

# AIVL VEIN CARE GUIDE

This 'Hepatitis C and Vein Care' on-line resource was produced by the Australian Injecting and Illicit Drug Users League (AIVL) for people who inject drugs on why looking after your veins can be one of the best ways to prevent getting or passing on hepatitis C (hep C) and other blood borne viruses (BBVs) like HIV and hepatitis B (hep B).

This guide aims to reduce the risk of all BBVs, but has a particular focus on hep C. This is because many injecting drug users already have hep C and this means that new injectors are at high risk of getting infected or reinfected. What you need to understand is that hep C is preventable! You don't need to get hep C. You just need to get sorted on how to inject as safely as possible including learning how to look after your veins. The good news is that you will not only be doing what you can to remain hep C free or protect others from becoming infected if you already have hep C, but there will be other health benefits such as preventing abscesses and potential vein damage.

## Good veins = Healthier Drug Users!

Of course the best way to avoid contracting hep C and other BBVs is not to inject. If you want information on other ways to use your drugs or information on stopping your drug use see the section '[Alternatives to Injecting](#)' in this guide.

If you do have hep C it is still important to protect yourself and others – up to 30 percent of people will clear their hep C infection without treatment. You need to know there are many different strains (genotypes) of hep C and you can be re-infected with a different strain. You can also become infected with other BBVs, this is why it is so important to always inject as safely as possible.

## So how can looking after your veins prevent hep C infection?

Looking after your veins can prevent hep C a lot more than you might think. Injecting involves blood, sometimes a little, and at other times (particularly when injecting in groups, or if your veins are in bad shape) there can be a lot of blood around. Regardless of the number of people you are injecting with, or the amount of blood you can or can't see, when people inject drugs there is **always** blood around. Hep C is transmitted via blood.

Unsafe injecting practices account for almost 90% of all new hep C infections and up to 80% of existing hep C infections in Australia. Research shows that almost 50% of people will contract hep C within 6-12 months of starting to inject.

Many new injectors have a greater reliance on others to give them their first and early injections. It is therefore essential that if you are new to injecting you understand all the risks associated with injecting and hep C, and how to protect yourself – even if someone else is injecting you.

Just because there is a high risk of getting hep C if you inject drugs, it doesn't mean that all injecting drug users will get hep C, or that it's inevitable – **hep C is preventable**. People who inject drugs can protect themselves and others from hep C in a number of ways, including by looking after your veins.

## Getting the link between vein care, blood and hep C?

Most people who inject drugs will have heard or be aware of the slogans, '**new fit for every hit**' and '**always use new equipment**' – It is important for injectors to continue to follow these messages in trying to stop the spread of hep C. But they're not the only issues injectors should consider in relation to protecting themselves and other users from hep C and other BBVs.

Put simply, there are three things for hep C transmission to occur:

1. A point of exit (for contaminated blood to leave the blood stream of one person)
2. Blood (literally millions of hep C virus particles can exist in a drop of blood the size of a pin head, but you actually don't need many hep C virus particles for transmission to occur)
3. A point of entry (this could be a cut or a wound, but in terms of injecting we're generally talking an injecting site) for contaminated blood to enter a person's bloodstream.

If you have 'bad' veins, abscesses, blocked veins, scarring, etc, there's likely to be more blood around due to multiple puncture wounds (from injecting attempts). So this increases the risk of hep C infection. There's also more chance of getting frustrated, upset and agitated (making the situation worse and 'finding' veins even more difficult) and a greater chance that you might need assistance. These situations also increase the risk of hep C infection.

When you're having trouble finding a vein there often comes a point where someone else steps in, to help you inject. The situation is you've got blood on you. You might have tried to wipe it off, but remember those millions of hep C virus

particles that were mentioned earlier? They're not visible to the human eye. The person assisting you may have already had their shot and they may have touched their own or someone else's injecting site. They'll need to touch you. There could be blood on the tourniquet, on their hands and/or fingers, on other equipment. All of these things could carry hep C virus particles, and you may not even know.

Generally new injectors will start using the easier to access/larger veins in the arms. These are also the veins peer educators recommend. They are recommended because they are more accessible and therefore new users can inject themselves. Not needing to ask other people to assist you means you have more control, which means there is less blood around and less chance of hep C transmission.

However, if these more accessible veins aren't cared for and get damaged over time, injectors may move on to other areas of the body to find injection sites. Sites that are harder to reach, sites that might require more attempts to inject, more 'holes', more blood, greater chance of hitting arteries – even more blood, more chance of needing assistance – more touching, and, of course, more chance of hep C transmission.

## **So why is it important for injecting drug users to avoid getting hep C?**

Hep C is one of the most commonly notified diseases in Australia. It can severely affect the liver and health of those who contract it. Most people who get hep C don't have symptoms, or may not get symptoms for many years – by then it has had the chance to cause serious damage to the liver.

Hep C can cause serious liver disease and liver cancer. Viral hepatitis is now the leading cause of liver transplantation in Australia. If you are currently injecting drugs, avoiding hep C or other BBVs is one of the best things you can do for your long term health. This resource gives you all the information you need to protect yourself and your friends from getting hep C and other BBVs due to bad vein care and unsafe injecting. Make use of it!

For more detailed information on hep C and other BBVs see other information on [the AIVL website](#)

So to get started on caring for your veins and avoiding hep C and other BBVs read on...

Topics and information include:

- [Vein Care and Injecting Related Issues](#);
- [Vein Care and Injecting Sites on the Body](#);
- [Injecting Myths and Bad Habits](#);
- [Vein Care and Safer Injecting](#); and
- [Vein Care and the Circulatory System](#).