



# Rx SAFE MARIN

MARIN COUNTY PRESCRIPTION DRUG MISUSE AND ABUSE INITIATIVE

## **The Opioid Epidemic in Marin County: Responding to Local Trends**

**Matt Willis, MD MPH  
Public Health Officer  
Marin County, California**

PROMOTE & PROTECT

THE

health, well-being, self-sufficiency and safety

FOR ALL IN

Marin

# County Health Rankings: Healthiest County in California

## Marin County ranked in the top 5% in:

- Premature death rate
  - Adults self reported health
  - Mentally unhealthy days
  - Adult obesity
  - Teen birth rate
  - Uninsured adults
  - Primary care physicians per capita
  - High school graduation
  - Unemployment
  - Children in poverty
  - Physical activity
  - Violent crime rate
- High food environment index
- Low rate of preventable hospital stays
  - Low violent crime rate

## Ranked in the top 25% in:

- Low number of physically unhealthy days
- Adults without social/emotional support
- Low percent driving alone to work

## Ranked in the top 10% in:

- Low percent of adults reporting fair or poor health
- Low average number of mentally unhealthy days
- High access to exercise opportunities
- High dentists per capita
- High mental health providers per capita
- High percent with some college

## Ranked in the top 15% in:

- Low percent of adults who smoke
- Low percent of children in single-parent households
- Low average daily air pollution



County Health  
Rankings & Roadmaps  
A Healthier Nation, County by County



**Marin County ranked in the bottom 50% in:**

- <sup>1</sup>Excessive Drinking
- <sup>2</sup>Drug poisoning mortality rate
- Alcohol impaired driving rate
  
- Income inequality

<sup>1</sup> Data collected from Behavioral Risk Factor Surveillance System 2006-2012 (2005-2010 for social support indicator) and may vary from other local sources used in county health reports and factsheets.

<sup>2</sup> Drug poisoning deaths was an additional measure and did not contribute to the overall county health rankings.



# Doctors must lead us out of our opioid abuse epidemic

By **Dr. Sanjay Gupta**, Chief Medical Correspondent

Updated 1:54 PM ET, Thu June 2, 2016



### Top stories



Melania's website taken down amid controversy



Ex-beauty queen jailed

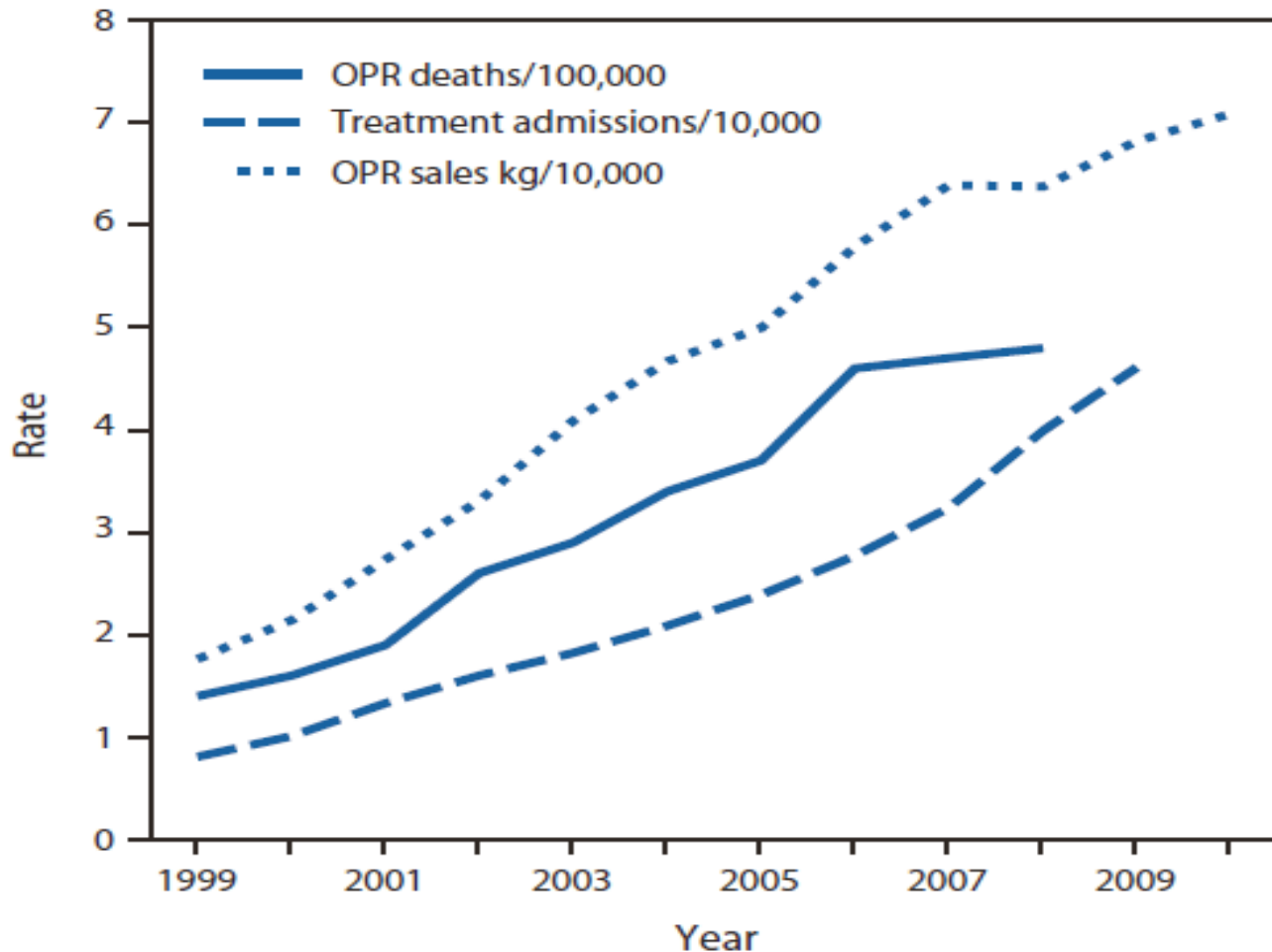
Today's Mortgage Rate

# 3.17%

APR

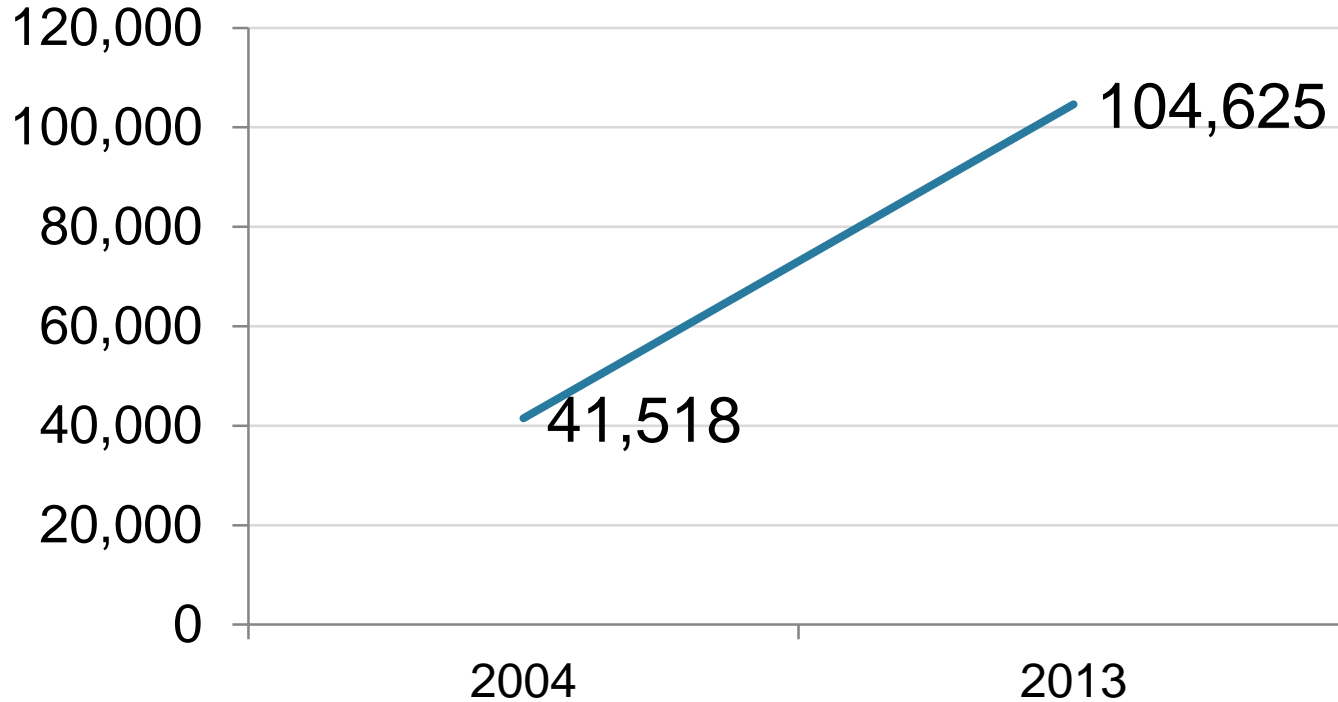
[Calculate New Payment](#)

# KILOGRAMS OF OPIOIDS SOLD, OPIATE DEATHS AND ADDICTION



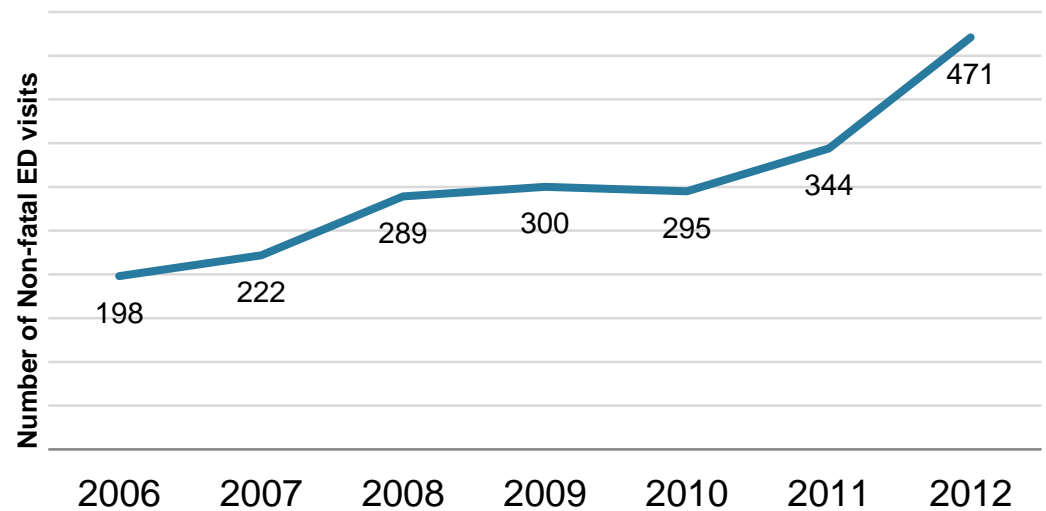
SOURCES: National Vital Statistics System, 1999-2008; Automation of Reports and Consolidated Orders System (ARCOS) of the Drug Enforcement Administration (DEA), 1999-2010; Treatment Episode Data Set, 1999-2009  
<http://www.cdc.gov/vitalsigns/PainkillerOverdoses/index.html>

# Looking back: Our Call to Action

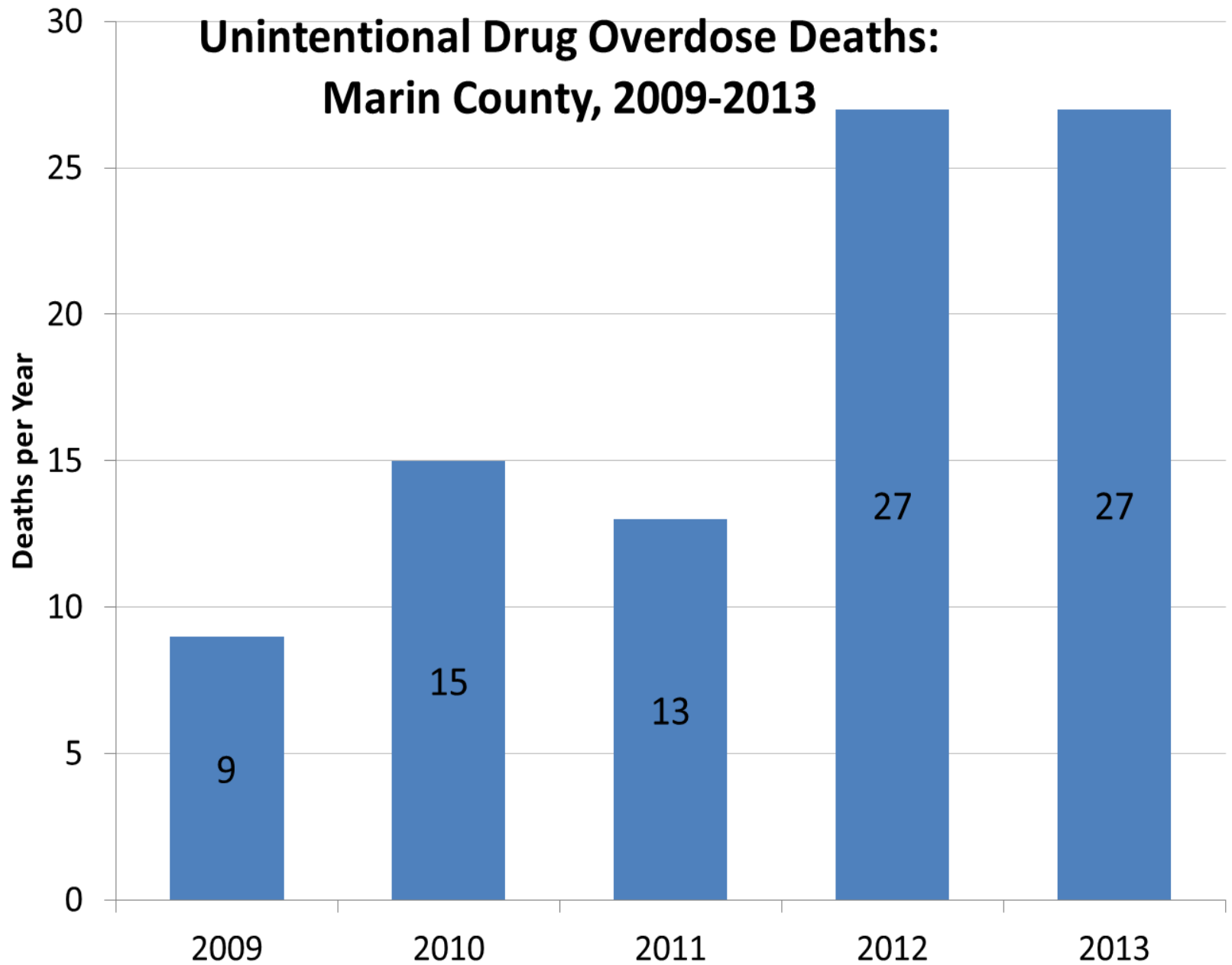


Narcotic Prescriptions

Emergency Department Narcotic Related Visits



## Unintentional Drug Overdose Deaths: Marin County, 2009-2013



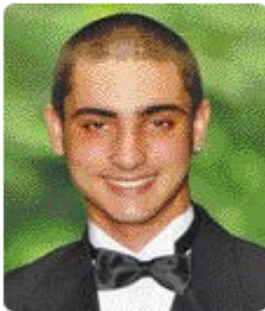


# Marin Families

## ■ ALEC JACOB TORCHON

▼ Obituary ▶ Condolences

---

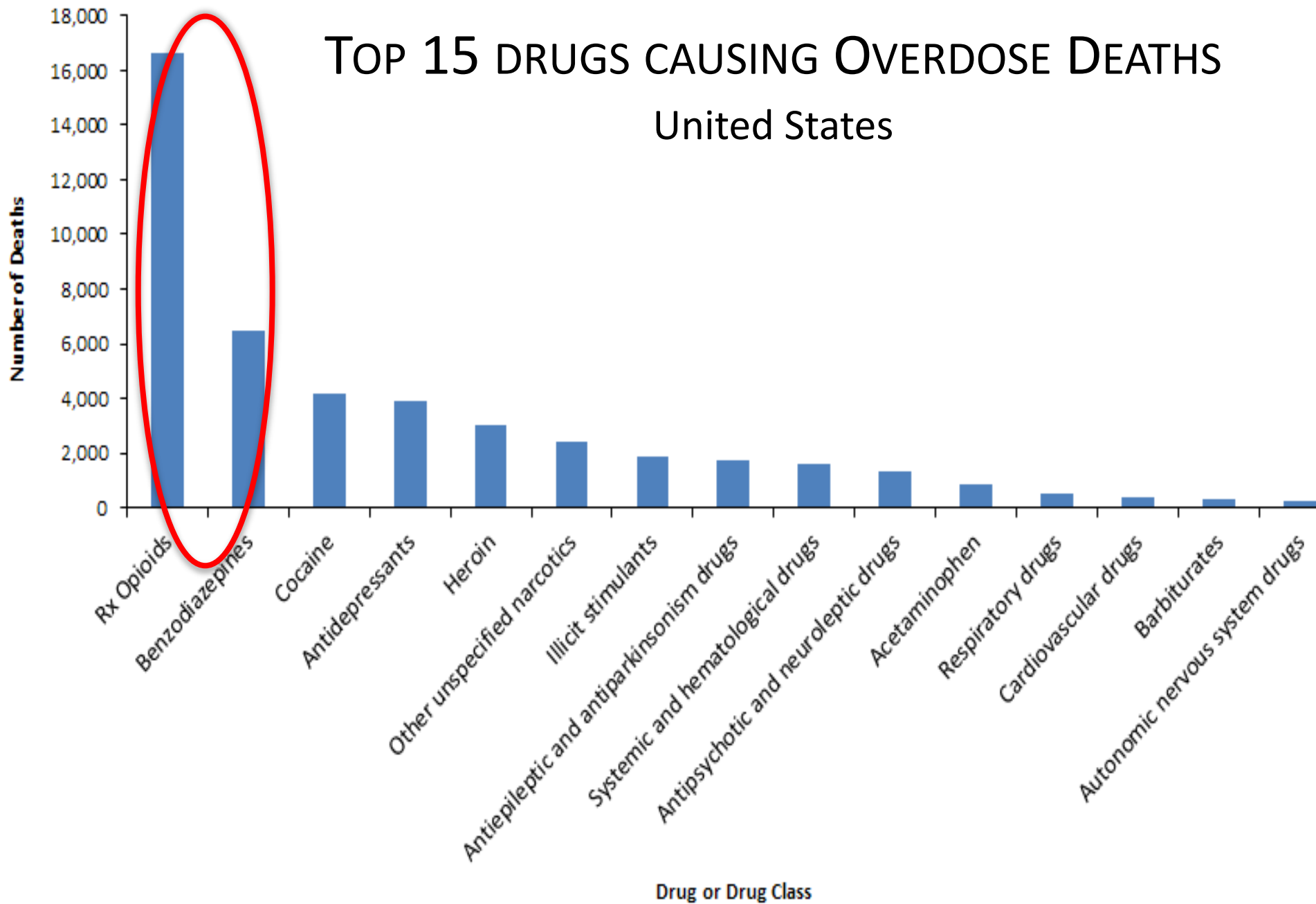


Alec Jacob Torchon Known as AJ, 19

We feel compelled to say that he died accidentally from a foolish mixture of alcohol and possibly a drug as well. We add this as a warning to spread the word of the all-too-real dangers of this kind of risky behavior. This can't happen to us or our family.

# TOP 15 DRUGS CAUSING OVERDOSE DEATHS

## United States



# How did we get here?

*“The risk of addiction is much less than 1%”*

Porter J, Jick H. *Addiction rare in patients treated with narcotics*. N Engl J Med. 1980 Jan 10;302(2):123

Cited 824 times (Google Scholar)

**ADDICTION RARE IN PATIENTS TREATED  
WITH NARCOTICS**

*To the Editor:* Recently, we examined our current files to determine the incidence of narcotic addiction in 39,946 hospitalized medical patients<sup>1</sup> who were monitored consecutively. Although there were 11,882 patients who received at least one narcotic preparation, there were only four cases of reasonably well documented addiction in patients who had no history of addiction. The addiction was considered major in only one instance. The drugs implicated were meperidine in two patients,<sup>2</sup> Percodan in one, and hydromorphone in one. We conclude that despite widespread use of narcotic drugs in hospitals, the development of addiction is rare in medical patients with no history of addiction.

JANE PORTER

HERSHEL JICK, M.D.

Boston Collaborative Drug  
Surveillance Program

Waltham, MA 02154

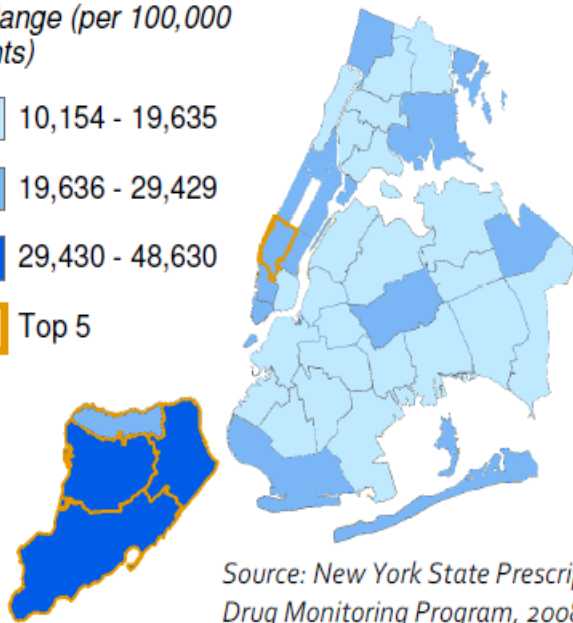
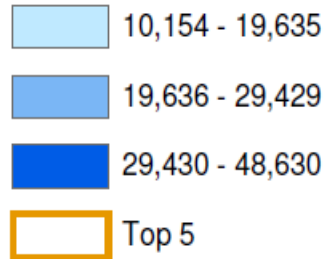
Boston University Medical Center

1. Jick H, Miettinen OS, Shapiro S, Lewis GP, Siskind Y, Slone D. Comprehensive drug surveillance. JAMA. 1970; 213:1455-60.
2. Miller RR, Jick H. Clinical effects of meperidine in hospitalized medical patients. J Clin Pharmacol. 1978; 18:180-8.

# Neighborhoods with More Opioid Prescriptions Have More Overdose Deaths

## Rates of hydrocodone and/or oxycodone prescriptions filled by NYC neighborhood<sup>5</sup>

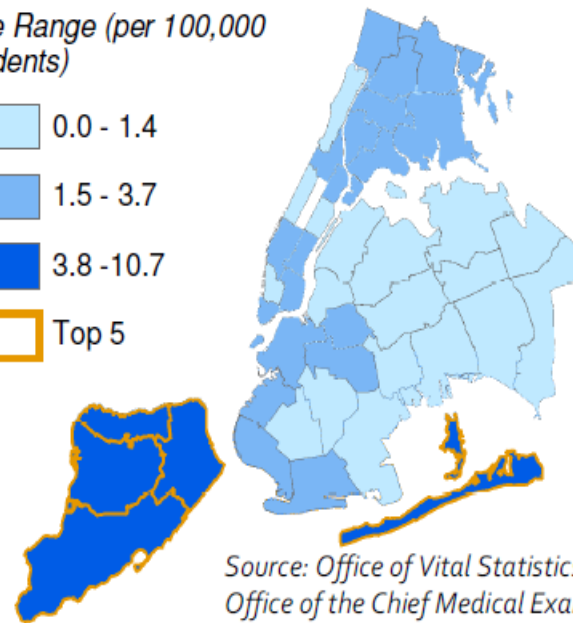
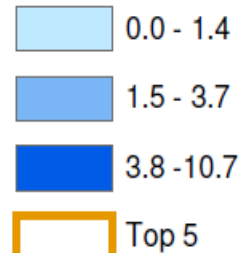
Rate Range (per 100,000 residents)



Source: New York State Prescription Drug Monitoring Program, 2008-2009

## Rates of unintentional opioid analgesic poisoning (overdose) deaths by NYC neighborhood<sup>4</sup>

Rate Range (per 100,000 residents)



Source: Office of Vital Statistics & Office of the Chief Medical Examiner, 2008-2009

**Definitions:** The United Hospital Fund (UHF) classifies NYC into 42 neighborhoods, comprised of contiguous zip codes. Income is defined by the percent of households below 200% of the federal poverty level (Census 2000) and separated into three groups: low-income (43%-70%), medium-income (30%-43%) and high-income (13%-30%). To ensure rate stability, two years of prescription and death data were combined for neighborhood analyses.

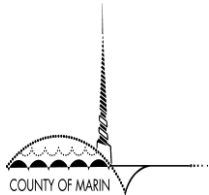
PRESCRIPTION  
DRUG MISUSE &  
ABUSE STRATEGIC PLANNING

HOSTED BY THE MARIN COUNTY HEALTH & HUMAN SERVICES PREVENTION HUB

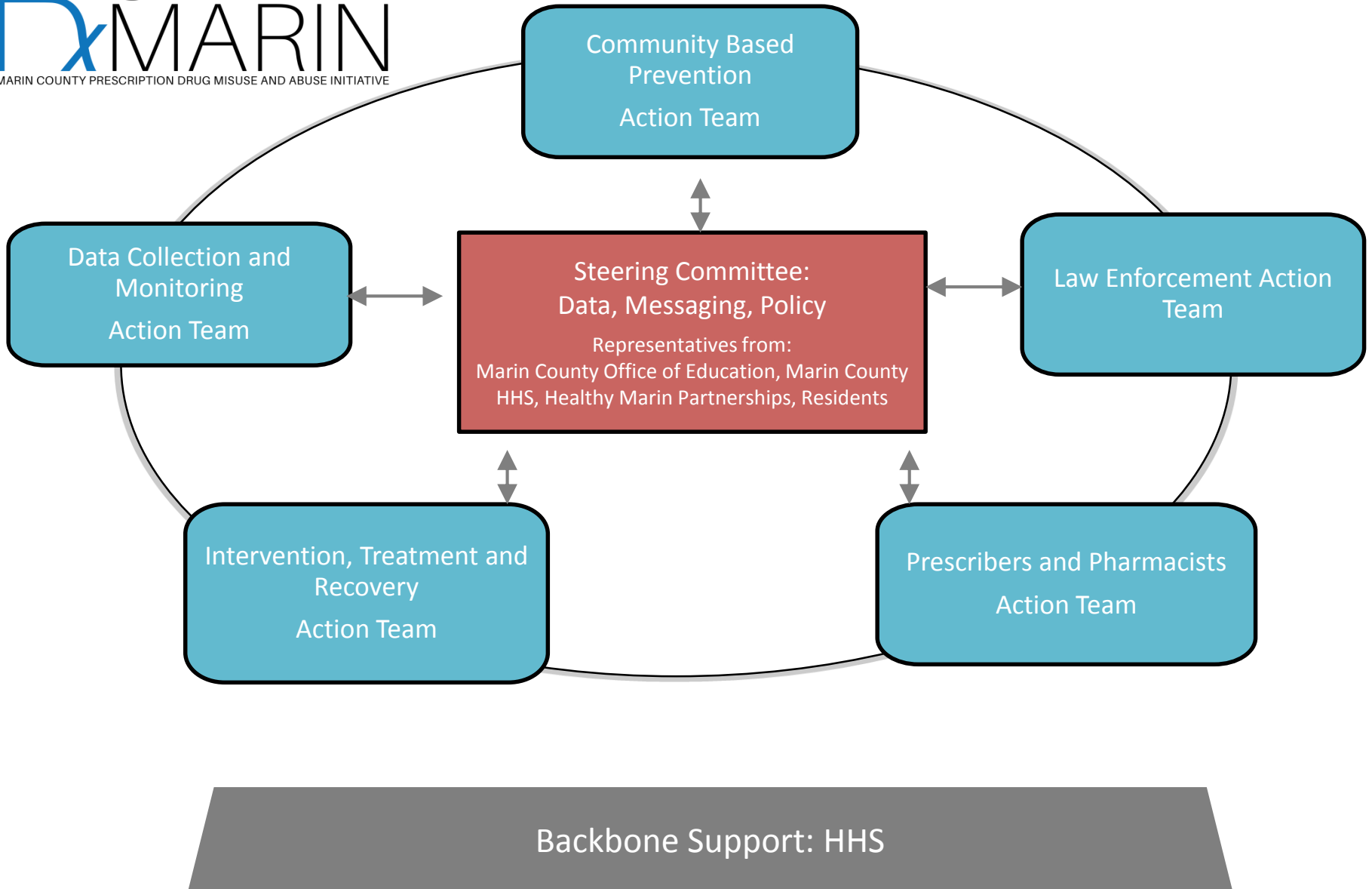
FEBRUARY 5TH, 2014  
7:15AM - 1:00PM

# WELCOME

*What can we do as a community to prevent prescription drug misuse and abuse and save lives?*



SHERATON FOUR POINTS  
1010 NORTHGATE DRIVE  
SAN RAFAEL 94903





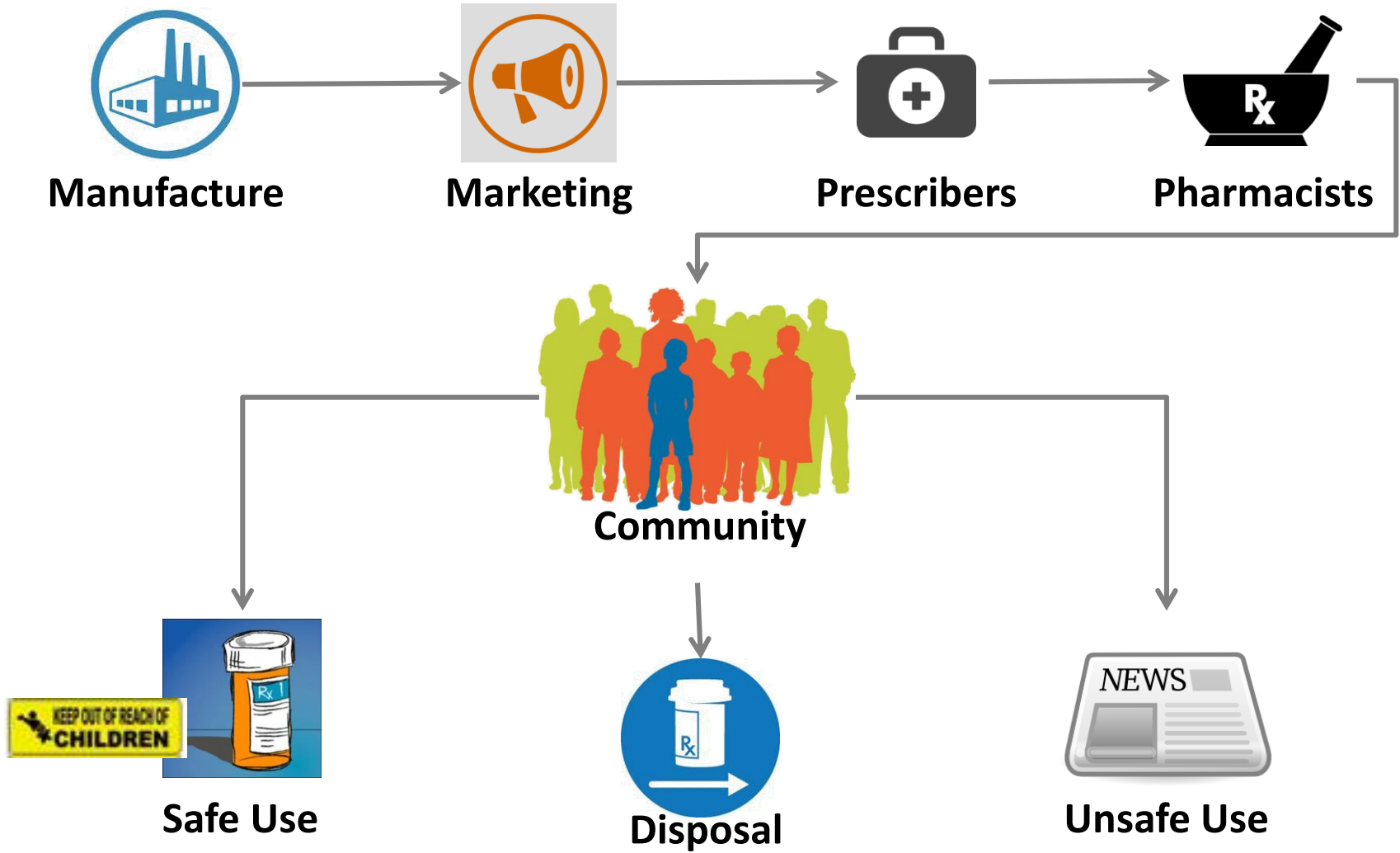


# Public Health Approach

- “Every system is perfectly designed to get the results that it gets.”

– Paul Batalden, MD
- What are the key parts of the “system”?
  - Healthcare, law enforcement, policymakers, community members, schools, public health, business etc.
- What are the results of the system?
  - Overdose deaths
  - Addiction and dependence
  - Misuse
- How do we re-create the system to support safe medication use?

# The Life of a Pill



# Strategic Goal: Prescribers and Pharmacists Action Team

- Goals:
  - Reduce total amount of narcotics prescribed in Marin County by 15% 2014-2016
- Actions:
  - Adopt safe prescribing guidelines for emergency rooms and clinics

# SAFE PAIN MEDICINE PRESCRIBING IN EMERGENCY DEPARTMENTS



- We care about you. We are committed to treating you safely.
- Pain relief treatment can be complicated. Mistakes or abuse of pain medicine can cause serious health problems and even death.
- Our emergency department is committed to providing safe pain relief options. Many types of pain can be safely and effectively managed without prescription medications.

## For your SAFETY, we follow these rules when treating your pain:

1. We look for and treat emergencies. We use our best judgment when treating pain. These recommendations follow legal and ethical advice.
2. You should have only one provider and one pharmacy helping you with chronic pain. We do not usually prescribe pain medication if you already receive pain medicine from another health care provider.
3. If prescription pain medication is needed, we generally only give you a small amount.
4. We do not refill lost or stolen prescriptions. If your prescription is stolen, please contact the police.
5. We do not prescribe long-acting pain medicines: OxyContin, MSContin, Fentanyl (Duragesic), Methadone, Opana ER, Exalgo and others.
6. We do not provide missing doses of Subutex, Suboxone, or Methadone.
7. We do not usually give shots for flare-ups of chronic pain. Medicines taken by mouth may be offered instead.
8. Health care laws, including HIPAA, allow us to ask for your medical records. These laws allow us to share information with other health care providers who are treating you.
9. We may ask you to show a photo ID when you receive a prescription for pain medicines.
10. We use the California Prescription Drug Monitoring Program, called CURES. This statewide computer system tracks narcotic and other controlled substance prescriptions.

If you need help with  
substance abuse or addiction, call  
**(415) 755-2345**  
for confidential referral and treatment.

These standards were developed by Marin County Department of Health and Human Services, Marin County Emergency Medical Services and all Marin County hospital Emergency Departments.



If you are a person with a disability and require this document in an alternate format (example: Braille, Large Print, Audiotope, CD-ROM), you may request an alternate format by calling: (415) 473-4167(Voice)/(415) 473-3232 (TTY) or by e-mail at: [comail@marincounty.org](mailto:comail@marincounty.org)

# Opioid Prescribing for Chronic Pain: Guidelines for Marin County Clinicians

Although prescription pain medications are intended to improve the lives of people with pain, their increased use and misuse have led to a rise in narcotic addiction and overdoses in Marin County and across the country. These guidelines are designed to help clinicians improve patient outcomes and limit the risk of unintended harm when considering the use of opioids for the treatment of chronic non-cancer pain (CNCPP). These guidelines do not address the use of opioids for acute pain, nor do they address the use of opioids for the treatment of pain at the end of life. These guidelines are intended to supplement and not replace individual prescriber's clinical judgment.

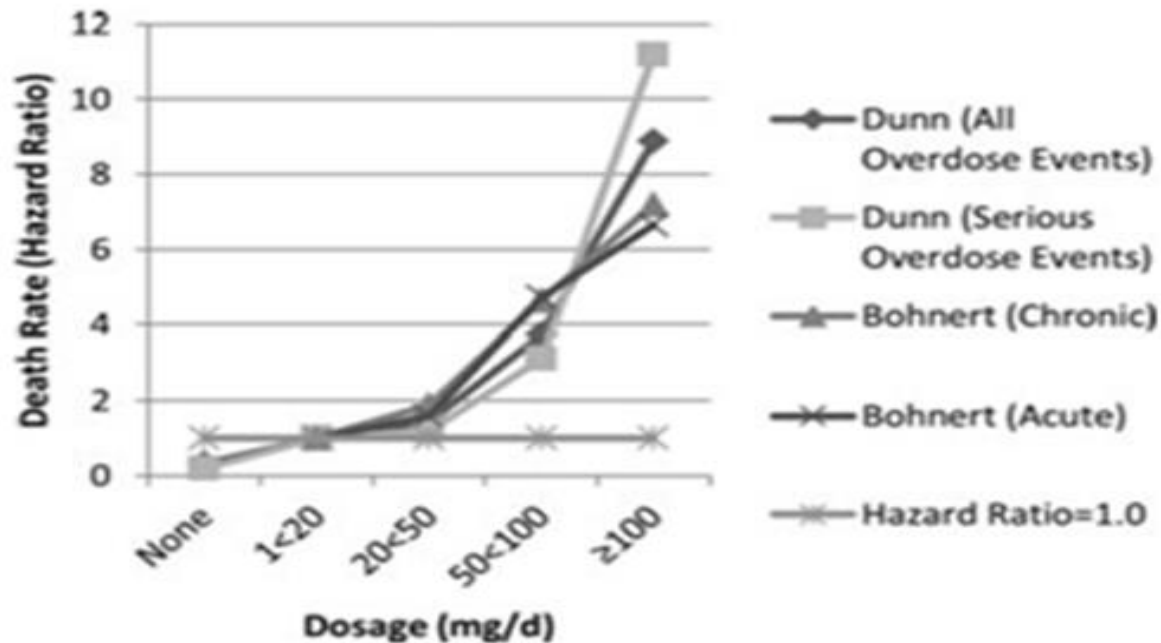
For prescribers considering opioids for the treatment of chronic non-cancer pain, these guidelines suggest key practices in the following areas:

- ASSESSMENT AND MONITORING
- PATIENT AND FAMILY INFORMATION
- PATIENT/PROVIDER AGREEMENTS
- CHRONIC NON-CANCER PAIN TREATMENT RECOMMENDATIONS
- NON-NARCOTIC ALTERNATIVES
- CAUTIONS REGARDING CO-MORBIDITIES OR INTERACTIONS
- RELATIONSHIP WITH PHARMACIES AND EMERGENCY DEPARTMENTS
- SAFE STORAGE AND DISPOSAL
- ADDICTION AND DEPENDENCE REFERRALS

These guidelines were developed in collaboration between Marin County Department of Health and Human Services, the RxSafe Marin Prescribers and Pharmacists Committee, and the Marin Medical Society.



# What is a Safe Opioid Dose?



*ACOEM Practice Guidelines: Opioids for Treatment of Acute, Subacute, Chronic, and Postoperative Pain. JOEM, Vol. 56, No. 12, Dec. 2014, page e146*

# Marin County Trends

## **County Wide (All Residents) Trends (2013-15): (CURES data)**

- 12% decrease in Opioid Prescriptions
- 20% reduction in morphine equivalent dose (MED) per resident

## **Marin County Medi-Cal (Partnership) Trends (Jan 2014 – Jun 2016):**

- 70% decrease in Opioid Prescriptions
- 38% decrease in morphine equivalent dose (MED) per resident
- 80% reduction in members on unsafe doses (>120 MED/day)
- 64% decrease in initial prescriptions for opioids
- Marin County member opioid use rates below Plan average

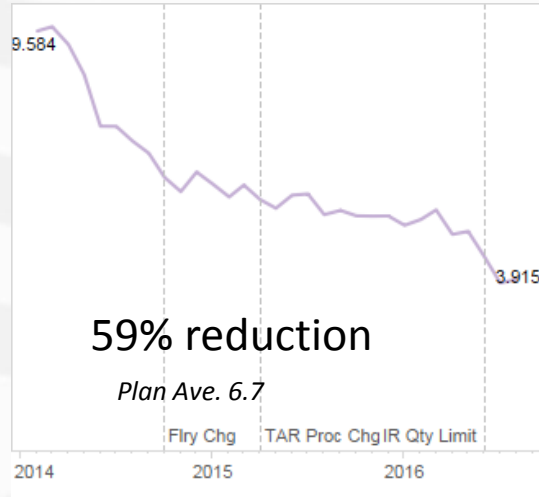
# Marin County – PHP Aggregate Data January 2014 - August 2016

Summary Rx

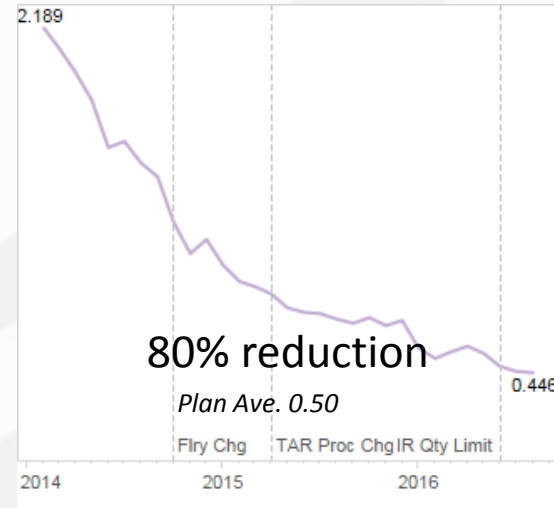
**20,904** opioid Rx   **16,531** opioid users   **49.46** MED daily avg   for **August 2016**

Opioid Users, sum of Number of Records, average of MED/day and Fill Dt Month. The data is filtered on Fill Dt (MY), which has multiple members selected.

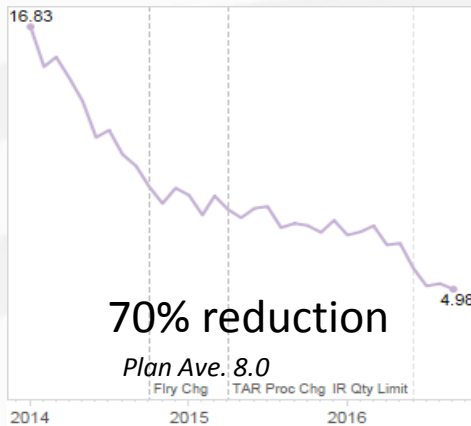
## Opioid Users P100MPM (all doses)



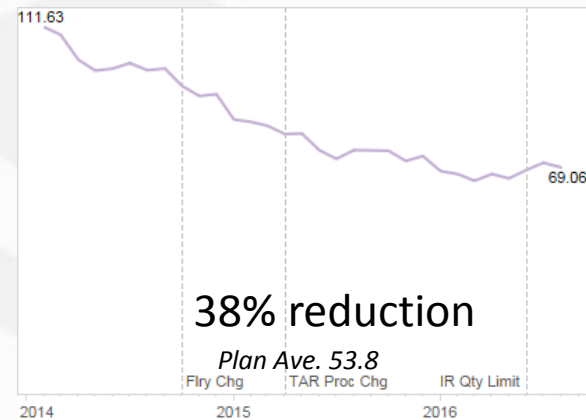
## Opioid Users P100MPM (high Dose)



## Opioid Prescriptions P100MPM (all doses)



## Opioid Dose (Daily MED)



There were **11,378,510** million pills of opioid pain medications prescribed in Marin County in 2015.

That's enough for every man, woman, and child in Marin to have **44** opioid pills.

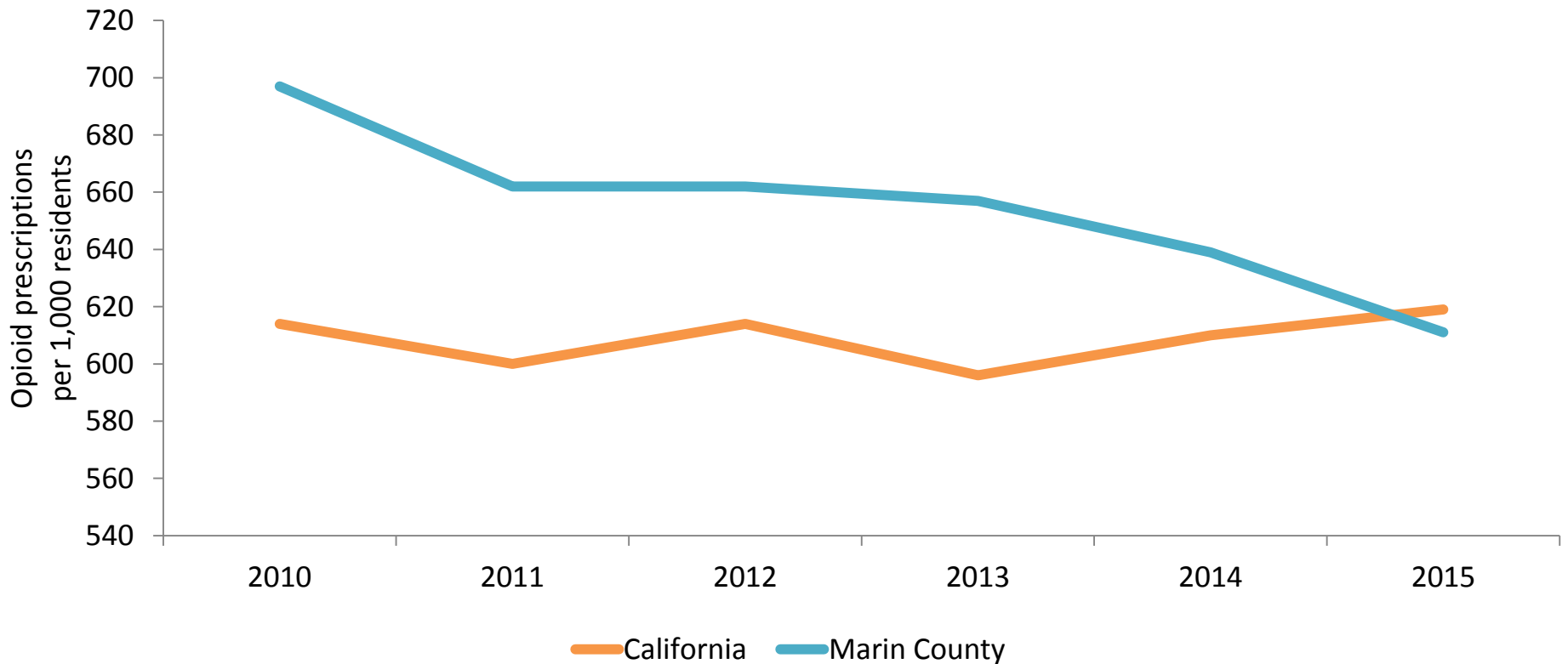
\*Excluding Buprenorphine prescriptions.

Source: Controlled Substance Utilization Review and Evaluation System (CURES); American Community Survey 5-year population estimates, 2010-2014



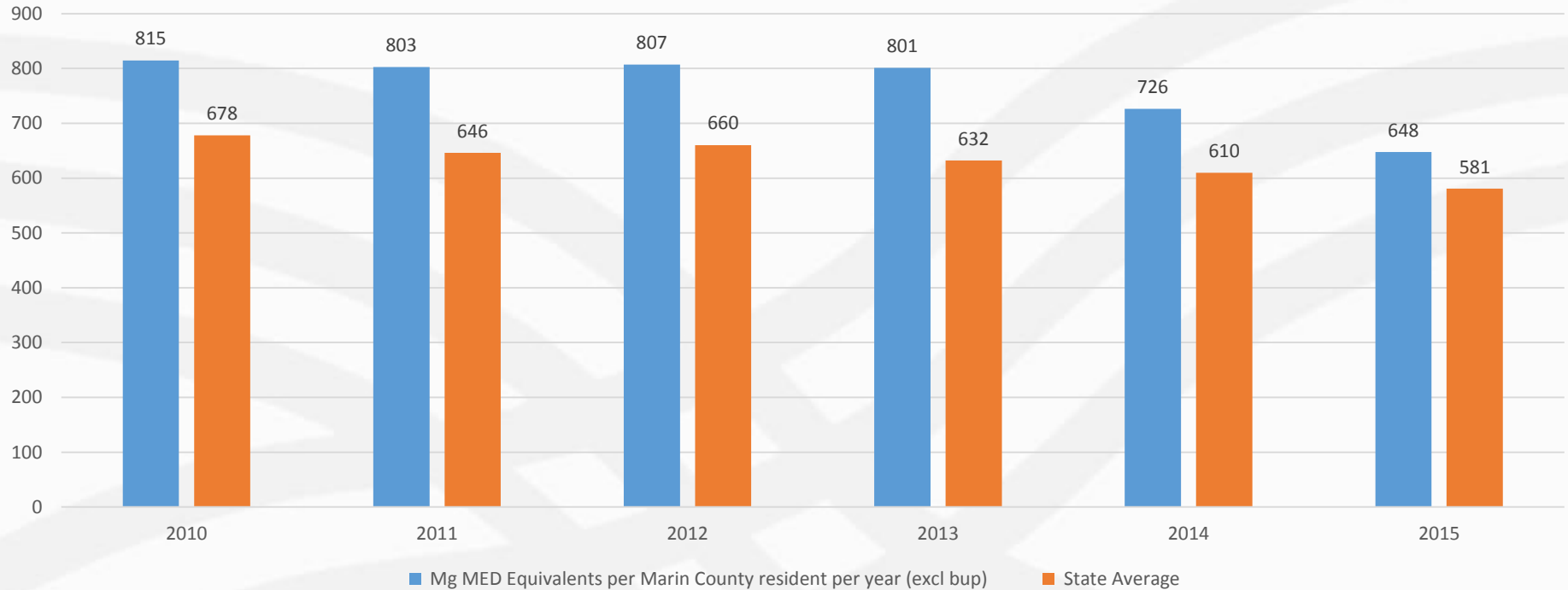
The number of opioid prescriptions in Marin County is **decreasing**, and is now **lower** than the state average.

**Opioid Prescriptions (excluding Buprenorphine) per 1,000 Residents  
Marin County and California, 2010-2015**



Source: California Controlled Substance Utilization Review and Evaluation System (CURES)  
Prepared by: Brandeis University PDMP Center of Excellence

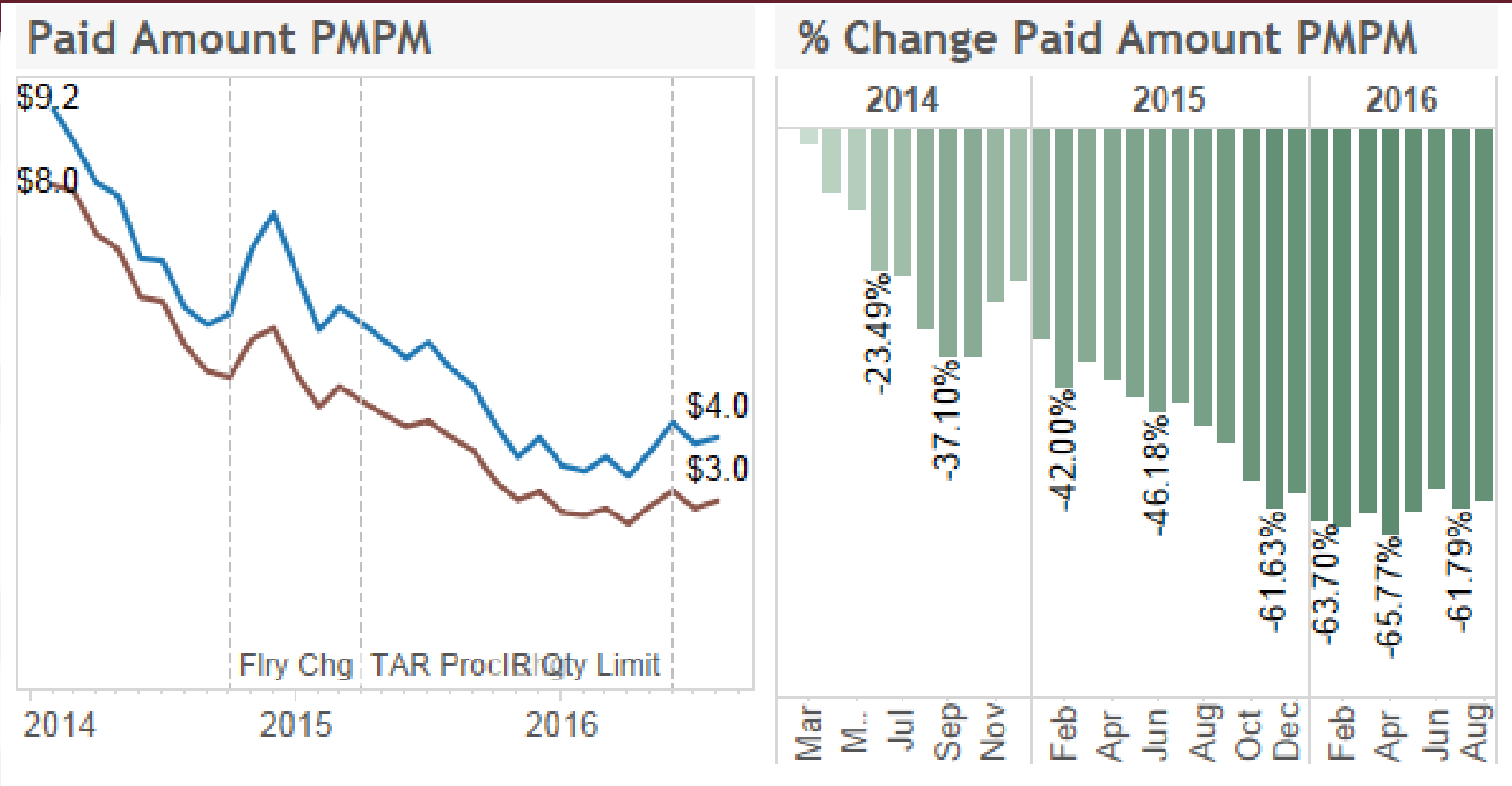
# Morphine Equivalent Doses (MED) (per county resident)



20% decrease in MEDs in Marin County since 2013.

14% decrease in State average.

# Savings in Opioid Drug Costs



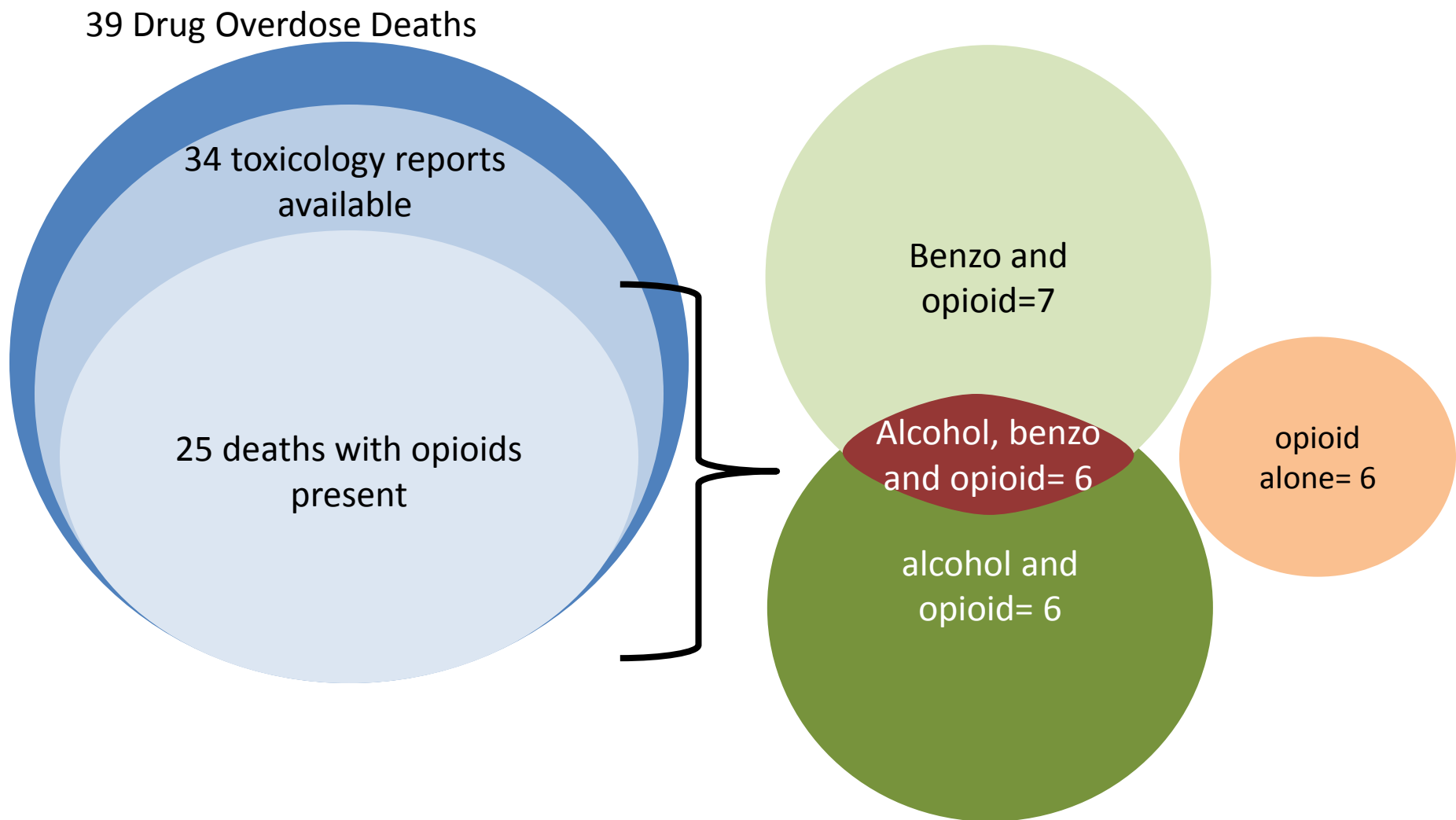
**60%  
Decrease**



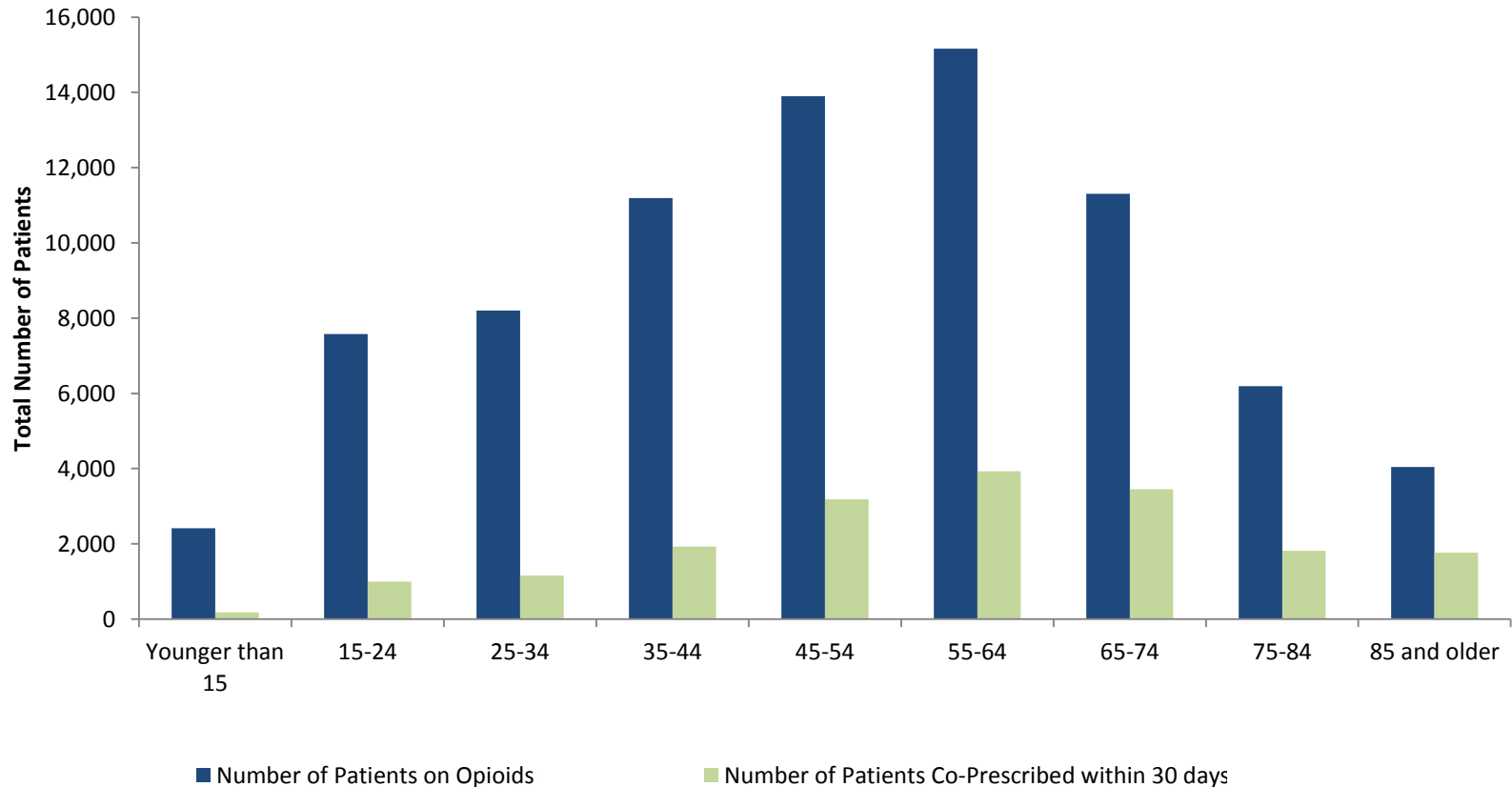
# Prescribing Guidelines Excerpt

- **F. CAUTIONS REGARDING CO-MORBIDITIES OR INTERACTIONS**
- Caution should be used in patients taking other sedatives, including alcohol, antihistamines and **benzodiazepines**, as such use increases the risk of over-sedation and adverse events.

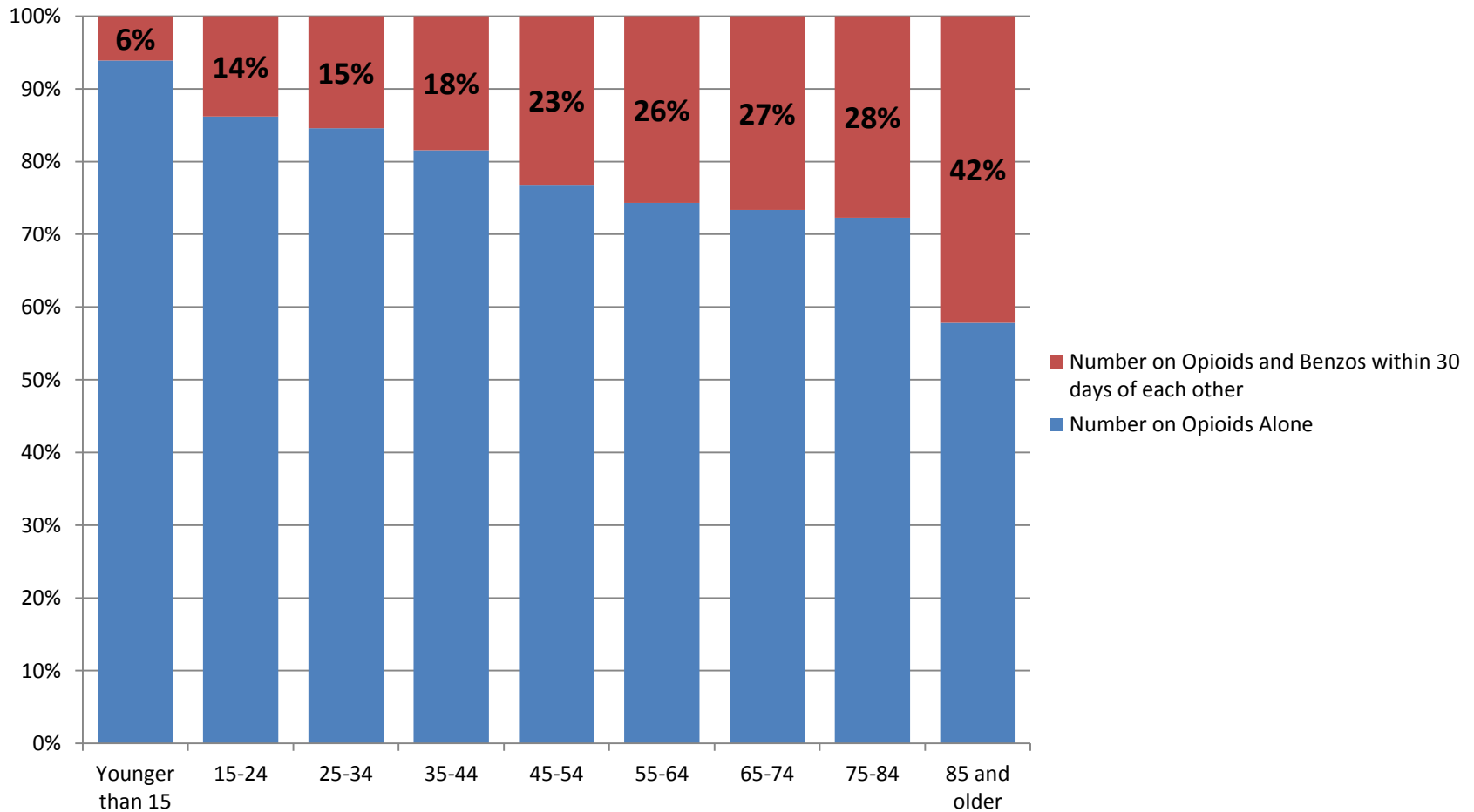
# Toxicology of Fatal Opioid Overdoses: Marin County, 2013



# Opioid and Benzo Co-Prescribing by Age; Marin County, 2012-2015



# Opioid and benzodiazepine co-prescribing: Marin County, 2012-2015



How can we reduce benzo and  
opioid co-prescribing?



# Prescribing Guidelines Excerpt

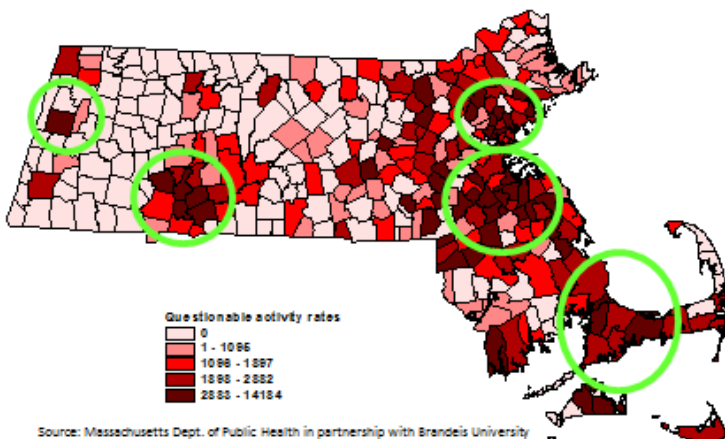
- **A. ASSESSMENT AND MONITORING**
  - The initial evaluation should also include documentation of the patient's mental health and substance use history, including review of the CURES system.

# CURES: Unsafe Prescribing Increases Death Risk

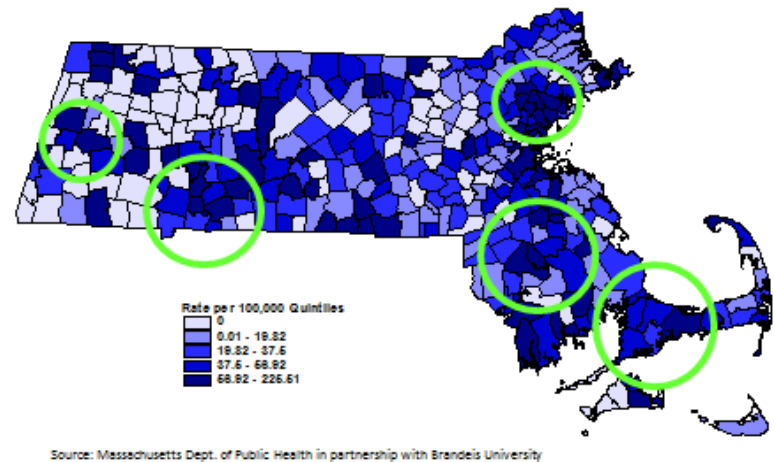
“Doctor Shopping”  
rates

Opioid Overdoses

2005 Prescriptions Associated with Questionable Activity  
(Rates per 100,000 Prescriptions) by Pharmacy Town



2005 Opioid-related Overdoses  
Rate per 100,000 by Town



Slide provided courtesy of Peter Kreiner, PMP Center of Excellence at Brandeis. Doctor shopping, the questionable activity, was defined as 4+ prescribers and 4+ pharmacies for CSII in six months.

# PATIENT ACTIVITY REPORT (PAR)



Department of Justice - Bureau of Narcotic Enforcement  
Controlled Substance Utilization Review & Evaluation System

01/17/2013 11:19

**CONFIDENTIAL  
DOCUMENT**

PATIENT/CLIENT ACTIVITY: CONSOLIDATED REPORT

## Prescription Drug Transaction Details:

Number of Hits: 9		Start Date: 01/17/2012						End Date: 01/17/2013						
Date Filled	First Name	Last Name	DOB	Address	Drug Name	Form	Str	Qty	PHY Name	PHY#	Dr.'s DEA #	Dr.'s Name	RX#	Refill#
01/20/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	VICODIN	TAB	1000 MG-5 MG	10	WALGREENS #610	PHY12345	AB5678909	SMITH, JOHN	02345678	3
1/23/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	APAP/HYDROCODONE BITARTRATE	TAB	500 MG-5 MG	40	CVS/PHARMACY #110	PHY12345	AB5678909	SMITH, JOHN	02375678	1
02/01/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	XANAX	TAB	100 MG-5 MG	60	WAL-MART #926	PHY12345	AB5678909	SMITH, JOHN	00284920	1
02/04/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	VICODIN	TAB	200 MG-5 MG	60	TARGET #261	PHY12345	AB5678909	SMITH, JOHN	09244920	2
03/01/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	APAP/HYDROCODONE BITARTRATE	TAB	5000 MG-5 MG	60	WALGREENS #100	PHY12345	AB5678909	SMITH, JOHN	04247940	4
03/08/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	XANAX	TAB	500 MG-5 MG	80	CVS/PHARMACY	PHY12345	AB5678909	SMITH, JOHN	02434960	1
03/07/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	APAP/HYDROCODONE BITARTRATE	TAB	500 MG-5 MG	60	WALGREENS	PHY12345	AB5678909	SMITH, JOHN	02795765	1
03/10/2012	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	APAP/HYDROCODONE BITARTRATE	TAB	500 MG-5 MG	90	CVS/PHARMACY #934	PHY12345	AB5678909	SMITH, JOHN	02549607	2
01/01/2013	JOHN	DOE	05/23/1960	2560 COLLEGE WAY, SACRAMENTO, CA, 95821	VICODIN	TAB	1000 MG-5 MG	30	TARGET #234	PHY12345	AB5678909	SMITH, JOHN	02649603	3

Disclaimer: The Patient Activity Report (PAR) is compiled from information maintained in the Department of Justice's Controlled Substance Utilization Review and Evaluation System (CURES). The CURES maintains Schedule II, Schedule III and Schedule IV prescription information that is received from California Pharmacies and is therefore only as accurate as the information provided by the Pharmacies. If data was submitted with errors or have unknowns within a field, it will not be displayed within this report.

# Prescribing Guidelines Excerpt

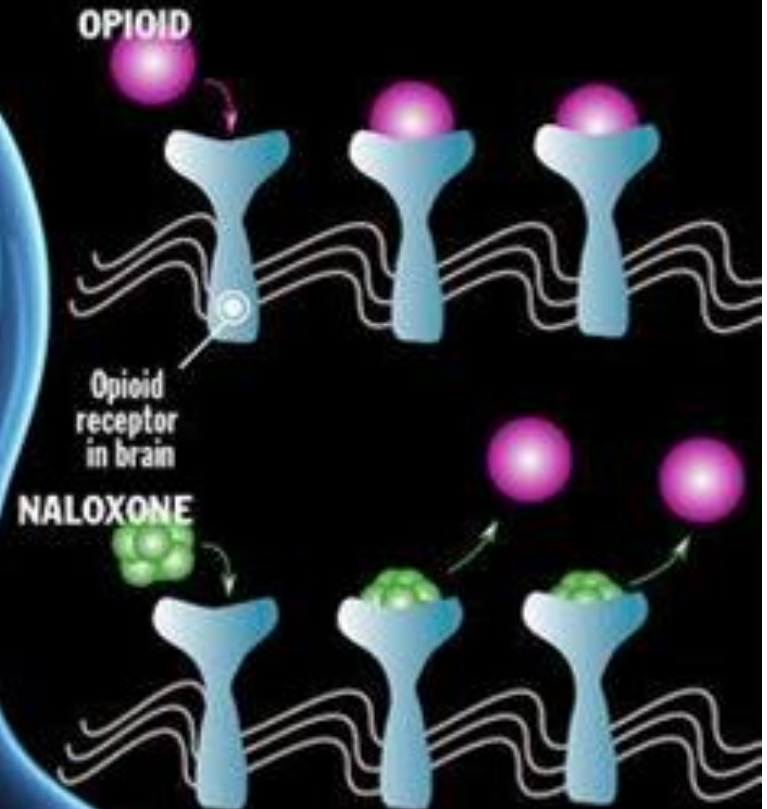
- **F. CAUTIONS REGARDING CO-MORBIDITIES OR INTERACTIONS**
  - Clinicians should consider prescribing naloxone to patients, or family members or friends of patients identified to be at high risk for overdose.

# HOW NALOXONE REVERSES AN OPIOID OVERDOSE

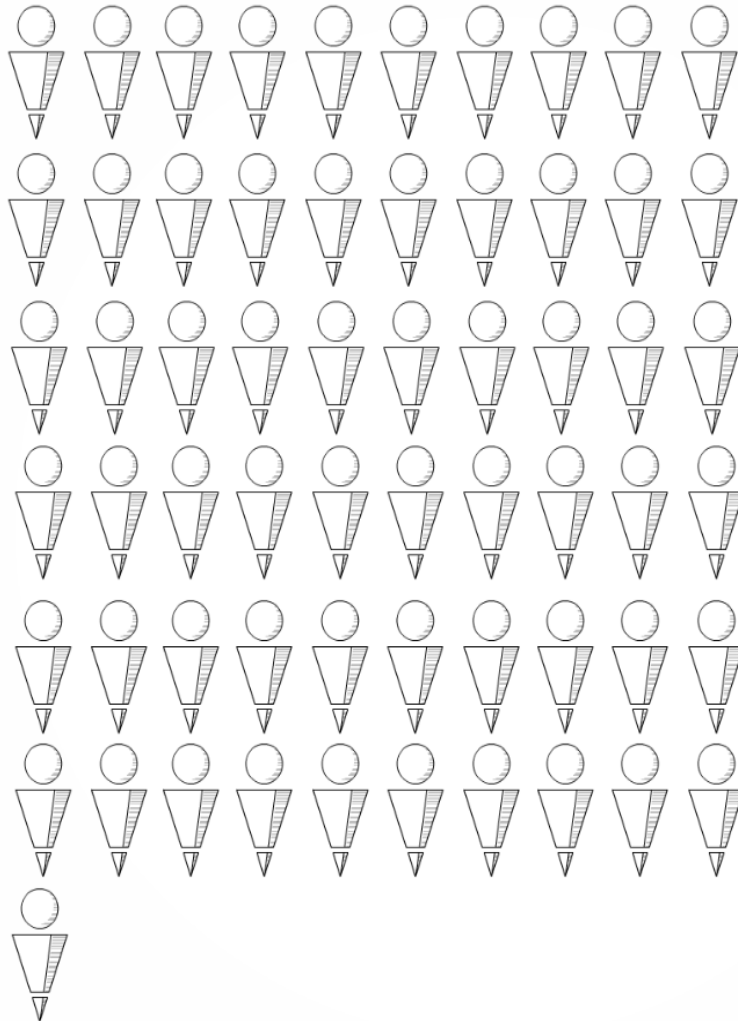
Opioids attach to receptors in the brain and send signals that block pain and slow breathing.

Overdoses occur when the brain's receptors are overwhelmed by the attached opioids, which causes the user to stop breathing.

When naloxone is administered via a nasal inhalant, it unseats the opioids from the receptors, allowing the user to breathe again and reverses the overdose.



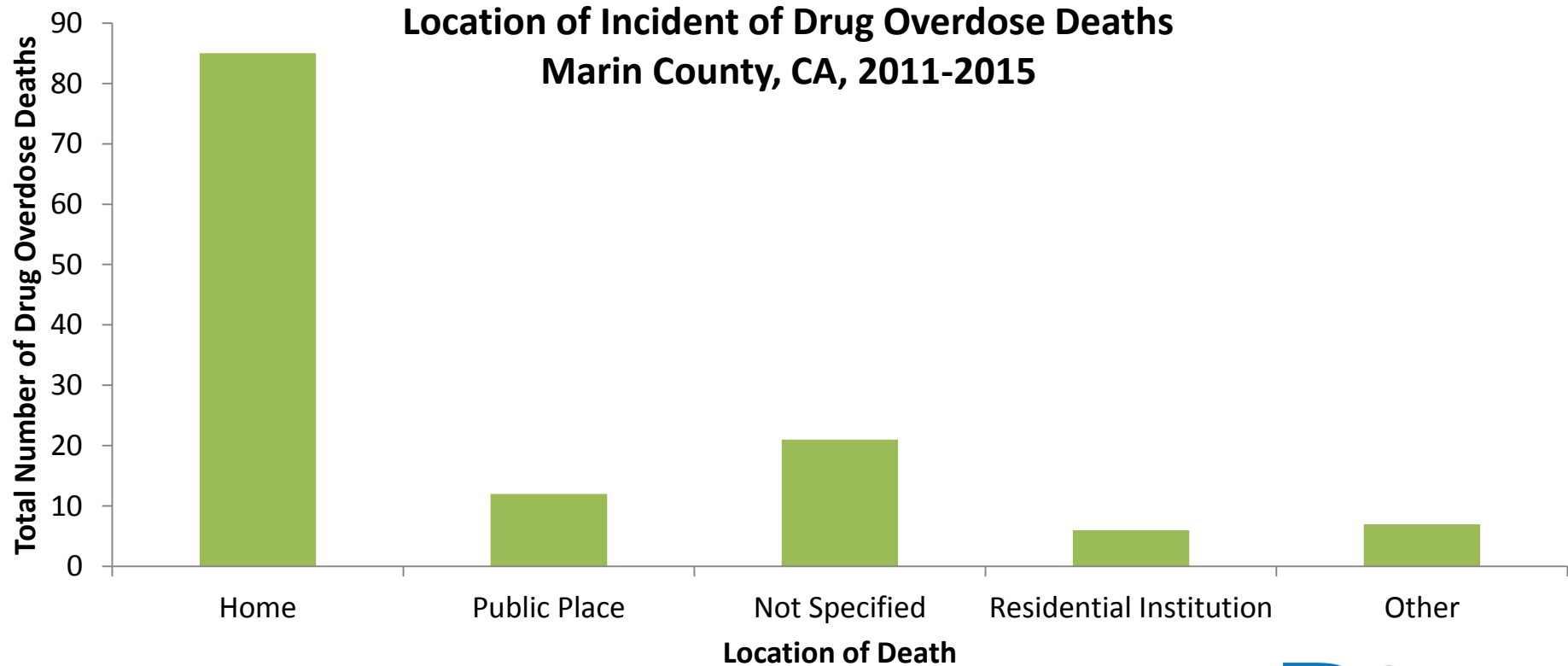
61 opioid overdoses were reversed with naloxone by Emergency Medical Services (911) in Marin County in 2015.



Source: Marin County Emergency Medical Services

**Over half** of all drug overdose deaths occur in the home.

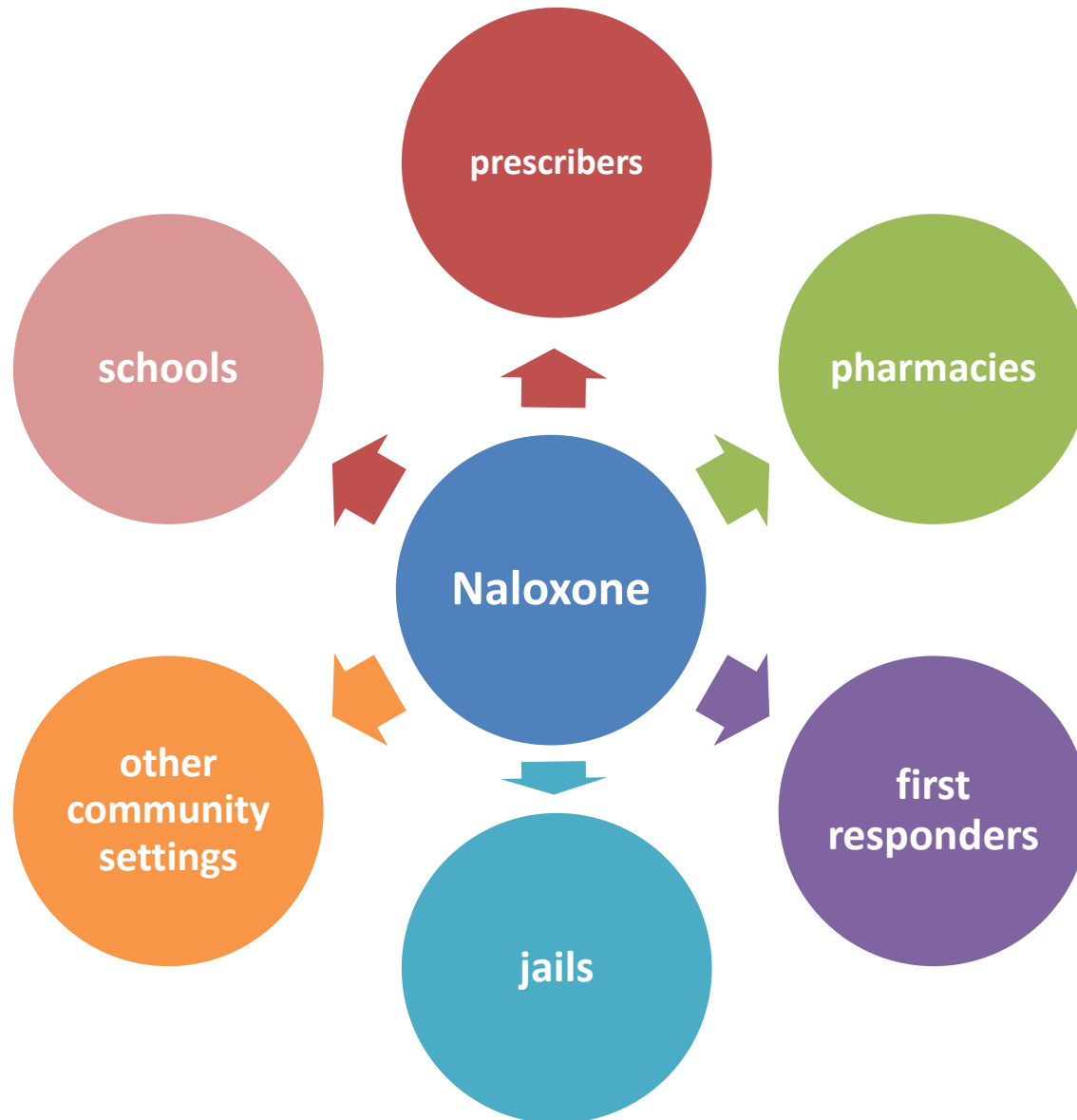
Naloxone is a **live-saving drug** that reverses opioid overdoses. RxSafe Marin is working to **distribute naloxone** throughout our community.



Data are preliminary and subject to change.

Source: California Department of Public Health, Center for Health Statistics and Informatics

# Increasing Naloxone Availability





How can we increase co-prescription of naloxone?

# Strategic Goal: Community Based Prevention Action Team

- Goal:
  - Residents make informed and responsible choices regarding prescription opioids
- Actions:
  - Develop communication campaign highlighting the risks of opioid use

# CONSIDER YOUR OPTIONS when addressing pain

## Myths vs. Facts

The screenshot shows the Nextdoor website interface. At the top, there is a green navigation bar with the Nextdoor logo, a search bar, and user options for 'Invite' and 'Maureen'. Below the navigation bar, the page is divided into a left sidebar and a main content area. The sidebar contains navigation options such as 'LOCAL', 'FAVORITE', 'CATEGORIES', 'PAGES', 'GROUPS', and 'APPS'. The main content area displays the 'Dominican' neighborhood page, which includes an 'Invite a few of your neighbors' button and a post titled 'April 30th is National Prescription Drug Take-Back Day'. The post is from 'Marin County Health & Human Services' and includes a link to a website for drop-off locations. Below the post, there are 'THANKED!' and 'REPLY' buttons, and a list of users who thanked the post, including Maggie R. and Elizabeth F. with their respective comments and timestamps.

Be in control  
of your body,  
emotions, and  
health

Make informed  
choices for better  
quality of life

**RS**SAFE  
**Rx**MARIN  
MARIN COUNTY PHARMACY COLLEGE GRADUATE MEDICATION TAKE-BACK

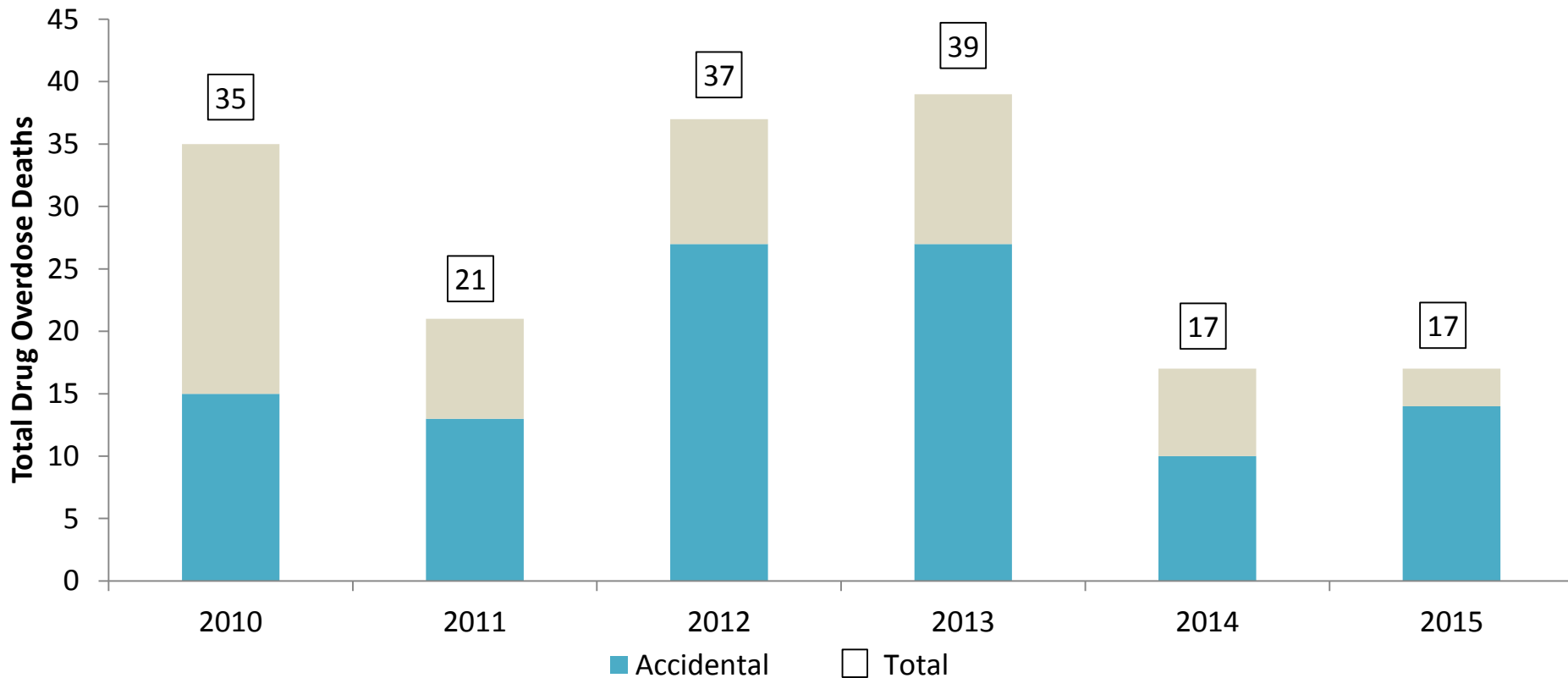
Learn more at [rxsafemarin.org](http://rxsafemarin.org)

# Prescribing Guidelines Excerpt

- **B. PATIENT AND FAMILY INFORMATION**
- Patients being offered opioids should be made aware that opioids are the leading cause of drug overdose deaths nationally

# RxSafe Marin views every accidental drug overdose death as preventable.

## Accidental and Total Drug Overdose Deaths - Marin County, 2010-2015



Source: California Department of Public Health, Center for Health Statistics and Informatics

Marin **prescribers** and **community** members want alternatives to opioid therapy for pain.



**60%** of Marin County community members surveyed were interested in alternatives to opioid therapy.



**80%** of Marin County prescribers surveyed wanted more resources for non-opioid management of chronic pain.

# Hack-a-Thon



“We need a better way to connect people with pain to local resources for non narcotic pain management.”

# THANK YOU



**Compartir medicamentos  
es peligroso:**  
Sharing medication  
is dangerous:

**¡Deshágase de ellos!  
Clean it out!**

Visite <http://tinyurl.com/MarinDisposal> para ver un listado de los  
sitios para entregar medicamentos gratis en el Condado de Marin.  
Visit <http://tinyurl.com/MarinDisposal> for free pharmaceutical drop-off locations in Marin County.

*Guárdelos bajo llave  
Lock it up  
Deshágase de ellos  
Clean it out  
Entréguelos al lugar apropiado  
Drop it off*

**RxSAFE  
MARIN**  
MARIN COUNTY PRESCRIPTION DRUG MISUSE AND ABUSE INITIATIVE

**Stay connected!**

[www.RxSafeMarin.org](http://www.RxSafeMarin.org)

Facebook.com/RxSafeMarin

RxSafeMarin@gmail.com



SO WAS FORMED THE JUSTICE LEAGUE OF AMERICA, SEVEN OF EARTH'S GREATEST HEROES JOINED IN A COMMON CAUSE, LO, THESE MANY YEARS GONE...

