



TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health

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HARM REDUCTION STRATEGIES

Recommendation

It is recommended that Report No. 092-13 re Harm Reduction Strategies be received for information.

Key Points

- Harm reduction is a range of strategies to reduce the risk of harm from drug use and other risky behaviours.
- The Health Unit partners with the Regional HIV / AIDS Connection (RHAC) to offer needle and syringe exchange in London. Other health care providers offer medically-assisted treatment with methadone or Suboxone. Harm reduction strategies such as opioid overdose prevention programs and supervised injection facilities are not available in Middlesex-London.

What is Harm Reduction?

Harm reduction is a range of strategies focused on reducing the harmful consequences associated with drug use and other risky behaviours (e.g. tobacco use, alcohol use, sexual practices etc). In relation to drug use, harm reduction recognizes that abstaining from drugs may not be realistic or even desirable for everyone and strives to keep people as healthy and safe as possible until such time as they are ready to consider stopping their drug use. Under the Ontario Public Health Standards, *“the board of health shall ensure access to a variety of harm reduction program delivery models which shall include the provision of sterile needles and syringes and may include other evidence-informed harm reduction strategies in response to local surveillance”*.

Medical harms associated with use of drugs include blood-borne infections such as hepatitis B and C and human immunodeficiency virus (HIV); overdoses; infections of the skin, bloodstream and heart (endocarditis); vein problems; increased risk of sexually transmitted infections; and mental health problems. The harms of drug use are borne inequitably by the most marginalized groups in society including those impacted by poverty, homelessness, past trauma, and mental health disorders.

Harm Reduction Strategies Related to Drug Use

Along with education, counselling and support services, harm reduction strategies related to drug use include needle and syringe exchange programs, medically-assisted treatment with methadone or Suboxone, opioid overdose prevention programs, and supervised injection facilities.

Needle and syringe exchange programs: These programs facilitate use of a sterile needle and syringe and other equipment for each injection in order to reduce the risk of acquiring HIV and hepatitis B and C. Equipment provided at the needle exchange is outline in [Appendix A](#). These programs also provide client-centered counselling, skill-building, and referral to addictions treatment and other health and social services.

In London, the Counterpoint Needle and Syringe Exchange Program is operated by RHAC and funded by the Health Unit. Exchanges occur at the main RHAC office at #30 – 186 King Street, London, at the Sexual

Health Clinic at the Health Unit, and at My Sisters' Place. A mobile outreach worker provides exchanges in the community via a van. No services are currently available in Middlesex County. Along with distributing injection drug and safer sex materials, the Counterpoint program also collects used needles and syringes and other drug-related equipment for appropriate disposal. Health Unit funding for the Counterpoint program consists of \$234,991 provided 100% by the province and \$65,009 in cost-shared funding for a total of \$300,000. The contract for RHAC is currently being renewed and will be presented to the Board of Health at an upcoming meeting along with the budget for the program. Additional information about the Counterpoint program and RHAC can be found in [Appendix A](#) and on the [RHAC web site](#).

Medically-assisted treatment with methadone or Suboxone: Methadone and Suboxone are physician-prescribed long-acting opioids that act as a substitute for other opioid drugs. They are taken daily either orally (methadone) or under the tongue (Suboxone) and work by alleviating symptoms of opioid withdrawal as well as curbing cravings. Information on opioid dependence and methadone treatment was provided to the Board of Health in May 2012 (See [Report No. 076-12](#)). Methadone can be prescribed only by physicians who have obtained a special exemption under the Federal Controlled Drug and Substance Act (CDSA). Suboxone is a newer drug that is similar to methadone. Unlike methadone, physicians prescribing Suboxone do not require CDSA exemption. Some methadone clinics also prescribe Suboxone.

Opioid Overdose Prevention Programs: Overdose of opioids can suppress a person's breathing which can be fatal. Some needle exchange programs offer Opioid Overdose Prevention Programs. These programs educate clients and possibly also their family and friends to recognize and respond to opioid overdoses. Some programs also provide clients with training and take-home doses of a drug called naloxone which can be injected to rapidly reverse the effects of the opioid drug which is causing the overdose. Additional information on Opioid Overdose Prevention Programs can be found on the [Ontario Harm Reduction Distribution Program's web site](#). This program is not available at this time in Middlesex-London.

Supervised injection sites: Insite, the only supervised injection site in Canada, operates out of the Downtown East Side in Vancouver. It is a safe, health-focused place where people inject drugs and connect to health care and social services. It has been proven to decrease drug related overdoses, reduce public injecting, lower levels of HIV risk behaviours and increase uptake of addiction treatment among the facility's clients. Additional information on [Insite can be found on its web site](#).

The federal government is proposing legislation to govern the establishment of additional supervised injection sites. The proposed legislation is felt by many to create unnecessary obstacles. Currently, Toronto and Ottawa are considering opening supervised injection sites.

Next Steps

The Health Unit is currently analyzing results of a study conducted in London in 2012 to understand the injecting drug practices, and hepatitis C and HIV infection rates among local injection drugs user. This report will be presented at a future Board of Health meeting. In collaboration with community partners, further steps are being undertaken to understand the health risks of injection drug use as well as possible strategies that may mitigate the risk of drug use in Middlesex-London.

This report was prepared by Dr. Bryna Warshawsky, Associate Medical Officer of Health; Ms. Rhonda Brittan, Social Determinants of Health Public Health Nurse in the Oral Health, Communicable Disease and Sexual Health Service; Mr. Brian Lester, Executive Director of the Regional HIV/AIDS Connection.

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This report addresses the following requirement(s) of the Ontario Public Health Standards: Sexual Health, Sexually Transmitted Infections, and Blood-borne Infections (including HIV).