

Saving Lives With Naloxone



Pennsylvanians are enduring the worst epidemic of fatal drug overdoses in our commonwealth's history. In 2011, nearly 2,400 Pennsylvanians died of drug overdose, and we know overdoses have gone up since then. The epidemic extends across the nation. According to the CDC, nearly 22,000 Americans died from drug overdose that involved either an opioid prescription drug or heroin.

Pennsylvania's drug overdose epidemic is afflicting our urban, suburban and rural communities alike. This past summer The Center for Rural Pennsylvania released a report that showed a significant increase in fatal drug overdoses in both urban and rural populations. Drug addiction also has no geographic or economic boundaries; one in four families are suffering and struggling with a substance abuse problem. No one wishes to find themselves addicted to opioid prescription drugs or heroin. But 80 percent of heroin users began with prescription opioids; in many cases they started out taking the pills in accordance with a doctor's prescription, while in other instances the opioids are improperly and illegally diverted.

The Department of Drug and Alcohol Programs is working tirelessly to reverse the staggering increase in drug overdose deaths in Pennsylvania. It is our steadfast goal to help every person with an addiction get the appropriate level of treatment so they can live a full, self-sustaining and productive life. However, you can't treat a dead person; we first need to save lives for those who have overdosed.

Recognizing all this, last fall, our General

Assembly wisely enacted Act 139, which became effective November 29th. Act 139 increases access to naloxone (Narcan), an antidote that reverses an opioid overdose. Under Act 139, all first responders (police, firefighters, all EMS), as well as family members and friends of those with an addiction, can obtain, carry and administer naloxone.

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Counties across Pennsylvania can join us in helping to save lives. It is critical that all first responders have access to naloxone. With the exemplary leadership of Delaware County District Jack Whelan, the Delaware County Council, and all 42 Police Chiefs, that county fully equipped all 400 of its police cars with naloxone on November 29. Less than two weeks later, the Delaware County Times headline read "Narcan utilization saves four from OD death in Delco." This can, and should, happen in your county as well. (In Quincy, Massachusetts, a city of 100,000 where the first police pilot project was established, police reversed 169 overdoses in the first three years of the pilot!)

You may have read news accounts about pharmaceutical companies increasing the costs of naloxone due to the demand of the overdose antidote. While this increase (from about \$25 per naloxone nasal spray kit to roughly \$45) is unfortunate, the cost is nonetheless modest given the stakes involved: the very lives of our sons, daughters, brothers, sisters, and other loved ones. Please do not be deterred.

Fortunately in December, Capital Blue Cross announced a grant to help supply all police departments in their 21 county-area that are willing to carry naloxone. This funding, which will be administered by the Pennsylvania District Attorneys Association, will save hundreds of lives in those 21 counties without placing any additional burden on their budgets.

Additionally, in March 2015, the Pennsylvania Commission on Crime and Delinquency will be making \$100,000 available for naloxone kits for police departments in a grant, which will be administered by the Pennsylvania Chiefs of Police Association. Finally, Kaleo, Inc. has donated 4,000 naloxone (Evzio) naloxone auto-injector doses for first responder use (nearly all of those have been distributed). And we are continuing to search for partners and grants to eventually help equip first responders in every single county in Pennsylvania. Staunton Farms Foundation issued a \$50,000 grant to assist treatment providers in its ten county region, who

will in turn provide it to individuals they serve. The grant will be administered through the Armstrong Indiana Clarion SCA. The grant also provides some funding for naloxone distribution through Prevention Point Pittsburgh who will distribute naloxone to individuals.

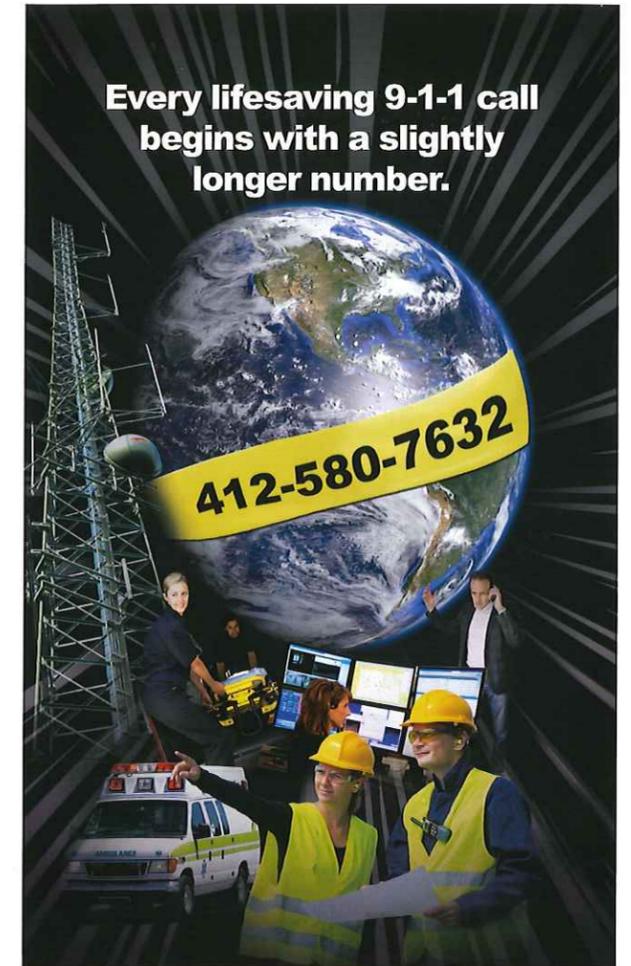
If you are interested in ensuring that naloxone is available in your county, we recommend you reach out to your first responders (police, firefighters, EMS), your District Attorney and your Single County Authority (SCA) for Drug and Alcohol Programs. First responders will need to meet certain provisions of Act 139, such as entering an agreement with Emergency Medical Services (EMS) agencies, training, obtaining the medication, etc. Jointly, the departments of Drug and Alcohol Programs and Health have identified online training, free-of-charge. This can be accessed through our website, www.ddap.pa.gov.

Naloxone is also available to members of the community. Typically a family member, friend, or loved one is the first to come across an overdose. Every minute is critical during an overdose and a mom or dad having access to naloxone in the event of an overdose can be the deciding factor in whether their child survives or not. This is why we are encouraging anyone who has a loved one who suffers with an opioid or heroin addiction to go to their doctor and obtain a prescription for naloxone. Our website has a letter from me to health care providers explaining the new law; those seeking naloxone can print that out and take it with them to their family doctor and pharmacist to educate them about the new law.

We have determined that naloxone is on the Pennsylvania Medicaid formulary and is likely covered by most health insurance providers. We do encourage individuals to check with their individual health insurance provider to discuss their coverage. Providing access to naloxone to everyone is a top priority and I have personally reached out to physicians and major pharmacy chains to inform them of Act 139 to ensure they are prepared for the naloxone requests.

Finally, in addition to making naloxone much more available, we are working on developing strong intervention and referral to treatment procedures for overdose survivors. Nearly dying from overdose is the kind of "hitting bottom" crisis that can make an addicted individual amenable to treatment, and we have to take advantage of that. Over a year ago, we issued a "Warm Hand-Off" directive to all your SCAs to provide hospital emergency departments with up-to-date lists of treatment programs, and to make overdose survivors a "priority population" for purposes of using their limited funding. Some of our SCAs are doing more (e.g. having mobile case managers available to all hospital emergency departments), and we will continue to work until all emergency departments have robust intervention practices for overdose survivors.

In conclusion, we believe that having greater accessibility to naloxone will prevent hundreds of needless overdose deaths in Pennsylvania. By saving lives of our loved ones who suffer with a substance abuse disorder, they will have a chance to get the treatment they need and to live the rich and full life of recovery. I ask each of you to work with us in making this lifesaving drug as widely available as possible.



Every lifesaving 9-1-1 call begins with a slightly longer number.

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