

Face Up

Newsletter of the Sydney Medically Supervised Injecting Centre (MSIC)

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Message

Options



To...

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Cc...

Subject:

MSIC

My name is Lisa*, for many years I was a heroin addict, coke addict and sex worker in the clubs in Kings Cross. I want to thank you not for saving me because I was lucky and after a long time on drugs my family intervened and thanks to the wonderful selfless work of Dr Jones* I am now clean for three and a half years. I want to thank you for giving some wonderful people, the girls in the Cross, the opportunity to use safely and therefore provide them with the opportunity to live long enough to realise life is not all about shooting up.

I am now a university student, a full time mother and I work hard as well. Drugs are no longer part of my life. I remember when girls used to pay five dollars to get clean equipment and a room in the sex shops. This was not safe however as often if you dropped you were just picked up and put outside for someone else to deal with.

I hope that one day I am able to return to Kings Cross and do my part in helping some great people through a hard time in life. I have lost a lot of good friends in the Cross and if I can help out one of them it will make my life complete.

Lisa*

**Unsolicited email received by MSIC on 20/05/03.
* All names changed to maintain confidentiality.**

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MSIC staff at Sydney Hospital for Staff Training Day

Medical Director's Report : The first two years

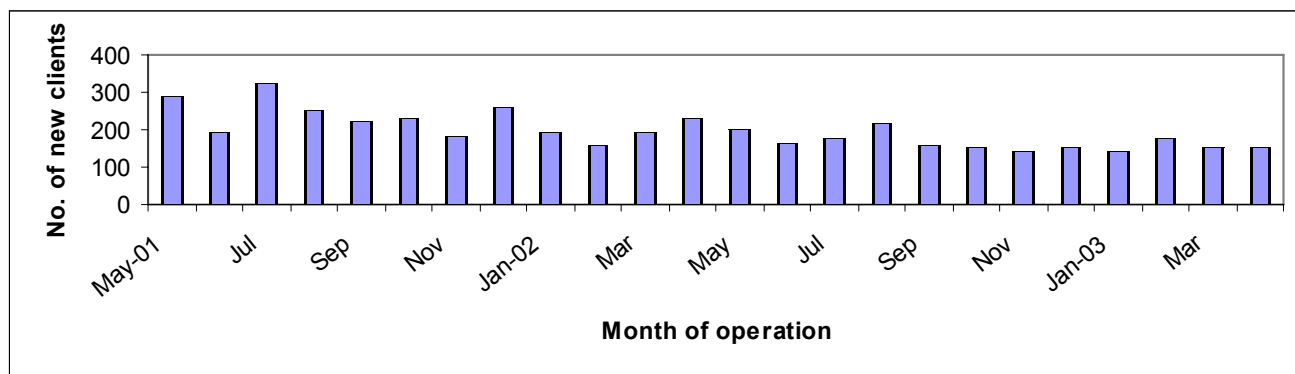
Dr Ingrid van Beek, Medical Director

The Sydney Medically Supervised Injecting Centre (MSIC) commenced its 3rd year of clinical operations on 7 May 2003. The final results of the independent evaluation of the MSIC's first 18 months of operation (ending in October 2002) have now been publicly released. This is likely to herald vigorous public debate about whether the service should continue beyond its current trial condition. We hope that this debate is informed by the final evaluation report's findings. We also hope that there is an appreciation that any service evaluation process, no matter how comprehensive and rigorous (and there is no doubt that this service evaluation was peak in this respect), also has its limitations. Particularly the more intangible and human aspects of clinical care are often hard, if not impossible to quantify. To help inform you, the Kings Cross community, I provide the following summary of the MSIC's achievements for its first 2 years of clinical operation.



Client registrations: The MSIC registered 4,736 individual injecting drug users (IDUs) to the end of April 2003. Every client registration involved a full assessment of the person's drug use and overall health and social situation. This determined what other assistance was provided at the MSIC eg primary health care, emergency accommodation, and referral to drug treatment and rehabilitation. Only about half had ever had contact with a health agency focusing on drug-related harms in Kings Cross before. In this sense the MSIC has significantly "widened the net" in terms of the proportion of the IDU population now in contact with health professionals able to address the issues underlying their illicit drug use.

Table 1: Number of new client registrations per month (May 01-Apr 03)



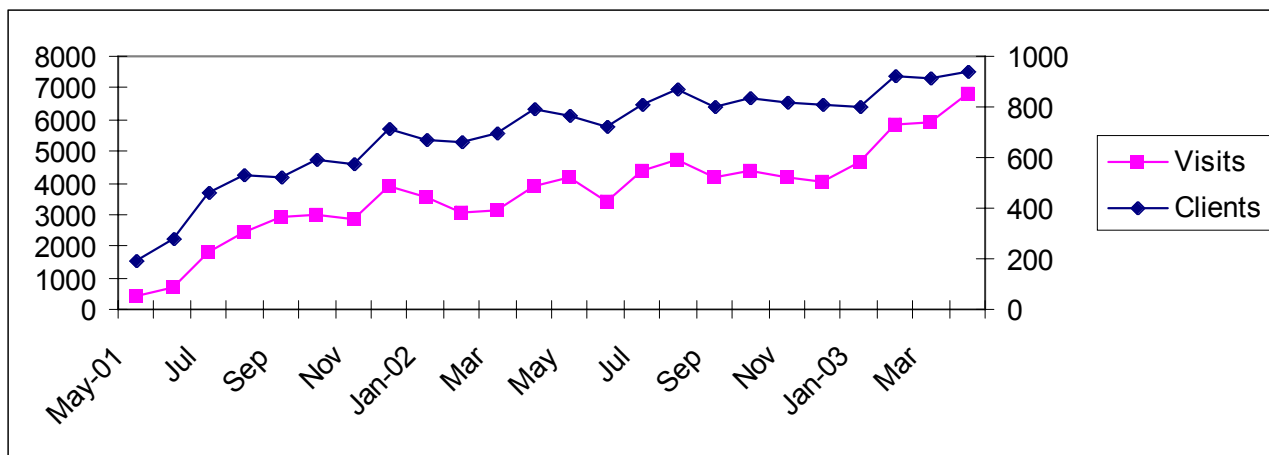
Individual clients: In the course of one month the MSIC currently has contact with just over 900 individual IDUs. On a daily visit basis, 80% of visits were by clients who spent the previous night in the South Eastern Sydney Area Health area, and two thirds in the immediate Kings Cross area. The most common reason cited for being in Kings Cross was to buy drugs.

The clients who attended the MSIC most frequently were those among the MSIC's core target population of heavily heroin dependent, street-based, sex working IDUs who dwell in Kings Cross. As well as being in a safer environment at the MSIC, treating such marginalised people with dignity and respect as occurred at the MSIC hopefully increased their sense of self-worth and esteem, essential to effecting personal change at an individual level.

The MSIC has also made contact with people who were still early in their drug using, who were not yet as heavily heroin dependent or entrenched in the street-based lifestyle. This provided an important opportunity for early intervention, which is well known to be most effective in the prevention of drug-related harms.

MSIC visits: The MSIC accommodated 88,322 injecting episodes in the first 2 years. An average of 226 visits (ranging up to 340 visits) currently occur each day; seventy-four percent to inject heroin, 4% cocaine and the remainder a mix of benzodiazepines and methamphetamine. These injecting episodes would presumably otherwise occur in less safe, unsupervised, back street circumstances elsewhere in Kings Cross, also reducing public amenity.

Table 2: Number of visits and clients per month (May 01-Apr 03)



The MSIC is now operating at more than twice the level of service utilisation and is accommodating almost three times as many visits to inject heroin as during the 18 month evaluation period, further increasing its overall impact at community level.

Drug overdoses: In the first 2 years 554 drug overdoses were managed at the MSIC without fatality; 83% heroin and 11% cocaine overdoses. While one may speculate about how many of these would have otherwise resulted in death, it is very hard to know for sure without examining where each and every individual drug overdose would have otherwise occurred and what the likelihood of ambulance assistance being provided in time would have been. However the clinicians at the MSIC are aware of the background and circumstances of the overdoses they deal with, they witness first hand clients becoming cyanosed (blue) and who stop breathing spontaneously. The clinicians involved in the resuscitation of these drug overdose cases at the MSIC know that a significant number of lives have been saved.

Probably even more significant would have been the morbidity otherwise associated with heroin overdose, prevented by the MSIC. In community-based situations heroin overdoses are not usually identified until the person is unconscious and no longer breathing and only then is the ambulance service called to provide assistance. In contrast, at the MSIC drug overdoses are identified within minutes of onset, thereby enabling immediate treatment with life support measures. In this way the irreversible damage that may have otherwise occurred as a result of temporary lack of oxygen to all vital organs and in particular the brain, was prevented at the MSIC.

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In the Kings Cross area, 78% of local residents supported the MSIC

The 62 cocaine overdoses managed at the MSIC included cases of acute severe hypertension (high blood pressure), hyperthermia (increase in body temperature), cardiac arrhythmias (irregular heart rhythms), convulsions (fits), paranoid states and acute psychosis. These were also managed on-site without fatality.

Referrals to other relevant health and social welfare services:

It is important to appreciate that the primary aim of supervised injecting centres is to keep people alive and well so that they still have the opportunity to address the underlying causes of their drug dependence and associated lifestyle. Nonetheless, supervised injecting centres do potentially have an important role in bringing people into contact with drug treatment and rehabilitation services, so that this usually long and arduous journey can commence sooner rather than later, and hopefully well before it is too late.

On more than 1,800 occasions clients were referred to other relevant health and social welfare services; 44% for the treatment of drug dependence, which included the full range of options from naltrexone, drug abstinence and 12 step programs to detoxification, methadone and buprenorphine programs. Referrals among the clients who attended the MSIC more often were most effective, confirming the role of the MSIC in facilitating the establishment of trust and rapport with IDUs, necessary to effect successful referrals to other relevant services.

Cost benefit: The MSIC was able to demonstrate that its benefits outweighed its cost during the trial. This is a particularly impressive result given the extra-ordinary costs that were associated with start up (refurbishment etc), and the delays due to legal action taken to stop the MSIC. The extension of operating hours subsequent to the evaluation period has already resulted in a further 50% increase in daily visits, further improving the cost efficiency of the MSIC.

Cost effectiveness: Particularly since the expansion of drug treatment and rehabilitation services following the NSW Parliamentary Drug Summit in 1999, it makes even more sense to also be investing in keeping this most marginalised part of the IDU population alive and well so that they too can benefit from such programs.

Community support: In the Kings Cross area was high and increased during the evaluation period, to 78% among local residents and 63% among local businesses. Community feedback was generally very positive throughout, with many reporting that they were proud to be part of a community that was taking a balanced and humane approach to the public health and public order issues associated with street-based drug use in Kings Cross. I would also like to take this opportunity to thank the local community for its courage and fair-mindedness in supporting this initiative.

The "honey-pot" effect and drug-related crime: There was no evidence of an increase in drug using, drug dealing or other drug-related crime in the Kings Cross area or in the immediate vicinity of the MSIC (*source: Kings Cross Police Service and NSW Bureau of Crime Statistics*).

Public amenity: There is much being said at the moment about the public amenity in Kings Cross. Various hotels are being converted into up-market apartments, thereby increasing the residential population and potentially changing the nature of Kings Cross. The MSIC supports all efforts to improve the public amenity, including all efforts to stop the supply of illicit drugs and associated anti-social behaviour in the area.

We consider that the relocation of much of the public drug injecting that used to occur in Kings Cross into the MSIC over the past 2 years has been an essential element enabling the improvement of public amenity in Kings Cross. There should be no doubt that closing this service now would result in the shift of at least 226 drug injecting episodes (and associated injecting paraphernalia) a day, back into the local environs of Kings Cross, surely a backward step for the local community.

Other achievements with Public Health implications at population level

1. A greater understanding of the patterns of drug overdose and approaches to its management was gained during the trial. The MSIC's clinical protocols developed to manage heroin overdoses and the various manifestations of cocaine toxicity are now being communicated to other relevant services in NSW.
2. The rate of drug overdoses occurring at the MSIC reduced during the trial as a result of education about risk factors before people used the MSIC and again when overdoses occurred at the facility.
3. As a result of health professionals observing injecting rituals among IDUs, a greater understanding of injecting risk behaviour from an HIV/hepatitis B&C perspective was gained. This has enabled the development of more targeted health promotional messages about blood and needle awareness, which are now also being disseminated more widely.
4. The MSIC was in a unique position to provide an early warning system in terms of drug trends in Kings Cross. The MSIC alerted the Kings Cross Police and other relevant services when it became aware of new or higher purity drugs on the streets.

In Conclusion...

There has been a great appreciation amongst all the MSIC staff, of the public health significance of this trial initiative, not only for Kings Cross, but for all jurisdictions in Australia. Every nurse and counsellor at the MSIC worked well beyond the call of duty throughout this trial, often in very challenging circumstances. I would like to take this opportunity to express my admiration and respect for them all. I also know that there was nothing more that any of us could have done to improve the final outcomes of this trial and that regardless of the final verdict, the service's key objectives were achieved. We are very grateful to have been given this opportunity to demonstrate the benefits of this harm reduction strategy and again, would like to thank the community for their support.

I trust that this information has been of assistance to you.

Sincerely,

Dr Ingrid van Beek
MBBS, MBA, FAFPHM, FACHAM

“Thank you”...clients’ comments

Letters to MSIC staff members and clients’ comments regarding the Sydney MSIC.

Dear Jink,

This is a short letter to thank you for all your help in getting me to where I am today. Without you I could not have done it. I promise all your help has not gone in vain, you have been a good friend not just an employee. My life has changed so much in 2 weeks. I will come to see you in about 3 weeks. If you would like to talk to me you can ring my mum's on ~~XXXXXX~~ twenty four/seven. Please thank all the staff for their support and help.

Love best wishes
Jamie

To Jake,

David here, I just thought I would come in and say goodbye as I am heading back to Narrabri tomorrow to drive those heads of cattle into their grazing section. I really appreciate the conversation that we had on Saturday. You are a top bloke and you are definitely in the right field of work. Keep it up and watch the difference you make in peoples lives.

Lives are changing!!

From David

Dear Andy

Hi it's Susie, I've done the rapid detox and got custody of Dawn back. Thought you would like to hear. Pass on the news to Jake as well. All the best, thankx for all the support along the way.

Thanks, Susie

Thanks to all of the splendid workers who have worked so hard to get this facility going and who work hard every day to keep it going. Before this place existed, I used to go home and use alone as I live by myself. Thank you for caring enough for others to do this, sometimes ugly, job.

Thanks

Ronnie 04/2003

Thanks for caring enough to be here when and where we need you. The unconditional attention you guys give us is really appreciated. Without the support of this place, a lot of users would not still be around to take advantage of this wonderful service.

Keep Rocking!

Pete 03/2003

This place Rocks!!

The people that run the centre are professional in their job and always seem to show a genuine concern for our welfare and dignity and not just treat us like junkies.

I, and I'm sure everyone else, appreciates that fact. Keep up the good work, I have the utmost respect for all the staff.

Love

Jeff 03/2003

To the Team at MSIC,

I want to take this opportunity to say what a wonderful job you guys are doing and I think you all are life savers! Without this place I'm sure I would have been dead by now. Keep up the excellent work. Many people I've talked to outside of Sydney that use think that there should be at least one in each capital city! It saves lives and keeps people informed and up to date with current drug issues.

You are excellent.

Love

Sally and Eddie 04/2003

The clients’ names and other personal information have been changed to maintain their confidentiality.

ORGANISATIONS THAT SUPPORT THE SYDNEY MSIC

AIDS Council of NSW

**Australian National Council on
AIDS, Hepatitis C and Related
Diseases**

**Australasian Society of HIV
Medicine**

Hepatitis C Council of NSW

**National Centre in HIV Social
Research**

**New South Wales Users and AIDS
Association, Inc (NUAA)**

Social Workers in AIDS

**School of Community Medicine,
University of NSW**

**Royal Australasian Colleges of
Physicians, Psychiatry, Emergency
Medicine**

Australian Medical Association

Dr Ray Seidler, Dr Andrew Byrne

Crosswise Residents' Action Group

**George Miller, Kennedy Miller
Productions**

**Ms Clover Moore,
State Member for Bligh**

**Ms Tanya Plibersek,
Federal Member for Sydney**

**South Sydney City Councillors –
Pooley (Mayor), Harcourt, Shaw,
Lay, Furness, Lennon, and Mallard**

Family Drug Support

Foley House

Ted Noffs Foundation

Inner City Legal Centre

Sisters of Charity Health Service

Baptist Inner City Ministries

Metropolitan Community Church

**St John's Anglican Church,
Darlinghurst**

St Canice's Church, Kings Cross

Mission Australia

Wayside Chapel

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Sydney MSIC PO Box 293, Kings Cross NSW 1340