Over three decades, Syringe Exchange Programs (SEPs) have reduced the rate of Infectious disease transmission amongst IV Drug Users by 80% in the United States. Still, in 2007 IV drug use accounted for 15% of new Hepatitis B infections, 44% of new Hepatitis C infections, and in 2009 for 9% of new HIV infections.

Where SEPs don’t exist, syringes are disposed of improperly, which poses a public health risk. Most SEPs provide HIV/AIDS and HCV counseling and testing, condom distribution, referral to substance abuse treatment, safe-injection education, and also some primary care medical services. A lifetime of HIV treatment costs an average of $600,000, whereas a clean syringe costs less than $1. SEPs are legal in 35 States and funded through grants, charitable donations and State funds. Currently there is no Federal funding for SEPs. Florida has one of the highest rates of new HIV infections in the country.

Chapter 893 of the Florida Statutes currently prohibits the transfer of a syringe to a person known to inject illegal drugs.

Objectives

Submit a resolution on behalf of the FMA Medical Student Section to the FMA annual meeting, seeking legislation to legalize SEPs in Florida.

Use the legal and political resources of the FMA to craft a bill which would amend chapter 893 of the Florida Statutes, to legalize SEPs.

Methods

We used social media to gain statewide support from medical students and physicians to pass the resolution at the FMA annual meeting.

In collaboration with representatives from the North American Syringe Exchange Network and the FMA’s legal council, a bill was crafted addressing FL Statute 381, which would allow the FL DoH to establish and regulate SEPs without using State funds.

FL House Rep. Mark Pafford and Senator Gwen Margolis sponsored and filed HB735 and SB808 in the two FL Chambers.

www.cleanneedlescleanflorida.com helped us educate and gain endorsements from every FL County medical society, the FL Hospital Association, the FL Council of Medical School Deans and many other organizations in the state.

FMA lobbyists helped to persuade committee Chairmen to place the bill on their agendas.

Results

The bill was assigned to the maximum 4 committees in both Chambers. Amending it to only be a 5 year pilot in Miami got it placed on the House Health Quality subcommittee’s Agenda.

The bill passed unanimously through this first subcommittee.

In the Senate, the bill passed the Health Policy committee unanimously, then the Criminal Justice committee with a 5-2 vote.

Because of lobbying opposition from the Florida Sheriff’s Association, who were concerned about enforcement logistics with the bill, it was not placed on the House Judiciary committee’s agenda.

With the bill locked in the House, Senator Margolis requested on the Senate Floor that a vote on the bill be postponed from the 2013 Legislative Session.

Politics has a large impact on public health and practicing medicine.

Medical Associations can have a strong voice in politics. Physicians, Residents and Medical students should learn how to use these resources to influence public policy in order to better treat their patients.

With the bill modified to address the concerns of the law enforcement community, it stands a better chance at passage in 2014.

References

Tookes et al. (2011) A comparison of syringe disposal practices among injection drug users in a city with versus a city without needle and syringe programs. Drug and Alcohol Dependence, Epub.
