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Preventing Harm: Addressing and Preventing Opioid Addiction and Overdoses

May 19, 2016

Featured Speakers

- Valerie White, Deputy Director for Surveillance, Prevention, Drug User Health and Administration, New York State Department of Health AIDS Institute
- Steve Hanson, Associate Commissioner of the Division of Treatment and Practice Innovation, New York State Office of Alcoholism & Substance Abuse Services (OASAS)
- Sharon Stancliff, MD, Medical Director, Harm Reduction Coalition
Today’s Presentation

- Describe the scope of the public health problem of overdose from heroin/prescription opioids;
- Restate at least three actions that have been used in local community-based responses to opioid dependence in New York State; and
- Name at least two actions that response personnel can take to link individuals into care and treatment

Opioid & Heroin Deaths

Deaths related to prescription opioids and heroin drug poisoning United States, 2000-2014

*Age-Adjusted Rates
NYS Drug Poisoning Mortality

<table>
<thead>
<tr>
<th>Year</th>
<th>Heroin</th>
<th>Opioid Analgesics</th>
<th>Other &amp; Unk Opioids</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>136</td>
<td>735</td>
<td>242</td>
</tr>
<tr>
<td>2010</td>
<td>98</td>
<td>754</td>
<td>169</td>
</tr>
<tr>
<td>2011</td>
<td>144</td>
<td>901</td>
<td>318</td>
</tr>
<tr>
<td>2012</td>
<td>150</td>
<td>879</td>
<td>478</td>
</tr>
<tr>
<td>2013</td>
<td>163</td>
<td>952</td>
<td>637</td>
</tr>
</tbody>
</table>

Erie County Fatal Opioid Related Overdoses

- 2014 (N=127):
  - Other Opioid: 47%
  - Fentanyl Related: 22%
  - Heroin Related: 22%
  - Fentanyl & Heroin: 9%

- 2015 (N=203):
  - Other Opioid: 26%
  - Fentanyl Related: 43%
  - Fentanyl & Heroin: 19%
  - Heroin Related: 12%
NYC Unintentional Drug Poisoning Deaths, 2000-2015

Fentanyl & Overdose Deaths

- Fentanyl was relatively uncommon in overdose in NYC with fewer than 3% of deaths involving fentanyl in the past ten years

- Of the 886 drug overdose deaths in 2015, 136 (15%) involved fentanyl
Primary Heroin/Other Opiate Admissions

SFY '06 - '15

06 07 08 09 10 11 12 13 14 15

Heroin Other Opioids

57,626 7,086

24,232 17,833

Primary Heroin Admissions

SFY 2006-2015

06 07 08 09 10 11 12 13 14 15

NYC Long Island Upstate

39,198 33,962 13,808

4,620 11,535 17,808
Primary Other Opioid Admissions

SFY 2006 - 2015

NYC | Long Island | Upstate
---|---|---
06 | 4,209 | 1,637 |
07 | 5,134 | 
08 | 14,782 | 
09 | 12,124 | 
10 | 3,141 | 

New York State Response

- NYS AIDS Institute
- Harm Reduction Coalition (HRC)
- Office of Alcoholism and Substance Abuse Services (OASAS)
- Division of Criminal Justice Services (DCJS)
- State Education Department
- Department of Corrections and Community Supervision (DOCCS)
- New York City Department of Health and Mental Hygiene (NYCDHMH)
- Albany Medical Center
- Registered Programs and Trained Responders
**Special Focus Areas**

<table>
<thead>
<tr>
<th>Expanding Community Program</th>
<th>Over 300 programs currently registered; trainings for public</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Life Support</td>
<td>Permissible scope of practice now includes intranasal (IN) naloxone</td>
</tr>
<tr>
<td>Law Enforcement &amp; Firefighters</td>
<td>Frequently first on the scene of an overdose (OD)</td>
</tr>
<tr>
<td>Corrections</td>
<td>In 9 state prison facilities</td>
</tr>
<tr>
<td>School Settings</td>
<td>Initiated in August 2015 with changes in public health and education laws</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>Dispensing pursuant to standing orders</td>
</tr>
</tbody>
</table>

**Community Overdose Program**

- First permitted in April 2006 under Public Health Law Section 3309
- More than 300 programs registered (including all 12 OASAS Addiction Treatment Centers and 23 syringe exchange programs)
- Directory: [www.health.ny.gov/overdose](http://www.health.ny.gov/overdose)
- > 112,000 individuals trained
- > 3,500 reversals reported (likely number substantially higher). Of these, > 1,850 are community responders
Overdose Programs: Responders

- Opioid users, who may themselves be at risk for overdose
- Family and friends of individuals who use opioids
- Staff and others at agencies or facilities serving those at risk (homeless shelters, drug treatment providers, youth-serving agencies)
- Interested members of the public
- Guidelines indicate responders should be 16 or older

Eligible Programs

- Health care facilities
- Drug treatment programs
- Health care practitioners (MD, DO, NP, PA)
- Community-based organizations
- Local health departments
- Other local and state agencies
- Colleges, universities and trade schools
- Public safety agencies
- Pharmacies
Role of Law Enforcement

- Slide-based curriculum
- Training materials
- Public safety specific reporting form
- Model policies and procedures
- 2,500 general topics instructors trained
- 8,400 officers trained in 523 agencies in 59 counties
- Naloxone administered more than 1,500 times

Role of Schools

- Guidance for schools
- Web-based training and resources for trainers
- Resources for responders
- Resources for school medical directors
- Sample policies and procedures

Through March 1, 2016 - 29 registrations & 113 distinct schools
Responders Trained

43,475 Responders Trained between 10/2014 - 10/2015

- 4th Q 2014: 8,300
- 1st Q 2015: 11,529
- 2nd Q 2015: 15,677
- 3rd Q 2015: 7,969

**Community** | **Law Enforcement** | **Firefighters** | **EMS**
---|---|---|---
4th Q 2014: 8,300 | 1st Q 2015: 11,529 | 2nd Q 2015: 15,677 | 3rd Q 2015: 7,969

Reported Naloxone Administrations

- **Community Program:**
  - 2006-2012: 709
  - 2013: 177
  - 2014: 1,608
  - 2015 As of 3/11: 275

- **Law Enforcement:**
  - 2006-2012: 709
  - 2013: 177
  - 2014: 449
  - 2015: 1,608

- **Fire Fighters:**
  - 2013: 177
  - 2014: 310
  - 2015: 504
  - 2016: 59

- **EMS:**
  - 2013: 177
  - 2014: 138
  - 2015: 963
  - 2016: 201
Impact: Mortality Rates

- *Annals of Internal Medicine* reported sharp decreases in overdose deaths after prison release from 1999 to 2009

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Corrections

- Approximately 22,000 releases each year
- Training all soon-to-be-released inmates on opioid overdose prevention with naloxone
- Offer kits upon release
- Department of Corrections and Community Supervision (DOCCS) RNs empowered to administer naloxone for suspected overdose without a patient-specific order from a physician
Corrections

- Staff training
- Selecting trainers:
  - Correctional officers
  - Medical staff
  - Inmates
  - Staff from community based organizations
  - Parolees

- Video: Staying Alive on the Outside

Pharmacists & Non-patient Specific Rx

Pharmacists without a central prescriber can:

- Work with registered opioid overdose programs
- Dispense naloxone pursuant to a non-patient specific prescription issued by the clinical directors of the registered programs
- Nearly 2000 pharmacies should soon be able to dispense naloxone
Formulations

Reducing Prescription Opioids

GUIDELINE FOR PRESCRIBING OPIOIDS FOR CHRONIC PAIN

IMPROVING PRACTICE THROUGH RECOMMENDATIONS

1. Nonopioid treatments for chronic pain should be prioritized whenever possible.

2. Consider nonpharmacological therapies (e.g., physical therapy, acupuncture).

3. Patients with chronic pain should also receive education about pain management strategies.

PRINCIPLES OF CHRONIC PAIN TREATMENT

- Effective pain management often involves a combination of nonpharmacological and pharmacological therapies.
- Patients should be encouraged to participate actively in their pain management plan.
- Pain management should be tailored to the individual patient's needs and preferences.
Coverage

- All Medicaid plans must cover at least one formulation of naloxone for people at risk of overdose
- Medicaid Fee for Service covers naloxone under standing orders at pharmacies - awaiting word from Managed Care
- No information on private insurance
- If a patient cannot afford the naloxone and/or co-pay, they should be directed to listing of NYS Opioid Overdose Prevention Programs

Report on Opioid Poisoning/Overdose

- Mandated under PHL § 3309
- Issued by NYSDOH, but is multi-agency effort
- Released in March 2016
- To be done annually
Evaluation of OD Ed & Naloxone Distribution Programs

- Feasibility
- Increased knowledge & skills
- No increase use; Increase in drug treatment
- Reduction in overdose in communities
- Cost effective

- $438 (best)
- $14,000 (worst) per quality-adjusted life year gained

Opioid Maintenance & Mortality

In Baltimore, researchers found:

- Statistically significant inverse relationship between heroin OD deaths and patients treated with buprenorphine (P = .002)

(Adjusting for heroin purity and # of methadone patients)
OASAS Opiate Initiatives

- Partnership with Department of Health for Naloxone Training: OASAS Addiction Treatment Centers (ATC’s) - 15,000 trained/71 documented reversals
- Residential Redesign
- Level of Care for Alcohol and Drug Treatment Referral (LOCADTR - 3) tool
- Medicaid Redesign
- Opiate Treatment Program Expansion and Vivitrol
- Web Page Improvement - Bed Availability Report

Medicaid Redesign

- Move to more community based service supports
- Prevent hospitalization/re-hospitalization
- In concert with Health Homes
- Establishes eligibility for Home and Community Based Service (HCBS) service array
Opiate Treatment Expansion

- OTP Capacity expansion, July 2015 - programs apply
- New OTP Programs
  - Watertown
  - Utica
  - Troy
  - Peekskill - Opened 2015
  - Albany - Opened 2015

Vivitrol

- Vivitrol shows great promise for opiate treatment
- Barrier of cost
- OASAS working with Alkermes
  - ATC project
  - Edgecombe Correctional Facility - parole violators
  - County Jails
- Provide initial dose prior to discharge/release
Guide for Individuals & Families

Access Treatment: A Guide for Individuals and Families Seeking Care & Support

How to Get Help for a Substance Use Disorder
Recognizing the need for help for substance use disorder is the first step on the path toward recovery. Educating yourself about substance use disorder treatment is provided here along with answers to frequently asked questions about treatment options, and additional resources.

How to Navigate the Substance Use Disorder System of Care
View 10 brief educational videos below that provide general information about navigating the substance use disorder system of care. The common questions individuals and families may have about treatment and recovery.

Getting Help

Bed Availability Report

OASAS Bed Availability
Search for bed availability by county, city, zip, organization, gender or age group.

Your search returned 880 organizations with bed availability.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Total</th>
<th>Adult (age 18 and over) Availability</th>
<th>Adolescent (under age 18) Availability</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Number of Available Beds</td>
<td>Male Beds</td>
<td>Female Beds</td>
</tr>
<tr>
<td>East River St 51 Granville CR Community Residential 3190</td>
<td>1</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>3075 31st Ave</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>East River Street Halfway House CR Community Residential 30862</td>
<td>1</td>
<td>√</td>
<td></td>
</tr>
</tbody>
</table>
Public Awareness/Education

Educate, Communicate, Conversations
- Combat Heroin
- Progression of Addiction
- Navigating the Substance Use Disorder (SUD) System
- Synthetics

Public Awareness/Education

Educate, Communicate, Conversations
- Talk 2 Prevent
- Kitchen Table Toolkit
Kitchen Table Toolkit

1. Talking with the Community Part 1 video: community forums, PTA meetings, etc
2. Talking with Young People Part 2 video
3. Guidance Documents
4. Conducting Forums
5. Print Materials

Keys for Success

- Commitment from Governor
- Collaborations Within NYSDOH
- Strong Community Partnerships
- Pharmacies
- Collaborations Across State Agencies

Pharmacies

Success
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