

INFORMATION AND SUPPORT

A Needle and Syringe Program (NSP or the exchange) worker can give you information, help you find services and make appointments for you.

Melbourne Sexual Health Centre
1800 032 017 • www.mshc.org.au
Free testing for HIV and all other sexually transmissible infections.

PEP Information Line
1800 889 887
Information and guidance on how to access PEP.

Victorian Equal Opportunity and Human Rights Commission
1300 292 153
Assistance and advice if you feel you have been treated differently or less favourably.

DirectLine
1800 888 236 • www.directline.org.au
24-hour. If you want to talk to someone about your drug use or find a support service.

Touchbase
www.touchbase.org.au
Online harm reduction resource for LGBTIQ+ people.

Agency details:

SAFER
USING **11**

INFECTIONS

INJECTING INCREASES

THE RISK OF INFECTIONS

For people who inject, the main infections of concern are:

- + Bacterial infections
- + Blood-borne viruses

Some infections are confined to a specific area or body part but can spread or cause secondary infections. Other infections affect your whole body.

DIRTY HITS

A dirty hit is a catch-all word for when you've injected something that causes an infection or makes you sick.

It's often because there was something nasty in the hit, like bacteria, fungus, cotton fibres or something the drugs were cut with.

Specific conditions of an infection can include:

ABSCESSES

An abscess is a collection of pus which can form anywhere in the body.

Most abscesses that affect people who inject are in the skin or soft tissue where someone has injected.

They can be swollen and painful, and can have a foul smell if pus leaks.

If untreated an abscess can:

- Become inflamed
- Lead to ulcers
- The infection can spread (including to the bone)
- Cause blood poisoning.

Don't try and squeeze or lance an abscess yourself as this can make the infection much worse.

How abscesses form

Abscesses are often caused by a missed hit, germs, bacteria or contaminants/insoluble matter in the hit.

These things cause an infection that your body tries to fight with white blood cells moving in to the infected area and pus forms.

You risk an abscess when you:

- Inject pills
- Reuse or share fits
- Don't prepare the injection site properly
- Inject in a hurry
- Inject in the same site often.

Abscesses are a serious health concern and can get worse very quickly. They need urgent medical attention for lancing and medication.

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posed by model

CELLULITIS

Cellulitis is a skin and soft tissue infection that causes the infected area to become hot, red, and very painful.

It's caused by bacteria or irritants getting under the skin.

It may start at an injection site but can spread.

If untreated, cellulitis can develop into other, more serious conditions.

Possible signs of these infections can include:

- Redness
- Swelling
- Heat
- Tenderness/pain
- Pus formation.

If you think you might have cellulitis you should seek medical advice immediately. Cellulitis can be treated with antibiotics.

SEPTICEMIA

Septicemia is blood poisoning and is very serious. It is caused by bacteria getting into your blood stream.

Symptoms include:

- High fever
- Dizziness, lightheadedness or faintness
- If untreated, Septicemia can cause potentially fatal complications. You must seek medical treatment.

Septicemia is treated with antibiotics.

BACTERIAL ENDOCARDITIS

Bacterial endocarditis is an infection of the valves and inner lining of the heart and can cause heart failure and even death.

Symptoms include:

- Chest pain
- Fever/chills
- Aching
- Persistent cough
- Shortness of breath
- Night sweats.

Don't ignore the signs of infection and don't assume that infections will get better by themselves.

You should see a doctor urgently. The sooner you get an infection treated, the better the chance that things will go well.

Most cases of endocarditis can be treated with a course of antibiotics, although some cases may need surgery.

These infections don't heal by themselves. Any of these infections, if left untreated, can result in hospital, intensive care, surgery, amputation and even death.

INCREASED RISK OF INFECTIONS

If you are already run down the chances of bacterial or fungal infections becoming more complicated are increased.

Poor hygiene or living conditions can add to the risks.

Ongoing use of some drugs like ice lowers your immune system's ability to protect you from infections.

There are things you can do to reduce the risk of infections:

- Always use new sterile injecting equipment
- Wash your hands before and after injecting and keep things as clean as possible
- Don't share **any** injecting equipment
- Rotate injection sites
- Use the smallest needle possible
- Make sure you are in a vein – jacking back will result in dark blood showing in the barrel
- Don't lick the needle as there are bacteria in your mouth that can cause fungal infections if injected
- Use sterile filters to try and get rid of contaminants
- Use sterile water.

There is information on safer injecting in the brochures titled 'Injecting', 'Veins' and 'Pills and Medicines'.

BLOOD BORNE VIRUSES (BBVS)

A BBV is spread when the virus transfers from one person and into another in blood or sexual fluids.

Hepatitis C (hep C) is a BBV. Hepatitis C can now be treated easily. There is information on hep C in this series in the brochure titled 'Hep C'.

Hepatitis B (hep B) is a BBV that causes inflammation of the liver and increased risk of liver cancer.

Hep B is preventable and treatable. A doctor will be able to give you information about prevention and treatment. You can speak to a GP about getting vaccinated against hep B.

Hep B can be spread through sharing injecting equipment or unprotected sex.

If there is a chance you were exposed to hep B you should consider getting tested. An NSP worker can help you find where to get tested.

HIV

HIV is a virus that slowly weakens the immune system until it can't fight off some infections. It usually spreads through unprotected sex, sharing needles and other injecting equipment, or through pregnancy, childbirth, and breastfeeding.

HIV is easily treatable. Not only does treatment protect you and your health from the virus, it can prevent HIV in your sexual partners.

Getting tested for HIV is an easy way to keep on top of your sexual health. Tests are quick, easy, and available from any doctor, with results usually available in less than 10 days.

If you test positive for HIV, your doctor can help you get on treatment, or you can contact the Victorian HIV Service at the Alfred Hospital on (03) 9076 6081.

Condoms

Condoms are an easy way to protect against HIV, STIs, and unwanted pregnancy.

They are available for free from NSPs, many doctors and health care providers, or at low cost from most supermarkets and convenience stores.

Treatment/undetectable viral load

When people with HIV are on effective treatment and have very low levels of virus in their body (or undetectable viral load) they cannot pass on HIV.

If you already have HIV, getting on treatment and taking it every day can protect your health, and reduce the chance of passing on HIV.

Pre-exposure prophylaxis (PrEP)

Pre-exposure prophylaxis (PrEP) is the regular use of HIV medications by HIV-negative people to prevent HIV.

Taken as prescribed, PrEP is highly effective at preventing HIV and helps people control their risk of HIV infection.

PrEP is available with a prescription from a doctor, which can be filled at a community pharmacy. Some pharmacies may need to order it in. The normal prescription charges apply.

For more information on PrEP you should speak to your doctor or to Thorne Harbour Health (formerly the Victorian AIDS Council) on Toll Free: 1800 134 840. More information is also available at PAN.org.au.

Post-exposure prophylaxis (PEP)

PEP is a four-week course of medicine you take if you think you've been exposed to HIV. The medicine aims to prevent you from becoming HIV-positive.

You need to begin PEP within 72 hours of being exposed to HIV. If you think you need PEP you should contact the PEP Infoline on 1800 889 887.

RIGHTS

There are laws against discriminating against someone on the grounds that they have a BBV but this does not mean that it won't happen. Think about who you tell that you have a BBV.