



BRITISH COLUMBIA
CENTRE ON
SUBSTANCE USE

Networking researchers, educators & care providers

Harm Reduction in Emergency Departments

Adapted from:

- BC Emergency Medicine Network: Harm Reduction in the ED
- Provincial Opioid Addiction Treatment Support Program Module 5—Harm Reduction
- Fraser Health Harm Reduction in Emergency workshop

We respectfully acknowledge the land on which we work is the unceded traditional territory of the Coast Salish Peoples, including the traditional territories of x^wməθkwəyəm (Musqueam), Sk̓wx̓wú7mesh (Squamish), and sə́lílwətał (Tsleil-Waututh) Nations

What We'll Cover

- How to integrate a harm reduction approach into emergency department (ED) patient interactions
- How a harm reduction approach can make our jobs more fulfilling
- Resources available and harm reduction supplies
 - Specific to illicit drug use

What is Harm Reduction? Why is it Important?

- Harm reduction is a philosophy of inclusion, respect, collaboration, and choice
- It is a **pragmatic response** that focuses on keeping people safe and minimizing death, disease, and injury associated with higher risk behaviour, while recognizing that the behaviour may continue despite the risks
- At a **practical level**, the aim of harm reduction is to reduce the more immediate harmful consequences of drug use through realistic and low-threshold approaches and programs
- It focuses on the harms from drug use rather than on the use itself. It does not insist on or object to abstinence

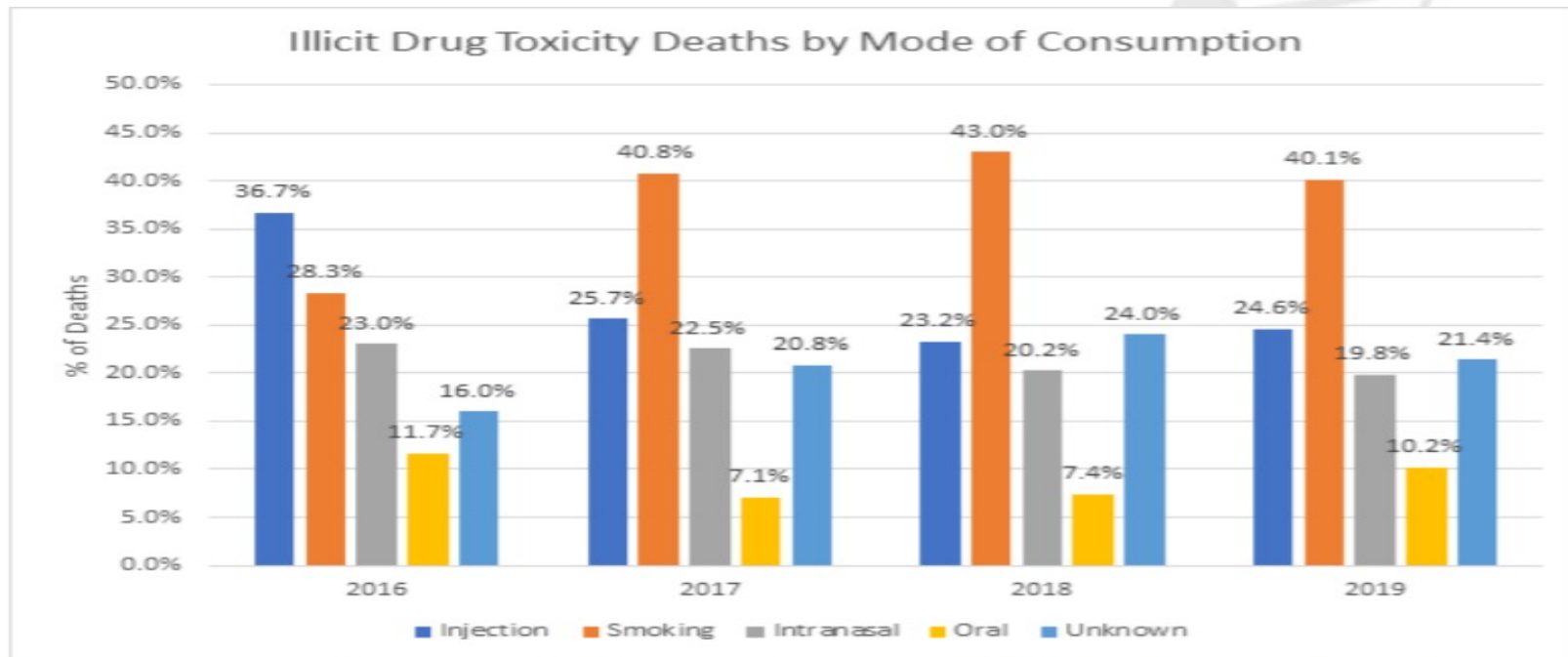
Integrate into all interactions

Harm Reduction...

“Meeting people
where they are at”

- Is evidence-informed
 - Helps prevent HIV, hepatitis C, skin and tissue damage and infections, overdose, and death. Reduces return to ED and hospital admissions. Results in system cost savings.
- Works with the person as collaborator and advisor
- Maximizes options and flexibility
- Empowers and supports people to be safer and healthier
- Reduces barriers to accessing health care for people who use substances
- Prioritizes immediate goals and incremental gains
- Benefits individuals, families, and communities
- **IS PART OF EMERGENCY MEDICINE**

Harm Reduction for All Modes of Substance Use



*In some cases, more than one mode of consumption was identified; therefore, percentages add up to more than 100%.

Ministry of Public Safety & Solicitor General

Posting Date June 11, 2020

**Not everyone has a substance use disorder but
anyone can benefit from harm reduction**

What Might Harm Reduction Look Like in ED?

- Asking people what they need in the moment
- Discussion on safer use strategies
- Compassionate conversations post-overdose
- Informed choice/shared decision making
- Take-home naloxone, safer supplies, drug checking
- Bridging to outreach and community resources
- Observed consumption services—site based, virtual, episodic
- Peer navigators

Approach to Harm Reduction in the ED

“What do you need right now? What might make you more comfortable?”

“What might be helpful to you? I’m worried about you. Is it ok if we talk about ways that may help keep you safe when you leave hospital?”

Foster a non-judgmental environment
Use person-first language. Share that it is an ED best practice to screen all patients for substance use.

Screen for substance use
How many times in the past year have you used a street drug or a prescription medication for non-medical reasons?

Walking alongside the person means allowing them to guide you on their needs

“This is something I ask everyone to provide the best care possible.” Give context.

≥1

Harm reduction strategies

Take Home Naloxone kit

Safer injection and inhalation supplies

Safer drug use tips

Supervised consumption sites

Lifeguard or BeSafe App

Using Non-Stigmatizing Language

Four Guidelines for Using Non-Stigmatizing Language

Use person-first language

Person who uses opioids	Instead of...	Opioid user or addict
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Use language that reflects the medical nature of substance use disorders

Person experiencing problems with substance use	Instead of....	Abuser or junkie
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Use language that promotes recovery

Person experiencing barriers to accessing services	Instead of...	Unmotivated or non-compliant
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Avoid slang and idioms

Positive test results or negative test results	Instead of....	Dirty test results or clean test results
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How Do You Explore Safety—Safety Plans?

- Ask the patient: “Is it okay if I speak to you about your plans to stay safe? How are you keeping yourself safe when you use substances? What may make it more safe for you?”
- Avoid using alone, test substances, sterile technique, naloxone kit
- Encourage the patient to:
 - Use small amounts of drugs as “test doses”
 - Go slow
 - Use less
 - Use one drug at a time
 - Get their drugs tested – FT-IR or fentanyl test strips
 - Use with someone and know how to use naloxone
 - Buddy up, get someone to check in, leave their door unlocked
- Remind the patient that there is a high risk of harm when using opioids after a time of reduced or no use due to loss of tolerance

Exploring Safety

- Sterile technique
 - Skin prep for any injection
 - Unused (new) equipment (syringes, stems, cookers, filters) every time
 - Avoid sharing or reusing equipment
- See slide 27-38 for more detail on safer equipment use and infection prevention
- Be aware of potential interaction with prescribed or non-prescribed CNS depressants

Health Authority

Safer Drug Use Tips

TIPS FOR SAFER DRUG USE:

♥ Explore with service providers options for witnessing consumption ([episodic OPS](#))

♥ Stagger use with friends so someone can respond if needed

♥ Start low go slow

Take a small amount, wait and see how it feels

♥ If using alone:

- Let someone know and ask them to check on you
- Download the Lifeguard or BeSafe apps (available on Apple/Android)
- Call the National Overdose Response Service: 1-888-688-6677 if no cel data



♥ Mixing substances increases risk of overdose – this includes alcohol and prescription drugs

♥ Access harm reduction service information at towardtheheart.com

♥ Get your drugs checked <https://www.fraserhealth.ca/drugchecking> or <https://getyourdrugstested.com/>

♥ Carry naloxone and increase checks of secluded areas
- visit naloxonetraining.com for a training refresher

For your safety

- Get overdose prevention, recognition, and response training; carry naloxone
- Don't use alone. Make a plan and tell a buddy who can call for help if needed
- If you plan to use alone, use the Lifeguard or BeSafe app available free on the app store or on Toward the Heart website (<https://towardtheheart.com>)
- Know your tolerance. If you are sick or had a time of abstinence or reduced use, use much less
- Don't mix drugs or mix drugs with alcohol
- Test a small amount first and go slow
- Use in an OPS if possible (see Prince George locations listed below)
- Access fentanyl drug checking where available (OPS sites)
- Call 911 or your local emergency number right away if someone overdoses

No matter what or how you use (smoking, snorting, injecting) take steps to prevent overdose:

- Get your drugs checked – find locations at drugchecking.ca
- Avoid mixing.
- Use with others around or at an Overdose Prevention Site (OPS).
- Start with a small amount.
- Carry naloxone and know how use it.
- Get the LifeGuard App - lifeguardh.com
- Call 211 or visit bc211.ca to find services near you

Invitational Approaches

What people often say or do	What might work better
Don't use alone.	What options do you have to not use alone?
If you keep doing this you are going to die.	You have been using a while, and you haven't had an overdose. What are some of the things you do to keep yourself safe? What do you think was different about this time?
You shouldn't inject that way, don't you know how damaging it is?	What can you tell me about your safer injection practices? What have you learned? What do you do differently now that you didn't do when you first started?
Assume that people who have overdosed know what happened.	Do you remember what happened? If you have more of the substance at home and there's a chance you might use again, what are your thoughts around keeping safe? Can I give you a naloxone kit?
Here's some info on resources.	What do you know about the local community resources? Is there anything that might stand in your way of accessing these resources? What kinds of supports might you need to access this?

Are You Giving Out Take-Home Naloxone?



Ask person: What would make people around you more comfortable using this?

Good Samaritan Drug Overdose Act
No charges for simple possession or breach of probation/parole if you call 911 at scene of overdose.



Patients and families can learn more at: www.naloxonetraining.com

Nasal Naloxone—Not Available in EDs



- Available for purchase in some pharmacies
- Covered for Inuit and First Nations clients with a status card under First Nations Health Benefits through the First Nations Health Authority
- Available at some Indigenous Health Centres and organizations
- Uses a higher dose of naloxone—4mg intranasal

Naloxone—Concurrent Opioid and Benzodiazepine Use

BC Coroners Services



Expedited toxicology found benzos/etizolam was detected in:

50%

of illicit drug toxicity deaths in December 2020 and January 2021¹

Drug Checking Services



Drug checking shows an **increase** of opioid samples testing positive for benzos. In January 2021:

20%

of opioid samples checked by the BC Centre on Substance Use tested positive for benzos²

50%

of opioid samples from Island Drug Checking tested positive for etizolam or other benzos³

People who have used opioids contaminated with benzodiazepines may experience prolonged sedation and memory loss even after naloxone. Still administer naloxone.

How Can Your ED Give Harm Reduction Supplies?

- BCCDC supports distribution not exchange
- Connect with your **Regional Harm Reduction Coordinator** to assist getting supplies.
- Stock premade kits to give out
- No cost to ED – supplies from BCCDC
- ED supplies act as bridge to community
- Slide 27-38 for details



Does your hospital have a community public sharps disposal bin outside?

BCCDC=BC Centre for Disease Control

What are Your Community Possibilities for Observed Consumption Services?

- Different types of supervised consumption sites (SCS) and overdose prevention sites (OPS)
 - Fixed location, connected to acute care, housing, episodic
- Observed consumption services save lives
- What are the barriers to use?
 - Limited hours, stigma, location
 - Most sites cannot accommodate smoking/inhalation
- **Virtual options to promote**
 - Lifeguard app, Brave/Be safe app, National Overdose Response Service (NORS) phone line
- How can we connect people from the ED?

Virtual Option—Lifeguard App

Using Alone?



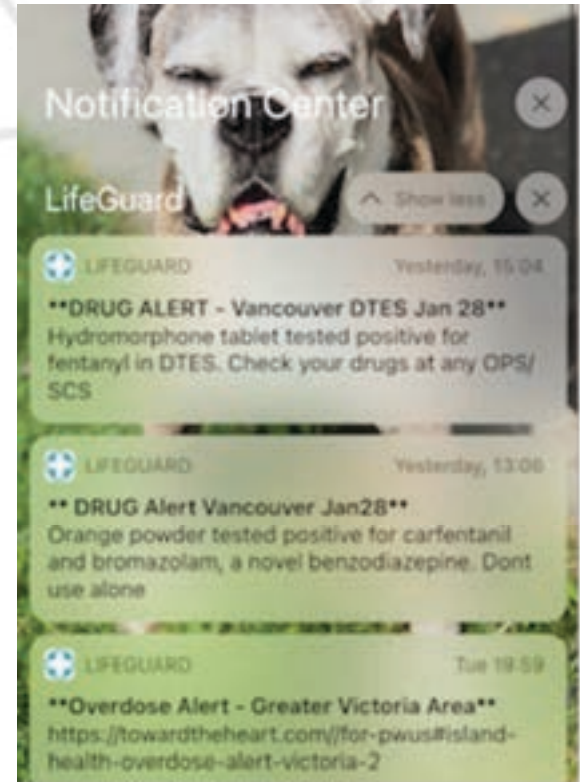
Download Lifeguard App



The app has a 1 minute timer. If you are not able to snooze or turn off the timer after 1 minute, the app will contact ambulance services with your location in case of an **overdose**.



More overdose prevention information: lifeguardDH.com



- Monitors for overdose when activated and connects with EHS
- Sends alerts about specific substances or OD activity in communities

Virtual Option—The Brave App



The Brave App 4+
Overdose Safety App
Brave Technology Coop
★★★★★ 4.9 • 9 Ratings
Free

- This app aims to keep people safer from overdose by providing them with access to a community of people willing to provide remote supervision at the very moment they are most at risk of overdose
- If, and only if, they overdose, their location is revealed to their supporter who can then call 911 to direct them to the person

Virtual Option—National Overdose Response Service

NATIONAL OVERDOSE RESPONSE SERVICE



NO JUDGEMENT. JUST LOVE.

888-688-NORS(6677)

NORS is an overdose prevention hotline for Canadians providing loving, confidential, and non-judgmental support whenever and wherever people need it.

Call: [1-888-688-NORS\(6677\)](tel:1-888-688-NORS(6677)) or Visit: <https://www.nors.ca/>

What are your Community Possibilities for ED In-reach and Outreach?



- Overdose outreach teams
- Substance use service access teams
- Peer organizations
- Peer navigators
- Community harm reduction groups

REFLECTION:

- Who can your ED partner with?
- Who can help you?

Connecting to Community Resources

<https://towardtheheart.com/>

- Drug checking
- SCS/OPS
- Harm reduction supplies
- Outreach teams
- Peer groups
- Drug alerts
- RADAR – drug alert texts

1. Where are you? <input type="text" value="Chilliwack"/>	2. Search Distance 100km	3. What supplies are you looking for? Safer sex and drug use supplies
<input type="button" value="Search"/>	<input type="button" value="Reset"/>	<input type="button" value="Help"/>

Locations

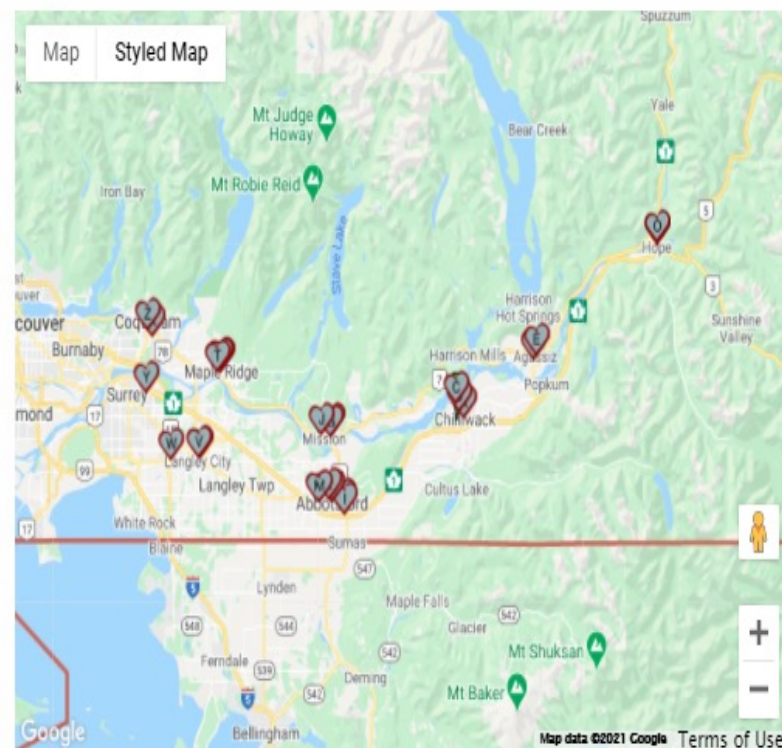
A 0.15 km Away
Chilliwack Health & Housing Centre (PCRS)
45921 Hocking Avenue
Chilliwack, V2P 1B5
[Zoom To](#)

B 1.33 km Away
Chilliwack Health Unit
45470 Menholm Road
Chilliwack, V2P 1M2
[Zoom To](#)

C 2.64 km Away
Skwah First Nations
615 Wellington Avenue
Chilliwack, V2P 6H7
[Zoom To](#)

D 15.74 km Away
PCRS Mobile HIV and Hep C Prevention Program
***Mobile service, please call for

Map



<https://getyourdrugstested.com/>

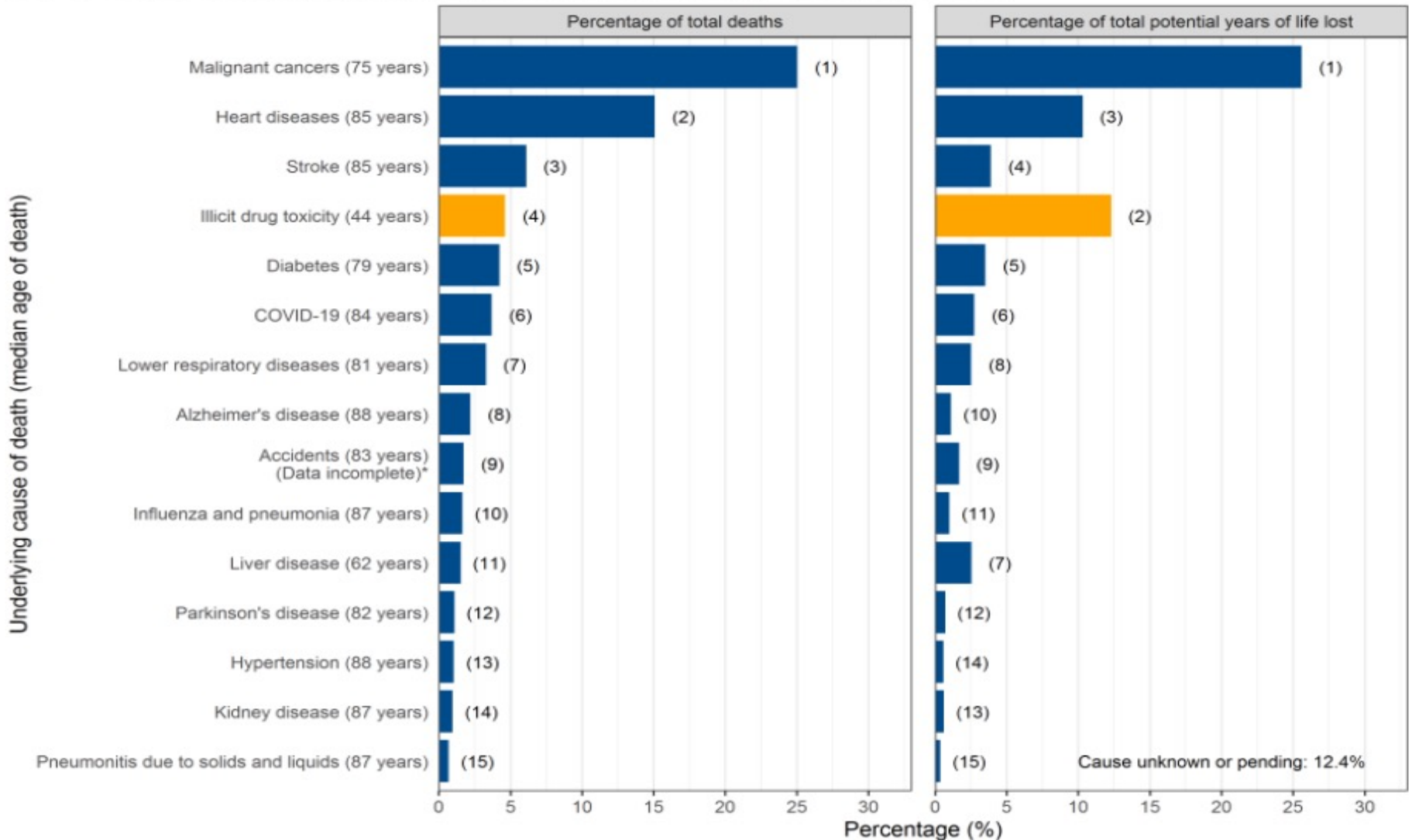
How Can You Use Medication in the ED to Reduce Risk of Harm?

- Treat people's acute pain
- Treat withdrawal symptoms
- Offer opioid agonist treatment (OAT) if the patient has opioid use disorder

- Losing opioid tolerance=higher rates of fatal overdose
- Undertreated pain or withdrawal=leaving “against medical advice” before medical care complete, negative interactions, self-treatment with illicit drugs
- Risk of death in 1 year after ED OD visit 5–10% -> OAT reduces this risk

What can we do as ED providers to influence this?

Top 15 causes of death (ranking) in British Columbia from July 2020 to June 2021



BRITISH COLUMBIA CENTRE ON **SUBSTANCE USE** *External causes of death (other than illicit drug toxicity) incomplete due to reporting delay and will rise in ranking as data become complete. Data sources: 1) BC Vital Statistics, 2) COVID-19 deaths reported by public health, 3) Data on illicit drug toxicity deaths provided to BCCDC by BC Coroners Service; 4) Statistics Canada Table 13-10-0114-01 Life expectancy and other elements of the life table, Canada, reference period 2017-2019.

To Think About...

- What might harm reduction look like in your ED?
- How do you explore safety and safety plans?
- Are you giving out take-home naloxone?
- How can your ED give harm reduction supplies?
- What are your community possibilities for observed consumption services and/or virtual options?
- What are your community possibilities for ED in-reach and outreach?
- How can you use medication in ED to reduce risk of harm?

More on Safer Equipment—Setting up Harm Reduction Supplies in Your ED

- Step-by-step on how to get started: <https://towardtheheart.com/hr-sites>
- Resources on safer use: <https://towardtheheart.com/safer-use>
- Connect with your Health Authority Harm Reduction Coordinator
- “Safety messaging is really dependent on the person in front of you. People are experts in their own lives and often know so much more than us. Folks may have been using harm reduction practices long before we rolled in. It is important to honour the expertise and don’t assume that people know nothing. A safe place to start is ‘can you tell me what you know about safer injection practices?’”

-FH Harm Reduction Team

How to Order Harm Reduction Supplies

How to order harm reduction supplies

➔ Get Approval By Your Regional Health Authority

List of Representatives

Your site must be pre-authorized before you can order supplies.

STAY SAFE

Use overdose prevention sites and supervised consumption services where available

CURRENT ALERTS

RADAR - Drug Checking Alert - Vancouver

January 28, 2022

RADAR - Drug Checking Alert - Vancouver DTES

January 28, 2021

Island Health - Overdose Alert - Greater Victoria Area

January 26, 2021

Fraser Health - Overdose Alert - Chilliwack

January 21, 2021

<https://towardtheheart.com/hr-sites>

Safer Injection Supplies

- Reduces HIV, hepatitis C, cellulitis, abscesses, endocarditis, osteomyelitis, sepsis, hospital admissions, ED visits, and system costs



What you need to inject safer:



Sterile needle



Sterile water



Alcohol swabs



Cotton filter or tampon (unscented)



Cooker or spoon



Rubber tie



Lighter or candle



Ascorbic acid/vitamin C (crack only)



Clean hands



Safer Injection Supplies—Cookers and Filters

Previously



What we offer now



- Items used as cookers were one of the most commonly shared pieces of equipment and provide an effective route to transmit HIV and hepatitis C.
- Filters help remove particulates that can cause infection and damage to veins.
- **Safer tablet injection—requires double filter or special filter (e.g., Sterifilt FAST (15mm) filter)**

Safer Injection Supplies—Water

Previously



What we offer now



- Access to sterile water may be difficult for people who are experiencing homeless and other barriers
- Sharing water increases risk of HIV and hepatitis C transmission

Safer Injection Supplies—Tourniquets

Previously



What we offer now



- Using a tourniquet helps to make veins more accessible, and prevents abscesses
- Sharing tourniquets can transmit MRSA

Injection Does Not Have to Lead to Infection

- Ask if people have a place to get supplies and know how to use the supplies
- Offer education and be open to learning from patients
- Provide access to health care services (do you know where to go, who to talk to?)

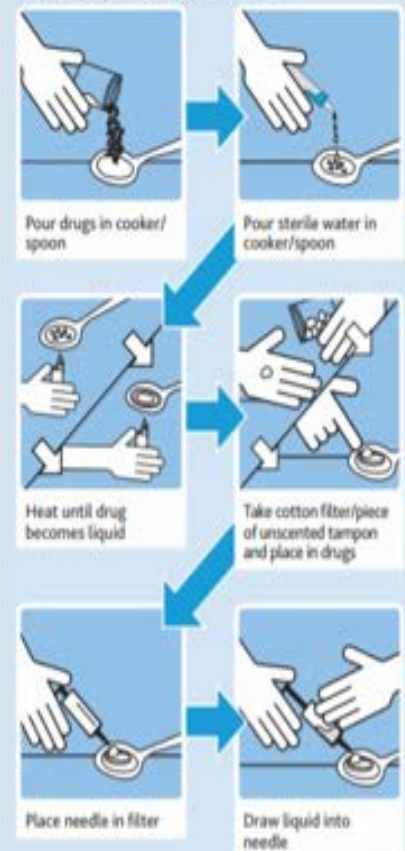
Safer Injection Practice messaging might include:

- Having access to all your own supplies is important, “everything new, every time”. Don’t reuse needles
- When possible, wash your hands before injecting (or use an alcohol swab/hand sanitizer if there is no water available)
- Use sterile water. Have your own water
- Keep bevel up to prevent tissue damage. Flaggging ensures that the needle is inserted properly. If the vein is missed, the risk of abscesses and other harms can be increased.
- Use a filter to reduce harmful particulates (not a cigarette filter). Tablets need a double filter or special filters

1  Clean your hands with soap and water or alcohol swabs

2  Choose your injection site (lower arm is safest. If you have to inject elsewhere, lower leg then hand are OK)

3 Prepare your drugs – heroin



Pour drugs in cooker/spoon

Pour sterile water in cooker/spoon

Heat until drug becomes liquid


Take cotton filter/piece of unscented tampon and place in drugs

Place needle in filter

Draw liquid into needle


3 Prepare your drugs – crack/coke

coke

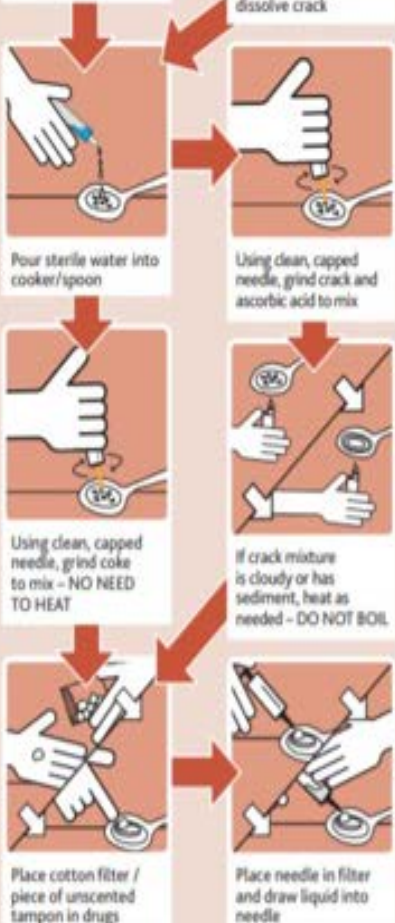


Pour coke into cooker/spoon

crack



Pour in just enough ascorbic acid to dissolve crack



Pour sterile water into cooker/spoon

Using clean, capped needle, grind crack and ascorbic acid to mix

Using clean, capped needle, grind coke to mix – NO NEED TO HEAT

If crack mixture is cloudy or has sediment, heat as needed – DO NOT BOIL

Place cotton filter / piece of unscented tampon in drugs

Place needle in filter and draw liquid into needle

4  Clean your injection site with an alcohol swab

5  Tie off with a rubber tie using a quick release

6  Insert your needle with the bevel up, at a 30 degree angle towards your head

7  Flag your needle: push needle in a little and pull back on plunger until you see blood in the needle

8  Loosen your tie

9  Inject your drug slowly

10  Pull out and with clean hands, apply pressure to injection site

11  Safely dispose of all equipment – make it your gig to return your rig

- Taste your drugs before you use
- Always use with a buddy
- Use a new needle for each injection
- Please don't break off the tip of your needle or re-cap it – it's not safe
- Remember: two holes in your arm are better than one in the ground. If you haven't used in a while, reduce your dose.
- Protect yourself and your community – always dispose of your equipment safely

injecting

- The most dangerous place to inject is your neck
- To make your veins more visible: jog on the spot or do push-ups before tying off
- If you can't see the bevel, look for the numbers on the side of your needle, they often line up with the bevel

filters

- Unscented tampons are safe to use as filters – do not use cigarette filters
- Use a filter once only – using it more than once can lead to "cotton fever"

ties

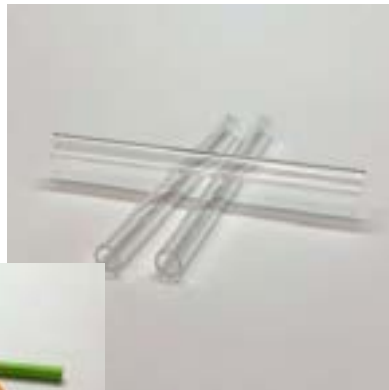
- Ties should be on for two minutes maximum
- If your hand falls asleep or arm turns red while tied off, the tie is too tight, or has been on too long

abscesses and wounds

- Keep injection sites clean and watch for abscesses – they can happen anywhere on the body, not just where you inject
- If you have an abscess, do not pop it
- Seek medical care for treatment of abscesses or wounds – they can lead to dangerous infections

Safer Smoking Supplies

- Use your own pipe—sharing can spread infection
- Using a mouthpiece can prevent burns or cuts on lips and fingers
- Lip balm or lubricant can protect lips from burning
- Using brass screens over brillo can protect lips and throat from burning



What you need to smoke crack safer:



Shatterproof
Pyrex Pipe



Re-useable
mouthpiece



Five wire
screens



Wooden
push stick



Lighter



Alcohol swabs

What you need to smoke crystal safer:



Shatterproof
Pyrex Pipe



Lighter



Alcohol swabs

Safer crack smoking

Safer crystal smoking

safer crack use tips

- Smoke in a safe place with people that you trust
- Take vitamins and eat something before you smoke – you won't feel like eating after
- Have condoms with you – you may want to have sex while high
- Pipe will be very hot once used – handle it with care
- Don't be alarmed by feelings of extreme depression once you're sober – it's your body reacting to the drug

mouth care

- Don't share: use your own mouthpiece to avoid infection and mouth burns
- Drink water or fruit juice to keep your mouth moist and reduce cracks and blisters
- Moisten your lips with lube or lip balm
- Chew gum to keep your mouth moist and healthier

wire screens vs. brillo

- Wire screens are much safer than brillo
 - Brillo's toxic coating can make you sick
 - Brillo can break apart and be inhaled, burning your mouth and throat
- If wire screens aren't available and you can only use brillo, be sure to:
 - Burn the coating off and change it frequently

safer crystal use tips

- Smoke in a safe place with people that you trust
- Inhale slowly and exhale immediately – don't hold it in
- Know your limits – once you're high, stop smoking
- Take vitamins and eat something before you smoke – you won't feel like eating after
- Have condoms with you – you may want to have sex while high
- Keep your pipe clean by burning off the residue and then scrubbing it with alcohol swabs
- When coming down, eating will help you sleep
- Don't be alarmed by feelings of extreme depression once you're sober – it's your body reacting to the drug

mouth care

- Avoid infection by using your own pipe – don't share
- Drink water or fruit juice to keep your mouth moist and reduce cracks and blisters
- Chew gum to keep your mouth moist and reduce clenching



1 Clean your hands and mouthpiece with alcohol swabs



2 Twist each of your five wire screens into the shape of a cone



3 Using your wooden push stick, insert the screens one at a time into the pipe



4 Use your wooden push stick to gently tamp down the screens



5 Nudge the screens back to make room for the crack



6 Fit your mouthpiece onto your pipe



7 Tilt the pipe up and place the drugs on top of the screens



8 Apply heat, inhale slowly, then exhale immediately



1 Clean your hands and pipe with alcohol swabs



2 Pour crystal into your pipe



3 Tap your pipe to move the drugs into the bowl



4 Holding your pipe halfway down the stem, apply heat to the bowl, keeping the heat source moving



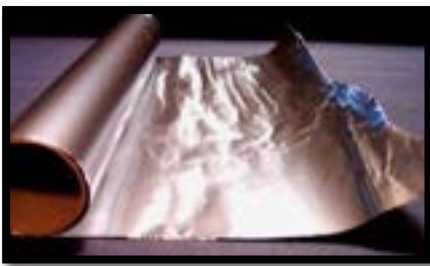
5 Heat will vaporize the drugs, filling your pipe with smoke



6 Inhale slowly then exhale immediately

What if We Don't Have What People Want? Community Harm Reduction Programs Can Offer:

- Different sized barrels and tips
- Assorted injection equipment
- Safer sex supplies
- Safer inhalation supplies
- Sharps containers



Products	Description	Notes	Unit Of Issue	Quantity Ordered
Safer Sex				
Condoms	Lubricated		(1440/Box)	Boxes
Condoms	Non-Lubricated	ORDER MULTIPLES OF 5	(144/Box)	Boxes
Condoms	Flavoured		(144/Box)	Boxes
Internal Condoms			(100/Bag)	Bags
Aqua Lube	3 mL per packet	144/bag, 8 bags/box	(1,152/Box)	Boxes
General Safer Use				
Alcohol Swabs		20 boxes/case	(200 swabs/box)	Boxes
Water Vials	3 mL		(1000/Case)	Cases
Safer Injection				
Syringes with needle attached	1 cc insulin syringe & needle	5 boxes/case	(100/Box)	Boxes
Syringes with needle attached	1/2 cc insulin syringe & needle		(100/Box)	Boxes
Ascorbic Acid	100 mg sachets		(1000/Box)	Boxes
Disposable Cookers (Stericups)	Multicolour (with filter)		(1000/Box)	Boxes
Tourniquet			(100/Box)	Boxes
Syringe without needles	3 cc		(200/Box)	Boxes
Syringes without needles	5 cc		(125/Box)	Boxes
Needle, disposable	18g x 1 1/2"		(100/Box)	Boxes
Needle, disposable	22g x 1"		(100/Box)	Boxes
Needle, disposable	22g x 1 1/2"		(100/Box)	Boxes
Needle, disposable	25g x 5/8"		(100/Box)	Boxes
Needle, disposable	25g x 1"		(100/Box)	Boxes
Needle, disposable	26g x 1/2"		(100/Box)	Boxes
Needle, disposable	27g x 1/2"		(100/Box)	Boxes
Sharps collector - 1 quart	1L		(60/Box)	Boxes
Sharps collector - Mini	500mL - holds <10 needles		(100/Box)	Boxes
Safer Inhalation				
Cutter for vinyl tubing			(each)	Each
Plastic mouth piece - Vinyl Tubing	1/4" x 3/8" - small diameter		(100 feet/roll)	Rolls
Plastic mouth piece - Vinyl Tubing	5/16" x 7/16" - medium diameter		(100 feet/roll)	Rolls
Plastic mouth piece - Vinyl Tubing	3/8" x 1/2" - large diameter		(100 feet/roll)	Rolls
Screens		10 brass screens/envelope	(200 env/Bag)	Bags
Wooden push sticks			(144/Bag)	Bags
Tube glass	8mm diameter		(2540/case)	Cases
Tube glass	10mm diameter		(1600/case)	Cases
Bowl pipe			(432/case)	Cases
Foil sheets	Pre-cut 5x7"		12 boxes/case (500/box)	Boxes



SAFER INJECTION

WARNING

This video is for informational purposes only. It does not constitute a recommendation. This video is not intended to be used as a substitute for professional medical advice. Always consult your healthcare provider for more information. This video is not intended to be used as a substitute for professional medical advice. Always consult your healthcare provider for more information.

Share Stories Not Needles

Share your stories, not your needles

Share your stories, not your needles



How to use a syringe safely

- Don't use a syringe if you are sick, have a fever, or are on antibiotics.
- Don't use a syringe if you are pregnant or breastfeeding.
- Don't use a syringe if you are taking any other medication.
- Don't use a syringe if you are taking any other drug.
- Don't use a syringe if you are taking any other substance.
- Don't use a syringe if you are taking any other drug.
- Don't use a syringe if you are taking any other substance.

How to use a syringe safely

- Wash your hands with soap and water before and after using a syringe.
- Use a new syringe for every injection.
- Don't share a syringe with anyone else.
- Don't use a syringe if it is dirty or has been used by someone else.
- Don't use a syringe if it is broken or has a leak.
- Don't use a syringe if it is not the right size for you.
- Don't use a syringe if it is not the right type for you.

How to use a syringe safely



OVERDOSE IS MOST COMMON WHEN:

- Your tolerance is lower: you took a break, were in detox/treatment or jail, or you are new to use
- You have been sick, tired, run down, dehydrated or have liver issues
- You mix drugs: prescribed or not, legal or illegal
- The drugs are stronger than you are used to: changed in supply, dealer, or town

TO PREVENT OVERDOSE:

- Know your health status and your tolerance
- Do not mix drugs and alcohol. If you do mix, choose to use drugs before alcohol
- Be aware: using drugs while on prescribed medications can increase overdose risk
- Don't use alone. Leave door unlocked. Tell someone to check on you
- Do test to check strength. Use less. Pace yourself
- Talk to an experienced person or a trusted healthcare provider about reducing risk
- Know CPR and get trained on giving naloxone
- Choose a safer route of taking drugs



Safer Injecting

heroin crack/coke

What you need to inject safer:



the user-friendly series



Safer Smoking

crack crystal

What you need to smoke crack safer:



What you need to smoke crystal safer:



the user-friendly series

Online Resources

- BC Emergency Medicine Network: [Harm Reduction in the ED](#)
- BCCDC: [Toward the Heart](#)
 - Includes locations of harm reduction services, information on distribution of and training for naloxone, and clinician and patient resources
- BCCDC: [Online Naloxone Training](#)
- BCCDC: [Program Information](#)
- BCCDC: [Safer Tablet Injection \(Resource for People who Use Drugs\)](#)
- BCCSU: [Safer Tablet Injection \(Resource for Clinicians\)](#)
- BCCSU: [Provincial Opioid Addiction Treatment Support Program—Module 5 Harm Reduction](#)
- BC Ministry of Health and BCCDC: [COVID-19: Provincial Episodic Overdose Prevention Service \(e-OPS\) Protocol](#)
- Get Your Drugs Tested: [By mail or in person](#)
- Vancouver Coastal Health: [Safer Injecting](#)
- Vancouver Coastal Health: [Safer Smoking](#)

Provincial Opioid Addiction Treatment Support Program

Provincial Opioid Addiction Treatment Support Program

Online Course

[Register Here](#)

Help is just a phone call away



Telephone consultation for physicians, nurse practitioners, nurses, mid-wives, and pharmacists providing addiction and substance use care.

Available 24/7, 365 days a year. More info at www.bccsu.ca/24-7.

CALL 778-945-7619



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