



**FINANCE, REVENUE AND BONDING COMMITTEE
MONDAY, March 29th, 2016**

Testimony of Ingrid Gillespie, President of the Connecticut Prevention Network and Executive Director of Communities 4 Action

Senator Fonfara and Representative Berger and members of the Finance, Revenue and Bonding Committee, my name is Ingrid Gillespie, President of the Connecticut Prevention Network. I am offering testimony in support of :

Committee Bill No. 5 AN ACT ESTABLISHING A SURCHARGE ON THE MANUFACTURE AND DISTRIBUTION OF OPIOIDS AND FUNDING FOR OPIOID ABUSE PREVENTION AND TREATMENT.

Thank you for the opportunity to provide testimony.

The **Connecticut Prevention Network (CPN)** is an association of the state's 13 community partnership **Regional Action Councils (RACs)** that work to provide every community in the state with education, training, and advocacy for substance abuse prevention and related community concerns including prescription drugs and illicit opioid abuse. We are recognized as highly effective, community-based partnerships operating on average of a 1-2 paid staff team.

A year ago I provided testimony in support of a similar bill. At that time, I talked about the data supporting the need for prevention. Specifically, I identified the number of overdose deaths which continues to rise in Connecticut and indicated that Connecticut spends 16.7% of its budget addressing the negative costs of substance abuse and addiction. These costs are primarily in health care, judicial and education systems. (Source: CASA)

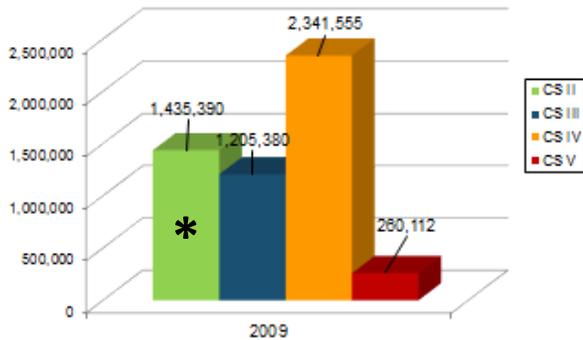
Today, there is even more need for prevention to address the opioid epidemic. Four of five new heroin users started out using misusing prescription painkillers. Heroin use is the major contributor to the rise in opioid overdose deaths (Source: ASAM 2016 Facts and Figures).

But how did we get here? According to Dr. Nora Volkow MD from the National Institute on Drug Abuse (NIDA), the following factors have contributed to the severity of the current prescription drug abuse

- Drastic increases in the number of prescriptions written and dispensed. See graphs on page 2.
- Greater social acceptability for using medications for different purposes
- Aggressive marketing by pharmaceutical companies

“Together these factors have helped create the broader “environmental availability” of prescription medications in general and opioid analgesics in particular” (Source: NIDA presentation to Senate Caucus on International Narcotics Drug Control May 14, 2014).

Controlled Substance Rx Dispensed By Schedule - 2009



Controlled Substance Rx Dispensed By Schedule - 2015

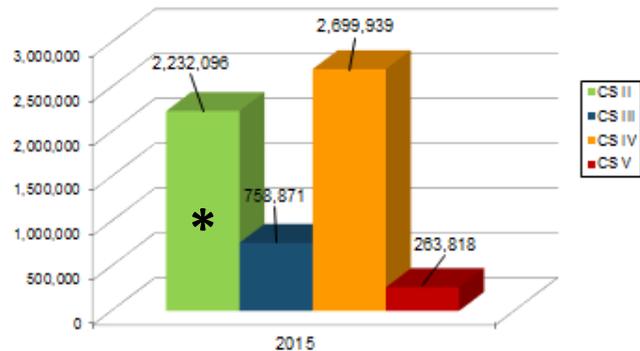
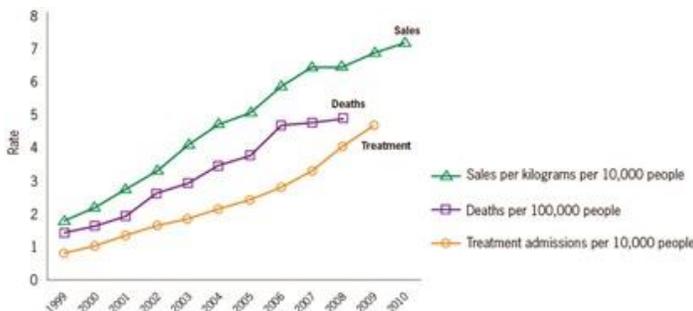


Figure: There was a 56% increase in Schedule II drugs (asterisks) dispensed in Connecticut between 2009 and 2015. Source: CT Dept of Consumer Protection.

Connecticut has passed and introduced a number of bills, established policies and reconvened the Addiction Drug Policy Council (ADPC) as strategies to address the opioid crisis in Connecticut while ensuring that the purpose of opioid pain relievers to reduce suffering is not jeopardized.

However, all of the research supports a multi-strategy approach that supports prevention, access to treatment and harm reduction, i.e., preventing opioid overdose deaths. In these challenging times, the funds to support these initiatives are being cut drastically or eliminated. We need dollars to support these and this bill can provide those funds from a logical source. As noted above, Dr. Volkow saw an increase due to aggressive marketing from pharmaceutical companies. Furthermore, data shows correlations between sales, treatment and overdose deaths. See figure below.

Contributing to the rising death rate has been an overall increase in the availability of prescription medications, especially opioid analgesics. The rates of sales for opioids, opioid-related deaths and treatment admissions have all increased between 1999 and 2010.



Source: PDMP Brandeis University Center for Excellence

This bill would provide DMHAS with the badly needed funds to provide grants-in-aid for regional opioid abuse prevention and treatment programs. We cannot adequately address this issue without the funds to strengthen both prevention and treatment resources.

Thank you for your time and please pass Bill No.5 that provides desperately needed funds to address the opioid crisis.

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