

Community-based Naloxone Distribution and Safe Opiate Prescribing Policies and Practices in the Tri-County Area

Multnomah County Health Department
Outside In
Clackamas County Public Health
Washington County Health & Human Services
Urban League
HealthShare of Oregon

Lindsay Jenkins, Research Analyst, lindsay.jenkins@multco.us



Naloxone Implementation

1. Naloxone training now offered at all 5 syringe exchange sites in Multnomah County
2. Two additional external training sites launched in Nov 2014: detox and supportive housing agency
3. Training video completed and posted on MCHD YouTube channel
4. Technical assistance provided to variety of agencies including addictions providers, primary care, law enforcement, and housing
5. Overview provided at meeting of community health workers

Measure:

- 1,206 syringe exchange clients trained
- 480 overdose reversals reported

In first year after naloxone distribution began at syringe exchange sites, heroin deaths dropped by more than 29% in Multnomah County.

Background

Heroin overdose deaths in Oregon increased 46% from 2002 to 2012. In the tri county area, heroin deaths increased 30% over the same period.

Prescription opioid overdose deaths in Oregon increased by more than 200% from 2000 to 2012 (48 to 164 deaths). Oregon had the highest rates in the nation for illicit prescription opiate use from 2010-2011.

Hospitalizations in the state due to prescription opiates increased by 468% in the state over the same time period.

Evidence-Based intervention

Cities and states with naloxone distribution programs have seen 37%-90% reductions in community-level overdose deaths. (1)

1. Coffin PO, Sullivan SD. Cost-effectiveness of distributing naloxone to heroin users for lay overdose reversal. Ann Intern Med. 2013 Jan 1;158(1):1-9.

Safe Prescribing Implementation:

3 workgroups of Healthy Columbia Willamette Coalition (2 CCOs, 4 LHDs, 15 hospital/health systems)

- 1) Community prescribing standard
- 2) Patient and provider education about opiates and persistent pain
- 3) Monitoring and evaluating

Progress:

Chronic Non-Cancer Pain Guiding Principles

- Current voting and discussion among member agencies on 11 draft guiding principles.

Project goals

Goal: implement standard community-wide safe opiate prescribing practice agreements among providers

Goal: reduce preventable opioid overdose deaths in the tri-county area.

- By September 30, 2016, increase community capacity to reverse opiate overdose through training 2100 syringe exchange users and 150 agency staff as third party naloxone administrators.

- Recruit local pharmacies to stock naloxone for individuals with prescriptions or certificates of completion.



Next steps

Naloxone

- Launch training sites in Clackamas and Washington counties
- Offer community trainings to friends and family members of people at risk for opioid overdose
- Support primary care and other clinical settings interested in co-prescribing naloxone with opioids
- Recruit outpatient pharmacies to stock naloxone as outpatient prescription becomes more common
- Support law enforcement agencies interested in equipping officers with naloxone

Opiate Prescribing

- Reach agreement on specific standards and tools for prescribing policy
- Create shared tool kit of patient and provider ed materials
- Implement public education campaign
- Use data to evaluate changes in provider prescribing practices

