Bringing Opioid Awareness and Overdose Prevention to College Campuses

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Objectives

1. Recall opioid overdose trends since 1999
2. Describe the role of naloxone in opioid overdose prevention
3. Discuss the overdose prevention & recovery model at The University of Texas at Austin
4. Plan for implementation of harm reduction strategies in your practice
Opioid History
Figure 1. Rates of motor vehicle traffic and drug overdose deaths, United States, 1980-2010.
The number who die each year from...

- Drug overdoses: 52,404
- Car accidents: 37,757
- Guns: 35,763
- H.I.V.: 6,465
From 1999 – 2008...

Prescribe: ↑ x4

Death: ↑ x4

Rehab: ↑ x6
Figure 1. Age-adjusted rates for drug-poisoning deaths, by type of drug: United States, 2000–2013

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Drugs involved in U.S. overdose deaths, 2000 to 2016

Note: Data for 2016 is provisional.
Naloxone has a higher affinity to the opioid receptors than opioids like heroin or oxycodone, so it knocks other opioids off the receptors for 30-90 minutes. This reverses the overdose and allows the person to breathe.
“Take Home” Naloxone

American Medical Association endorses naloxone access for at-risk individuals

Primary Care Prescriber Survey
• 33% recall receiving education
• 8% have ever prescribed it

Naloxone Access Laws

46 U.S. states have enacted legislation

Core Components

• Standing Orders
• Third Party Prescribing
• Liability Protection

Standing Orders
Pharmacists can dispense naloxone without a prescription under physician’s authority

Third Party Prescribing
The person receiving naloxone does not have to be the person at risk for overdose

Liability Protection
Persons who prescribe/dispense/administer naloxone are protected from liability
<table>
<thead>
<tr>
<th>Risk Factors for Opioid Overdose</th>
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<tbody>
<tr>
<td>History of opioid poisoning or overdose</td>
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<tr>
<td>History of illicit or nonmedical opioid use</td>
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<tr>
<td>Use of methadone or buprenorphine for opioid use disorder</td>
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<td>High-dose prescription opioid use (&gt;50 milligram morphine equivalents daily)</td>
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<td>Long-term prescription opioid use (&gt;90 days continuously for non-cancer pain)</td>
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<td>Long-acting or extended-release prescription opioid use</td>
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<td>Use of opioids from multiple prescribers or multiple pharmacies</td>
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<td>Use of interacting drugs or medications (alcohol, sedatives, antidepressants)</td>
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<td>Underlying disease of key organs (lung, kidney, liver, heart, HIV/AIDS)</td>
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<td>Recent release from drug treatment/detoxification or correctional facility</td>
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The Texas Health & Human Services Commission awards $1,156,667 to support opioid overdose prevention

Development of OperationNaloxone.org with free online materials and continuing education for healthcare professionals

Purchasing and statewide distribution of naloxone with concurrent overdose prevention education for community members to prevent overdose deaths

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TONI
Texas Overdose Naloxone Initiative
Educational materials for healthcare providers and community organizations

Continuing education for pharmacists, prescribers, and social workers
Background & Significance

- Between 1993-2005, the percentage of college students using & misusing prescription drugs increased exponentially; #s continue to rise
- Use of opioids increased 343% (Clinton Health Matters Initiative, 2014)
- 50% of college students are offered a prescription drug for non-medical use by their sophomore year (Arria, 2008)
- Problem most prevalent among highly selective, urban colleges
- In surveys, college students who took an opioid for reasons other than for pain relief had a much greater risk (~5x) of experiencing three or more drug-use related problems (McCabe et al, 2008)
Setting the Foundation

• Discussions with campus administrators
• NaloxBox in each residence hall with RA training
• Naloxone for each UT police officer with training
• UT Counseling & Mental Health Center training
• Undergraduate Course: Young People and Drugs
Interdisciplinary Team

The Associate Vice President for Student Affairs created a Task Force:

- UT Wellness Network
- UT Social Work
- UT Pharmacy
- UT Center for Students in Recovery
- UT Students for Sensible Drug Policy
- UT Police Department
- UT Housing & Food Services
- Texas Overdose Naloxone Initiative
- Texas Harm Reduction Coalitions
Obtaining and Distributing Naloxone

- Collaborative relationships with varied naloxone companies
- Securing best Naloxone for relevant populations at lowest cost
- Fast acquisition and distribution in crisis situations (e.g. Hurricane Harvey)
UT Police Department

100 officers trained
UT Residence Halls

180 resident advisors trained to identify and respond to an opioid overdose and use naloxone
UT College of Pharmacy

120 student pharmacists trained to lead educational outreach events
Dissemination

- Media Coverage & Publications
- Texas Overdose Awareness Day
- Interprofessional Research & Practice
- Pop-Up Institute: Youth Substance Misuse
- Professional Trainings
Recommendations

- College campuses are obligated to provide education
- Must invest and provide resources to make students and staff aware and prepared for overdoses
- Must collaborate and communicate effectively across professions and disciplines
- Creatively overcome challenges of weaving policy, practice, and research
- We need to act quickly. There are lives to be saved.
Referrals and Resources

- Peer Coaches
- Treatment Centers
- Detox
- Recovery ATX and TONI
- DAPAs
- Student Pharmacist Recovery Network
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