

# Medication/Drug Overdoses North Carolina

## LHD Legal Conference

April 23, 2014



North Carolina  
Injury & Violence   
 PREVENTION Branch

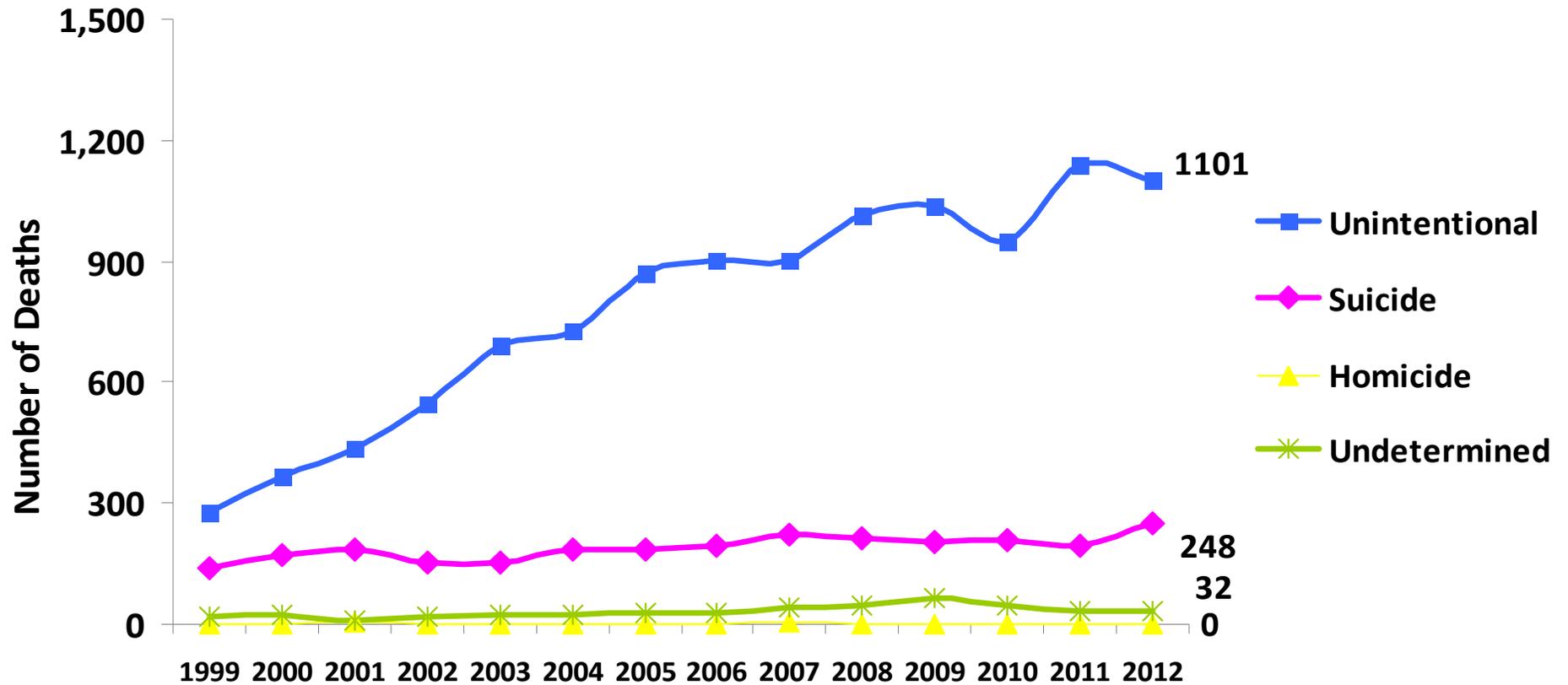
## Agenda

- Brief North Carolina Background/History
  - Overdose problem
  - Creation of NC's Prescription Monitoring Program: the Controlled Substances Reporting System (CSRS)
  - Role of naloxone

# North Carolina Deaths

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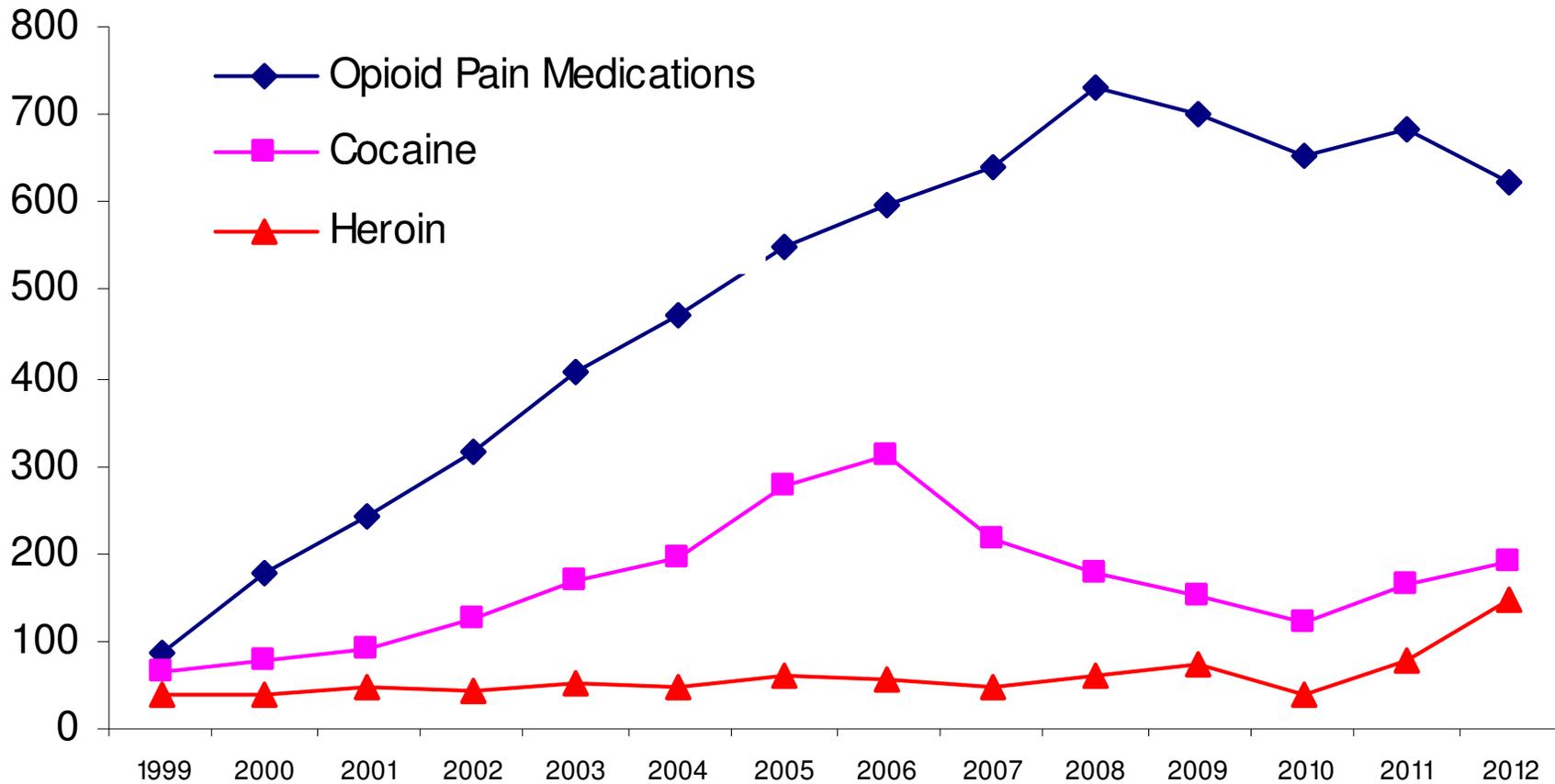
## Poisoning Deaths: N.C., 1999-2012



- In 1999, the number of unintentional poisoning deaths was 279; in 2012, the number of deaths was 1,101, an increase of over 300%.

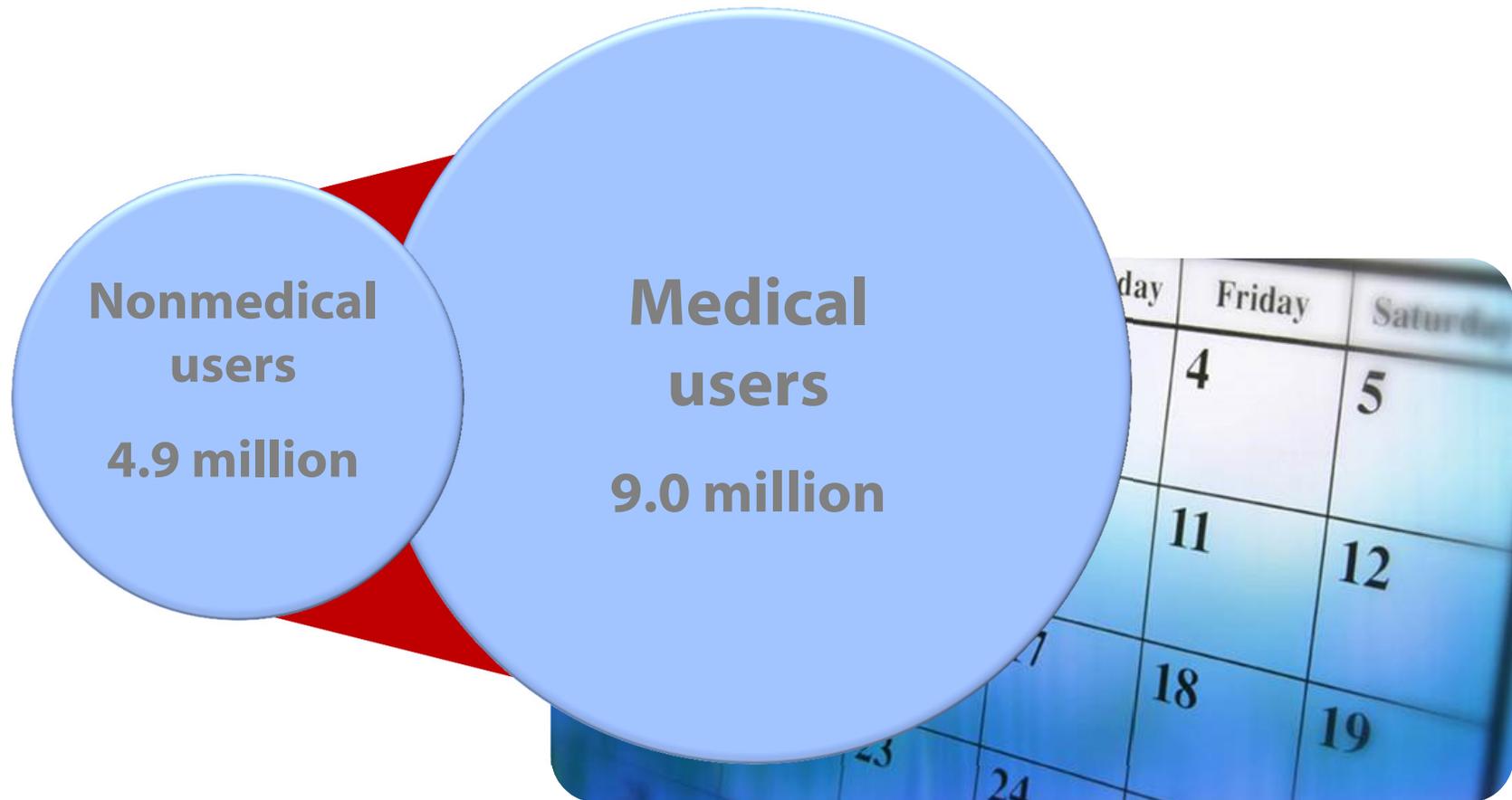
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## Unintentional Poisoning Deaths by Drug Type and Year: N.C. Residents, 1999-2012



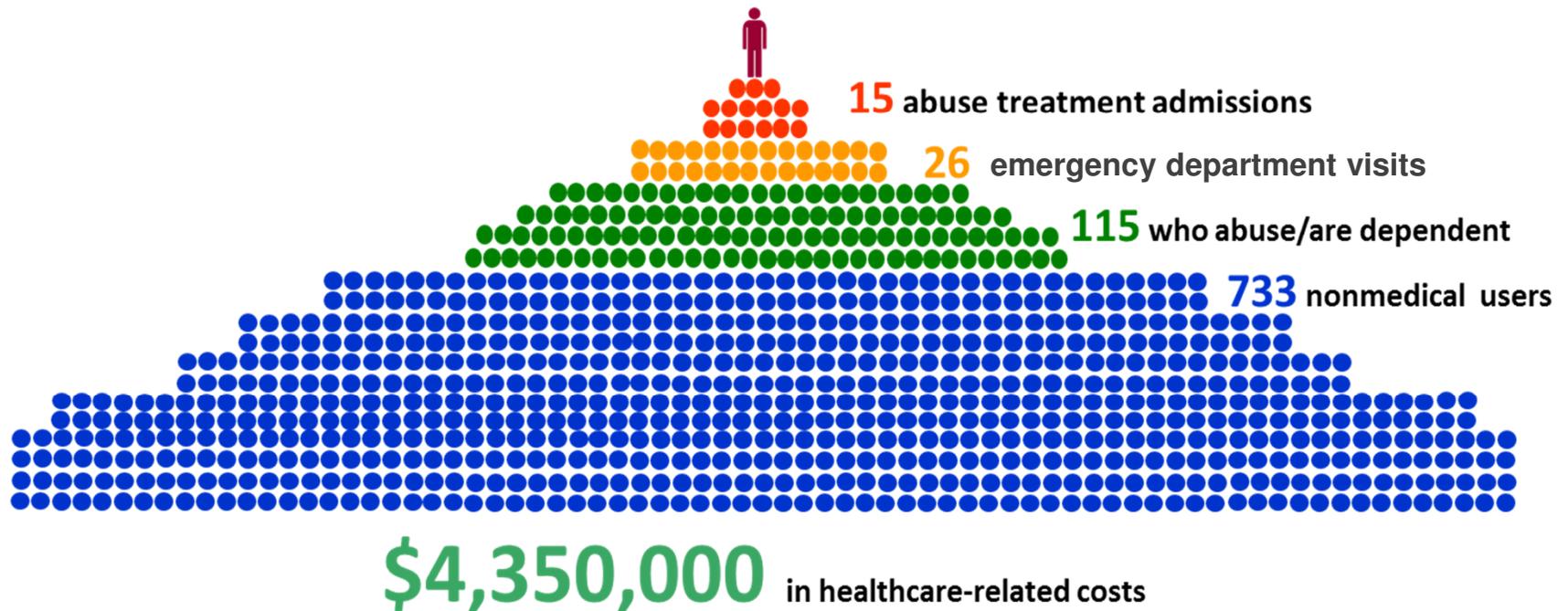
Note: categories are not mutually exclusive

# Opioid analgesics users in the past month

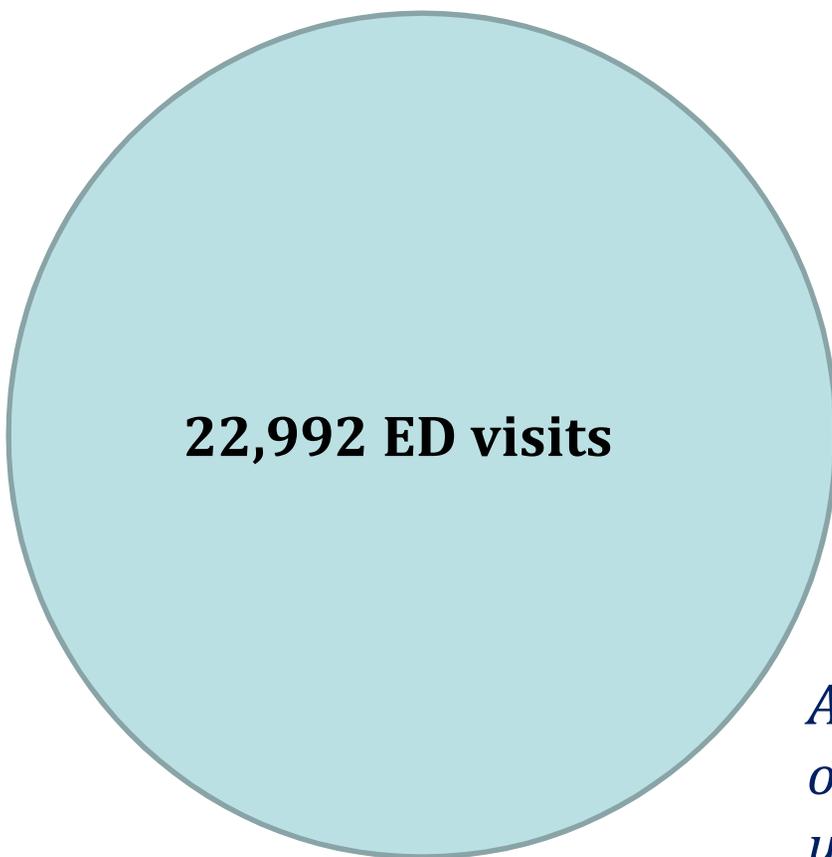


# Overdose deaths are the tip of the iceberg

For every **1** opioid overdose death in 2010 there were...



# Deaths vs. ED visits for drug overdose, NC 2011



**1,222 deaths**

The number of ED visits for overdose dwarfs the number of overdose deaths

*Average NC county has about one overdose death per month but just under one overdose ED visit per day*

# **N.C. Division of Public Health**

- 2000: Routine surveillance**
- 2002: CDC Epi-Aid on Poisoning**
- 2003: Task Force DPH and DOJ**
- 2004: Task Force Recommendations**
- 2005-2007: PMP (NC CSRS)**
- 2008: Enhanced surveillance**
- 2009: Partner with UNC IPRC**

# Legislative Update

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# S.B. 222 Revise Controlled Substances Reporting

Signed into law *June 19, 2013*

- 48 Hour reporting by all physicians dispensing controlled substances
- Up to 3 days to report dispensing in CSRS
- Method of Payment recorded in CSRS
- Unsolicited Alerts to practitioners of questionable patient activity
- Reporting to the appropriate NC licensing board questionable practitioner prescription practices.
- Delegate Accounts
- Increased fines for disclosing CSRS data.
- Law enforcement access to CSRS data.



Primary Bill Sponsors  
  
Sen. Austin M. Allran (Rep)  
Alexander, Catawba Counties



Rep. Craig Horn (Rep)  
Union County

# S 20 Good Samaritan/Naloxone Access

Signed into law *April 9, 2013*

- Limited Immunity from prosecution when acting in good faith to seek medical assistance for a drug-related overdose.
  - Covers victim and reporter of overdose
- Limited Immunity from prosecution for prescribing and administering the “opioid antagonist” Naloxone.
- Limited Immunity from prosecution for underage alcohol overdose
  - Covers victim and reporter of overdose



## Primary Bill Sponsors

Sen. Stan Bingham (Rep)  
Davidson, Montgomery



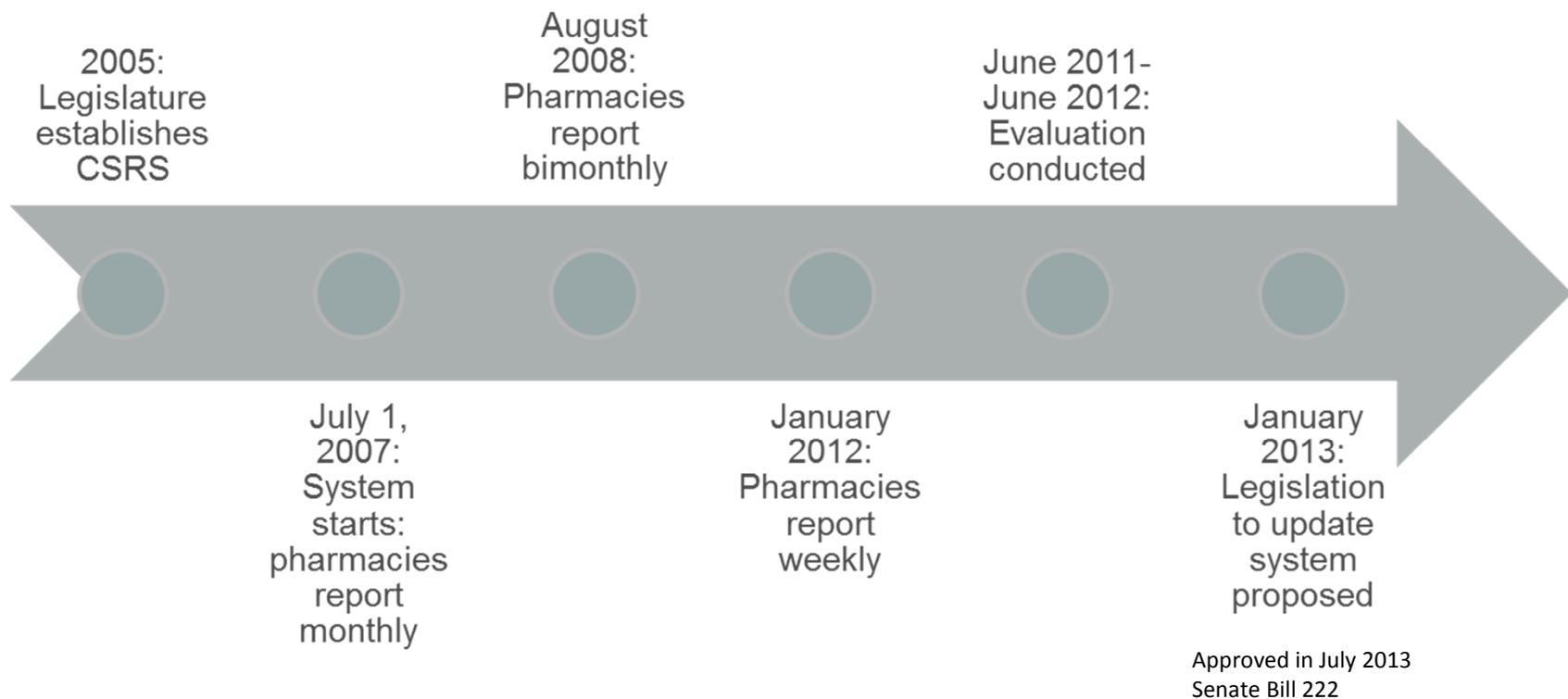
Sen. Austin M. Allran (Rep)<sup>12</sup>  
Alexander, Catawba

# N.C. Controlled Substance Reporting System (CSRS)

**North Carolina's Prescription Drug Monitoring Program (PDMP), housed at the Division of Mental Health, Developmental Disabilities and Substance Abuse Services**

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# NC CSRS Timeline



# Controlled Substances Reporting System (CSRS)

In 2013, **Senate Bill 222**:

- Allows delegate accounts with approval by DHHS
- Requires 72-hour reporting by pharmacies (but encourages 24)
- Physician-dispensed medications now reported
- Veterinarians and < 48 hour supplies exempt
- Allow alerts (unsolicited reports) to physicians and pharmacists
- Gathers payment source (including cash)
- Allows SBI Diversion/Environmental Crimes Unit to share with other SBI
- Allows reports to law enforcement with court order
- Allows alerts to N.C. Medical Board

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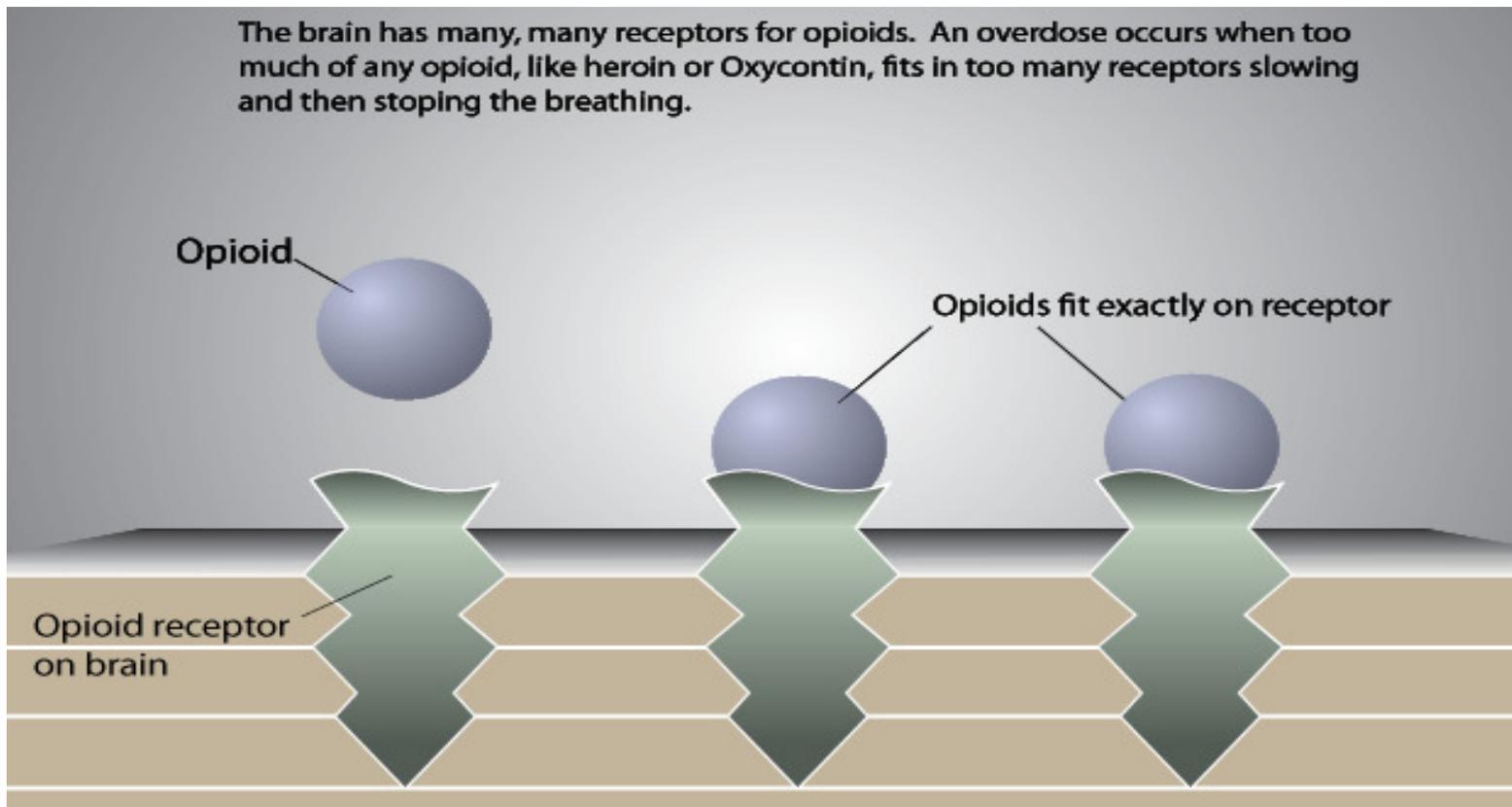
# CSRS Data Overview

- Nearly 115,000,000 prescriptions in the database (started July 1, 2007)
- Approximately 19 million per year
- Over 5,700,000 queries have been made of the system
- Over 18,700 dispensers and practitioners are currently registered to use the system
- Average of over 5,500 queries per day

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# What is Naloxone?

# overdose?



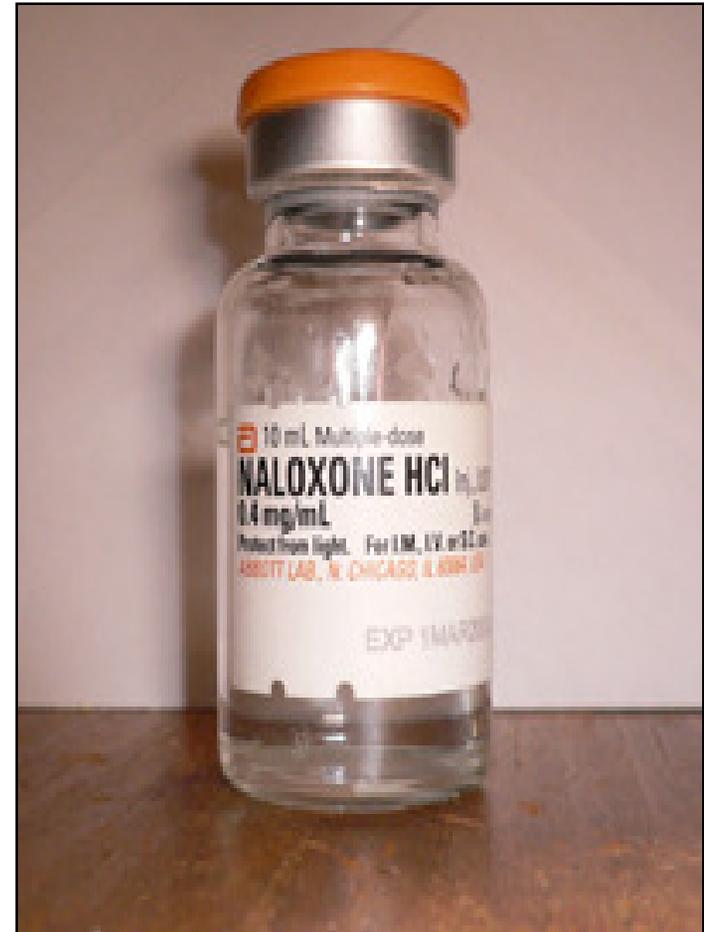
5/2/2014

NC Harm Reduction Coalition-cps

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# The antidote to fatal respiratory depression: Naloxone HCL (Narcan®)

- Mu-opioid receptor antagonist
- Prescription; not a controlled substance
- Can't get high from it (no potential for abuse)
- Decades of experience
- Uses: anesthesia & emergency
- Quick acting, works 30-90 minutes.
- Generic (inexpensive)
- Delivered via injection (IM, SC, IV) or nasal

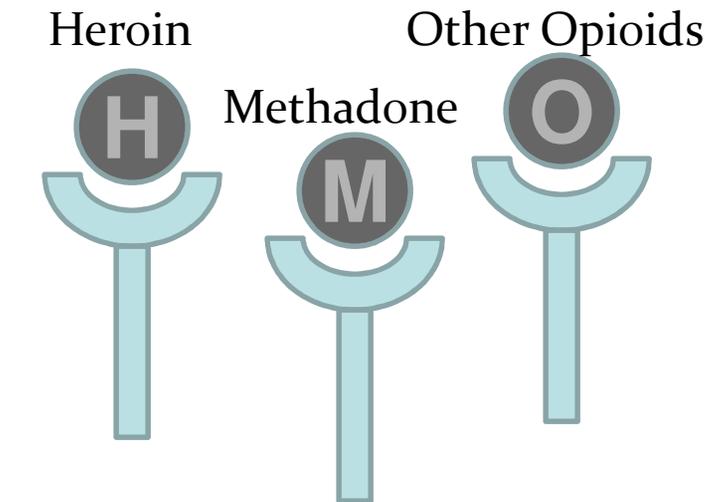


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# Naloxone (N) in the Brain

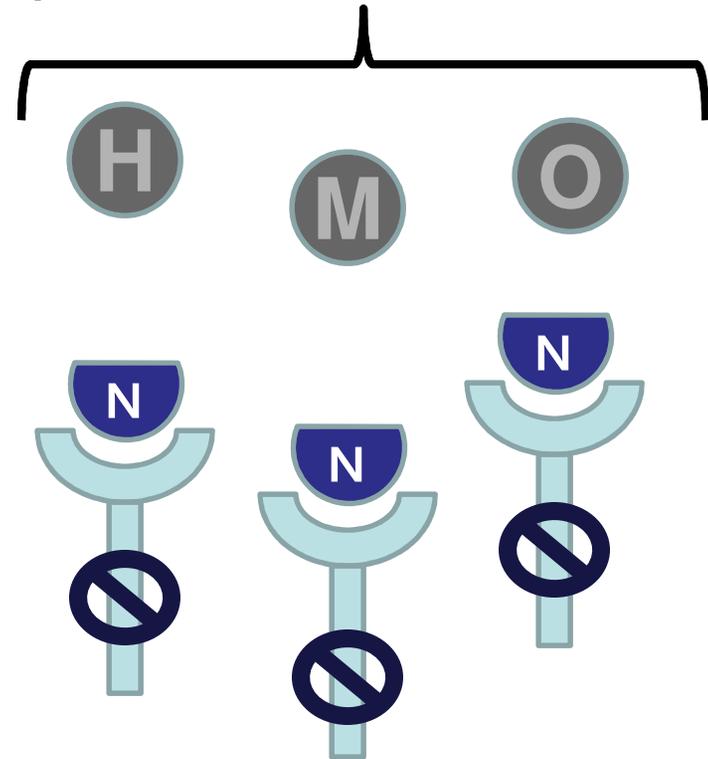
Adapted from N. Dasgupta, 2008

*opioid receptors activated by heroin and prescription opioids*



**Pain Relief**  
**Pleasure**  
**Reward**  
**Respiratory Depression**  
**Death**

*opioids broken down and excreted*



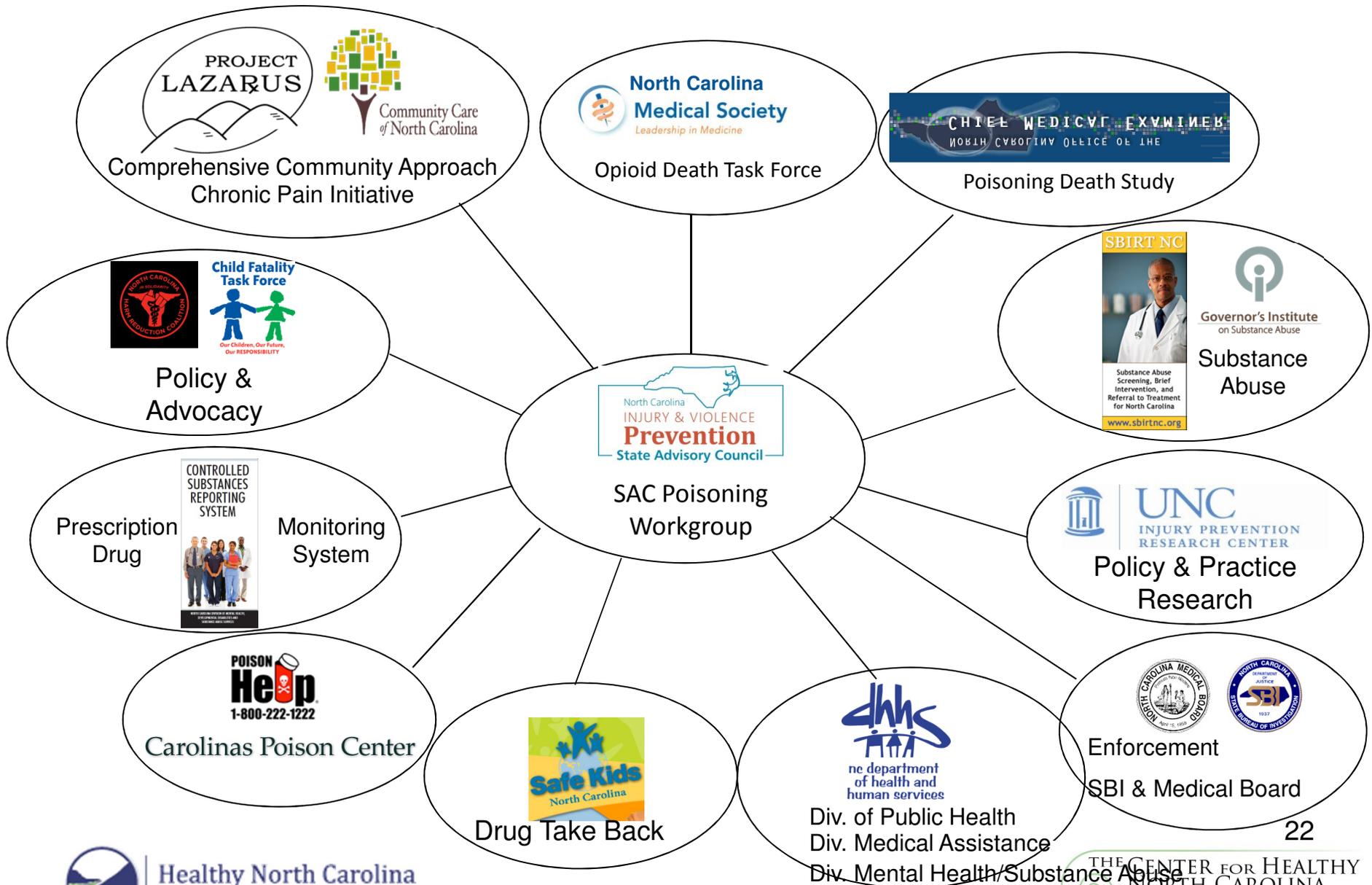
**Reversal of Respiratory Depression**  
**Opioid Withdrawal**

# Coordinating with Many Partners

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# North Carolina Injury and Violence Prevention Branch

Epidemiology, Policy, Partners, Community



# NC State Advisory Council (SAC) on Poisoning/Overdose

- Public Health Policy Recommendations
  - CFTF: CSRS and Good Sam/Naloxone
- Partnership summaries
  - Updated website
- Fact Sheet
- Communications, Research and Policy
- Ad hoc groups around specific issues

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# Key Functions

- Epidemiology/Data collection (DPH, CSRS, OCME)
- Direct/Clinical Service (CPC, CSRS, Medical Society, DMA)
- Research (IPRC, DPH)
- Policy (CFTF, PL/CCNC)
- Education and Community Programming (GI, PL/CCNC, Safe Kids)
- Enforcement (SBI, Medical Board)

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# ¿Preguntas?

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