Jefferson County Board of Health
October 12, 2016

BOARD OF HEALTH RESOLUTION

Reducing the Burden of Disease Related to Injection Drug Use

WHEREAS, Injection Drug Use (IDU) is a widespread practice in the midst of the current epidemic of opioid addiction and overdoses from injection drugs including heroin and fentanyl (1);

WHEREAS, there is evidence that IDU is a major cause of the spread of Hepatitis C in Jefferson County and other parts of Alabama (2);

WHEREAS, IDU can spread HIV infection and Hepatitis B, and can potentially lead to a major outbreak of either of these infections (3)(4);

WHEREAS, Syringe Service Programs (SSPs), which have also been referred to as syringe exchange programs (SEPs), needle exchange programs (NEPs) and needle-syringe programs (NSPs), are community-based programs that provide access to sterile needles and syringes free of cost and facilitate safe disposal of used needles and syringes (5);

WHEREAS, abundant scientific studies have demonstrated that Syringe Service Programs are effective in reducing the risk of spread of viral hepatitis, HIV and other blood borne infections (6)(7)(8);

WHEREAS, HIV disease and viral hepatitis and other infections related to IDU are very expensive to treat, and prevention efforts, including Syringe Service Programs, can result in tremendous cost savings (9)(10);

WHEREAS, a preponderance of evidence shows either no change or decreased drug use among SSP participants, and individuals in SSPs have an increased likelihood of entering substance abuse treatment programs (11)(12)(13)(14);

WHEREAS, Syringe Service Programs provide an opportunity to encourage people who inject drugs to enter substance abuse treatment (14)(15)(16);

WHEREAS, Syringe Service Programs provide an opportunity to screen and treat people who inject drugs for communicable diseases such as HIV, hepatitis B and C, tuberculosis, and sexually transmitted infections (STIs); to offer education about or referral to other risk reduction services such as access to naloxone for treatment of overdose; and to engage them in primary and preventive care (9)(17);

WHEREAS, SSPs can reduce the number of contaminated needles on streets, on playgrounds and in trash receptacles, thereby protecting children, sanitation workers and others from needle sticks (18)(19);

WHEREAS, Law enforcement personnel are at increased risk of experiencing needle sticks in the course of their work (20);
WHEREAS, Law Enforcement Assisted Diversion (LEAD) programs allow law enforcement personnel to offer persons in possession of IDU needles entry to a syringe exchange program as an alternative to arrest and prosecution if they voluntarily divulge their possession of needles. LEAD programs can encourage people who inject drugs to get into SSPs, other associated public health services and addiction treatment, while protecting law enforcement personnel from inadvertent needle sticks and saving the criminal justice system money (21)(22)(23);

WHEREAS, numerous professional and policy organizations have endorsed SSPs as effective public health practice, including the Centers for Disease Control and Prevention, the American Public Health Association (24), the American Medical Association (25), the National Association of County and City Health Officials (26), the Surgeon General of the United States (27), the National Institutes of Health (28)(29), the American Society of Addiction Medicine (30), the Foundation for AIDS Research (31) and the American Bar Association (32);

WHEREAS, the drug paraphernalia law in the State of Alabama Code does not allow for the legal operation of SSPs (33);

BE IT RESOLVED that Jefferson County Board of Health endorses:

1) Amendment of the Alabama drug paraphernalia law by the State Legislature to allow the establishment of Syringe Service Programs (SSPs).

2) Allowance for the establishment of SSPs in counties where the spread of blood borne disease from infection drug use is a public health concern, as determined by the Alabama Department of Public Health and authorized by the State Health Officer.

3) Requirements that SSPs assist program participants in obtaining substance abuse treatment services.

4) Requirements that SSPs provide or refer clients to screening for HIV, viral hepatitis, and sexually transmitted infections.

5) Requirements that SSPs regularly report activities and outcomes to the Alabama Department of Public Health to ensure that they are fulfilling their public health purpose.

6) Law Enforcement Assisted Diversion to SSPs.

Max Michael, III, M.D., Chair
Jefferson County Board of Health
References:


2) James Galbraith, MD, Associate Professor, University of Alabama at Birmingham Department of Emergency Medicine, Presentation to the Jefferson County (AL) Board of Health at its September 14, 2016 meeting: “Hepatitis C Virus Infection in Central Alabama.” Meeting minutes available from the Jefferson County Department of Health, Birmingham, AL.


15) GENERAL ASSEMBLY OF NORTH CAROLINA, SESSION 2015. SESSION LAW 2016-88; HOUSE BILL 972. “SECTION 4. Article 5C of Chapter 90 of the General Statutes is amended by adding a new section to read Section 90-113.27. Needle and hypodermic syringe exchange programs authorized; limited immunity.”

16) FLORIDA LEGISLATURE, SB242, 2016 SESSION. An act relating to an infectious disease elimination pilot program; creating the “Miami-Dade Infectious 3 Disease Elimination Act (IDEA)”; amending s. 381.0038, 4 F.S.; authorizing the University of Miami and its affiliates to establish a sterile needle and syringe exchange pilot program in Miami-Dade County.


23) NC Harm Reduction Coalition (NCHRC). "NCHRC is a strong advocate for getting Law Enforcement Assisted Diversion (LEAD) programs in North Carolina and the American South." Available at


29) Anthony Fauci, M.D., Director, National Institute of Allergy and Infectious Diseases, National Institutes of Health. Testimony before the U.S. House of Representatives Committee on Oversight and Reform, September 16, 2008.


33) Alabama Code - Section 13A-12-260: DRUG PARAPHERNALIA; USE OR POSSESSION; DELIVERY OR SALE; FORFEITURE.