

# INJECTING

and your health



New Zealand  
Needle Exchange  
Programme

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# INJECTING

## and your health

There are many things that you can do to take care of your health and to reduce the risks associated with injecting drugs. This booklet has information on safer injecting and advice on equipment to use. It also provides information on caring for your veins. Even if you are an experienced injector, new equipment is being invented, and new advice coming to light, that may help you maintain good vein health.

The New Zealand Needle Exchange Programme (NZNEP) takes a harm reduction approach to substance use. This means that while we don't condone injecting drugs we want you to have all the information you need to keep safe. In this booklet we provide steps for preparing and injecting that may differ from your current practice. We recognise that everyone is different and urge you to talk to staff at your local NZNEP outlet about any specific needs you have and for advice on what might work best for you.

Many terms are used to describe a substance or drug prepared for injection e.g. hit, shot, blast, taste. For ease we have used 'hit' throughout this booklet.

# You and safer INJECTING

Injecting is one of the riskiest way to use drugs. Here are some things you can do to reduce those risks.

- **Ensure your drugs are safe**

Know your dealer. Avoid buying drugs from people or sources you are unfamiliar with as they may be stronger than you are used to, contaminated, or cut with toxic substances. If you are not sure we recommend that you inject a small amount to start with to be sure it is safe.

- **Keep safe**

Use with a friend. Using alone means no one will be there to help if anything goes wrong. Read up on our 'Overdose' booklet so that you are prepared if something does not go to plan.

It doesn't take long for your tolerance to drop. Even if you have only had a week off using, a dose that normally wouldn't have touched you, could kill you. It is best to try a lower dose first to see how that affects you.



- **Keep everything clean**

Find a clean space just for you and your equipment.

Wash your hands (hot water and soap is best) and dry them thoroughly before touching any sterile equipment. If you don't have access to soap and water, the next best is to use an alcohol swab or hand sanitiser.

Clean your injection site with an alcohol swab (soap and water is also ok) to remove any bacteria from your skin. Getting bacteria into your blood stream can cause serious health problems.

- **Take care with mixing**

We recommend you use either a spoon, such as a tablespoon, or a steri-cup to dissolve or mix powders and tablets for injection. Make sure they are new or sterilised. Different coloured steri-cups are available so that, if you are using with others, it is easier to keep them separate.

If the substance you are using does not need heating some people prefer to mix it in their syringe, or in a plastic bag (such as with methamphetamine).

When mixing a substance with water, the water should be sterile. If you don't have access to sterile water, use water that has been boiled for at least **ONE** minute and then cooled. If you do not have sterile or boiled water, you could use bottled water or cold tap water. Neither are ideal as they may contain bacteria which can cause problems for you. Hot water cylinders generally have bacteria so don't use water from the hot tap.

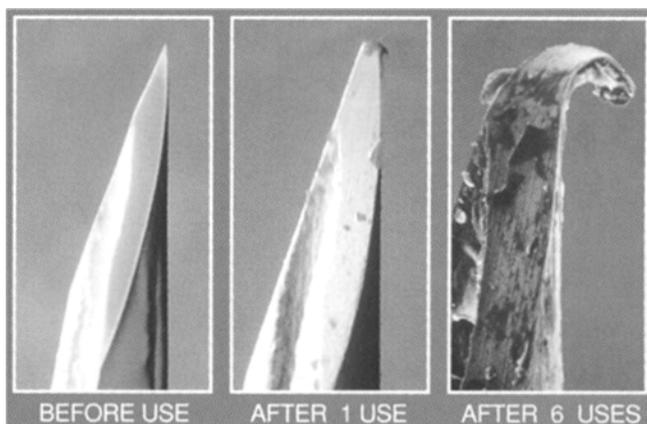
If you are using an acid for dissolving, use the smallest amount you can of citric, acetic or ascorbic acid to reduce the risk of irritating your veins. **Never** use tartaric acid, lemon juice or vinegar because they can damage your veins and can cause fungal and bacterial infections.

Some substances will dissolve in water without being heated (e.g. methamphetamine) and others (e.g. anabolic steroids) are already in liquid form and will therefore not need to be 'cooked'.

- **One hit – one needle - one syringe**

Use a brand new, sterile, needle and syringe each time you inject.

Use a different **new needle** for mixing and drawing up because needle tips can be damaged/barbed when used for mixing and will harm your veins.



If you have to try a few times to find a vein, always use a new needle for each attempt.

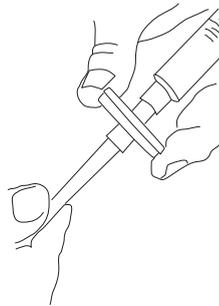
- **Don't share needles, syringes or any other injecting equipment (not even with your partner, boyfriend, or girlfriend)**

Blood and bacteria that remains in a needle and syringe after someone has used it can be passed on to anyone else who uses that equipment. The same applies to cookers, spoons, and filters. This is how viruses such as hepatitis C and HIV can be transmitted from one person to another.

If you are using with someone else, make sure each person's equipment is clearly separate from yours so that accidental mix-ups, and sharing, doesn't occur.

- **Filter your hits**

Ciggy filters prevent undissolved particles and other debris from entering your syringe and then your veins. Not all ciggy filters are safe to use. We recommend the Boomerang brand as they are made of non-toxic wood pulp. They are ideal for filtering from your spoon or steri-cup, bag or other container. Make sure you remove the paper first. Ciggy filters do not filter out bacteria so you will also need to use a wheel filter to clean up your hit.



Every hit should be put through a low micron filter to remove bacteria. This is especially important if you haven't used sterile or boiled water. The **blue wheel filter** is the only wheel filter that removes all bacteria. Wheel filters are very easy to use and add only seconds to your preparation time. They work better if wet prior to use as wetting helps to prevent blockages.

If the substances you are using contain impurities, such as with morphine sulphate and Ritalin, it is very important to use the right filter before injecting. Get a copy of our booklet on 'Filtering' at your local NZNEP outlet. It will provide information on which filter to use for your preferred drug. Staff will give you a demonstration on how to filter if you ask them.

- **Keep hydrated**

It is important to keep hydrated. Water is the best way to do this. Drinking a glass of water 15-20 minutes before you inject will help plump up your veins and will limit their movement. This is especially important if you are injecting into small veins.

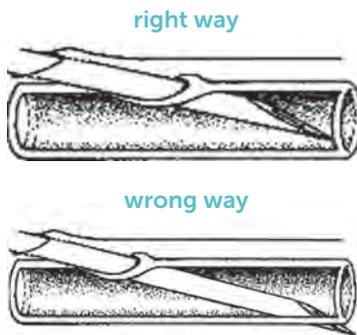
- **The injection**

- Before injecting find a safe and private place where you won't be disturbed.
- Thoroughly wash (and dry) your hands or use an alcohol swab or hand sanitiser.
- Put on a tourniquet and plump up the vein with a warm compress if you have one. Exercising your arm also helps to increase blood flow.
- Wipe your injection site with an alcohol swab (one swipe, one way).
- After you have drawn up your drugs into the syringe tap out any air bubbles and push the liquid to the tip of the needle.



**Do not touch or lick the needle before injecting**

- Insert the needle into the skin parallel to the vein with the bevel (hole) pointing up. The tip should be pointing in the same direction as the blood flow – towards your heart. Take care not to push the needle through the back wall of the vein.



- Draw back a little on the plunger until you see a flash of dark red blood in the needle.
- Release your tourniquet and inject slowly. The slower you inject the better as this is gentler on your veins.

If you see bright red, frothy or pink blood pushing its way into the syringe, you will have hit an artery. Do not inject. Remove the needle immediately and apply pressure to the site (with a clean tissue or gauze) for at least 15 minutes to stop any bleeding. It helps also to raise your limb (arm or leg) higher than your heart. If the bleeding doesn't stop seek medical help or ring 111.

- **After Injecting**

Do not swab your injection site after injecting. This will interrupt your body's clotting process and is of no benefit at all. We recommend you gently press the site with a clean tissue or a piece of gauze for a few minutes as soon as you have removed the needle. This prevents bleeding and bruising.



Your skin will benefit from you applying a healing cream such as Hirudoid or Arnica to the surrounding area after the wound has closed.

Dispose of all injecting equipment in your sharps container.



Always swab your injection site before using.  
If you do not swab you risk pushing bacteria  
and other bugs that are on your skin directly into  
your bloodstream

# Choosing NEEDLES & SYRINGES

The type of equipment to use depends on the substances you are injecting, where you inject, and the condition of your veins.

In New Zealand, we have the 1-4-1 scheme which provides 3ml syringes and any size needles for free in exchange for you returning your used equipment. You can access this scheme through your local exchange and from some pharmacies.

## **Needles**

Needle gauges (the diameter or thickness of the needle) are often abbreviated, for example 27g or 25g. The higher the gauge, the thinner the needle (and the smaller the hole). A 27g needle is therefore thinner than a 25g needle. Most people injecting methamphetamine will use a 27g or 29g needle with a 1ml or 3ml size syringe depending on the volume injected. People injecting morphine or methadone generally use a 26g or 27g needle.

The size of the vein also needs to be taken into account when selecting needle gauge. If you are injecting into small veins, for example, those in your hands and feet, or into damaged veins, you will need a finer needle such as a 27g. Some people prefer an even finer gauge needle such as 30g. Finer gauge needles slow down the speed of your injection and this will limit the stress on your veins.

A finer gauge needle will result in a smaller puncture wound. This will reduce the opportunity for infection to occur and is also likely to reduce bleeding.

Steroids and other intramuscular injections need to be given with larger gauge needles. We recommend a 23g x 1.25 inch – 25g x 1.5 inch length needle. An 18 or 19g is an ideal needle for drawing up the steroid from the vial.

A needle that is too short may miss your vein, and one that is too long may go right through it, or be difficult to position. Longer needles will generally be needed for intramuscular injections, depending on the size of the muscle. A ½ inch to 1 inch is recommended for intravenous injecting, and a 1 inch to 1 ½ inch for intramuscular.



## Syringes

The 3ml syringe is adequate for injecting most substances. If you are injecting methadone, we advise you use a syringe size appropriate to the amount being injected, rather than boiling it down to fit into a smaller syringe. If you are reducing methadone, it should not be reduced to a concentrate of more than 10mg/ml as it will be too acidic, which is very bad for your veins. We suggest you discuss this with staff at your local NZNEP outlet before you do it for the first time.

## Butterflies

A butterfly needle is a needle with plastic 'wings' that is attached to plastic tubing. Butterflies come in a range of different sizes, just like regular needles. The 25g is the most commonly used and are available at all NZNEP outlets. 23g and 27g butterflies are also available.

Butterflies can be a good option for people who have trouble keeping the needle in their vein while injecting. They are also a good choice for injecting larger amounts of liquid, especially in 20ml or bigger syringes.

Butterflies can also be used to inject multiple syringes, one after the other, without the need for multiple injections.

Do not leave the butterfly in your arm. Remove it once you have injected.



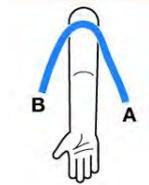
## Tourniquets

Tourniquets are used to restrict your blood flow. They cause your veins to bulge out which makes them more accessible for injection. There are various kinds of tourniquets and people have their own personal preferences. Some are better for you than others. For

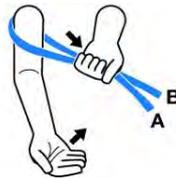
example, stretchy ones are kinder to your skin than harder ones, such as belts.

Regardless of the tourniquet you prefer, it is really important that you are able to release it quickly. When you are in the vein, and ready to inject, you need to be able to release it easily with one hand. Unless your tourniquet is specially designed, it is recommended that you use a slip knot when tying up as this will allow you to release it easily.

Sharing tourniquets is not recommended as they often have unseen blood particles and bacteria on them and this can cause cross contamination when brushed across skin, or from touching your injection site after touching the tourniquet.



Put arm out palm facing up & ends hanging on each side.



Grab both ends with opposite hand and pull to stretch out.



Use the free hand (from the arm you are injecting into) to grab the bottom tie.



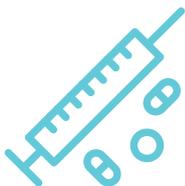
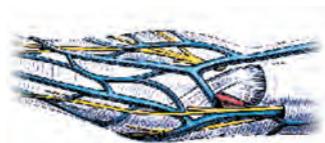
Using the opposite hand, pull the top tie tightly to cross over and tuck under the bottom tie.

**Always use new gear. Don't assume that if it looks clean it is clean.**

## Where to INJECT

The area between your elbow and half way down your forearm is the least risky place to inject. You should only inject into other places if your forearm veins are no longer able to be used. See our booklet 'Veintenance' for more information about injection sites.

We recommend you speak to one of the staff in your local exchange about injecting into your hands, legs or feet. Always avoid your groin and your neck as it is very easy to miss the vein and hit nerves or arteries in these sites, and this could be fatal.



# Looking after YOUR VEINS

If you look after your veins they will last longer. Here are some of the things that will help to keep your veins healthy.

- Keep hydrated. Drink water before you inject.
- Use the smallest amount of acid you can.
- Always filter your hits.
- Always clean your injection site before using.
- Use a proper tourniquet.
- Inject slowly and remove the needle slowly to prevent damage.
- Learn to inject with both hands.
- Rotate your injection sites so they get time to heal.
- Make sure you always use new sterile needles.

**Hydrate. Filter. Swab. Inject slowly.  
Rotate sites.**

# INFECTIONS

## Dirty Hits

'Dirty hits' are caused by injecting bacteria or toxins into your bloodstream. They are generally used to describe a hit that makes you sick. They can be caused by a range of things such as bacteria in the water you use to dissolve your drugs; chemicals in cigarette filters; toxic substances in your drugs; and not cleaning (swabbing) your skin before you inject.

Signs of a dirty hit can be:

- Feeling very unwell just after injecting
- Shivering or trembling
- Sweating
- Headache
- Throbbing or pounding sensation in your lower back region

Although a dirty hit' can make you very sick it should wear off after a few hours so it's best just to sit it out. Make sure you keep up fluids – water is best. If you don't start to feel better after a few hours, or you start to feel worse – **get medical attention.**

Even if you don't feel like you are 'stoned' the drugs will still be in your system, so **DON'T re-inject** or take more drugs. However tempting it is, your chances of overdosing will be very high. Taking paracetamol is ok. Injecting salt water is not ok.

If you are unwilling to stick to this advice make sure you use new equipment, a different batch of the drug, and that you only use a small amount to prevent overdose.

Septicaemia (or blood poisoning); endocarditis (an infection of the heart lining); and tetanus are all infections caused by bacteria getting into your bloodstream. These infections can all be fatal if not treated. They can be prevented by always using sterile water when preparing your hit, using new, clean ciggy filters; putting your hit through a wheel filter; making sure your spoon/steri-cup/ other container is new or sterile; by thoroughly washing (and drying) your hands; and, by always swabbing your injection site prior to injecting.

### **Abscesses**

An abscess is an infected lump under your skin. They usually start with redness, swelling, and tenderness at the injection site and develop into an infection with a hard, pus-filled core. They can occur anywhere on your body, not just where you inject.



Abscesses can result from dirty hits, missed hits, not swabbing your injection site, not filtering your drugs, and from using unsterile or used equipment.

If you notice a hard, warm, lump developing apply a warm compress at least three times a day. This will either make the abscess go away or make it come to a head. Keep the area clean. If it comes to a head, it may need to be lanced (opened up to clear out the pus) and you may need antibiotics to clear the infection. Abscesses can be very serious and may need medical treatment. If you get treatment early enough the problem should be easily sorted.

DON'T try to lance an abscess yourself as you may get blood poisoning.

DON'T just leave an abscess to get better on its own. It's just as likely to get a lot worse. Get medical help or ask for advice at your local NZNEP outlet.

## **Lumps**

People who inject drugs often get lumps but some lumps are worse than others.

Missed hits often leave a lump. These usually vanish after a day or two. Give that area a rest and keep an eye on it. If it gets worse – or it doesn't go away – get medical attention.

You will need to **get medical attention** if:

- The lump feels sore, or warmer, than the surrounding skin, as it is probably infected.
- The redness is spreading, or the area is painful and swollen, as it could be cellulitis. This can be very serious.

**DON'T try to inject near a lump.  
Give that area a rest and  
use another site**



### **Blood borne viruses**

Injecting practices can put people at risk of contracting a range of blood-borne viruses. These include Hepatitis A, B and C, and HIV. Hepatitis C (HCV) is the mostly common blood-borne virus affecting people who inject substances in New Zealand. HCV can cause serious liver damage, liver failure, and liver cancer.

Although the newer treatments for HCV available in New Zealand have very good cure rates, the best prevention is the use of new, sterile injection equipment and not sharing any injection equipment. You cannot become immune to HCV.

New Zealand Needle Exchanges can either do a rapid HCV antibody test with you or provide you with information about how to get tested. The treatments available now are very different from previous treatments. They have a 95+% cure rate, much fewer side effects, and the treatment period is considerably shorter. Ask your local NZNEP outlet staff for information on testing.

**Know it. Treat it. Beat it.**

# Cleaning your GEAR

We **do not** recommend reusing any injecting equipment. However if you must reuse needles, syringes, or other equipment, we want you to have the information needed to clean them thoroughly before you reuse them.

**It is never safe to use someone else's gear.**

You cannot be 100% sure that cleaning your equipment will get rid of bacteria, viruses and other blood borne pathogens. Even though your injection equipment might look clean, tiny amounts of blood remain in the works and this can cause infection.

You can reduce the likelihood of complications if you carefully clean the equipment before you use it. Here are some instructions for cleaning needles and syringes using the **2 x 2 x 2 method**.

## **The 2 x 2 x 2 method**

Flush twice with clean cold water

Flush twice with full strength bleach

Flush twice with clean cold water

1. Flush the needle and syringe with cold water **2 times**. This will ensure it doesn't get clogged with blood or other matter. If you are using a detachable needle and syringe, take the equipment apart to clean it more thoroughly. Be sure to safely discard the water you use to rinse the equipment. (DO NOT use hot water as it will cause blood to clot, making it hard to remove).
2. Flush the needle and syringe **2 times** with undiluted household bleach. Be sure to fill the syringe all the way up. Keep the bleach in the syringe for a full **two** minutes while shaking it then discard the bleach.
3. Thoroughly flush the needle and syringe **2 times** with clean, cold water to remove any remaining bleach then discard the water.

If you do not have bleach, you can substitute with hydrogen peroxide; a solution of dishwashing liquid and water; or strong alcohol (such as vodka or rum), if that's all you have got, but follow the 2 x 2 x 2 process.

Remember that a needle will be blunt after one injection and can cause damage to your veins and tissue if re-used.

The 2x2x2 method should also be used to clean any other injecting equipment including your tourniquet. Wash with water twice, wash with bleach twice, and rinse with water twice.

**The gold standard is to use a needle  
and syringe only once**

# Sharing DRUGS

If you are planning to share your drugs with other people, it is important to make sure that this is done safely. The safest way to share drugs is to divide them up before you cook up, and for each person to use their own cooker etc. If there is a reason that you are unable to do this, then the drugs can be cooked up first, using new sterile equipment, and then divided (using new sterile needles and syringes).

When sharing drugs from a vial or bag use a new, sterile, drawing up needle attached to a new syringe.

**Front and back loading is only safe if all equipment is new and sterile.** This involves

- back loading: when a new syringe is used to draw up equal amounts of the liquid, which is then squirted into the back of each person's new syringe, after the plunger has been removed; or
- front loading: when the substance is squirted into the front of each person's syringe (with the needle removed), or sucked from one syringe into another (with the needle attached).

Don't frontload or backload someone else's syringe unless you are certain it is new and that it has not been used previously.

Used needles, syringes, filters, swabs and water all carry bacteria that can cause infections and 'dirty hits'. **Use them once then discard.**

**Do not to share anything you use to inject.**

# Other types of INJECTION

## **Skin Popping** (subcutaneous)

Skin popping is not a practice the NZNEP advise. It can be dangerous and painful and can cause damage including bruising to surrounding tissue. The risk of infection and abscesses are also high using this method. If you are doing it, it should only be done for a short period of time and you will need to change injection sites to limit damage.

Remember that when you inject subcutaneously it takes a while for the drug to be absorbed - so you will need to be patient.

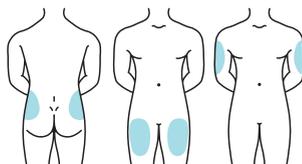
Ask your local NZNEP staff for advice on equipment to use and injection sites to use.

## **Intramuscular**

Substances take longer to take effect when injected into muscle. Using intramuscularly is not a good choice for regular injections. Injecting can cause some muscles to be sore and stiff.

Two sites are recommended for intramuscular injections. They are:

1. the upper outer quadrant (the top right or the top left sides) of the buttock (gluteus maximus); and
2. the middle outer muscle of the thigh (vastus lateralis).



If it is not possible to inject into the thighs or buttocks, the deltoid muscles in the upper arm can also be used.

Your local NZNEP staff will be able to give you advice on equipment to use and recommend muscles that are the safest to use. Our booklet 'Injecting Steroids' provides information that may be useful.

### **Resources**

The New Zealand Needle Exchange Programme (NZNEP) have published a booklet on '**Overdose**' that includes how to do CPR. Read this so that you are prepared if you or one of your friends OD's.

We also recommend that you read the booklet '**Veintenance**' to learn more about which veins to use and about caring for your veins.

We recognise that everyone is different and urge you to talk to staff at your local NZNEP about any specific needs you have and for advice on what might work best for you.

## **Getting Help**

### New Zealand Needle Exchanges

Contact a New Zealand Needle Exchange Programme outlet in your area for confidential information about obtaining needles, syringes and other injecting equipment and for advice on safe injecting. Visit the NZNEP website for information about Needle Exchange Outlets in your area. [www.nznep.org.nz](http://www.nznep.org.nz)

### Information and Treatment Referral

The Alcohol and Drug Helpline 0800 787 797 provides confidential advice and is able to refer you to an addiction service provider.

NZNEP staff will also be able to provide information on treatment services available.

**REMEMBER:**

**DON'T SHARE OR REUSE**

DON'T SHARE  
a BLOODY THING



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Programme

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