



**Testimony in support of
H.B. No. 5782 AN ACT ALLOWING PHARMACISTS TO DISPENSE OR ADMINISTER
AN OPIOID ANTAGONIST TO TREAT OR PREVENT A DRUG OVERDOSE
General Law Committee
17 February 2015**

Senator Leone, Senator Larson, Representative Baram, Representative Kiner, and members of the committee, my name is Shawn Lang, and I'm the Deputy Director with AIDS CT, CT's only statewide organization whose sole focus is HIV/AIDS. I also convened and chair the CT Opioid Overdose Prevention Workgroup, which has been meeting for over two years to increase awareness about, and expand access to Naloxone, and opioid antagonist which reverses opiate overdoses.

The Opioid Overdose Prevention Workgroup is statewide and has multi-disciplinary, cross department participation. The workgroup is open and current participating partners include the Connecticut Departments of Mental Health and Addiction Services, Public Health, and Correction; the Connecticut Prevention Network; APT Foundation; AIDS Connecticut; Walgreen; researchers from Yale and Brown Universities; Recovery Network of Programs; and Medical Doctors. The goals of the group are to raise awareness about Naloxone, provide education to prescribers to increase access to and availability of Naloxone, and look at other states policies to continue to make additional positive changes here in CT.

I'm here to testify in support of **H.B. No. 5782 AN ACT ALLOWING PHARMACISTS TO DISPENSE OR ADMINISTER AN OPIOID ANTAGONIST TO TREAT OR PREVENT A DRUG OVERDOSE.**

Naloxone, is an opioid antagonist whose sole purpose and function is to bring someone quickly out of an opioid overdose allowing for time to get them to the emergency room. Opioids include Heroin, Morphine, Oxycodone, Fentanyl, Vicodin, and others. Naloxone has no street value, little to no side effects, and is safer to use without worrying about adverse reactions than an Epi-pen or Aspirin.

It would be hard to find someone in the state who hasn't heard of at least one news report on the opiate overdose problems we have. The bottom line with Naloxone is that it saves lives, and it just might give someone who has been saved to have the opportunity to access treatment and care.

We would all be hard pressed to find anyone of us who doesn't know at least one person in our own family, or someone close to us who hasn't struggled with addiction.

We have been working with Yale's Center for Interdisciplinary Research on AIDS, and the CT Office of the Chief Medical Examiner to sort and analyze accidental and undetermined opiate overdose deaths in CT. While this project is close to completion, we can tell you that between 2009 -2013, there were **1,540 accidental and unintentional opioid involved deaths, that occurred in 143 of our 169 cities and towns.**

We know that some of these overdose deaths are related to prescription opiates, and, for some people, that leads them to using Heroin which is much less expensive and widely available.

In order to access Naloxone today, I would have to get a prescription from my doctor for Naloxone, go to a pharmacy, and hope that the pharmacy has Naloxone in stock, and knows that state statute allows an individual to purchase up to ten syringes without a prescription. This can be an onerous process. There is still tremendous stigma attached to drug use, especially opiate use. Asking your primary care provider for this prescription may be difficult to do. Finding a pharmacy that stocks Naloxone is another challenge.

We did a small survey with twenty pharmacies around the state to ask if they had Naloxone in stock and were aware of the updates in the state statutes, were they aware of the statute that allows for over the counter purchase of syringes, and if so, did they sell syringes without a prescription. The results were rather abysmal. We are working closely with colleagues at Walgreens to get them on board, and are working with the Department of Public Health to develop and distribute an educational packet for pharmacies as a way to update them.

The most humane and expedient way to access Naloxone for a friend or loved one, is to be able to go directly to the pharmacy and purchase it. Pharmacists already act as prescribers and administrators with flu shots. With Naloxone, they would prescribe two doses of Naloxone (recommended), and two syringes, provide a brief education on how to recognize an overdose and how to administer Naloxone. It's quite simple, and would bring CT in line with our neighbors in MA and RI.

I remember a commercial that was on long ago. Its tag line was "No one wants to grow up to be a junkie." But, the sad truth is, some people do become addicted and in a caring society, we must do what we can to provide them, their families and others with all the tools we can to save their lives.

Please support HB 5782.

Thank you, and I'm happy to answer any questions you might have.

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