Meeting Notes

Montgomery County Unintentional Drug Poisoning Coalition

September 6, 2011

East Dayton Health Center

Attending:

Gary LeRoy, MD; Jim Gross, MPH; Gideon S. A. Adegbile, MD; James Brown, MD; Rick Buenaventura, MD; Robert Carlson, PhD; Gail Chmielewski, MS; Russel Falck, MA; Andrea Herman, MPA; Lt Col Mark Hess, Lt. Chris Kinzeler; Tim Lane, MEd; Brenda Roman, MD; Carole Smith, MS; Chris Stieritz, RPh; Monica Sutter, RN; Doug Teller, MD. Guests: Cynthia Penn, ODH: Helen Jones-Kelley, JD, Montgomery County ADAMHS Board.

Dr. LeRoy, chair, welcomed the coalition members to the third meeting of 2011. He recognized two visitors: Ms. Cynthia Penn, Ohio Department of Health, who attended as an observer; and Ms. Helen Jones-Kelly, JD, the Director of the Montgomery County Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board.

Tim Lane distributed a summary of Poisoning Death Review (PDR) data from the first 61 cases in 2011 (reference 1. PDR9-6-11.pdf). He thanked the Montgomery County Coroner’s Office for their help in making the PDR happen. He noted that the rate of overdose deaths approximates that of 2010. He highlighted some differences in the 2011 data that may indicate some changes from the drug overdose demographics and drug use patterns observed in 2010. These indications include: a shift toward greater representation in the 35-54 year age group; a slight up-tick in the presence of marijuana and cocaine in the bodily fluids of decedents; and, in the prescription opioid class, a minor decrease in the presence of hydrocodone (such as Vicodin) and increase in the presence of methadone. It should not be assumed at this time that these preliminary indications are indicative of actual changes in decedents’ demographics or drug use patterns. Russel emphasized the importance of the PDR as it gives all concerned a detailed perspective on the problem, something that was lacking prior to 2010. Given that the WSU work on the project will in all likelihood end at the end of 2011 because the CDC block grant money that funds the project (and others) was zeroed out of President Obama’s budget for next fiscal year, Russel said he hoped the PDR could in some way be continued. Ms. Penn stated that the anticipated loss of funding is not a reflection on the excellent performance of Public Health--Dayton and Montgomery County, WSU, and the Coalition. Although she holds out hope of continued ODH funding for the Coalition, there’s little reason for optimism in that regard.
Russel summarized the findings detailed in the report: *Montgomery County Residents Hospital Emergency Department Visits for Accidental Overdose on Selected Drugs, 2007-2010*. The report is based on data obtained from the Greater Dayton Area Hospital Association. Russel described how this report, including zip code data, can help inform efforts to prevent overdose deaths. All Coalition members received a .pdf document of the report in late July. It will be posted on the project webpage after the meeting.

Helen Jones-Kelly provided some insight into the future of the County’s efforts to prevent accidental overdose deaths. She reported on Ohio’s plans to form prescription drug abuse task forces in each county, under the auspices of the ADAMHS boards. She also described initiatives already under way, including the availability of public media for increasing community awareness of prescription drug abuse and prevention. Ms. Jones-Kelly invited current Coalition members to continue their work to prevent overdose deaths by serving on the ADAMHS-led task force.

Dr. Carlson reported on the progress of the qualitative study. This effort is funded by CITAR, not the Unintentional Rx Drug Overdose project, and is designed to get a more in-depth understanding of the OD phenomenon. It is targeting people who have survived accidental drug overdoses. Hospital personnel are helping recruit participants for this IRB-approved study. Eight interviews have been conducted, which Robert described as a slow start. The less-than-anticipated numbers are attributed to the difficulty that prospective participants have commuting to WSU. Adjustments to the recruitment protocol have been approved, which may help increase the number of participants.

Russel provided an update on the educational videos targeting prescribers. The video series, which will be available on YouTube, consists of 10 stand-alone segments that run from 4-7 minutes in length. The topic areas covered include pain management contracts, alternatives to opioids for pain relief, substance use disorders, prescribing opioids, talking with someone who has a drug problem, and epidemiology of the problem from national, state and local perspectives. The series will be publicized through local hospitals and professional societies. The general public can also benefit from the information contained in the series. The anticipated release date is the end of October. He thanked Drs. Buenaventura, Roman, and Teller as well as Ms. Sutter and Mr. Lane for working on the videos.

Andrea Herman reported on the meeting with ODH concerning the pending Coalition recommendation regarding the feasibility of naloxone education and distribution. ODH representatives reviewed the draft recommendation and observed that the form of the recommendation and the detail provided clearly met the expectations of ODH. A motion was made by Dr. Brown and seconded by Dr. Roman to approve the naloxone education and
distribution recommendation (see below reference 2. Naloxone Recommendation) that had been placed before the Coalition at the June 1 meeting. Approval was unanimous.

Tim Lane reported that he and Cameron McNamee, ODH Policy Specialist, presented information on naloxone education and distribution programs at the August 18 meeting of the Prescription Drug Abuse Action Group (PDAAG). The presentation included a description of the Coalition’s efforts to determine the feasibility of a naloxone education and distribution program in Montgomery County. The PDAAG ranked naloxone education and distribution as a leading program and policy priority in addressing prescription drug abuse in Ohio.

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

REFERENCES (2):

1. Poison Death Review (to date) [attachment PDR9-6-11.pdf]

2. Naloxone Recommendation

Given the overwhelming evidence that naloxone can save lives, coupled with the high medical benefit-to-risk ratio of its use, the Coalition recommends that naloxone education and distribution programs be implemented in Ohio. The Coalition realizes that an assortment of medico-legal, financial, and social marketing issues must be addressed before programs can be implemented. The Coalition believes these issues will be creatively and effectively addressed at the executive levels of local and state government. Pilot studies in different locales of the state may help inform the process. The Coalition realizes that a naloxone education and distribution program is but one of many public health efforts needed to address the problem of unintentional overdose deaths related to opioid use in Ohio.