



**Testimony of Shawn M. Lang
Judiciary Committee
12 March 2014**

Senator Coleman, Representative Fox, members of the committee; I appreciate the opportunity to testify before you today. I'm Shawn M. Lang, the Director of Public Policy with the AIDS CT, formerly CARC and AIDS Project Hartford; Connecticut's only statewide HIV/AIDS organization. We work to ensure that the 10,000 people living with HIV/AIDS in our state have the housing, care, prevention and supportive services they need in order to live their lives in dignity.

I'm here to lend my support to **HB 5487 AN ACT PROVIDING IMMUNITY TO A PERSON WHO ADMINISTERS AN OPIOID ANTAGONIST TO ANOTHER PERSON EXPERIENCING AN OPIOID-RELATED DRUG OVERDOSE.** The changes proposed by the Department of Mental Health and Addiction Services will allow a person to administer Naloxone to bring someone out of an overdose, save a life and call 911 for further assistance.

In Connecticut, there were 2,231 opioid-involved deaths from 1997 to 2007. Nationwide, 18- to 24-year-olds are more likely to die from drug overdoses, primarily from prescription pain relievers, than from motor vehicle accidents.

Connecticut residents can be proud of the fact that we have a statute that allows for access to Naloxone for overdose reversal and a Good Samaritan law that protects someone from arrest if they call 911 to save a life while in possession of drug paraphernalia. HB 5487 strengthens both of those pieces of legislation, further clarifying who can administer Naloxone.

Naloxone has no street value, few if any side effects, can be administered either nasally or intramuscularly, and has far less potential for adverse reactions than an Epi-pen. Narcan provides a 30- to 90-minute window of opportunity to call 911 and get someone to the emergency room.

Given the spate of recent, high-profile opioid overdoses and news media coverage of overdoses in Connecticut - including a 14 year old from Windsor, and an email from someone whose 23 year old cousin just overdosed - it's distressing that the antidote for opioid overdose (Naloxone) is often missing from that discussion. N

arcan © (Naloxone) is an opioid antagonist currently available through a prescription that is capable of reversing an opioid overdose and saving a life. Although the presence of a solution to the immediate, life-threatening problem of overdose would seemingly be popular, Naloxone overdose programs have not grown at a rate to prevent the tragic and unnecessary accidental deaths from opioid overdoses.

There are highly successful Narcan distribution programs in neighboring states such as Massachusetts, Rhode Island, Vermont, New Jersey and New York that Connecticut would do well to emulate. Massachusetts has a model program in the Northeast where Emergency Medical Technicians (EMTs), police and firefighters are all trained to administer Naloxone when responding to an overdose. Rhode Island has a program allowing people to obtain Naloxone from their local Walgreens pharmacy through

a collaborative practice agreement, and in Massachusetts, a standing order allows people to obtain Naloxone directly through trained workers as part of a public health project.

We have an opportunity to increase access to Naloxone by providing more information and education to medical providers, substance use treatment programs, EMTs, law enforcement, pain management programs, pharmacists, family members, and others about the importance of this life-saving medication.

We convened a multi-disciplinary statewide Overdose Prevention Workgroup a year ago. Every week, we are fielding calls and emails from law enforcement, medical providers, security companies and others about Naloxone wondering where they can get training, and access. We have a gentleman's agreement with Walgreens 20 Centers of Excellence to have Naloxone in stock. And, a physician in New Fairfield has taken it upon himself to enter into an agreement with three private pharmacies to stock Naloxone for the prescriptions he writes.

And, just this Monday, US Attorney General Holder encouraged "law enforcement agencies to train and equip their personnel with the life-saving, overdose-reversal drug known as Naloxone." While this is not happening – yet - in CT, this is most certainly another piece to shore up the foundation for overdose prevention.

We've paved the way and have lots of evidence and support all around us. We just need your support to help us get there. There is no logical reason to fail to support the antidote to an opioid induced death and we have every reason to advocate for the expansion of something that could save your life or the life of someone you love.

I'd be happy to answer any questions you might have. Thank you.