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## SAFE Glen Cove Coalition: Nationwide Need for More Naloxone

A recent article published in The Lancet Public Health journal discusses a new research study conducted by the Opioid Policy Research Collaborative at Brandeis University that estimates naloxone shortages by state and how many additional naloxone kits should be distributed and accessible annually in each state in order to avert deaths in 80 percent of witnessed opioid overdoses. States' needs ranged from no extra kits needed in one state Arizona — to as many as 1,270 additional naloxone kits for every 100,000 people each year in Illinois.

Overdoses are often fatal because these drugs can suppress breathing, leading to dangerously low oxygen levels and suffocation. The opioid-overdose antidote naloxone can save lives by blocking the opioids' interference with breathing — but only if it's administered quickly by someone who witnesses an overdose. Naloxone is most effective for fatal overdose prevention when it is used to reverse an overdose as soon as it is recognized. It means making naloxone available and accessible to people who use drugs and people who are likely to witness an overdose, like friends, family, and other peers who use drugs.

Need also varied depending on the type of opioid and the most common forms of naloxone distribution in each state, the study found. For example, Massachusetts has a statewide community-based naloxone distribution program, but it also has widespread use of fentanyl, a synthetic opioid that's much more lethal and addictive. As a result, Massachusetts still has to distribute 750 more naloxone kits for every 100,000 people annually in order to prevent 80 percent of witnessed overdose deaths. Fentanyl can infiltrate the drug supply in a community in a variety of ways, appearing in illegally distributed counterfeit prescription painkillers, heroin, or mixed with stimulants like cocaine or methamphetamine.

Unwitting exposure to fentanyl broadens the need for naloxone to a much larger and more diverse group of people using a range of drugs and amplifies the need for naloxone in people using opioids. Fentanyl's presence roughly doubles a community's naloxone need, and very quickly. As a counterpoint to Massachusetts, the study found no need for additional naloxone kits in Arizona, because of a combination of much lower fentanyl use and much higher levels of community-based naloxone distribution. Targeted naloxone distribution works. One reason the study may have found little need for

more naloxone in Arizona is that the distribution method for this overdose antidote — via community health programs — can be more effective at getting naloxone where it's most needed. Many people who are at highest risk of overdosing or witnessing an overdose may face multiple barriers to accessing and affording care. This can make some more traditional medication distribution methods — such as a prescription from a doctor or access to meds from a clinic — less effective than community programs that distribute naloxone for free.

The distribution of naloxone is most effective at preventing fatal overdoses when naloxone is distributed to people most likely to witness overdoses and community-based programs are often most effective because they provide naloxone directly to individuals embedded within communities of people who use drugs. A study published in 2018 in Addictive Behaviors, for example, found that opioid overdose death rates fell by about 15 percent once state laws expanded naloxone access. An earlier study, published in Substance Use and Misuse, examined a New York City program that distributed naloxone to injection drug users along with training on how to administer the treatment; in this study, 83 percent of people who had naloxone administered during an overdose survived. Even when the exact types of opioids in circulation change, the role of naloxone for harm reduction remains the same. Researchers advise that the focus should be on making naloxone easily accessible to the people who need it the most.

The Lancet is a weekly peer-reviewed general medical journal. It is among the world's oldest and bestknown general medical journals. For more information please visit www.thelancet.com.

The SAFE Glen Cove Coalition is conducting an opioid prevention awareness campaign entitled. "Keeping Glen Cove SAFE," in order to educate and update the community regarding opioid use and its consequences. To learn more about the SAFE Glen Cove Coalition please follow us on <a href="https://www.facebook.com/safeglencovecoalition">www.facebook.com/safeglencovecoalition</a> or visit SAFE's website to learn more about the Opioid Epidemic at <a href="https://www.safeglencove.org">www.safeglencovecoalition</a> or visit SAFE's website to learn more about the Opioid