Center for Rural Pennsylvania

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Confronting the Heroin and Opioid Epidemic in Pennsylvania

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The opioid overdose epidemic has now touched almost every community in the United States. According to the most recent Centers for Disease Control (CDC) data from 2014, the United States recorded 47,055 fatal drug overdoses in the one-year period, which makes this the number one leading cause of injury-related death, surpassing the previous leading cause, deaths from car crashes. Sixty-one percent (61%) or (28,647) of these overdose deaths were attributed to opioids, which include prescription painkillers, heroin, and fentanyl.

The opioid overdose epidemic has also particularly affected communities throughout Pennsylvania, including rural Pennsylvania. The age-adjusted overdose death rate per 100,000 people in Pennsylvania was 21.9 in 2014, the 8th highest state rate in the United States. Pennsylvania's overdose rate is above the 2014 national average rate of 14.7 deaths per 100,000 population. Drug overdoses are now the leading cause of injury death in Pennsylvania with 2489 lives lost in 2014, the last year for which statistics are available.

All of these statistics equate to an average of seven deaths per day in Pennsylvania. That means that from today, 231 Pennsylvanians are expected to die from overdose by the Fourth of July; 672 Pennsylvanians are expected to die from overdose by Labor Day; and 1449 Pennsylvanians are expected to die from overdose before Christmas. That is 1449 additional families in Pennsylvania who are expected to be missing a loved one because of overdoses, in addition to those lives already lost in the first half of this year.

The current epidemic of opioid overdose has been linked to the increased prescribing of opioid pain medications in the 1990s and the more recent surge of highly potent, inexpensive heroin and fentanyl. Many individuals who are struggling with heroin addiction began by taking and eventually misusing prescribed opioids. Others began their journey towards their heroin addiction by taking illicitly diverted prescription opioids. These individuals moved to less expensive and more easily obtainable heroin when these opioids became increasingly more difficult to obtain due to stricter prescribing guidelines and chemical reformulations.

Like persons who use heroin, individuals who take prescription opioids medically or non-medically (illicitly) are at risk to experience an overdose. Certain circumstances can increase an individual's risk of overdosing, such as recent re-entry to the community from incarceration or from completion of a Substance Use Disorder treatment program, due to decreased tolerance. Moreover, individuals are more likely to overdose if they are taking multiple drugs at one time. For example, opioids and benzodiazepines are commonly prescribed for the treatment of anxiety disorders. These medications

are sometimes made more readily available than is clinically prudent to patients who are receiving medications such as methadone through medication assisted treatment, or (MAT).

As the rates of overdose continue to rise, improving access to Substance Use Disorder treatment services has become an important focus of prevention efforts. For example, President Obama recently allocated \$920 million to be used to increase the access and availability of Medication Assisted Treatment, or (MAT), which has been proven to reduce the consumption of illicit opioids and reduce deaths related to overdose. He has also allotted \$30 million towards research and evaluation of MAT to improve its effectiveness and implementation in a variety of communities.

Locally, Governor Wolf has increased the Pennsylvania Department of Drug and Alcohol Programs by \$5 million in the 2015 budget. The proposed DDAP budget for 2016-17 has been raised to \$34 million to help treat the estimated 11,250 new individuals with substance abuse disorders.

In addition to the expansion of quality treatment availability and capacity, other effective strategies against overdose deaths include expanded availability of naloxone, increased attention to prescribing practices through the use of Prescription Drug Monitoring Programs (PDMPs) and the application of opioid Prescribing Guidelines by prescribers and dispensers.

Recently, Pennsylvania began taking policy steps to expand access to naloxone, a potentially life-saving medication which blocks the effects of opioids and can revive those who have experienced an overdose if it is available quickly. Pennsylvania's Good Samaritan Law, Act 139, took effect in November 2014. Specifically, it permits physicians and other medical professionals to prescribe, dispense, or distribute naloxone to individuals who are likely to witness an overdose, including for lay responders such as family and friends. The Act allows for the use of standing order prescriptions for naloxone, which helps to increase access for individuals in rural areas who may not have had access otherwise. Act 139 permits first responders, including law enforcement personnel, firefighters, and Emergency Medical Services providers to carry and administer naloxone in the event of an overdose. Lastly, the Act provides criminal and civil immunity to anyone who administers naloxone in good faith, as well as protecting individuals from criminal charges and prosecution related to drug possession or drug paraphernalia if they request emergency assistance for an overdose situation.

Pennsylvania is also in the process of implementing a Prescription Drug Monitoring Program, the ABC-MAP. This will give prescribers and dispensers access to a patient's controlled substance prescription medication history, which will alert them to potential dangers and enhance their ability to provide better quality care. The PDMP will also assist regulatory and law enforcement agencies in the detection and prevention of fraud, drug abuse, and diversion of controlled substances.

The CDC released Prescribing Guidelines for physicians and healthcare providers earlier this year. In Pennsylvania, the state and various interest groups representing specialty practice areas collaborated with the PA Medical Society to develop voluntary prescribing guidelines for three specialty practice areas (non-cancer pain; ED; and dental). Guidelines for other specialty areas (pharmacists; OB-GYN; and geriatrics) are also in development through the same process.

Beyond these efforts by policymakers and healthcare professionals, we frequently hear from community members that they are not certain how they can best address the issue of overdose. In the words of one concerned community member, "What can a non-professional do?" One strategy to increase community participation is through the development of community-based coalitions.

The Pennsylvania Heroin Overdose Prevention Technical Assistance Center, or TAC, was recently developed as a collaboration between the Program Evaluation and Research Unit (PERU) at the University Of Pittsburgh, School Of Pharmacy and the Pennsylvania Commission on Crime and Delinquency (PCCD). PERU began to address the opioid overdose crisis within Pennsylvania in 2008.

In 2013, PERU developed the *OverdoseFreePA* website (http://overdosefreepa.org/), also funded by PCCD. This nationally recognized website serves as an educational resource to family and friends, criminal justice leaders, healthcare professionals, and school and work leaders regarding various aspects of the opioid overdose epidemic specific to their point-of-view. The site contains current information on the incidence of overdose deaths, substances involved, and extensive resource information on how to recognize and respond to an overdose situation. Links to a Substance Use Disorder treatment program finder, a naloxone finder, and a drug collection box finder assist site visitors in locating resources to prevent overdose deaths.

The site has received national recognition and accolades, has been discussed on NPR, reviewed and supported by the Office of National Drug Control Policy, and reviewed by the CDC and the National Heroin Task Force. It has been cited as a national model for a state's response to the overdose epidemic.

The site also provides real-time information about overdose deaths through a detailed screening of toxicology reports to identify the specific drugs which contributed to death. This information is vital to communities in designing effective strategies to reduce overdoses and is not available to our communities in this form in any other way. There are currently ten participating counties which are submitting overdose death data. TAC staff are working in partnership with PCCD to expand the website to become a statewide resource by partnering with additional counties to collect overdose death data. It is expected that this website will be used by all persons within our Commonwealth as a toolkit to understanding more about the opioid overdose epidemic, as well as those looking for resources related to preventing overdose and facilitating treatment options for individuals who may be ready to take the next step.

In addition to expanding the *OverdoseFreePA* website, the TAC is partnering with PCCD and Pennsylvania counties to assist in the development of community-based coalitions that will be tasked with effectively addressing and responding to the opioid overdose issue in their counties. The TAC currently has eight counties across the state involved in trainings and hope to reach at least 40 counties in Pennsylvania. To our knowledge, there are no other states in the country that are approaching the reduction of this epidemic in this way, but we know that a community-driven and cohesive approach is the most effective manner to reduce the number of overdoses.

These coalitions, with the assistance of the TAC, will conduct community assessments that will focus on identifying the scope of opioid overdose within their community. All of the resources for these assessments and the manner in which they can be applied will be contained on the *OverdoseFreePA* website. Pivotal to these assessments will be the coalitions' access to accurate, real time overdose death data that we hope to make available via this effort. Once the community assessments are completed, the TAC will assist coalitions as they develop a personalized strategic plan and select evidence-based intervention strategies most appropriate for their community profiles.

The TAC will provide individualized assistance to every community on how to effectively implement the evidence-based strategies within their plan using approaches that have been developed and proven by PERU. Each plan will integrate a multidisciplinary approach incorporating community leaders, law enforcement, and other members of the community to become involved over time. The TAC will also assist the communities in performing on-going evaluations of their efforts, so these efforts can remain responsive to how the community's epidemic unfolds.

Each community coalition will be given a page on the *OverdoseFreePA* website. This page will feature the coalition's work and resources the community can use to implement its strategic plan and monitor its progress. As each coalition implements its strategic plan, the TAC will continue to provide assistance to ensure the plan's sustainability. This sustainability and continual quality improvement is essential to effectively reducing opioid overdoses and related deaths.

In essence, the TAC will guide each individual community on how to understand their overwhelming overdose tragedy, while also teaching each community the necessary knowledge and skills to chip away at this problem. Establishing diverse, multidisciplinary community-based coalitions to implement comprehensive, evidence-based strategies to effectively address the problem of opioid overdose in Pennsylvania is essential given the overwhelming multi-faceted nature of the current epidemic.

This epidemic is affecting all people within our Commonwealth. Research estimates that 1 out of every 4 people in Pennsylvania is directly affected by overdose, regardless of their income or neighborhood. We are working to save lives and reduce the stigma associated with Substance Use Disorder and addiction. Too many Pennsylvania families have lost loved ones. Through the TAC we will activate communities to take back our families!

Quality treatment works, recovery is possible, and every life is worth saving.