose Awareness Day is recognized around the world as a day to acknowledge individual loss and family grief for people who have suffered an overdose; and*

*WHEREAS, Colorado currently has the nation's second highest rate of prescription abuse. In 2010, prescription drug overdose killed twice as many Coloradans as drunk driving-related car accidents and was the leading cause of accidental death statewide; and*

*WHEREAS, Overdose Awareness Day recognizes overdoses from all drugs, because it reflects the reality of the overdose epidemic, allowing us to speak and educate more broadly about the issues; and*

*WHEREAS, Overdose Awareness Day hopes to publicly challenge the stigma associated with drug use and overdose; and*

*WHEREAS, Overdose Awareness Day sends a strong message to current and former drug users that they are valued; and*

*WHEREAS, Overdose Awareness Day provides an opportunity for people to publicly mourn for loved ones, some for the first time, without feeling guilt or shame;*

*Therefore I, John W. Hickenlooper, Governor of the State of Colorado, do hereby proclaim August 31, 2013,*

OVERDOSE AWARENESS DAY

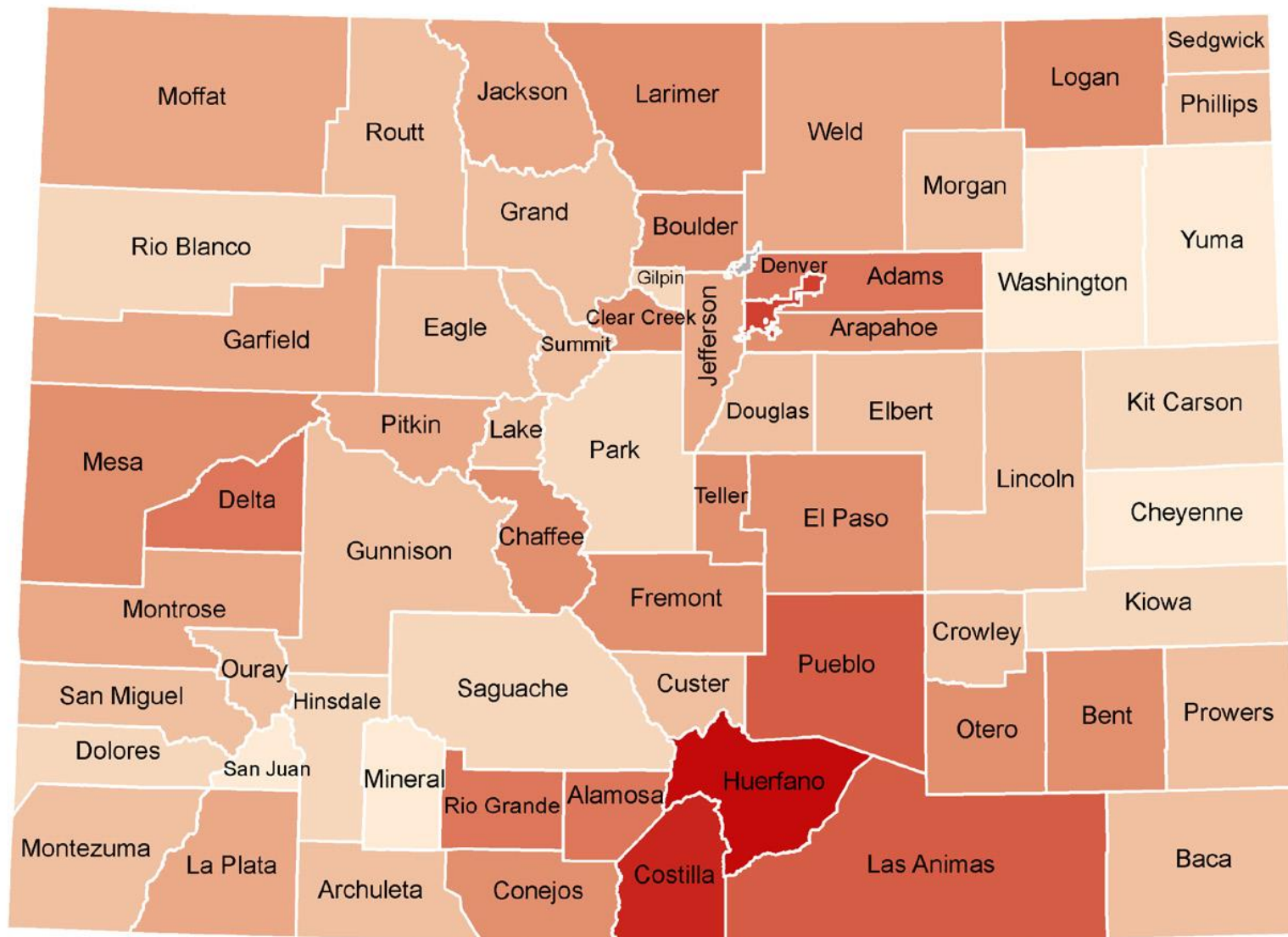
*in the State of Colorado.*



*GIVEN under my hand and the  
Executive Seal of the State of  
Colorado, this thirty-first day of  
August, 2013*

*John W. Hickenlooper*  
John W. Hickenlooper  
Governor





Colorado Counties: Highest overdose death rates: 2002



# Overdoses in Colorado

Colorado overdoses 2000-2016  
Total drug overdose deaths: 11,456  
Opioid-related deaths: 5,035

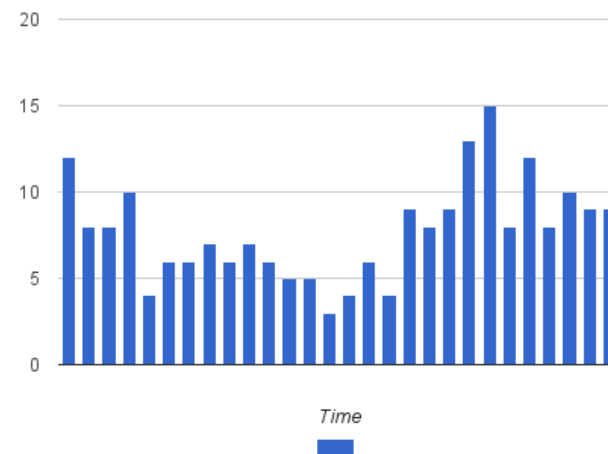
## PRIMARY CAUSE OF DEATH

1. Chronic Drug and Alcohol Abuse
2. Heart Disease
3. Blunt Force Injury
4. Pneumonia
5. Hyper/hypothermia

Colorado Coalition for the Homeless. (2013, December).  
*We Will Remember 2013: Homeless Death Review*. Retrieved  
from <http://www.coloradocoalition.org/userfiles/Library/Homeless%20Death%20Review%202013.pdf>.

Denver – 2016: 174  
Denver – 2015: 129

Denver Heroin Deaths, 2009-2015



# What are Opioids?

- Heroin
- Codeine
- Demerol
- Morphine
- Darvocet
- Fentanyl
- Dilaudid
- Methadone
- Opium
- Hydrocodone
- Oxycodone
- Vicodin
- OxyContin
- Tylenol 3
- Tylox
- Levorphanol
- Percocet
- Percodan

# Risks for Overdose - Prevention Strategies

Change in quality of opioid

- Ask others

- Tester shots

Change in tolerance

- After release from hospital, rehab, jail, illness

- Tester shots

Mixing

- If mixing, use less

- Opioids first

Using alone

- Leave door unlocked; call someone trusted

# What are the Signs/Symptoms of an Overdose?

- Blue skin tinge- usually lips and fingertips show first
- Body very limp
- Face very pale
- Pulse (heartbeat) is slow, erratic, or not there at all
- Throwing up
- Passing out
- Choking sounds or a gurgling/snoring noise
- Breathing is very slow, irregular, or has stopped
- Awake, but unable to respond

| REALLY HIGH   | OVERDOSE  |
|---|---|
| Muscles become relaxed  | Deep snoring or gurgling (death rattle)         |
| Speech is slowed/slurred  | Very infrequent or no breathing                 |
| Sleepy looking  | Pale, clammy skin                               |
| Nodding   | <b>Heavy</b> nod, not responsive to stimulation |
| Will respond to stimulation like yelling, sternal rub, pinching, etc. | Unresponsive to heavy stimulation               |
| Normal heart beat   | Slow heart beat                                 |

# Opioid Overdose Deaths Are Preventable

We have the antidote: naloxone (Narcan)

- Safe
- Highly effective

Paramedics use to immediately reverse effects of opiate overdose

Having available before paramedics arrive saves lives and decreases possibility of brain damage

Community programs and first responders expanding access across the country



# Naloxone

Opioid antagonist

>40 years experience by emergency personnel for OD reversal

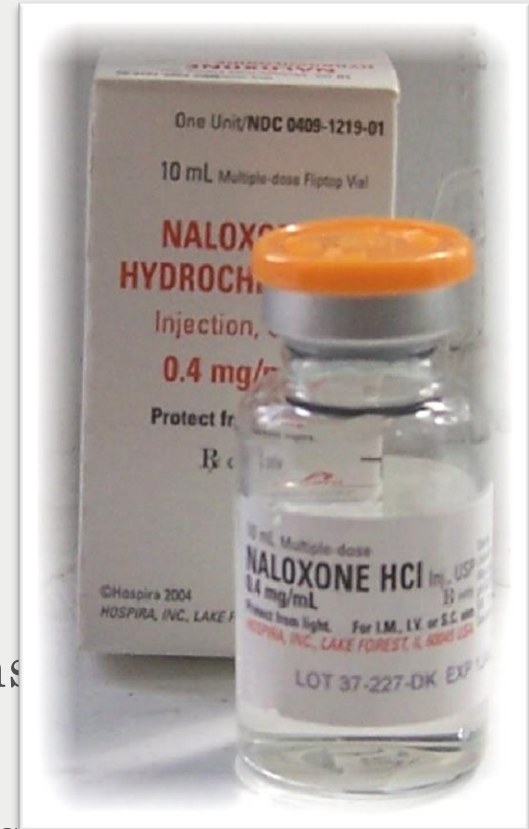
Not addictive; no potential for abuse; no agonist activity

Not a scheduled drug but RX needed

No side effects except precipitation of withdrawal (dose-sensitive)

Unmasking underlying medical problems

Administered via intramuscular and intranasal routes in community programs





# Naloxone types

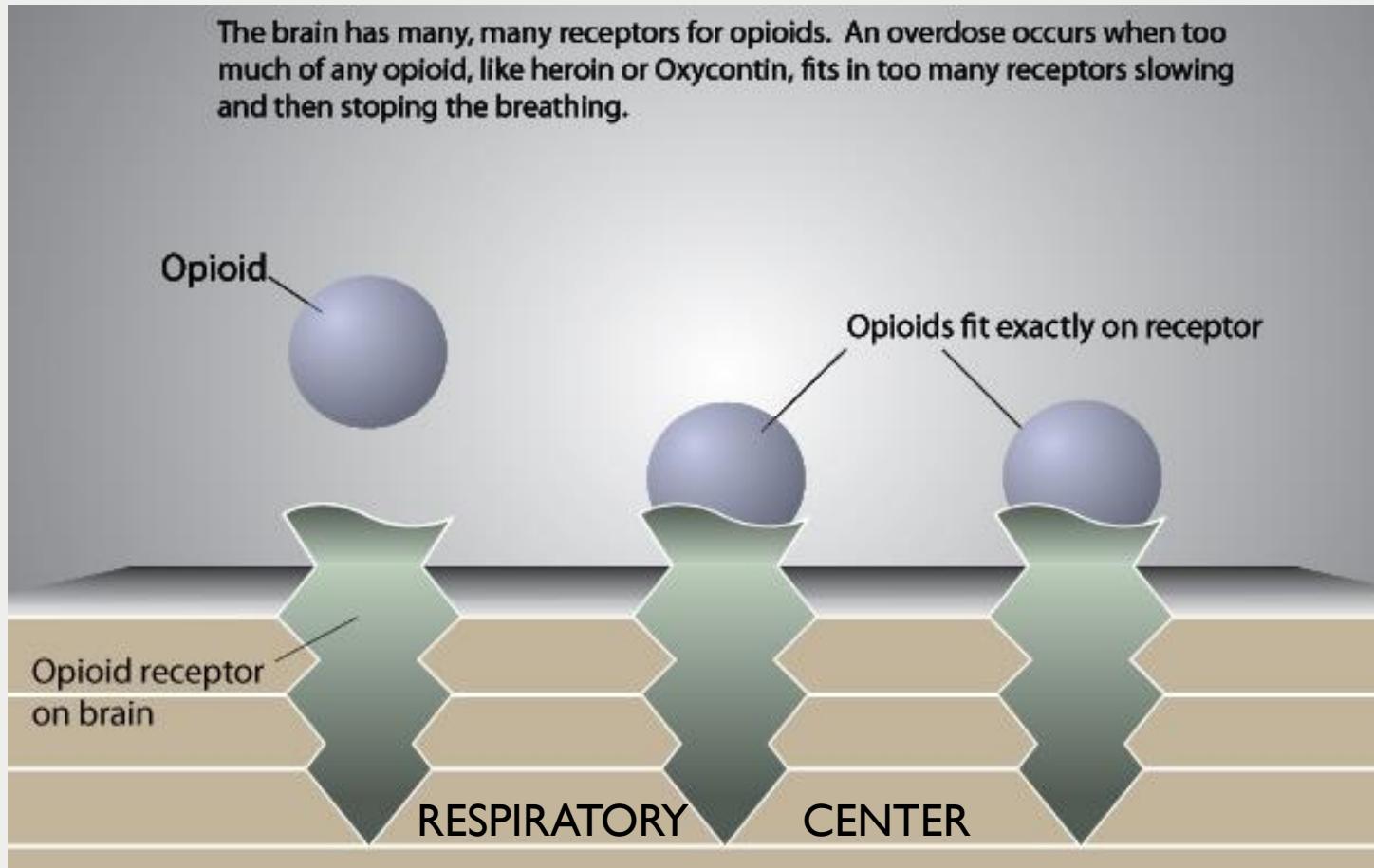
## Intranasal



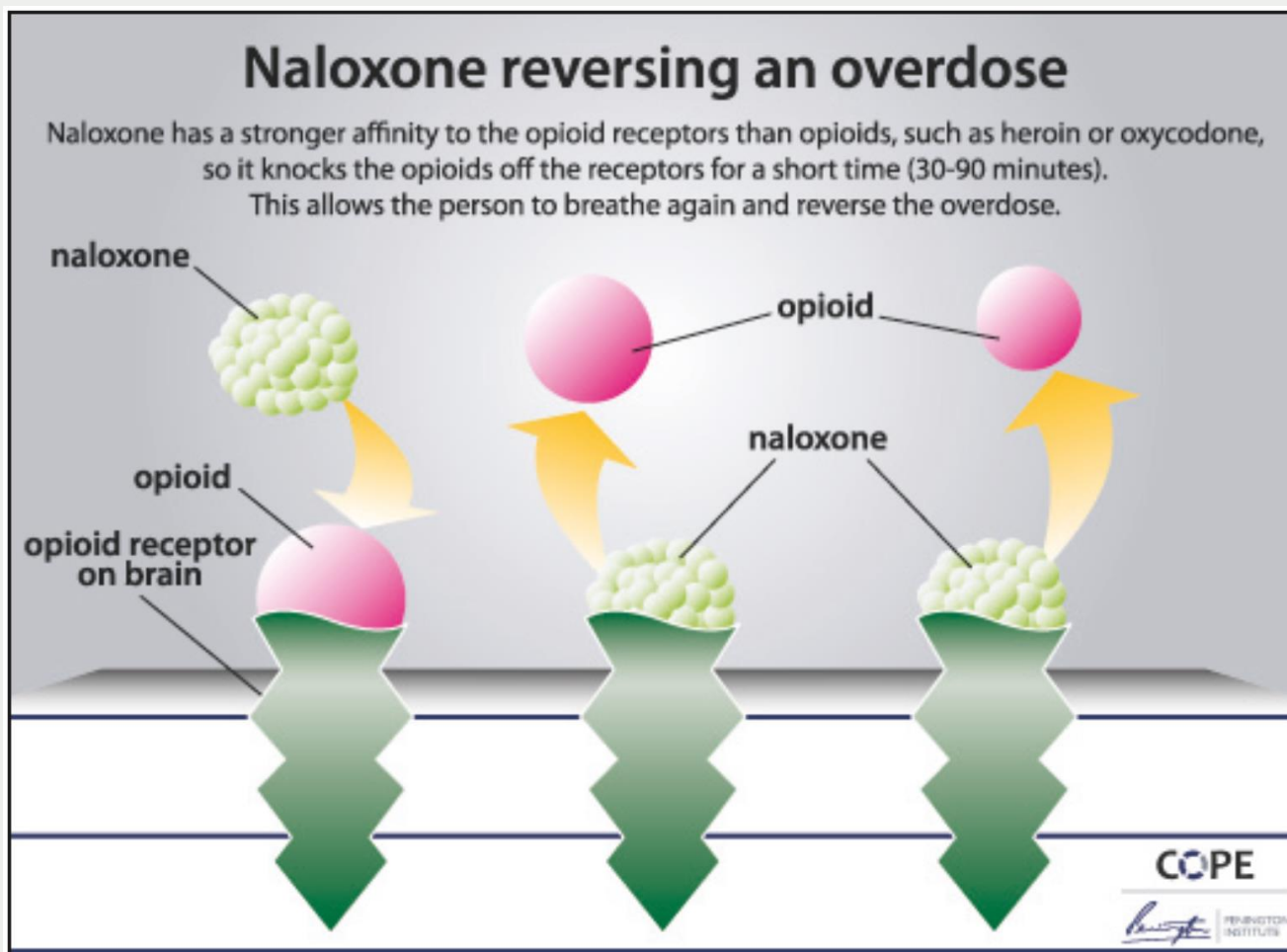
Evzio auto-injector

Injectable

# How it works



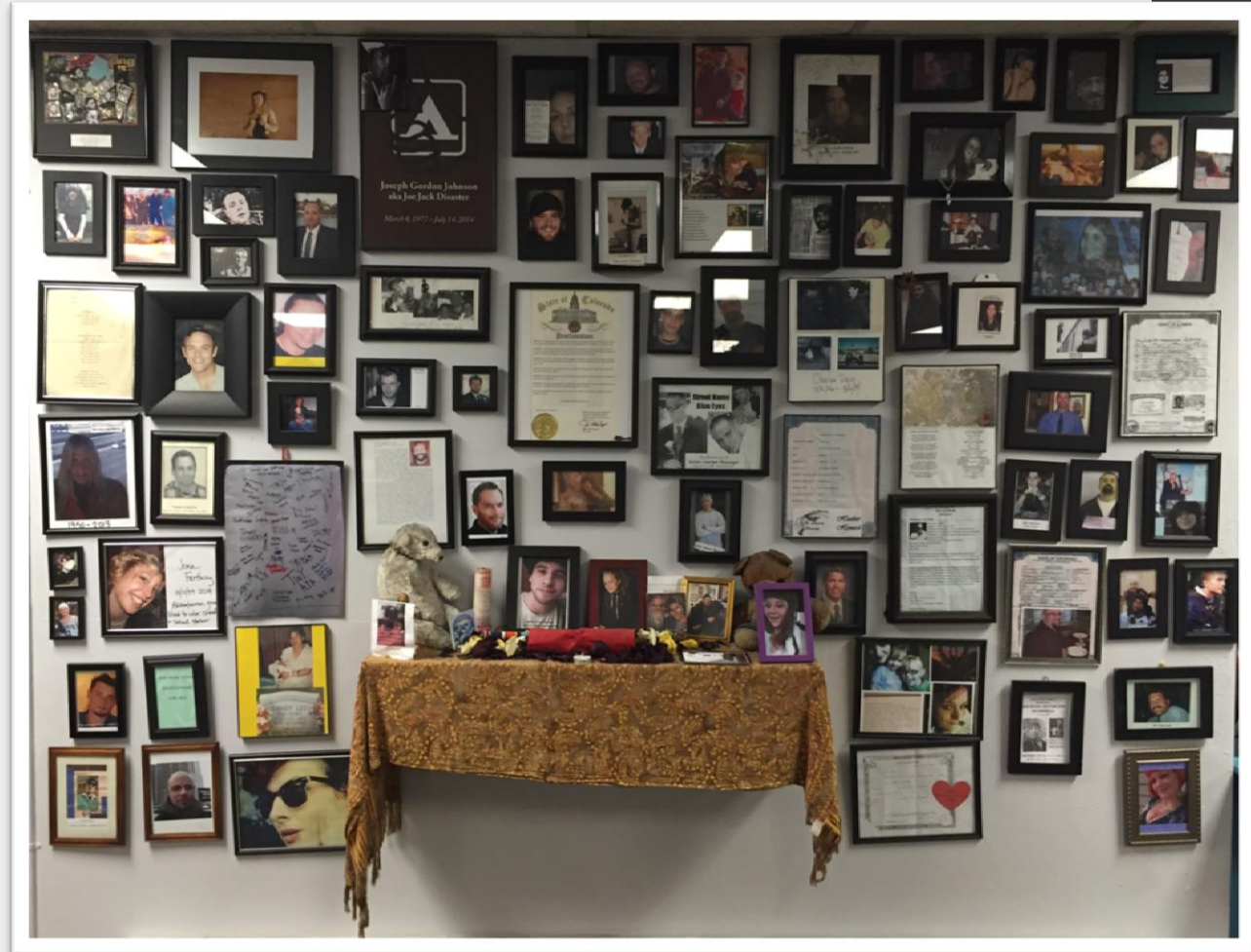
# How it works



Source: Adapted diagram from *Guide To Developing and Managing Overdose Prevention and Take-Home Naloxone Projects* <http://harmreduction.org/our-work/overdose-prevention/>

# Response Myths

- Salt Water
- Suboxone
- Ice On Body
- Cold Shower
- Cocaine
- Milk
- Burning Skin
- Punching
- Slapping



# Responding to Overdose

Are you alright?

Are you ok?

Pain Stimulus

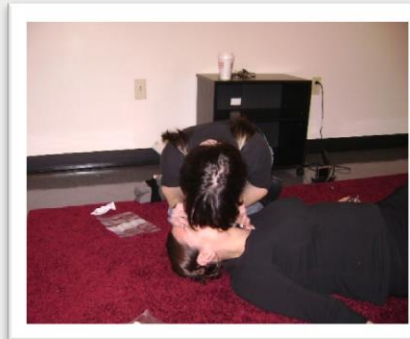
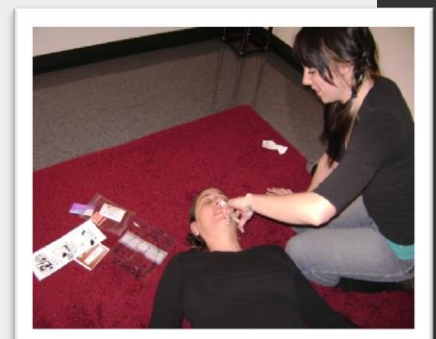
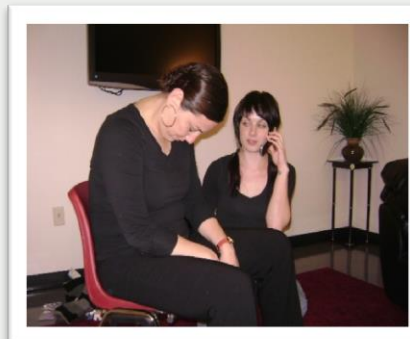
If no response call 9-1-1

Naloxone

Rescue Breathing

Naloxone (if needed again)

Rescue Breathing



# Training

Can be done by staff or pharmacists  
with standing orders

Must include discussion of:

- Risk factors for OD
- Recognition of OD
- Calling 911
- Rescue Breathing
- Administration of Naloxone



# Colorado Harm Reduction Legislation

## Senate Bill 14 for Third Party Naloxone distribution

Senate Bill 14 passed in the Colorado Legislature in May, 2013. This bill allows medical providers to prescribe the lifesaving medication Naloxone—which reverses the effects of an opiate overdose—to 3rd parties likely to witness an overdose, including friends and family members of opiate users, and all homeless service providers. There have been 616 lives saved so far!

**Harm Reduction Action Center - Denver**  
**Denver Health & Hospital – Denver**  
**University Hospital**

## Law Enforcement & Jails

140 Law Enforcement Departments are currently carrying Naloxone

5 Jails are currently training heroin injection drug users in jail and putting intranasal in their property upon release

Arapahoe, Boulder, Denver, Douglas, & Jefferson  
Over 800 trained in the last 1.5 years



# Colorado Harm Reduction Legislation

## • Senate Bill 20, the 911 Good Samaritan law with HB 1390 exemption

Senate Bill 20, signed into law in May of 2012, provides legal immunity from prosecution for small amounts of drugs and paraphernalia to individuals who call 911 in response to an overdose emergency.

Prohibits the arrest and criminal prosecution of anyone, including the individual who experiences an emergency drug or alcohol overdose, for certain offenses when the person or persons (Sec. 2):

- Report an emergency drug or alcohol overdose to law enforcement or 911

- Stay at the scene of the overdose until law enforcement or an emergency medical responder arrives

- Identify themselves and cooperate with law enforcement or the emergency medical responder.

Establishes that the individuals who experience or report an overdose are immune from prosecution for any of the following offenses, if the offense arose from the same course of events as the overdose (Sec. 2):

- Possession of a controlled substance, except for:

  - Any mixture more than 4 grams of ketamine, flunitrazepam, or any schedule I or II drug; or

  - Any mixture more than 2 grams of methamphetamines;

Defines “emergency drug or alcohol overdose” as including, but not limited to, the following conditions (Sec. 2):

- Physical illness, coma, mania, hysteria, or death that results from the consumption or use of:

  - A controlled substance;

  - Alcohol;

  - Another substance with which a controlled substance or alcohol was combined; and

- That a layperson would believe to be a drug or alcohol overdose requiring medical attention.

# Senate Bill 15-053: Standing Orders



- A standing order allows a physician—or any medical professional with prescriptive authority—to write an order for a medication that can be dispensed by other designated individuals under certain conditions, such as harm reduction organizations and pharmacies.
- Over 400 Pharmacies currently with access to Naloxone, many include King Soopers, Rite Aid, Walgreens, Albertsons/Safeway, and CVS Pharmacies
- Access to Naloxone and proven strategies to reduce overdose deaths:



[www.stoptheclockcolorado.org](http://www.stoptheclockcolorado.org)

Verizon

6:23 PM

39%

OpiRescue



## Rescue

**5**

### Monitor Response

Stay with and observe the person closely

Be prepared to continue to perform rescue breathing

If no response within 3 minutes, give second dose of naloxone

Naloxone will reverse effects of an overdose for 30-90 minutes

Person should be monitored by a health care professional for at least 4 hours

**Report Reversal**

# Safer Syringe Disposal Initiative

- Used syringes are discarded in public places around Denver. Improper disposal of bio-hazardous waste exposes city employees and the general public, to potential needle stick injuries. 1,500 were disposed between October 2015 – October 2016.
- These injuries can cause life-altering infections such as HIV and hepatitis C.
- Injection drug users prefer safe disposal of injection materials if disposal is available. In Denver, sharps containers are available in public bathrooms and other locations where people inject.





Questions?

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