

Safe space for illegal drug consumption in Baltimore would save \$6 million a year

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A new cost-benefit analysis conducted by the Johns Hopkins Bloomberg School of Public Health and others suggests that \$6 million in costs related to the opioid epidemic could be saved each year if a single "safe consumption" space for illicit drug users were opened in Baltimore.

It would also reduce [overdose deaths](#), HIV and hepatitis C infections, overdose-related ambulance calls and hospitalizations - and bring scores of people into treatment, they found.

Carefully monitored "safe [consumption](#)" spaces, which are not legal in the United States but have been used in dozens of cities around the world, provide a clean indoor environment in which people can use their own drugs with medical personnel on hand to reverse overdoses should they occur. These facilities serve as access points to substance use disorder treatment and other vital social services for [drug users](#), such as medical care and housing.

The authors of the study, published this month in the *Harm Reduction Journal*, say that the findings add economic evidence to the body of research that already links such spaces to a reduction in fatal drug overdoses and an increase in people seeking treatment. "Safe consumption" spaces are especially critical right now: Last year, the United States hit a record for the number of people who have died from drug overdose, and fentanyl, a more dangerous and powerful drug than heroin, is increasingly being added to heroin in places like Baltimore.

"No one has ever died from an overdose in a safe consumption space," says the study's senior author, Susan G. Sherman, PhD, MPH, a professor in the Department of Health, Behavior and Society at the Bloomberg School. "Thousands of lives have been saved. There are lots of doors people can walk through when they are addicted to drugs. We want them to walk through a door that may eventually lead to successful treatment - and keep them alive until they are ready for that."

Says Amos Irwin, MA, the study's lead author and program director at the Law Enforcement Action Partnership in Washington, D.C.: "Today, thousands of Baltimoreans are risking their lives to inject drugs instead of seeking treatment. We estimate that more than 100 new people would enter treatment every year if the city had a supervised injection facility. Bringing these people into a safe space actually helps reduce drug use, not increase it."

For their study, the researchers looked at the costs of operating a safe consumption space in Vancouver, the only one in North America. Then they estimated the impact on several health outcomes, based on Baltimore data.

They determined that running a 1,000-square-foot, 13-booth space in Baltimore for 18 hours a day would cost \$1.8 million a year. Insite, the Vancouver facility, serves about 2,100 unique individuals a month, who perform roughly 180,000 injections per year in a [space](#) the same size.

Based on research done at Insite, they estimate that a Baltimore facility would generate \$7.8 million in annual savings, preventing four HIV infections, 21 hepatitis C infections, 374 days in the hospital for skin and soft-tissue infections, six overdose deaths, 108 overdose-related ambulance calls, 78 emergency room visits and 27 overdose-related hospitalizations.

At the same time, an estimated 121 additional people would enter treatment.

"Six million dollars is a lot of money for one facility to save," Irwin says. "It is almost a third of Baltimore City's entire budget for HIV, sexually-transmitted infections and substance abuse treatment and prevention."

A bill allowing safe consumption spaces failed in the Maryland General Assembly this year. Last month, the Massachusetts Medical Society recommended opening safe consumption spaces in that state. These supervised injection facilities are a widely used [public health](#) intervention in 11 countries, mostly in Europe.

Sherman says many drug users in Baltimore are injecting on the streets or in abandoned houses, exposing them to possible violence, arrest and overdose death. Safe consumption spaces would provide clinical supervision and a clean environment, and they allow health professionals to connect drug users to critical health services. Such spaces maintain a strict prohibition on drug sharing or selling. These programs are not condoning illicit behavior, she says. They are meeting people where they are and connecting them with lifesaving resources.

The researchers did not estimate how many safe consumption spaces would be needed to service Baltimore's [drug](#) using population.

"We know what doesn't work when it comes to the so-called 'War on Drugs' in the United States because we have an opioid epidemic that is only getting worse," Sherman says. "The stakes are even higher now with so much heroin and other drugs adulterated with fentanyl. You can keep doing what you are doing or you can try something that has been proven by evidence and is considered usual care in a dozen nations."

More information: "Mitigating the heroin crisis in Baltimore, MD,

USA: a cost-benefit analysis of a hypothetical supervised injection facility" *Harm Reduction Journal*, 2017.

Provided by Johns Hopkins University Bloomberg School of Public Health

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