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Public Health Outcomes as a Measure of Efficacy of Syringe Exchange Programs

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Public Health Outcomes as a Measure of Efficacy of Syringe Exchange Programs



The Robert Larner, M.D. College of Medicine

VERSITY OF VERMONT

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Introduction

What is Syringe Exchange?

- Public health intervention where people who use drugs, referred to as Intravenous Drug Users (IVDU), are provided clean syringes in exchange for used syringes
- Services are provided nonjudgmentally to facilitate positive change as defined by the person who uses drugs

How effective is Syringe Exchange?

- Reduces transmission of HIV, hepatitis C, and other blood-borne pathogens¹
- Participants more likely to engage addiction treatment services and reduce drug use²

Drug Use in Vermont

- More than 1500 opioid-related substance abuse treatment admissions in 2010³
- Heroin & fentanyl-related fatalities have been rising since 2013⁴
- 75 accidental & undetermined opioid fatalities in 2015⁴

Aims

- 1) Assess the impact of VT CARES syringe exchange program on the health of their participants
- 2) Compare healthcare service usage in long-term and new syringe exchange participants
- 3) Determine how VT CARES could improve its syringe exchange program

Methods

Research Protections Acceptance

Class projects require that the instructor develop a method of determining that the projects meet the required criteria to be "exempt" from Committee review. The requirements for this course have been reviewed and accepted by the UVM Office of Research Protections.

Subjects & Data Collection

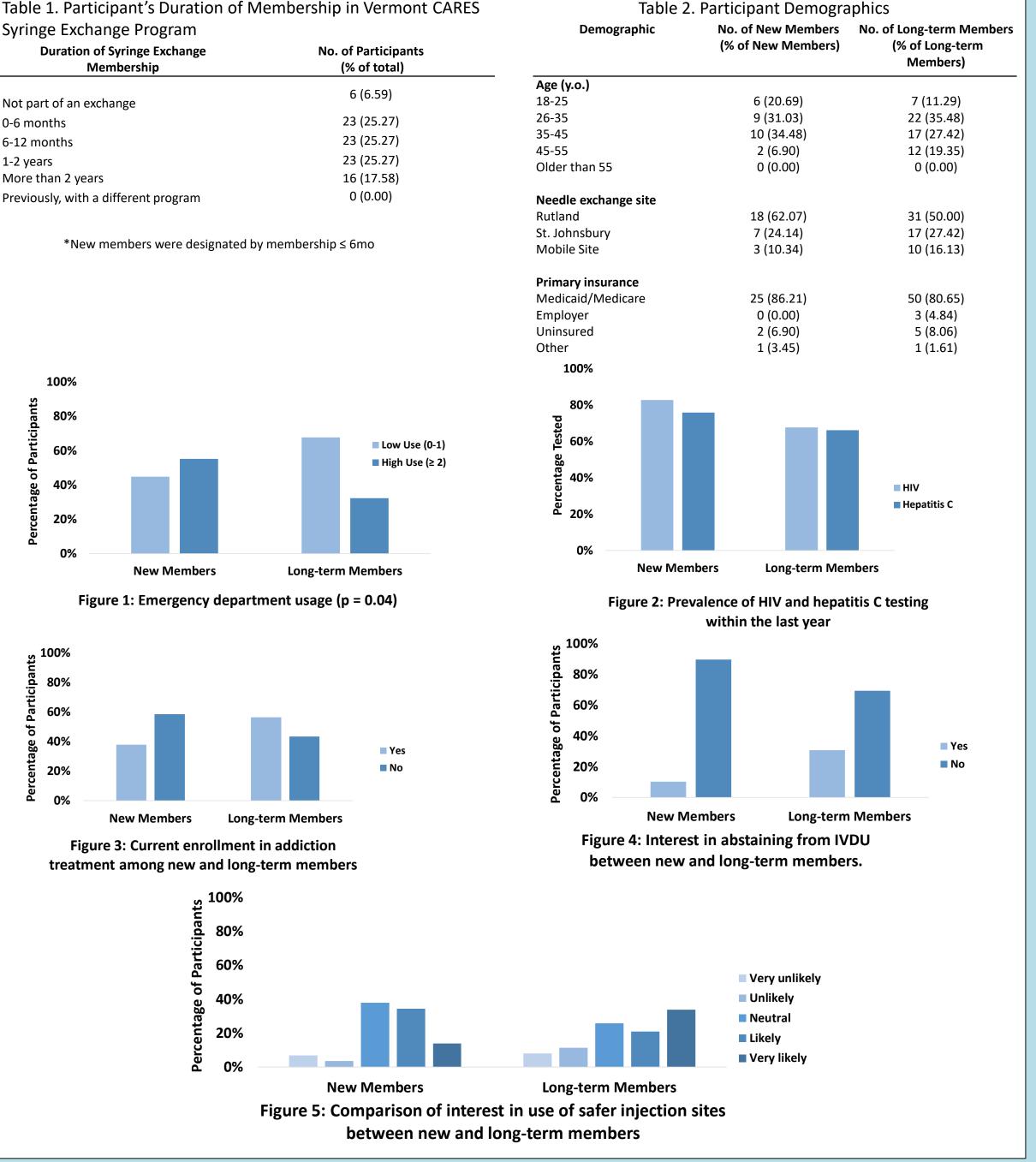
- 91 subjects at syringe exchange programs run by Vermont CARES at permanent sites in St. Johnsbury and Rutland and a mobile clinic serving greater Vermont
- 20 item survey aimed at identifying general health practices and barriers to receiving healthcare for intravenous drug users who participate in a syringe exchange program

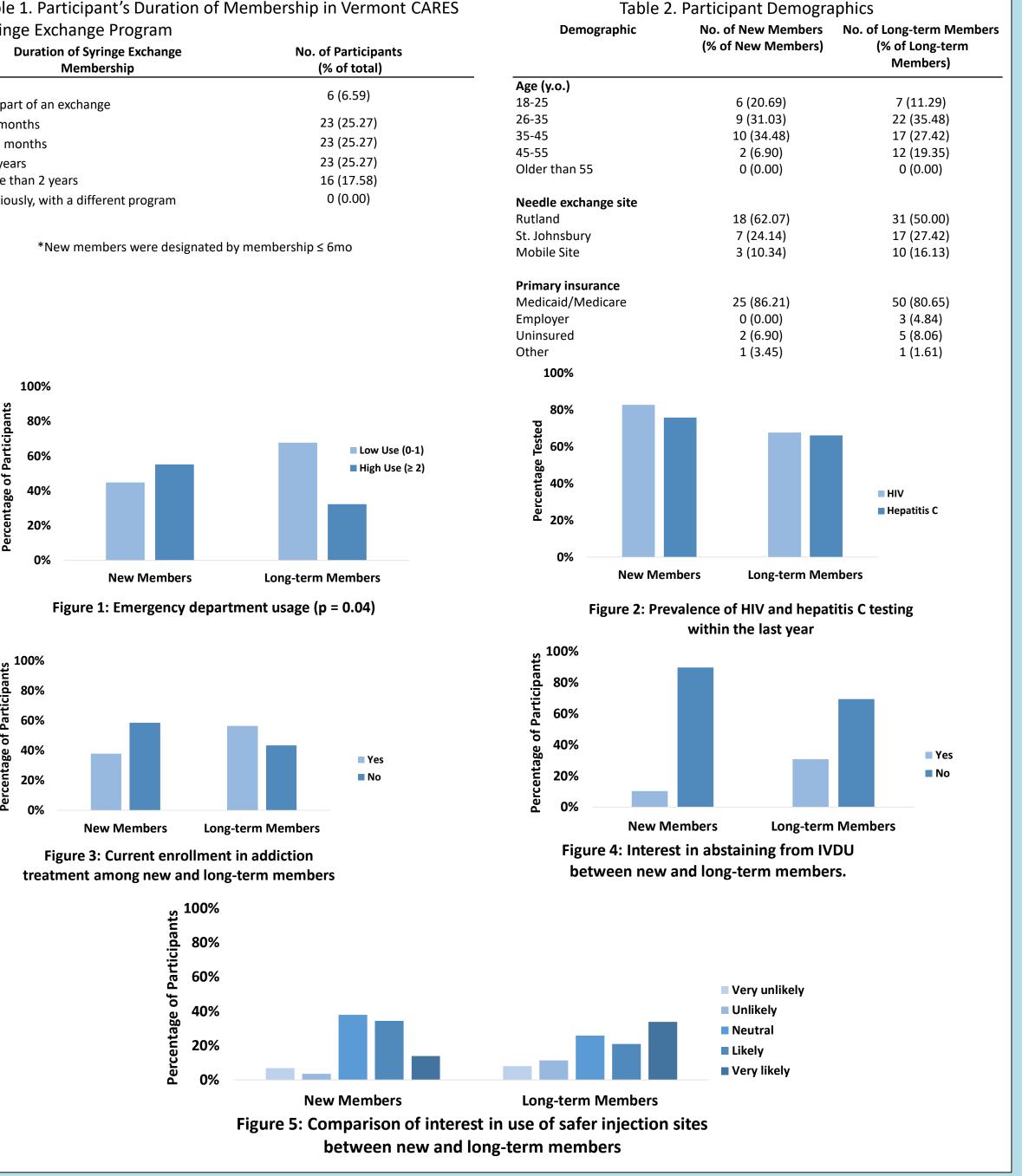
Statistical Analysis

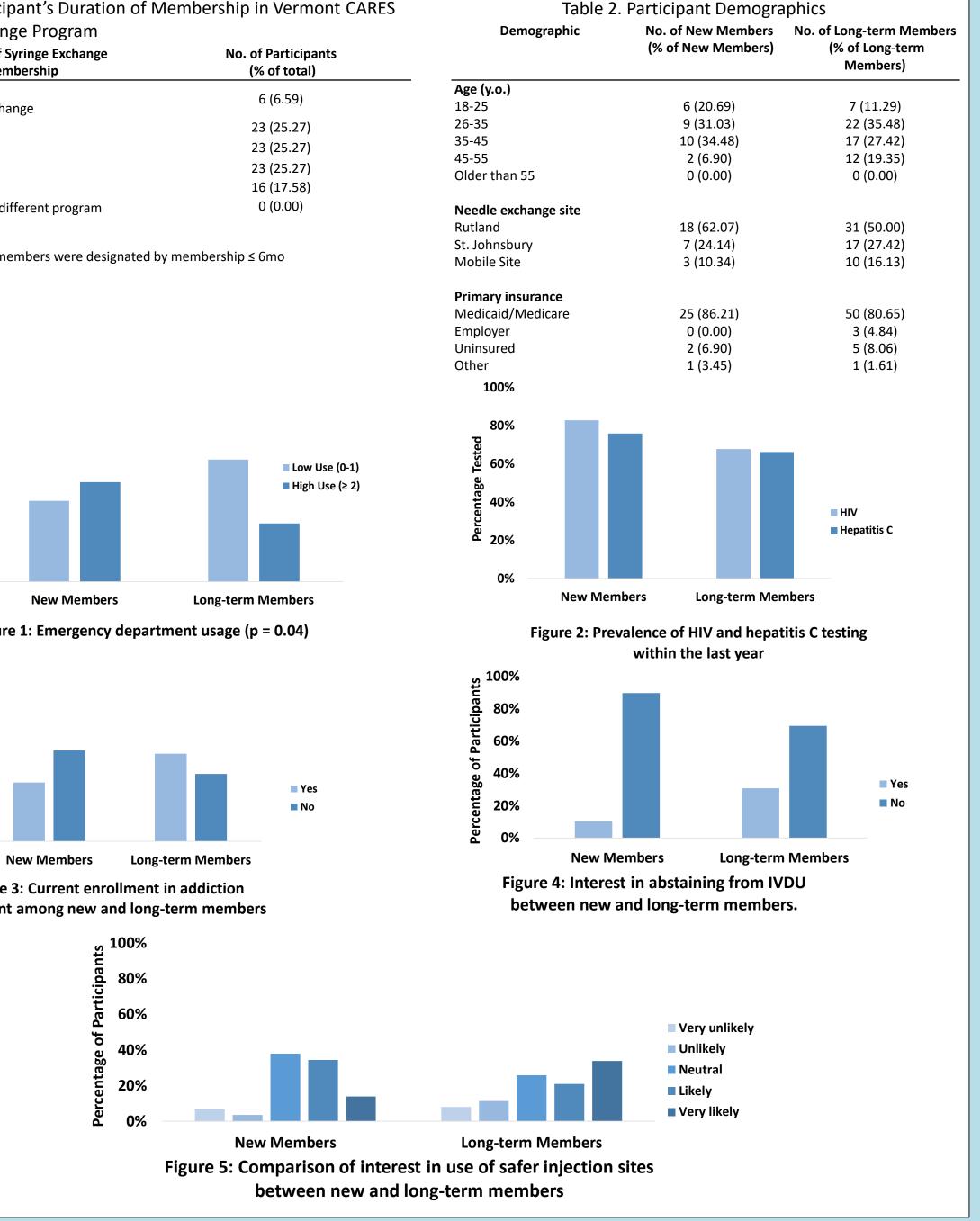
 2-Tailed Fischer's exact tests were conducted with graphpad.com statistical software

Syringe Exchange Program **Duration of Syringe Exchange**

Not part of an exchange 0-6 months 6-12 months 1-2 years More than 2 years Previously, with a different program







Results

- included lack of insurance and fear of judgement.
- care services.
- encourages safe injection practices.
- syringe exchange programs.
- awareness of their disease status.

Limitations

- Study composed of a small sample size (n=91) from three polling sites.
- Not all respondents completed surveys in their entirety.

- Participants expressed interest in safe syringe injection clinics. supplies.
 - including infection and overdose.
- barriers stated above.
- new locations and additional funding sources should be considered.

- HIV/AIDS among injecting drug users. Geneva: World Health Organization
- participation in Seattle drug injectors. J Subst Abuse Treat, 19(3), 247-252.
- http://www.whitehouse.gov/sites/default/files/docs/state_profile_-_vermont.pdf
- 4. Vermont Drug-Related Fatalities 2010-2015. (2016) Retrieved September 4, 2016, from http://healthvermont.gov/research/documents/databrief_drug_related_fatalities.pdf

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Conclusions

Long-term members compared to new members tended to have a primary care provider. Most commonly cited reasons for not having a primary care provider

Long-term members were significantly less likely (p=0.04) to use costly ED/urgent

 Long-term members are less likely to reuse their own needle or one used by another person, suggesting the distribution of clean syringes at VT CARES

Long-term members compared to new members are more likely to be in addiction treatment and reported a greater desire to abstain from drug use. This finding reflects the potential for positive personal change with sustained contact with

 New members are more likely to obtain hepatitis C/HIV testing in the past year. Decreased testing among long-term members may reflect prior knowledge or

Future Directions

• A staffed, controlled environment for IVDUs to safely inject with sterile

• Such clinics would lead to decreased rates of adverse health outcomes

• The majority of respondents indicated interest in primary care services through VT CARES if they were offered. This would allow access for those affected by the

• As demonstrated by the efficacy of the syringe exchange programs, expansion to

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Hagan, H., McGough, J. P., Thiede, H., Hopkins, S., Duchin, J., & Alexander, E. R. (2000). Reduced injection frequency and increased entry and retention in drug treatment associated with needle-exchange

3. Data Brief: Vermont Drug Control Update- The White House. Retrieved September 4, 2016, from