

Researchers say supervised injection sites needed in London

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There is a need for supervised injection sites, and research has shown that to be the case in some of Canada's largest cities, including Vancouver, Toronto and Montreal.

But there is also a need in London, according to a recent study that took a close look at injection drug use in the city.

"For the past few years, there have been a number of indications that London does have a disproportionate burden of injection drug use and related harms," said Ayden Scheim, a PhD candidate in Epidemiology and Biostatistics at Western.

Scheim, whose research examines the social epidemiology of HIV and substance use, partnered with Thomas Kerr, co-director of the Addiction and Urban Health Research Initiative at the British Columbia Centre for Excellence in HIV/AIDS, in a multi-site study to assess the need and support for [supervised injection facilities](#). Scheim was the principal investigator in London and recently co-authored a paper for the Ontario Integrated Supervised Injection Services Feasibility Study showing there is an urgent need for such services in the Forest City.

"A few years ago, from another study (in London), hospital-related visits due to opioid use were 1.5 times the provincial average. Our local needle exchange estimates they have 6,000 clients. Per capita, that becomes almost two per cent of the adult population of London. There's lots of indications that London has a high level of injection drug use," Scheim

said.

His study, which surveyed roughly 200 individuals who inject drugs, "found an unfortunately high level of drug-related harm" in the city, he noted. Three out of four [people](#) reported injecting in public places in the past six months. One in five reported sharing equipment. One in four reported a history of overdose; many among them indicated they were alone at the time.

"Yet, when we asked people would they be willing to use a supervised injection service if one was available, 86 per cent of people said they would be willing," Scheim said.

"And there is a large body of evidence that suggests supervised injection sites are associated with reduced risk of needle sharing, disease transmission, public injecting and reduced overdose risk."

Most of the concerns that arise when discussing supervised injection sites come out of misconceptions, Scheim explained. At its very core, a supervised injection facility provides clean equipment and a sterile environment to inject pre-obtained drugs under medically-trained supervision. In the case of an overdose, medical staff can intervene.

"For a community member who is concerned about public injecting and disposal of used syringes, that's already a win. But it goes much further than that," he stressed.

"Support for addiction works best when it's provided as part of a continuum of care. The people who use this service are people who are quite disengaged from the health-care system, who are not simply going to show up for treatment unless we provide them with a low-barrier first step. We have to give people an entry point into the system that meets them where they're at."

There is a lot of evidence to support the effectiveness of Vancouver's InSite, Canada's first supervised injection facility, he added. The services it provides have been extensively evaluated and studies show individuals who pass through its doors are more likely to access addiction treatment, and subsequently, not come back.

This is an effective starting point for a conversation surrounding addiction treatment, added Nursing professor Abe Oudshoorn, whose work with London's homeless population has seen him interact with many who experience addiction in the city.

"We know that dealing with addiction is complex and you really need to meet people where they're at. We know with addiction, people aren't just going to get clean today. It's a journey," he said.

"First, you need people to live, to survive long enough to move down the pathway of recovery. Secondly, when you can actually honestly address their substance use, and accept and admit they are using, and offer them help and safety around that use, then they're far more likely to engage in conversations about their use and talk about recovery. Really, if people have a vision of London being drug-free, this is a sensible way to move to a drug-free community. This does actually meet people and support them where they are."

Supervised injection facilities have an economic benefit, as well, Oudshoorn added. As a nurse working with [injection drug](#) users, he saw high rates of communicable diseases, particularly Hepatitis C, which is more prevalent in this region. Treating individuals who contract Hepatitis C is a lengthy, expensive process and costs tens of thousands dollars to complete.

"The more immediate health issues – we saw all kinds of abscesses, infections, and lots of pain associated with those infections. We saw

amputations subsequent to infections, which obviously has a lifelong negative impact on folks. Admissions to hospital for antibiotic treatments. Folks who would otherwise not need to be in the hospital ending up in hospital beds. There's a cost associated with all that. There is a huge downstream cost of not providing this (supervised injection) service," Oudshoorn said.

"The important thing to remember is this actually leads to better health and higher rates of people engaging in treatment, and decreases negative effects of substance abuse. Putting this into communities is actually an effective model to improve those communities."

More than a dozen community stakeholders surveyed agreed there is a need for a supervised injection facility in London. The results of the study, which found the need for such services is highest downtown and in London's Old East neighbourhood, will be presented to the Board of Health this week, Scheim added.

"As a research team, it's now our turn to step back. We provided information that is important to the community and it's up to municipal leaders to pick up that information and take the next steps," he said.

"We're talking about a service that's new to London, but it's not a service that's new to the world. There are more than 90 around the world. Although in Canada we only have services in Vancouver, three will be opening in Montreal, and three in Toronto in the coming months. This is not an unstudied intervention."

A recent paper, co-authored by Western PhD student Ayden Scheim, indicates there is an urgent need for supervised injection sites in London. You can read the study on the Ontario HIV Treatment Network website, ohtn.on.ca.

Provided by University of Western Ontario

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