

Montana Health Alert Network

DPHHS HAN

ADVISORY

Cover Sheet

DATE

January 25, 2022

SUBJECT

Increase in Opioid Overdose and Fatalities in Montana

INSTRUCTIONS

DISTRIBUTE to your local HAN contacts. This HAN is intended for general sharing of information.

- Time for Forwarding: **As Soon As Possible**
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For LOCAL HEALTH DEPARTMENT reference only
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**EMS/Trama
1-406-444-3895**

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Categories of Health Alert Messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.

Information Service: passes along low level priority messages that do not fit other HAN categories and are for informational purposes only.

Please update your HAN contact information on the Montana Public Health Directory



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Information Sheet



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BACKGROUND

Opioids are a class of drugs that include the illegal drug heroin, synthetic opioids such as fentanyl, and pain relievers available legally by prescription, such as oxycodone (OxyContin®), hydrocodone (Vicodin®), codeine, morphine, and many others.¹ Across the nation, the DEA and law enforcement are seizing counterfeit pills marked as legitimate prescription pills at record rates. These pills are widely available and often contain fentanyl, a potent opioid analgesic that is 50-100 times stronger than morphine.^{2,3} Although pharmaceutical fentanyl can be diverted for misuse, most cases of fentanyl-related morbidity and mortality have been linked to illicitly manufactured fentanyl and fentanyl analogs, collectively referred to as non-pharmaceutical fentanyl (NPF).³ NPF is sold via illicit drug markets for its heroin-like effect and often mixed with heroin and/or cocaine as a combination product—with or without the user’s knowledge—to increase its euphoric effects. While NPF-related overdoses can be reversed with naloxone, a higher dose or multiple number of doses per overdose event may be required to revive a patient due to the high potency of NPF.^{4,5}

INFORMATION

Montana’s death rate due to opioids rose significantly in 2019-2020 compared to 2017-2018, driven in part by synthetic opioids. The percentage of opioid overdoses that involved synthetic opioids increased from 18% 2017-2018 to 30% in 2019-2020 (DPHHS death records). Similarly, opioid deaths involving synthetic opioids (e.g. fentanyl) have risen in the U.S. and regionally among Western States.⁶ Though complete 2021 mortality data is not available at this time, the HAN released in May 2021 regarding increased fentanyl overdoses shows that fentanyl continues to be a concern for Montana.⁷

Between 1/17/2022 and 1/20/2022, EMS in Helena, Montana successfully reversed eight opioid overdoses using naloxone. Many of the dispatches were initiated for a suspected heroin overdose, though one reported a history of fentanyl use.

- Cases were between the age of 21 and 37
- 75% were men
- 50% required multiple doses of naloxone
- One individual was administered a combined 16mg of naloxone by bystanders and law enforcement

Between 1/11 and 1/20 five fentanyl overdose cases were treated by emergency responders in Kalispell, Montana.

- Cases were between the age of 18 and 45
- 80% were men
- 60% reported taking fentanyl by smoking, insufflating, or ingesting pills

Law enforcement in the Kalispell area report seeing an increased number of counterfeit blue “M30” pills which mimic prescription oxycodone but contain much stronger fentanyl.

Other areas of the state have seen overdoses due to fentanyl pills since the start of 2022, leading public health officials to believe that fentanyl pills continue to circulate in the illicit drug supply across Montana.

RECOMMENDATIONS

Local Health Departments

1. Raise awareness among key partners and stakeholders to the widening profile of those at risk for fentanyl overdose, which increasingly includes persons misusing diverted prescribed oral pain and sedative medications.
2. Develop public health messaging about fentanyl, including fentanyl-laced counterfeit pills and fentanyl-related compounds that emphasizes the toxicity and potential lethality of the drug versus its high “potency.” The messaging should include warnings of the highly variable content of fentanyl present in illicit products, which further elevates risk of overdose.^{8,9}
3. Continue to encourage eligible recipients, including individuals at-risk for opioid-related overdose and family members and friends of those at-risk, to carry naloxone.

EMS and Law Enforcement

1. Be aware of the potential for increased incidence of overdose in your community related to NPF and for the potential need for additional stocks of naloxone on hand.
2. Prioritize and expedite laboratory testing of drug samples taken from drug overdose scenes.
3. Continue to monitor individuals who have overdosed on fentanyl after receipts of bystander naloxone given the risk for recurrent respiratory depression once the naloxone effect has ended.

Expanding Naloxone Access

1. The State of Montana has issued a standing order for naloxone that allows Montanans to access Naloxone at no cost. Naloxone is a safe medication that can reverse a suspected opioid-related overdose

Organizations and facilities may create a Memorandum of Understanding with the State of Montana that will allow them to:

- Order Naloxone directly from the contracted pharmacy.
- Distribute Naloxone into the hands of those who are at risk of experiencing opioid-related drug overdose and to a family member, friend, or other person who can assist a person who is at risk of experiencing an opioid-related drug overdose.
- Keep Naloxone on hand for staff to administer as needed.

Training on the administration of naloxone is also available at no cost.

To learn more about training and accessing free naloxone, visit naloxone.mt.gov

Additional Information: For more information regarding opioid issues in Montana, please refer to these resources:

DPHHS Opioid Prevention Program

<https://dphhs.mt.gov/opioid/index>

Drug Poisoning Deaths in Montana, 2007-2018

<https://dphhs.mt.gov/assets/publichealth/EMSTS/opioids/DrugPoisoningDeathsMontana2007to2018.pdf>

Montana Implementation Guide for Access to Naloxone Opioid Antagonists

<https://dphhs.mt.gov/assets/publichealth/EMSTS/opioids/MontanaImplementationGuideforIncreasedNaloxoneUpdatedMay2019.pdf#:~:text=This%20Montana%20Implementation%20Guide%20for%20Access%20to%20Naloxone,by%20medical%20practitioners%2C%20liability%2C%20and%20school%20to%20naloxone.>

Opioids Overdose Recognition and Response Guide (Pamphlet)

<https://dphhs.mt.gov/assets/publichealth/EMSTS/opioids/Naloxonebrochure.pdf>

Montana Standing Order for Naloxone Opioid Antagonists

<https://dphhs.mt.gov/assets/publichealth/EMSTS/opioids/MontanaStandingOrderforNaloxoneOpioidantagonists2022.pdf>

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