

Policy Statement on Efforts to Prevent Fatal Opioid Overdose

Policy Statement: The National Association of State Alcohol and Drug Abuse Directors (NASADAD) recognizes the devastating toll that opioid misuse and overdose have taken in States and communities across the country. NASADAD supports federal opioid strategies and the efforts that States have undertaken to reduce and prevent fatal opioid overdose, including the key strategies below. These strategies should be considered only one part of a continuum of substance use disorder services that includes prevention and intervention efforts, access to treatment, and recovery support services.

Naloxone: NASADAD supports the use of naloxone to reverse opioid overdose. NASADAD also supports expanding access to naloxone through various models (e.g., pharmacist direct dispensing via Collaborative Drug Therapy Agreement, standing order to allow non-prescribers to distribute naloxone, co-prescribing with chronic opioid therapy, etc.) to bystanders such as friends and family members of opioid users, community-based naloxone distribution programs, law enforcement officers, fire fighters, and other emergency first responders (e.g., Emergency Medical Technicians).

- Overdose response training^{1,2} should include information on how to access substance use disorder prevention, treatment, and recovery services.
- Overdose response efforts should be coordinated with State substance abuse agencies (SSAs) to ensure that they are embedded within the State's continuum of care for addiction.
- States should consider adopting procedures (e.g., screening, brief intervention, and referral to treatment (SBIRT), warm-hand off, etc.) to ensure that overdose victims can be assessed and access treatment and recovery resources following the overdose reversal.

911 Good Samaritan Laws: NASADAD supports the adoption of laws that provide limited immunity to victims and witnesses of an overdose who seek emergency medical assistance.

- Education and awareness activities should accompany 911 Good Samaritan laws to ensure that interested parties are made aware of the protections.

Importance of Prevention, Treatment, and Recovery: Prescription opioid misuse and heroin use are dangerous and are symptomatic of a complex set of problems that jeopardize individuals' health, relationships, and livelihood. In more immediate terms, opioid users are at risk of experiencing an overdose, a condition that can be fatal. The above mentioned strategies do not represent the full spectrum of options available to States to prevent and treat opioid misuse and abuse, but rather capture the most commonly discussed strategies that States have undertaken in response to rising opioid overdose deaths. These strategies should be considered part of a comprehensive continuum of substance use disorder services that includes prevention and educational efforts; access to clinically appropriate treatment services, including medication-assisted treatment (MAT); and recovery supports.

The Burden of Opioid Overdose: The rate of fatal overdose in the U.S. tripled from 1991-2008.³ Opioid-related drug overdose, and particularly opioid pain relievers, account for most of that increase.⁴ Prescription drugs are the second most used illicit drug among persons 12 and older after marijuana, and opioid pain relievers make up 70% of misused prescription drugs.⁵ During 2010, the most recent year of available data, approximately 20,000 people lost their lives to opioid overdose (both heroin and prescription pain relievers).⁶ Beyond abstract statistics, losing a loved one to an overdose is devastating, with far-reaching effects that can last a lifetime. These parents, friends, sons, and daughters are lost to a disease that is both treatable and preventable. Effective, evidence-based practices exist and should be utilized to the fullest extent.

Using Naloxone to Reverse an Opioid Overdose: Opioid overdose causes respiratory depression, eventually leading to death.^{7,8,9,10} Using naloxone to reverse an opioid overdose is safe, effective, and has long been the standard of care in emergency rooms and with paramedics throughout the United States.^{11,12} Naloxone is not a controlled substance, has no potential for abuse, has no effect on the body in the absence of an opioid,^{13,14} and does not increase drug use.^{15,16,17,18} Although most opioid overdoses occur in the presence of someone else, such as a friend or family member,¹⁹ thousands of opioid overdose victims fail to get timely access to naloxone and its life-saving effects. There are a variety of potential explanations for this including bystanders' reluctance to call 911 for fear of police involvement,^{20,21,22,23} delays in recognizing the overdose or emergency medical response times, prescribers' reticence to prescribe naloxone due to perceived liability concerns,²⁴ and a general lack of naloxone availability outside of emergency rooms. Given these barriers, expanding access to naloxone should be a priority in efforts to reduce fatal opioid overdose and save lives.

Trained witnesses, be they friends or law enforcement officers can safely and successfully administer naloxone to victims and reduce the rate of overdose deaths.²⁵ Other strategies include removing liability and other barriers and encouraging physicians to prescribe naloxone to patients at risk for opioid overdose and their loved ones. The peer-reviewed literature on these strategies illustrates that these strategies save lives and do not increase drug use.^{26,27,28,29} Reversing an opioid overdose using naloxone also creates an opportunity for victims to receive a "warm hand-off" to treatment services, providing another access point for people with substance use disorders to receive the care they need. Over the last decade, many community-based programs and 23 States have taken steps to make naloxone more readily available in the community.³⁰ In addition, the Office of National Drug Control Policy (ONDCP), the American Society of Addiction Medicine (ASAM), and the American Medical Association (AMA) have endorsed expanding access to naloxone as a strategy to prevent fatal overdose.^{31,32,33} As with every public health crisis, the way that States experience and respond to drug misuse is different from State to State. For those that seek tools to reduce fatal opioid overdose, using and expanding access to naloxone should be encouraged and supported.

Removing Barriers to Seeking Emergency Medical Attention: The gradual nature of an opioid overdose provides a window of time in which victims can receive medical attention before significant brain damage or death occurs. Moreover, most opioid overdoses occur in the presence of someone else, such as a friend or family member.³⁴ However, witnesses often do not call 911 during an overdose, mostly commonly citing fear of police involvement.^{35,36,37,38,39} In many States, both the caller and the overdose victim could be arrested for possession of illegal substances, drug paraphernalia, or other offenses.⁴⁰ Given the recent rise in overdose deaths, 15 States have opted to enact policies that attempt to both reduce overdose witnesses' fear of calling 911 and encourage them to seek medical assistance. These 911 Good Samaritan laws vary in scope, but generally provide limited immunity for overdose victims and witnesses who seek emergency medical assistance for offenses that are discovered as a result of the Good Samaritan seeking help. These include immunity against arrest and/or prosecution for possessing a controlled substance or drug paraphernalia.⁴¹ Some States also provide immunity for underage persons in possession of, or under the influence of alcohol.⁴² Good Samaritan laws are limited in scope and are not meant to undermine drug enforcement. Encouraging witnesses to seek medical attention also provides an opportunity for victims to receive a brief intervention and referral to treatment, helping patients move one step closer to recovery. U.S. Attorney General Holder identified Good Samaritan laws as a useful tool to combat this "urgent public health crisis."⁴³ These policies vary widely and should be considered part of a menu of policy options available to States to prevent fatal overdose.

Conclusions and Next Steps: As States consider strategies to reduce the misuse of opioids and prevent fatal overdose, naloxone and 911 Good Samaritan laws should be part of the solution.

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