

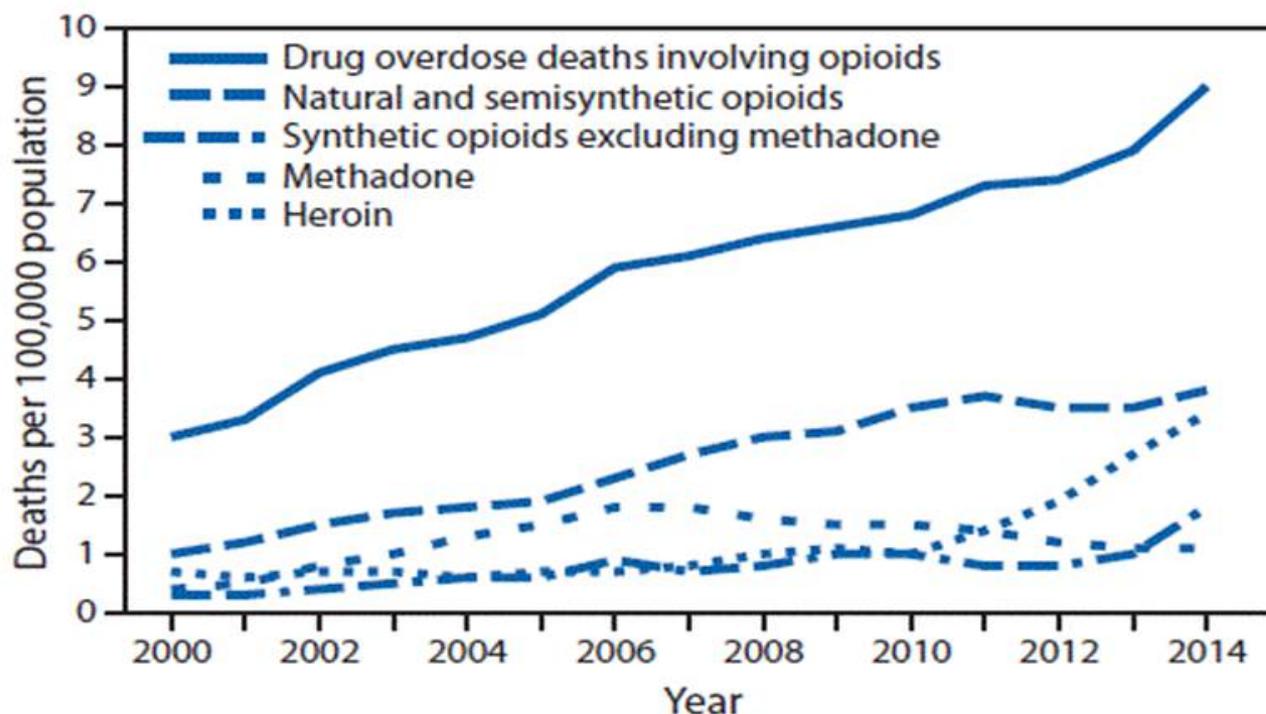
OVERDOSE PREVENTION EDUCATION AND NALOXONE DISTRIBUTION IN OPIOID TREATMENT PROGRAMS

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National Overdose Deaths

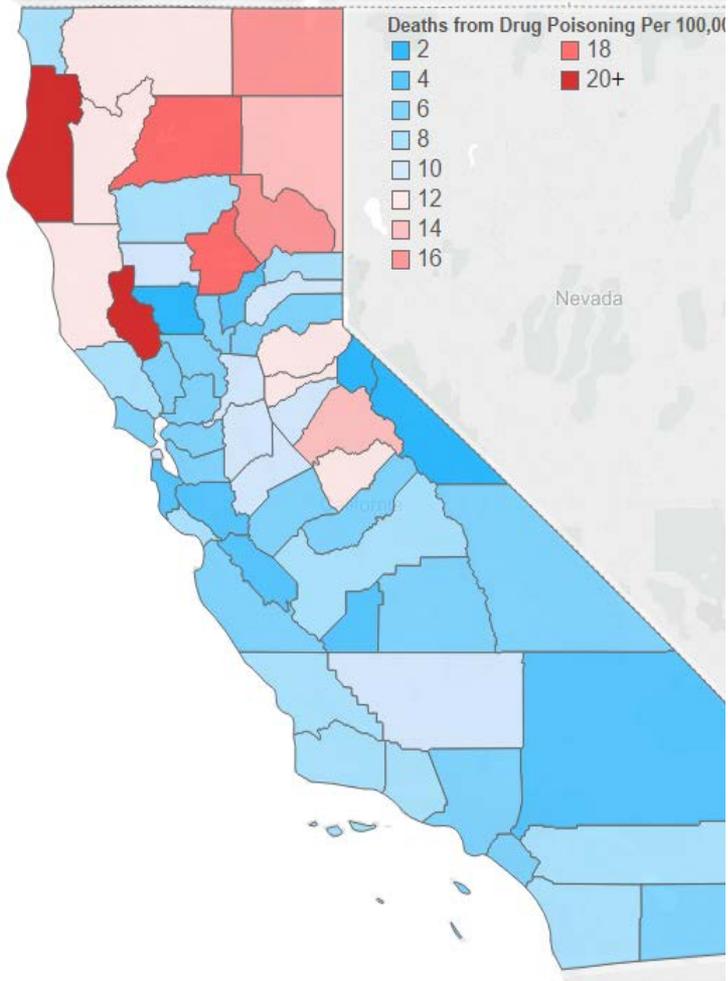
Drug overdose deaths involving opioids by type of opioid — United States, 2000–2014



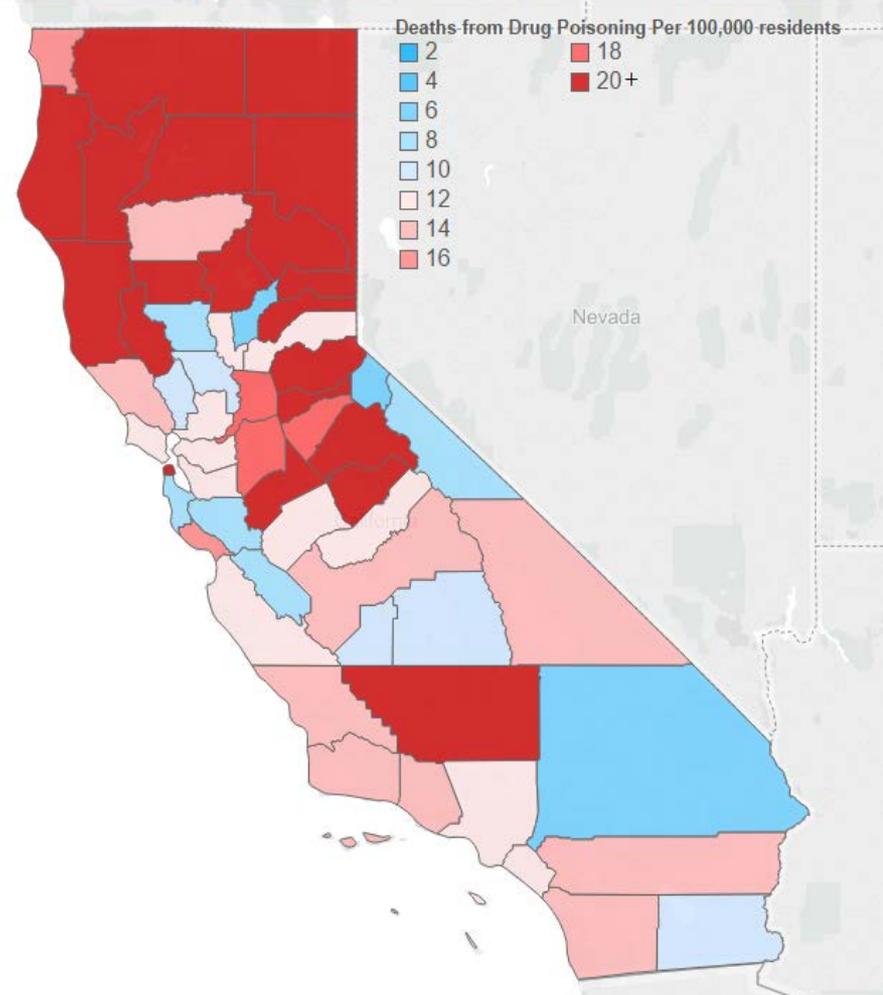
Rudd R et al MMWR 2016

California Overdose Deaths

Drug Poisoning Deaths by County, 2002



Drug Poisoning Deaths by County, 2014



Strategies to Reduce Overdose Deaths

- Education and Awareness Campaigns
- Prescribing Guidelines
- Prescription Monitoring Programs
- Good Samaritan Laws
- Alternative Pain Management Options
- Medication Assisted Treatment Access
- Naloxone Access

Naloxone

- Naloxone is an opioid antagonist with no physical side effects except those associated with withdrawal
- It is a drug that can be distributed without a prescription under a physician's standing order
- As a provider you can prescribe naloxone to anyone who could potentially respond to an overdose – those who use drugs, their friends, family, providers and community members
- Providers and laypeople have immunity from criminal and civil liability when prescribing or administering naloxone



Why Incorporate Naloxone into MAT?

- Treatment providers have access to people who are at risk for overdose
- Overdose-Treatment Paradox
 - Engagement in treatment can help individual eliminate or reduce drug use which *decreases* overdose risk yet it is also a tolerance changing event that can actually *increase* risk for overdose for people who return to substance use during or after treatment
- Conversations about overdose contribute to comprehensive trauma-informed care
- Patients/Clients as overdose responders

Overdose Risk

- Changes in tolerance
- Mixing drugs
- Strength and content of illicit drugs
- Physical Health
- Routes of Administration
- For Opioid Treatment Program patients:
 - new patients – during induction
 - polysubstance use
 - unexpected detox or abruptly leaving treatment
 - At discharge and after termination
 - important potential bystanders

Overdose Recognition and Response

- Mechanism of an opiate overdose
- Recognition of an overdose
- Response
 - Calling 9-1-1
 - Administration of naloxone
 - Rescue Breathing
 - Aftercare



Overdose Prevention Education & Naloxone Distribution Project

- OPEND is an Alameda County funded pilot project to increase access to naloxone and build capacity of organizations in the county to respond to the overdose epidemic
- Since January 2016 we've received reports of **25 overdose reversals**
- Similar programs have existed across the country since 1996, between 1996-2014 they distributed 152,283 naloxone kits at 644 sites and received reports of 26,463 overdose reversals.
- Overdose death rates are lower in communities with programs like OPEND

Training First Responders

- Studies have found that providing naloxone kits to laypersons
 - Reduces overdose deaths
 - Is safe
 - Is cost effective
 - Only requires brief training
 - Is empowering for, and desired by, people who use drugs
- U.S. and International Health Organizations recommend providing naloxone kits to laypersons who may witness an overdose, *to patients in substance use treatment programs*, to people leaving prison and as a component of prescribing an opioid.

Models of Incorporating OPEND Services

- As a MAT Provider there are three options to incorporate these services into your program
 - Develop a protocol for responding to overdose on site
 - Incorporate messages about overdose risk and prevention strategies into programming, sessions and paperwork
 - Train clients/patients to respond to an overdose and provide naloxone through distribution or prescription
- As a provider you can seek technical support for implementing these different methods of service delivery by collaborating with local community based agencies or utilizing online education resources and consultation

Drug Medi-Cal Organized Delivery System

- DMC-ODS provides a continuum of care modeled after the American Society of Addiction Medicine Criteria for substance use disorder treatment services, enables more local control and accountability, provides greater administrative oversight, creates utilization controls to improve care and efficient use of resources, implements evidenced based practices in substance abuse treatment, and coordinates with other systems of care.
- 53 out of 58 California counties opted into this pilot program

Naloxone in DMC-ODC

- Naloxone is a covered benefit of the Medi-Cal program
- Naloxone prescription does not require a TAR
- In DMC-ODS counties NTP's can now bill for naloxone and get reimbursed as long as the prescriber is enrolled as a FFS provider
- NTP's are ***required*** to provide access to naloxone

Resources

- DOPE Project (San Francisco)
 - <http://harmreduction.org/issues/overdose-prevention/>
- Prescribe to Prevent – resources for prescribers, providers
 - <http://prescribetoprevent.org/>
- Get Naloxone Now – web based overdose response training
 - www.getnaloxonenow.org
- Guide to Developing and Managing Overdose Prevention and Take Home Naloxone Projects – guide by Harm Reduction Coalition
 - <http://harmreduction.org/issues/overdose-prevention/tools-best-practices/manuals-best-practice/od-manual/>
- DMC-ODS Information
 - <http://www.dhcs.ca.gov/provgovpart/Pages/Drug-Medi-Cal-Organized-Delivery-System.aspx>

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