

# Shooting Up: Update 2008

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# Key Messages

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- Injecting drug users (IDUs) are vulnerable to a wide range of infections
- Including those caused by viruses and bacteria
- These infections can result in high levels of illness & death

# Key Messages

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- The extent of injecting drug use in the UK remains uncertain.
- A national estimate for England suggests around 140 000 injectors of heroin or crack – cocaine

# Behaviours

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- Reported sharing of needles & syringes (direct) has declined in recent years
- The sharing of other equipment remains common
- Groin injecting has become more common, with almost 1:3 reporting injecting into the groin (femoral vein)

# Blood borne viruses – Hep C

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- Almost half of IDUs in the UK have been infected with hep C
- Total number of new diagnosis 2007 in England 7, 540
- 1/5 of IDUs become infected within 3 years of starting injecting

# Blood Borne Viruses - Hep B

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- No figures available for 2004-2007
- 2003 (England) – 676 total exposures with 38% indicating IDU
- Increased Hep B vaccination uptake, 2/3 IDUs reporting vaccination
- Vaccines available through IDAS, GP surgeries and The Sexual Health Service

# Blood Borne Viruses - HIV

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- New diagnosis through injecting
- London 62: Rest of UK 84
- Within England & Wales prevalence is currently 1:90, in London 1:20
- England, Wales & Northern Ireland in 2007 1,065 HIV positive IDUs were seen for treatment or care, 2% of the total 53, 852 who were seen

# Bacterial Infections

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- Injecting site infections
- Cost to the NHS could be as much as £47 million per annum
- Common with around 1/3 of IDUs reporting having had an abscess, sore or open wound in the last year



# Bacterial Infections

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- Tetanus – potential sources are contaminated drugs, injecting equipment and skin
- Botulism- symptoms progress rapidly from blurred vision, slurred speech and muscle weakness to paralysis and respiratory failure, some cases can be fatal
- Staphylococcus Aureus – vary from skin and soft tissue infections to life threatening invasive disease such as bacteraemia and endocarditis

# What can we do?

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- Ensure sufficient distribution of equipment to prevent sharing
- Support and information to client
- Establish relationship with client
- Signposting to partner agencies
- Encourage 'returns'
- Talk to each other!

# Websites

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- [www.hpa.org.uk](http://www.hpa.org.uk) (Shooting up Document)
- [www.wish-net.co.uk](http://www.wish-net.co.uk)
- [www.iwight.com/council/departments/community\\_services/dat/](http://www.iwight.com/council/departments/community_services/dat/)

# The Barbie Drug – Melanotan

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The wonder drug  
that can give you  
a tan!



# Melanotan

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- Reports that a number of individuals are presenting at needles exchanges requesting equipment to inject tanning drugs
- The drug works by tanning from the inside out
- Some of these users are also using performance and image-enhancing drugs
- These represent a new group of 'naïve' injectors
- Easily brought of the internet and in tanning salons.





# RISKS

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- These drugs are still in the early stages and are not licensed medicines
- Risks are that these groups of users may well share the vials, injecting equipment and re use the equipment
- Thus they are at risk of blood borne viruses & bacterial infections



# Melanotan II

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- Has been found to have a potent affect on the libido of both male & female
- There are also reports that this drug is an appetite suppressant
- Side effects include nausea & vomiting

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- Should we supply this group of users with needle exchange equipment ?

