

BOOK REVIEW

Bryan S. Finkle,¹ Ph.D.

Review of *Needle Sharing Among Intravenous Drug Abusers*

REFERENCE: *Needle Sharing Among Intravenous Drug Abusers*, R. J. Battjes and R. W. Pickens, Eds., National Clearing House for Alcohol and Drug Information, Rockville, MD or National Technical Information Service, U.S. Department of Commerce, Springfield, VA, 1989, \$6.50.

There is much that is right and pertinent about this volume, which is the eightieth in the National Institute on Drug Abuse (NIDA) Research monograph series, but the title is misleading. The real story presented here is about how to prevent the spread of Human Immunodeficiency Virus (HIV) infection, Acquired Immunodeficiency Syndrome (AIDS). The title should be "The Relationship Between HIV Infection (AIDS) and Needle Sharing Practices Among Intravenous Drug Abusers." This book is based upon papers and discussion from a technical review which took place in May 1987, sponsored by the Division of Clinical Research, NIDA, but it was not printed until a year later and became available in early 1989.

In February 1989, *Science* magazine published a notice that an expert panel of the National Research Council had called for a broad array of programs to focus on the social behaviors that spread the disease, a 589-page report outlining initiatives to monitor better the spread of HIV. The panel endorsed wider use of needle-exchange and needle-sterilization programs and increased availability of drug treatment programs. Clearly, NIDA beat the crowd in recognizing the importance of this subject, but it will be almost two years later when the monograph is read and digested. The subject is complex and controversial because it involves moral attitudes about provision of equipment to inject drugs of abuse and has intrinsic legal difficulties because in many states the purchase and supply of hypodermic syringes and needles is illegal. Obviously, there have been no scientific field studies to test the effectiveness of the strategy, whether it does good or harm, and therefore, the experience and even anecdotal reports of those already involved in this work are valuable in making any assessment. This is exactly what this monograph endeavors to do.

One in four persons with AIDS in the United States has used an illicit drug intravenously, and therefore, checking the spread of HIV infection in this high risk group is an urgent task confronting public health officials. How can the risks from sharing injection equipment so commonplace among intravenous drug users be reduced? How can they

¹Center for Human Toxicology, University of Utah, 417 Wakara Way, Rm. 290, Salt Lake City, UT 84108.

be made aware of the danger and then be motivated to change long-established behaviors? To review these questions, NIDA convened more than 40 experts for a 2-day meeting. They came from various parts of the United States, England, The Netherlands, and Italy and from governments, universities, treatment facilities, and professional associations. Their collective experience, thoughts, and opinions cover 183 pages of papers in 15 chapters. The authors are mostly sociologists, psychologists specializing in drug abuse treatment, and physicians with responsibilities for treatment and prevention programs. Their opinions on the question at hand are not terribly different qualitatively, it is more a question of magnitude and what can be done beyond "getting the message out." There are excellent short chapters which present overviews of intravenous (IV) drug abuse and HIV infection amongst IV drug abusers.

A final chapter is titled "Future Directions," and, Informative though all of this is, its principal value is to air the subject without concluding a set of objectives and recommendations which are achievable and could be evaluated in the future. There is no real agreement even among these professionals about the merits or social rightness of needle-exchange programs.

The book as a whole does not present much in the way of new research, but it does provide a real survey of existing knowledge and each paper is adequately referenced from the appropriate scientific and clinical literature. The overall viewpoint is certainly balanced in that all of the authors agree on the problem and spreading information to the IV drug abusers rather than the infection is clearly their strategy, but how to implement this and which practical program, such as needle exchange, is likely to be effective is not all that obvious. In fact, they can only promise that things will get worse before they get better and that, in the long run, education and appealing to self preservation is the only answer.

This book may not be an essential text or reference for practicing forensic scientists, but it is certainly a sobering read. Between mid-June 1981 and 1987, 35 219 AIDS cases of Kaposi's sarcoma in the United States were reported to the Center for Disease Control (CDC). About 380 new cases of AIDS are reported to the CDC each week. Of all male cases, 4600 (14%) were heterosexual men who reported using needles for self-injection of drugs not prescribed by a physician at least once before developing AIDS. Of the reported cases, 51% are blacks and 30% are Hispanics.

It is quite apparent that once HIV is introduced into a group of IV drug abusers it spreads readily between them, to their sexual partners, and to their children in utero. Rather than a distinct separation, there appears to be overlap in precisely those activities through which the virus is transmitted, namely, sexual activities and the shared use of injection equipment. This complexity and lack of definition makes targeted prevention strategies very difficult.

Given that AIDS has an incubation period that may last as long as five years or more compared to the immediacy of criminal apprehension and jail, the option to share needles and risk becoming infected with HIV is socially realistic to the abuser, even if it is medically dangerous. This typifies the dilemma posed in this book and that which confronts public policy. It is concluded that policies that push this behavior farther away from the social and medical systems which can enlist IV drug abusers in protecting themselves and keeping the epidemic under some control are not any answer.

Perhaps well-constructed interventions such as

- decriminalizing the possession of hypodermic syringes in those states where this applies,
- developing needle-exchange programs to ensure that IV drug users have greater access to sterile injection equipment, and
- providing the kind of prevention and education efforts that bring IV drug users into face-to-face contact with trained qualified counselors to monitor their activities as

a way to encourage compliance and affect referrals to other social health and drug treatment programs

are at least part of a long-term solution.

The dilemmas are well spelled out not the least of which is managing the size of the needle-exchange programs. For example, in 1987, more than a half-million needles and syringes were exchanged in the city of Amsterdam alone. And, in the end, it must be remembered that the drug abuser population is by nature undisciplined and resistant to controls, often escaping systematic and institutional help and support. It is a dire picture which these papers present; unless a massive effort to prevent the spread of AIDS among intravenous drug abusers is undertaken, rapid spread of the disease throughout this population is a certainty.

The scope of this book is narrow, but the problem addressed is enormous with far-reaching ramifications. The papers consistently stay within their terms of reference and address the clinical and field worker professionals who are in the front line of this work. For them this monograph is vital information, for the rest of us it dissects a problem in depressing detail with appalling statistics which represent human misery and a festering public health issue of major proportions. It is another insight into the world of drug abuse in which it seems that nothing is new and effective solutions are as elusive as ever.