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Policy Brief on Sterile Water Products

POLICY ISSUE

Ontario Needle Exchange Best Practice Recommendations advise the distribution of single-use 2ml sterile water ampoules to prevent the transmission of HIV and HCV and other blood borne pathogens and to prevent the acquisition of bacterial infections from the use of non-sterile water among injection drug users (IDUs). The current debate centers around the use of single-use (1.4 – 3 ml) sterile water for inhalation compared to sterile water for injection currently available only in 10ml ampoules.

RECOMMENDATION

Ontario Harm Reduction Distribution Program suggests that Needle Exchange Programs (NEPs) make individual interim policy decisions on sterile water distribution (inhalation vs. injection) based on the following considerations.

BACKGROUND

- Ontario Needle Exchange Programs: Best Practice Recommendations document was published in March 2006 offering best practice standards for Needle Exchange Programs.
- The Ontario Harm Reduction Distribution Program provides harm reduction materials, as well as knowledge and support, to Ontario's needle exchange and harm reduction programs. The OHRDP is funded by the Hepatitis C Secretariat, Ministry of Health and Long-term Care. The OHRDP is located in Kingston and is managed through the Street Health Centre, a part of Kingston Community Health Centres.
- OHRDP has researched various suppliers (e.g. Bayer, Baxter Healthcare, Astrazeneca and Draxus Pharma) in Canada and there are none distributing water for injection in ampoules less than 10ml at this time.
- OHRDP began distributing 10 ml ampoules of sterile water for injection in early summer 2006.

- OHRDP is negotiating with a Quebec based company to develop and distribute 1.4 ml ampoules of sterile water for injection – the earliest this might be available is June 2007.

CONSIDERATIONS

- Sterile water for injection is currently only available in 10ml ampoules in Canada.
- Several studies demonstrate the prevalence of transmission of blood borne pathogens through the sharing of other injection equipment (e.g. sterile water, tourniquets, cookers). (Hagan, Thiede and Des Jarlais 2005)
- A number of NEPs indicate that their clients report sharing the sterile water for injection from the 10 ml ampoules.
- Sterile water for inhalation is being distributed for the purpose of harm reduction with IDUs across North America including British Columbia, Nova Scotia, Quebec, Saskatchewan, Alberta, and throughout the United States (as distributed by, for example, Safety Works out of New York).
- Sterile water for inhalation may indicate “not for injection” on the packaging.
- A survey / literature review out of British Columbia found no known evidence of harm through the use of sterile water for inhalation and the province has been distributing this product for three years. (National Survey of Sterile Water Use)
- Sterile water for inhalation is approximately 15% the cost of 10 ml ampoules of sterile water for injection (\$0.14 compared to \$0.95 per ampoule).
- OHRDP continues to attempt to access, for distribution to NEPs, sterile water for injection in single-use ampoules.

ANALYSIS

- Best Practice Recommendations indicate that while there have been no investigations of the role that ampoule size may have in sharing water, frontline workers report that clients may share 10 ml ampoules and therefore 2 ml ampoules are recommended.
- Best Practice Recommendations do not indicate that the grade of sterile water distributed must be for injection use.
- Sterile water for inhalation is being widely distributed across Canada and the United States. A telephone poll and literature review show no indication of harm to IDUs through its use. (National Survey of Sterile Water Use – OHRDP, October 2006)
- Even small amounts of blood in rinse water can be enough to infect another user with HCV.

CONCLUSION

NEPS should review the issue individually and make a decision on the grade of sterile water they choose to distribute based on the needs in their community as well as the above information. OHRDP will provide sterile water for inhalation and sterile water for injection for distribution to all NEPs.

SOURCES

1. Anonymous. Information: Fact Sheets. Drug use and HIV. California: AIDS.org 2005; Quoted from Ontario Needle Exchange Programs: Best Practice Recommendations. March 2006
2. Hagan, Holly, Hanne Thiede and Don C. Des Jarlais. HIV/hepatitis C virus co-infection in drug users: risk behavior and prevention. AIDS 2005 19 (suppl 3) S199-S207.
3. Ontario Needle Exchange Programs: Best Practice Recommendations. March 2006
4. National Survey of Sterile Water Use – October 2006. Ontario Harm Reduction Distribution Program