



**Policy Statement on the
Evaluation of Safe Consumption Sites in the U.S. to Reduce Overdose Deaths and Prevent the
Spread of Infections as Part of a Comprehensive Response to the Opioid Epidemic**

Approved by the HIVMA Board of Directors on 3/2/17

Approved by the IDSA Board of Directors on 3/3/17

Position:

The Infectious Diseases Society of America and the HIV Medicine Association strongly support a public health approach to addressing the opioid epidemic to reduce the spread of infections and to engage individuals who inject drugs in substance use treatment and other healthcare services. The public health principle of harm reduction that seeks to reduce negative outcomes from unsafe behaviors is particularly important to reducing transmission of communicable diseases, such as HIV and hepatitis C. Safe consumption sites provide a supervised and hygienic venue with access to sterile syringes and clean equipment for individuals who inject drugs. In addition, many provide access to overdose prevention and treatment, health and disease prevention education and linkage to treatment for substance use disorder and other healthcare services. These programs have proven to be effective public health interventions in Europe where they have been employed for nearly three decades and more recently in Canada.

In light of the scope and urgency of the opioid epidemic, it is important to evaluate interventions that have proven effective outside of the United States to assess their utility in reducing the harms from injection drug use for Americans. As part of a comprehensive response to the opioid epidemic, HIVMA and IDSA support demonstration projects and further research to evaluate the effectiveness of safe consumption sites at reducing overdose deaths and transmission of HIV, hepatitis C and other infections nationally or at the discretion of local jurisdictions without legal consequences. *Also see [Policy Statement on Syringe Access and Paraphernalia Laws](#).*

Rationale:

- The opioid epidemic is a national public health crisis. Deaths due to drug overdoses have increased dramatically in the US. From 2000 to 2015, more than half a million people died from drug overdoses in the US and an estimated 91 Americans die from an opioid overdose every day.ⁱ
- An HIV and hepatitis C outbreak in a small town in rural Indiana was an alarming wake up call to public health officials on how quickly an HIV outbreak can occur among injection drug users. In 2015, in Scott County, Indiana, 188 individuals were diagnosed with HIV from January 2015 to February 2016 in a county that previously reported less than one diagnosis per year.¹ A majority of the cases were linked to syringe sharing among injection drug users and more than 90% were co-infected with hepatitis C.ⁱⁱ

¹As of March 2017, 210 new HIV diagnoses have been reported.

- In 2016, the Centers for Disease Control and Prevention identified 220 counties in 26 states that also are vulnerable to HIV and HCV outbreaks among persons who inject drugs.ⁱⁱⁱ
- An analysis of published studies from Europe and Canada suggests that safe consumption sites reduce overdose deaths and behaviors such as syringe sharing that cause HIV and hepatitis C transmission, with one study estimating a 69% reduction in the likelihood of syringe sharing by individuals who use safe consumption sites. In addition, the sites have helped to engage individuals who inject drugs in treatment for substance use disorder and they have not been linked to an increase in drug use or drug trafficking.^{iv}

ⁱ Centers for Disease Control and Prevention. Opioid Overdose. Understanding the Epidemic. Online at: <https://www.cdc.gov/drugoverdose/epidemic/index.html>. Accessed 2/23/17.

ⁱⁱ CROI 2017. *The Evolving Epidemiology of HIV Infection in Persons Who Inject Drugs: Indiana 2015*. John Brooks.

ⁱⁱⁱ Van Handel, MM, et al. County-level Vulnerability Assessment for Rapid Dissemination of HIV or HCV Infections among Persons who Inject Drugs, United States. *J Acquir Immune Defic Syndr*. 2016 Nov 1;73(3):323-331.

^{iv} Potier, C, et al. Supervised injection services: What has been demonstrated? A systematic literature review. *Drug and Alcohol Dependence*. Oct 2014.