



Speech by

Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

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RETRACTABLE NEEDLES

Miss SIMPSON (Maroochydore—NPA) (6.04 p.m.): I move—

"That, given the growing community concern about needle-stick injury from needles discarded by IV drug users in public places and possible fatal infection of innocent people, the Parliament calls on the State Government to introduce retractable needles into the State's needle exchange program."

It seems that no community is too small or too isolated to escape the problems associated with improperly discarded syringes. The risk of needle-stick injury and the potential spread of HIV and hepatitis C threatens the freedoms associated with our Australian way of life. There is a way to reclaim the safety of our beautiful beaches, family parks and riverside walkways. Retractable needles automatically recoil into a self-contained unit after use, offering complete protection for the unsuspecting barefoot or curious toddler. As this type of syringe can be used only once, it has the added bonus of protecting the user from the dangerous practice of needle reuse or needle sharing.

Health care costs associated with the growing spread of communicable diseases through needle sharing must be factored into the real cost of maintaining the existing State Government needle availability program. The cost of providing safes, or specialised needle disposal bins, throughout Queensland also should be added to the cost of keeping these unsafe reusable needles.

Unfortunately, the Health Minister, Wendy Edmond, has rejected the coalition's bid to introduce retractable needles. In rejecting this constructive policy, she is disregarding the support of agencies such as the Alcohol and Drug Foundation and the recommendations of the World Health Organisation. More significantly, the Minister is ignoring the wishes of ordinary Queenslanders who want the right to walk safely on their public beaches and to allow their children to play safely.

It is time that the rest of the public had their safety guaranteed. Retractable needles will protect the non-IV drug user from this deadly litter in children's sandboxes and on their football fields. It would also address the problem of the reuse of needles, which the Health Minister herself has estimated is practised by about 25% of the users, because retractables cannot be reused.

When one sees grown men with the mental toughness to undertake the ironman event such as Jonathon Crowe distressed by a needle-stick injury due to a careless IV drug user, one doubts that he would have received much comfort from the Queensland Health Minister's assertion that no-one had contracted HIV or hep C from a discarded needle in a public setting. He still had to undertake a battery of costly tests and initial treatment and has to wait months to know if he can resume a normal life. The anguished mother of a central Queensland boy who recently suffered a needle-stick injury at Coolum would also find little comfort from the Minister's claim, nor would the father of a Mount Isa boy who suffered a similar fate. People are increasingly speaking out against this public nuisance, because they want something to be done to protect their safety.

The cost of testing and initially treating someone after a needle-stick injury is approximately \$4,000 and can be higher. As the return of needles is poor and thousands are disposed of improperly, the Government must consider not only its moral obligation to protect the public from these discarded needles but also its legal duty of care. Thus far, the State has shifted the cost of the clean-up bill of these needles to local governments.

Retractable needles will not remove the problem of litter, but they will remove the problem of the danger that they present to the public and council workers. I believe that there needs to be serious consideration given to introducing retractable needles not only for the needle availability programs for IV drug users but also for health professionals who are at risk of needle-stick injury in the course of their work. There is also a strong case of not only phasing in retractable needles in Government programs but also banning the old reusable syringe, which is also supplied through pharmacies and non-Government funded organisations to IV drug users.

On many fronts, I have been very disappointed by the Health Minister's response to this positive policy for retractable needles, mainly because of the Government's deceit about costs, which I will talk about in a moment, and also because of the public health implications. I was appalled by Health Minister Edmond's rejection of retractable syringes, because she said live on radio that they would need more needles, because people would not be able to share them any more. I thought that was the whole point of having this program—to stop people sharing needles. We should have a target in these programs of 100% non-reuse of these needles.

The Health Minister also claimed that only 1% of needles were disposed of improperly. If that claim were true, on a distribution of 4.3 million needles a year, that would amount of 43,000 potentially lethal objects lying around in public. When the Minister made that claim, the Brisbane City Council told one media outlet that they collected 100,000 discarded syringes a year. I am sure that local governments, which are bearing the cost of the clean-up around the State at the risk to their own workers, would dispute this 1% claim. However, even if that claim were true, it is still posing an unacceptable risk to the general public.

I have mentioned that the Alcohol and Drug Foundation and World Health Organisation have recommended retractable needles. The Alcohol and Drug Foundation newsletter states—

"Auto-disabling syringes were developed more than 10 years ago in the US but have not enjoyed widespread use across developing nations because of the cost—previously more than twice a conventional disposable syringe. However prices are expected to drop to be similar to the existing disposable syringes in coming years."

The cost has already come down. However, the State Health Minister decided to reject the idea before doing her homework. It may even be possible to produce retractable needles in Australia even cheaper than the 70c to 76c that is currently being quoted.

I refer to how the Minister fudged the cost issue. Before the State coalition released its policy, on 12 January this year in an article in the Courier-Mail, a spokesperson for the Health Department said that retractable needles had been considered but they would be double the cost of regular syringes. However, when the coalition released its policy last week, the Health Minister did not say that costs would double, but claimed that costs would blow out six times. That is very interesting arithmetic. The cost for retractable needles is not double, nor is it six times the cost of ordinary syringes. The Minister has been caught out on her costing.

When the real costs of the Minister's existing program are taken into account, one would get very little more than the metal needle for 14c—not the complete plastic syringe plunger attached to it, and certainly not the sharps container. The real cost difference between current retractable syringe technology and the department's syringes is closer to about 26c each, and that could be improved considerably in a competitive market.

While on the subject of costs, I have talked about the distress that people suffer from stepping on discarded syringes and the cost of their initial testing and treatment. However, what about the cost of treating a hepatitis C sufferer or an HIV sufferer? The Australian and New Zealand Journal of Public Health 1998 volume 22 No. 3 states—

"For every 1,000 injecting drug users newly infected with hepatitis C in a given year, there is an implied \$14.32 million in health care spending over the years. That is about \$14,000 per person."

If the House did not catch what I said, I repeat that that is over \$14m for every 1,000 newly infected drug users. That is an astounding figure. Currently, the cost of treating an HIV-infected individual is between \$12,000 and \$18,000. There are about 200,000 hepatitis C sufferers in Australia, and the number is growing. This morning, I tabled a letter concerning a doctor who is treating the mothers of babies who have been born infected with hepatitis C.

This disease and the pain it causes affect not just one generation. It is becoming a disease that is affecting generations. Children who never chose to share a dirty needle are paying the price of these terrible diseases. So the community is concerned about this issue for very good factual reasons. They want the Government to do more than bag the Opposition, put out fudged costs and at the end of the day tell whoppers about the benefits of a system which will remove the hazard that is currently littering our beaches and parks and causing incredible distress to many people.

I know it is affecting every electorate in this State. It is affecting every State of Australia. As people are searching for better answers to the alcohol and drug problem, they want to make sure that those people who have chosen not to take drugs are protected from this scourge and do not have to put up with these dangerous needles being littered throughout their parks and the sandboxes of their children. I call on the Government to get its facts right about the real costs of this program and look at the recommendations of reputable organisations.
