

ISSUES IN MEDICAL LAW AND ETHICS

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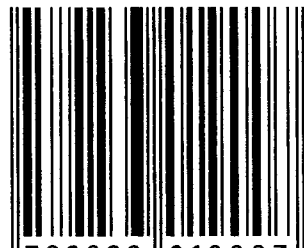
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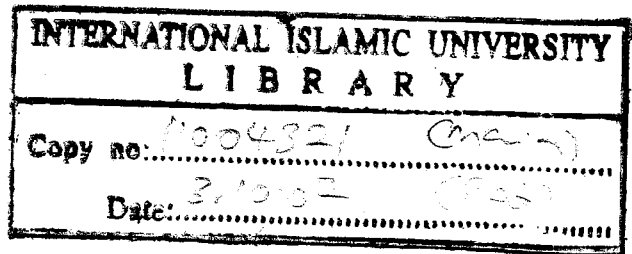
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**SECTION 5 : MEDICAL RESEARCH : ALTERNATIVE METHOD
OF TREATMENT**

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for Reducing the Incidence of HIV transmission in
Malaysia: A Comparative Paradigm
Norhashimah Mohamad Yasin

METHADONE TREATMENT AS A HARM REDUCTION METHOD FOR REDUCING THE INCIDENCE OF HIV TRANSMISSION IN MALAYSIA: A COMPARATIVE PARADIGM

Norhashimah Mohd. Yasin

Introduction

Globally, there are currently 42 Million people infected with HIV. So far, since the discovery of the AIDS (Acquired Immuno-Deficiency Syndrome) virus in the early 1980s, another 12 Million have died of AIDS. In Malaysia, there are 51,000 people who currently have HIV, and a further 5,400 have died since 1986. The majority of these people are Malay-Muslims. About 76% of people with HIV in Malaysia are 'Intravenous Drug Users' (IDUs) who have contracted the virus from contaminated needles and syringes.¹ In Malaysia, the main drug that is injected is Heroin, although a significant minority inject Morphine. Both Heroin and Morphine belong to a class of drugs known as Opiates as they are derived from the drug Opium. Opiate substitution involves prescribing a synthetic opiate for the drug user to take instead of Heroin or Morphine.²

This article will discuss one method of 'Harm Reduction' designed to reduce the incidence of HIV (Human Immuno-deficiency Virus) transmission among drug users who use hypodermic needles. The general term for the method in question is 'opiate substitution.' As the most widely used substitute opiate is Methadone,³ this article will concentrate on the legal position regarding 'methadone treatment' in Malaysia.⁴ The rationale behind the concept of 'harm reduction,' vis-a-vis IDUs and HIV is demonstrated by the following model:⁵

- a. - 'Cleaning shared injecting equipment.'⁶
- b. - 'Stopping the sharing of injection equipment.'
- c. - 'Reducing the frequency of injection.'
- d. - 'Stopping injecting drug use.'
- e. - 'Reducing the frequency of non-injecting drug use.'
- f. - 'Stopping non-injecting drug use.'

The idea is that a drug user will move in stages from the above action (a) to action (f). As it is thought to be almost impossible for someone carrying out