

Senate Bill 192, the ‘heroin bill’, addressed many different aspects of the heroin problem including mental health, drug treatment while in custody and not in custody, newborn care and public health. The following information relates to the Lexington-Fayette County Health Department’s initial response to the communicable disease and patient referral opportunities provided by the bill. In time the department will consider ways to address its other option.

The Lexington-Fayette County Health Department and the Board of Health decided to participate in a needle exchange program immediately after passage of SB 192 in March 2015. The Board and the department have been involved in Lexington’s Heroin Task Force for several months and understand the need for such a program. This program addresses three objectives:

- Prevent the spread of hepatitis B, hepatitis C and HIV among IV drug abusers and to the general population as sexually transmitted diseases
- Accept referrals for needle exchange and disease counseling from police, emergency medical services and others and
- Assist in referring patients for treatment of their addiction, hepatitis or HIV

The department anticipates having the needle exchange program in operation on or before Labor Day 2015 barring unforeseen problems.

The program will be located at the health department building at 650 Newtown Pike during daytime hours based on input from persons who currently use IV drugs.

Participants will be required to bring used needles if they want fresh ones. Interviews with current drug users suggested this requirement because “they will just toss their dirty needles in parking lots or playgrounds if you don’t make them bring in the dirty ones.

Needle exchange will be done anonymously but there will be a requirement for anonymous user identification

Patients requesting referral for medical or drug rehabilitation services will be required to provide the usual identification required by health care providers.

Planning for the exchange has been coordinated with the Commissioner of Public Safety and the Commissioner of Social Services and the program design has been reviewed by those agencies, health care providers, agencies serving the homeless and persons who have been incarcerated for drug related offenses.

The Kentucky Department for Public Health, national drug abuse experts and persons currently operating needle exchange programs in Cincinnati and other cities have been consulted during the planning. Persons engaging in needle exchange emphasize the following: get started, don't make it complicated, get as many clean needles on the street as you can, be flexible and work to establish trust among the people you are serving.

The inmates stressed the need for confidentiality, trust and their fear that participating in the exchange program could cause problems for them with law enforcement.

The needles and syringes are estimated to cost about ten cents. The lifetime cost of treating hepatitis C is between \$90,000 and \$100,000, hepatitis B is \$65,000 and HIV is \$484,000. The health department will pay for the program with funds from the ad valorem public health tax and contributions because the bill did not appropriate any funds for this purpose and the state health department has advised us that we cannot use any state or federal funding.

The department is working on the details of the procedures and will modify them based on input from the partner agencies.