‘the age of the steroid selfie’
young men and steroid use
in western Sydney

Needle and Syringe Programs (NSP) are:
• an evidence based Public Health Program
• funded for blood borne virus (BBV) prev
• operational in NSW since 1986
• cost effective ($4 saved for every $1 spent)

What are NSP’s?

What do we provide?
- clean injecting equipment
- injecting and health related information
- referrals into other health agencies
- some clinical services
- safe sex information
- needle clean-up
- advocacy and support

What drugs do we see?
- stimulants
- heroin and other opiates
- constantly changing drug trends and
patterns of use (even across LHDs)

Monitoring drug trends
- International Data ~ Canada, USA, UK
- local data ~ NDARC, CSRH, Police & Customs
- anecdotes from User Orgs (NUAA, AIVL)
- most specific to NSP is data from
Annual NSP Survey (Kirby Institute)

Why am I here?

to share what we are seeing every day in
western Sydney... and what the data
tells us is happening
The National NSP Survey:
- is an annual snapshot of NSP clients profile and their drug use
- provides data showing an increase in performance & image enhancing drug (PIED) users, accessing NSP (in line with International trends)

Who uses PIEDs?
Primarily
- male
- employed
- non-smokers
- see themselves as ‘fit and healthy’
- do not see themselves as ‘drug users’
- early 20’s at commencement (BUT planning begins much earlier)

From their lips...
“…my dad said I had to bring the needles back.”
“…they won’t let me do a parachute jump until I put on some weight.”

What are PIEDs?
most common are steroids... known as roids, the gear, juice. They’re synthetic hormones and mimic effect of testosterone.

Anabolic = muscle growth
Androgenic = masculising effect
Other drugs in the mix

- Fakes
- Melanotan II – tanning (↑ women)
- Insulin – strip fat
- Tamoxifen – ↓ oestrogen symptoms
- Diuretics – ↓ speed metabolism
- Thyroid meds – get rid of fluid
- Veterinary steroids – cheaper
- Growth hormone – add bulk
- Peptides (Amino Acids) – build and repair

How are they used?

Most commonly

- Intramuscular injection or subcutaneous injection
- Oral (tablets)
- Topical (creams)

...cont

- used in cycles
  2–3 injections per week
  8–12 weeks with equal length break
- ‘stacking’ concurrent drugs or mixing for certain effect
- site injection for immediate swelling appearance

From their lips ...

“...how much of the Equipoise should I use...?”

“...why does my arm hurt...?”

Main problems ...

...Men...

Short term
- acne
- headaches
- palpitations
- increased BP
- muscle/tendon injury

Mid-longer term
- gynaecomastia
- liver damage
- stunted growth
- mood swings
- baldness
- shrunken testes – impotence
Main problems
…Women…

- facial hair
- clitoral enlargement
- deepened voice
- amenorrhoea
- hair loss

Injection-related issues

- Infection
- Abscess
- Allergy
- Nerve damage
- Blood Borne Virus – HCV HBV HIV

Body Image

Is not new …but…

- reverse anorexia 1993, became known as body dysmorphia disorder (Pope, 1993)

- media, social media, a ‘health conscious’ society…and instant gratification

Summary

- NSP is the point of contact with Health
- PIEDs users don’t identify as NSP clients, but need equipment
- they don’t trust services and resist info
- info is gained through gym and internet

…cont

- not a homogenous population
- no appropriate referral pathways at present
- limited information on long term health outcomes
- increasing rates of BBV over past decade (UK)
PIED use is not spontaneous – opportunity exists for early intervention and education right throughout adolescence

References


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