



Organization of State Medical Associations

Presidents

EMERGING PUBLIC HEALTH ISSUES

OPIOID USE DISORDER

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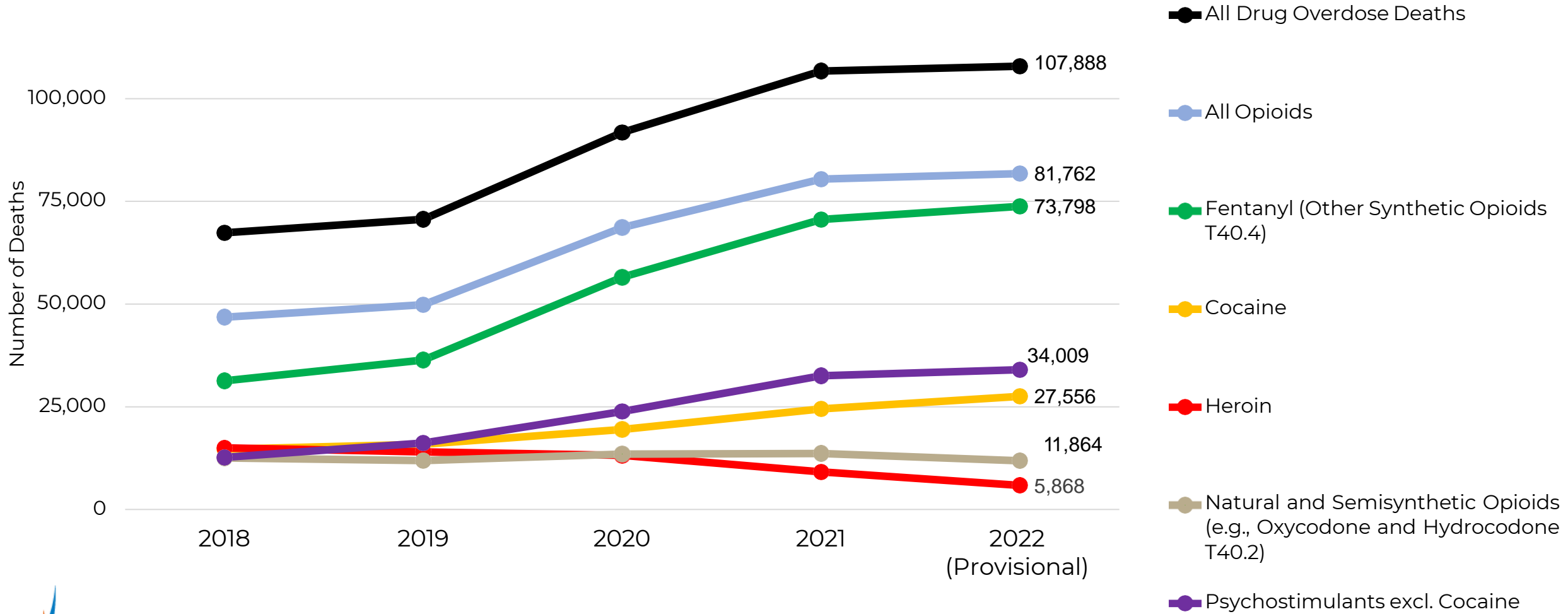
Roadmap



- + Overview of Problem
- + OUD treatment
- + Overdose prevention and reversal
- + **Future Solutions**

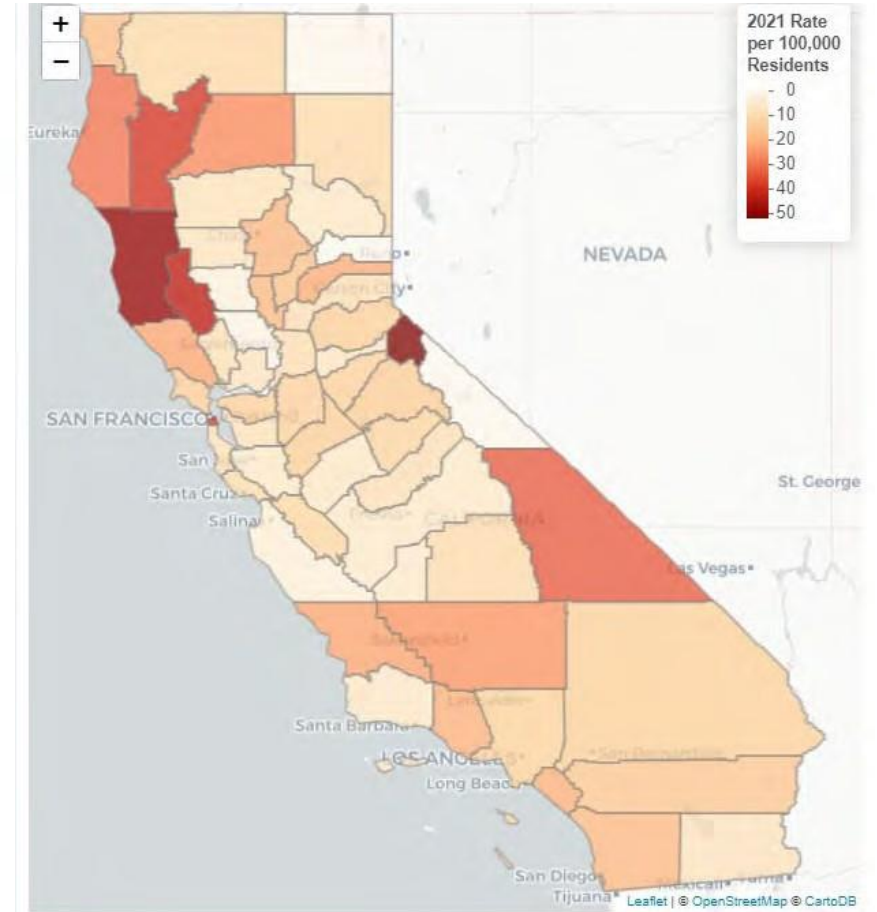
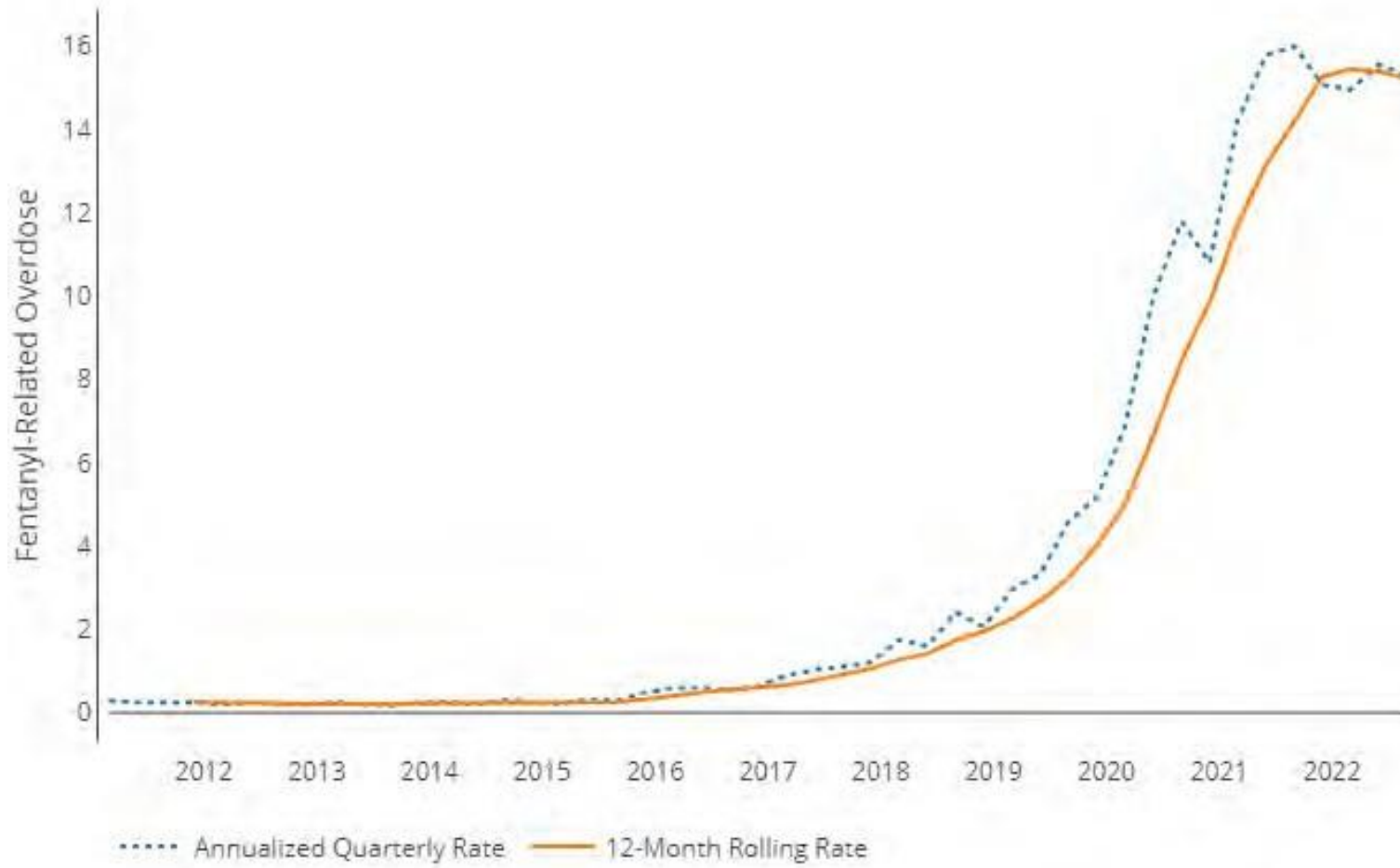


Unprecedented drug-related deaths



CA Fentanyl-Related Overdose Deaths

Age-Adjusted Rate per 100,000





Background: 2021 Opioid Overdose in California

7,175



- Deaths related to any opioid overdose

5,961



- Deaths related to fentanyl overdose

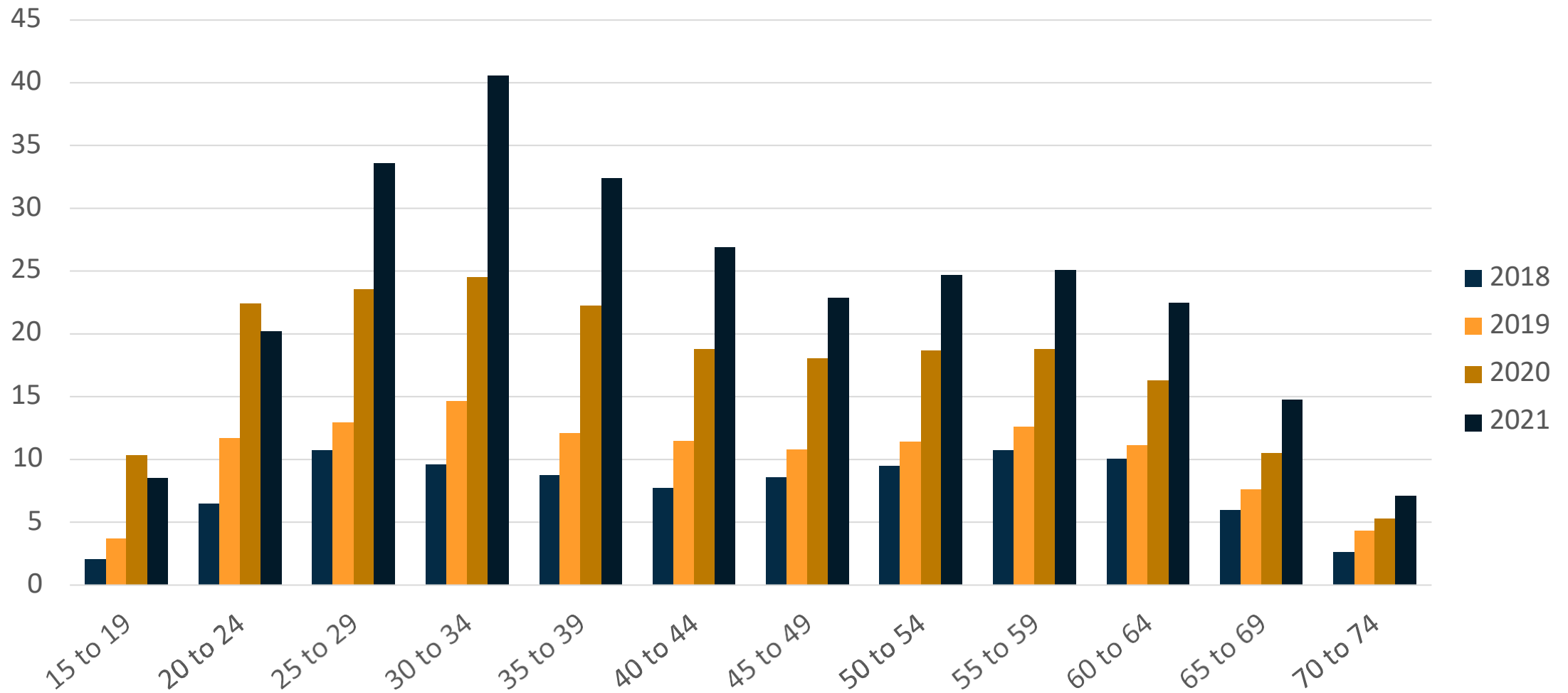
21,016



- ED Visits related to any opioid overdose

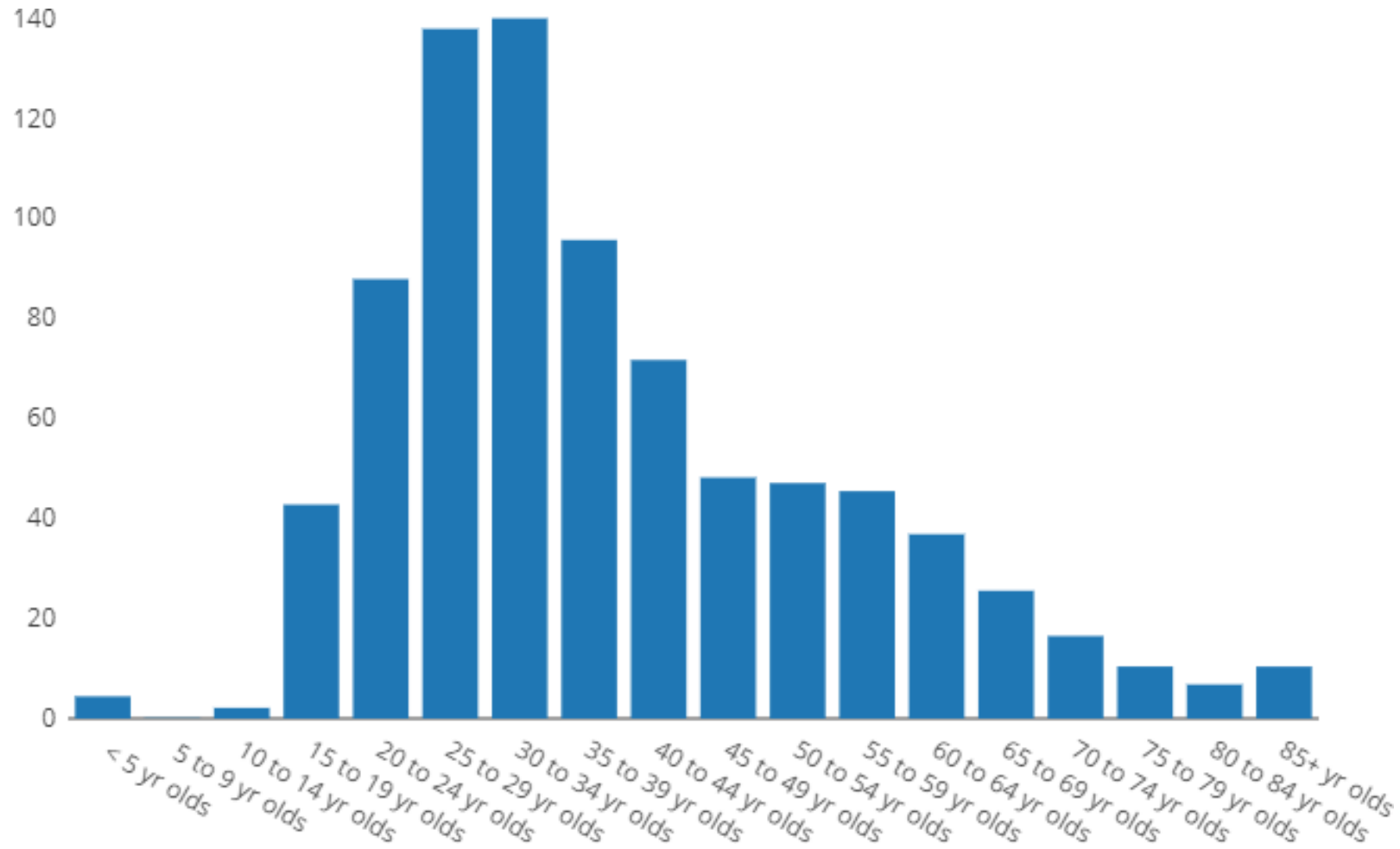
Any Opioid Related Overdose Death, CA 2018-2021

Rate per 100,000, by Age



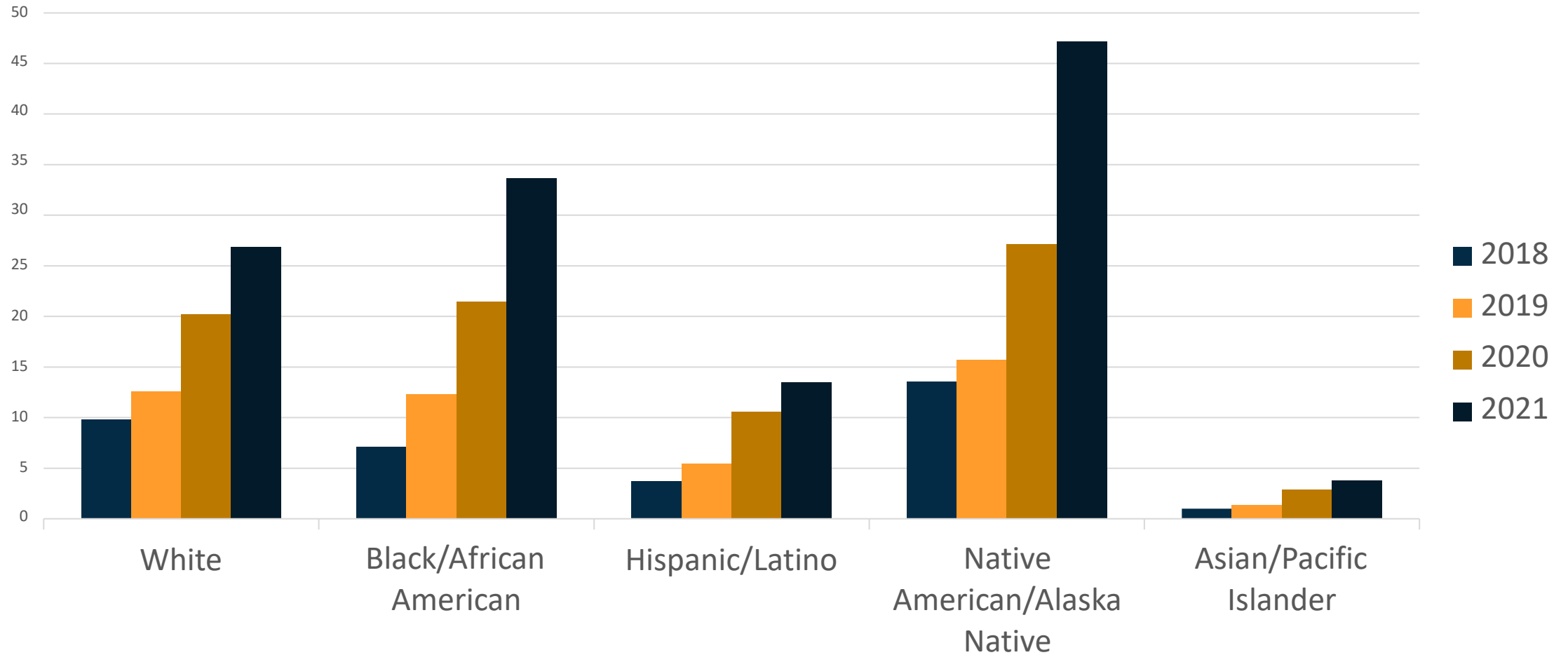
CA Fentanyl-Related Overdose Deaths, 2021

Crude rate per 100,000, by age



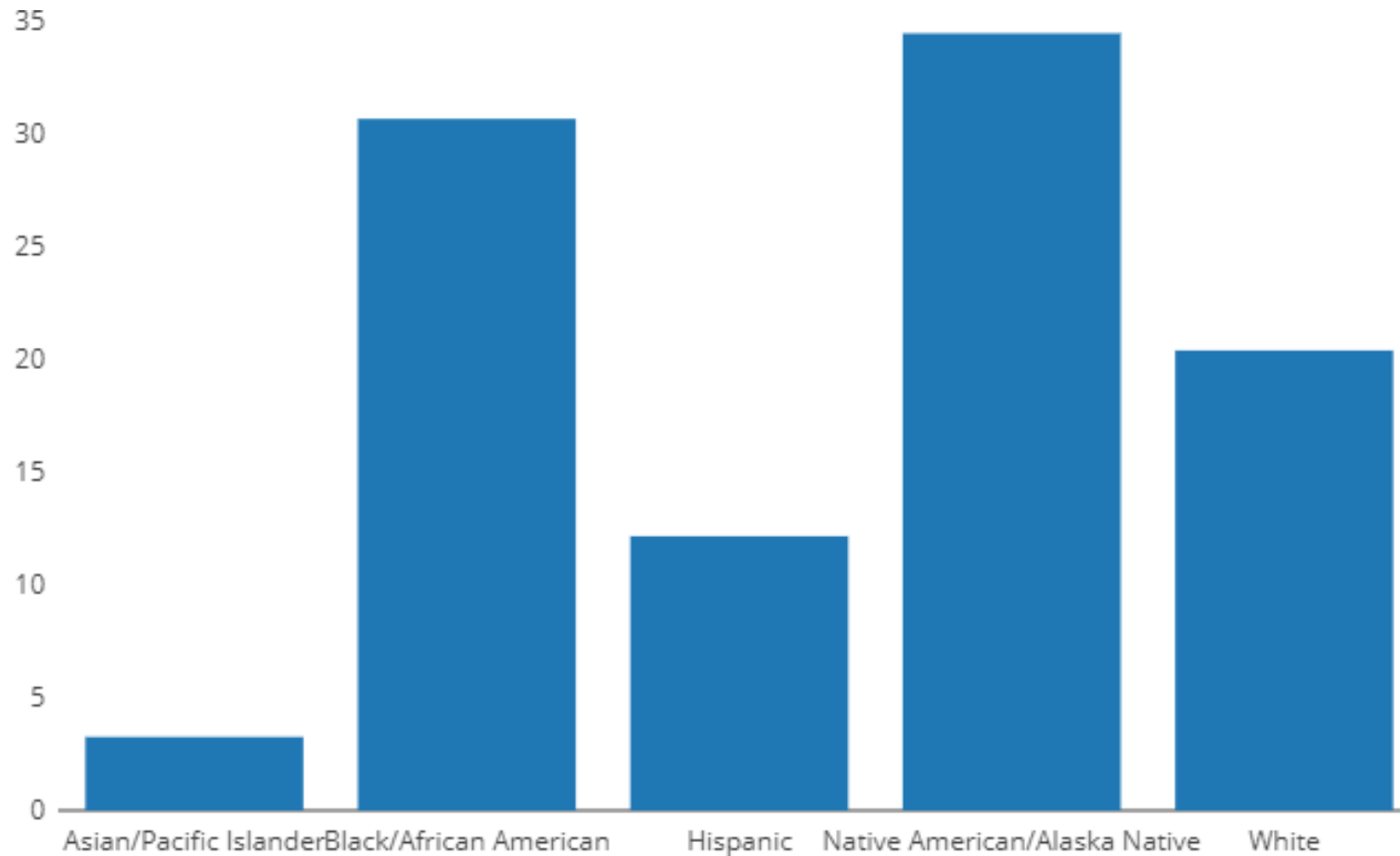
Any Opioid Related Overdose Death, CA 2018-2021

Rate per 100,000, Race/Ethnicity



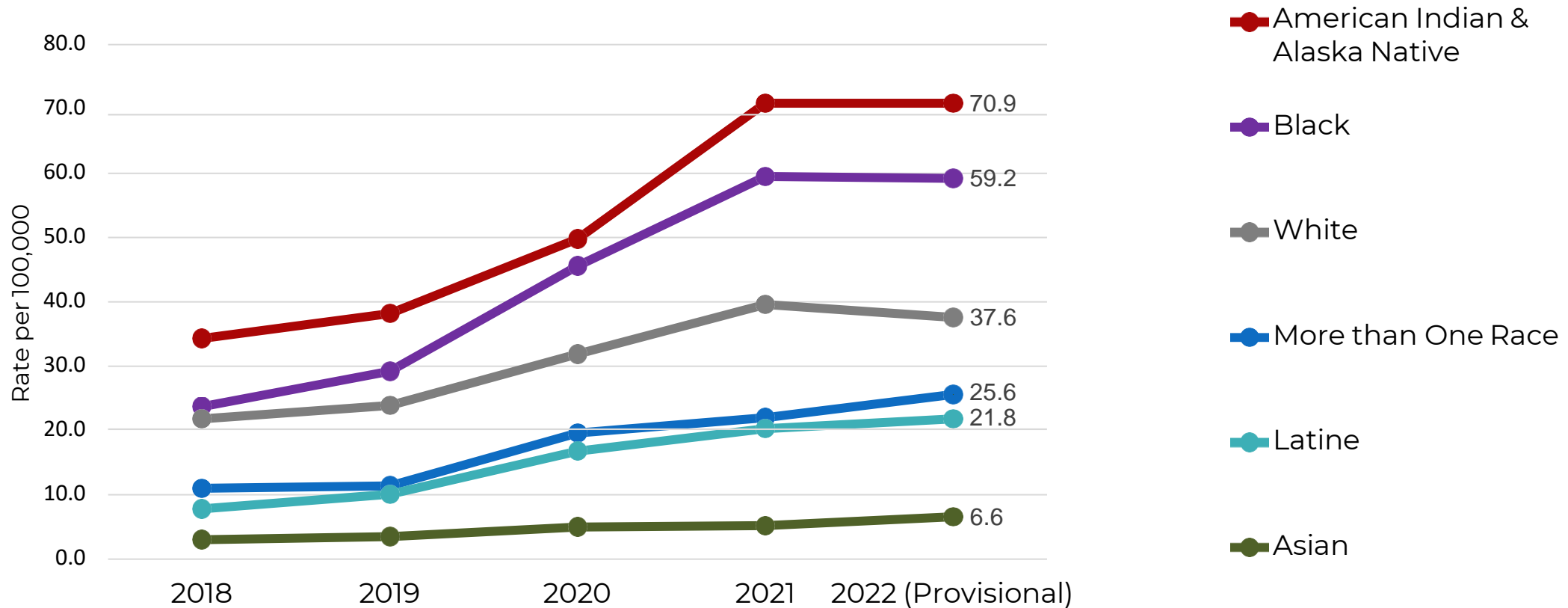
CA Rate of Fentanyl-Related Overdose Deaths, 2021

Age adjusted rate per 100,000, by race-ethnicity





Overdose deaths disproportionately affecting American Indian, Alaska Native and Black Individuals in California



Xylazine, also called “Tranq”

- + Anesthetic in veterinary medicine
- + Alpha 2 agonist, some effect at kappa opioid receptor
 - Ulcerations downstream from injection
 - Hypotension, bradycardia, and sedation during use
 - Agitation and anxiety during withdrawal
- + Mostly found with fentanyl



35 Y woman with right upper extremity cellulitis that you are seeing in...

Smokes 2g fentanyl/day, used 16 hours ago

- ✧ Started using at age 18
- ✧ Opioids help with pain and trauma
- ✧ You diagnose her with OUD
 - Unable to cut back, cravings, isolated from family, 3 overdoses in the last year



What OUD treatments do you offer?

Medications for OUD



Opioids: full mu agonist
heroin, oxycodone, fentanyl



Methadone: full mu agonist



Buprenorphine: partial mu agonist
High affinity for mu receptor

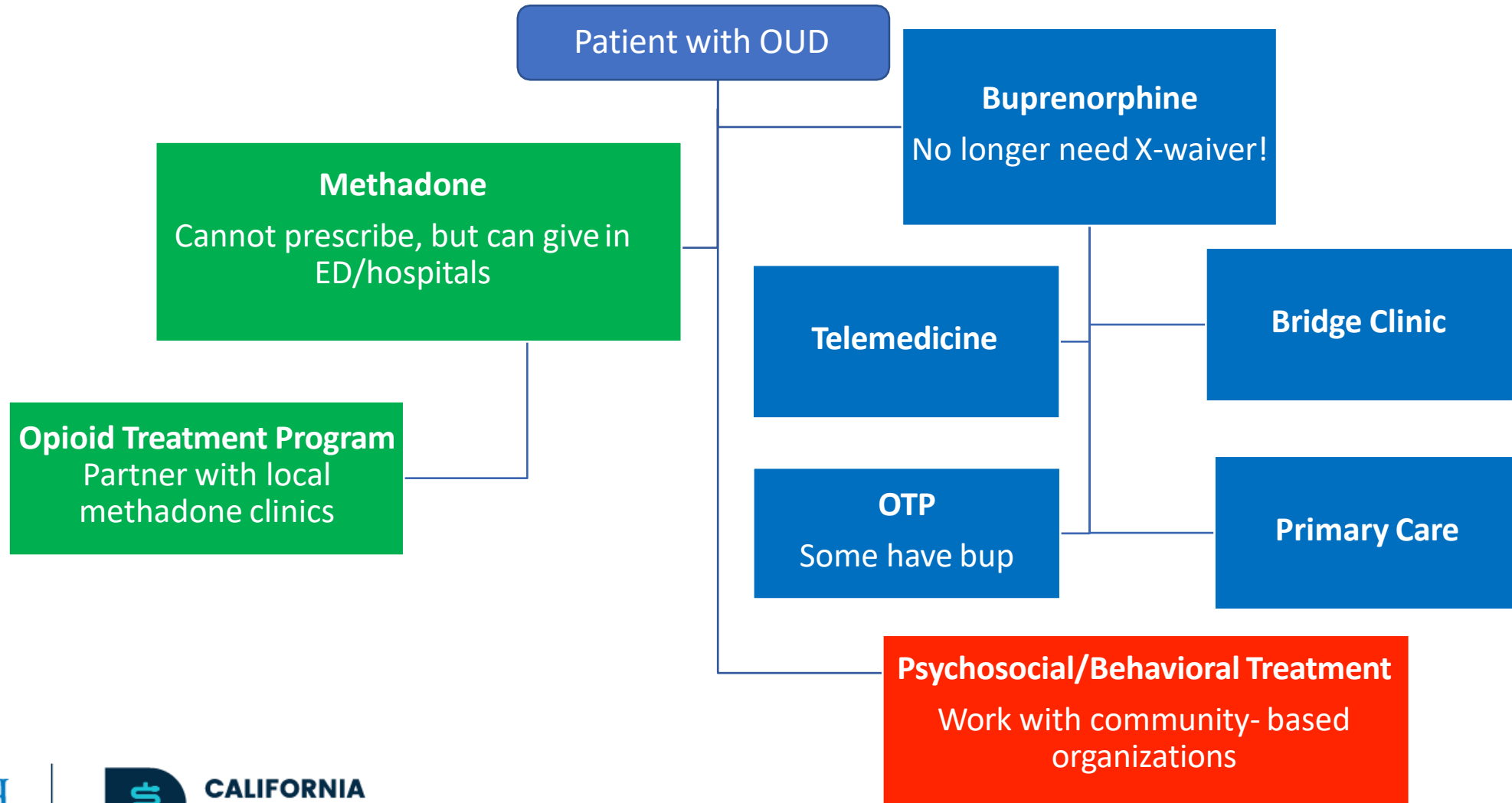


Extended-release naltrexone:
Full antagonist, high affinity

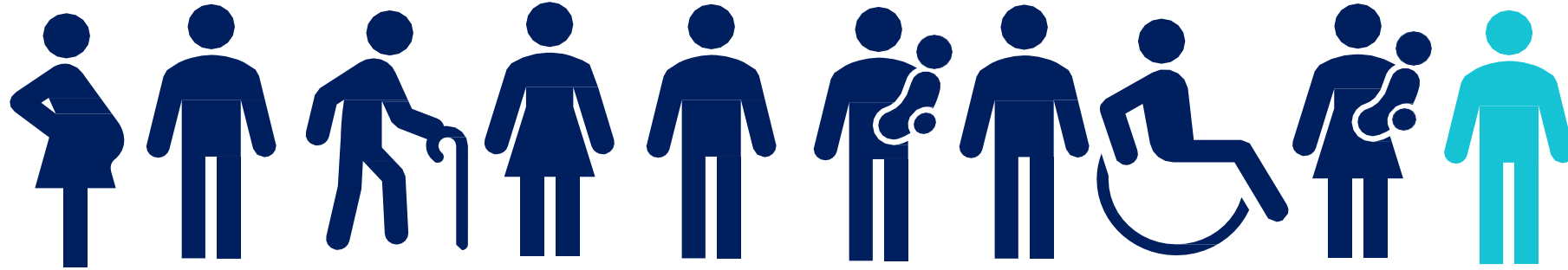
Methadone or Buprenorphine

	Methadone	Buprenorphine
Office visits	Daily visits to Opiate Treatment Program (OTP – methadone clinic)	Daily-monthly; some OTPs carry it as DOT

Linkage to OUD Care



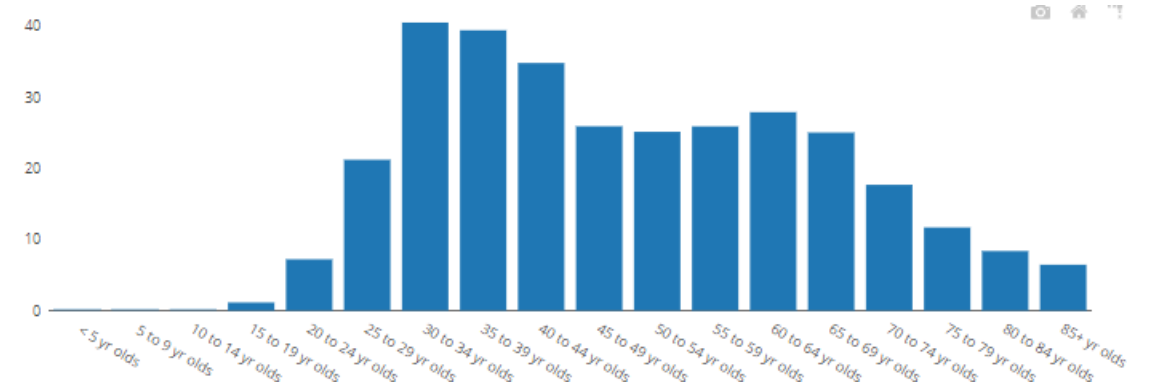
We need to close the treatment gap



**Up to 50% reduction in all-cause
and overdose mortality**

Buprenorphine Prescriptions (CURES) - Total Population, 2021

Age-Adjusted Rate per 1,000 Residents



Source: California Overdose Surveillance Dashboard, <https://skylab.cdph.ca.gov/ODdash/>

35 Y woman with RUE cellulitis and OUD

You counsel her on the differences between methadone and buprenorphine.

Wants to start methadone because she is worried about precipitated withdrawal and lives close to an OTP. You are in primary care clinic and give her instructions to present at the OTP tomorrow.



Roadmap



- + Drug-related overdoses
- + OUD treatment
- + Overdose prevention and reversal

Overdose Prevention

Space Out Use

Syringe Service
Linkage

Never Use Alone
800-484-3731
800-928-5330

Buddy system,
stagger using

Test Doses

Fentanyl test
strips/harm
reduction supplies

Naloxone

Non opioid users
warrant overdose
prevention

Naloxone

- + Opioid antagonist
- + Many formulations: nasal spray, intramuscular, intravenous
- + Available over the counter
- + DHCS has a Naloxone Distribution Project for some organizations



I am looking for

I am a

Programs

A-Z Index

Home | Programs | Center for Chronic Disease Prevention and Health Promotion | Substance and Addiction Prevention Branch | Over the Counter (OTC) Naloxone

SUBSTANCE AND ADDICTION PREVENTION BRANCH



Recognizing an Opioid Overdose

- + Does not wake up despite verbal or physical stimuli
- + Shallow breathing or not breathing
- + Blue, gray, pale lips
- + Cold or clammy skin
- + Pinpoint pupils

Responding to an Overdose

15 minute SFDPH training:

<https://learnsfdph.org/programs/sfdph-overdose-prevention/#toggle-id-2-closed>

NHRC DOPE Project:

<https://www.youtube.com/embed/bUtYpbdUSus>



HOW TO RESPOND WHEN YOU SUSPECT A PERSON OVERDOSED

1) VERBAL STIMULATION



Try to wake the person up.
Loudly say: "Hey, are you okay?"



2) PHYSICAL STIMULATION

Rub your knuckles up & down on the center of the chest bone to stimulate pain



3) ADMINISTER NALOXONE

- Insert nozzle into nostril
- Press plunger firmly
- Start rescue breaths & wait 2 mins before giving 2nd dose



4) CALL 911 TO GET HELP

Give the dispatcher your location and tell them someone is not responding or breathing



5) RESCUE BREATHING

- Pinch nose & tilt head back
- Provide 2 breaths to start
- Then 1 breath every 5 seconds
- The person's chest should rise & fall





California's Public Health Approach to the Overdose Epidemic

Improve state and local level surveillance

Promote protective factors and reduce risk factors

Increase public awareness and education

Expand naloxone access, saturation, and education

Offer treatment and reduce stigma

Promote harm reduction and drug checking services

Opportunities for us to improve OUD care



DIAGNOSE AND TREAT
OUD



PRESCRIBE & CARRY
NALOXONE



LINK/PROVIDE
OUD CARE



Resources

- + UCSF Substance Use Disorder Warm Line 855-300-3595
- + California Bridge: www.bridgetotreatment.org
- + Methadone Clinics: <https://dpt2.samhsa.gov/treatment/directory.aspx>
- + Get naloxone: Buy without a prescription at your local pharmacy, over the counter
- + Naloxone Training:
 - **15 minute SFDPH training:** <https://learnsfdph.org/programs/sfdph-overdose-prevention/#toggle-id-2-closed>
 - **NHRC DOPE Project:** <https://www.youtube.com/embed/bUtYpbdUSus>
- + UCSF Pocket Card



A Path to SUD Recovery in SF

J of SFMMS, April-June 2023

William Andereck, MD

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CPMC Founding Director of Medicine & Human Values

Founder Haight Ashbury Free Clinic

President of CA & American Societies of Addiction Med

Founding Editor of J of PsychoActive Drugs

Director of Public Health for SFMMS and Robert Wood

Johnson Fellow in Drug Policy



The problem of SUD Recovery Success

- Frequent Flyers/often @ Death Door
- Cycle of inadequate RX
- Need Comprehensive Recovery RX Stabilization for Med, Mental and SUD

A Path to SUD Recovery in SF Recommendations

Harm Reduction

Stabilization

Conservatorship/Safe Rx Centers

Placement

Funding



A Path to SUD in SF Funding-Nov 2024 Ballot Initiative

MCO Tax Source-

1/1/24 Increase in MediCal Rates to ~ Medicare Rates (87.5% for PCPs)

2025 \$600 Million Annually for Psychiatric Care:

CMA lead Political Coalition



A Path to SUD Recovery in SF



Thank You