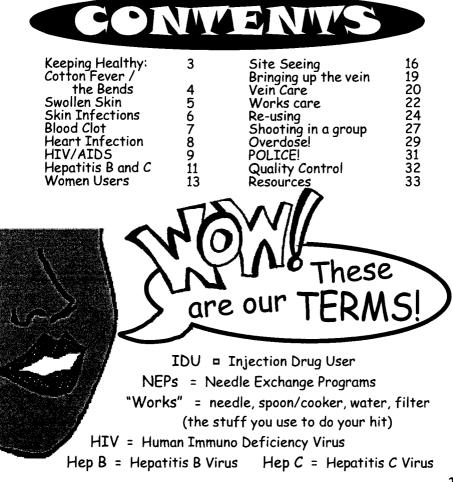


Harm Reduction

Everything you are about to read in this booklet is based on the idea of HARM REDUCTION. Harm Reduction recognizes that abstinence (quitting drugs altogether) isn't realistic or possible for everyone. This approach tries to make sure that drug users get the same chances and choices around health care as non-users. You might have heard the saying "KNOWLEDGE IS POWER" and this is true. By learning about drugs and ways to reduce the harms connected with drugs, you are empowering yourself to make informed CHOICES.

This booklet will provide you with non-judgmental, straightforward, no bull, FACTS so that you can make healthier choices for yourself. So read on, SHOOT CLEAN, FUCK SAFE and TAKE CARE OF YOURSELF AND EACH OTHER!

This pamphlet only deals with Intervenous drug use. For info on muscling (intramuscular injection), piercing, tattooing and skin popping, along with supplies for some of these activities, see your local needle exchange program (NEPS). If you are willing and able to guit using drugs, a needle exchange worker can hook you up with detox and/or treatment options.



Keeping Healthy

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Injections and Infections

As an IDU, you are at risk for different kinds of infections. Read on to find out how to lower the chances of getting them.

Cotton Fever / The Bends (Septicemia)

CAUSE: Scientists don't really know the cause, but most users report it is from injecting a "dirty hit". This could be from fibers in the filter, dirt in the water you use to cook your hit, or the stuff the hit is cut with (see "Quality Control" pg. 32)

SIGNS could be: Nausea (sick to your stomach), vomiting, diarrhea, shivers, convulsive shaking, headache, hot and cold sweating, and twitches, etc...

CARE: Keep warm, cover yourself with blankets (taking a hot bath helps, but only if someone stays with you so you don't drown). Get comfortable and take medication for pain and vomiting if you need to. DON'T take another hit! Go to the hospital if you want to, but get someone else to take you.

REDUCE YOUR RISK: Try to fix in the cleanest space possible. Use sterile water to mix your hit. Always filter your hit. Many users like ear-swab cotton, dental cotton, or a cut-up piece of a dried alcohol swab. Check with your local NEP sometimes they have info on changes in the cut (sometimes they don't).

Swollen Skin (Cellulitis) and Swollen Connective Tissue

CAUSE: Missing the vein or "digging around" with the needle.

SIGNS could be: Redness, swelling, bumps (might look like hives or blisters), that form right after injecting. It can lead to scarring.

CARE: Apply ice or something cold. If swelling doesn't go down in an hour, see a doctor.

REDUCE YOUR RISK: Try to "flag" to make sure you are in the vein (see pg. 20). Pull out if it starts to hurt or swell and try again in a different place (see VEIN CARE pg. 16-21).

Skin Infections (Abcesses)

CAUSE: Dirt or germs on the skin (not cleaning the site properly), missing the vein (and injecting anyway), using the same site over and over.

SIGNS could be: Redness and swelling at the injection site which might turn into a puss-filled sore. It can lead to scarring.

CARE: Clean it with soap and water, then keep it dry and apply a bandage. See a doctor or someone at your local NEP. If left alone, it could turn into a blood infection (septicemia).

REDUCE YOUR RISK: Try to wash your hands and clean your spoon before you cook your hit. Try to rotate sites, and clean your site with an alcohol swab before you inject. Also, try to make sure you're in a vein before you inject (see pg. 20) 10 1 4 9 6 61410-

Blood Clots and Embolisms

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Blood clots can form in veins throughout the body. An embolism is a free-floating blood clot moving through the veins and arteries.

CAUSE: Injecting pieces of dirt or bacteria can cause clots – they get stuck in the vein and block the blood flow. Also, blood clots form around scarred veins.

SIGNS could be: A clot in your arms and legs may cause pain and swelling. In your lungs, it may cause chest pain, shortness of breath, unconsciousness, <u>or death</u>. A blood clot in your brain is called a stroke. This may cause numbness and/or weakness in any part of your body, fainting, blurred vision, speech problems, unconsciousness <u>or death</u>.

CARE: go to a hospital right away --this is serious; you could diel

REDUCE YOUR RISK: You can do this by trying to keep dirt and bacteria out of your hit. Use a new needle, sterile water, clean cooker/and filter every time you inject. You can prevent vein damage by following the vein care tips on pages 20 and 21.

Heart Infection (endocarditis)

CAUSE: Dirt or bacteria in your veins that eventually travels to your heart valves where it builds up and causes damage.

SIGNS could be: Chest pains, shortness of breath, fever, heart palpitations and/or fainting.

CARE: See a doctor when symptoms first appear; if it's left untreated, <u>you could die</u>.

REDUCE YOUR RISK:

Do this by trying to make sure all your works and your injection site are clean. Try to use a new needle every time (see "vein care" pg. 20). Always use a filter!



HIV / AID

State and an address

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Human: We are the only creatures that can carry this virus (not bugs or animals!)

Immuno-deficiency: It weakens your immune system (the part of you that fights off infection and sickness)

Virus: A very tiny parasite that needs your cells to multiply and survive. Viruses are passed from person to person.

AIDS: (Acquired Immune Deficiency Syndrome)

It is not AIDS that is passed from person to person, it's HIV. AIDS is the point in HIV infection when the immune system is weakened and the person starts to get different diseases like certain types of cancer and pneumonia. There is no vaccine or cure for HIV.

HIV is passed through blood, semen (cum), vaginal secretions (pussy juice) and breast milk. To get HIV, the virus in one of these four fluids must come into direct contact with your blood stream. This can happen through sharing injection equipment, through vaginal and anal intercourse and, rarely, cock sucking. HIV hasn't been passed through other body fluids (sweat, tears, spit, piss, shit) because they don't hold enough of the virus to infect a person. When you inject a hit, you make a direct, open path to your bloodstream. This means you are at extreme risk for HIV infection. You can really lower your risk by following some easy steps:

- Don't share, lend or borrow works!
- Clean your needles, syringes (rigs) and spoon/cooker properly if you need to reuse them (see "Cleaning," pg. 24-25). Use your own water and filter every time because they can't be cleaned.
- Don't handle or hold other people's works and don't let them touch yours!

Use a latex condom every time you fuck (ass or pussy) because it's the only thing that can really lower your chance of getting HIV during intercourse!

Contact any of the places at the back of this booklet to find out how to use condoms properly and get free condoms and water based lube.

Even if you already have HIV, you still need to practice the safety tips listed above. There are different kinds of HIV. If you get another kind, you may get sicker quicker, and medicines used to treat HIV may not work for you.



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Hepatitis B (Hep B) & Hepatitis C (Hep C)

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Hep B and Hep C are spread in the same ways as HIV. If you protect yourself from HIV, you are also protecting yourself from getting or spreading these two Hep viruses.

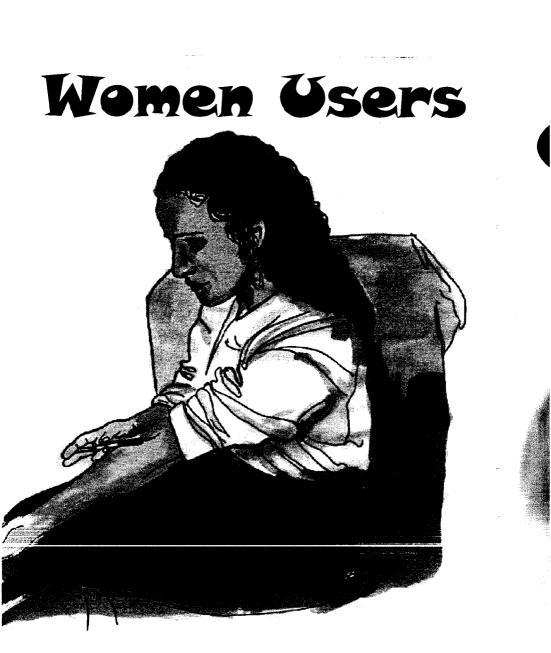
CAUSE: Hep B and Hep C are viruses that infect the liver. The liver works like a filter in our bodies to clean our blood. Some people never get sick from Hep B or Hep C, but others get really sick. Regardless of whether you get sick or not, you can still pass either virus on to others.

SIGNS could be: Being tired, no appetite, stomach pain on the right side, weakness, nausea (sick to your stomach), fever, yellow skin and eyes, dark pee and pale chit. Hep B and Hep C may lead to cirrhosis (liver disease) or liver cancer which, in extreme cases, <u>can kill you!</u>

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CARE: If you think that you have Hep B or Hep C, go to a doctor or clinic and ask for a blood test (they only need one vial of blood, like an HIV test). Once you know whether you're infected or not, you can take steps to stay as healthy as possible. There is a treatment for Hep C, but it doesn't work for many people. The best strategy is to protect yourself from getting either virus in the first place!

REDUCE YOUR RISK: Since there is a vaccine (a medicine that protects you from getting the virus) for Hep B, you can get a HEPATITIS B VACCINATION from your local doctor or health clinic. After you get three intramuscular injections over a six month period, you are immune to Hep B (you can't get it!). This vaccine is free for people who can't afford to pay. Unfortunately, there is no Hepatitis C vaccination, and no cure. Remember, you can protect yourself from getting either of these viruses by following the same safety tips as this booklet recommends for HIV. Shoot clean and fuck safe and you'll avoid HIV, Hep B and Hep C.



Women IDUs have some drug-related concerns that are different from men's. The following tips and ideas were created by and for women users.

Some women can't shoot themselves up. Often, they rely on a partner/spouse to do this for them. But, some partners abuse female IDUs by not shooting them up when they want or need it or by giving them too little or too much of the drug. Abusive partners may also take advantage of women IDUs by raping, beating or robbing them when they're too high, passed out, or sick from withdrawal.

Some women can't score (buy) their own drugs because they don't know, or can't contact, a dealer. They often rely on their partner/spouse for this as well. But, if the partner takes off, a woman is left without a connection and may be forced into withdrawal! Trying to find a dealer at this point is hellish and can be unsafe. To be as safe as possible try to find your <u>own</u> <u>dealer</u> who you trust before the shit hits the fan. Knowing how to inject and score for ourselves means we don't have to rely on others, and reduces our risk of being abused.

Many drugs, including opiates and amphetamines, affect our periods. They may become shorter, longer, or stop altogether. But, we still need to use birth control to prevent pregnancy and use condoms to reduce the chance of getting sexually transmitted diseases (STDs) like HIV.

Women users (con't)

All drugs have some effect on the fetus (unborn baby), some more than others. Some drugs also affect men's sperm, which in turn, may affect the fetus. If pregnant, it is safer to not use drugs, or to reduce the amount. But often, it is more dangerous to both mother and fetus to quit some drugs cold turkey. So if you are dependent on a drug (wired), talk to a doctor about being tapered (slowly weaned off) and getting medical or emotional support. It is safer to snort, swallow or smoke drugs than to inject. If a woman is wired to opiates, it is healthier for her and the fetus to be on methadone. It is also important to see a doctor or nurse practitioner often during pregnancy.

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Drug use by a parent, in and of itself, does not necessarily mean that the child is being abused. However, it can be a reason for investigation by Children's AID or Family Services. Women users with kids can be harassed by people who call, or threaten to call these organizations. While some people may have the best interests of the child at heart, others may be trying to control or punish the woman. If someone is threatening your child custody situation just because you are a drug user, it can be hard to get help. Try a legal clinic for legal advise (look up "Legal information services" in the Yellow Pages). Also, contact a women's crisis line, counseiling service, shelter or NEP worker for support.



Caring for your sites can lower your risk of getting infections listed in the first section of this book.

Generally, the best veins to hit are in the arms and hands. The most dangerous areas are above the shoulders and below the waist. However, when rotating sites, you will have to make some important choices about different sites to hit. Try using veins other than the ones in your arms. This way, you can give your veins a chance to heal and keep them from collapsing. If you can inject with both hands, it will be easier to rotate sites.



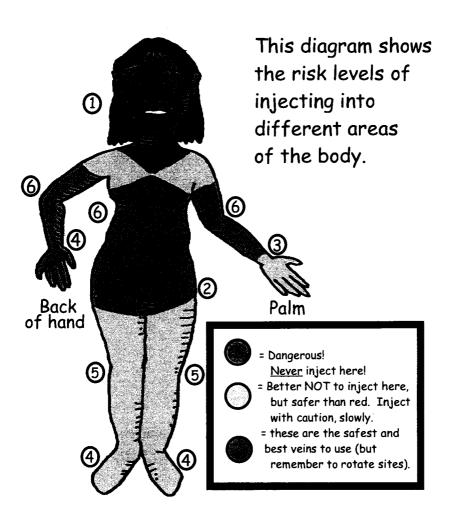
If your veins are totally fucked up, "muscling" (intramuscular injection) is an option for opiate users. For details on how to do this safely, and to get the right equipment, see your local NE. Smoking, snorting, eating and putting it up your ass are other ways to do your drugs. Give your veins a holiday every once in a while. Try to keep at least one good vein for emergency health care purposes (in case you need an IV inserted). 村 、こ 月10日 東 単数部の

The numbers on this page go with the numbers around the picture on the next page.

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- 1 Never inject anywhere on the head or neck! Because these areas are closest to the heart and brain, it's easier to O.D., and abcesses are more dangerous.
- 2 Never inject into groin area you could hit a major artery and lose your leg <u>or die!</u> Also, never inject into the genitals - that goes for both men AND women!
- 3 The inside of the wrist is full of nerves, veins and arteries all really close together. Never inject here.
- 4 The veins on the back of the hand and the top of the foot are fragile, so inject slowly (it will hurt).
- 5 The blood flows slowly in leg veins, so inject slowly (be careful—there's an artery behind the knee). It is easier for blood clots to form here (see pg. 7). Reduce this risk by following the vein care tips on pages 20 and 21.
- 6 If these surface veins are good, use them but rotate sites regularly.



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Bringing Up the Vein

An important part of avoiding abcesses and scarring is to make sure you're in a vein before you inject. If you're having problems finding a vein, use one or more of the following tips.

- Tie a tourniquet (sounds like "turn-a-key") about two inches above where you'll inject. Try a rubber tie-off, panty hose, or a soft belt. But untie it before you start to inject.
- 2. Clench and relax your fist.
- 3. Rub the skin over your vein.
- 4. Gently slap the skin
- 5. Apply a warm cloth over the vein.
- 6. Take a hot bath and you'll find veins you never knew you had. But never take a hit in the bath you could nod out and drown.

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Other useful vein care tips ...

- 1. Use the smallest needle possible to reduce track marks, swelling and bruising.
- 2. See or feel the vein before you start to bang.
- 3. Clean the area with an alcohol swab but dry it off with a clear tissue to avoid stinging.
- 4. Always inject with the bevel up (the bevel is the sliced angle at the end of the needle)!

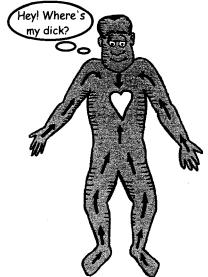


5. "Flag" - pull back on the plunger until you see blood in your barrel (this way you know you're in the vein).



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6. Insert needle in the same direction as the blood flow in your veins (see picture below). Then inject slowly.



7. Never shoot into an artery! An artery has a pulse. You'll know if you hit it because it will hurt, the blood pressure will force the plunger backwards, the blood will look foamy and it will take longer to stop the bleeding. If this happens, take the needle out right away. Press down hard on the site until bleeding stops. If it doesn't stop in 5 minutes, you need to go to the hospital right away!

8. Users suggest some kind of cream to reduce swelling and track marks. One recipe is: equal parts of vitamin E cream, Preparation H, and Polysporin. Others use aloe vera or cocoa butter. Whatever you use, test it first on a place where you don't inject to make sure you're not allergic to it. Woi diff crea

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It's better to use a new needle for every injection. You can bring the used ones to your local NEP and get new ones. Even if you don't have a used needle, most NEPs will still give you new ones, plus other supplies for your works (like sterile water and filters).



Make sure to store the used needles in a container that the needle tip can't poke through. The best things are: plastic bottles or containers, and pop cans. Some NEPs will provide sharps containers.

Cap it, then Snap it

To be extra safe, you should always break off the needle tip. That way no one can re-use your needle, and no one will get punctured with it. All you have to do is this:

Cap the needle and snap the tip off (with the cap) and put them both into a proper container

-OR-

Over a table or sink, remove the plunger, break the needle off, drop it into the syringe and put the plunger back in.

Make sure the tip doesn't poke through the side of the barrel. You need a Steady hand to do this.

> NEVER BREAK OR DISPOSE OF ANYONE ELSE'S NEEDLE!



Sometimes people can't get a new needle and have to re-use one. It's important to clean your used needle properly before anyone (even you) injects with it. Cleaning properly isn't 100% guaranteed to kill Hep or HIV, but it's way safer than doing nothing, and really lowers the chances of getting these viruses. You can get free cleaning supplies from your local NEP.



First, draw cool, clean water up into the syringe and shake for 30 seconds. Squirt the water out. Do this again, using new water.



Next, repeat step 1, using fresh household bleach instead of water. Don't forget to shake both times for 30 seconds!



Repeat step 1, using new clean water from a different container or from the tap.

Clean Cookers

Cleaning your rig with bleach is a good start but it's not enough. If you're sharing your equipment with others vou've also got to clean your cooker (spoon, bottle cap, or whatever you're using to mix your hit). Here is how to do it:

FIRST, rinse your cooker by rubbing it under cool, clean water.

NEXT, put your cooker into a glass of fresh household bleach and let it sit there for a full minute:

FINALLY, rinse your cooker well with more cold water (not the water you used to rinse it earlier), and then let it air dry. Remember - everyone has to use their OWN filter every time!!!



* If you can't get bleach, and you are going to re-use anyway, there are other things you can clean your works with. They don't work as well as bleach and may not kill HIV, hep B, or Hep C, but are safer than not cleaning your stuff. Follow the same steps for cleaning, using soapy water, household cleaner, or hard liquour (like vodka, not beer or brew) instead of bleach but repeat each step 4 times, instead of just 2. And to be extra safe, take your rig apart and let it air dry.

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Sharpening

If you need to reuse a needle, it is important to sharpen it. This gets rid of any barbs that cause vein tears and scars (risks for blood clots - see pg. 7). All you need is a matchbook and some clean water.

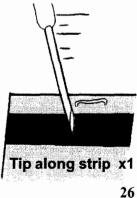
1. Draw up some clean water into the syringe

2. Run the bevel side of the needle along the striking strip two or three times.

3. Flip over and run the needle tip once gently along the strip.

4. Push the water through the needle. Clean the needle with an alcohol swab.





Shooting in a Group

Even if you don't mean to, it's very easy to share works in a party or social situation. Plan ahead to reduce your risks! Make sure you have your own works, and take along extras if you can -especially if you're shooting coke or crack, where you're likely to do many injections. Mark your works to let you and others know that it is YOUR equipment and it is NOT TO BE SHARED with others.



Sometimes there is pressure put on you to share works or there is only one set at the get-together. In this case you need to make sure that ALL the equipment is CLEANED PROPERLY (see "Cleaning/Reusing" pg. 24-25). If other people can't or won't clean the works then DON'T fix with them. Remember it's your lite on the line and no high is worth the low of viruses and bacteria!





CAUSE: An overdose (O.D.) is what happens when you take more drugs than your body can handle.

Amphetamines and Cocaine: (Up)

SIGNS: A "speed" OD can cause a heart attack. Signs of a heart attack may include: shortness of breath, nausea, sweating, anxiety, pain and numbness in chest, arms and neck. Other signs of an OD may include racing pulse, seizure (uncontrollable twitching, "doing the chicken"), rapid breathing and rapid eye movements.

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CARE: Call 911 for heart attack signs or for seizures that last longer than 5 minutes or that happen over and over again. If the person is showing other signs of overdose, stay with them. It may help to move to a quiet, dimly lit room and apply ice or cold towels to the neck and forehead. Keep checking for heart attack signs every once in a while. If convulsing, clear a space so they don't hurt themselves, and DON'T put anything in their mouth. DON'T try to hold the person down (don't restrain!).

Opiates: (Down)

SIGNS: Blue around the mouth, no or weak pulse (check wrist and neck), passed out or unconscious (if you can't wake them up or keep them awake), hardly breathing, or not breathing at all.

CARE: Call 911 right away (<u>or they could diel</u>) and tell them that someone has overdosed (sometimes it's better to tell them that the person has stopped breathing). Don't try home remedies like injecting them with salt water (it doesn't work). Place the person in the recovery position (see diagram below) and stay with them until help comes (if you can). **If you know how to do CPR**, do it if needed.





Unconscious - lying on side



Conscious - sitting up 30





When you call 911 the police, ambulance and firefighters may all come. Remember to stash your drugs and works somewhere out of sight! Be polite and cooperative. Tell them you found this person passed out, for how long, and what you think the person has taken. If the police question you, you only have to give your name and address. Try not to leave the person. But if you have to, make sure to leave the person in the recovery position (see pg 30) and leave the door WIDE open, so the ambulance crew can get in. Lastly, leave a note on the person saying what s/he has taken..



Remember when you are passed out, you are more at risk for being sexually assaulted or raped, having your stuff ripped off, or being hurt. So try to be around people you trust when you are shooting up!

NOTE: Drug users are often treated unfairly or looked down upon by police, ambulance staff and doctors. Always remember that you deserve health care and other services. Don't let other people's bad attitude attect how you teel about yourselt, or stop you from getting the help and support that you need. Talk to your NEP worker for help with this. USC fit

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Quality Control

People cut drugs with different things including: other drugs, dextrose and other powdered sugars, different kinds of anaesthetics and, rarely, different kinds of poisons. Often, it is the cut of the drug that causes health problems, rather than the drug itself. Because street drugs are not controlled and quality tested, the strength (purity) and quality changes all the time. If you have not used drugs for a while, and even if you are a regular user, keep these safety tips in mind to help prevent an overdose:

- Try to find a regular dealer and ask if what you are buying is the same as what you got last time.
- "Taste test" a small amount to make sure that it tastes like what you are used to.
- Always start out with half your dose (regular users) and a quarter (for occasional or curious users). Be sure to let 5-10 minutes pass before doing more (if the hit is too weak).

Needle Exchange Programs

To get the goods (info and supplies) visit your local needle exchange program. Also, some drug stores may sell needles. try to get your supplies before you score, so once you have your drugs, you're ready to roll.

In Ontario call the "Mainline" info line for Needle Exchanges or friendly drug stores near you: 1-800-686-7544

Toronto Needle Exchanges to visit:

Queen West HIV/AIDS & Harm Reduction Project 703-8482 ext:124 168 Bathurst (just south of Queen)

Parkdale Community Health Centre 537-2455 1229 Queen St. West

Street Health Venus Project 964-2459

The Works 392-0520 277 Victoria St. and mobile van.



l'eel free to replace this list with local services.





SPECIAL THANX to Cheryl White. Kim Stanford, Raffi Balian, Sandy Waters, Stove Caetz, Tim Potts, the Parkdale Fun Group,d the 1996 "From All Walks of Life", Queen West Community Health Centre and Shout Clinic (CTCHC) and the Toronto Department of Public Health