THE IMPACT OF INCARCERATION ON INJECTING-RELATED INJURIES AND DISEASES: A LONGITUDINAL COHORT STUDY

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Background:

In Australia, people who inject drugs in prison have no access to sterile injecting equipment. While incarcerated, people are more likely to share and re-use needles, clean their needle/injecting site with saliva, and rush injections. The assumption, therefore, is that risk of injecting-related injuries and diseases (IRID) increase for people who inject drugs in prison. However, IRID risk during and following incarceration, disaggregated by reporting in-prison injecting, has not been investigated empirically.

Methods:

Data were drawn from 400 men participating in the Prison and Transition Health (PATH) study who injected drugs at least monthly prior to incarceration. Participants completed four surveys (baseline in prison and three-follow-up either in the community or in prison over 24 months) which were linked to state-wide hospital admissions and corrections data, 2013-2019. We estimated the crude incidence rate of hospitalisations for IRID (primary and non-primary diagnoses) and examined incidence in and out of prison, stratified by participants who reported injecting during their current or most recent prison sentence.

Results:

There were 148 hospitalisations with an IRID diagnosis (13.3% of all hospitalisations in the cohort) among 82 unique participants. Most were for skin and soft tissue infections (75%), followed by sepsis (21%; diagnoses were not mutually exclusive). Overall IRID incidence rate was 66.3 per 1000 personyears (PY) (95%CI=55.7-77.0), and 63.9 (95%CI=45.8-81.9) and 67.6 (95%CI=54.3-80.8) per 1000 PY during time in and out of prison, respectively. Among people reporting injecting during their most recent sentence, IRID hospitalisation incidence was 68.2 (95%CI=42.0-94.4) and 73.4 (95%CI=51.2-95.5) per 1000 PY for time in and out of prison, respectively.

Conclusion:

The incidence of hospitalisations with IRID among this cohort was high and elevated among those reporting recent in-prison injecting. Further work is needed to better understand the differences in incidence observed between the in and out of prison exposure periods.

Disclosure of interest:

None to declare.