



## **North Carolina Harm Reduction Coalition**

Post Office Box 13761, Durham, NC, 27709

Phone (336) 543-8050

<http://www.nchrc.net>

### **Resolution in Support of Legalizing Syringe Exchange Programs in North Carolina**

**WHEREAS**, North Carolina experienced a 565% increase in heroin deaths from 2010 to 2014<sup>i</sup>; and,

**WHEREAS**, the increase in heroin use has been accompanied by a 187% increase in acute hepatitis C (HCV) cases in North Carolina from 2010 to 2014<sup>ii</sup>; and,

**WHEREAS**, according to the Centers for Disease Control, Viral Hepatitis Surveillance Report End-of-Year 2014 report, in 2014 North Carolina's acute HCV rate exceeded that of the US and injection drug use was by far the greatest risk factor for HCV acquisition<sup>iii</sup>; and,

**WHEREAS**, the lifetime cost of treating an HIV-positive person is estimated to be between \$385,200 and \$618,900<sup>iv</sup>, while hepatitis C costs \$100,000-\$500,000 to treat<sup>v</sup>; and,

**WHEREAS**, drug therapy costs for HCV and HIV/AIDS represent the top two specialty drug classes by per member per year spent in 2014 for North Carolina Medicaid, which spent \$8,068,113 on HCV medications in 2013 and \$50,840,276 on HCV medications in 2014, an increase of 530%<sup>vi</sup>; and,

**WHEREAS**, syringe exchange programs provide sterile syringes and other injection equipment, overdose prevention education and referrals to drug treatment and social services to people who inject drugs in exchange for used syringes; and,

**WHEREAS**, syringe exchange programs are proven to lower HIV transmission among injection drug users by up to 80%<sup>vii</sup> and HCV transmission among injection drug users by up to 50%<sup>viii</sup>, thereby saving millions of taxpayer dollars that would have gone to treating Medicaid recipients with HIV and HCV; and,<sup>ix</sup>

**WHEREAS**, studies show that syringe exchange programs can lead to a 66% drop in needle-stick injuries to law enforcement<sup>x</sup>; and

**WHEREAS**, syringe exchange programs are proven to not increase or encourage drug use<sup>xi</sup>; and,

**WHEREAS**, syringe exchange programs lower crime by connecting community members with social services such as food, housing, addiction treatment and career development programs<sup>xii</sup>; and,



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**WHEREAS**, syringe exchange program participants are five times more likely than non-participants to enter drug treatment programs<sup>xiii</sup>.

### **NOW, THEREFORE, BE IT RESOLVED THAT**

\_\_\_\_\_ supports legalizing syringe exchange programs in North Carolina in an effort to lower the transmission of blood borne disease, protect law enforcement from needle-stick injury, support the fiscal sustainability of North Carolina Medicaid, and connect people who use inject drugs to substance use treatment and social services.

Please print/type:

Organization: \_\_\_\_\_

Staff Signer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

<sup>i</sup> NC Injury Prevention Branch

<sup>ii</sup> NC Department of Health and Human Services surveillance data

<sup>iii</sup> <http://www.cdc.gov/hepatitis/statistics/index.htm>

<sup>iv</sup> Schackman, B.R., Gebo, K.A., & Walensky, R.P. et al. (November 2006). The lifetime cost of current Human Immunodeficiency Virus care in the United States. *Medical Care*, 44(11), 990-997.

<sup>v</sup> Mizuno, Y. et al. (2006). Correlates of health care utilization among HIV-seropositive injection drug users. *AIDS Care*, 18(5):417-25.

<sup>vi</sup> NC Department of Health and Human Services surveillance data

<sup>vii</sup> Des Jarlais, D.C., Arasteh, K., & Friedman, S. R. (2011). HIV among drug users at Beth Israel Medical Center, New York City, the first 25 years. *Substance Use & Misuse*, 46(2-3), 131-139.

<sup>viii</sup> Turner, K. et al. "The impact of needle and syringe provision and opiate substitution therapy on the incidence of hepatitis C virus in injecting drug users: pooling of UK evidence," *Addiction*, E-publication ahead of print, 2011.

<sup>x</sup> Groseclose, S.L. et al., "Impact of increased legal access to needles and syringes on practices of injecting-drug users and police officers—Connecticut, 1992-1993," *Journal of Acquired Immune Deficiency Syndromes & Human Retrovirology*, vol. 10. no. 1, 1995, p. 82–89.

<sup>xi</sup> Institute of Medicine. Preventing HIV Infection Among Injecting Drug Users in High-Risk Countries. An Assessment of the Evidence. Washington, D.C.: National Academies Press; 2006.

<sup>xii</sup> Center for Innovative Public Policies. Needle Exchange Programs: Is Baltimore a Bust? Tamarac, FL: CIPP; April 2001

<sup>xiii</sup> Hagan H, McGough JP, Thiede H, Hopkins S, Duchin J, Alexander ER., "Reduced injection frequency and increased entry and retention in drug treatment associated with needle-exchange participation in Seattle drug injectors," *Journal of Substance Abuse Treatment*, vol. 19, 2000, p. 247–252.