

HARMS ASSOCIATED WITH INJECTION OF PHARMACEUTICAL OPIOIDS IN AUSTRALIA

J Iversen¹, G Dertadian¹, L Geddes¹ And L Maher¹

¹The Kirby Institute for Infection and Immunity in Society, Faculty of Medicine, UNSW Australia, Sydney, NSW, Australia

Background: Use of opioid analgesic medicines has doubled globally over the past decade, with a concomitant increase in injection of prescription opioids (PO). This study investigates harms associated with PO injection among a large national sample of people who inject drugs.

Methods: The Australian NSP Survey (ANSPS) is an annually repeated cross-sectional survey consisting of a brief self-administered questionnaire and provision of a capillary dried blood spot for HIV and hepatitis C virus (HCV) antibody testing. Data from the 2014 ANSPS were used to determine factors associated with recent injection of PO using logistic regression.

Results: Study sample consisted of 1,488 opioid injectors. Median age was 40 years, 68% were male and 57% reported PO injection in the previous six months. Use of efficacious filters was rare (11%). Harms associated with PO injection in multivariable analysis included receptive syringe sharing (AOR=1.99, 95% Confidence Interval [CI] 1.42-2.77), receptive sharing drug preparation equipment (AOR=1.55, 95% CI 1.19-2.01) and drug overdose in the previous year (AOR=1.80, 95% CI 1.35-2.40). Residing in inner/outer regional or remote areas of Australia was an independent predictor of PO injection (AOR=4.12, 95% CI 2.98-5.70).

Conclusion: People who inject POs are at high risk of overdose, injection related injury and disease and HIV/HCV infection. Services in non-urban areas should prioritise harm reduction tailored to this group; including provision of appropriate needles/syringes and education regarding the risk of overdose. Services should also ensure that take-home naloxone and specialist pill filters are readily accessible to this sub-population.