

OSAM-O-Gram

Ohio Substance Abuse Monitoring Network

"Injection Drug Use, HCV and HIV"

November 2011



John R. Kasich, Governor
Orman Hall, Director

Increases in Injection Drug Use Putting Users at Risk for Blood-borne Diseases

As intravenous injection of drugs increases, so too, do the risks for transmission of blood-borne diseases. Heroin is now one of the most available street drugs in every OSAM region, highly available throughout Ohio. The most common way to use heroin is intravenous injection. Across all regions, 70–90 percent of heroin users reportedly inject the drug. This high rate of injection is corroborated by ODADAS admissions data from SFY 2010 where injection as a route of administration was reported by 75.6% of heroin users in the first half of the year and by 77.4% in the year's second half. Increases in intravenous injection have been fueled by Ohio's prescription opioid epidemic. After becoming addicted to high dosages of narcotics, users progress to heroin once prescription opioids become too expensive. Even if a user has only snorted prescription opioids, participants explained that users progress to intravenous injection of heroin within two to three months of first heroin use.

Along with reports of intravenous injection of heroin, benzodiazepines, crack and powdered cocaine, methamphetamine and prescription opioids, OSAM participants discussed widespread needle sharing and the negative health consequences posed by sharing. A participant in Youngstown reported the following:

"I would buy a clean bag of 1 CC syringes from the drug store. There were times I would reuse my needles; there were times I would use other people's needles if I was in a hurry to get a quick fix, and there were times my needles got mixed up with other people's [needles] as well. There is a possibility I have Hepatitis C. I know somebody that had it, and I possibly used their needles."

A treatment provider in Youngstown reported, *"I see a lot of our clients testing positive for Hepatitis C, more so than in the past."* Reports from OSAM focus groups about intravenous injection corroborate recent trends in blood-borne infections. Intravenous drug use is the leading risk factor for Hepatitis C virus (HCV) infection. According to Ohio Department of Health data accessed through ODADAS' State Epidemiological Outcomes Workgroup (SEOW) initiative¹, the rate of Ohio's HCV infection has gone from 39.5 per 100,000 population in 2003 to 65.5 per 100,000 population in 2010, representing a 65.8% increase. In addition to increased HCV, the number of new HIV diagnoses across Ohio has consistently and significantly increased from 617 new HIV cases in 2005 to 1,008 new cases in 2009 (Ohio HIV/AIDS Surveillance, Ohio Department of Health, 2010).

Participants in Toledo reported getting needles from diabetics and/or pharmacies, paying \$1 per needle from diabetics or \$10 per pack of needles from the pharmacy. Participants in Cincinnati also reported obtaining needles from people with diabetes;

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¹Purpose of the Ohio SEOW Initiative is to provide counties and communities data needed for planning, monitoring and evaluation purposes. SEOW Web site: <http://www.odadas.ohio.gov/SEOW/>.



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Increase in Injection Drug Use Putting Users at Risk for Blood-borne Diseases, continued

a participant reported, "You hug up to a diabetic to get needles." Other participants reported that they were employed in healthcare settings and had ready access to needles. Another trend cited by a few participants and community professionals is that syringes are sometimes available from drug dealers. A Dayton treatment provider reported, "I had heard that syringes were getting harder to get ahold of. They [dealers] were selling those ... too."

There are two needle-exchange programs in Ohio: The Free Medical Clinic of Greater Cleveland needle-exchange program in operation since 1995 (www.thefreeclinic.org) and the newly opened (2011) Prevention NOT Permission syringe-exchange program operated by the Portsmouth City Health Department. This program was created through emergency order in response to Scioto County's escalating drug abuse problem and its current distinction of having Ohio's highest HCV rate at 23.7% positive status per 100,000 population (www.portsmouthhealthdept.org).

