

Heroin & Opiate trends and interventions

Brad Finegood, MA, LMHC
Assistant Division Director,
Acting RSN Administrator
Prevention and Treatment Coordinator
King County Behavioral Health and Recovery Division

Caleb Banta-Green PhD, MPH, MSW
Senior Research Scientist Alcohol & Drug Abuse Institute
Affiliate Associate Professor School of Public Health
Affiliate Faculty Harborview Injury Prevention & Research Center
UNIVERSITY OF WASHINGTON

2016 Washington State Interagency Opioid Working Plan

INTRODUCTION

Washington State is currently experiencing an opioid abuse and overdose crisis involving prescription opioids and heroin. Approximately 600 individuals die each year from opioid overdose with an increasing proportion of those deaths involving heroin. The largest increase in heroin overdose deaths from 2004 to 2014 occurred among younger people ages 15 to 34 years. According to a recent statewide survey of syringe exchange clients, 57% of those who inject heroin said they were “hooked on” prescription opiates before they began using heroin.¹

State government agencies, local health departments, professional groups and community organizations across Washington State have been actively building networks and capacity to reduce morbidity and mortality associated with opioids. Several agency members of the Department of Health’s Unintentional Poisoning Workgroup collaborated to develop a statewide working plan for opioid response.

The **WA State Interagency Opioid Working Plan** outlines the goals, strategies and actions that are being implemented by a number of stakeholders across diverse professional disciplines and communities. This working plan outlines both current efforts as well as new proposed actions to scale up response and will be regularly updated as the epidemic and response evolve over time.

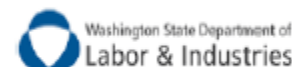
PLAN OVERVIEW

The WA State Interagency Opioid Working Plan includes four priority goals:

1. Prevent opioid misuse and abuse.
2. Treat opioid abuse and dependence.
3. Prevent deaths from overdose.
4. Use data to detect opioid misuse/abuse, monitor morbidity and mortality, and evaluate interventions.

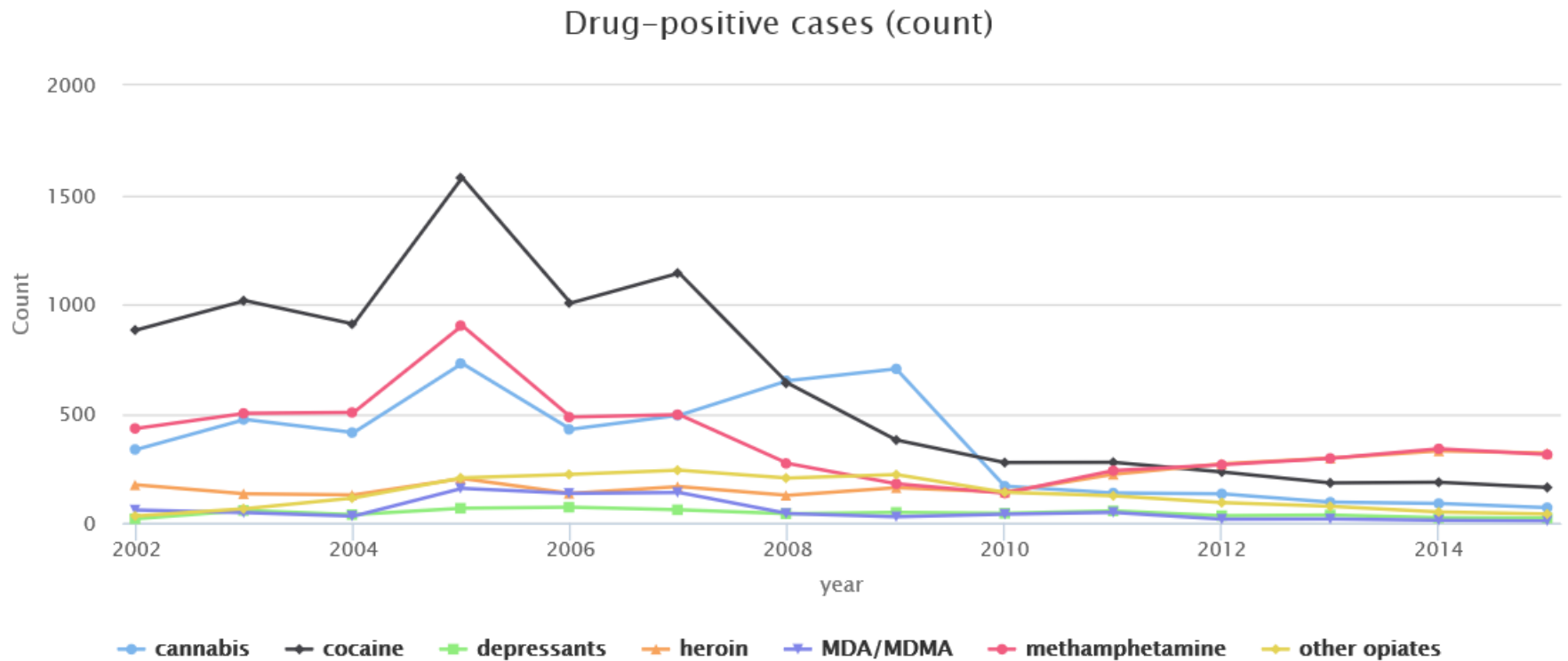


Transforming lives



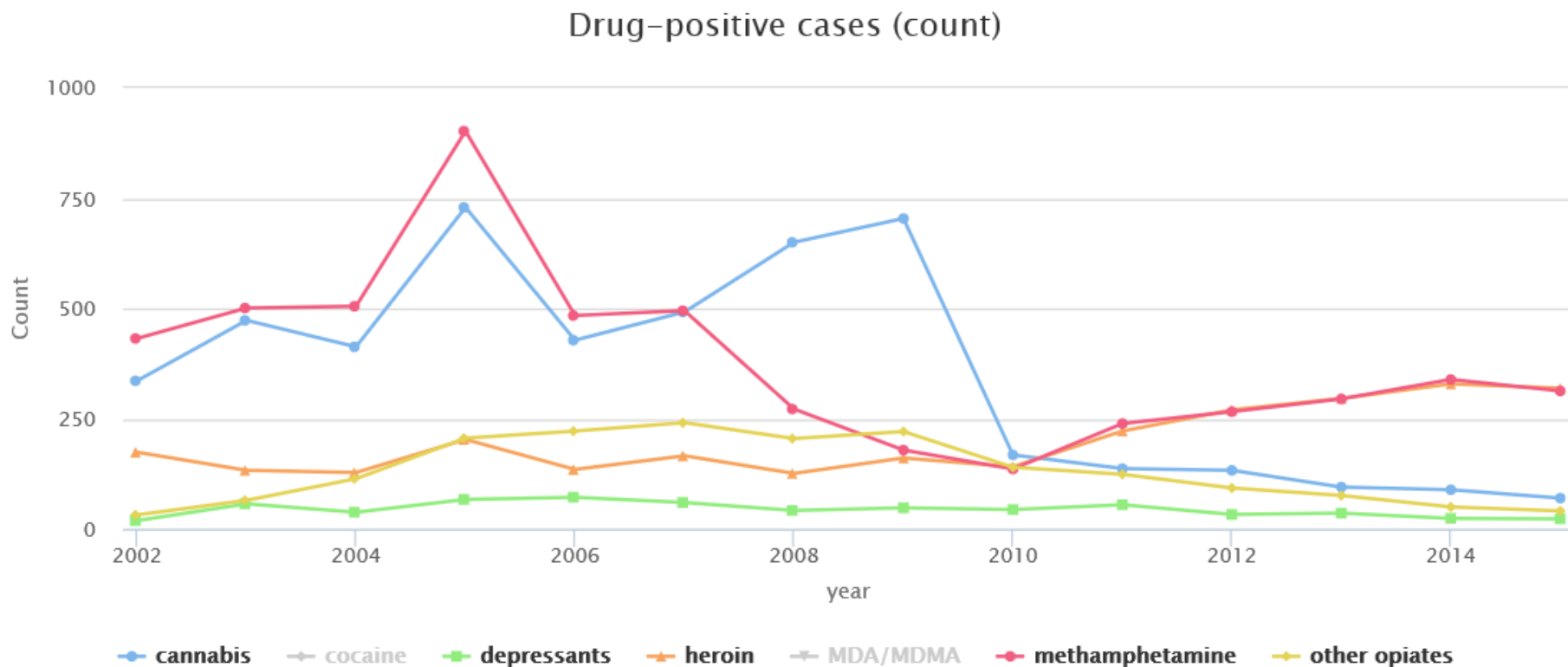
King County Drug Trends 2015

Police Evidence Testing from King County



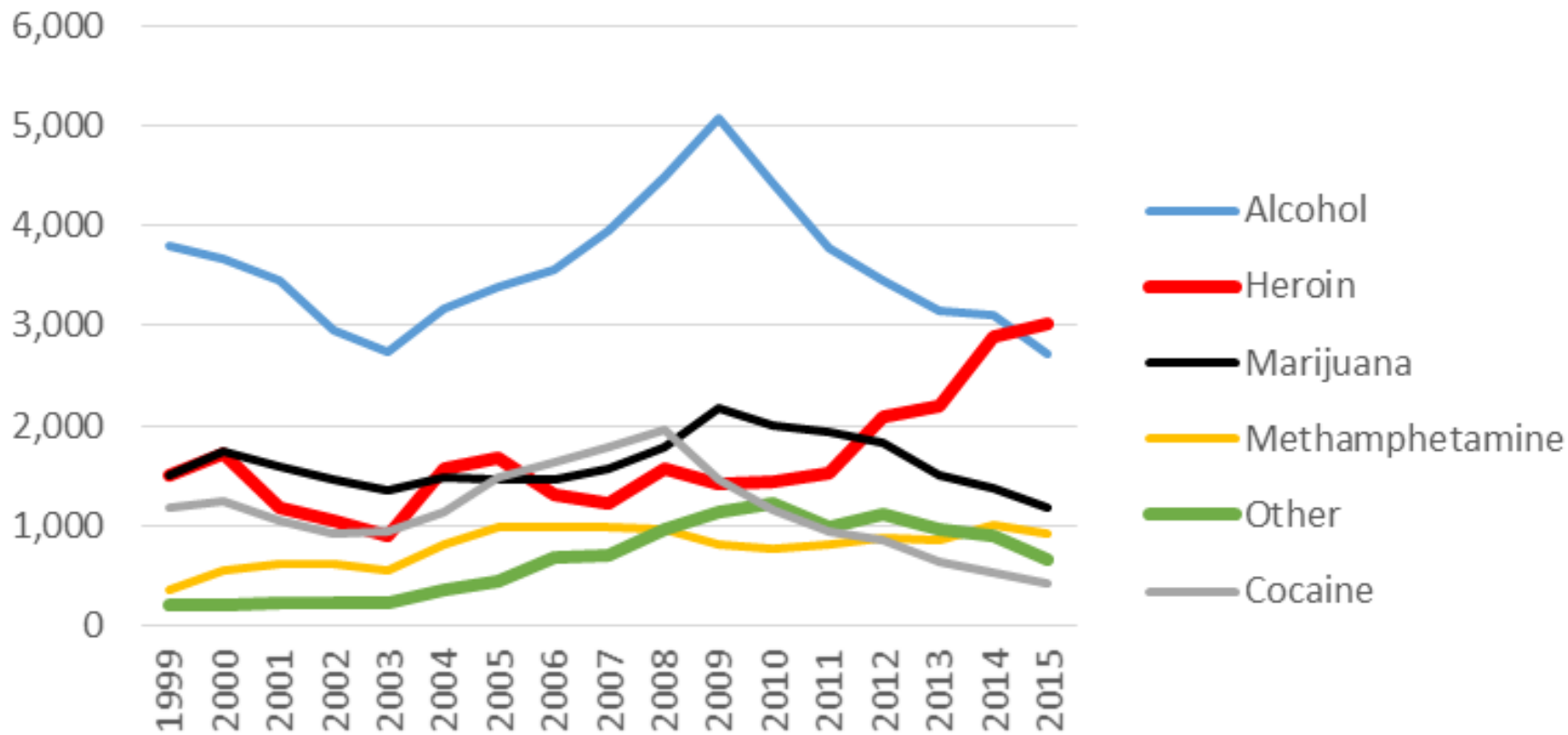
Data source: Forensic Laboratory Services Bureau, Washington State Patrol

Police Evidence Testing from King County



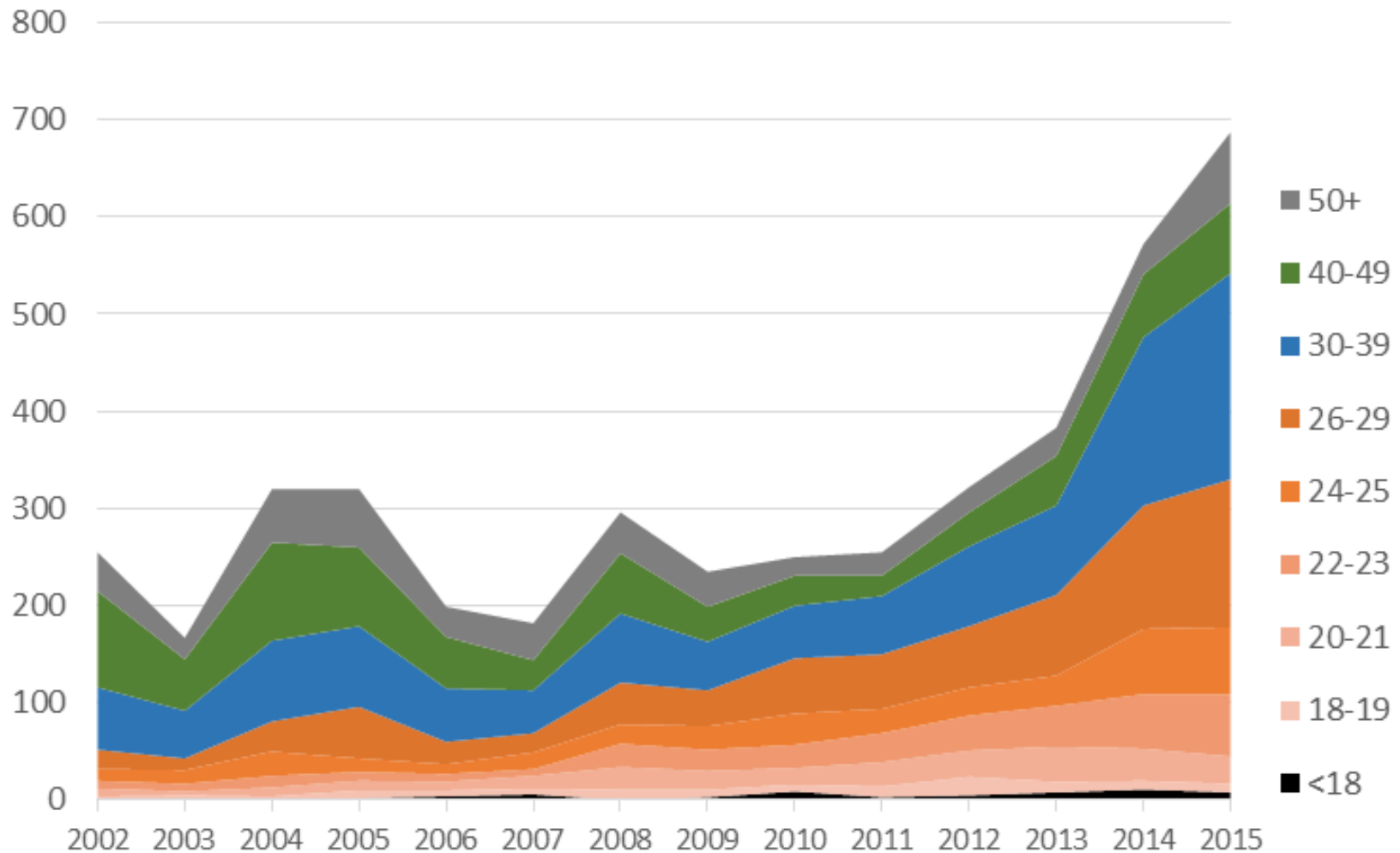
Data source: Forensic Laboratory Services Bureau, Washington State Patrol

Treatment Admissions King County, WA



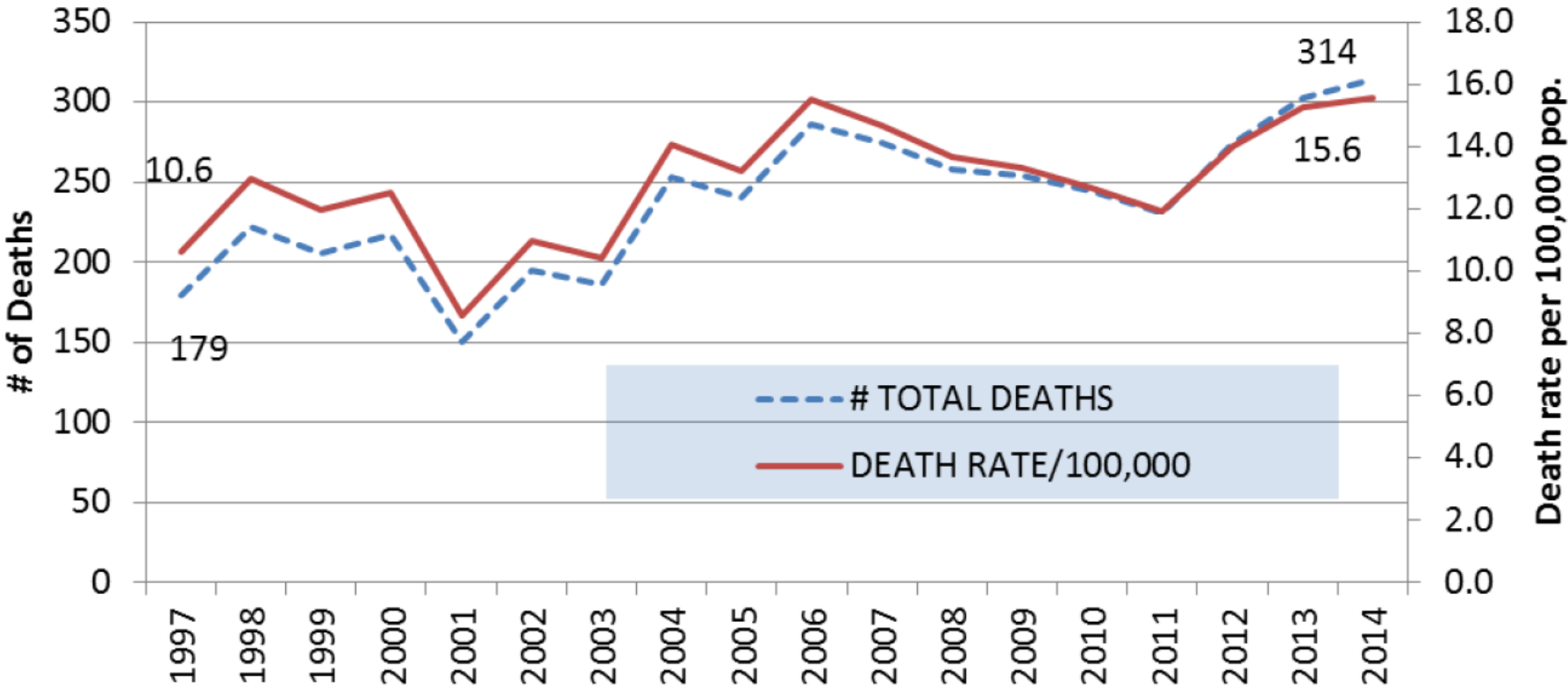
Data source: DSHS DBHR TARGET, publicly funded

Heroin- First treatment admission King County, WA



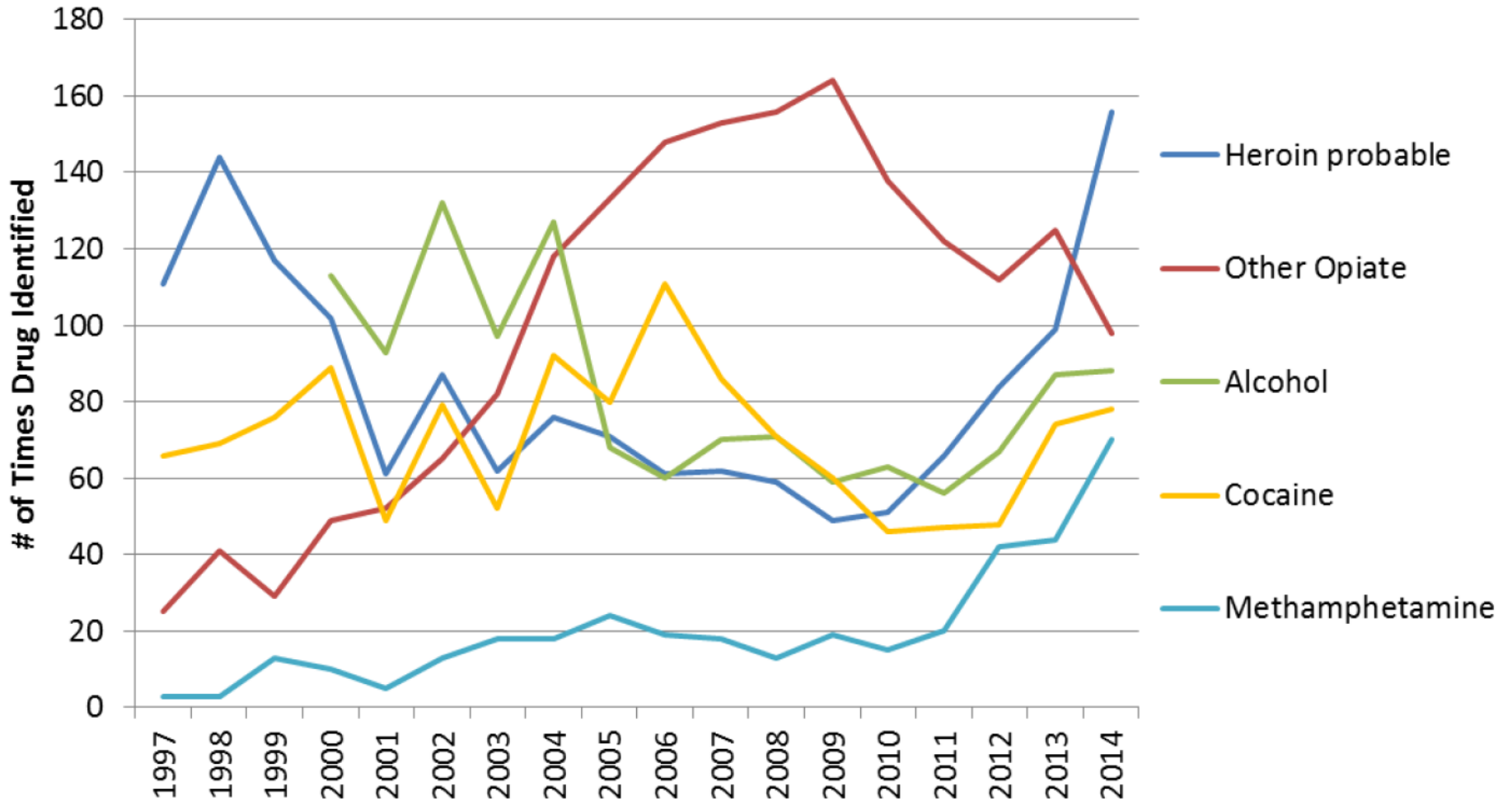
Data source: DSHS DBHR TARGET, publicly funded

Drug Caused Deaths Counts & Rates King County WA



Data source: King County Medical Examiner
 Data analyses: Alcohol & Drug Abuse Institute

King County Drug Caused Deaths Drugs Identified



Data source: King County Medical Examiner

Data analyses: Alcohol & Drug Abuse Institute

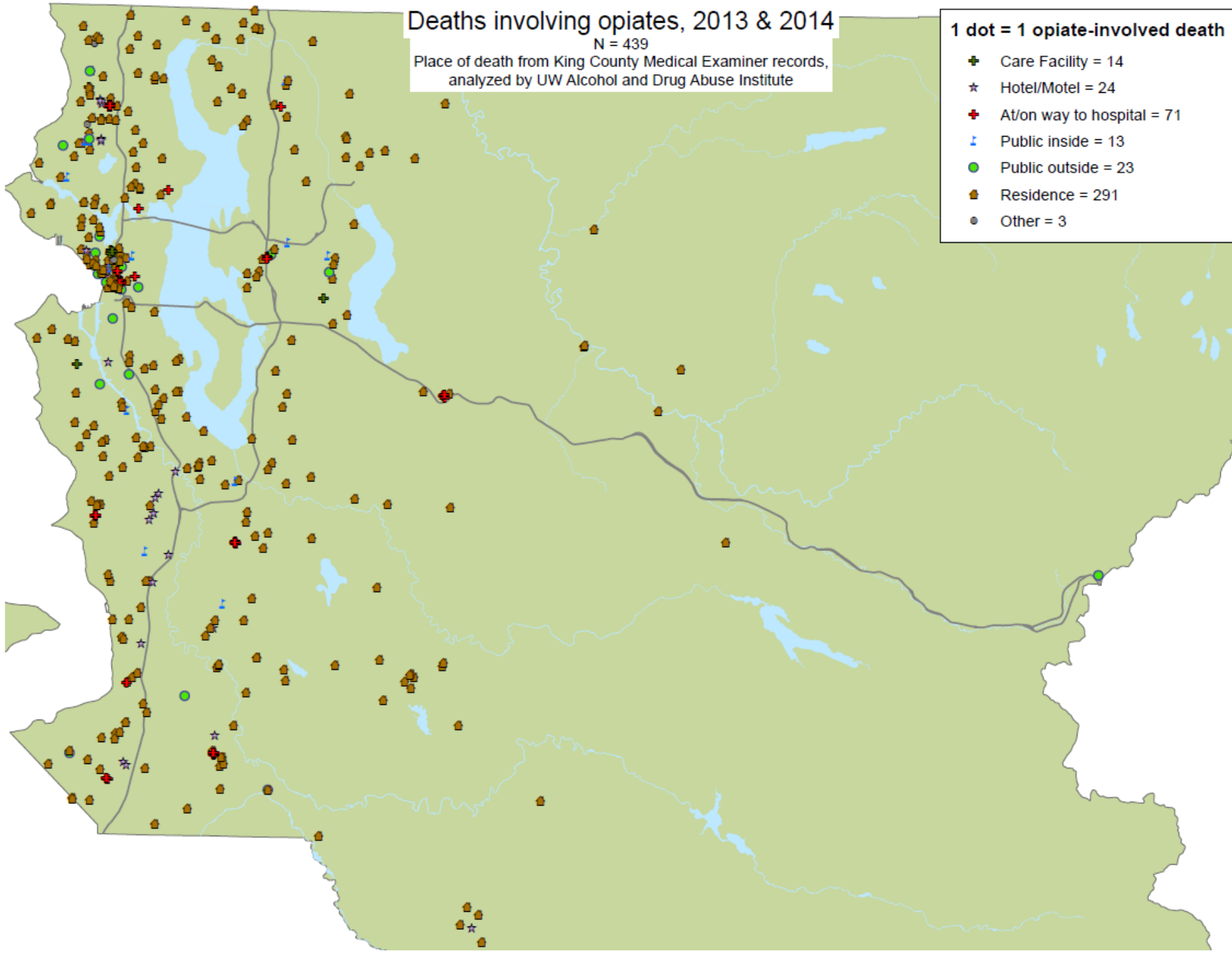
Deaths involving opiates, 2013 & 2014

N = 439

Place of death from King County Medical Examiner records,
analyzed by UW Alcohol and Drug Abuse Institute

1 dot = 1 opiate-involved death

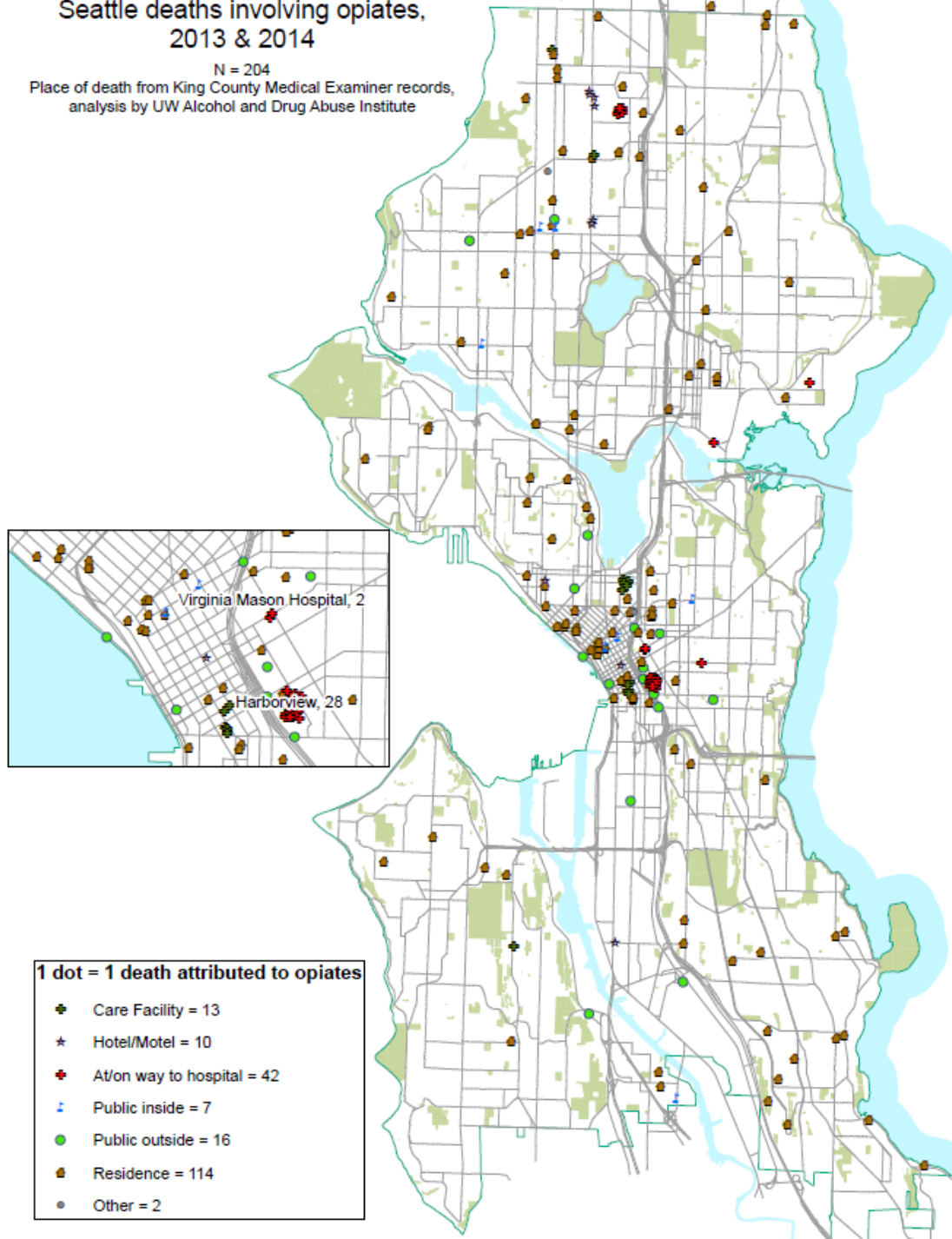
- ✚ Care Facility = 14
- ☆ Hotel/Motel = 24
- ✚ At/on way to hospital = 71
- ♣ Public inside = 13
- Public outside = 23
- 🏠 Residence = 291
- Other = 3



Seattle deaths involving opiates, 2013 & 2014

N = 204

Place of death from King County Medical Examiner records,
analysis by UW Alcohol and Drug Abuse Institute

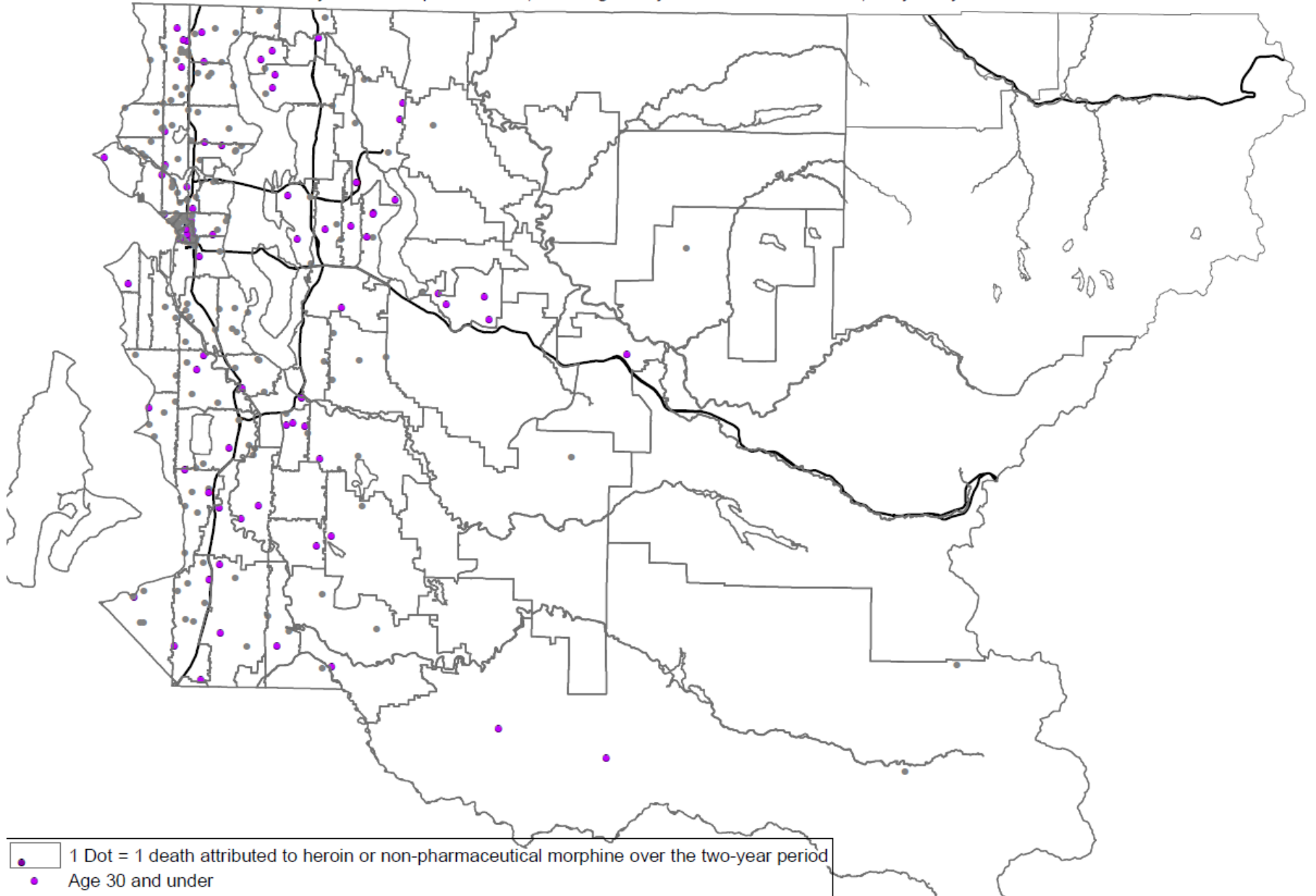


1 dot = 1 death attributed to opiates

- ✚ Care Facility = 13
- ★ Hotel/Motel = 10
- ✚ At/on way to hospital = 42
- ★ Public inside = 7
- Public outside = 16
- 🏠 Residence = 114
- Other = 2

Deaths from (probable) heroin, ages 30 & under, 2013 & 2014

By ZIP Code of place of death, from King County Medical Examiner records, analyzed by ADAI



Results from the 2015 Washington State Drug Injector Health Survey

Susan Kingston & Caleb Banta-Green

BACKGROUND

Injection drug use occurs across Washington State. A conservative estimate of the number of people who inject illegal drugs in Washington State is 25,636.¹ Recent injection drug use was reported by 12,687 Washingtonians who entered publicly funded treatment for the first time between 2006 and 2015. While new HIV infections have remained low within this population (injection drug use has accounted for only 10%-12% of newly reported HIV cases in Washington in recent years)², the prevalence of hepatitis C is much higher. One recent Seattle area study of people who inject drugs (PWID) found a hepatitis C prevalence rate of 73%.³ Drug overdose fatalities have been rising steadily across the state; at least 293 people died from a heroin-related overdose in 2014, roughly double the number who died from heroin in 2008. Deaths involving cocaine, methamphetamine, and pharmaceutical opioids continue to persist.

Figure 1. Survey respondents by zip code and survey site

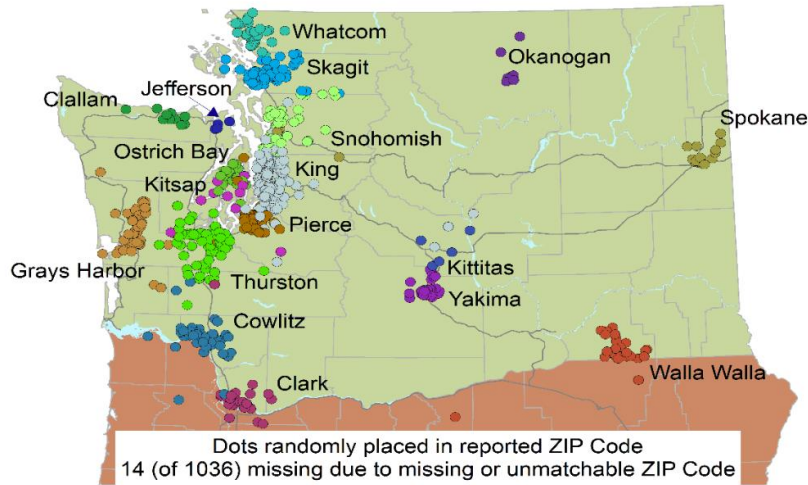


Figure 2. Main drug used by participants

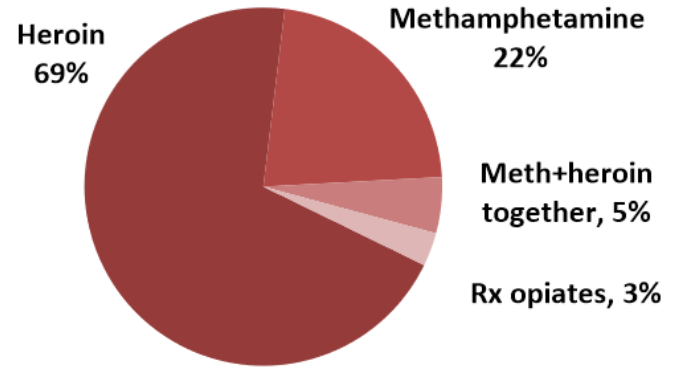


Figure 3. “Before you began using heroin were you hooked on prescription-type opiates?”

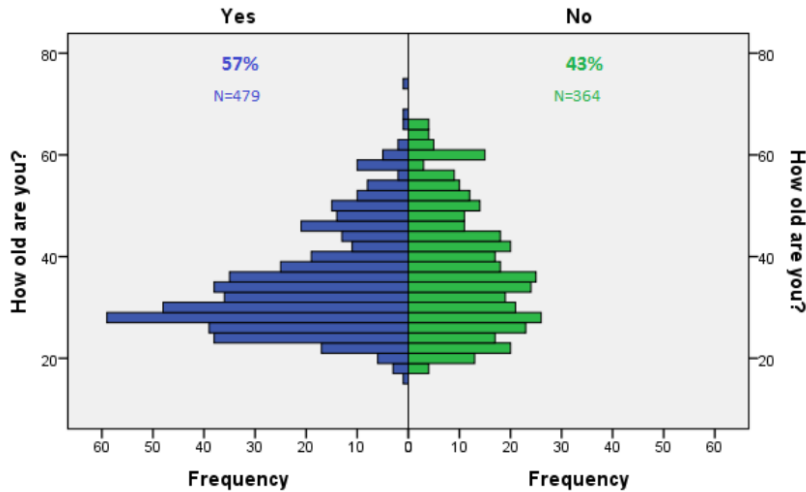
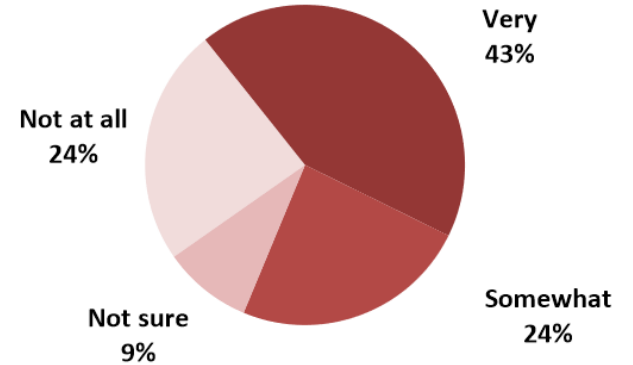
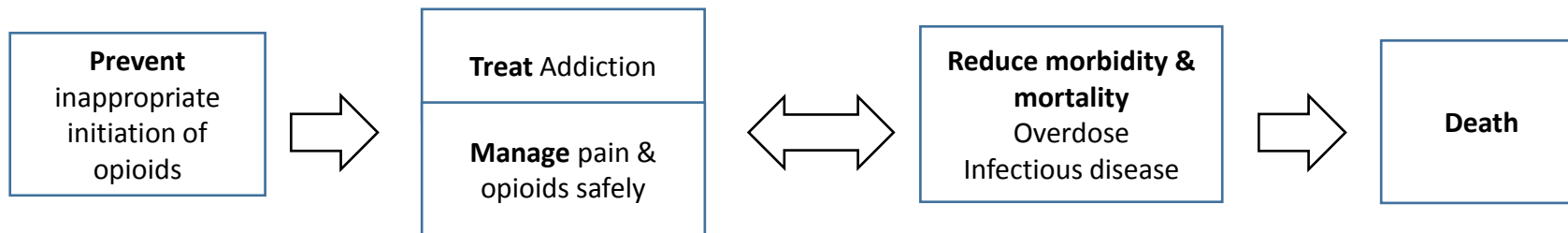


Figure 4. Interest in getting help to reduce or quit drug use among those not in drug treatment



Continuum of care for opioid misuse



Populations

General public
 Prescribers
 Patients
 Youth

Interventions

Law enforcement
 Prescribing practices
 Pain management practices
 Lock boxes
 Rx disposal
 Prescription Monitoring
 Education

- Health beliefs
- Medication beliefs
- Pain

Settings

Medical care/Pharmacy
 Schools
 Homes

Populations

Addiction
 Pain

Interventions

Opioid treatment meds
 Psychosocial
 Health care
 Complementary health

- Housing

Settings

Medical

- Clinic
- Hospital/ER

Community/PH/NGO
 Drug treatment programs
 Drug court
 Jail/Prison

Populations

Addiction
 Pain
 Opioid user
 Social network & Police

Interventions

Opioid treatment meds
 HIV/HCV treatment meds
 Housing
 OD ed./Naloxone
 Syringe exchange
 Safe consumption sites
 Good Samaritan

Settings

Community/PH/NGO
 Medical

- Clinic
- Hospital/ER
- Pharmacy

Drug treatment programs
 Drug court
 Jail/Prison

Current Activities

- **CDC Prescriber Guidelines**
- **SPD Carrying Naloxone**
- **Naloxone distribution**
- **MAT expansion**
- **Prescription Drug Collection**
- **Insite events last week**
- **Others**

Heroin & Opiate Addiction Task Force – *Charge*

The Task Force members are charged with developing recommendations to the Task Force sponsors to rapidly address the epidemics of heroin and prescription opioid addiction and overdose in King County.

Recommendations will identify steps to both prevent opioid addiction and improve opioid use disorder outcomes including among the most vulnerable people in the County.

Heroin & Opiate Addiction Task Force – *Charge*

The Task Force will focus on recommendations in the areas of opiate abuse prevention, expanded treatment resources, and opiate user health services and overdose prevention.

The recommendations will prioritize evidence-based and evidence-informed tools and interventions that will have the greatest impact on the problem.

The final report of the Task Force will be delivered to the sponsors by September 30, 2016.

Heroin & Opiate Addiction Task Force

- **Product:** Key short and long term (not exhaustive) recommendations
- **Priorities:** Actions for local implementation; greatest impact; avoid redundancy with other activities
- **Evidence-based** and **Evidence-informed** practices
- **Leverage other activities, partnerships** where appropriate
- **Resources** required

Heroin & Opiate Addiction Task Force – *Workgroups*

1. Primary Prevention

- **Prescriber Education**
- **Public Education (*Adult & Youth*)**
- **Secure Medication Return Program (Prescription Drug Take Back)**

2. Treatment Expansion & Enhancement

- **Treatment on Demand (*Abstinence-based & Medication Assisted*)**
- **Innovative Suboxone Prescribing Practices**

3. User Health Services & Overdose Prevention

- **Expand Access to Naloxone**
- **Safe Injection Facilities**