

Keeping Up with the Evidence: Issue 5

Background

Highlights and references of recent publications related to HIV and other STBBIs, harm reduction, and other related work.

Needles and Syringes Programs

In light of recent public debates surrounding needle and syringe programs in Alberta, this month's *Keeping Up with the Evidence* is dedicated to recent publications on the topic. These articles, along with their respective bibliographies, provide a wealth of references which could be used in support of needle and syringe programs.

Impact of needle and syringe programs on HCV transmission, with and without opioid substitution therapy. (Platt et al., 2018)

Summary: The paper relates the results of a meta-analysis of existing literature regarding the documented effectiveness of needle and syringe programs in reducing infection rates for Hepatitis. The effectiveness of such programs has been better documented for HIV. The analysis compares the effectiveness of needle and syringe programs with and without concurrent opioid substitution therapy. The analysis finds that opioid substitution therapy is most effective at reducing risks of new HCV infections and is highly strengthened by needle and syringe programs. There is also evidence suggesting that needle and syringe programs alone are more effective when they have a high coverage. However, the authors point to the need for further research in this regard.

Implications: This article provides evidence supporting the importance of needle exchange program for populations at risk of HIV and HCV, in conjunction with opioid substitution therapy.

Link: <https://onlinelibrary.wiley.com/doi/abs/10.1111/add.14012>

Reference: Platt, L., Minozzi, S., Reed, J., Vickerman, P., Hagan, H., French, C., . . . Hickman, M. (2018). Needle and syringe programmes and opioid substitution therapy for preventing HCV transmission among people who inject drugs: findings from a Cochrane Review and meta-analysis. *Addiction (Abingdon, England)*, 113(3), 545. doi:10.1111/add.14012

A scoping review of literature on mobile needle and syringe programs (Strike & Miskovic, 2018)

Summary: This paper presents a review of available literature specifically related to what is known about “the design, operational characteristics, services offered, client characteristics, service utilization and impact of mobile needle and syringe programs” (emphasis added). Their paper reports on findings from

43 manuscripts published between 1975 to 2017. Some of the following elements of such programs are identified as the following:

- They have been implemented across the world in high-, medium-, and low-income countries
- In addition to distributing injection-related equipment, they provide a wide range of other harm reduction, health, and social services
- They face limitations to service complement, confidentiality, and duration of interactions imposed by physical space
- They may shield program utilization from police observation
- They can adapt to changes in locations and types of drug use
- They attract people who engage in high-risk and high intensity injection behaviors
- They attract clients with diverse social characteristics and who are often not reached by other service models
- They provide referrals to varied health and addiction services
- They can offer specialized interventions onboard (e.g., primary care, HIV treatment, case management)
- They may lead to reduced injection-related risks

Implications: While not providing definitive evidence on the effectiveness of the mobile models compared to other models, this review does provide a good overview of what already exists and would support innovative or continuing initiatives. It does not provide a definite format for needles and syringes programs but would be an interesting source of information for agencies considering to develop or improve upon such a program.

Link: <https://doi.org/10.1186/s12954-018-0212-3>

Reference: Strike, C., & Miskovic, M. (2018). Scoping out the literature on mobile needle and syringe programs—review of service delivery and client characteristics, operation, utilization, referrals, and impact. *Harm Reduction Journal*, 15(1), 6. doi:10.1186/s12954-018-0212-3

Needle and syringe programs and the police (Strike & Watson, 2018)

Summary: This article, also co-written by Carol Strike, compares over time the quality of the relationship between the police and needle and syringe programs in Ontario. The study finds that this relationship did not deteriorate during a time where the federal political climate was not offering strong support to needle and syringe programs (during the recent Conservative governments).

Implications: This article points to the importance of developing local relationships with law enforcement agencies and that such relationships can be sustained even in an otherwise unsupportive political climate.

Link: <http://journals.sagepub.com/doi/abs/10.1177/1524839918778554>



Reference: Strike, C., & Watson, T. M. (2018). Relationships, Training, and Formal Agreements Between Needle and Syringe Programs and Police. *Health Promotion Practice, 0*(0), 1524839918778554. doi:10.1177/1524839918778554

Pharmacists' role in needle exchange programs. A U.S. perspective(Goodin, Fallin-Bennett, Green, & Freeman, 2018)

Summary: This article presents the findings of a study done in the state of Kentucky, enquiring into the acceptability of potential impact of pharmacists' participation in needle exchange programs. Key findings are that pharmacists were more willing to distribute needles than to collect them, suggesting that pharmacists could use further training and/or education in the area. The study also reports on pilot projects which indicated that needle exchange programs implemented in pharmacies reached a different public than other models such as mobile needle programs.

Implications: Although this paper relates on studies conducted in the U.S., some of the findings remain relevant and can be supporting evidence in communicating with pharmacists about their potential roles in harm reduction efforts. Specifically, it supports the idea that pharmacies could reach a different demographic than those of the harm reduction agencies. It does also point to the fact the pharmacists may sometime need further education in harm reduction to be comfortable with the collection and disposal of needles.

Link: <https://doi.org/10.1186/s12954-018-0211-4>

Reference: Goodin, A., Fallin-Bennett, A., Green, T., & Freeman, P. R. (2018). Pharmacists' role in harm reduction: a survey assessment of Kentucky community pharmacists' willingness to participate in syringe/needle exchange. *Harm Reduction Journal, 15*(1), 4. doi:10.1186/s12954-018-0211-4