

Responding to B.C.'s Illegal Drug Overdose Epidemic

Progress Update

August/September/October 2018



Ministry of
Mental Health
and Addictions

BACKGROUND

Despite escalated efforts across the province, B.C. continues to see record numbers of overdose deaths. The BC Coroners Service reports that 1,458 people died from a suspected illicit drug overdose death in 2017 and a further 1,143 people have died in 2018 between January 1 and September 30, 2018. B.C.'s unpredictable and highly toxic illegal drug supply results in overdoses and overdose deaths in every corner of the province. With an average of four people a day dying of a preventable overdose, B.C. is experiencing the worst public health emergency the province has seen in decades.

Overdose Statistics in August and September 2018

In August 2018, at least 118 people died from a suspected illicit drug overdose. Deaths in August represent a 4% decrease from August 2017 (123) and a 22% decrease from July 2018 (145). In September 2018, at least 128 people died from an overdose. Deaths in September represent a 38% increase from September 2017 (93) and an 8% increase from August 2018 (118).

The majority (72%) of people who have died in 2018 were between the ages of 30 and 59; the vast majority (90%) of overdose deaths overall occurred among those aged 19 to 59. Males continued to be disproportionately represented, accounting for 80% of all overdose deaths in 2018. The majority (86%) of overdose deaths in 2018 occurred indoors. This suggests the trend of people using drugs alone or in the presence of someone who is unwilling or unable to call 9-1-1 is continuing. For more information, please see [the BC Coroner's illicit drug overdose death report](#).

International Overdose Awareness Day

Events and vigils across the province were held on August 31, 2018, to acknowledge International Overdose Awareness Day, honour those working on the front lines of the emergency, and remember those who have been lost due to an overdose. See [Minister of Mental Health and Addiction's statement on International Overdose Awareness Day](#).

Emergency Treatment Funding from Health Canada

As part of the federal government's Budget 2018 funding to help address the overdose crisis, the Emergency Treatment Fund is intended to provide one-time emergency funding of \$150 million for provinces and territories to help improve access to evidence-based treatment services.

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On September 6, 2018, B.C. and Health Canada entered into a [Bilateral Agreement](#) for B.C. to receive \$33.98 million in funding to enhance or increase access to quality treatment services for substance use disorder. This includes investments in:

- youth services provided by Foundry, which offers young people ages 12-24 health and wellness resources, services and supports;
- expanding injectable opioid agonist treatment, a treatment for people with severe opioid use disorder;
- supporting treatment beds;
- investing in 'hope' initiatives, designed to improve local-level capacity to connect individuals with the treatment options appropriate to their unique needs;
- developing strategies to enhance and improve treatment services;
- enhancing the treatment services provided by all health authorities; and
- supportive recovery.

As part of the Bilateral Agreement, all provinces and territories that receive funding are required to match those funds; B.C. met this requirement in fiscal 2017/18, with \$37.76 million spent on treatment services as part of \$322 million over three years to respond to the overdose emergency.

BC Centre for Disease Control Public Knowledge Summary: Analyzing Prescription Drug Patterns of Use among People Who Overdose

The ongoing BC Provincial Overdose Cohort study brings together information on the past medical history of people who experience an overdose to help public health stakeholders better understand factors that are associated with overdose in B.C. and to inform response efforts. In the study, a cohort of people with at least one fatal or non-fatal overdose between January 1, 2015 and November 30, 2016 (i.e., the Overdose Cohort) was compared with a randomly selected group of B.C. residents of similar age, sex, and area of residence).

The analysis team took a closer look at (1) recent initiation, (2) recent discontinuation, and (3) active tapering patterns of opioids for pain prior to overdose. Early findings suggest that use of prescription opioids for pain are relatively rare among people who overdosed, and do not appear to be important drivers of the overall drug overdose risk for people in B.C.

The analysis team also looked at the introduction of opioid agonist treatment (OAT) and subsequent retention patterns following a non-fatal opioid-related overdose event. Among the group who experienced an overdose, few were on OAT at the time of overdose, and only a small proportion of those people started treatment within 30 days of the overdose. Retention was highlighted as an area to focus on

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and investigate further, as less than half of those who started on OAT were still on treatment six months later.

Illicit Drug Overdose Deaths in BC: Findings from Coroners' Investigations

In September 2018, the BC Coroners Service released a report providing additional details on British Columbians who have died of a suspected illicit drug overdose. The 34-page report, *Illicit Drug Overdose Deaths in BC: Findings of Coroners' Investigations*, looked deeper into 872 completed illicit drug overdose death investigations in 2016 and 2017 and found:

- 79% had contact with health services in the year preceding death, most for pain-related issues
- 77% were regular users of illegal drugs
- 69% used drugs alone
- 52% reported to have had a clinical diagnosis or anecdotal evidence of a mental health disorder
- 44% employed at the time of death, most were employed in the trades and transport industry
- 13% lived in a social or supportive housing
- 9% were unsheltered (experiencing homelessness)

The report also confirmed findings previously shared by the Coroners Service, including:

- Four in every five decedents were male (81%, or 707 of the 872 deaths);
- About two-thirds of decedents lived in private residences; and,
- Fentanyl was detected in just over three in every four deaths.

KEY AREAS OF FOCUS AND SUMMARY OF PROGRESS SINCE LAST REPORT

- 1. Saving lives:** Services for people who use drugs that help reduce the risk of overdose, reduce the severity of overdose, or provide immediate life-saving interventions when an overdose has happened.

Progress since last report:

- As of October 15, 2018, over 118,000 Take Home Naloxone kits have been distributed throughout the province, with nearly 30,000 kits being reported to reverse an overdose.

- 2. Ending the stigma around addictions and mental illness:** Activities that reduce negative attitudes about people who use drugs that may keep people from seeking and receiving help for problematic substance use.

Progress since last report:

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- The Province’s public awareness campaign continues to encourage the public to consider that people who use drugs are real people – the campaign shows that they are in our families, workspaces, and communities.
- 3. Building a network of mental health and addiction treatment services:** Services that support treatment of and recovery from addiction.
- Progress since last report:**
- Fraser Health announced the development of a new Mental Health and Substance Use Wellness Centre to open in 2020.
 - The BC Centre on Substance Use, responsible for providing educational and clinical care guidance for all health care professionals who prescribe medication to treat opioid use disorder, developed several factsheets related to recent changes in care and coverage for patients and prescribers for the clinical management of opioid use disorder including:
 - An overview of the [new fee codes](#) for the clinical management of opioid use disorder
 - Additional guidance on [Plan G coverage for OAT](#)
 - Updated [frequently asked questions about buprenorphine/naloxone](#)
 - [12 and 16 mg brand Suboxone®](#) available through special authority
 - The BC Centre on Substance Use released its quarterly report on provider education
- 4. Addressing the full range of supports and social factors:** Activities and services that address social factors related to substance use such as housing, income, employment, intergenerational trauma, and community development.
- Progress since last report:**
- A second stream of funding from the [Community Crisis Innovation Fund](#) was awarded to 27 communities in BC to support local action to save lives, address stigma, and connect more people to treatment and recovery.

1. SAVING LIVES

TAKE HOME NALOXONE PROGRAM IN BC

SAVING LIVES SINCE AUGUST 2012



CALLING 911 IS THE FIRST & MOST CRITICAL STEP OF OVERDOSE RESPONSE



Naloxone is a medication that reverses the effects of an overdose from opioids (e.g. heroin, methadone, fentanyl, morphine, oxycodone)

Take Home Naloxone (THN) kits are free for people at risk of an opioid overdose and those most likely to witness and respond to an overdose

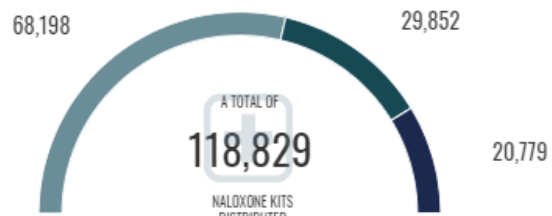
DISTRIBUTION OF KITS



ACTIVE THN DISTRIBUTION LOCATIONS IN BC INCLUDING:

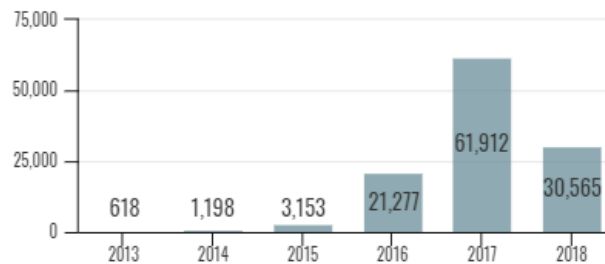


29,852
KITS REPORTED AS USED TO REVERSE AN OVERDOSE



- Kits for New Participants
- Kits Reported as Used
- Replacements: Stolen, Lost, Expired, Confiscated

NUMBER OF KITS DISTRIBUTED BY YEAR



FOR MORE INFORMATION VISIT towardtheheart.com/naloxone/

WORKING TOGETHER | REDUCING HARM

Last Updated: OCTOBER 15, 2018

2. ENDING THE STIGMA AROUND ADDICTIONS AND MENTAL ILLNESS

There is no one type of person who uses drugs, yet many people consider addiction and drug use as a solely street entrenched issue. However, the data tell us otherwise: overdose is a far-reaching problem in B.C., with a wide range of people who are dying or experiencing non-fatal overdose events. In fact, the sheer number of people who are dying indoors alone suggests that a person is more likely to survive an overdose in areas such as the Downtown East Side of Vancouver than in a suburban dwelling.

People who do not feel comfortable coming forward to get help – whether that is to access drug checking services, to be monitored for overdose at an overdose prevention or supervised consumption service location, or to access treatment services – are at an elevated risk of overdose and overdose death. The onus is on all British Columbians to have meaningful conversations about substance use, to shift perceptions of people who use drugs, and reduce the stigma that undermines efforts to save lives.

The Ministry of Mental Health and Addictions continues to expand content on StopOverdoseBC.ca, including a section called The Weekly that provides a platform for people to hear from everyday change-makers who are working to stop overdose and to learn from those who are helping to put a human face on the overdose emergency in our province. Powerful stories can help others heal, provide hope and remind us of our humanity. Read more here: <https://www.stopoverdose.gov.bc.ca/theweekly>.

3. BUILDING A NETWORK OF MENTAL HEALTH AND ADDICTION TREATMENT SERVICES

New Mental Health and Substance Use Wellness Centre announced in Fraser Health

The Royal Columbian Hospital in New Westminster will be home to a new 36,500 square metre Mental Health and Substance Use Wellness Centre that will begin to accept patients in 2020. When complete, the Centre will include:

- Fraser Health's first dedicated older-adult psychiatric unit for seniors, with 20 beds;
- a 10-bed psychiatric high-acuity unit;
- 45 beds for acute mental-health inpatient care;
- clinical teaching space;
- more outpatient clinics;
- a new energy centre; and
- a 450-stall parkade.

The Centre will replace the aging 30-bed Sherbrooke Centre and will allow the hospital to care for hundreds of more patients every year.

BC Centre on Substance Use Continues to Provide Education and Clinical Guidance for Providers

The BC Centre on Substance Use, responsible for providing educational and clinical care guidance for all health care professionals who prescribe medication to treat opioid use disorder, developed several

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factsheets related to recent changes in care and coverage for patients and prescribers for the clinical management of opioid use disorder including:

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- [12 and 16 mg brand Suboxone®](#) available through special authority

The BC Centre on Substance Use also released its quarterly report on provider education, noting that all of the educational programs are well-received.

- As of August 1, 2018, 2,339 clinicians have been reached through 64 Provincial Opioid Use Disorder Guideline Seminars across B.C.
- Over 9,300 people have registered in the program, and 1,532 have received their diploma (604 from BC) since the Online Addiction Medicine Diploma Program was launched in May 2017.
- Since the free CME-accredited Provincial Opioid Addiction Treatment Support Program was launched in July 2017, there have been 1,666 registrants and 143 new authorizations to prescribe OAT have been processed.

A multitude of health care professionals from various disciplines have benefited from each of the above educational programs, including family physicians, nurses, pharmacists, social workers, and other allied health care professionals.

4. ADDRESSING THE FULL RANGE OF SUPPORTS AND SOCIAL FACTORS

Funding for Community Overdose Response Efforts

The province's Community Crisis Innovation program capitalizes on proven and effective strategies that form B.C.'s comprehensive response to the overdose emergency. In October 2018, 27 communities received \$1.7 million in provincial funding to support local action to save lives, address stigma, and connect more people to treatment and recovery. The projects will help address local needs specific to each community. Projects range from peers taking an active leadership role in the development and delivery of overdose prevention services in Quesnel, to involving peers in partnerships around single-room-occupancy resources to support socially isolated people in Vancouver.

CONCLUSION

B.C. continues to grapple with an overdose emergency that has complex and dynamic underpinnings, with the rapid introduction of new substances and consistently high rates of unintentional overdose deaths

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affecting all parts of the province. With significant new investments in accelerated cross-sector actions, the Ministry of Mental Health and Addictions is working closely with the federal government, local governments, the Provincial Health Officer, other provincial government ministries, health authorities, the First Nations Health Council, First Nations Health Authority and other Indigenous organizations such as Métis Nation BC, and community partners in taking action to ensure a comprehensive and robust response to B.C.'s overdose emergency.