



DATE:	03/06/2015
TO:	Health Alert Network
FROM:	Karen Murphy, Acting Secretary of Health Gary Tennis, Acting Secretary of Drug and Alcohol Programs
SUBJECT:	Expanded Naloxone Access in Pennsylvania
DISTRIBUTION:	Statewide
LOCATION:	Statewide
STREET ADDRESS:	Statewide
COUNTY:	Statewide
MUNICIPALITY:	Statewide
ZIP CODE:	Statewide

This transmission is a “Health Advisory”: provides important information for a specific incident or situation; may not require immediate action.

HOSPITALS: PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, INFECTION CONTROL, NURSING, AND LABORATORY STAFF IN YOUR HOSPITAL

EMS COUNCILS: PLEASE DISTRIBUTE AS APPROPRIATE

FQHCs: PLEASE DISTRIBUTE AS APPROPRIATE

LOCAL HEALTH JURISDICTIONS: PLEASE DISTRIBUTE AS APPROPRIATE

PROFESSIONAL ORGANIZATIONS: PLEASE DISTRIBUTE TO YOUR MEMBERSHIP

In late 2014, Pennsylvania passed several legislative measures in an effort to curb the state’s prescription opioid abuse crisis and to combat the increase in drug-related overdoses and overdose deaths. These measures include: (1) amendment of the Controlled Substance, Drug, Device and Cosmetic Act to include a Drug Overdose Response Immunity section; (2) the Achieving Better Care by Monitoring All Prescriptions Program; and (3) amendment of the state’s compensation schedule for drugs dispensed under The Workers’ Compensation Act, which also sets related dispensing limits for practitioners.¹

The threat posed by the abuse and diversion of pharmaceutical drugs, particularly prescription opioids, in Pennsylvania is grave and continues to grow. Despite a drop in rank from the 7th highest drug poisoning death rate in the nation in 2011 to a rank of 8th in this category in 2012, the total number of drug-poisoning deaths rose from 2,289 in 2011 to 2,365 in 2012. Additionally, Pennsylvania’s 2012² drug poisoning death rate of 18.85 per 100,000 population³ is significantly higher than the overall U.S. rate of 13.1 per 100,000 population.⁴ The 2012

figures represent the highest number and age-adjusted rate of drug-poisoning deaths for Pennsylvania in over a decade.

On November 29th 2014, Pennsylvania **ACT 139** greatly expanded access to naloxone, (also known by the brand names “Narcan” and “Evizo”), a safe and effective medication designed to reverse opiate induced overdose and prevent death. ACT 139 allows first responders (law enforcement, fire fighters, EMS) to administer the drug to individuals experiencing an opioid overdose. Additionally, individuals such as friends or family members in a position to assist a person at risk of experiencing an opioid related overdose may receive a prescription for naloxone. ACT 139 provides legal protections for people who intervene in the case of an overdose.

Physicians should consider discussing overdose prevention and prescribing naloxone to any of the following individuals:

- Patients being prescribed prescription opioids for chronic conditions
- Patients reporting current or past heroin or prescription opioid misuse
- Individuals who report being a family member or friend of someone who uses heroin or prescription opioids

Physicians should be prepared to discuss the following as part of naloxone prescribing:

- Opioid overdose prevention and recognition
- Importance of calling 911 - the effects of naloxone are only temporary, therefore, it is essential that individuals receive additional medical assistance

Individuals who might be required to administer naloxone to a friend or family member should receive training on how to administer the medication. Trainings are available at www.getnaloxonenow.org.

For more information on ACT 139, visit

<http://www.ddap.pa.gov/portal/server.pt?open=514&objID=1938383&mode=2>

¹ Drug Enforcement Administration (DEA) Philadelphia Division report “Pennsylvania Addresses Prescription Drug-Abuse and Drug-Related Overdoses Through Legislation”

² Source: CDC; 2012 data represents the most recent data available. Rates are age-adjusted.

³ Source: Centers for Disease Control and Prevention, National Centers for Injury Prevention and Control. Web-based Injury Statistics

Query and Reporting System (WISQARS) queried on December 8, 2014. Available from: www.cdc.gov/ncipc/wisqars

⁴ Source: Centers for Disease Control and Prevention, National Centers for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System (WISQARS) queried on December 8, 2014. Available from: www.cdc.gov/ncipc/wisqars

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; no immediate action necessary

This information is current as of March 6, 2015, but may be modified in the future. We will continue to post updated information regarding the most common questions about this subject.