

ATTITUDE TOWARDS LOW-DEAD SPACE SYRINGES AND NEEDLES AMONG PEOPLE WHO INJECT DRUGS: PRELIMINARY EXPERIENCES FROM A SIX-WEEK PILOT IN VIETNAM

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Background: There is some evidence that low dead-space syringes and needles (LDSS/N) have been shown to reduce HIV and HCV transmission risk. Use of high dead-space syringes and needles (HDSS/N) remains common among people who inject drugs (PWID) in Vietnam. Understanding community perceptions and attitudes toward LDSS/N is critical to inform their provision as a harm reduction strategy.

Methods: A six-week pilot was implemented in Que Phong and Quy Chau, Nghe An province, during which PWID were offered the option of LDSS/N alongside the existing distribution of HDSS/N. Peer outreach workers from community-based organizations distributed 90 LDSS/N per person at three time points (weeks 1, 2, and 5). Four focus groups explored perceptions and attitudes among participants using LDSS/N at the end of the pilot. Participants included 18 Thai ethnic minority PWID (17 male, 1 female; 12 aged 25–40, 6 aged >40).

Results: Participants favored LDSS/N and were willing to switch entirely if supply was adequate. They indicated they would pay 1.5–2 times the HDSS/N price (6,000–10,000 VND or 0.2–0.4 USD per syringe and sterile water set) if free supply was unavailable. Reported benefits of the LDSS/N use included efficiency (full dose delivery, no drug waste), comfort (less pain), ease of use (better mixing and drawing), cleanliness (less blood residue), durability (plunger resistant to breakage, securely attached needle), and reusability (multiple uses without quality loss). However, participants expressed concerns related to the availability of LDSS/N.

Conclusion: The pilot reveals strong acceptance and enthusiasm for LDSS/N. Concerns related solely to availability. Community attitudes must guide scale-up to reduce HIV and HCV transmission among PWID effectively.