NEEDLE EXCHANGE

- In 1999, the Contra Costa Board of Supervisors endorsed a State of Emergency with respect to HIV and AIDS to allow for the provision of needle exchange services. A major interest was to reduce transmission in women and to their unborn children.

- Since 2006, a State of Emergency declaration is not needed if an annual update on activities is provided and public comment is invited.
HIV/AIDS in Contra Costa County

- As of December 31 2009, 1,816 individuals were living with AIDS or HIV in Contra Costa.

- Approximately 81% are male and 19% are female. African Americans are 30% of those living with HIV or AIDS, Whites 47% and Hispanics have increased to nearly 19%. The predominant transmission among those living with HIV or AIDS remains men who have sex with other men (MSM).
Changes In Legislation

- Federal law now allows use of selected federal funds for syringe exchange in limited circumstances. CDC guidance issued to the State Office of AIDS includes authorization for use of some CDC pass-through funds for this purpose.

- SB 1159 was extended through 2018, allowing registered pharmacies to sell syringes without a prescription.
HIV/AIDS Diagnoses Among Injection Drug Users (IDU) in Contra Costa County 2000 - 2009

Year of Diagnosis

Male IDU

Female IDU
Infants Testing Positive for HIV Antibodies at Birth Over Time
(total n=130)
Reported Chronic Hepatitis C Cases
Law Enforcement and First Responder Exposures

![Bar Chart]

- **All Exposures**
- **Needlestick**

Yearly exposures from 2004/05 to 2009/10.
Funding for Needle Exchange

- Current (10/11) contract for $59,000 includes $10,000 in one-time only funds from the State.
- Offer condoms and other risk reduction materials as available.
- Agency continues to seek and receive small sums of other private funding to support operations.
Contacts at Needle Exchange Sites
Number of Syringes Distributed

![Graph showing the distribution of syringes from 2004 to 2010. The y-axis represents the number of syringes distributed, ranging from 0 to 400,000. The x-axis represents the years from 2004 to 2010. The graph shows an initial increase in distribution, peaking around 2006, followed by a decline in subsequent years.]
Secondary Exchanges Reported

![Graph showing secondary exchanges reported over time. The graph has a blue line that peaks around 0607 with a peak value above 7000 and then decreases over time. The x-axis represents dates from 0405 to 0910, and the y-axis represents values from 0 to 8000.](image-url)
AODS Service Enrollment

Enrollment in AODS Sites Over Time

- 0607
- 0708
- 0809
- 0910

- African Am
- White
- Hispanic
Other Prevention Strategies to Reduce Transmission of HIV in IDUs

- Anonymous Partner notification and counseling services
- Prevention with positives program
- Homeless collaborative
- HIV testing services in community and in Alcohol and Other Drugs Services programs.
- Pharmacy syringe sales (State DPDP) in two chains and a few other stores.
Syringe Disposal Options

- **West County**
  Household Hazardous Waste facility
  101 Pittsburg Ave., Richmond, CA 94801   1-888-412-9277

- **East County**
  Delta Household Hazardous Waste Collection Facility
  2550 Pittsburg/Antioch Highway, Antioch, CA 94509   925-756-1990

- **All Contra Costa County residents**
  Sutter Regional Medical Foundation
  4053 Lone Tree Way, Antioch, CA 94509   925-756-3400

John Muir Pharmacy
1220 Rossmoor Pkwy, Walnut Creek, CA 94598
CONCLUSIONS

1. Access to clean needles through needle exchange and pharmacy syringe services remains a necessary Public Health measure to reduce transmission of blood borne diseases. While overall infections attributed to injection drug use have declined over time, over the last 3 years there has been an increase in the number of new cases of HIV / AIDS attributed to injection drug use among men. The availability of needle exchange and pharmacy syringe sales is necessary to control this trend.

2. Reported local law enforcement exposure to potential blood borne pathogens via needle stick injury has not increased since needle exchange and pharmacy sales have been implemented. Materials for Law Enforcement to document potential exposure and request assistance are available on the website.

3. The contract for needle exchange services remains an important HIV prevention service component and should remain in effect so long as the service is provided. The service is a necessary component to reduce transmission of HIV and Hepatitis.