

Hello,

My name is Ellen Taraschi and I am a nurse practitioner working with Maine Family Planning in Bangor. For the last year I have been working with the Maine CDC and community partners to respond to the HIV cluster in Bangor happening amongst unhoused folks who inject substances. We have been lucky to have multiple syringe service providers in the Bangor area to blunt what could have been an explosion of HIV cases. As of March 14th, we are at 21 confirmed cases. The majority of these cases are also coinfecting with hepatitis C, another blood borne pathogen.

The syringe service providers in the Bangor area have been saving lives since they've been open but particularly so, now. Health Equity Alliance (now closed), Wabanaki Public Health and Wellness, and Needlepoint Sanctuary have all been keeping Bangor safer and healthier by being able to provide the syringes people need. If LD291 were to be signed into law and they were only allowed to do one-for-one exchange, we would likely see a sharp increase in HIV and hepatitis C cases and lives ultimately needlessly lost.

It is well known by now that syringe service providers help to reduce the incidence of blood borne pathogens such as HIV and viral hepatitis. Kerr et. al explained that "restrictive syringe exchange policies are associated with lower sterile syringe coverage and elevated injection-related risk behavior" such as sharing needles with people who are infected with either HIV, hepatitis C, or both. Blumenthal et. al demonstrated in their study that people who have 150% of the syringes they will actually need are the least likely group of people who use drugs to utilize used needles to inject substances.

Forcing people to return used needles to get clean ones increases the risk of needlestick injuries and subsequently exposure to bloodborne pathogens. The likelihood that people will only be returning their own used needles is highly unlikely. Say, for example, someone is unable to pick up their own new needles and needs a friend to pick them up for them, that person will have to take their friend's used needles and transport them for exchange. Under this proposed rule change, instead of being able to quickly and safely dispose of used needles, people will be forced to have them in their possession thereby increasing risk of injury and subsequent infection.

If someone is unable to get to the syringe exchange themselves and a friend is not able to pick up for them due to not having enough syringes to exchange, that person who was unable to make it to the exchange may not have any clean syringes to use and may be more likely to share with someone.

Both the Federal CDC and SAMHSA endorse a needs based syringe exchange model of care. Studies show that people who have fewer clean needles will not use fewer drugs AND ALSO, people who have access to a larger number of needles will not use more drugs (Kerr et. al, 2010). Studies also show that the more needles people have access to does not mean more syringe waste being found in the towns/municipalities where the syringe service providers were

operational (Blumenthal et. al, 2008). If the goal is to reduce the use of illegal drugs and syringe waste, a one-to-one exchange has been shown to be ineffective.

It is imperative that syringe service providers throughout the state of Maine not be hamstrung by a one-for-one exchange model. I urge you to Ought Not to Pass on LD 291 to protect the public health of our state.█

Thank you for your time and consideration.

Ellen Taraschi, MSN, FNP/WHNP

Citations:

Am J Public Health. 2010;100: 1449–1453. doi:10.2105/AJPH.2009.178467

Bluthenthal RN, Anderson R, Flynn NM, Kral AH. Higher syringe coverage is associated with lower odds of HIV risk and does not increase unsafe syringe disposal among syringe exchange program clients. Drug Alcohol Depend. 2007 Jul 10;89(2-3):214-22. doi: 10.1016/j.drugalcdep.2006.12.035. Epub 2007 Feb 5. PMID: 17280802; PMCID: PMC2562866.

Commented [1]: I would add an urgency line here of something like "I urge you to Ought Not to Pass on LD 291 to protect the public health of our state."

Commented [2]: Agreed!

Ellen Taraschi
Bangor
LD 219

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