



NHS Grampian and Scottish Drugs Forum

INJECTING EQUIPMEN T PROVISION Lynn Couper

CONTENT WARNING

This session discusses injecting drug use, contains images of injection related wounds, infection and drug paraphernalia.

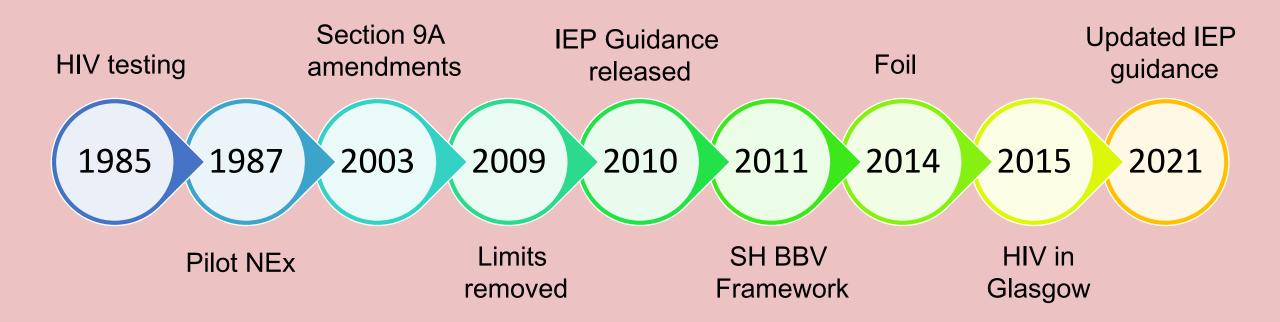
Discretion is advised.



SENSITIVE CONTENT

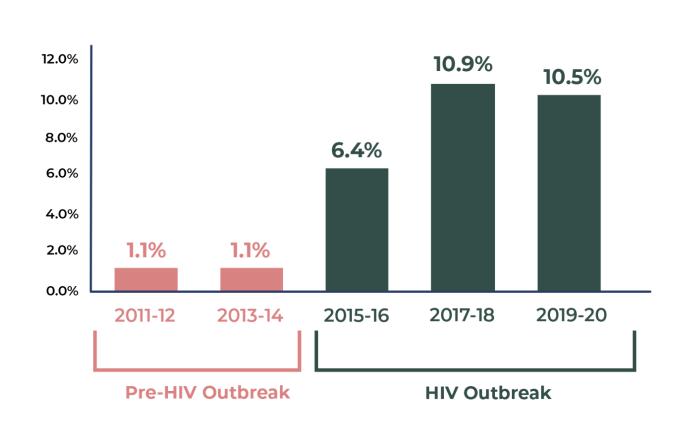


A Brief History of IEP in Scotland





Rise In HIV Prevalence In The Population Of People who Inject Drugs In Glasgow City



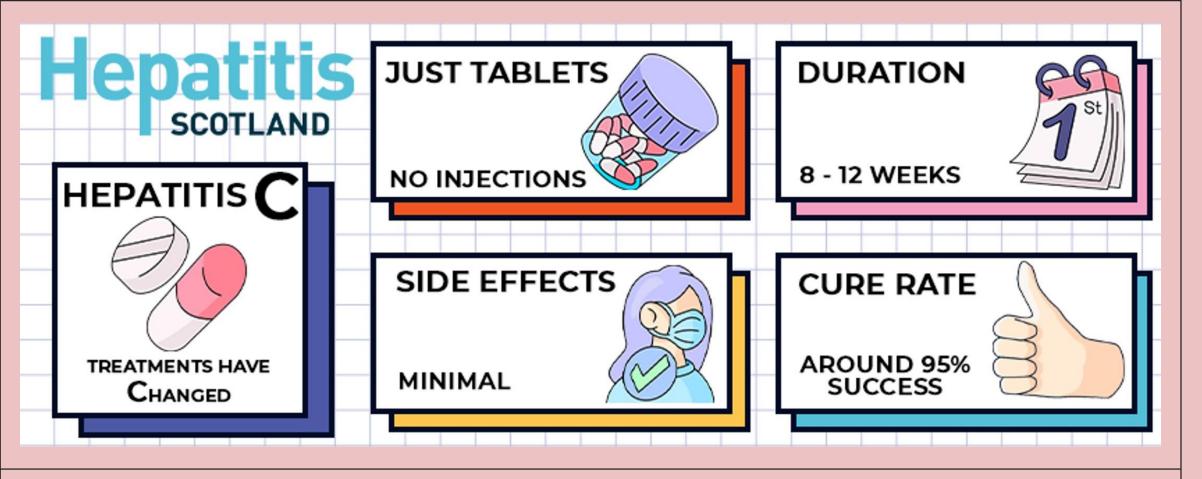
•10-fold rise in prevalence of HIV infection among people who inject drugs observed in Glasgow city between 2013 and 2017

•Plateauing in prevalence of HIV infection among people who inject drugs between 2017 and 2009 (i.e. Pre-COVID)

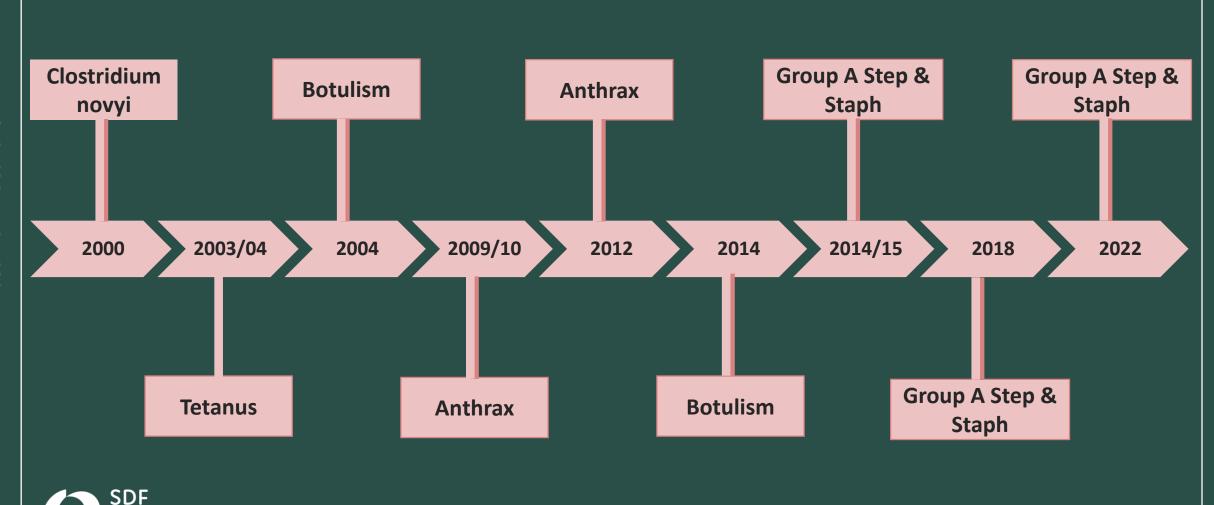


SOURCE: NEEDLE EXCHANGE SURVEILLANCE INITIATIVE

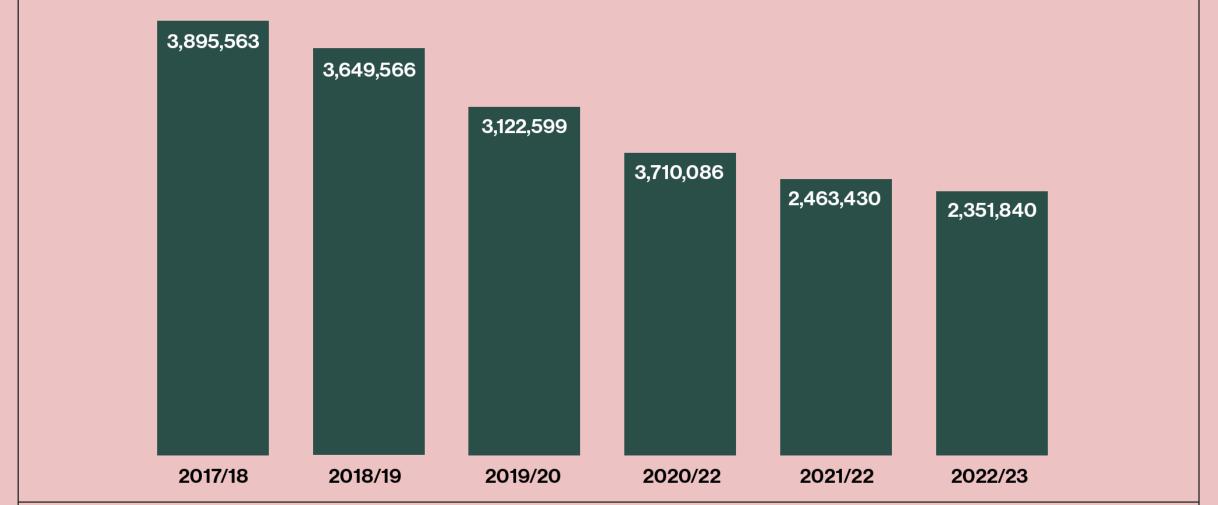
Hepatitis C – New Treatments Are Available



Outbreaks Of Bacterial Infection



Injecting Equipment Provision In Scotland



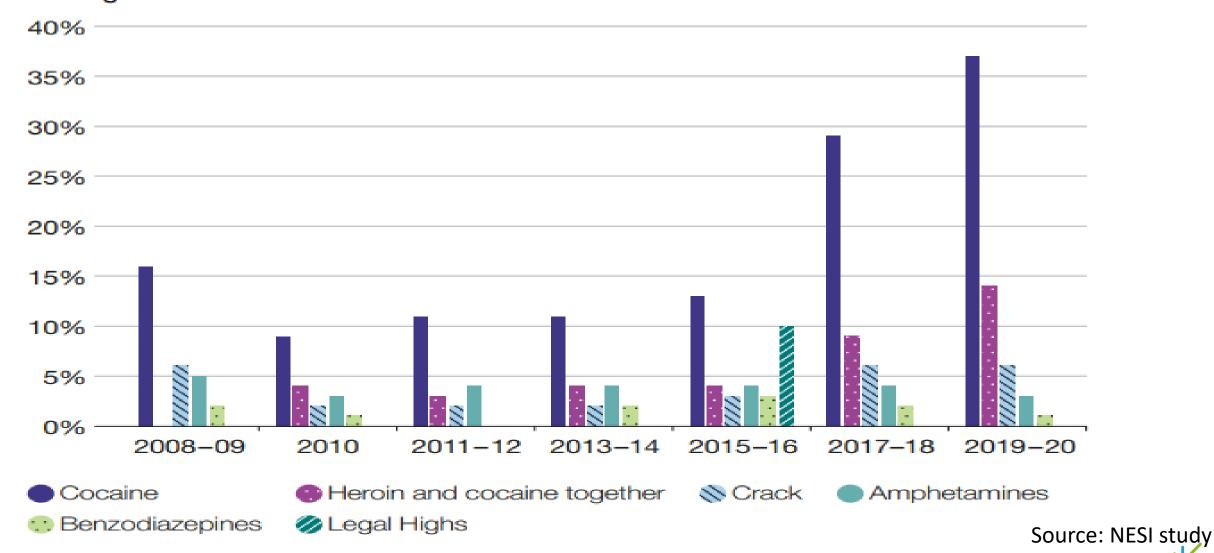


Injecting Equipment Provision In NHS Grampian areas





Figure 2: Proportion of NESI respondents reporting injection of various drugs in the last six months, 2008–2020 (among those who reported injecting in the last six months), excluding heroin

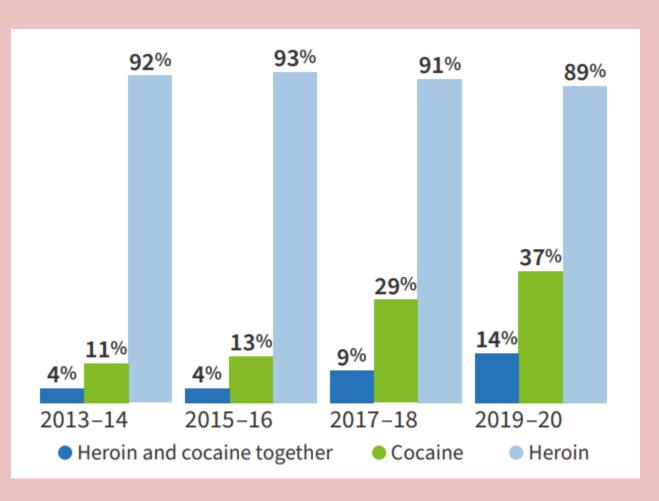


Public Health

Scotland

https://publichealthscotland.scot/publications/needle-exchange-surveillance-initiative-nesi/needle-exchange-surveillance-initiative-nesi/

NESI: monitoring drug use trends



An increase in cocaine injecting has been linked with:

- Increased frequency of injecting
- Increased sharing
- Increased libido
- Increased risk of overdose
- Decrease retention in treatment and services

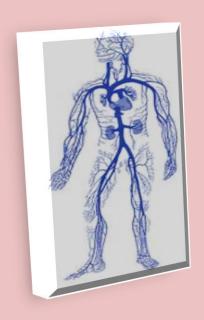


https://publichealthscotland.scot/publications/needle-exchange-surveillance-initiative-nesi/needle-exchange-surveillance-initiative-nesi/

Injecting Routes

Intravenous (IV)
Injecting into a vein

Intramuscular (IM)
Injecting into a
muscle





Subcutaneous (SC)

A shallow injection into the layer of skin directly below the dermis



Single Use Packs

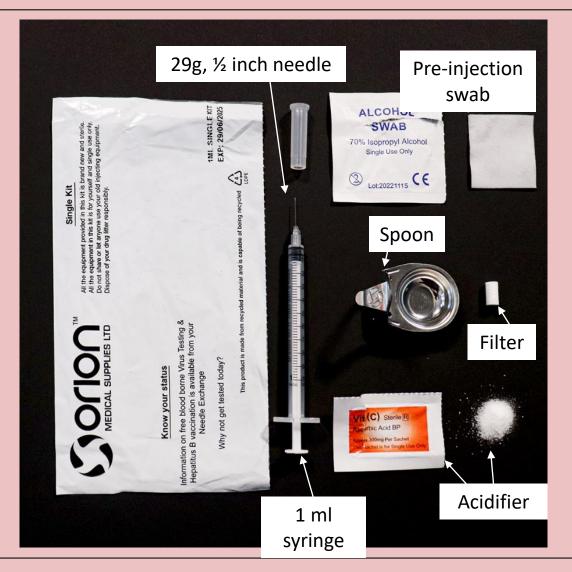






1ML SINGLE USE PACK





2ML (ORANGE) SINGLE USE PACK





2ML (BLUE) SINGLE USE PACK





Spoons/cooker





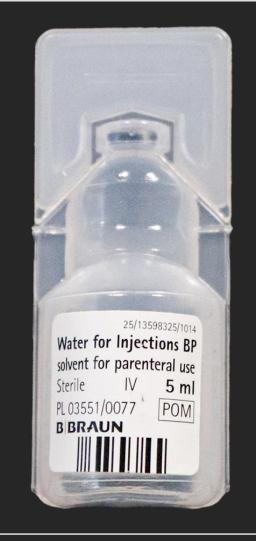


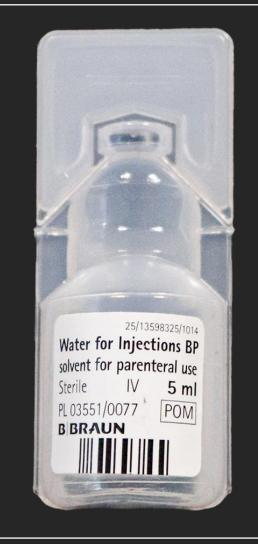






Water For Injection





Sharps Bin



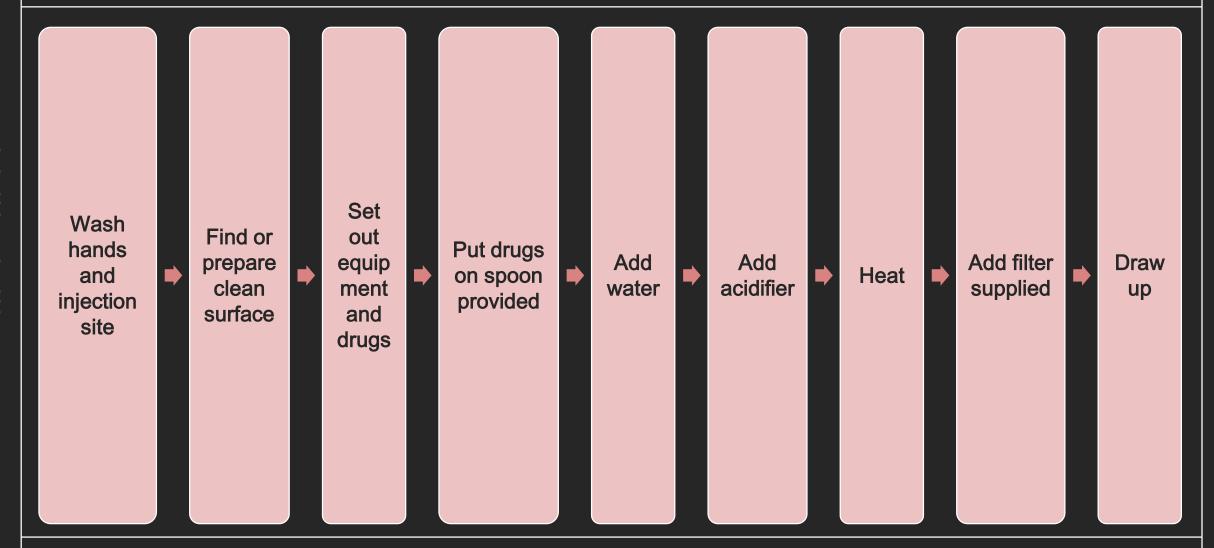


Foil For Smoking

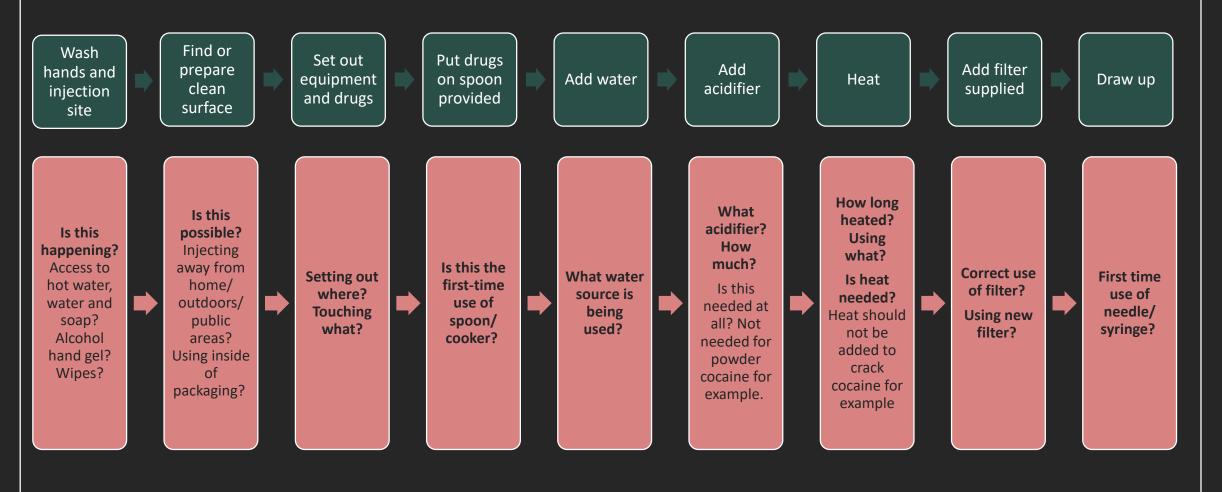




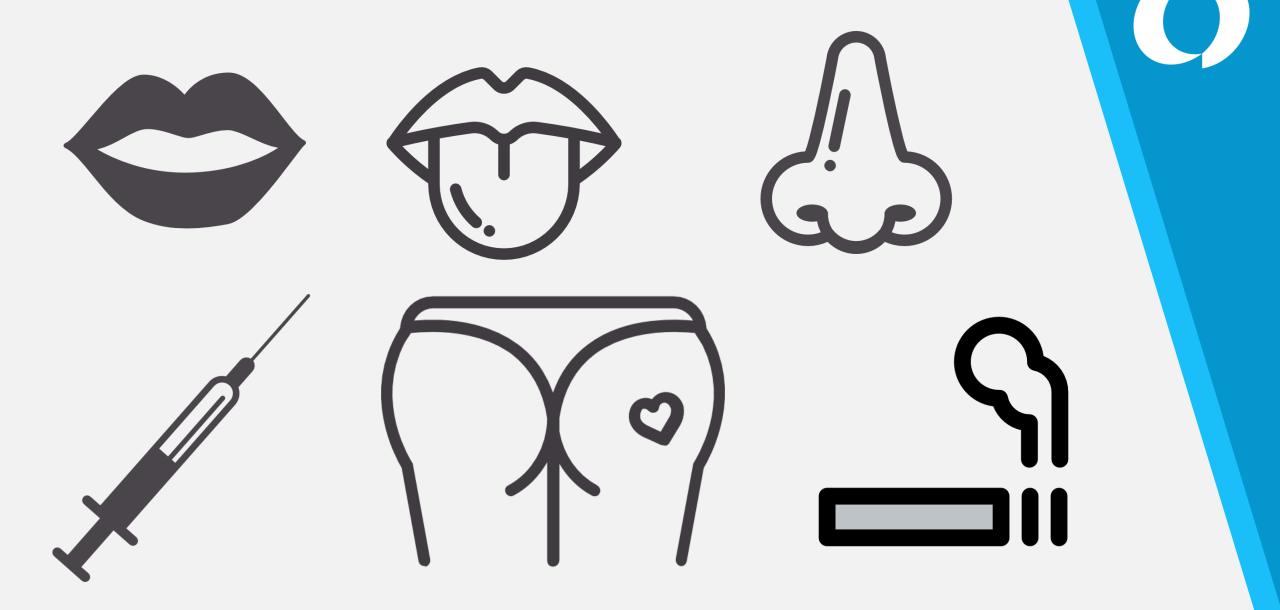
The Injecting Process



The Injecting Process

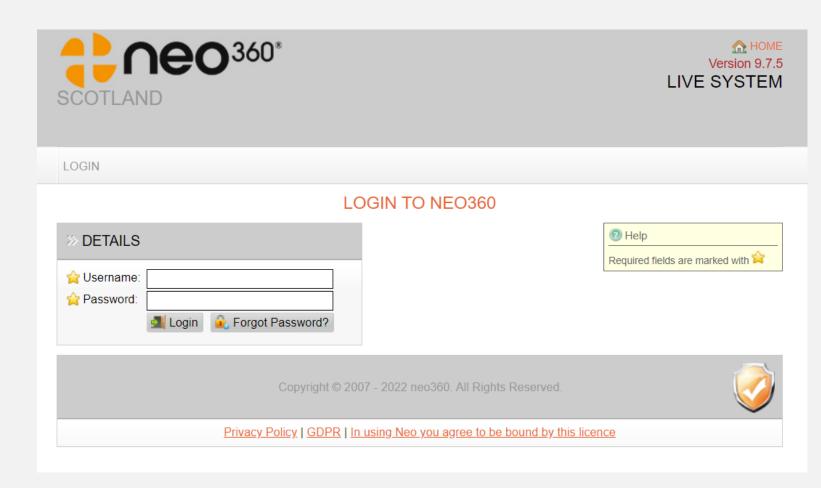


Other Methods of Using Drugs



NEO 360

- Web-based data collection system
- Accessible across Scotland
- Modules include AIR, IEP, BBV testing, IPED Clinic, Wounds & Naloxone
- Anonymised to reduce barriers to collecting sterile equipment.
- Designed for direct entry







Scotland – the NESI study

needle exchange surveillance initiative 2019/20

55%

report to injecting at least 1x per day

15%

of respondents not accessing sterile water for injecting 11%

report to
sharing
needles &
syringes with
others

45%

report to injecting into the groin (Femoral vein)

44%

report reuse of own needles

16%

report experiencing a serious skin and soft tissue infection in the last 6 months



The IEP Conversation

Where do people come into collect IEP?

- Is there a discreet way of asking for this?
- Is there a private room to allow conversations to be had?

 Anonymity – people do not have to give their details to collect Injecting Equipment, but it is useful if people can choose 1 that they will remember and use each time.

Practical Advice you may be able to pass on

- Direction of injection always inject in direction of heart
- Check that you are in a vein before injecting
- Washing hands & site will reduce potential bacterial contamination
- Using filters to trap particles including contaminants
- Amount of acid only a small amount required
- Correct size needle for intended site smallest to reach
- Enough equipment for one time use every time

WHO SWHAT WHEN & WHY
WHERE





16%

30%

WOUNDS & INFECTION

60%

16%

of people who inject drugs in Scotland will have experienced a skin or soft tissue injury or infection in the preceding six-month period

Source: NESI 2019/20

30%

of individuals who reported injecting psychoactive drugs across the UK reported having a sore, open wound or abscess at an injection site in the last 12 months

Source: UK Health Security Agency Shooting Up Report 2023

60%

of people who have experienced a skin or soft tissue infection within the last year have sought **no health care** service treatment.

Source: Public Health Wales ACT programme 2021

WHO SWHAT WHEN & WHY
WHERE

HIGH TEMPERATURE

LOSS OF CONSCIOUSNESS

FEVER

TREMORS

SWEATY/CLAMMY SKIN

PAIN

SORES/WOUNDS/ABSCESS

DEHYDRATION

BREATHING DIFFICULTIES

SKIN COLOUR

NAUSEA & VOMITING

HEADACHES

UNUSUAL TIREDNESS

SPREADING REDNESS

CONFUSION/DISORIENTATION

WEAKNESS (FACIAL/LIMBS/MOBILITY)



Group A Streptococcus & Staphylococcus

- You are at risk if you: inject, smoke or snort substances such as heroin, cocaine or crack cocaine
- It is transmitted by: person to person contact, sharing equipment (including pipes) and through injecting

Ask yourself, do I have...

- Weeping wounds or wounds that are getting bigger and/or redder?
- Limbs or infected sites that are swelling and are becoming painful?
- High fever/chills?
- Severe muscle /joint aches?
- Vomitting /diarrhoea?
- Unusual confusion /disorientation?

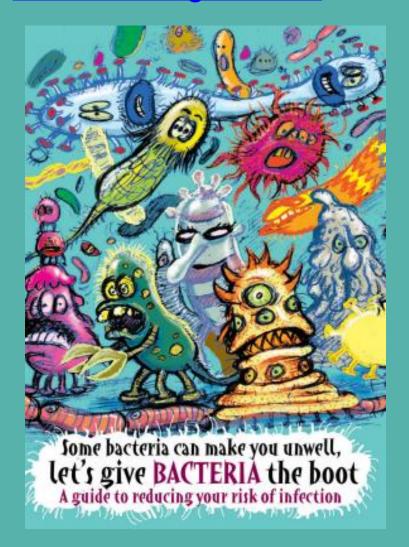
Stop, Think and Seek help

- Wash hands and injecting sites before preparing, injecting and smoking
- Do not share any equipment
- Use new equipment every time
- Avoid skin and muscle popping



These infections can be life threatening, please seek urgent medical advice if you experience any of these symptoms

Downloads available at <u>Bacterial Infection & Drug</u> <u>Use Archives - SDF -</u> <u>Scottish Drugs Forum</u>



Self Care Advice: Looking after your wounds at home

- Always try to cover your wound using a simple dressing.
- Change every seven days unless it is leaking, has fallen off, or is stained as below.
- Dressings are available free from your pharmacy

When to change your stained dressing?







Do not Do not change change Change dressing

▼ Infection checklist

- Heat, redness or swelling around the wound that is getting worse
- Wetter than before
- More painful
- More yellow, green or black in the wound than before
- Bigger or deeper
- Bad smell

If you have any signs of infection which are not getting better, and you feel unwell, call 111 for advice.

What we miss when hand washing



Keeping your wounds clean

- · Avoid touching or picking your wound.
- If it's wet, cover it up.
- If you think your wound is getting worse, draw a circle around the wound on your skin and watch for spreading redness.



Use soap to wash your hands for at least 20 seconds; before preparing or taking drugs and before or after cleaning or changing wound dressings.



- If the redness gets bigger seek advice from your GP or other health professional, like a pharmacist.
- If it's getting smaller it means it should be OK but still seek medical advice if you have any concerns.



Supporting people

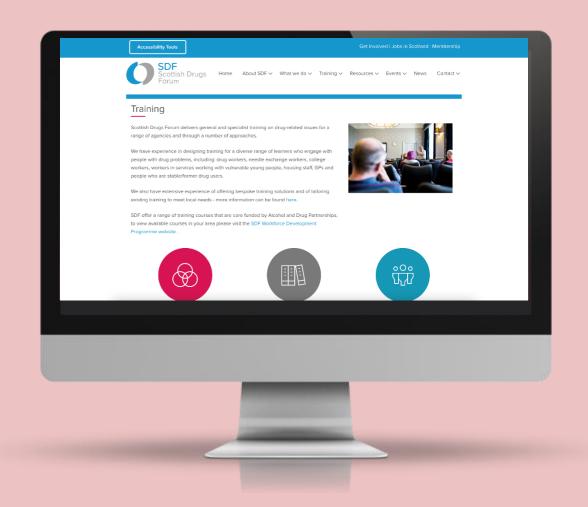
- Connections with people relationships are key.
- Non-judgemental attitudes can gather more information and reduce more harm.
- Person centred what does the person want to do?
- Relationships with services how do we work with other services in our area?
- Sign posting how do we share other available support?

Further training is available at

www.sdf.org.uk/training

Any other questions?
Please contact

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Find a drug service near you www.scottishdrugservices.com

Find a needle exchange near you www.needleexchange.scot

Overdose Resources www.stopthedeaths.com

