

**This booklet was written for people who use drugs by Harm Reduction Coalition.** We acknowledge that some people who use drugs face challenges when seeking health care. Our goal is to provide a practical guide for people who use drugs. Service providers and peers can use this booklet as a tool for starting honest conversations with people who use drugs about healthcare. We'd love to hear what you think. Comments and feedback can be sent to:

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The Harm Reduction Coalition is a national advocacy and capacity-building organization that promotes the health and dignity of individuals and communities impacted by drug use. Harm Reduction Coalition advances policies and programs that help people address the adverse effects of drug use including overdose, HIV, hepatitis C, and incarceration. We recognize that the structures of social inequality impact the lives and options of affected communities differently, and work to uphold every individual's right to health and well-being, as well as in their competence to protect themselves, their loved ones, and their communities.

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# Quality Healthcare

IS YOUR

RIGHT!

**A Guide for People  
Who Use Drugs —  
*Getting Better Care***



This booklet has been written for people who use drugs in order to make going to the doctor and getting other kinds of health care easier.

It's OK to be scared or nervous about going to the doctor. Maybe you're not sure what to say to the doctor. Or, maybe you're worried about what the doctor will tell you. Maybe it has been a long time since you've seen a doctor. Maybe you had a bad experience at a doctor's office in the past. And, maybe you just don't like going to the doctor.

Stigma and judgment around drug use can lead to being treated differently by doctors and medical staff. Even though this shouldn't happen, it can.

But, there are lots of good, kind people providing services who will care about you, your needs and your health.

***Your health is very important!***

***You deserve good, quality healthcare –  
it is your right!***

This booklet provides a few tips that we hope will make getting good healthcare a little bit easier.

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# WHY GO

# TO THE

# DOCTOR?

Going to the doctor can be stressful. Doctors may tell you things you don't want to hear. Going to the doctor can also be expensive. For people who use drugs, there is added stigma and fear of being mistreated.

## So, why go?

Here are some reasons:

- > If you have an infection or serious medical problem it can get worse without medical care.
- > If you have a long-term illness, it is good to keep track of how you're doing. Knowing your options will help you make smarter treatment decisions.
- > To get medicine.
- > To stay healthy and to avoid future problems.

## When to go to the doctor

If you have a problem or concern about your health, it is best to go to the doctor early. *It is much easier to look for a doctor when you are feeling healthy.*

- > If you see a doctor when you don't feel sick, you may be able to find a problem **before** it gets more serious.
- > If your doctor knows you, you may get seen **faster** when you really need to or are in an emergency.
- > After you and the doctor get to know each other, it will become **easier** to talk about issues like drug use.
- > By finding a doctor before you get sick, the doctor knows that you care about your health.

PREVENTION =  
FASTER AND EASIER

# WHERE TO GO FOR HEALTHCARE

## Where are you already getting services?

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### Methadone programs, outpatient programs or other clinics may have healthcare services available.

- › Places where you already get good services may know or be able to help you find good doctors.
- › It may be easier to talk about drug use in places where you already get services.

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### General Healthcare Clinics / Community Health Centers

Healthcare centers are good for **routine** care, and more serious things when emergency care isn't required.

- › You may be able to see the **same doctor** for each visit and you can often take care of many different medical needs in **one location**.
- › Staff will get to know you and you may not need to give a detailed medical history each time.
- › Some clinics will have a **sliding scale** for payment and/or take **Medicaid**. Community health centers must treat you even if you don't have insurance.
- › If you have internet access, find a health center near you at this link: <http://findahealthcenter.hrsa.gov>.  
In NYC you can also call 311.

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### Hospital Emergency Rooms (ERs)

It is best to use the ER *only in an emergency*.

- › If you're having an emergency, ERs must treat people **even if they can't pay**.

- › **ERs are not designed for routine care**—they are meant to take care of the most serious and urgent healthcare needs. Even though ERs may seem like an easy place to get general healthcare, **community health centers** will probably be able to help you more than the ER.

There can be **very long waits** because doctors need to be able to take care of the most serious emergencies first.

ER staff are often very busy. This may affect **how they talk to you** and **the amount of time** you spend with the doctor.

- › If you don't have a primary care doctor or can't go to a health center, the public hospital ER may be able to help you get rid of lice, scabies or other related pests.

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### Syringe Exchange Programs (SEPs)

Syringe exchange programs (SEPs) are places where you can get **sterile syringes** and other safer injection equipment. You can also dispose of your used syringes at SEPs. You can look for the nearest SEP on our website at [www.harmreduction.org/connect-locally](http://www.harmreduction.org/connect-locally).

SEPs work with people who use drugs all the time. It is their job to be **non-judgmental** and to know about drug-related health issues.

Some SEPs will have social workers, case managers or counselors that can help you to find services, make appointments, apply for Medicaid and other benefits, and even keep copies of important records. Some may even offer healthcare.

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### STI Clinics

STI clinics are places where you can be tested for sexually transmitted infections (STIs) **including HIV**.

Some STI clinics also provide **hepatitis C** (HCV) testing.

Some clinics are **free**. At others you may have to pay a sliding scale for STI testing and treatment.

If you have internet access, find a health center using this link: <https://gettested.cdc.gov/>.

# PAYING FOR YOUR HEALTHCARE

*Having health insurance **before** you get sick will mean more choices when you need them.*

**Work with your case worker to see if you are eligible to apply for any of these government health insurance programs.**

- › **Affordable Care Act:** The Affordable Care Act requires that all Americans obtain health insurance. You can find resources for free or low cost health coverage at [www.healthcare.gov](http://www.healthcare.gov).
- › **Medicaid:** A program for Americans who cannot afford to pay for medical care. Medicaid programs are operated differently in each state and qualifications vary in each state, however, in every state Medicaid covers some low-income people, families and children, pregnant women, the elderly, and people with disabilities. You can find out more information from your state Medicaid office, by calling 1-877-267-2323 or at [www.medicaid.gov](http://www.medicaid.gov).
- › **Medicare:** A health insurance program for people over 65 or for people with certain disabilities. You can find out more by calling 1-800-MEDICARE or at [www.medicare.gov](http://www.medicare.gov).
- › **Children's Health Insurance Program (CHIP):** A program that offers free or low-cost health coverage for eligible children and other family members. The names of these programs and the qualifications may vary in different states. You can find out more information from your state's Medicaid office, by calling 1-877-KIDS-NOW or at [www.insurekidsnow.gov](http://www.insurekidsnow.gov).
- › **Ryan White HIV/AIDS Program:** Works with states, cities, and local community-based organizations to provide medical care for people living with HIV/AIDS who are uninsured or

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## Mental Health Clinics

Mental health clinics have therapists, social workers, counselors, and psychiatrists to offer special help with mental health.

It is important to **find someone you trust** when you talk about your feelings and emotions. If you don't feel comfortable with someone, it is OK to ask to talk to someone else.

You may get a referral from SEPs, Community Health Centers, General Health Care Clinics, or by visiting <https://findtreatment.samhsa.gov/locator>.

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## Immunization Clinics

Immunization clinics offer important vaccines for things like hepatitis A, hepatitis B, tetanus and the flu.

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## Infectious Disease Clinics (ID Clinics)

ID clinics offer special care for HIV/AIDS, HCV, STIs, and Tuberculosis.

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## Dentists

Good dental care is important to your health.

Community health centers and some hospitals may have dental clinics or schools where **low cost or free** dental care is available.

Find a dentist who will help you understand different **treatment options**. *For example, what are the benefits of getting a tooth pulled—or—what are the benefits of having a root canal instead?*

Talk to your dentist about how much your treatment will cost and different payment options.

## REMEMBER:

**When you find a good primary care doctor or family physician, it will mean:**

- › More time to build trust with your doctor. This may make it easier to talk about your drug use and other sensitive topics.
- › Fewer visits to the ER.
- › Less waiting for medical appointments.
- › You may not have to give a detailed medical history at every visit.

underinsured. You can find services locally by entering your zip code at [findhivcare.hrsa.gov/index.html](http://findhivcare.hrsa.gov/index.html) or by finding your State's toll free number at [hab.hrsa.gov/gethelp/statehotlines.html](http://hab.hrsa.gov/gethelp/statehotlines.html)

### IMPORTANT:

**If you receive Medicaid**, do your best to go to **every** meeting with your case worker and complete requests from Medicaid. It can be a problem if your benefits get cut off. You might even stop getting medicine that you need.

**If you don't have insurance**, look into public health insurance options and clinics that have a sliding scale for payment. You might be able to get Medicaid to pay medical bills you received while you were waiting for your Medicaid to start.

### REMEMBER:

There is almost always a wait before health insurance gets started (Medicaid or other health insurance).

**THERE ARE  
FREE OPTIONS.**

## TIPS

### > **For finding a good doctor/provider**

> **Ask around:** Get referrals from other people who use drugs, friends, family, co-workers, counselors, and people you trust. Find out what people like best about their doctor. Ask about strategies they've used to get good healthcare.

If you have a good experience at an ER, on a medical van or at an SEP, ask the doctors or staff there for a referral to a primary care doctor.

> **Shop around:** Visit a couple of doctors. It might feel like a hassle at first, but in the long run, it is worth it.

Doctors at SEPs, methadone programs, and outpatient programs have experience working with people who use drugs.

If you are not comfortable with a doctor, try finding someone new.

> **Consider location:** *How easy is it to get there? Are you comfortable going to a doctor in your neighborhood?*

You may be able to get many services in one location. Ask your provider if you can get transportation costs to and from your visit.

> **Consider hours that the doctor is available or when the clinic is open:** *Do the hours fit your schedule?* Hospitals and hospital-based clinics may have more flexible hours, including evenings.

> **Make sure the doctor and their staff speak your primary language**—communication is important!

> **Consider how you feel about the entire staff at the office or clinic you go to**—they are all part of your healthcare.

**YOU HAVE A RIGHT TO STAND UP  
FOR YOURSELF AND CHANGE  
DOCTORS IF YOU WANT TO.**

# HOW TO PREPARE FOR HEALTHCARE VISITS

*Think about your main reason for going to the doctor and what you want to get from the visit—stay focused.*

› **Take care of any drug use needs before the appointment.**

Schedule appointments when you can be alert and won't be in withdrawal. This will help you focus on the visit and won't distract the doctor from the healthcare needs you want addressed.

If you show up for your appointment too high, the doctor may ask to reschedule your appointment.

› **Make a list of questions you have for the doctor.**

You may not get to ask all of your questions. Mark the questions that are most important to you.

› **Write down your symptoms.**

Include what the symptoms are, when they started, how often you have them and how severe they are on a scale of 0 (no pain) to 10 (the worst pain you could imagine). Be realistic.

› **Make a list of medications you are taking and other doctors you are seeing.**

Include prescribed medications as well as over-the-counter medicines, supplements and herbal treatments.

› **Bring someone with you when you go to the doctor.**

It is good to have someone to keep you company, to help remember what you are told or observe how you are treated.

› **Do your best to be on time (or even early) for the appointment.**

Arrange transportation and/or money for transportation to and from your visit ahead of time.

If you think you might be late or have to cancel your appointment—call the office as soon as you can.

› **Make sure you have your IDs and/or medical insurance card (if you have one) ready to bring with you.**

It's a good idea to keep copies of all of these documents.

## **IMPORTANT:**

### **Identification (ID) and contact information**

Most healthcare clinics will require that you have **one or more** forms of identification (ID) such as a state driver's license or ID card, passport, military ID, etc.

If you don't have or don't want to give a **Social Security number**, it is better to say you don't know it than to give a fake number.

**Even if you don't have ID** or don't want to give your real name or contact information, you will still be able to access some healthcare services in the Emergency Room.

There are many benefits to giving your right name and contact information, particularly **if you're admitted to the hospital**. It allows the healthcare provider to contact you with important test results, if your medication needs to be changed, or if anything else important comes up. However, if you do not have Medicaid or are under insured and you give your real name and social security number you may be financially responsible for the medical services you receive.

### **Scheduling appointments**

- › Schedule visits for a time when you are most likely to make it.
- › Find out if you need to make an **appointment** or if the clinic has **drop-in** hours.
- › If you ask for the first appointment of the day or the first appointment after lunch, you might have less waiting before you see the doctor.

## What to expect when you get there

### > **There may be a long wait.**

Try to plan ahead so you don't go into withdrawal while you're waiting. Bring something to do while you wait (something to read, crossword puzzles, etc).

You can also use this time to think about and write down **questions** or things you want to talk about with the doctor.

### > **You may talk to several nurses or other staff before you see the doctor.**

If you have to explain things more than once, be **patient and consistent**. Staff are there to help and want to hear information directly from you.

### > **You may have to fill out some paperwork**—it's OK to ask for help, and to ask for paperwork in the language you understand.

### > **Your time with the doctor may be short.**

Choose 1 or 2 of the most important problems to discuss.

#### **Doctors are often busy.**

It is not unusual for some doctors to answer the phone while you are with them.

Even though it can be frustrating, doctors may treat you with more patience if you are patient with them.

### > **You may be asked to talk about sensitive issues.**

If you need privacy, it is OK to ask for it.

You will be asked questions about your **medical history and current health**, including drug use (and the health of your family).

Think about what you feel comfortable talking about so that you are not caught off guard.

Doctors use this information to: 1) help give you the right diagnosis, and 2) so that they do not prescribe medication that is unsafe.

**GO WHERE YOU  
FEEL COMFORTABLE.**

## TALKING WITH HEALTHCARE PROVIDERS ABOUT DRUG USE

*Talking about drug use is personal. Even though it may not always feel like you have a choice, it should be up to you when and how much you talk about your drug use, even with doctors. Here are some things to think about when deciding how to talk about drug use with your medical providers.*

### **When talking about your drug use, it's OK to build trust first:**

- > If you need to, wait until the second or third visit to talk about your use.
- > Be polite and keep an open mind—don't expect the worst.

### **If the doctor is focusing too much on your drug use:**

- > Politely remind them about the issue you are asking for help with.

Ask the doctor to explain how your drug use is related to the issue you are asking for help with. If you disagree, explain this to the doctor in a friendly way—or find a new doctor.



## Reasons why it may be hard to talk about drug use (and why some people decide not to):

- > You are concerned that doctors may treat you differently because of your drug use—instead of getting to know you as an individual.
- > If you are a parent you may be afraid to tell the doctor because they might report you to child protective services for abuse or neglect.
- > If a doctor perceives you are at risk of harming yourself or others, they must report it.
- > You are afraid the doctors will focus only on your drug use instead of taking care of what you want help with.
- > You are afraid that some doctors prescribe medication differently to people who use drugs.

## Some reasons why it is good to talk about your drug use:

- > The doctor may be able to make a **better diagnosis** if they know the whole story.
- > Even **symptoms** that may seem unrelated to drug use can sometimes be a result of drugs you are taking or the “cut” in those drugs.
- > There may be **interactions** between drugs you are taking (street, prescription or over-the-counter) and medications that the doctor wants to prescribe.
- > Being up front about your drug use can help **build trust** with your doctor. *Trust is an important part of your relationship and can lead to better care.*

**IT IS IMPORTANT TO BE  
HONEST WITH YOURSELF  
ABOUT YOUR DRUG USE.**

## TIPS

### For communicating with your doctor

Your **relationship** with your doctor is important—it's great when you can work as a **team**.

- > If doctors, nurses, or other staff don't speak your language, you have a right to a **translator**.
- > Ask **questions** until you understand. It's OK to ask for simpler answers. You have a right to understand your healthcare.
- > **Be as honest as you can be.** If you can't talk about everything right away, it's OK.
- > **Be patient with your doctor—just as you want them to be patient with you.** Remember that they are only human too and have good and bad days.
- > Stand up for yourself in a polite way. You can be firm, and still be **friendly!**
- > **Trust yourself.** If you think that the doctor is ignoring something important—ask questions. This can be hard, but in the end, your health is worth the extra effort.
- > **Be careful about getting angry or defensive.** Anger or aggressiveness will probably make the doctor stop listening and try to end the visit quickly.
- > **You know best what will and will not work for you.** Talk to your doctor if you think they are making an unrealistic plan for you. This is very important when taking your prescription medication.
- > **Take notes** or ask the doctor to write down important things for you.
- > Give **positive feedback** when things go well—let doctors know when they get it right!

**LET DOCTORS KNOW  
WHEN THEY GET IT RIGHT.**

# TIPS

## For communicating with your doctor

Here are examples of things you can say to the doctor when you don't want to talk about drug use:

*"I hear what you are saying and maybe we can talk about my drug use later. Right now, I am more worried about \_\_\_\_\_."*

*"I understand that you are worried about my drug use, but I am not ready to change that. I still care about my health and would like your help with \_\_\_\_\_ now."*

*"Can you explain exactly how my drug use will impact \_\_\_\_\_? I do want to feel better, and I don't want to change my use right now. Maybe there are some other things I can do now?"*

*"If I can't change my drug use right now, are there other things I can do to take care of my health? Maybe then we can start to talk more about my drug use."*

**TRY AND FIND A DOCTOR  
WHO MAKES YOU FEEL  
COMFORTABLE AND  
RESPECTS YOUR BOUNDARIES.**

## Things that may have a negative impact on your healthcare

Here are some things that *might* make doctors frustrated:

- › Answering your **cell phone** or **texting** during a visit. Think about turning it off or setting it to silent.
- › Being **rude** or aggressive. **Even though things might get frustrating**, try to communicate in a calm and friendly way.
- › **Missing appointments** without calling ahead or canceling many appointments in a row. It's OK to cancel, but calling ahead helps.
- › **Saying that your pain is much worse than it is.** This can lead to the wrong diagnosis, getting more tests than you need, and it can take up more time. Being realistic and honest can help your relationship with your doctor.
- › **Not getting tests** that the doctor schedules for you. If you can't make it, let the doctor who scheduled the test know so that you can reschedule.
- › **Telling the doctor what your diagnosis should be.** Give the doctor a chance to do their job. If you have had the same kind of problems in the past or you think the doctor is missing something, it can be helpful to share the information with them.
- › **Selling your medication.** The medication was given to you to improve your health and if you don't take it your health may suffer.  
It is illegal to sell your medication. If the doctor finds out, they are responsible for reporting this and you could lose your insurance and even be charged with a crime.

**BE PATIENT  
WITH YOUR DOCTOR.**

## Before you leave and after the visit

- › **Schedule a follow-up appointment before you leave the office.**

Get the office to **write down the information on an appointment card** that includes the date and time of the visit. Also get the phone number and address of the office.

If you have a phone, ask the doctor's office to give you a **reminder call** before the appointment.

- › **If your doctor refers you to a specialist—it is important to follow-up.**

If things don't work out with the specialist, go back to the doctor who referred you so that they can keep trying to help you.

- › **Ask about potential side effects if you are given new medication.**

Also ask if there are ways to make side effects easier to deal with.

- › **After the visit, it can be helpful to make a list of things like:**

- › Dates of future appointments
- › Dates of referral appointments
- › Tests that were done to remind you to ask for results
- › Any new medications that you were prescribed

### **IMPORTANT:**

***When you see a doctor, ask for copies of any test results, procedures, referrals or medications given. These are part of your medical record.***

If you wait until later to **ask for copies**, they may be hard to get. You may be charged money, and it can take a long time.

**Keep copies in a safe place** where you will be able to find them later. If you don't have a place to keep them, ask someone you trust (friend, case manager, drop-in center, etc.) to keep the copies.

***Your medical records should not be shared without your consent (unless it's an emergency).***

## TIPS

### ***For taking your medicine***

- › **Get a pill case**—the kind with a little box for each day of the week. They can be found at drugstores.
- › Many people who use heroin or prescription painkillers find that getting on **methadone** or **buprenorphine** is helpful when they need to take other medicines on a schedule.
- › **Ask someone you trust to hold the medicine** if you think you might lose it. They can also remind you to take it when you need to.
- › **Find a pharmacy that is close to where you stay** or cop drugs so it is easy to fill your prescriptions.
- › If you take street drugs every day, you could **use copping as a reminder** to take your medicine.
- › **Talk to your doctor about your schedule** (what time you wake up and go to sleep) and when it would be best to take your medicine.
- › Find out if your medication needs to be **taken with food or on an empty stomach**.
- › **Ask the doctor what will happen if you drink alcohol** while taking your medicine. It may not be a problem to take your medicine AND drink—it is better to ask your doctor than to stop taking your medicine. Some medicines (like some anti-depressants) don't mix well with alcohol—so be careful.

**DON'T PLAY DOCTOR—  
KNOW HOW YOUR MEDICATIONS  
AND DRUGS/ALCOHOL INTERACT.**

# SPECIAL

# CONCERNS

For people who use drugs, there are special concerns that can have an impact on health and healthcare. HIV and hepatitis are common concerns, but it is also important to think about pain management as well as reproductive healthcare.

## Pain management

**Pain affects everyone differently.** Pain is your body's way of telling you something is wrong. It is often a sign that you need treatment to address the cause of the pain.

Doctors can be suspicious when a person who uses drugs says they are in pain and need pain medication. They may think you are trying to misuse the medicine. On the other hand, experts tell doctors that they should never withhold pain medication when it is truly needed – **so don't give up hope that a doctor will help you.**

Working with your doctor to address your pain can be a sensitive issue. You may need to negotiate with the doctor to make a plan that works for you and the doctor.

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### Keep a pain journal.

Write down when, where, and how much pain you have.

- › Consider rating your pain on a scale of 0 (no pain) to 10 (the worst pain you can imagine). This will help your doctor to understand the level of pain you are in and help to track if the treatment is working for you.
- › Record exactly how the pain is changing your daily activities. For example, is the pain keeping you from sleeping, working, or eating?
- › Include a list of what you have done to help manage your pain, heating pad, over-the-counter medication, cooling the area, resting, etc.

### IMPORTANT:

***If you do not want to take opioids because you are concerned about relapse or cravings, be honest with your doctor so that you can work together to think of other options.***

**YOU DO NOT HAVE  
TO TAKE OPIOIDS.**

### Some ways that doctors treat pain may include:

- › Diagnosing the **cause of the pain** and treating that condition.
- › Discussing different **options** for controlling pain including stress reduction, physical therapy, acupuncture, as well as opioid and non-opioid based medications.
- › Making more **appointments** to closely monitor your level of pain and medication use.
- › **Testing** your urine for illicit substances.
- › Recommending **counseling**.

Pain management is really important to your overall well-being. It can take time to get pain under control so having a trusting and ongoing relationship with a doctor is important.

### IMPORTANT:

#### Be careful with common pain relief medicines!

It is important to talk to your doctor if you are taking Tylenol (acetaminophen). **Acetaminophen can be more serious than you may think...**and it is common in many cold medicines and pain medicines (Percocet, Vicodin, Ultracet, etc.).

Too much acetaminophen can cause *very serious liver damage or liver failure*. That means no more than 8 tablets of Extra-Strength Tylenol a day (4 grams or 4000 milligrams) and be careful when you take it every day for a long time.

- › If you have hepatitis B or C, you should talk with your doctor about acetaminophen. The general rule is to avoid taking more than 2000 milligrams per day.
- › *Drinking alcohol on top of high doses of Tylenol can be damaging to your liver.*
- › Ibuprofen (Motrin, Advil) and Naproxen (Aleve, Midol) should be taken with food to avoid stomach ulcers.

**TALK ABOUT  
YOUR METHADONE USE.**

### Methadone

Tell your methadone clinic or doctor if you start taking new medication. Some medicines can make your body process methadone slower or faster, meaning **your methadone dose may need to change** if you start taking new medications.

If you are on methadone, you may have been told that you cannot take “Talwin.” This is true, but you should also know that **Talwin is not used much anymore**. So, if you tell a doctor you can’t take it, you are basically telling them that you are on methadone.

It is important to talk to your methadone program about medications prescribed to you, especially if they come up in your urine. **Bring the bottles to your appointment** if you can.

### Reproductive health and prenatal care

It is important for women to visit the obstetrician/gynecologist for **regular exams** – even if you are not getting your period.

If you are pregnant and using drugs, **prenatal care including HIV testing and hepatitis B and/or C testing is very important** for your health and your baby’s health. If you find out that you have HIV or hepatitis B and/or C, there are things you can do during pregnancy to reduce the chance of your baby getting it.

If you are pregnant, strongly consider getting into drug treatment.

Pregnant women usually go to the **top of the waiting list** for drug treatment.

### HIV and hepatitis

#### HIV/AIDS

If you are a person living with HIV or AIDS, it is best to find a provider who has experience working in this area. They are more likely to have up-to-date information on medical treatments.

It is very important to take HIV medicines **exactly as they are prescribed**. If you do not, the virus can figure out ways to make the medicine stop working (called resistance).

There is **public assistance** (including medical insurance) for people living with AIDS in New York State.

## Hepatitis C (HCV)

Anyone who has ever injected, sniffed, or smoked drugs, all Baby Boomers, and anyone who has ever been incarcerated should get tested for HCV.

There are different kinds of tests for HCV. It is important to understand what kind of tests you are having done.

Antibody tests can tell you if you have ever been infected with HCV. But it is possible to have a positive antibody test for HCV and to *not actually have HCV infection anymore*. Ask your doctor for more information.

Everyone who tests positive for HCV antibodies should have **additional tests** to see what your current HCV status is.

There are now effective all oral cures for HCV. Talk to your doctor for more information.

## Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) communities

Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) people often experience homophobia and transphobia when seeking medical services. This may make disclosing drug use even more of a challenge.

Many local Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ) centers create and maintain referral lists of LGBTQ-friendly providers. They can be a great resource when trying to locate culturally appropriate and sensitive services, but you can also do your own research and ask around.

Certain drugs like crystal meth, molly, ketamine, and GHB are more commonly used by LGBTQ communities. These drugs are often used together and during sexual encounters. It is important to find a doctor with whom you feel comfortable discussing both your drug use and sexual behavior.

Talk to your doctor about how your drug use may impact your adherence to PrEP and HIV medication. Try to plan ahead so you remember to take your medication when using drugs.

**THERE ARE NOW  
EFFECTIVE ORAL CURES  
FOR HEPATITIS C.**

## Drug treatment

Some drug treatment programs have **medical care on-site**.

There are **many different kinds of drug treatment programs**, both inpatient and outpatient.

It is important to find a drug treatment program that will **support your needs**. Try and find out exactly what kinds of groups and services are offered.

- > **Calling programs** before you go can give you a better idea of what to expect.
- > Find out **what kinds** of drug treatment your insurance will cover and **how often** they will cover it. *For example, if you leave a 28-day program early, you may not be able to go back again for a certain period of time.*
- > Some programs will be able to help you with **medical detox** and some will not.
- > Ask your provider for help finding the treatment program that will best meet your needs.

## Mental health

If you are thinking about hurting yourself or hurting someone else, go to the ER or call 911.

**Mental health services**, like counseling or getting medication, can be accessed at some syringe exchange programs, community-based organizations, community health centers, and the ER.

If you are waiting for your Medicaid or insurance to kick in, ask your psychiatrist if they can get **“samples of medication”** or help with **patient-assistance programs** (drug company programs where they give medication to people who need it, but can't pay for it).

If you take benzos (like Xanax, Klonopin, Librium, etc.), be very careful when you stop taking them for a period of time. **Coming off benzos too fast may cause medical problems, such as seizures.**