

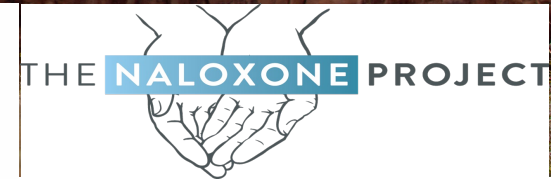
Naloxone Access in Colorado



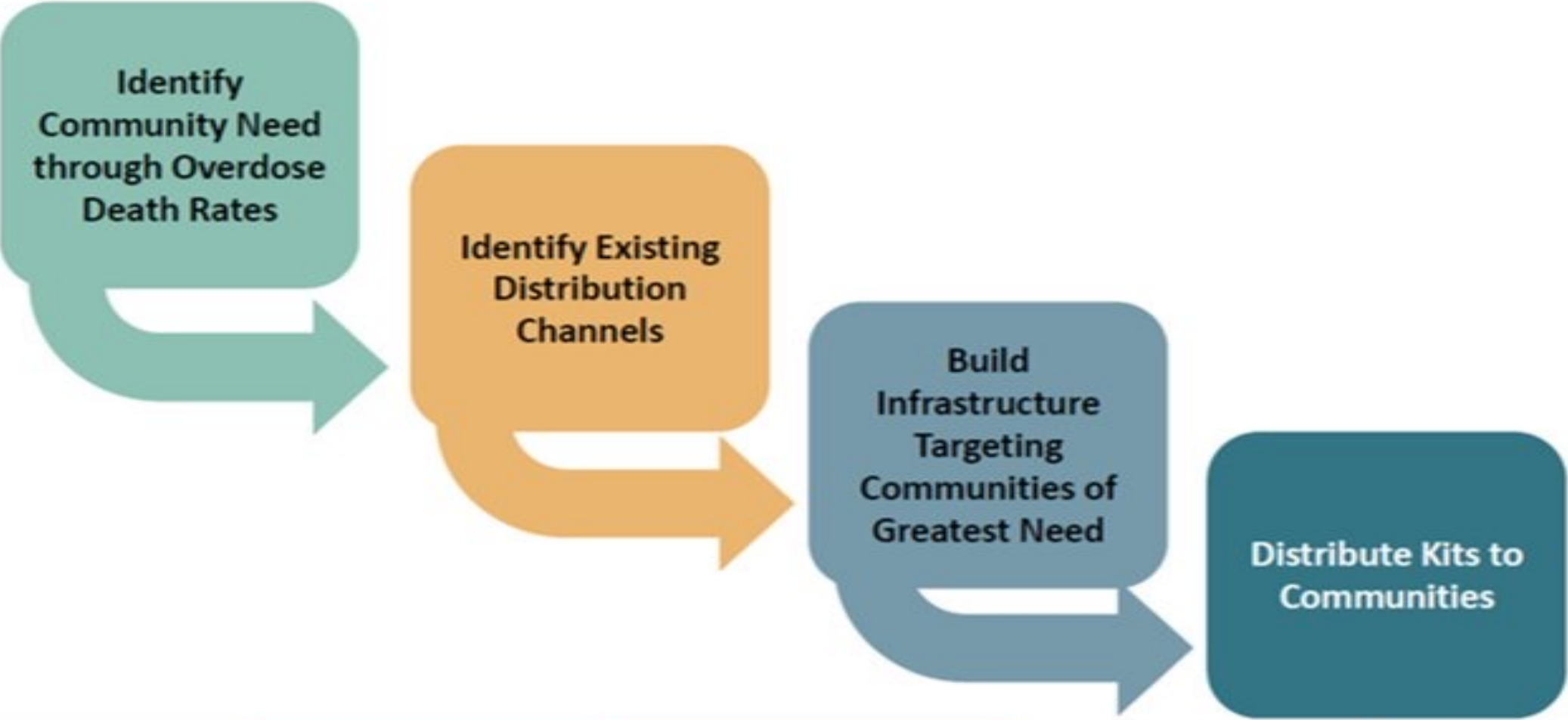
COLORADO
Department of Public
Health & Environment



COLORADO
Behavioral Health
Administration



Recommended Process for Distribution Saturation



How can communities optimize naloxone distribution?

1. Prioritize naloxone access for populations at highest risk for overdose

- People Who Use Drugs (PWUD), their peers, and their family
 - An unpredictable drug supply means that anyone using illicit drugs (not just opioids) falls into this category
 - People with OUD recently released from incarceration or discharged from the hospital considered in highest tier of risk
 - Scotland study indicated that overdose death rate could decrease 10%-30% if naloxone was distributed to high-risk population in the amount of 20x the total number of opioid overdose deaths (Bird et al, 2015)
- People prescribed opioids
 - Misuse rates still higher than 1990s when prescribing spiked



How can communities optimize naloxone distribution?

2. Prioritize distribution channels most effective at getting naloxone into the hands of those who will use it

- Community-based organizations
 - **Harm reduction agencies** have greatest success in naloxone actually being administered (Bohler, 2023)
 - Connections to populations of greatest need
 - Provide education on naloxone & other life-saving tools like fentanyl test strips
 - Free of cost to participant and does not necessarily require interacting with healthcare professional
 - Other community-based examples – LPHAs, AHECS, community nonprofits
- Pharmacies
 - Pharmacy distribution significantly increases community access to naloxone (Evoy et al. 2021; Freeman et al. 2018)
- Medical practitioners
 - Kits prescribed by medical practitioners have estimated 50% use rate (Irvine et al, 2022)
 - Co-prescribe naloxone for patients prescribed >50MME

Pharmacies

- Diverse funding options: Medicaid/Medicare, commercial insurance, out of pocket, free to patient using grant funds
- Offered by co-prescription, standing orders, or over the counter (OTC)
- NARCAN®, 4 mg naloxone hydrochloride nasal spray now over the counter
 - Available at CVS, Walmart, Target, Walgreens, RiteAid
- Price \$44.50 +



Naloxone Sources in CO

- **CDPHE Bulk Fund** - <https://cdphe.colorado.gov/naloxone-bulk-purchase-fund>
- **The Naloxone Project** - <https://www.naloxoneproject.com/>
- **Managed Service Organizations (MSOs)** – SUD Treatment Centers & Opioid Treatment Programs
 - Find your MSO on [this map](#)
- **Jail-Based Behavioral Services (JBBS)** – provides naloxone to jails
 - [Map of participating county jails](#)
 - **All Colorado jails** must provide 8mg of an opiate antagonist with education prior to release (HB22-1326)
- **Albuquerque Area Indian Health Board (AAIHB)** - <https://www.aaihb.org/community-health-education-and-resiliency-program/narcan-and-fentanyl-order-form/>
- **Community bulk pricing** for purchase from pharma distributor
- **NEXT Distro** – online and mail-based naloxone distribution
 - If you are a person who uses drugs or someone who is in community with people who use drugs and *cannot access naloxone any other way*, NEXT Distro is designed to support you.
 - <https://nextdistro.org/>
- **Remedy Alliance: For the People** – supplies community harm reduction agencies with intramuscular naloxone for people who use drugs
 - <https://remedyallianceftp.org/>

Funding Sources Allowing Purchase of Naloxone

- HRSA Rural Community Opioid Response Program
- HRSA Overdose Response
- SAMHSA State Opioid Response & Tribal Opioid Response grants
- Regional Opioid Abatement Councils
- Jail Based Behavioral Services
- BJA Comprehensive Opioid Stimulant & Substance Use Program
- Indian Health Services
- Correctional Treatment Cash Fund
- Private foundations



Use & Distribute Expired Naloxone!



The Network
for Public Health Law

Efficacy of Expired Naloxone

Numerous studies have demonstrated that naloxone retains its potency long past its expiration date, even when kept in less-than-ideal conditions. In perhaps the most comprehensive such study, expired naloxone samples – some which expired as early as the early 1990's - were obtained from fire departments, emergency medical services and law enforcement agencies.⁵ Upon testing, it was discovered that these samples, which had mostly been stored in ambulances, police cars, and similar environments, **retained nearly all of their active ingredient, even after nearly 30 years in storage.** Only one sample, which was more than 25 years past its expiration date, had fallen to below 90% of its original strength.⁶

Legality of Dispensing and Administering
Expired Naloxone in Colorado

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designed for injection with a needle and syringe, similar or device, and Narcan, a nasal spray. Testing on several listed expiration date revealed that they all tested at expiration. The researchers who conducted that study noted

that the data suggests “extending the shelf life of these products” to “aid in avoiding the significant expense of replacing them every two years and also increase the availability” of naloxone in communities.⁷ Even extremes of heat and cold seem to do little to impact the efficacy of naloxone. In another study, ampoules of naloxone were cycled through repeated heating and cooling cycles for 28 days. These **samples, which had been either repeatedly cooled to -20 degrees Celsius or heated to 80 degrees Celsius, “remained at comparable concentrations as ampoules stored at room temperature.”**⁸

<https://www.networkforphl.org/resources/legality-of-dispensing-and-administering-expired-naloxone-in-colorado/#:~:text=In%20summary%2C%20Colorado%20does%20not,individual%20prescription%20or%20standing%20order>

Panel of Statewide Agency Partners



COLORADO
Behavioral Health
Administration

Brianna Hird, MSW
Interim Project Director
SAMHSA State Opioid Response Grant



COLORADO
Department of Public
Health & Environment

Andrés H. Guerrero, MPH
Manager
Overdose Prevention Unit



Don Stader, MD FACEP
Executive Director

Innovative Ideas for Distribution

- Lack of harm reduction agencies, pharmacies and hospitals in many rural/frontier counties
- Potential role for naloxone vending machines?

Rural/Farming

- Training community leaders on Naloxone
- Stocking Naloxone in common shopping spaces (e.g., tractor supply, feed stores)
- Mobile pharmacies
- Telehealth/mail pharmacies

Latino/a/e

- Culturally appropriate and Spanish translated educational materials
- Distribution in Latine cultural centers and locations
- Intertwine efforts with housing and employment programs
- Partnering with Latino/a/e community leaders
- Engaging the faith-based community

Native/Tribal

- Increase distribution on tribal lands
- Develop culturally appropriate educational materials
- Mobile pharmacies
- Free kits for pharmacies on tribal lands
- Partner with local Native project coordinators

Urban Communities of Color

- Culturally appropriate education that recognizes intergenerational substance use
- Partner with churches, public housing, recreation, and substance use centers
- Partner with community and faith leaders for education and distribution
- Creating mobile care units to target communities with low access to medical care



Thank you!

Questions?



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