STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

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COMMISSIONER

Testimony by Miriam Delphin-Rittmon, Commissioner Department of Mental Health and Addiction Services Before the Public Health Committee

Good Afternoon Senator Gerratana, Representative Ritter and distinguished members of the Public Health Committee. I am Commissioner Miriam Delphin-Rittmon of the Department of Mental Health and Addiction Services, and I am here today to testify regarding raised Senate Bill 352 AN ACT CONCERNING PRESCRIPTIONS FOR AND THE DISPENSING OF OPIOID ANTAGONISTS. I want to thank the Committee for allowing me the opportunity to speak to you about this proposed bill.

Thank you for continuing your efforts to address the opioid abuse public health crisis in Connecticut. This crisis will not end without the combined efforts of all branches of government and involvement at both the state and community levels. I know many of you have hosted or will be hosting forums in your districts on this topic and am grateful that you have invited me to participate in many of them. These forums will raise awareness regarding treatment, recovery and prevention of addiction. I have been touched by the stories that have been shared during these community conversations.

DMHAS is strongly in support of making naloxone as widely available as possible. Naloxone, or Narcan as it is commonly known, is an opioid antagonist, a rescue medication, which reverses an opioid overdose. Our efforts have been paved by the Governor's legislation, passed last year, which allows pharmacists to prescribe naloxone; individuals are now able to go to local pharmacies to access a naloxone prescription. DMHAS staff have provided 70 training sessions on naloxone, attended by 1225 police, treatment providers, families and community members. Additional training sessions are scheduled and we will continue to respond to training requests. DMHAS has worked closely with state police on their naloxone initiative. The department has distributed kits provided by the Department of Public Health and has provided naloxone to every patient leaving Connecticut Valley Hospital if they had been admitted for opioid addiction treatment.

While we are committed to the widespread availability of naloxone we feel that SB 352, while laudable in intent, is unnecessary given the comprehensive efforts underway by DCP to train pharmacists to prescribe naloxone, to intervene with their patients and customers to provide education and training on the proper use of naloxone, and provide information on substance use treatment and other related community resources.

Thank you for the opportunity to address the Committee on this important issue. I would be happy to answer any question you may have at this time.

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