



Under My Skin

Injecting AIDS meds may cause ex-junkie jitters and even mess with sobriety. Lillian Thiemann has just the thing to get you off pins and needles and back on point.

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My hand trembles, and tiny bubbles of anxiety float through my body as I pick up the syringe and prepare to inject. "You can *do* this," I whisper through clenched teeth, but I am hyperventilating from the effort it takes to look at the needle long enough to aim it at the spot on my leg where it needs to go. As I take a breath and imagine it going in, I start to black out. I put my head between my legs long enough to calm down.

I try again and find myself shivering in a cold sweat, but I'm determined to go ahead with this. Finally, as if in a dream, I watch my hand descend, noticing every surreal detail: how the needle hits my skin, the way the point makes a small depression before breaking through to its goal. As I push in the plunger, I feel the fluid well up inside the injection site. I'm hit with a vague separation anxiety when I pull the needle out.

When it's all over, the thought that I'll soon have to do it again generates a ball of dread in my gut.

After several years of sobriety from heroin addiction, this is what I endured the first time I had to inject steroids to treat my HIV-related wasting in 1997. What's crazy is that, secure in my sobriety, I didn't anticipate such a reaction. When my doctor asked me whether I was cool with self-injection, I said, "No problem" and casually accepted the prescription: meds, needles and syringes, sharps container and alcohol swabs -- a total package for the conscientious injector.

But walking home, I started to doubt the wisdom of using this equipment on a regular basis. I once thought nothing of completely butchering myself while trying to get a hit of heroin into my veins. More times than I'd like to remember, I wound up in the bathtub naked, blood streaming from botched injection sites, while I played with the blood clots in my cooker, ineffectually trying to salvage whatever dope was left without clogging my last spike. In those days, I could watch my blood run down the drain and it didn't phase me. But now I'm nervous as a teenager.

Today sobriety is the top priority in my life, and I am careful-with-a-capital-C about keeping it that way. After that first injection of steroids, I realized that I might have set myself up for a situation that could get out of hand, allowing my old enemy Addiction to slither in. Using the tools I've learned in therapy and 12-step, I eventually got used to injecting the medicine; by the time I started using human growth hormone (HGH) -- another injected drug -- three years ago, I'd figured

out how to manage this treacherous situation.

Curious to gauge my reaction against those of other former users, I asked around to see whether I was the only one who'd had such a difficult time injecting meds. Their responses varied radically, from a screaming "I can't inject any drug!" to a sedate "It's nothing." I couldn't help but notice that those most comfortable were taking interferon for hepatitis C, administered through a pen-shaped device that bears almost no resemblance to a traditional hypodermic.

When I heard that I could get HGH in a pen device, I tried it right away. My experience with the Genotropin pen (made by Pharmacia & Upjohn) blew my mind. Not only could I dial up any dose I wanted, with none of the terror I'd felt using a traditional syringe. Sensing that I was onto something important, I got funding from Pharmacia to recruit 37 HIV positive volunteers with experience injecting prescription meds to try the device (16 were former injection-drug users). Like me, all but one of the former IDUs said that the pen felt far safer -- much less likely to trigger use of illegal drugs -- than traditional needles. In fact, most participants looked down at the injection site when done and said, "That's it?"

But these pen-like devices are only available with certain meds; you can't just go into a store and buy one for use with any drug. Serono, the maker of Serostim, has a needleless system in the works, but it's not available yet. Representatives of Chiron and Ortho-Biotech, the companies that manufacture, respectively, the injected drugs IL-2 and Procrit, told me that neither company has plans to develop alternative devices. With novel injectables like T-20, PRO542, SchC and AMD3100 on the antiretroviral horizon (see "Breaking an Entry," page 44), the need for these delivery devices is urgent, but to my knowledge they're not even on the developers' radar screens.

It is up to those of us whose radar screens are blipping wildly to make sure that alternative injecting systems are available for people who suffer from the double-whammy of HIV and addiction. No one should have to skip a lifesaving medication because she simply can't bring herself to shoot it up.