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October 7, 2015 1630 EDT (4:30 PM EDT)
NH-HAN 201510071



Opioid Abuse/Misuse Response in New Hampshire

Key Points and Recommendations:

- The number of drug-related overdose deaths in New Hampshire increased 69% from 2013 to 2014. There were 326 total overdose deaths in 2014; the majority of deaths were attributable to opioids.
- Prescription opioid abuse and dependence is contributing. Providers are encouraged to review their prescribing practices and follow accepted best practices for opioid prescribing, including consideration of alternative non-opioid treatment options when medically appropriate.
- Providers should routinely screen patients for opioid misuse. Patients with intravenous drug use (IVDU) should be screened for infectious complications, including Hepatitis C Virus (HCV) and HIV infection.
- Providers should consider prescribing naloxone to patients and/or family and friends of patients who are at risk of opioid overdose to prevent overdose deaths. New legislation in NH protects healthcare providers from criminal and civil liability for prescribing, dispensing, or distributing naloxone.
- Information and additional resources, including an “alcohol and drug treatment locator” can be found at: <http://drugfreenh.org/anyoneanytime>.
- For questions, please contact the NH DHHS Bureau of Drug and Alcohol Services at 603-271-6110.

Situation:

Opioid abuse and misuse is a significant public health problem. Intravenous drug use (IVDU) is contributing to the spread of infections, including HCV and HIV. IVDU also puts patients at risk of life threatening complications such as bacteremia and infectious endocarditis. Drug-related overdose deaths have also been increasing, and in 2015 New Hampshire has averaged 27 drug-related deaths a month; 91% of these deaths are related to opioids, especially heroin and illegally manufactured fentanyl. Illicit “street” fentanyl can be more potent than heroin and individuals may knowingly or unknowingly be abusing opioids that contain fentanyl. Fentanyl has been implicated in 61% of the drug overdose deaths in NH this year. More information on drug-related overdose deaths in New Hampshire can be found at the following links:

<http://wisdom.dhhs.nh.gov/wisdom/>
http://drugfreenh.org/images/FACTSheet_FINAL.pdf

Trends seen in New Hampshire are consistent with trends seen in the U.S. Nationally, the majority of individuals using heroin also report use of other substances and many heroin users have a history of non-medical use of prescription opioid pain killers. A recent analysis by the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC) found that opioid pain reliever abuse or dependence was the strongest risk factor for heroin abuse. Among those with polysubstance abuse, individuals who abused or were dependent on prescription opioid pain reliever medications were 40 times more likely to abuse or be dependent on heroin (adjusted OR 40.0, 95% CI: 24.6-65.3). More information about this study can be found at: http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6426a3.htm?s_cid=mm6426a3_w

Because of the strong association between prescription opioid abuse/dependence and heroin abuse, healthcare providers who prescribe opioid pain medications need to consider how their prescribing practices could be contributing. Providers are encouraged to review their prescribing practices to ensure they are following best practice guidance. This may include considering non-opioid options to treat patients' pain when medically appropriate. A recent webinar was presented by the CDC's Clinician Outreach and Communication Activity (COCA) entitled, "The Role of Clinicians in Addressing the Opioid Overdose Epidemic" and can be viewed at: http://emergency.cdc.gov/coca/calls/2015/callinfo_092415.asp.

Opioid Antagonist (Naloxone):

Because of the increasing number of opioid-related overdose deaths, new legislation was passed in New Hampshire that protects healthcare providers from criminal and civil liability for prescribing, dispensing, or distributing naloxone to patients and/or family and friends of patients who are at risk of opioid overdose. Naloxone can be prescribed in various forms including a pre-loaded intramuscular auto-injector, and an intra-nasal form administered from a pre-filled syringe with use of an atomizer. Further information about prescribing and use of naloxone can be found at the following link: <http://drugfreenh.org/resources-for-prescribers-and-pharmacists>.

The NH Bureau of Drug and Alcohol Services has also purchased 4,500 intranasal naloxone kits (prefilled syringes with nasal atomizer) in order to make them readily accessible to those patients in greatest need. The kits are currently being distributed across NH. Healthcare facilities and providers may request these free naloxone kits to be dispensed with appropriate education. Providers should be trained in how to educate individuals being prescribed/dispensed naloxone kits; providers can call their local emergency medical services (EMS) provider or the NH state Bureau of Emergency Medical Services (603-223-4200) for training.

Any requests for free naloxone kits should be directed to: rick.cricenti@dhhd.state.nh.us.

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For any questions regarding the contents of this message, please contact NH DHHS, Bureau of Drug and Alcohol Services at 603-271-6110.

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Status: Actual
Message Type: Alert
Severity: Moderate
Sensitivity: Not Sensitive
Message Identifier: NH-HAN 201510071
Delivery Time: 12 hours
Acknowledgement: No
Distribution Method: Email, Fax
Distributed to: Physicians, Physician Assistants, Practice Managers, Infection Control Practitioners, Infectious Disease Specialists, Community Health Centers, Hospital CEOs, Hospital Emergency Departments, Nurses, NHHA, Pharmacists, Laboratory Response Network, Manchester Health Department, Nashua Health Department, Public Health Network, DHHS Outbreak Team, DPHS Investigation Team, DPHS Management Team, Northeast State Epidemiologists
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