



The Changing Overdose Crisis in Central Florida:

What can Leaders do to Save Lives?

1)The widespread expansion of overdose reversal agents including naloxone with an emphasis on the need for stronger or multiple doses.

The Project Opioid Central Florida Community Needs Assessment found that fentanyl was highly prevalent in the drug supply of Central Florida. This means that many Floridians may be taking opioids and not even know it. Naloxone, which is often times referred to as an overdose reversal agent, can quickly revive someone who is overdosing on an opioid and is an essential tool to curb overdose deaths²².

Naloxone in its nasal form is easy to administer; and has been proven to be a powerful tool in the hands of law enforcement, active drug users, and the community at large¹². However, with the infiltration of fentanyl into so many street drugs, a more powerful formula may be needed. Studies show that on average, 3.6mg of naloxone is needed to revive someone during a fentanyl overdose and the most commonly available nasal formulation in 4mg, there is room for improvement by increasing the dosage in

the spray¹². Not only can 4mg not be enough, but there are analogues killing hundreds of people a year that are even stronger than fentanyl¹⁹ and it is important that the community is prepared for these stronger, deadlier drugs.

Not only are stronger formulations needed and being developed, but everyone should also carry naloxone products. Anyone can witness an overdose, with an increasing number of overdoses occurring outside people's residencies²⁴. Naloxone should also be in every first aid kit and affordable at pharmacies. Anyone can be a hero when it comes to stopping an opioid overdose if they have naloxone. It takes less than one minute to learn how to use naloxone nasal formulations and it is completely harmless in the body. Far from enabling drug use, some research has shown that naloxone use decreases drug behaviors²⁵.

WHAT IS NALOXONE?

Naloxone is a medicine that rapidly reverses an opioid overdose. It is an opioid antagonist. This means that it attaches to opioid receptors and reverses and blocks the effects of other opioids. Naloxone can quickly restore normal breathing to a person if their breathing has slowed or stopped because of an opioid overdose.

Naloxone is known by the brand name Narcan and is available for free at www.projectopioid.org

2) Advocacy and education on the changing nature of the crisis for a wide range of groups including physicians, Gen Z, policy makers, and community leaders.

WHAT IS THE EVERYONE CAMPAIGN?

The Everyone Campaign will focus on overdose awareness and advocacy in 3 key areas

- Education about the new dangers of fentanyl and its presence in street drugs
- Ways people can get help if they are struggling
- The way that leaders can get involved in the crisis

It is clear from the Central Florida Community Needs Assessment that the overdose crisis has indeed changed from just a few years ago, and Central Florida is no longer dealing with just the aftermath of pill mills and over prescriptions, but rather a total shift in the nature of the crisis^{9,11}. The issue has evolved and become even deadlier. It is essential that not only physicians and policy makers have a complete understanding of the crisis, but that those at risk for an overdose understand the risks associated with their decisions.

A wide-ranging advocacy and education campaign is needed to educate those in a position to make change on the issue of overdoses. If those in these positions of power do not have the education on the crisis happening in their community, they will be unable to use their power to effect change and save lives. In fact, those in power with bad information can unknowingly worsen the crisis and think they are making a positive impact.

It is also important to educate and empower young people, especially casual drug users. The data shows that drugs that used to be safe to use recreationally are now cut with deadly fentanyl¹⁴ and Gen Z is overdosing on drugs that were at one time considered “party drugs”. Messaging focusing on the importance of naloxone, knowing what is in their drugs, and how to get help is key to saving this vulnerable generation.

EVERY  ONE

3) Ensuring that those at risk of overdose have access to evidence-based treatment options, especially at vulnerable points. Such as after overdose, leaving jail, and/or leaving a treatment facility.

The Community Needs Assessment clearly outlined just how widespread opioid use is in the Central Florida region. Not only are a record number of individuals overdosing and dying from illicit fentanyl, but national estimates suggest that over 77,000 people in the tri-county region have misused a prescription pain reliever or heroin in the last year. It is essential that community leaders ensure that individuals at risk for overdose have access to FDA approved medications.

There are effective treatments for those with opioid addictions, including what is known as Medication Assisted Treatment (MAT) or Medications for Opioid Use Disorder (MOUD)²⁶. These are safe drugs that reduce the chance of overdosing, reduce cravings, and even prevent the positive feelings associated with drug use²⁶. These medications are essential to helping people who are currently using from

relapsing or being unable to live a productive life. These drugs can provide stability to families who are broken by addiction.

The use of medication assisted treatment could not be more important than at transitions of care when individuals are at their most vulnerable. For an overdose victim, who is transported to the Emergency Room by ambulance, an opportunity to begin an MAT regimen could save his or her life²⁷. Other vulnerable transitions include when an individual leaves incarceration or a treatment facility where their actions have been monitored for a long time²⁸. Beginning these individuals on an evidence-based treatment plan like MAT has the potential to save lives. It is the obligation of community leaders to ensure that this gold standard of treatment is not only available, but accessible to everyone

WHAT IS MAT?

Medication-assisted treatment (MAT) is the use of medications in combination with counseling and behavioral therapies, which is effective in the treatment of opioid use disorders (OUD) and can help some people to sustain recovery.

There are three drugs approved by the FDA for the treatment of opioid dependence: buprenorphine, methadone, and naltrexone.

4) Engage those most at risk, including the minority community at the neighborhood level

Since 2020, there has been great concern over the rising death toll from overdoses deaths in minority communities in central Florida. Specifically, the disproportionate increase in overdose deaths in the black community (Kyle- I need citation of initial data study) as well as the continued rise in the rural communities in Central Florida. The most recent Community Needs Assessment found that these trends are continuing into 2021 with deadly implications. Engaging and empowering leaders at the community level offers an entrance into these communities to provide education and outreach.

Engaging leaders on the inside and providing them with the tools to help their communities is an evidence-based approach to providing outreach and education. Leaders can provide education on the science behind addiction and dependence, helping their communities understand that this is not a moral failing, rather a health condition that needs treatment and care. Breaking that stigma and providing a trusted ear to communities can be the greatest gift a leader can give. Understanding and embracing medications

WHAT IS THE GOOD SAMARITAN LAW?

Good Samaritan laws are policies that provide legal protections for individuals who call for emergency assistance (such as 9-1-1) in the event of a drug overdose. This may include protection from arrest and/or prosecution for crimes related to drug possession, drug paraphernalia possession, and other crimes. These laws are designed to encourage people to summon emergency assistance if they experience or witness a drug overdose

for addiction treatment and helping communities understand Good Samaritan laws can go a long way in helping rural and ethnic minority communities overcome this addiction crisis.

As overdoses continue to rise in the minority, particularly Black, community, a strategic approach must be taken to stem the tide of overdoses in these communities. No powerful outsider can expect to enter the community broadcasting the benefits of MAT and the miracle properties of naloxone and expect to make a difference in these communities. Every person must be reached at the neighborhood level by trusted figures in the community, whether it be meeting them where they work or where they worship.



5) Provide interventions for those addicted to prescription opioids

The most recent data shows that the overdose crisis of 2021 is not your mother's opioid crisis marked by a proliferation of prescription pills prescribed by nefarious physicians. We have turned the corner in so many unfortunate ways, but we have left behind some unanswered questions. What about those people for whom opioids worked? What about those patients that are not dependent on these medications? Where are they to go and what are they to do when their prescriptions are suddenly discontinued?

THE WAVES OF THE OPIOID CRISIS

This rise in opioid overdose deaths can be outlined in three distinct waves.

The first wave began with increased prescribing of opioids in the 1990s, with overdose deaths involving prescription (natural and semi-synthetic opioids and methadone) increasing since at least 1999.²

The second wave began in 2010, with rapid increases in overdose deaths involving heroin.³

The third wave began in 2013, with significant increases in overdose deaths involving synthetic opioids, particularly those involving illicitly manufactured fentanyl.^{4,5,6}

The response of policymakers to the first wave of the crisis was to crack down on prescriptions by limiting supply and making it harder to prescribe these drugs. These actions had unintentional consequences. People who are in legitimate need of powerful painkillers are often unable to access them. Policymakers removed drugs from a generation of people who were dependent on the drugs, but not misusing them, and left them with no alternative. Finally, the crackdown drove prescription users to street drugs that are more likely to result in death²⁹. This is clearly seen when we look at a 67% decrease in prescriptions with a massive increase in overdoses^{9,11}. The crackdown was not the answer but there is still a large group of people who are addicted to these painkillers.

There are resources for these individuals, and steps that leaders can take to ensure that they get the treatment that they need^{26,28}. MAT is an option to reduce cravings and blunt any euphoric effects from these drugs²⁶. One answer that isn't the solution: continue restricting the supply that results in driving addicted people to street substances, which are often laced with fentanyl. "One pill can kill." Someone who is addicted to

OxyContin who is driven to the streets may think they are buying a prescription from a dealer but that dealer, in a cost saving move, has produced a fentanyl pill, potentially instantly killing the buyer²⁹.

Often, these prescription users are a generation older than other overdose victims⁹. They've used prescriptions potentially for decades. If they've been driven to street prescriptions in the past, they may have been consuming legitimate pills²⁹. Now the pills are contaminated with fentanyl, more deadly by 100x¹⁴.