HIV Prevention & Access To Sterile Syringes

Dear Colleague:

Approximately one third of all AIDS cases and one half of hepatitis C cases are directly or indirectly linked to injection drug use. Limited access to sterile syringes contributes to the transmission of these blood-borne infections among injection drug users (IDUs), their sex partners, and their children.

The United States Public Health Service recommends that drug users who continue to inject use a new, sterile syringe for each injection to prevent the transmission of blood-borne pathogens and that they obtain syringes from reliable sources such as pharmacies.

In many states, there are legal and regulatory barriers to the pharmacy sale of sterile syringes to IDUs, including prescription and drug paraphernalia laws and pharmacy regulations on syringe sales. The American Medical Association (AMA), the American Pharmaceutical Association (APhA), the Association of State and Territorial Health Officials (ASTHO), and the National Alliance of State and Territorial AIDS Directors (NASTAD) have suggested that the removal or modification of legal barriers is an important step in increasing the availability of sterile syringes through pharmacies. Connecticut, Minnesota, and Maine have made such changes.

AMA, APhA, ASTHO, and NASTAD have adopted the following policies related to pharmacy sale of syringes.

AMA (1997) That the AMA strongly encourages state medical associations to initiate state legislation modifying drug paraphernalia laws so that injection drug users can purchase and possess needles and syringes without a prescription.

APhA (1999) APhA encourages state legislatures and boards of pharmacy to revise laws and regulations to permit the unrestricted sale or distribution of syringes and needles by or with the knowledge of a pharmacist in an effort to decrease the transmission of blood-borne diseases.

ASTHO (1995) ASTHO policy states that as a possible public health strategy to reduce the transmission of injection-related blood-borne infections, states should explore the removal of legal barriers such as drug paraphernalia and prescription laws, which criminalize the distribution and/or possession of needles and syringes.

NASTAD (1997) NASTAD calls on state and local legislative bodies to increase access to sterile needles and syringes through needle exchange programs; to deregulate possession of needles, syringes and associated injection equipment as drug paraphernalia; to
increase access to sterile syringes via sale by pharmacies; and to increase access to
drug treatment for those individuals ready for such treatment.

NASTAD encourages each state health department to work with pharmacy boards
and local law enforcement agencies to change local laws which would increase access
to sterile injection equipment.

AMA, APhA, ASTHO, NASTAD, and the National Association of Boards of Pharmacy (NABP) believe
that coordinated efforts of state leaders in pharmacy, public health, and medicine are needed to address
access to sterile syringes as a means of preventing further transmission of blood-borne diseases.

We encourage you and other state leaders in these fields to meet, assess the situation in your state, and
decide on appropriate approaches to these important public health issues. Other issues that may be
important to consider are the availability of substance abuse treatment and options for safe disposal of
syringes.

For more information, you can contact the following staff members of the organizations issuing this letter:

AMA     LJ Tan at (312) 464-4147, litjen_tan@ama-assn.org
APhA    Jann Skelton at (800) 237-2742 ext 7198, jbs@mail.aphanet.org
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We look forward to working with you to address these significant public health problems.

Sincerely,

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