

The Opiate Epidemic: Not getting any better.

With the turn of the calendar we wanted to provide an update on our nation's number one public healthcare crisis. Unfortunately the news is not good. In 2012 reports surfaced that overdose surpassed traffic deaths as the leading cause of accidental death in America. Last summer we shared reports that although rates of prescription drug use had declined steadily and consistently since 2012, overdose deaths had continued to climb.

We also reported on the sky rocketing number of overdose deaths (at that time 144 every day nationwide, with a record 493 on Long Island in 2016). Tragically those numbers are now 174 per day and an adjusted 2016 overdose total of 559 according to the medical examiners. In perhaps the most startling of all reports for the first time in US history the life expectancy rate for US citizens had declined for two consecutive years. Researchers tout opiate overdose deaths as the single most significant contributing factor in that trend.

Dr. Nora Volkow, of the National Institute of Drug Abuse (NIDA) highlighted that the United States despite having just 4.4% of the world's population uses 81% of the oxycodone worldwide (Percocet etc.) and nearly 100% of hydrocodone (Vicodin)

Stakeholders continue to scramble, first responders and lay persons continue to be trained in the administration of Naloxone the opiate overdose reversal agent. Several thousand lives have been saved over the past 5 or 6 years yet tragically, until very recently, most of them were discharged from emergency rooms without a treatment referral or connection to a local recovery community or resources. In fact first responders have reported treating the same person multiple times over short time frames while some who died were recognized as having been treated previously.

Only now are we beginning to see the presence of recovery coaches and certified recovery peer advocates in emergency rooms, a practice that has been quite successful in states like Rhode Island and Connecticut, with 90%-95% of those engaged opting to stay connected and accept a referral to treatment or to recovery based peer services and recovery community centers.

Some non-traditional and controversial approaches are being offered up as temporary interventions. Some of these have worked well in other places including safe injection sites supervised by medical staff like the Insite program in Vancouver. This program has operated since 2003 with more than 3 million visits, several thousand overdoses yet remarkably no deaths. Each was successfully treated by on site medical personnel. Another inpatient treatment program in California supports and promotes the use of marijuana to replace heroin. Clients are provided marijuana and encouraged to use cannabis rather than risk their lives by injecting heroin possibly mixed with deadly fentanyl. Proponents report a reduction in overdose death rates by 25%-30%.

Clearly what is being done to date is not working fast enough to have an impact. Most experts agree on the need to find immediate solutions and stop gap measures. If you are anyone you know uses heroin be sure to become trained in the use of naloxone, you too could save a life!

For help with an opiate problem or any other addiction call: LECSA EAP 631-851-1295