Montgomery County Unintentional Drug Poisoning Coalition

June 1, 2011 Meeting Notes

Public Health- Dayton & Montgomery County, Reibold Building, 117 S. Main St, Dayton

Attending:

Jim Gross, MPH; Rick Buenaventura, MD; Robert Carlson, PhD; Gail Chmielewski, MS; Raminta Daniulaityte, PhD; Russel Falck, MA; Andrea Herman, MPA; Lt Col Mark Hess, Andrea Hoff; Tim Lane, MED; Lt. Brad Nickels; Willie Scales; Carole Smith, MS, CNS, CCRN; Chris Stieritz, RPh; Monica Sutter, RN; Doug Teller, MD; Cathy Trame, RN, MS.

Jim Gross, Montgomery County Health Commissioner and coalition co-chair, welcomed coalition members to the second meeting of 2011. He provided information concerning the federal Preventive Health and Health Services Block Grant (PHHSBG), which has been eliminated from President Obama’s 2012 budget request. According to information available to date, if the federal block grant funding is not restored, the Ohio Department of Health will likely be unable to fund its statewide Injury Prevention Program, as of January 2012. The Injury Prevention Program provides the vast majority of funding for the Montgomery County Coalition, with dollars going to Public Health-Dayton & Montgomery County and then on to Wright State via a contract. Mr. Gross noted that if federal block grant funds are not provided to ODH for injury prevention, based on his conversation with the incoming director of the Montgomery County ADAMHS Board, Helen Jones-Kelley, the coalition may continue in some form, perhaps as the newly mandated (by ODADAS) Community Opiate Task Force. More information about these changes will be shared with the Coalition as it becomes available.

Thus, right now, it appears that all activities conducted by WSU under contract with Public Health-Dayton & Montgomery County will end, with the possible exception of the coalition itself.

Russel Falck noted that the Coalition is composed of extremely knowledgeable and concerned individuals, and expressed his hopes that they will be able to continue to serve on the Coalition under the new arrangement with the ADAMHS Board. He also felt it was of substantial import to continue collecting coroner’s data on accidental drug overdoses as these data provide critical insight into the nature and extent of the problem.

There was some discussion over the amount of time it takes to extract and enter the data, which form the backbone of the ODH-mandated Poison Death Review process. Russel noted that the Montgomery County Coroner’s Office had been extremely cooperative on this initiative. WSU and the Coroner’s office have worked to streamline the process making it less
time consuming than it was initially for all concerned. Still, it does not happen by itself, and some staff time is required to make it happen.

Robert Carlson reviewed the naloxone sub-committee’s recommendation to support implementation of naloxone education and distribution programs in Ohio. This led to a lengthy discussion of the medico-legal, financial, and social marketing issues that would need to be addressed at local and state levels, prior to and during implementation. Several attendees expressed a preference for addressing these concerns in the recommendation. Andrea Herman will consult with ODH regarding the form that the recommendation might take. The recommendation was tabled and will be addressed at the next meeting.

Tim Lane distributed a summary of Poisoning Death Review data from the first 22 cases in 2011. He reviewed unintentional drug poisoning demographic data from 2007-2010 and summarized the 2010 toxicology data. Consistent with 2007 through 2010 data, the first 22 decedents of 2011 were 59% male, 91% white, and the 35-54 year age group was overrepresented. Most (55%) had a physical illness or disability, predominantly heart disease. The vast majority (91%) were known to have a history of substance abuse. Four of the deaths might have been prevented by a naloxone education and distribution program, a percentage that is consistent with data from 2010. This is estimated on the basis of rather incomplete data on who was present during the overdose. Early 2011 toxicological data indicate a decrease in the presence of benzodiazepines, but no conclusions should be drawn at this point. As in 2010, heroin-alone overdose deaths in the first cases of 2011 were rare, with only one death attributed solely to heroin.

Russel provided a preliminary overview of 2007-2010 data on Montgomery County residents who visited hospital emergency departments for accidental drug overdoses. Coalition members discussed ways that these data could result in a deeper understanding of the drug poisoning epidemic. Monica Sutter explained the advantage of using discharge as opposed to admission diagnostic codes, if such data are available. Russel will give an update at the September coalition meeting, including an initial analysis of zip code data, which suggested that 10 (out of 39) zip code areas accounted for more than one-half of the ED visits. These findings hint at the possibility of targeted social marketing campaigns to reduce drug overdoses and drug overdose deaths.

Robert Carlson reported on the progress of the qualitative study. Protocols have been approved by the WSU institutional review board and by IRBs at Miami Valley Hospital and Good Samaritan Hospital. Interviews will begin this month, if people who receive referral cards call in.
Responding to questions about treatment access raised at the previous meeting, Andrea Hoff described the Montgomery County Drug Task Force efforts to improve access to substance abuse and mental health treatment. These efforts include: streamlining the centralized intake unit referral process; dealing with the impact that client choice has on waiting times; and addressing availability of certified providers for specific levels of care, especially for clients with dual diagnoses.

Tim reviewed relevant Office of National Drug Control Policy recommendations and provided on-line links to ONDCP reports on the prescription drug abuse epidemic.

Russel gave an update on the on-line training and education initiative.

It was noted that Cathy Trame is retiring from Miami Valley Hospital and moving to Florida. The Coalition appreciates her contributions. Carole Smith, MS, who is taking Cathy’s position at MVH will now serve on the Coalition. Christine Olinsky has also resigned as she has retired from her position at the OSU- Montgomery County Extension Service.

The next meeting will be Tuesday, September 6, 3:30 pm, at the East Dayton Health Center.