PREVALENCE AND SEVERITY OF ABSCESSES AND CELLULITIS IN A COMMUNITY-BASED STUDY OF PEOPLE WHO INJECT DRUGS IN LONDON, UK

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Background: Skin and soft tissue infections (SSTI) are common among people who inject drugs (PWID), yet they are preventable cause of morbidity and mortality. They can be severe, and hospitalisations of PWID with SSTIs are rising. Delays in seeking healthcare can compound associated complications. The most common presentations of SSTI are abscesses and cellulitis.

Methods: The Care & Prevent study was a cross-sectional community survey of PWID in London, to identify the prevalence of SSTI, severity of infection, key risk factors, and associated sequelae. Pictorial questions were used to assess the extent and severity of abscesses and cellulitis.

Results: We recruited 455 PWID: mean age 46 years and 25% were female. The lifetime prevalence of abscess and cellulitis was high: 64% reporting either an abscess and/or cellulitis (55%: abscess, 34% cellulitis). Around one-third (37%) reported a severe infection. Factors associated with lifetime abscess or cellulitis were being aged 35+ years, injecting once or more times a day, subcutaneous or intra-muscular injections, and making four or more attempts to achieve an injection. Those who reported having one or multiple other health conditions were at higher odds of having an abscess or cellulitis, with risk tending to increase with number of reported conditions. Half (46%) employed self-care for their worst SSTI, with 36% waiting for 10+ days before seeking care.

Conclusion: Abscess and cellulitis are very common amongst PWID in London, with severe infections common. We corroborate findings indicating SSTIs are associated with the venous access problems that arises from the barriers to maintaining safe injection practice. They were also associated with other conditions: septicaemia, endocarditis, DVT, and kidney disease. Severity of SSTIs may be impacted by these co-morbidities, but also by delayed healthcare seeking. Delayed healthcare seeking potentially exacerbates infection severity, which in turn increases poorer health outcomes and complications.

Disclosure of Interest Statement: Dr Scott works as a pharmacist prescribed for Turning Point, a drug and alcohol treatment provider. She works in a different location to the ones where we collected data and has no clinical role for any participants. There are no other interests to disclose.