

INJECTING DRUG USERS' AND PHARMACISTS' EXPERIENCE ON PHARMACY – BASED SYRINGE ACCESS AND SOCIAL SERVICES IN LITHUANIA

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Abstract

Aim. Assess injecting drug users' and pharmacists' experience on pharmacy – based syringe access and social services in Lithuania.

Method: 50% simple random sample pharmacists study was conducted in Vilnius, a simple random sample study in Alytus and Visaginas. 323 pharmacists were interviewed, 75% of them had sold syringes for injecting drug users (IDUs) over the last 4 weeks. Simple random sample IDUs study was done with 10% SE (95% CI). The sample consists from 326 IDUs, 72.5% of them were men, 27.5% women. All respondents were current IDUs, 66.1% of them had visited pharmacies last week, and 32.3% last time obtained a syringe in a pharmacy.

The results showed that the main item purchased by IDUs in pharmacies were syringes (91%) and the main indicated reason – convenience (63.6%). More than half of IDUs feel safe in a pharmacy. Visual identification of IDU is problematic and associates with certain attributes: saleable item, appearance, behaviour. Pharmacists' attitude towards HIV prevention is sceptical, and conditioned due to the lack of information: majority had never participated in any HIV prevention training. Main indicated obstacles for HIV prevention were subjective: antipathy, discomfort, insecurity, and objective: negative community and pharmacy clients' attitude towards the pharmacy supporting IDUs.

Conclusion. Research results indicate that the most convenient place to obtain sterile injecting equipment for IDUs is syringe exchange programs, pharmacies are in the second place for their convenience due to the longer working hours and better accessibility. Pharmacists feel alone coping with problems related to drug use and IDUs visits and expressed the need to learn more. Educational courses could encourage pharmacies not only to sell SIE but also to distribute information leaflets and provide linkages to other services which may be widely applicable for HIV prevention in Lithuania, especially due to the fact that IDUs is a major force of HIV transmission.

Keywords: HIV prevention, injecting drug users, pharmacists, harm reduction services.

BACKGROUND

Lithuania, a country in the Eastern Europe with a population of about 3.34 million (2009) [1], is surrounded by countries who have registered a peak in the spread of HIV over the last few years: Estonia reported 545, Latvia – 358, Belarus – 878, Poland – 804 new HIV cases in 2008 [2].

The first HIV-positive case transmitted through drug injection was diagnosed in Lithuania in 1994, and since 1996-1997 the main driving force of HIV epidemic in the country is injecting drug users (IDUs). Since 2002, there are 100-130 new HIV cases

diagnosed annually, 75% of new cases are contracted through injecting drugs [3].

The first estimation of drug use prevalence in 2007 showed that there might be approximately 4300 problem drug users in the country [4]. Recent HIV prevalence study (2008) estimated 8% (95% CI: 5.5–10.7%) HIV prevalence among IDUs and stated that Lithuania has a concentrated HIV epidemic among IDUs [5, 6].

Syringe exchange programs (SEPs) which are playing an important role in increasing access to sterile injecting equipment (SIE) for IDUs and are effective in reducing syringe sharing and reuse [7,8,9], began to operate in Lithuania in 1997, and in 2007 twelve SEPs were available in the cities with the highest drug addiction incidence rate (Klaipeda, Vilnius, Alytus, Kaunas, etc.). However these services are delivered at a fixed time (working

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days, hours, etc.) and specific places, therefore it is problematic for IDUs to obtain SIE in the evenings, on weekends and during the holidays [5,10].

An anonymous IDUs survey conducted in the capital city Vilnius in 2007 revealed, that the main source of new needles/syringes in the last 6 months was not SEP (32.8%), but pharmacy (60.7%) [6]. It also proved that pharmacy where syringes are available without prescription is an important component in HIV prevention [11]. There is a lack of data related to the use of pharmacy as a source of SIE, pharmacists' experience in providing SIE to IDUs and possibilities for the pharmacies to participate in HIV prevention. **The aim of the research** was to assess injecting drug users' and pharmacists' experience on pharmacy – based syringe access and social services in Lithuania. The study was supported by the United Nations Office on Drugs and Crime project “HIV/AIDS prevention and care among injecting drug users and in prison settings in Estonia, Latvia and Lithuania”.

MATERIAL AND METHODS

The study was carried out in 2 cities with the highest drug addiction prevalence rate [5] – Visaginas and Vilnius (591.7 and 474.5 cases/100 000 pop. respectively). A smaller city – Alytus (146.6 cases/100 000 pop.) where the services for IDUs are well developed was chosen for the data comparison. The research was carried out in August–October, 2008.

A 50% simple random sample of pharmacists study was conducted in Vilnius, a simple random sample study in Alytus and Visaginas. In total 131 (out of 170, 77.1%) pharmacies were reached in Vilnius and all pharmacies in Alytus (n=34) and Visaginas (n=8). From 1 up to 3 pharmacists were interviewed in each pharmacy, in total – 323 pharmacists: 251 in Vilnius, 56 – in Alytus and 16 – in Visaginas (Table 1).

The IDUs research was conducted by the Lithuanian Red Cross Society SEP in Alytus, mobile SEP of Vilnius Centre for Addictive Disorders in Vilnius and mobile SEP of Charity and Support Fund *Vilties svyturys* in Vilnius and Visaginas. Random sampling was done with 10% SE (95% CI) according to the drug addiction prevalence rate [8]. The sample consists of 236 IDUs: 111 in Vilnius, 66 in Visaginas and 59 in Alytus (Table 2).

IDUs and pharmacist's experience on pharmacy – based syringe access was evaluated using unique questionnaires from questions groups. For the pharmacists' research a questionnaire of 7 questions' groups was used: socio-demographics, pharmacy location, experience

Table 1. Comparison of the injecting drug users' study population between cities

	Vilnius		Visaginas		Alytus		χ^2	p
	N	%	N	%	N	%		
Gender							2.78	0.25
Male	75	67.6	52	78.8	44	74.6		
Female	36	32.4	14	21.2	15	25.4		
Age (quintiles)							52.70	0.001
Till 23	18	16.3	17	25.8	1	1.7		
24-26	29	26.1	16	24.2	8	13.6		
27-30	29	26.1	16	24.2	5	8.5		
31-36	19	17.1	11	16.7	15	25.4		
37 and >	16	14.4	6	9.1	30	50.8		
Education							27.08	0.003
Primary or less	13	11.7	11	16.9	2	3.4		
Basic	17	15.3	23	35.4	20	33.9		
Secondary	56	50.5	30	46.2	28	47.5		
Specialized secondary or higher	25	22.5	1	1.5	9	15.2		
Visited pharmacy last week							17.29	0.001
Yes	80	72.1	50	75.8	26	44.1		
No	31	27.9	16	24.2	33	55.9		
Last syringe obtain in:							187.1	0.001
Pharmacy	44	40.0	26	39.4	6	10.2		
SEP	54	49.1	39	59.1	53	89.8		
Other	12	10.9	1	1.5	0	0.0		
Comfortable place for SIE							20.92	0.001
Pharmacy	41	36.9	25	37.9	0	0.0		
SEP	61	54.9	40	60.6	59	100.0		
Friend / drug dealer	9	8.2	1	1.5	0	0.0		
Feelings in pharmacy							14.47	0.001
Safe	71	66.4	43	68.3	40	70.2		
Unsafe	36	33.6	20	31.7	17	29.8		
Main item in pharmacy								
Syringes	101	93.5	65	100.0	35	72.9	26.30	0.001
Water for injections	16	14.5	21	32.3	1	2.1	18.80	0.001
Alcohol sponges	19	17.3	7	10.8	3	6.3	3.99	0.136
Condoms	11	10.0	3	4.6	1	2.1	3.99	0.136
Syringe size							33.80	0.001
0.5 ml	13	11.8	16	24.6	3	7.5		
1 ml	18	16.4	22	33.8	0	0.0		
2 ml	68	62.7	25	38.5	31	77.5		
5 ml	10	9.1	2	3.1	6	15.0		
Need of syringe at night							6.58	0.037
Yes	40	36.0	35	53.8	20	34.5		
No	71	64.0	30	46.2	38	65.5		

with IDUs visits and items obtained, problems related to drug user's visits, client's identification, pharmacists' attitudes and possibility to participate in HIV prevention.

For the IDUs research the interviewer-administered questionnaire of 5 questions groups which would elicit data on socio-demographics, drug use history and health problems, HIV related risky behaviour and knowledge, access to SEP and availability of SIE in pharmacies was used. Statistical analysis of the accumulated data was performed by statistical analysis package *SPSS 13.0* for *Windows*.

Table 2. Comparison of the pharmacists' study population between cities

	Vilnius		Visaginas		Alytus		χ^2	p
	N	%	N	%	N	%		
Gender							4.52	0.105
Male	19	7.6	1	6.2	0	0.0		
Female	232	92.4	15	93.8	56	100.0		
Age (quintiles)							13.91	0.084
Till 29	51	20.3	0	0.0	13	23.2		
30-39	57	22.7	1	6.2	8	14.2		
40-46	41	16.3	4	25.0	15	26.8		
47-53	44	17.5	4	25.0	10	17.9		
53 and >	58	23.2	7	43.8	10	17.9		
Work experience (quintiles)							11.20	0.191
Till 1 year	42	17.3	0	0.0	8	14.8		
1-1.11	30	12.3	1	6.2	3	5.6		
2-3	74	30.5	3	18.8	15	27.8		
4-7	45	18.5	6	37.5	14	25.9		
8 and >	52	21.4	6	37.5	14	25.9		
Education							6.95	0.326
Higher, university	145	57.8	5	31.2	31	55.4		
Higher, non-university	27	10.8	4	25.0	9	16.1		
College	76	30.2	7	43.8	16	28.5		
Other	3	1.2	0	0.0	0	0.0		
Sold syringes during career							1.14	0.566
Yes	238	95.2	15	93.8	55	98.2		
No	12	4.8	1	6.2	1	1.8		
Sold syringes during last month							2.22	0.329
Yes	186	74.1	14	87.5	45	80.4		
No	65	25.9	2	12.5	11	19.6		
Problems with IDUs							10.00	0.007
Yes	161	70.3	6	37.5	41	78.8		
No	68	29.7	10	62.5	11	21.2		
Problems with IDUs identification							5.96	0.051
Yes	142	62.0	14	87.5	38	73.1		
No	87	38.0	2	12.5	14	26.9		
Syringe size							14.8	0.001
0.5 ml	10	4.4	1	6.3	0	0.0		
1 ml	49	21.6	12	75.0	1	1.9		
2 ml	151	66.5	3	18.7	39	75.0		
5 ml	4	1.8	0	0.0	11	21.2		
10 ml	10	4.4	0	0.0	0	0.0		
20 ml	3	1.3	0	0.0	1	1.9		
Perceived drug using level							9.04	0.171
No problem	11	4.5	0	0.0	0	0.0		
Low	71	29.4	1	6.2	13	24.1		
Medium	115	47.5	12	75.0	30	55.6		
High	45	18.6	3	18.8	11	20.4		

RESULTS

IDUs research

All respondents (100%) were injecting drugs during the last month, 66.1% of them visited pharmacy last week, an average 4.2 times (SD=3.5) in Vilnius, 3.3 times (SD=2.5) in Visaginas and 3.1 times (SD=1.9) in Alytus, absolute majority (91.0%) for the basic item – syringe. The average

of purchased syringes varied in all cities: average of obtained syringes in Vilnius is 2.69 ml (SD=0.80), in Visaginas – 2.20 ml (SD=0.85) and in Alytus – 3.0 ml (SD=0.68). Vilnius (62.7%) and Alytus (77.5%) IDUs bought much more 2 ml size syringes comparing with Visaginas IDUs, who much more often used 0.5 and 1 ml syringes (58.4%). None of the respondents indicated the need of bigger than 5 ml size syringes. Analysis of pharmacy visitors portrait showed some tendencies, that pharmacies are much more often used by women (70.8%) than men (64.3%), by younger respondents (\bar{x} =30.0, SD=7.0) rather than older (\bar{x} =32.0, SD=7.0), with lower injecting frequency per day more (\bar{x} =3.0, SD=1.0) than higher (\bar{x} =4.0, SD=1.0), but in all those cases the differences were statistically insignificant.

The main indicated reason for choosing the pharmacy is convenience (63.6%) – close to home, on the way, the second reason – pharmacies sell SIE (25.3%). For these reasons IDUs more often visit pharmacies which are located in big market centres (56.1%). This statement reflects the convenience, because the studied cities have well developed networks of supermarkets with pharmacies. Vilnius IDUs reported visiting pharmacies with separate entrance last time as well (22.7%), Visaginas IDUs – pharmacies which are located separately (23.0%), Alytus IDUs – which are in the hospital/clinic (14.9%). IDUs visited pharmacies mostly alone (78.3%) at a different time of the day (48.2%), i.e. when a syringe is needed.

Analysis of safety in the pharmacies showed that more than half (67.8%) of IDUs feel safe in a pharmacy. In many cases the pharmacists don't pay attention (64.8%), but there are situations (30.9%) where the pharmacists criticize or do not sell SIE (12.0%). Only 8.0% IDUs confirmed that pharmacists encouraged them to seek help from professionals, mostly in Vilnius (10.5%).

Absolute majority of Vilnius and Visaginas IDUs would like that pharmacists changed syringes (93.7% and 87.9% respectively), supplied alcohol sponges (91.0% and 90.9%), distributed water for injections (88.3% and 89.4%) and condoms (84.7% and 87.9%), consulted (82.0% and 87.9%) or referred to the drug treatment services (83.8% and 89.4%). The least services from pharmacists were requested by Alytus IDUs (less than 20% of mentioned above), that may be associated with an effective activities of SEP.

In general the most comfortable place to obtain SIE for IDUs is a SEP. This statement was confirmed by 67.8% of IDUs. Pharmacy is in the second place.

Pharmacist's research

Pharmacists' study also confirmed that IDUs very often visit pharmacies and the main items obtained are syringes: 95.7% of them have sold syringes for IDUs during working career, slightly fewer (75.9%) over the last 4 weeks.

A visual identification of a drug user is problematic for 65.3% of pharmacists and it doesn't depend on the working experience, job position or education ($p>0.05$). The vast majority of pharmacists indicated that for them an IDU associated with certain attributes: saleable item (one syringe (97.4%) or water for injection (69.0%)), appearance (strange look (77.1%) or strange eyes (65.3%)) and behaviour (on the run (85.1%), nervous (79.6%), fast disappeared (70.6%)). Mostly pharmacists recognized drug user as a man (83.2%) rather than a women (1.3%).

Pharmacists reported that IDUs visited pharmacies mostly alone (64.3%), at different times of the day (67.0%), and pharmacies located in market centres with separate entrance more (44.4%) than with a common entrance (40.1%).

Pharmacists' and IDUs' researches confirmed the same size of obtained syringe. Vilnius and Alytus pharmacists indicated that IDUs more frequently have bought 2 ml size syringes (66.5% and 75.0% respectively), Visaginas pharmacists stated that more popular are 0.5/1 ml size syringes (81.3%). An important finding of the research is a fact that IDUs have bought bigger – 10 and 20 ml size syringes. The need of such size of syringes wasn't evaluated by IDUs research and that leads to an assumption that pharmacists face wider scale of problematic drug users.

The analysis of study results showed that majority of respondents (50.3%) estimated drug using level in the pharmacy's neighbourhood as medium and it associated with the number of IDUs visits, i.e. pharmacists who saw more than 50 IDUs per month evaluated drug use level as high ($\chi^2=64.17$, $df=9$, $p=0.001$).

A personal safety in the workplace, if a pharmacy carries out HIV prevention programme was considered as negative by the pharmacists: 89.2% believe that it decreases staff safety, 85.1% feel unsafe and 70.9% feel discomfort. 70% of pharmacists reported additional troubles related to IDUs visits, 39.9% of them felt antipathy and 33.6% of them doubted that consultations given to IDUs about drug treatment are effective. However pharmacists would agree to provide some services for IDUs: to supply leaflets about HIV/AIDS and viral hepatitis (60.7%),

safer injections and safer sex (52.0%) and to provide referrals to drug treatment services (47.7%). Minority would agree to change needles and syringes (9.0%).

There is a lack of pharmacists' knowledge about SEP existence. 15.1% of respondents were not able to answer a question if there SEP is a convenient place for syringe exchange, 38.1% of them were not sure or disagreed. Only one third (31.3%) of pharmacists participated in trainings on basic drug prevention, less than half (15.2%) in trainings on HIV prevention, and only a small part (5%) in trainings on harm reduction. The data from all cities is similar ($p>0.05$), there was no statistically meaningful differences between pharmacy companies, pharmacist's position or previous experience. Absolute majority of pharmacists (85.4%) requested additional trainings.

The study confirmed a low tolerance towards IDUs and decreasing tolerance when impendence increased (Figure 1): only 8.6% of the pharmacists would agree that IDU's live in their society, 5% – in their neighbourhood, 2.8% – in front of their residence. Although tolerance did not statistically significantly differs according to the place of residence, the study showed a slightly greater tolerance to people living with HIV/AIDS (31.3%) and greater positive attitude towards IDUs in Visaginas.

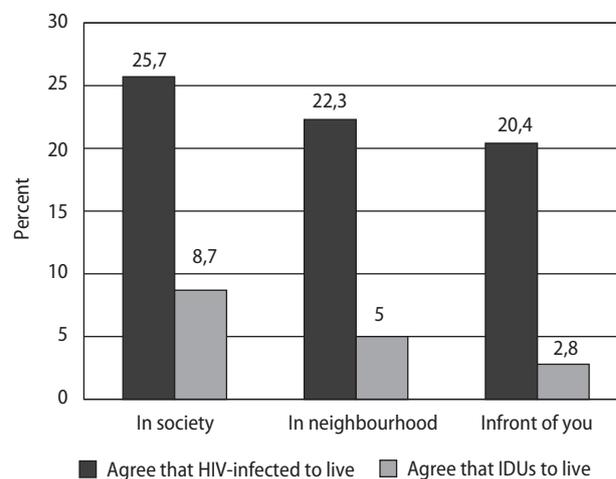


Figure 1. Pharmacists' tolerance towards IDUs and people living with HIV/AIDS

DISCUSSION

Pilot study in three Lithuanian cities with highest drug addiction prevalence rate and existing SEPs, was the first comprehensive study analyzing pharmacists' and IDUs' attitude and availability of SIE in the pharmacies, identifying current problems

and possible solutions. In surveyed cities there were developed pharmacy networks with longer working hours (only in the capital city there are pharmacies working 24-hours) in comparison with SEPs, which are located in specific place, have fixed working days and hours, which causes problems obtaining SIE in the evenings, on weekends or during the holidays.

The results showed that IDUs regularly visit pharmacies. 66.1% of them visited pharmacies last week to obtain SIE (72.1% of them in Vilnius) and the same data was found in another research [6].

The most comfortable place for obtaining sterile injecting equipment for IDUs is a SEP [12], because the service is friendly/non-discriminating and free of charge. However, the bigger accessibility to the pharmacies (close to home, on the way), more comfortable working hours and working days, encouraged IDUs to use pharmacies to purchase the main item – a sterile syringe [13, 14]. Pharmacies are used by men and women. Younger IDUs and with a lower injecting frequency per day visited pharmacies more often than older or with higher injecting frequency per day [24]. Although selling syringes is allowed in Lithuania, IDUs have had negative experiences communicating with the pharmacists. There were several situations when the pharmacists criticized, revolted or didn't sell SIE [12], but in general pharmacists did not pay attention to IDUs.

Pharmacists perceived level of drug use in the pharmacy's neighbourhood was associated with the number of IDUs' visits, i.e., pharmacists who saw more than 50 IDUs per month evaluated drug using level as high, less than 50 – as medium [16].

The pharmacists provided a long list of strategies they use for the identification of drug using client. IDU they identify from sealable item (one syringe and water for injections), behaviour (inpatient, insistence and desperation), appearance (voice, look), but much more often they recognized drug user as a man rather than a women [12, 17]. Extremely important finding was that pharmacists were facing a more diverse group of problematic drug users, who obtained 10-20 ml size syringes for stimulants or distribution/transportation. Also this drug users' group may not identify themselves as IDUs, may not fully comprehend the need to protect themselves from HIV, and may find HIV prevention and drug treatment services difficult to access. This finding suggests that there could be IDUs who are beyond the reach of SEP and pharmacies can take a role in linking IDUs with SEP [18].

Pharmacists are willing to offer services for IDUs but possibilities to participate in HIV prevention programmes are blocked by the lack of information and attitudes towards IDUs. Pharmacists' knowledge on the services for IDUs is very minimal [12], because the obtained education (in average 20 years ago) had not provided the required knowledge and post graduate trainings related to such problems were offered only to the minority of respondents. Lack of information determinates misconceptions about effectiveness of HIV prevention: half of them have doubts that HIV prevention program in pharmacy would reduce the spread of HIV, more than half incorrectly believe that those activities would increase drug use not only in the pharmacy's neighbourhood but even in the country. The evidence indicates that trainings significantly reduce misconceptions [12, 15]. Pharmacists expressed the need to learn more about prevention programmes and how to behave with drug users in the pharmacy. Such trainings could be effective in recruiting pharmacists to provide services for IDUs [19], even pharmacists themselves expressed this need [20]. The delivery of services also was associated with pharmacists' attitudes toward IDUs [21]. Main mentioned obstacles for involvement in HIV prevention are subjective: antipathy, lack of tolerance, discomfort and insecurity, and objective: negative community and other pharmacy clients' attitude towards the pharmacy which supports IDUs. These reactions are similar in the other studies [16, 22, 23].

IDUs requested different services through pharmacies: from information dissemination and counselling to needle/syringe exchange and supply of other items [12]. Pharmacists agreed that they could provide information material about HIV/AIDS, safer injections and safer sex, rather than SIE [23]. This may be related to Good Pharmacy Practices guidelines, a lesser time and experience required for such activities.

CONCLUSION

Research results indicate that the most convenient place to obtain SIE for IDUs is SEP, pharmacies are in the second place for their convenience due to the longer working hours and better accessibility. Pharmacists' tolerance towards IDUs is very low, knowledge about HIV prevention programmes is minimal, attitudes towards needle/syringe exchange are very sceptical and conditioned due to the lack of information – majority of them had never participated in any training related to such problems.

The research revealed that pharmacists feel alone coping with problems related to drug use and IDUs visits. They expressed the need to learn more about HIV prevention programmes and behaviour with drug users in the pharmacy.

Educational courses could encourage pharmacies not only to sell SIE to IDUs but also to distribute information leaflets. This will provide linkages to other services which may be widely applicable for HIV prevention in Lithuania, especially due to the

fact that injecting drug use is a major force of HIV transmission in the country.

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Švirkščiamųjų narkotikų vartotojų ir vaistininkų patirtis dėl švirkštų prieinamumo vaistinėje ir socialinių paslaugų Lietuvoje

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Higienos institutas

Santrauka

Tikslas: įvertinti švirkščiamųjų narkotikų vartotojų (ŠNV) ir vaistininkų patirtį dėl švirkštų prieinamumo vaistinėje ir socialinių paslaugų Lietuvoje.

Metodai: Vilniuje atliktas atrankinis, Alytuje ir Visagine – ištisinis vaistininkų tyrimas. Apklausti 323 farmacininkai, 75 proc. jų pardavė švirkštus ŠNV per pastarąsias 4 savaites. ŠNV imtį, taikant paprastąją atsitiktinę imtį su 10 proc. paklaida (95 proc. PI), sudarė 326 respondentai, iš jų 72,5 proc. vyrai, 27,5 proc. moterys. Visi respondentai buvo aktyvūs narkotikų vartotojai, 66,1 proc. jų lankėsi vaistinėje praėjusią savaitę, 32,3 proc. tam, kad įsigytų švirkštą.

Rezultatai atskleidė, kad pagrindinė ŠNV prekė vaistinėse buvo švirkštai (91 proc.), o pagrindinė nurodyta lankymosi priežastis – patogumas (63,6 proc.). Daugiau nei pusė ŠNV nurodė, kad vaistinėje jaučiasi saugiai. Vizualiai identifikuoti ŠNV yra sudėtinga, tačiau farmacininkai juos atpažįsta pagal perkamą prekę, išvaizdą, elgesį. Vaistininkų požiūris į ŽIV prevenciją vaistinėje yra skeptiškas ir galimai susijęs su informacijos stoka, nes dauguma niekada nedalyvavo mokymuose apie ŽIV prevenciją. Pagrindinės nustatytos ŽIV prevencijos vaistinėje kliūtys yra subjektyvios: antipatija, diskomfortas, nesaugumas; ir objektyvios – neigiamas bendruomenės ir klientų požiūris į vaistinę, remiančią ŠNV.

Išvada. Tyrimas atskleidė, kad patogiausia vieta ŠNV įsigyti sterilių švirkštimosi instrumentų yra žalos mažinimo paslaugos. Vaistinė yra antroje vietoje dėl ilgesnių darbo valandų ir geresnio išsidėstymo. Vaistininkų apklausa parodė, kad jie jaučiasi vieniši dėl narkomanijos problemos ir ŠNV vizitų bei pageidavo daugiau informacijos. Mokymai galėtų padėti motyvuoti vaistininkus ne tik parduoti švirkštus ŠNV, bet ir platinti informacinius lankstinukus bei rekomenduoti jiems kitas paslaugas bendruomenėje, kurios turėtų būti plačiai taikomos Lietuvoje, nes švirkščiamųjų narkotikų vartojimas yra pagrindinė ŽIV plitimo varomoji jėga.

Reikšminiai žodžiai: ŽIV prevencija, švirkščiamųjų narkotikų vartotojai, vaistininkai, žalos mažinimo paslaugos.

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