

KNOCK OUT OPIOID ABUSE DAY
LEARNING SERIES

SAVING LIVES – HARM REDUCTION
AND THE OPIOID CRISIS

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Harm Reduction
at the
New Jersey Department of Health

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WHAT IS HARM REDUCTION?

Harm reduction is a concept in public health and addictions counseling that acknowledges that while a person may not stop engaging in high-risk behavior, there is value in promoting behaviors that reduce overall harm.

The harm reducing behaviors mitigate the potential dangers and the health risks associated.

Examples:

Sunscreen
Seatbelts
Cigarettes
Speed Limits

Nutritional
Birth Control
Safer Sex
Designated Drivers
Naltrexone/Vivitrol

WHY HARM REDUCTION?

Research shows that harm reduction increases public health and wellbeing, without increasing drug use, violence, or crime.

According to the CDC; people with access to a syringe access programs are:

- less likely to die from an opioid related overdose
- five times more likely to stop substance use that causes them problems
- three times more likely to stop substance use altogether
- 50% less likely to acquire HIV or Hepatitis C

HARM REDUCTION IN NJ

- Legislative package signed by Governor Phil Murphy in Jan 2022 allows for the expansion of harm reduction services and efforts to end the NJ opioid epidemic.
- Three bills signed include:
 - 1) S3009/A4847 – **Authorizes distribution of sterile syringes** and certain support services to PWID
 - 2) S3493/A5458 – **Decriminalizes possession of syringe**; permits expungement of previous possession/distribution of hypodermic needle/syringe cases
 - 3) A798/S52 – **Establishes local overdose fatality review teams (OFRTs)**

HARM REDUCTION & NJDOH

Seven Existing Harm Reduction Centers funded by NJDOH.

Mix of both mobile units and brick & mortar locations.

Current and Proposed Harm Reduction Center (HRC) Locations in New Jersey



1. Paterson
2. Newark
3. Jersey City
4. Trenton
5. Asbury Park
6. Camden
7. Atlantic City

SERVICES AVAILABLE AT NJ HARM REDUCTION CENTERS

- **Trauma-informed** harm reduction education sessions
- **Harm Reduction Supplies**, education, and counseling
- **Safer Sex supplies**, education and counseling
- **Safe disposal** of injection equipment
- Overdose prevention education and access to **Naloxone and fentanyl test strips**
- **Referrals and linkages to drug treatment**, medical care, and social/mental health services
- **ARCH –Nurse Services**
- **Drop-in Center Services**
- Low-Threshold **Buprenorphine** Programs

SERVICES AVAILABLE AT NJ HARM REDUCTION CENTERS

Low Threshold Buprenorphine pilot program has been expanded to all seven Harm Reduction Centers in NJ.

Clients will have access to:

- Buprenorphine prescribed by a licensed provider
- Case management and peer support
- Referrals to additional substance use providers for continued treatment

MOVING FORWARD

The strategies outlined below represent a pragmatic, incremental approach to harm reduction expansion.

- The short-term expansion goal is to rapidly implement mobile harm reduction and naloxone distribution services in priority counties
- The intermediate goal is to transition mobile services and targeted naloxone distribution programs to comprehensive harm reduction centers
- The long-term goal is to establish at least one brick-and-mortar location in each of the state's 21 counties.
- Expansion activities are focused on rapid implementation, establishing client uptake of services and community acceptance, and seizing opportunities to expand services in phases.

THANK YOU!

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RUTGERS

Robert Wood Johnson
Medical School

New Jersey's Opioid Overdose Prevention Network (OOPN) Program

Partners

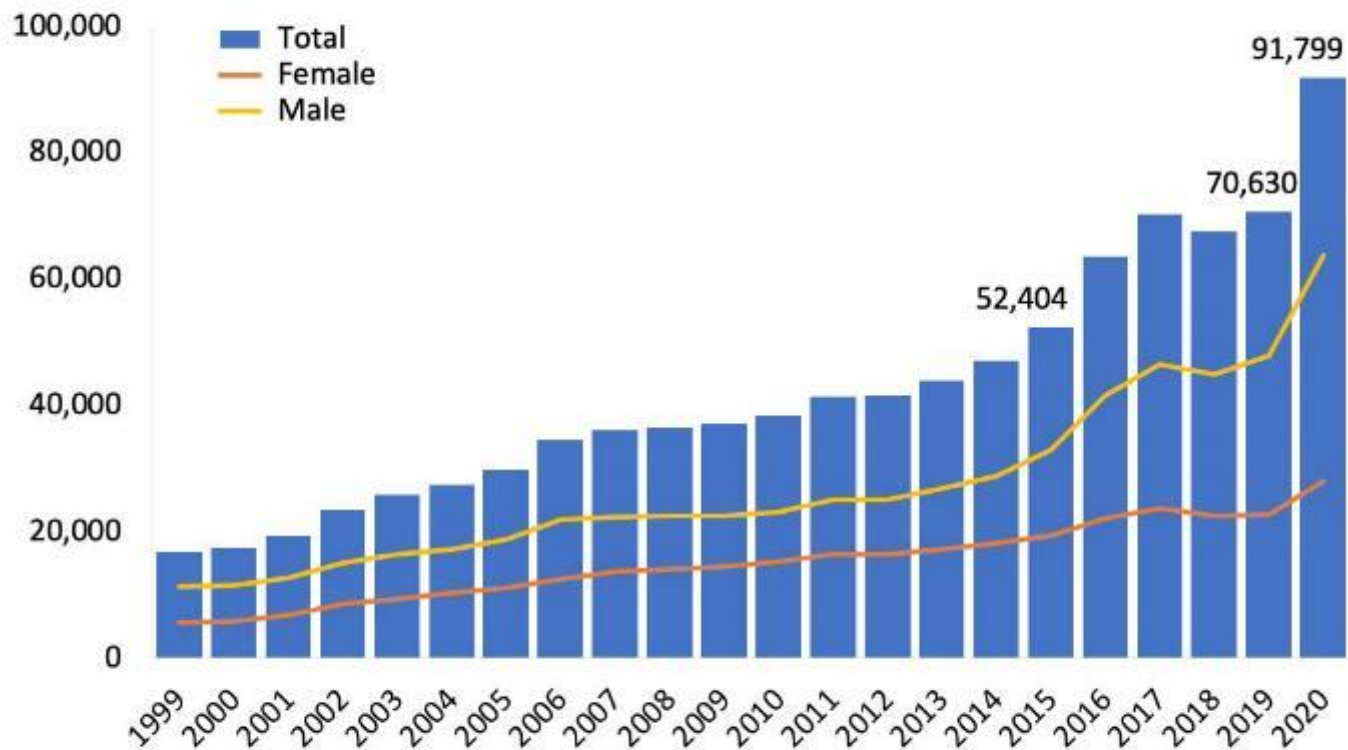
- Funded by NJ Division of Mental Health and Addiction Services
- New Jersey State Police Regional Operations & Intelligence Center (ROIC)
- Robert Wood Johnson Medical School

What We Do

- Prevent opioid overdose deaths
- Empower community members to respond to opioid overdose
- Provide free education and free naloxone kits
- Since 2017:
 - >17,000 participants trained
 - >18,000 naloxone kits distributed

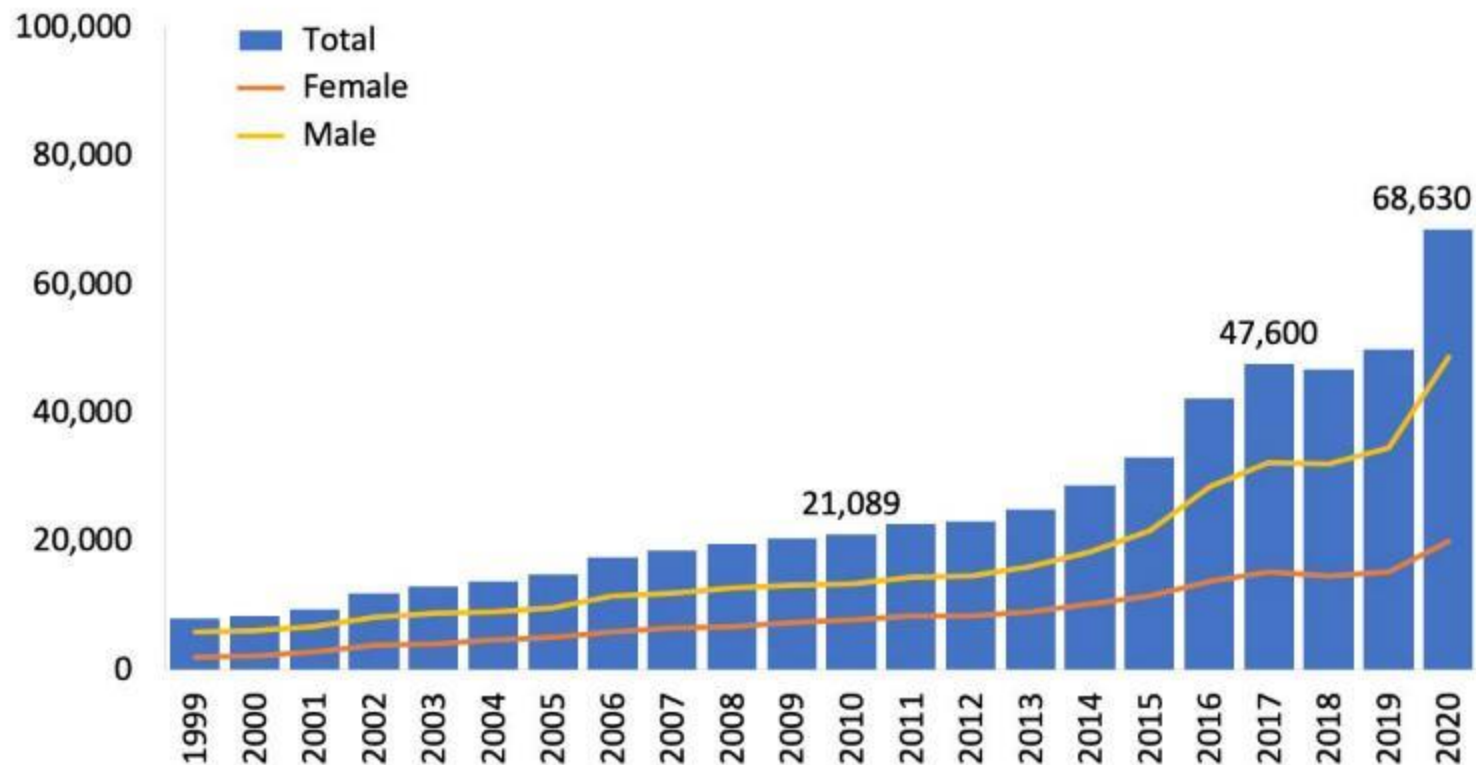
Opioid Use and Overdose Epidemic

**Figure 1. National Drug-Involved Overdose Deaths*
Number Among All Ages, by Gender, 1999-2020**



*Includes deaths with underlying causes of unintentional drug poisoning (X40–X44), suicide drug poisoning (X60–X64), homicide drug poisoning (X85), or drug poisoning of undetermined intent (Y10–Y14), as coded in the International Classification of Diseases, 10th Revision. Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2020 on CDC WONDER Online Database, released 12/2021.

Figure 3. National Overdose Deaths Involving Any Opioid, Number Among All Ages, by Gender, 1999-2020



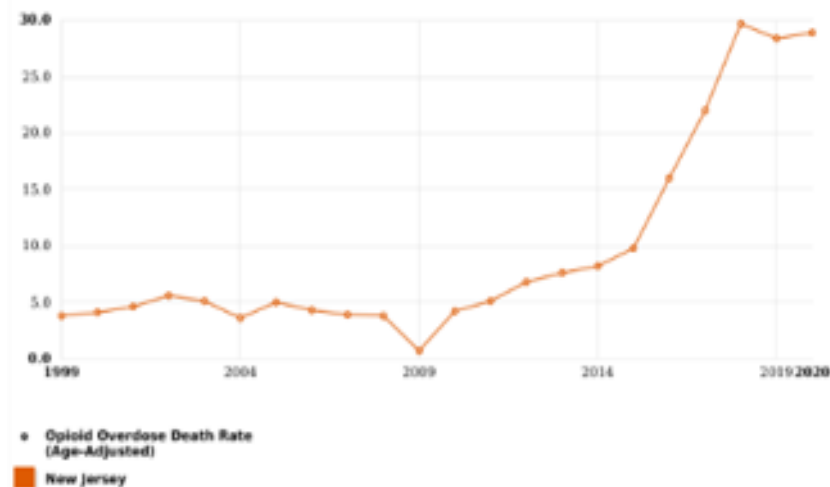
*Among deaths with drug overdose as the underlying cause, the any opioid subcategory was determined by the following ICD-10 multiple cause-of-death codes: natural and semi-synthetic opioids (T40.2), methadone (T40.3), other synthetic opioids (other than methadone) (T40.4), or heroin (T40.1). Source: Centers for Disease Control and Prevention, National Center for Health Statistics. Multiple Cause of Death 1999-2020 on CDC WONDER Online Database, released 12/2021.

Opioid Overdose Death Rates per 100,000 Population (Age-Adjusted) - 2020

Location	Opioid Overdose Death Rate (Age-Adjusted)
1. West Virginia	70.0
2. District of Columbia	45.3
3. Delaware	43.9
4. Maryland	40.4
5. Kentucky	40.2
6. Ohio	40.1
7. Tennessee	36.7
8. Connecticut	35.9
9. Maine	34.0
10. Pennsylvania	32.4
11. Rhode Island	32.0
12. Massachusetts	30.6
13. Indiana	29.9
14. New Jersey	28.9
15. South Carolina	28.6



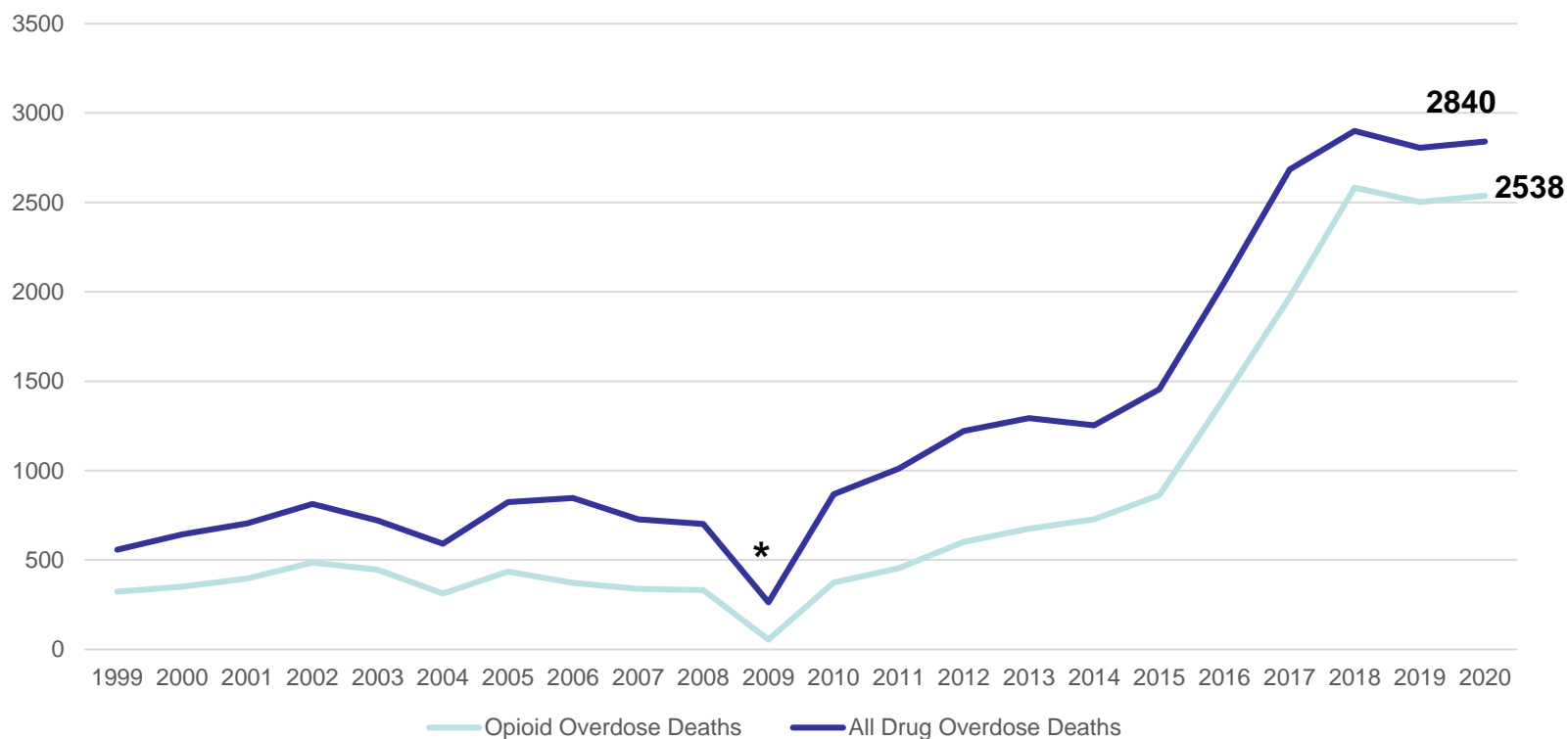
Opioid Overdose Death Rates and All Drug Overdose Death Rates per 100,000 Population (Age-Adjusted): Opioid Overdose Death Rate



SOURCE: Kaiser Family Foundation's State Health Facts.

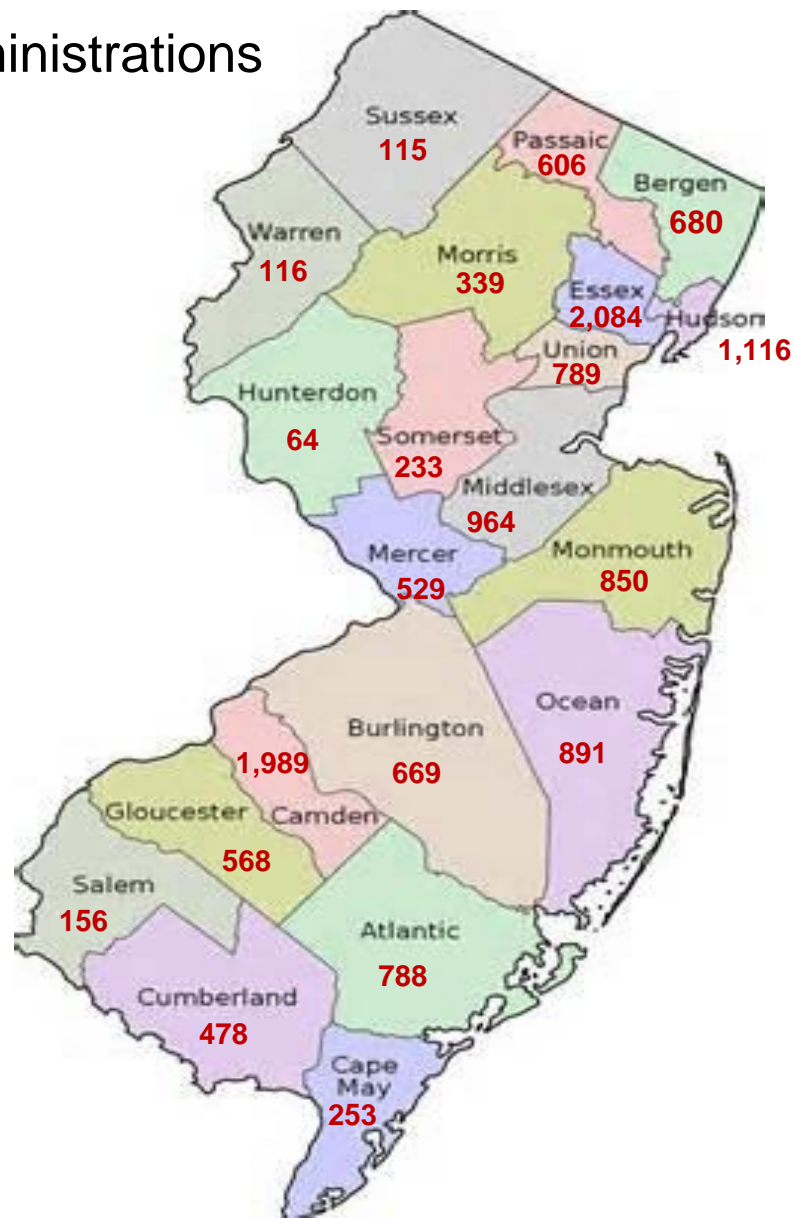
- In both 2019 and 2020, there were over 3,000 suspected Drug Related Deaths in New Jersey.

Number of drug and opioid-involved overdose deaths in New Jersey 1999-2020

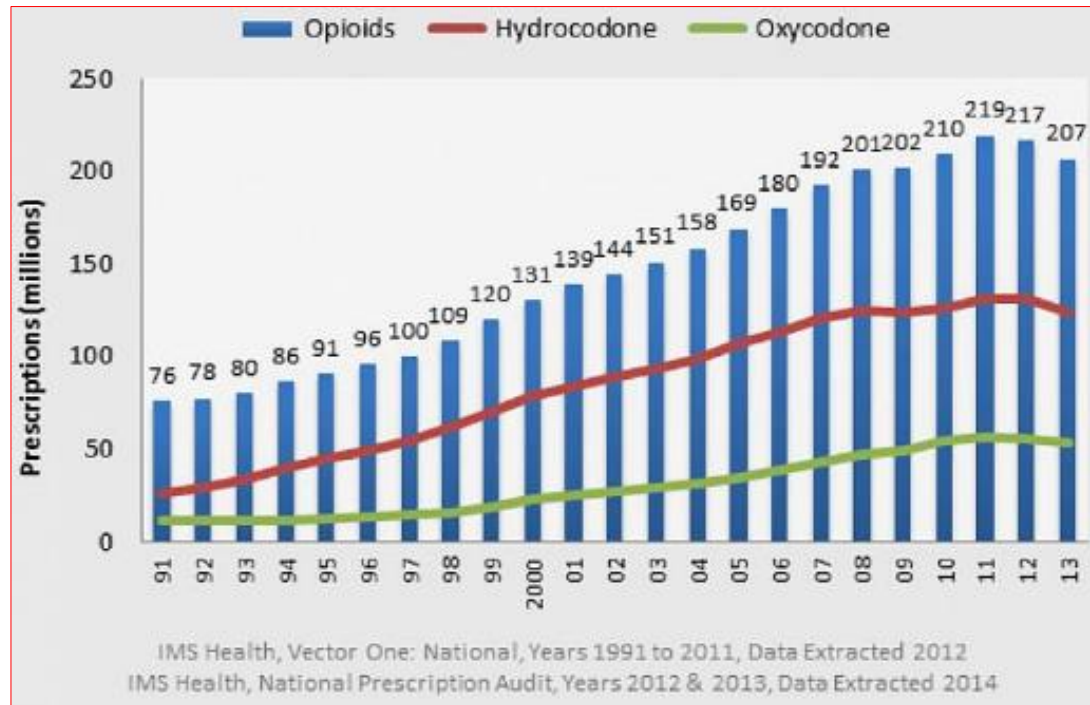


2021 NJ Statewide Naloxone Administrations

County	NJ Law Enforcement & Emergency Medical Services
Atlantic	788
Bergen	680
Burlington	669
Camden	1,989
Cape May	253
Cumberland	478
Essex	2,084
Gloucester	568
Hudson	1,116
Hunterdon	64
Mercer	529
Middlesex	964
Monmouth	850
Morris	339
Ocean	891
Passaic	606
Salem	156
Somerset	233
Sussex	115
Union	789
Warren	116
Unknown	0
Total	14,382



Opioid Prescriptions

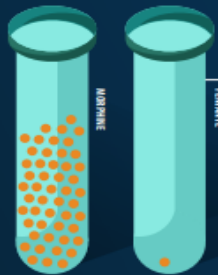


- New Jersey = 9.2 Million People (2021)
- New Jersey = 3.5 Million Prescriptions of Opioids Dispensed (2021)

Opioid prescription pills → heroin

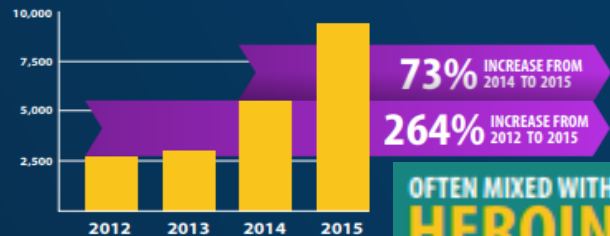
- Pills: Prescribed, medicine cabinets, family friends, street
- Tolerance and dependence occurs
- Need doses to relieve cravings and withdrawal symptoms
- Use several times a day to prevent withdrawal
- Heroin is cheaper than prescription drugs
- 2010, new formulation: difficult to solubilize and crush for injection or snorting
 - Pill abuse fell from 35.6% to 12.8%
 - Heroin use, however, increased as a result
- Heroin now mixed with stronger opioids (e.g., fentanyl)

FENTANYL: Overdoses On The Rise



**50-100x
MORE POTENT
THAN MORPHINE**

SYNTHETIC OPIOID DEATHS ACROSS THE U.S.



**73% INCREASE FROM
2014 TO 2015**

**264% INCREASE FROM
2012 TO 2015**

**OFTEN MIXED WITH
HEROIN
OR COCAINE
WITH OR WITHOUT
USER KNOWLEDGE**



(2mg of Fentanyl – DEA)

<https://www.cdc.gov/drugoverdose/opioids/fentanyl.html>

Source:
<https://www.cdc.gov/drugoverdose/opioids/fentanyl.html>

Carfentanil
synthetic opioid

10,000 times

stronger than morphine

**100
times**

more potent than fentanyl




Individuals struggling with an opioid use disorder may present the following:

- Using opioids in large amounts
- Not being able to cut down or not use it
- Spending a lot of time trying to obtain the substance
- Cravings
- Use even though it negatively affects their work, school, social obligations
- Use even though issues get worse
- Not partaking in social or usual activities
- Using despite dangerous consequences
- Tolerance: Needed more of the substance to reach the same effect
- Withdrawal Symptoms: Symptoms from reducing or stopping


Some Risk Factors for an Opioid Overdose

- Reduced tolerance - Using after recent release from
 - Incarceration
 - Mandated treatment
 - Detoxification treatment
- Using alone
- Using larger amounts or increased drug purity than usual
- Transition to injecting
- Using opioids with other substances
- Have an underlying medical condition
- History of using opioids









Intoxication vs Overdose




OPIOID INTOXICATION




Signs and Symptoms







EUPHORIA 	CONSTRICTED PUPILS 
CONSTIPATION 	LOW BODY TEMPERATURE 
VOMITING 	SLOWED BREATHING 
DROWSINESS 	DECREASED AWARENESS 



OPIOID OVERDOSE



Signs and Symptoms

INABILITY TO WAKE UP OR RESPOND AFTER VERBAL AND PHYSICAL ATTEMPTS 	SLOW, SHALLOW BREATHING 
CHOKING OR GURGLING SOUNDS 	PINPOINT PUPILS 
COLD, CLAMMY SKIN, BLUE FINGERTIPS AND LIPS 	SLOW HEARTBEAT/LOW BLOOD PRESSURE 

If overdose suspected:

First **CALL 911**

Then:

- Rescue breathing
- Naloxone administration

Some may be afraid to call 911, but...

**Opioid Antidote and Overdose Prevention Act
New Jersey Legislation - IMMUNITY FROM ARREST**

**“Good Samaritan” provision affords
immunity from arrest for use/simple
possession offenses to the overdose
victim, and to the person who sought
medical assistance**

Naloxone

- Also called “Narcan” and “Evzio”
- Opioid antagonist, binds to opioid receptors
- Safe and effective
- Not addicting or sedating
- Has no effect if person does not have opioids in their system
- Reverses overdose, individual wakes up and continues to breathe
- Administration is protected by the “Good Samaritan” statute
- Acts within 2-3 minutes. At 3 minutes if there is no response, a second dose can be provided
- It wears off in 20-90 minutes



Narcan (naloxone HCl) Nasal Spray

CALL FOR HELP! (Dial 911)

Use NARCAN Nasal Spray (naloxone hydrochloride) for known or suspected opioid overdose in adults and children.

Important: For use in the nose only.

Do not remove or test the NARCAN Nasal Spray until ready to use.

1 Identify Opioid Overdose and Check for Response

Ask person if he or she is okay and shout name.

Shake shoulders and firmly rub the middle of their chest.

Check for signs of opioid overdose:

- Will not wake up or respond to your voice or touch
- Breathing is very slow, irregular, or has stopped
- Center part of their eye is very small, sometimes called “pinpoint pupils”

Lay the person on their back to receive a dose of NARCAN Nasal Spray.



If not breathing, begin rescue breathing

2 Give NARCAN Nasal Spray



KEY STEPS TO ADMINISTERING NARCAN® NASAL SPRAY:*

PEEL



Peel back the package to remove the device. Hold the device with your thumb on the bottom of the plunger and 2 fingers on the nozzle.

PLACE



Place and hold the tip of the nozzle in either nostril until your fingers touch the bottom of the patient's nose.

PRESS



Press the plunger firmly to release the dose into the patient's nose.

3

Call for
emergency
medical
help,
Evaluate,
and
Support

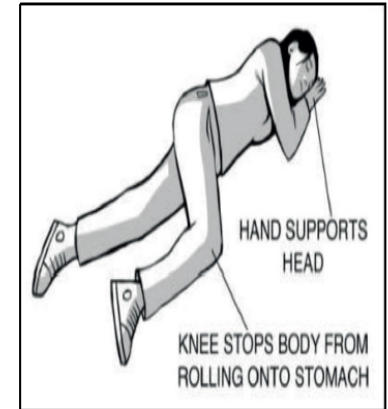
Get emergency medical help right away.

Move the person on their side (recovery position)
after giving NARCAN Nasal Spray.

Watch the person closely.

If the person does not respond by waking up, to voice or touch,
or breathing normally another dose may be given. NARCAN Nasal Spray may be
dosed every 2 to 3 minutes, if available.

**Repeat Step 2 using a new NARCAN Nasal Spray to
give another dose in the other nostril.** If additional NARCAN
Nasal Sprays are available, repeat step 2 every 2 to 3 minutes until the person
responds or emergency medical help is received.



Post reversal: withdrawal and re-overdose risk

- Opioids last longer in the body than naloxone, re-overdose is possible
 - Need to be monitored in hospital
- Withdrawal symptoms
 - Person may feel sick and want to use right away
- Person may have emotional reaction (e.g., anger, fear, frustration, confusion)

Key take away:

- **CALL 911**
- **Make sure victim receives medical attention after experiencing an overdose**

Naloxone Access

- Free distribution programs (like this)
- Organizations can order directly from pharma at discounted prices
- Individuals can obtain at pharmacies without a prescription
 - Approx. \$145 for nasal spray and \$45 injection (without prescription)
 - Less with prescription (covered by insurance)
 - Availability varies by pharmacy

Kits

- Pouch
 - One box with two 4mg nasal spray bottles of naloxone (2 doses)
 - Nitrile Gloves
 - Face shield (for rescue breathing)



PREVENT OPIOID OVERDOSE, SAVE LIVES

In case of overdose, use naloxone

FREE TRAINING AND NALOXONE NASAL SPRAY KITS

RWJMS and the Division of Mental Health and Addiction Services
have partnered together to offer the following **FREE** activities and
services:

On-site Trainings

Make an appointment for your free onsite training and naloxone kits today!

Distribution of FREE naloxone kits for training attendees, including family members, friends, professionals and individuals who are at risk or could be in the presence of someone who is at risk for an overdose

Trainings of overdose death prevention strategies including the appropriate administration of naloxone and rescue breathing

Able to schedule trainings on short notice to prevent opioid overdoses in communities most in need

If you have any questions regarding any of these services, contact:

Rutgers-Robert Wood Johnson Medical School
Division of Addiction Psychiatry
732.235.4341
PreventOverdose@rwjms.rutgers.edu

Questions or Concerns

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