COCA Call Information

□ For the best quality audio, we encourage you to use your computer's audio.

■ Webinar Link:

https://zoom.us/j/996942494

□ If you cannot join through digital audio, you may join by phone in listen-only mode:

US: 1(646) 876-9923 or 1(669) 900-6833

Webinar ID: 996 942 494

□ All questions for the presenters must be submitted through the webinar system via the Q&A button.

Please do not ask a question using the chat button.

HHS and CDC Recommendations to Expand the Use of Naloxone—A Life-saving, yet Underutilized Drug for Reversing Opioid Overdose

Clinician Outreach and Communication Activity (COCA) Webinar

emergency.cdc.gov/coca

September 17, 2019



Continuing Education for this COCA Call

All continuing education (CME, CNE, CEU, CECH, ACPE, CPH, and AAVSB/RACE) for COCA Calls are issued online through the CDC Training & Continuing Education Online system (http://www.cdc.gov/TCEOnline/).

Those who participated in today's COCA Call and who wish to receive continuing education should complete the online evaluation by October 21, 2019 with the course code WC2922.

Those who will participate in the on demand activity and wish to receive continuing education should complete the online evaluation between October 21, 2019 and October 22, 2021 and use course code WD2922.

Continuing education certificates can be printed immediately upon completion of your online evaluation. A cumulative transcript of all CDC/ATSDR CEs obtained through the CDC Training & Continuing Education Online System will be maintained for each user.

Continuing Education Disclaimer

- In compliance with continuing education requirements, CDC, our planners, our presenters, and their spouses/partners wish to disclose they have no financial interests or other relationships with the manufacturers of commercial products, suppliers of commercial services, or commercial supporters.
- Planners have reviewed content to ensure there is no bias. Content will not include any discussion of the unlabeled use of a product or a product under investigational use.
- CDC did not accept commercial support for this continuing education activity.

To Ask a Question

- Using the Webinar System
 - Click on the Q&A button in the Zoom webinar system.
 - Type your question in the Q&A box.
 - Submit your question.
 - Please do not submit a question using the chat button.
- □ For media questions, please contact CDC Media Relations at 404-639-3286 or send an email to media@cdc.gov.
- If you are a patient, please refer your questions to your healthcare provider.

At the conclusion of the session, participants will be able to accomplish the following:

- 1. Identify the risk factors for opioid overdose.
- 2. Promote the CDC Guideline recommendations and the Department of Health and Human Services (HHS) guidance on naloxone co-prescribing.
- 3. Describe the history of naloxone use and current state-level policies.
- 4. Discuss the steps that can be taken to link survivors of opioid overdose to treatment.
- 5. Describe actions that can help expand naloxone access at the local level.

Today's Guest Speaker



Vice Admiral Jerome M. Adams MD, MPH (USPHS) 20th Surgeon General of the United States of America



Today's Presenter



Captain Christopher M. Jones, PharmD, DrPH, MPH (USPHS)

Director, Strategy and Innovation, CDC Injury Center

National Center for Injury Prevention and Control

Centers for Disease Control and Prevention



OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH















HHS and CDC Recommendations to Expand the Use of Naloxone – A Life-Saving, yet Underutilized Drug for Reversing Opioid Overdose





@Surgeon_General



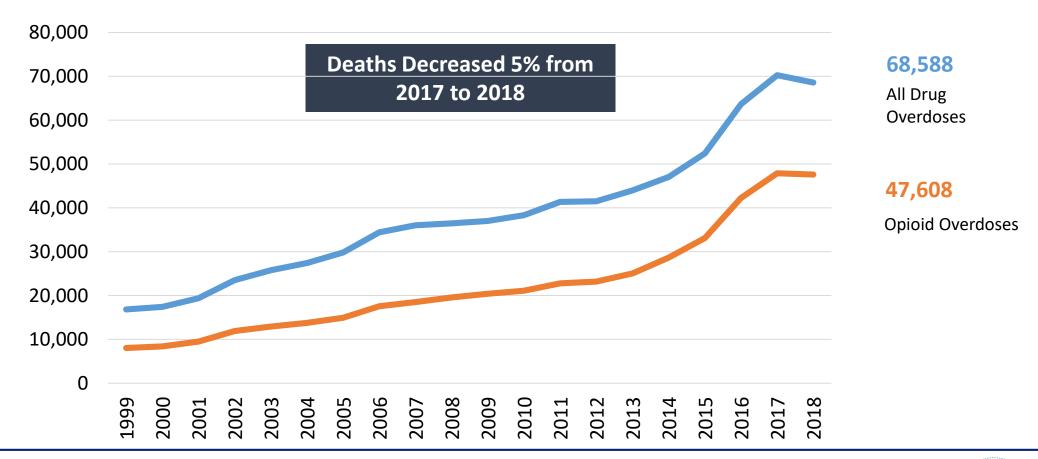
@USSurgeongeneral



Surgeon General of the United States

VADM Jerome Adams, M.D., M.P.H.

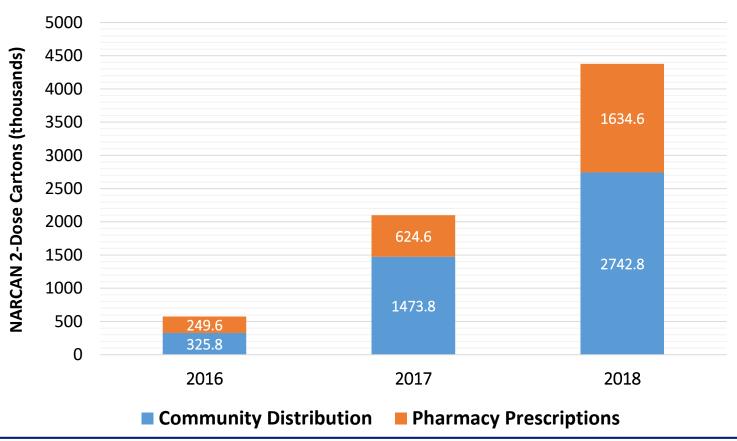
U.S. DRUG OVERDOSE DEATHS THE MOST CRITICAL PUBLIC HEALTH CHALLENGE OF OUR TIME





DISTRIBUTION OF NARCAN® (NALOXONE HCL) NASAL SPRAY

GREW 760% BETWEEN 2016 AND 2018













For Media Requests:

Phone: 202-205-0143

E-mail: ashmedia@hhs.gov

Event Invitations Requests:

E-mail: sginvitations@hhs.gov

Link to Invitations Form:

https://www.hhs.gov/surgeongeneral/about/contact

-us/surgeon-general-invitation-form/index.html



@Surgeon_General



@USSurgeongeneral



@u.s.surgeongeneral



HHS and CDC Recommendations to Expand the Use of Naloxone – A Life-Saving, yet Underutilized Drug for Reversing Opioid Overdose

Christopher Jones, PharmD, DrPH, MPH

CAPT, U.S. Public Health Service

Senior Advisor

Director of Strategy and Innovation

National Center for Injury Prevention and Control

Centers for Disease Control and Prevention

Outline

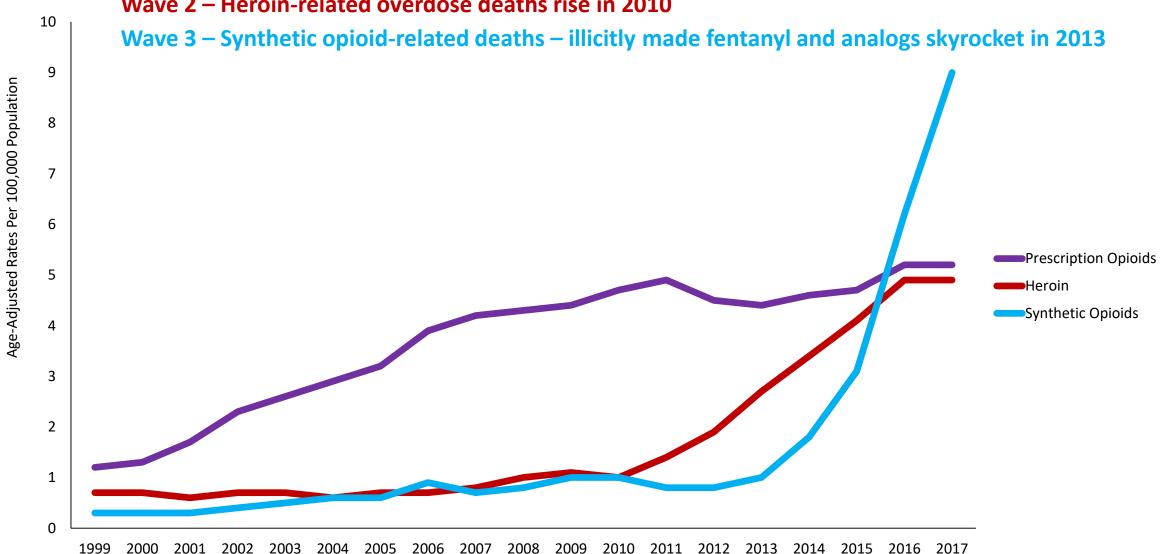
- State of the Opioid Overdose Epidemic
- Role of Naloxone
- Guidance and Recommendations for Naloxone Co-Prescribing and Prescribing
- Findings from the August 2019 CDC Vitals Signs on Pharmacy-Based Naloxone Dispensing
- Recommendations for Action
- Questions and Answers

State of the Opioid Overdose Epidemic

Waves of the Opioid Overdose Epidemic

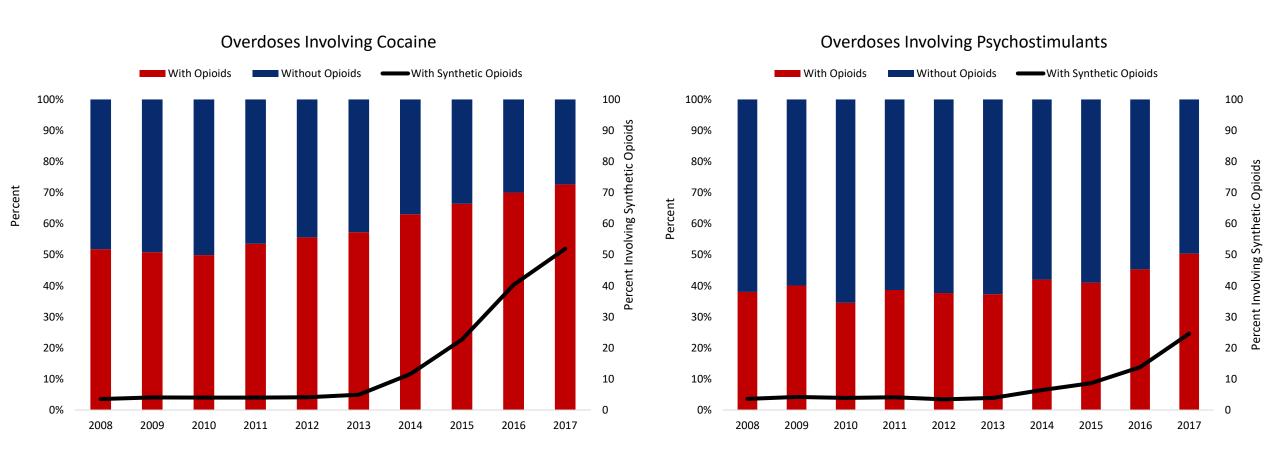
Wave 1 – Prescription opioid-related overdose deaths start to climb in late 1990s

Wave 2 – Heroin-related overdose deaths rise in 2010



Source: CDC National Vital Statistics System

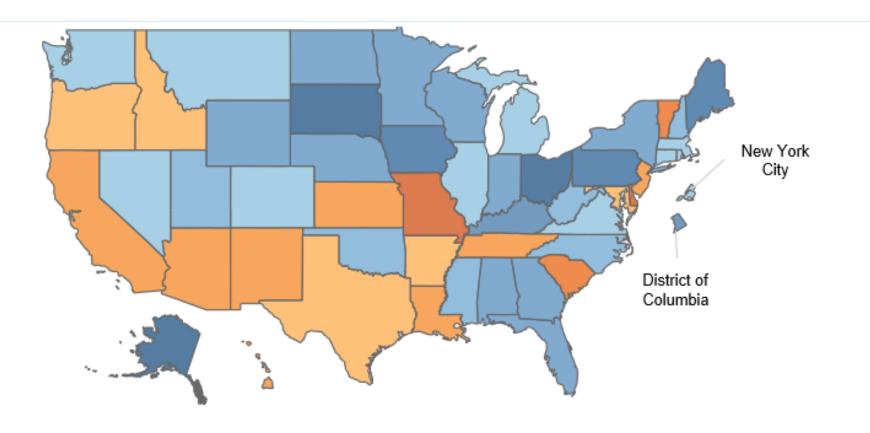
Opioid Involvement in Cocaine and Psychostimulant-Related Overdose Deaths



Source: CDC NVSS Data, 2019

12 Month-ending Predicted Provisional Number of Drug Overdose Deaths by State Through December 2018

Percent Change in Predicted 12 Month-ending Count of Drug Overdose Deaths, by Jurisdiction: December 2017 to December 2018



Legend for Percent Change in Drug Overdose Deaths Between 12-Month Ending Periods

-26.1

Role of Naloxone

HHS Five-Point Opioid Strategy



Better
addiction
prevention,
treatment,
and recovery
services



Better data



Better pain management



Better targeting of overdose reversing drugs



Better research

Naloxone Use and Access

- Healthcare providers in emergency departments and other medical settings
- Emergency Medical Services
- Community-based overdose education and naloxone distribution programs
- Police and other first responders
- Pharmacy-based naloxone dispensing

Guidance and Recommendations for Naloxone Co-Prescribing and Prescribing

CDC Guideline for Prescribing Opioids for Chronic Pain* Recommendations for Naloxone Co-Prescribing

- Consider offering naloxone to patients receiving opioid therapy when factors that increase risk for opioid overdose exist
- Risk factors include:
 - Patients with a history of overdose
 - Patients with a history of substance use disorder
 - Patients receiving high doses of opioids (≥ 50 MME/day)
 - Patients receiving opioids concurrently with benzodiazepines

Source: Haegerich et al., MMWR, 2016

^{*} Guideline for primary care clinicians who are prescribing opioids for chronic pain outside of active cancer treatment, palliative care, and end-of-life care

HHS Guidance on Naloxone Co-Prescribing and Prescribing

- Patients prescribed opioids who:
 - Are receiving high doses of opioids (≥50 MME/day)
 - Regardless of opioid dose
 - Have respiratory conditions such as chronic obstructive pulmonary disease (COPD) or obstructive sleep apnea
 - Have been prescribed benzodiazepines
 - Have a non-opioid substance use disorder
 - Report excessive alcohol use
 - Have a mental health disorder

- Patients at high risk for experiencing or responding to an opioid overdose, including individuals:
 - Using heroin, illicit synthetic opioids or misusing prescription opioids.
 - Using other illicit drugs such as stimulants, including methamphetamine and cocaine, which could potentially be contaminated with illicit synthetic opioids like fentanyl.
 - Receiving treatment for opioid use disorder, including medication-assisted treatment with methadone, buprenorphine, or naltrexone.
 - With a history of opioid misuse that were recently released from incarceration or other controlled settings where tolerance to opioids has been lost.

Source: HHS, 2019 https://www.hhs.gov/opioids/sites/default/files/2018-12/naloxone-coprescribing-guidance.pdf

Findings from the August 2019 CDC Naloxone Vital Signs

#vitalsigns AUG. 2019

Vitalsigns

Life-Saving Naloxone from Pharmacies
More dispensing needed despite progress



2x

The number of prescriptions for naloxone doubled from 2017 to 2018.

1 in 70

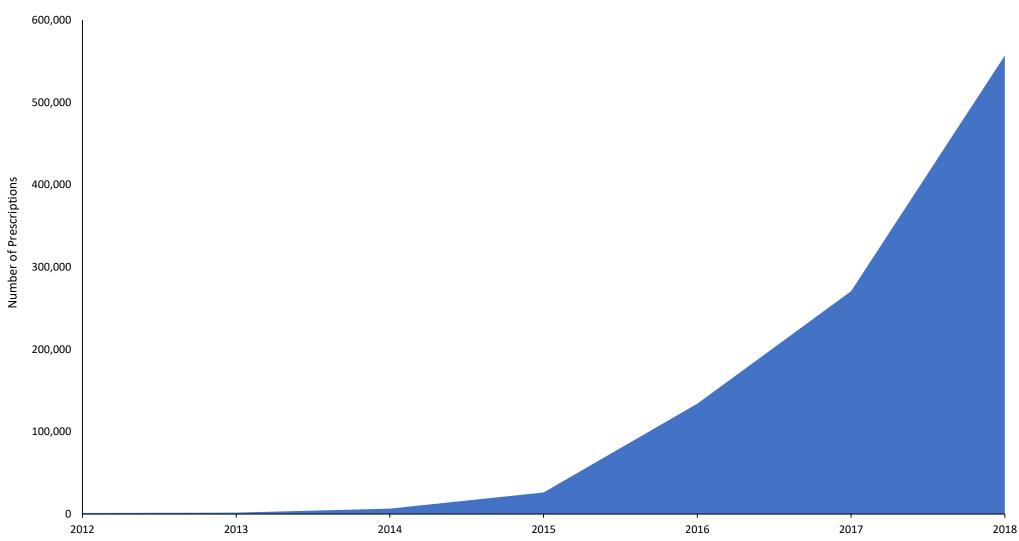
Only 1 naloxone prescription is dispensed for every 70 high-dose opioid prescriptions.

3x

Rural counties are nearly 3 times more likely to be ranked low dispensing than metropolitan counties.

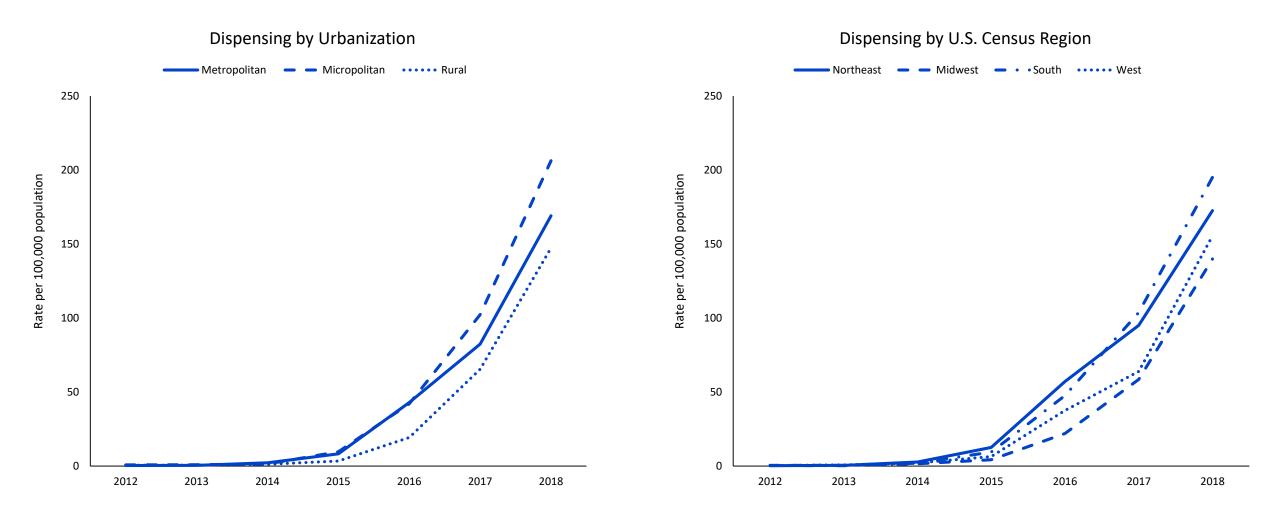
https://www.cdc.gov/vitalsigns/naloxone/index.html

Naloxone Dispensing from Retail Pharmacies, U.S., 2012-2018



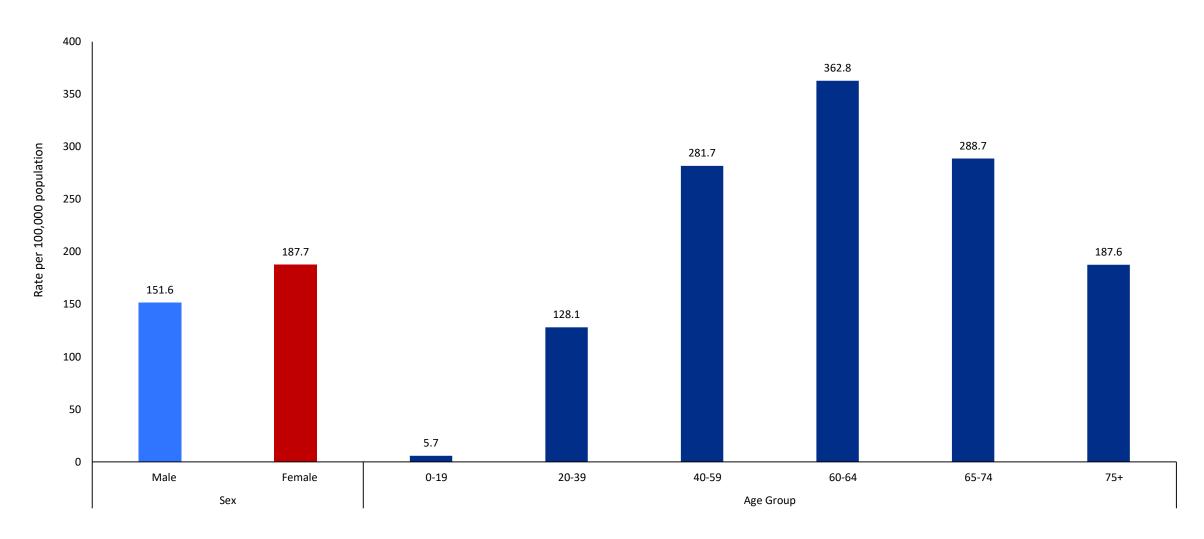
Source: Guy et al., MMWR, 2019

Rates of Naloxone Dispensing by County Urbanization and U.S. Census Region, U.S., 2012-2018

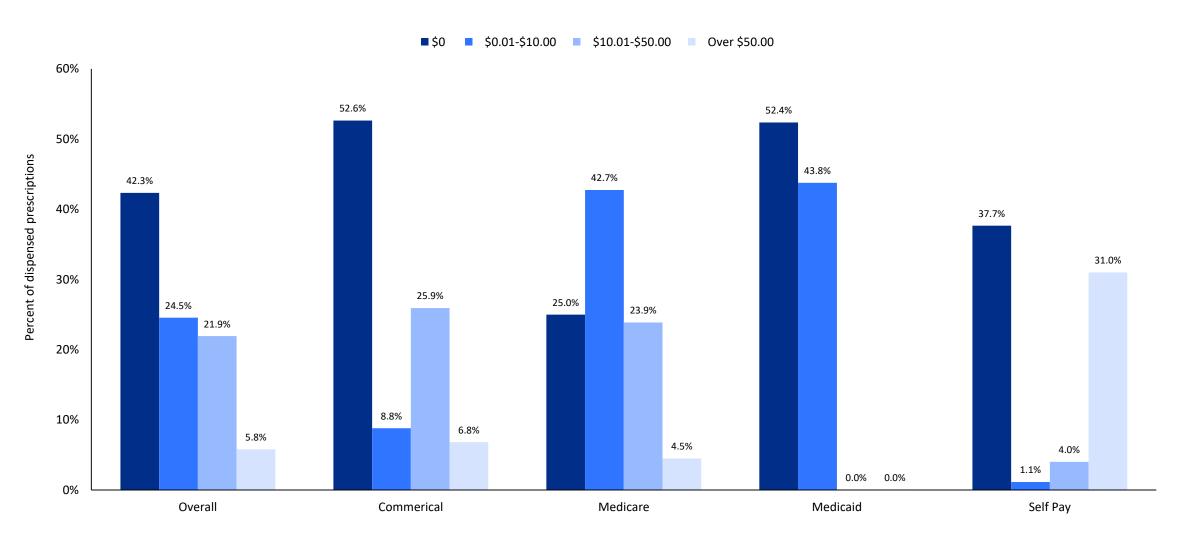


Source: Guy et al., MMWR, 2019

Rates of Naloxone Dispensing by Demographic Group, U.S., 2018

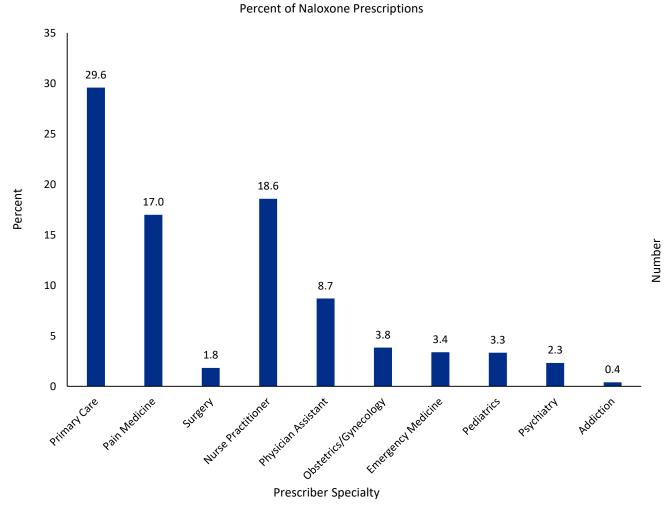


Percent of Naloxone Dispensing by Payment Type and Amount, U.S., 2018

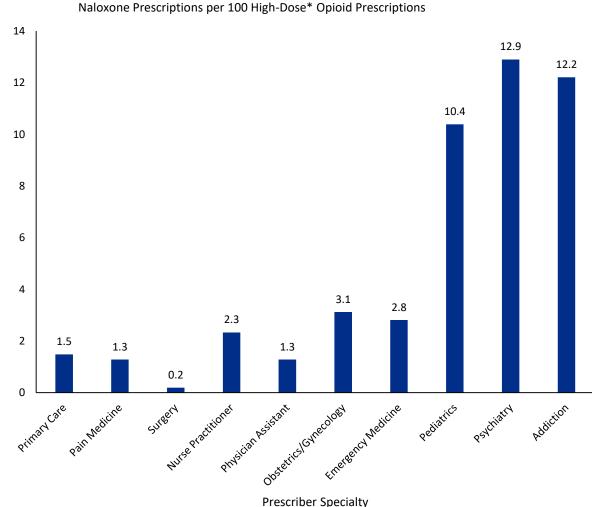


Source: Guy et al., MMWR, 2019

Naloxone Dispensing by Prescriber Specialty, U.S., 2018



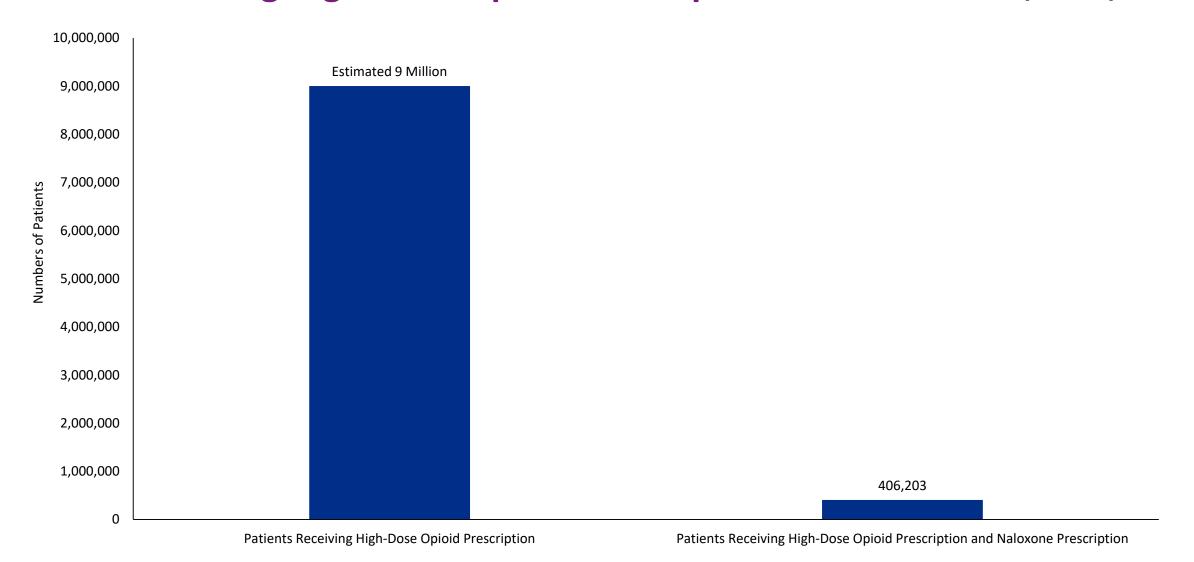
Overall 1 Naloxone Rx for Every 69 High-Dose* Opioid Rxs in 2018



Source: Guy et al., MMWR, 2019

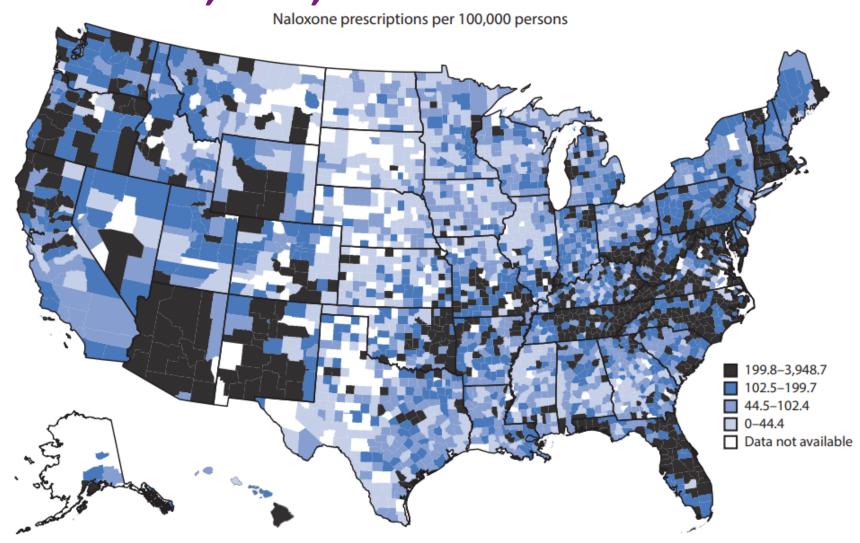
* High dose is defined as ≥50 morphine milligram equivalent (MME)

Patients Receiving High-Dose Opioid Prescriptions and Naloxone, U.S., 2018



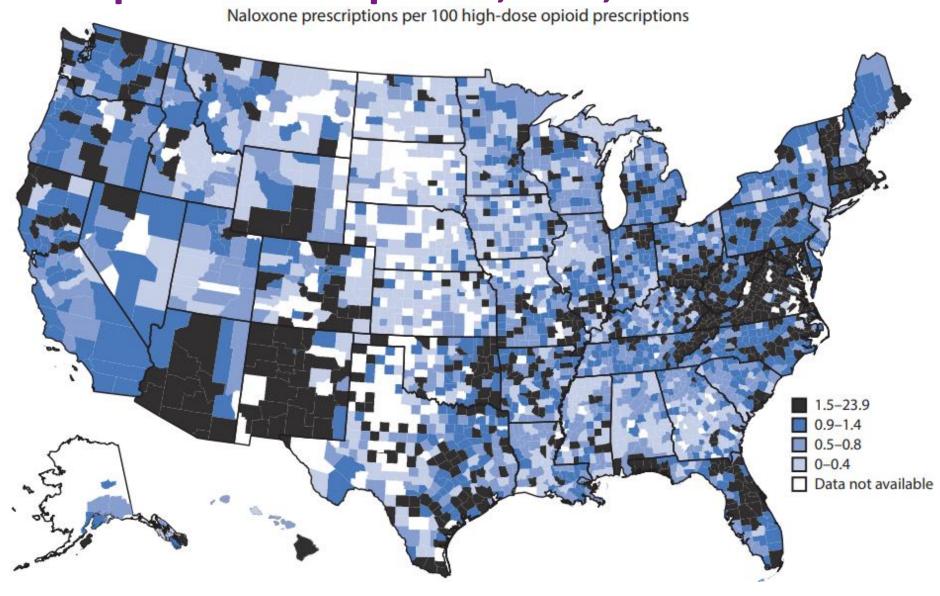
Source: Guy et al., MMWR, 2019

County-Level Naloxone Prescriptions Dispensed per 100,000 Persons, U.S., 2018



County-Level Naloxone Prescriptions Dispensed per 100 High-Dose Opioid Prescriptions, U.S., 2018

1 in 12
counties
dispensed
high-dose
opioids but
not naloxone
in 2018



Source: Guy et al., MMWR, 2019

County-Level Factors Associated with High and Low Naloxone Dispensing, U.S., 2018

HIGH (Top Quartile) Naloxone Dispensing Counties	
There (top Quartile) Nationalic Dispersing	Odds Ratio
High-dose opioid dispensing rate (2018)	1.13
Drug overdose death rate (2017)	1.02
Potential buprenorphine treatment capacity	1.02
Male (%)	0.96
Non-Hispanic white (%)	0.99
Disabled (%)	1.10
Insurance status (%)	
Uninsured	1.01
Medicare	0.99
Medicaid	1.04
Unemployment rate	0.96
No high school diploma (%)	0.98
Income below the Federal Poverty Level (%)	0.98
County urbanization level	
Metropolitan	Ref
Micropolitan	0.70
Rural	0.46

LOW (Bottom Quartile) Naloxone Dispensing Counties	
	Odds Ratio
High-dose opioid dispensing rate (2018)	0.84
Drug overdose death rate (2017)	0.97
Potential buprenorphine treatment capacity	0.95
Male (%)	1.02
Non-Hispanic white (%)	1.01
Disabled (%)	0.93
Insurance status (%)	
Uninsured	1.02
Medicare	1.06
Medicaid	0.96
Unemployment rate	1.01
No high school diploma (%)	1.01
Income below the Federal Poverty Level (%)	1.03
County urbanization level	
Metropolitan	Ref
Micropolitan	1.12
Rural	2.61

Source: Guy et al., MMWR, 2019

Recommendations for Action

Recommendations for Action

Pharmacists and Other Healthcare Providers Can:

- Monitor patients for risk of overdose, prescribe or dispense naloxone when overdose risk factors are present, and counsel patients on how to use it
- Ensure naloxone is always available in pharmacies
- Participate in and offer naloxone training and education

Health Insurers Can:

- Reduce patient out-of-pocket costs
- Cover naloxone prescriptions without prior approval

Source: https://www.cdc.gov/vitalsigns/naloxone/pdf/vs-0806-naloxone-H.pdf

Recommendations for Action

States and Communities Can:

- Work with healthcare providers to expand naloxone access, especially in rural areas
- Promote the benefits of prescribing, dispensing, and carrying naloxone
- Create harm reduction programs and improve access to medicationassisted treatment for opioid use disorder

Source: https://www.cdc.gov/vitalsigns/naloxone/pdf/vs-0806-naloxone-H.pdf

Questions and Answers

Christopher Jones

fjr0@cdc.gov

For more information, contact CDC 1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



To Ask a Question

- Using the Webinar System
 - Click on the Q&A button in the Zoom webinar system.
 - Type your question in the Q&A box.
 - Submit your question.
 - Please do not submit a question using the chat button.
- □ For media questions, please contact CDC Media Relations at 404-639-3286 or send an email to media@cdc.gov.
- If you are a patient, please refer your questions to your healthcare provider.

Today's webinar will soon be available on demand

When: A few days after the live call

What: Video with closed captioning

Where: On the COCA Call webpage at:

https://emergency.cdc.gov/coca/calls/2019/callinfo_09

1719.asp

Continuing Education for this COCA Call

All continuing education (CME, CNE, CEU, CECH, ACPE, CPH, and AAVSB/RACE) for COCA Calls are issued online through the CDC Training & Continuing Education Online system (http://www.cdc.gov/TCEOnline/).

Those who participated in today's COCA Call and who wish to receive continuing education should complete the online evaluation by October 21, 2019 with the course code WC2922.

Those who will participate in the on demand activity and wish to receive continuing education should complete the online evaluation between October 21, 2019 and October 22, 2021 and use course code WD2922.

Continuing education certificates can be printed immediately upon completion of your online evaluation. A cumulative transcript of all CDC/ATSDR CEs obtained through the CDC Training & Continuing Education Online System will be maintained for each user.

Upcoming COCA Call

Topic: Severe Lung Illness Associated with Using E-Cigarette Products

Date: Thursday, September 19, 2019

Time: 2:00-3:00 p.m. ET

COCA Products & Services





COCA Call





CDC Clinician Outreach and Communication Activity

COCA Call Announcements contain all information subscribers need to participate in COCA Calls. COCA Calls are held as needed.





COCA Learn





CDC Clinician Outreach and Communication Activity

Monthly newsletter that provides information on CDC training opportunities, conference and training resources, the COCA Partner Spotlight, and the Clinician Corner.





Clinical Action





CDC Clinician Outreach and Communication Activity

As-needed messages that provide specific, immediate action clinicians should take. Contains comprehensive CDC guidance so clinicians can easily follow recommended actions.

COCA Products & Services



Monthly newsletter that provides updates on emergency preparedness and response topics, emerging public health threat literature, resources for health professionals, and additional information important during public health emergencies and disasters.



Informs clinicians of new CDC resources and guidance related to emergency preparedness and response. This email is sent as soon as possible after CDC publishes new content.



CDC's primary method of sharing information about urgent public health incidents with public information officers; federal, state, territorial, and local public health practitioners; clinicians; and public health laboratories.

Join COCA's Mailing List!

Receive information about:

- Upcoming COCA Calls
- Health Alert Network (HAN) messages
- CDC emergency response activations
- Emerging public health threats
- Emergency preparedness and response conferences and training opportunities



http://emergency.cdc.gov/coca

Join Us on Facebook!













CDC Clinician
Outreach and
Communication
Activity - COCA

@CDCClinicianOutreachA ndCommunicationActivity

Home

About

Posts

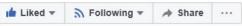
Photos

Events

Community

Create a Page





1887

× ...

Sign Up





Write something on this Page...

Posts



CDC Clinician Outreach and Communication
Activity - COCA shared their event.

October 31 at 1:18pm · 🚱

Clinicians, you can earn FREE CE with this COCA Call! Join us for this COCA Call November 7, 2017 at 2:00PM.



Government Organization in Atlanta, Georgia

Community

See All

21,420 people like this

21,217 people follow this

About

See All



1600 Clifton Rd NE Atlanta, Georgia 30333

Thank you for joining!



Centers for Disease Control and Prevention
Atlanta, Georgia
http://emergency.cdc.gov/coca