

US slams Canada over Vancouver's new drug injection site

Vancouver's new safer injection site for addicts (*CMAJ* 2003;169[8]:759,825) has many advocates, but none of them will be found in the White House.

Dr. Andrea Barthwell, deputy director of demand reduction for the White House Drug Policy Office, says the Canadian initiative will only serve to prolong suffering and disease. "It is akin to using laetrile instead of chemotherapy to treat cancer," says Barthwell, who argues that supervised methadone maintenance, where appropriate, and long-term residential care are superior. She says injection rooms will help people continue the behaviour and will send a societal message that drug use is acceptable. "This is absolutely the wrong way to go," she says.

Her comments echo those of John Walters, director of the US National Drug Control Policy, who earlier called the new facility "state-sponsored personal suicide."

But the comments don't carry much weight in Vancouver. "I don't understand the argument that this facility encourages drug users," says Jill Chettiar, volunteer coordinator for the Vancouver Area Network of Drug Users. "If anything, it deglamorizes drug use by moving it out of the party scene and into a clinical atmosphere. I could argue the war on drugs encourages drug use."

Vancouver has one of the highest drug addiction rates in North America, with an estimated 12 000 IV drug users in a greater Vancouver area population of 1.3 million people. More than 4500 of the users live in the 12-block section known as the Downtown Eastside.

Vancouver Coastal Health's safer injection facility was launched in September and is North America's first legal supervised injection site. The facility lets users inject their own drugs under the supervision of clinical staff. Nurses and counselors provide on-site access and referral to addiction treatment services and primary care, as well as first aid and wound care.

Viviana Zanocco, spokesperson for the new facility, says addicts will continue using drugs "until they are ready not to use," and the site's goal is simply to get them off the street and reduce the transmission of blood-borne pathogens such

as HIV and hepatitis C. Zanocco says the facility has been largely welcomed by the community, and this is not surprising given "the devastating impact drug use has had on the neighbourhood."

Zanocco reports the facility is averaging more than 200 users a day, with that number peaking at over 350 on some days. Original estimates called for 100 to 600 users per week.

Dr. Raju Hajela, an addiction specialist in Kingston, Ont., and past president of the Canadian Society of Addiction Medicine, says some concern about the new facility is legitimate. "People will need to be screened appropriately for these sites. You wouldn't want a situation where just any-

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one can walk in and novices [people who have never used drugs] come."

He also worries that advertising could promote the facility as the only option and may inadvertently spread the message that it is safe to use heroin. "Harm reduction is only one part of treatment, and a facility such as the one in Vancouver is one of many options." — *Allison Gandey, CMAJ*

Thinning ranks on Nov. 11



Canapress

When Canada marks Remembrance Day for the 85th time on Nov. 11, Veterans Affairs Canada (VAC) estimates that only 12 veterans of WW I will still be alive (600 000 Canadians enlisted), and there will be only 289 300 surviving WW II veterans (1.1 million enlisted). Dr. Roland Chiasson, national medical officer for VAC, still operates a family practice in PEI, but only 3 of his patients are veterans. "Things have really changed. When I joined Veterans Affairs in 1984, we still had a significant number of WW I veterans." Chiasson says that even though WW II ended almost 60 years ago, physicians should try to be aware of elderly patients' wartime service. He says many of these patients experienced mental trauma in the war, and November can be a particularly difficult time for them because Remembrance ceremonies may rekindle wartime memories. — *CMAJ*