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Special Issue on injecting, why is this important?

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EDITORIAL

Special Issue on injecting, why is this important?

This is the second special issue on injecting published by the journal and it brings together a number of different papers from across the world. These include qualitative and quantitative research; an exploration of policy in an opinion piece and produces some fascinating information as well as raising other questions. We have gathered papers from Australia, Hungary, Uzbekistan, Northern Ireland and England and Canada. Injecting is a subject of interest to myself and I undertook research in this area and one thing I discovered that apart from some excellent ethnographers and anthropologists much of the published work on injecting has been on epidemiology and routes and risks of transmission of infection.

There is still so much to learn about injecting, habits, patterns, myths etc. Injecting still carries with it the high risks of transmission of infection through poor hygiene, bad practice and lack of availability of sterile injecting equipment. For example, McCurdy et al in 2005, described the phenomenon of "flashblood, a practice undertaken by female injectors in Tanzania where it was believed that the deliberate injection of another's blood would prevent withdrawal from opiates because of the small amount of opiates in the blood of the donor. This is of course an incredibly risky practice. Pates et al (2012) outlined the many diseases that may be spread by injecting. HIV and hepatitis are well known as possible consequences of sharing injecting equipment but the list included malaria, infective endocarditis, tetanus, botulism, necrotising soft tissue wounds, anthrax etc. These may be as the result of infected injecting equipment or the material that is being injected may be infected or that poor injecting techniques that result in open wounds vulnerable to infection. In addition to these risks there is also risk of overdose and damage to the veins and circulatory systems. Injecting remains and inherently dangerous activity but it still practised in most parts of the world where opiates or stimulants are injected.

In this special issue we have tried to cover a variety of issues. Scott Hinton has extended the work on needle fixation presented in the last special issue. Needle fixation (the compulsive practice of injecting over and above the efficient delivery of the drug) and extends the knowledge on this important but neglected area of research. The need to understand this phenomenon is important if agencies are offering treatment to drug injectors. McElrath and colleagues from Northern Ireland present another paper on the practice of injecting by looking at the implications of peer injecting and the risks of the transmission of blood borne diseases, another welcome paper that examines some of the consequences of injecting in different contexts.

Colin Wisely has produced an excellent paper tracing some of the history of drug treatment but also raising the very current concern about getting drug users into recovery. As Wisely comments, recovery is often seen as beyond the capacity for injectors but should in fact be encompassed in treatment plans as early as possible.

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A paper from Australia, by Fetherston and colleagues concerning injecting in prisons raises important questions about this very difficult area. Although needle exchanges are increasingly available in prisons the risks of injecting in this environment is always increased and this paper provides important information about the frequency of injecting among those incarcerated in prisons in Australia. We also include a paper from Uzbekistan on a new phenomeneon of injecting in Tashkent. We are pleased to include this paper as we have little information about injecting in this part of the world.

Lang and colleagues have produced a paper on crisis services for injection drug users in Saskatoon in Central Canada, again important information about what is available in another different part of the world.

Finally we have a paper describing a qualitative paper using an unusual methodology to examine ways of improving needle exchange services in Budapest. I am pleased that we are able to present a variety of methods and topics all related to the important topic of injecting.

Richard Pates, Editor in Chief

References

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