



February 4, 2016

To: Jefferson County Health Care Providers

From: Tom Locke, MD, MPH, Jefferson County Health Officer

Re: Naloxone Distribution and Designation of Opiate Overdose as a Notifiable Condition

**Epidemiology:** Increased prescribing of potent opiates during the last several decades led to a steady rise in opiate related fatalities, usually a result of unintentional overdoses. Methadone was the most frequently involve drug in fatal overdoses. Efforts to reduce inappropriate prescribing of opiates and unlawful diversion of these drugs have been largely successful. Unfortunately, use of “black tar” heroin of Mexican origin has increased dramatically and with it increased rates of opiate-related hospitalizations and fatal overdoses. During the period from 2012 to 2014, the rate of opiate-related hospitalization in Jefferson County was 177.2/100,000 (as compared to the State average of 208.3 and the Clallam County rate of 292.8). The opiate-related death rate for Jefferson County in this same period was 9.7/100,000 (as compared to the State average of 8.4 and the Clallam County rate of 13.4). Data on rates of non-fatal opiate overdoses are lacking.

### **Jefferson County Public Health (JCPH) Initiatives:**

#### **1) Distribution of Naloxone Kits through the JCPH Syringe Exchange Program:**

Emergency administration of parenteral or intranasal naloxone is a safe and effective treatment for opiate overdose. In response to the growing number of opiate overdoses associated with injectable heroin, JCPH will begin distributing naloxone kits at its Syringe Exchange Program (SEP). Clallam County Health and Human Services implemented this program in 2015 and has distributed 129 doses of naloxone through its SEP with 14 successful overdose reversals and lives saved in its first year of operation. JCPH will distribute kits with two doses of injectable naloxone. While there is no charge for the medication, a \$15 fee will be charged for the training program that is required for anyone who is eligible for a kit. The initial supply of naloxone kits has been donated by the University of Washington’s Center for Opioid Safety program.

Naloxone can also be prescribed by a primary care provider and is covered by many insurance programs for individuals who are taking prescription opioids for chronic pain. Prescription templates and instruction materials are available from JCPH.

2) **Designation of Opiate Overdose as a Notifiable Condition:** Washington State law allows local health officers to designate conditions of public health importance as notifiable conditions within their jurisdictions. **The Jefferson County Board of Health is following the lead of the Clallam County Board of Health and has directed their health officer to designate both fatal and non-fatal overdoses of opioid-contain drugs such as heroin, methadone, hydrocodone, oxycodone, fentanyl and morphine as a notifiable condition.** To limit the burden of reporting, this notification requirement will only be applied to health care entities most likely to see overdose victims – hospital emergency departments and the county coroner. Notification will begin on March 1, 2016. In addition to compiling quarterly reports of overdose cases, JCPH staff will contact reported cases to offer harm reduction strategies such as naloxone kits and referral for chemical dependency evaluation and medication assisted treatment of opiate use disorder. When the overdose is due to a prescription medication, the prescribing health care provider will be contacted.