

## **Examiner Column from Dr. Rosana Pellizzari, Medical Officer of Health Peterborough County-City Health Unit**

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### **Action Needed to Halt the Growing Epidemic of Opioid-related Deaths**

Open any newspaper these days and a story about Fentanyl is bound to catch your eye. A powerful narcotic, Fentanyl has two main avenues for access. One is via a prescription for the patch, first marketed for palliative care in the mid-90's and now being used to treat chronic pain. Patches are being recycled, stolen or diverted on to the street for recreational use. The other route, and the one that has been making headlines, is via drug trafficking, produced in illegal labs and pressed into pills or cut with heroin or even stimulants like cocaine. Either way, it has now supplanted oxycodone on the street but with a much more lethal kick – and we are seeing its impact at our local emergency department, as well as at morgues across the country.

Internationally, August 31 is recognized as Overdose Awareness Day, to remember the lives that have been lost and the families that have been shattered by a drug overdose, which in most cases is accidental. This year, as the day came and went, it is even clearer that we need stronger and more coordinated federal and provincial action to reduce the growing human death toll. If these deaths were being caused by a virus or bacteria, we would have declared an epidemic long ago.

Drug overdoses are the third leading cause of accidental deaths in this province, and opioid-related overdoses killed more people in 2013 than motor vehicle collisions. What isn't always understood is that many of these deaths occur in people who are taking prescription painkillers for legitimate purposes. Or how many become addicted while taking these drugs as prescribed. Researchers in Toronto recently found that more than one in every 10 patients prescribed the drugs for the first time became chronic users and that one in every 350 men and one in every 850 women prescribed these drugs died as a result of taking them. Dr. Juurlink, one of the study's authors, recommends that doctors be restricted in the amount of opioids they can prescribe unless they have taken additional training in pain management.

Canada and the United States surpass all other countries in the world with their rate of prescription opioid consumption. And, when we examine local data from the Ontario Drug Benefit plan, it appears that Peterborough's rate of opioid prescribing is higher than the provincial average for all opioids with the exception of oxycodone, even after excluding the methadone that is being prescribed locally to treat addictions. Not surprisingly, our rates of emergency room visits are also worse. For the past several years, a group of concerned physicians and pharmacists have been advising us at public health on ways to reduce the opioid risks here in Peterborough. We've had some successes but despite our best efforts, this is not a problem that we in Peterborough can fix alone.

As someone who is concerned about the health and wellbeing of every member of our community, I believe that more needs to be done to prevent the harms and deaths associated with opioids. Unlike reportable diseases such as measles or salmonella, there is no mandatory or real-time reporting of drug-related deaths in Ontario. I am forced to wait years before drug-related mortality data becomes available.

Ontario needs to bring together all of the stakeholders: the prescribers, the pharmacists, first responders, mental health and addiction specialists, and harm reduction agencies, to name a few, to come up with a comprehensive provincial strategy to reduce the loss of life we are experiencing due to opioids. We need safer prescribing practices by doctors, and better access to Naloxone, a rescue medication that can temporarily reverse the effects of an overdose. In fact, many of us believe that all patients being prescribed high doses of opioids should have Naloxone at the ready, and their family members should know how to administer it.

In my opinion, this is a complex problem, worthy of greater consideration and more action at many levels. The alarm bells have been sounding for some time; it is now time to act on a problem that has been continually growing worse for the past two decades.

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