

#### RIOTT:

## Setting up and operating a supervised injecting clinic

SSA Conference York 2009

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#### **RIOTT**

Randomised Injectable Opiate Treatment Trial

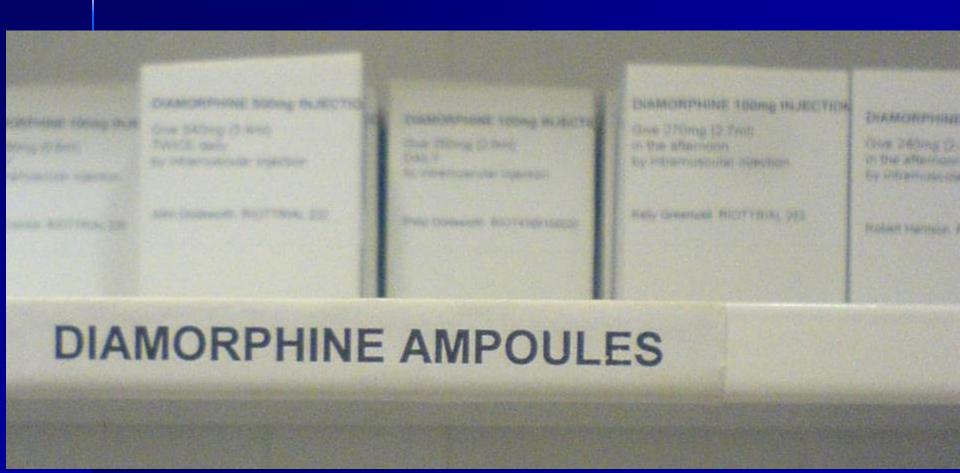


#### Thanks to

- Professor James Bell
- Dr Nicola Metrebian
- Professor John Strang
- RIOTT Researchers and Clinical Team



#### Diamorphine





#### **Outline of the talk**

- Where are the clinics?
- Community Impact
- What is a supervised injectable clinic?
- Operating the clinic
- Staff
- Patients
- Policy
- Complications
- My impression

#### **Multi-Site RCT**

■ 2005 London

2006 Darlington

2007 Brighton



### Three supervised injecting clinics

	London	Darlington	Brighton
	r-city area with high s of deprivation	■ residential area	<ul><li>central residential</li></ul>
servi comr	ge NHS specialist ce providing munity-based ment to +400 clients	■ Large NHS specialist service providing community-based treatment to 320 clients	■Large NHS specialist service providing community-based treatment to 800 clients
■ set	ened October 2005 within general SMS acity 40 IOT	<ul> <li>Opened September 2006</li> <li>set within general SMS</li> <li>Capacity 30 IOT</li> </ul>	■Opened September 2007 ■Stand alone clinic ■Capacity 30 IOT

Tees, Esk and Wear Valleys **NHS** 

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### **RIOTT Darlington**



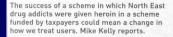
Think about the community impact

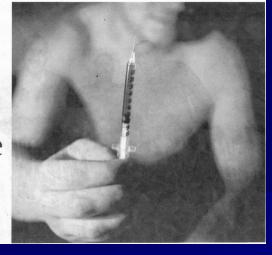
Think about the media

Will Patients be able to attend

Think about the location

Will giving drug users what they want bring relief to the rest of us?





## Taxpayers fund addicts' heroin

THE success of a project in which North East drug addicts were given heroin in a scheme funded by taxpayers could mean a change in how we treat users after researchers found it helped to cut crime. Page 8

Evening Gazette, Thursday, September 17

#### HEROIN CLINICS ON NHS

#### Tees drug team backs scheme

By MARIE LEV

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A CONTROVERSIAL pilot programme giving free drugs to heroin addicts in Darlington has been backed by Teesside drug teams.

The four-year trial, which has also taken place in London and Brighton, has seen millions of pounds worth of heroin handed out to users on prescription to inject themselves at NHS clinics.

It is hoped the heroin "shooting galleries" will stop users funding their habits through crime. But some critics have likened it to giving al-

coholics whisky.

Others have complained that the NHS is forking out £15,000 a year per user at a time when Alzheimer's patients are being denied much

The scheme has also sparked controversy because it makes no attempt to wean addicts off the

Today drug action teams on Teesside gave their support to plans to create more pilot programmes as they say the "shooting galleries" work well as a last resort, although there are no plans at this stage to offer similar services elsewhere in the region.

Tina Williams, manager of Bridges drug and alcohol support group in Stockton, said she would welcome a similar scheme on Teesside for people who cannot get well any other way.

"People on methadone, many of them use (heroin) on top of their medication. A lot of users tell us methadone does not hit the right receptors for them.

"If all else has failed this is a good choice.

"They have to go into a centre to do it so it would be safer for the community because there would be less needles and things on the street and less of a drugs market.

"But we would like to see more reduction prorammes."

David Jackson, Safer Middlesbrough Partnership manager, said they would support plans to set up more pilot schemes but said they would not see diamorphine (the clinical name for heroin) prescribing as a way to help everyone.

"Results have shown the pilot scheme has been very effective with people more entrenched in drug misuse but it does not need to be used for everyone."

"We already have good drug services."

The National Treatment Agency for Substance Misuse (NTA) has clarified that, contrary to a story in the national press, it is not calling for a nationwide roll-out of the programme but is supporting recommendations for further demonstration sites.

Paul Hayes, NTA chief executive, said: "No one is suggesting that this should be the frontline treatment for heroin addiction.

"Heroin has been available on prescription since the 1920s to a very limited number of addicts, and these pilots are simply to explore whether controlled prescribing of injectable heroin will be effective in overcoming their problems, minimizing the harm to the public, reducing crime, and cost effective for the taxpayer."

### Heroin clinic trial is hailed a success

MORE details of a pioneering North-East "shooting gallery" for heroin addicts were released yesterday.

On Tuesday, The Northern Echo revealed that a controversial Darlington clinic that provides two free daily shots of NHS heroin to addicts was being hailed as the best way to cut crime and reduce the purchase of illegal street heroin.

Yesterday, the full details of the Randomised Injectable Opioid Treatment Trial (Riott) were released at a London conference.

The Darlington clinic, at an undisclosed location, is one of three in England to provide free daily injections of heroin, heroin substitute methadone or an oral version of methadone to a hard core of difficult-to-manage addicts over the past three years.

Yesterday, experts from the National Treatment Agency for Substance Misuse said the trial had produced "remarkable" results.

The Riott trial demonstrated that it is possible to retain in treatment "some of the most entrenched, hard-to-treat heroin addicts for whom previous treatment, rehabilitation and prison appear to have had little beneficial effect."

All three groups in the trial saw a reduction in the use of street heroin, but the biggest reduction was among those given injectable NHS heroin.

Three quarters of those given injectable heroin twice a day remained "largely abstinent" from street heroin use. There was also what was described as "a dramatic reduction" in self-reported crime.



#### Supervised Injectable Clinic

- Supervised on site dosing
- Prescribed injectable heroin or methadone
- High dose
- Self administration
- Intensive Treatment
- Injecting technique assessed
- Psychoscoial Interventions
- Monthly medical review



### **Organisational**

- Morning and afternoon session
- 7 days a week including public holidays
- A maximum of two patients at any one time
- Observation of patient safety
- Safe and hygienic injecting
- No take away of injectables

### Monitoring: Formal assessment

- During dose induction
- After dose increase
- After missed doses
- When there are concerns

#### Before and 5, 15 & 30 minutes after injection;

- Pulse rate, blood pressure, respiratory rate, pupil size
- Blood oxygen levels (pulse oximeter)
- Breath alcohol level
- Client and staff rating of withdrawal/ sedation



#### Medication - induction

- Supervised oral methadone for 2-3 weeks
- Urine monitoring (+illicit heroin)
- Methadone dose (mg) convert 2/3 to diamorphine daily dose (Non linear conversion), give 1/3 as oral methadone
- Dose increments every 2-3 days until stable



### Injecting

- Preparation
  - Drawing up of ampoules (nursing staff)
  - Washing of hands, cleaning of sites (patients)
- Injecting sites
  - Peripheral veins, muscles, no active inflammation
- Injecting times
  - 3 attempts/20 minutes
  - No blood in syringe

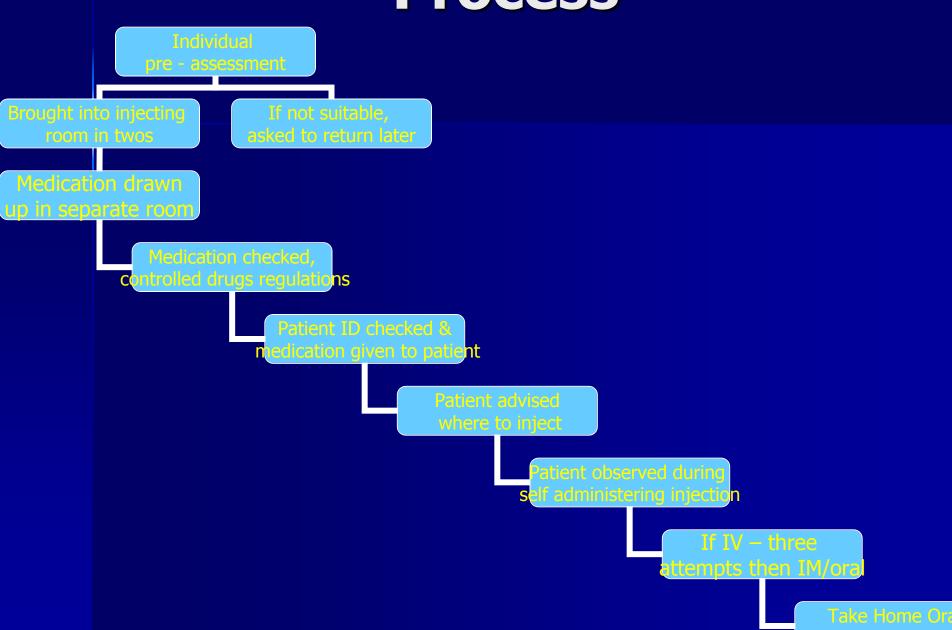


### Monitoring: Nursing assessment

Patients who have stabilised on their dose

- Brief conversation and observation pre and post-dose
- If indicated → formal assessment

#### **Process**





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### **Injecting Clinic**



## RIOTT: London Injecting Clinic





#### Patient injecting diamorphine



#### **Staff**

- Nursing Staff (band 5 & 6)
- Band 7 Nurse Manager
- Pharmacy pharmacist/technician
- Medical support on site
- Medical Supervision
- Admin reception



#### **Patients**

- Using IV heroin daily/almost daily
- Last three months
- Injecting for at least 3 years
- On methadone treatment for 6 months



#### **Policies**



**Groin Injecting** 

Titration/Maintenance/Reduction

Standard Operating Procedures

Supervision of injecting

IV attempts/Blood in syringe

Oversedation, illicit drug use

Nursing, Pharmacy, controlled drugs, medicines code



#### **Good bits**

- Patients getting better
- Not using heroin
- Not using other illicit drugs
- Award winning service



#### Difficult bits

- Stopping groin injecting
- Illicit Benzodiazepine use
- Over sedation when stable
- Supervising the clinic
- Time for Psychosocial interventions

#### **Non Serious Side Effects**

#### Methadone

Hardening of muscles Stinging Burning Pain

Flushing, Facial swelling, abscess, constipation, numbness hitting nerve, allergic reactions, tingling, Cellulitis

Heroin

Rash Redness Itching Blotches



#### **Serious Complications**

- Oversedation heroin
- Overdose –heroin (needed naloxone)
- ? Seizure heroin
- ? Anaphylactic reaction heroin
- Allergic reactions (lip swelling) heroin
- New onset Arrhythmia unrelated to medication
- Serious adverse events –related to heroin



### My clinical impression

- Patients have gone from injecting heroin every day, committing crimes to fund the habit, sex-working, no access to kids, unstable accommodation
- to
- Not using heroin, stable accommodation, money in their pocket, not committing crimes, access to kids, seeing family again

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#### FEATURES

#### A spoonful of medicine

11:27am Wednesday 21st October 2009

Comments (0) Have your say »



By Barry Nelson »

Giving hard-core addicts free heroin on the NHS seems to have a beneficial effect for the individual and for society as a whole. Health





#### Editor Barry Nelson investigates a javascript:goNewCareerURL(); 6 Micros. # Start A spoonf...

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#### NEWS N

Darlington-based pilot scheme saved 36 year-old from life of prostitution and shoplifting

9:20am Saturday 3rd October 2009

Comments (0) Have your say »



By Barry Nelson »

A HEROIN addict who says a controversial NHS clinic has probably saved her life has urged the Government to fund "shooting galleries" across the UK.

Vicky, 36, has been a heroin addict since she was 24.

Before she enrolled on a Darlington-based pilot

# proves a success

A CONTROVERSIAL clinic that provides two free daily shots of NHS heroin to addicts should become the model for many towns and cities across the UK, a panel of experts will say today.

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For three years, heroin addicts in Darlington have turned up twice a day at a clinic to get their supervised fix of heroin or heroin substitute methadone.

The pilot scheme, one of only three in England, costs about £15,000 a year per head. It is said to have demonstrat-

#### By Barry Nelson

Health Editor

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be introduced nationally.

Since the trial started three years ago, experts have calculated that the number of crimes committed by heroin addicts, who are enrolled on the programme for at least six months, fell from about 40 a month to six a month.

One in three of the addicts stopped using street heroin while the other two-thirds cut

jectable heroin, injectable methadone or oral methadone.

It was the addicts who used heroin who fared best from the trial, suggesting the approach should be taken up nationally.

But the Government is expected to face criticism that such clinics are simply maintaining addicts on heroin at the expense of taxpayers.

Experts said it was the only way that a hard core of heroin users could be prevented from stealing to feed their ad-



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#### Thank You.

