



American Association of Psychiatric Pharmacists (aapp.org)

Harm Reduction for People Who Use Drugs (PWUD)

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- Harm reduction is something that anyone can support. It can be as simple as discussing drug use in a less shameful way. For example, avoid using negative terms such as “opioid addict” and use neutral terms such as “person with opioid use disorder.”
- Congratulate someone when they make healthy changes in their life, even if they are small. This is more effective than only paying attention to common struggles of people who use drugs (PWUD), like relapse.
- Harm reduction care and services are becoming more common in the U.S., but there is still more work to be done to better meet the medical, social, housing, and vocational needs of PWUD.

What is harm reduction?¹

- Harm reduction is meant to reduce the negative effects of harmful drug use by providing social, health, and/or job services even if the person receiving these services continues substance use.
- By emphasizing compassion instead of shame, healthcare workers can build a more trusting relationship with people who use drugs (PWUD) to be able to provide support and assistance, even if they are not ready to engage with treatment services.
- When PWUD are able to learn about opportunities for recovery on their own terms, they are more likely to enter treatment programs and trust those who are providing help.

What are Some Examples of Harm Reduction for PWUD?^{1,2}

- Syringe Exchange Programs
- Housing First Programs
- Drug Test Strips
- Good Samaritan Laws
- Overdose Education & Naloxone Distribution (OEND)
- Medications for Opioid Use Disorder (MOUD)
- Contraception
- Immunizations
- Screening for & Treating Infectious Disease
- Pre-Exposure Prophylaxis (PrEP) & Post Exposure Prophylaxis (PEP)
- Overdose Prevention Centers (OPCs)
- Peer Support
- Safer Supply
- Storage & Disposal of Unused Drugs

How do Harm Reduction Strategies Help PWUD?

- **Syringe Exchange Programs:** turning in used syringes for new, clean ones
 - Lower the risk of diseases like HIV³, Hepatitis, skin infections, or heart infections
 - Support/Facilitate entry into recovery programs⁴
- **Housing First Programs:** offering a no-cost place to sleep, even while substance use continues
 - Associated with lower amounts of drugs used over time⁵
 - Associated with lower medical costs overall⁵
 - Improved treatment adherence and disease severity for PWUD with HIV or AIDS⁶
- **Drug Test Strips:** quickly screening drugs from the street to detect potential addition of dangerous chemicals or more potent drugs like the opioid fentanyl
 - Allow PWUD to make an informed decision to use or to not use drugs if they contain other unwanted substances^{2,7}
 - Studies show that most PWUD, especially those that have overdosed in the past, are open to the idea of using drug test strips to try to avoid subsequent overdose⁸

- **Good Samaritan Laws:** protecting bystanders caring for someone who is in an overdose crisis including protecting them from facing legal penalties
 - These laws have resulted in an increase in the number of 911 calls from people who witness drug overdoses⁹
 - Resulted in lower risk of death from drug overdose, especially with opioids like fentanyl and oxycodone⁹
 - All 50 U.S. states and Washington D.C. have Good Samaritan Laws¹⁰
- **Overdose Education & Naloxone Distribution (OEND):** emphasizes learning the signs of opioid overdose and how to reverse it with naloxone¹¹
 - This program has improved public attitudes about naloxone and its use to reverse overdose
 - Resulted in a lower number of deaths linked to opioid overdose
- **Medications for Opioid Use Disorder (MOUD):** offering medications like buprenorphine or methadone for opioid use disorder (OUD)
 - The medications methadone and buprenorphine both lower the risk of death from overdose¹²
 - Removing hurdles in getting MOUD makes it easier for PWUD to get life-saving treatment¹³
- **Contraception:** offering effective methods of birth control to reduce the rate of unintended pregnancies among PWUD
 - Studies show that only about half of PWUD use any contraception, and most methods used are not preferred¹⁴
 - When contraceptive services are free and available, there is a dramatic increase in the amount of PWUD taking effective contraception to prevent unintended pregnancy.¹⁵
- **Immunizations:** without having regular primary care visits, PWUD are at risk for developing illnesses that are otherwise preventable through vaccinations^{16,17}
 - The CDC recommends that all people who inject drugs should receive vaccines for hepatitis A & B, tetanus, and routine vaccinations such as influenza & pneumococcal disease.
 - PWUD who do not inject drugs should still be vaccinated for hepatitis A.
- **Screening for & Treating Infectious Disease:** quickly detecting diseases transmitted through blood and sexual activity and facilitating access to treatment¹⁸
 - PWUD should be tested for HIV, hepatitis C, tuberculosis, and other sexually-transmitted infections like chlamydia and syphilis at sites providing harm reduction services or during visits with healthcare providers.
 - Those who test positive for tested diseases should be offered treatment to reduce the risk of spreading disease.
- **Pre-Exposure Prophylaxis (PrEP) & Post Exposure Prophylaxis (PEP):** reduces the risk of HIV transmission among HIV-negative individuals that inject drugs¹⁹
 - The CDC recommends that all people who inject drugs should be offered PrEP to prevent HIV.
 - PEP is recommended by the CDC for PWUD who may have been sharing needles or with recent sexual activity with someone who may be HIV-positive.
- **Overdose Prevention Centers (OPCs):** safe, non-judgemental facilities where PWUD can come to use drugs, get clean supplies, and engage with treatment services if they wish²⁰
 - Decreased rates of death from drug overdoses, consuming drugs in public areas, littering of equipment used to consume drugs, and overall crime in neighborhoods that have OPCs.
 - Increased rates of PWUD engaging with treatment services.
- **Peer Support:** including people with lived experience that have previously used drugs to be peer recovery coaches for PWUD²¹
 - PWUD may feel a unique sense of caring from coaches or peers with similar lived experiences, which could provide motivation to enter or remain in treatment programs and decrease the risk of relapse.
- **Safer Supply:** providing PWUD pharmaceutical grade opioids like diacetylmorphine, morphine, or hydromorphone with the goal of reducing the use of drugs laced with fentanyl or other additives that could increase the risk for overdose²²
 - This strategy is currently illegal in the United States, but has been used for some time in Canada and Europe.
 - Safer supply has demonstrated high retention rates and improved social functioning among PWUD, but may potentially also decrease violence related to the illegal drug market.
- **Storage and Disposal of Unused Drugs:** involves safe storage and disposal of high-risk medications like opioids, benzodiazepines, and other controlled substances to reduce the risk of exposure to other household members
 - The Drug Enforcement Agency (DEA) sponsors take-back events in all 50 states in which people can safely dispose of unused medication, and most police departments and community pharmacies also offer drop boxes for unused medication.²³
 - Medications disposal kits can be used at home to inactivate and destroy drugs in pill, tablet, or patch forms and can be disposed of in normal garbage bins afterwards.²⁴

Resources for Consumers

- National Harm Reduction Coalition - <https://harmreduction.org/>
- SAMHSA - <https://www.samhsa.gov/find-help/harm-reduction>
- CDC - <https://www.cdc.gov/drugoverdose/od2a/case-studies/harm-reduction.html>



Go online to find more information about adherence and to view the references for this toolkit.

aapp.org/591041

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