

INJECTING SHARED DRUGS: AN OBSERVATIONAL STUDY OF THE PROCESS OF DRUG ACQUISITION, PREPARATION, AND INJECTION BY PUERTO RICAN DRUG USERS

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BACKGROUND

- Injecting shared drugs is associated with the transmission of HIV and Hepatitis C.
- IDUs in "partnerships" often exhibit differential power relationships, and as a consequence, may be exposed differentially to HIV and HCV.
- In general terms, injecting shared drugs involves using one syringe to pull up water that is expelled into a cooker containing drug(s). The drug is dissolved and a small piece of cotton filter is placed in the cooker. The drug is divided among a number of IDUs by drawing the entire solution into one syringe and then depositing a portion into the barrel of another syringe, either through the back end (backloading) or front end (frontloading). Alternatively, IDUs may draw up drug shares directly from the cooker.

OBJECTIVES

- Extend our understanding of the:
 - Formation of drug-sharing "partnerships"
 - Benefits and costs that "partners" experience
 - Extent to which IDUs assume different "partner" roles

METHODS

Between May 2001 and May 2002 data were collected from:

- Detailed observations of 25 episodes of the injection of shared drugs involving 57 Puerto Rican IDUs residing in San Juan
 - Informal interviews of episode participants, and other IDUs including managers of shooting galleries in which episodes were observed
- Definition of "partner"
- "Partner" identifies the person(s) that an episode participant describes as "the person with whom I shared drugs"
 - A shooting gallery manager was considered a "partner" only if he contributed some portion of the drugs that were jointly prepared and injected
 - A primary "partner" is the IDU that:
 - selects the syringe used to prepare the shared drugs
 - prepares and apportions the shared drugs

- Calculation of "partner" investment
- Value of drugs that "partners" contribute and, if applicable, payment in cash or powder cocaine made to gallery manager

RESULTS

Table 1: Profile of Participants

	Gallery Clients		Gallery Managers	
	#	%	#	%
Gender				
Male	44	93.6	10	100.0
Female	3	6.4	0	0.0
Age				
18-24	14	29.8	1	10.0
25-34	19	40.4	2	20.0
35+	14	29.8	7	70.0
Ethnicity				
Puerto Rican	47	100.0	10	100.0

Sample size: shooting gallery clients n = 47, shooting gallery managers n = 10

- A large majority (93.6%) of shooting gallery clients were male
- Thirty percent of clients were young IDUs under age 25
- Gallery managers were typically older than their clients
- All participants self-identified as Puerto Rican

Table 2: Formation of Drug-Sharing Partnerships

	Drug-sharing Episodes	
	#	%
"Partner" Relationships		
Family	2	8.7
Friends	7	30.4
Acquaintances/strangers	14	60.9
Agreed to Share Drugs		
Before arriving in <i>punto</i>	8	34.8
After arriving in <i>punto</i>	14	60.9
Unknown	1	4.3
Pooling \$/Drugs by "Partners"		
Yes	22	95.7
No	1	4.3
Type of Drug		
Heroin	2	8.0
Cocaine	0	0.0
Heroin & cocaine	23	92.0

Sample size: Episodes n = 25, Episodes with "partners" n = 23

- "Partnerships" were formed between acquaintances or strangers in 60.9% of episodes
- IDUs agreed to share drugs after arriving in the *punto* in 60.9% of episodes; these episodes involved "partnerships" between acquaintances or strangers
- In almost all episodes, "partners" pooled money and/or drugs
- A mixture of heroin and cocaine (speedball) was prepared in 92.0% of episodes

Context in which Participants Injected Shared Drugs

- High HIV seroprevalence (21.0%)¹
- High frequency of daily drug injecting (7.4 times, on average)²
- High frequency of syringe re-use (8.1 times, on average)²

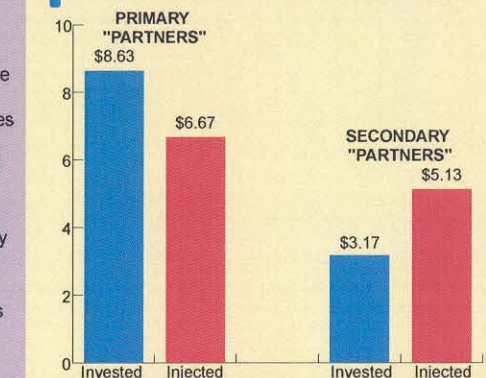
Table 3: Syringe Acquisition by Primary and Secondary "Partners"

Syringe Acquisition	"Partners"			
	Primary		Secondary	
	#	%	#	%
Arrives at Punto with Syringe	11	45.8	17	77.3
New	0	0.0	1	4.5
Used	11	45.8	16	72.7
Obtained New Syringe Immediately Prior to Entering Gallery	3	12.5	2	9.1
Yes	3	12.5	2	9.1
No	21	87.5	20	90.9
Obtained Syringe in Shooting Gallery	10	41.7	3	13.6
New	4	16.7	0	0.0
Used	6	25.0	3	13.6

Sample size: Primary "partners" who are gallery clients n = 24, Secondary "partners" who are gallery clients n = 22

- The condition of a primary "partner's" syringe is important because this is the syringe that is most often used to prepare shared drugs
 - 45.8% of primary "partners" arrived at the *punto* with a previously used syringe
 - 25.0% of primary "partners" possessed no syringe when they arrived at the *punto* and they obtained a previously used syringe from a gallery manager
- The condition of a secondary "partner's" syringe is important; IDUs frequently shift between "partnership" roles, and a secondary "partner's" syringe may function as a preparation syringe in future drug sharing episodes
 - 72.7% of secondary "partners" arrived at the *punto* with a previously used syringe
 - 13.6% of secondary "partners" possessed no syringe when they arrived at the *punto* and they obtained a previously used syringe from a gallery manager

Figure 1: Mean Monetary Investment and Mean Value of Drug Solution Injected Per Episode by Type of "Partner"



- Primary "Partners"
- Primary "partners" typically purchase a bag of white heroin powder (\$10.00), and seek to pool with IDUs who have a small quantity (\$1.00 or \$2.00) of powder cocaine
 - Primary "partners" invest, on average, \$8.63 but they inject, on average, drug solution worth \$6.67; they experience an average loss of 17.3%
 - IDUs are not primary "partners" exclusively; they move between the roles of primary and secondary "partners"
- Secondary "Partners"
- Secondary "partners" typically possess small quantities of cocaine powder, and seek to pool with IDUs that possess heroin, the more expensive speedball component
 - Secondary "partners" invest, on average, \$3.17 but they inject, on average, drug solution worth \$5.13; they experience an average gain of 80.9%
 - IDUs are not secondary "partners" exclusively; they move between the roles of secondary and primary "partners"

CONCLUSIONS

- Primary "partners" who possess heroin pool drugs with IDUs who have small amounts of cocaine in order to:
 - Expend less time and effort raising money when they are drug sick
 - Avoid buying an entire bag of cocaine when they need a small amount
 - Avoid being charged with drug possession when leaving the *punto* with a partial bag of cocaine
- Secondary "partners" with small amounts of cocaine pool drugs with IDUs who have heroin in order to:
 - Expend less time and effort raising money when they are drug sick
 - Inject a portion of drug solution that contains heroin, which they are unable to purchase directly because they lack money for the minimal unit sold by drug dealers
- IDUs move between "partner" roles, sometimes within minutes or hours. As a result, their risk of HIV/HCV infection may be similar.
- Current interventions do not adequately address risks associated with the injection of shared drugs. We need to identify HIV/HCV risk reduction materials and methods that recognize the underlying logic of injecting shared drugs, and promote the safer practice of this behavior.

REFERENCES

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