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DHEC Health Advisory

Distributed via Health Alert Network
December 21, 2020 11:00 AM
10482-DHA-12-21-2020-OPIOID

Increase in Fatal Drug Overdoses Across the United States Driven by Synthetic Opioids Before and During the COVID-19 Pandemic

Summary

The purpose of this Health Alert Network (HAN) Advisory is to alert stakeholders to—

- (1) substantial increases in drug overdose deaths across the United States, including South Carolina, primarily driven by rapid increases in overdose deaths involving synthetic opioids excluding methadone (hereafter referred to as synthetic opioids), likely illicitly manufactured fentanyl;
- (2) a concerning acceleration of the increase in drug overdose deaths, with the largest increase recorded from March 2020 to May 2020, coinciding with the implementation of widespread mitigation measures for the COVID-19 pandemic;
- (3) the changing geographic distribution of overdose deaths involving synthetic opioids, with the largest percentage increases occurring in states in the western United States as well as South Carolina;
- (4) significant increases in overdose deaths involving psychostimulants with abuse potential (hereafter referred to as psychostimulants) such as methamphetamine; and
- (5) recommendations for communities when responding to the evolving overdose crisis.

Background

The most recent provisional data available from the Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) indicate that approximately 81,230 drug overdose deaths occurred in the United States in the 12-months ending in May 2020. This represents a worsening of the drug overdose epidemic in the United States and is the largest number of drug

overdoses for a 12-month period ever recorded. Drug overdose deaths during this time increased more than 20% in 25 states and the District of Columbia, this includes South Carolina.

The recent increase in drug overdose mortality began in 2019 and continues into 2020, prior to the declaration of the COVID-19 National Emergency in the United States in March. The increases in drug overdose deaths appear to have accelerated during the COVID-19 pandemic.

Synthetic opioids are the primary driver of the increases in overdose deaths. The 12-month count of synthetic opioid deaths increased 38.4% from the 12-months ending in June 2019 compared with the 12-months ending in May 2020. Of the 38 jurisdictions with available synthetic opioid data, 37 jurisdictions reported increases in synthetic opioid overdose deaths for this time period. Eighteen of these jurisdictions reported increases greater than 50%; this includes South Carolina.

CDC released a HAN on this topic on December 17, 2020, and the full text can be accessed at <https://emergency.cdc.gov/han/2020/han00438.asp>

Recommendations

These newly released provisional fatal overdose data, coupled with the known disruption to public health, healthcare, and social services as a result of the COVID-19 pandemic and related mitigation measures, highlight the need for essential services to remain accessible for those most at risk of overdose and the need to expand prevention and response activities. CDC recommends the following actions as appropriate based on community needs and characteristics:

1. Expand the provision and use of naloxone and overdose prevention education

Community-Based Organizations:

- Raise awareness about the critical need for bystanders to [have naloxone on hand and use it during an overdose](#).
- Increase awareness about the risk of using drugs when alone and emphasize the need for risk reduction strategies among people who use drugs, including during the COVID-19 pandemic.
- Increase the provision of overdose prevention education and take-home naloxone.

Healthcare Providers:

- [Prescribe naloxone](#) to individuals at risk for opioid overdose, such as those with a prior history of overdose, those with opioid use disorder, and individuals using

illicit opioids and other drugs that might be mixed with illicitly manufactured fentanyl.

- Co-prescribe naloxone to patients with high morphine milligram equivalents and those receiving opioids and benzodiazepines.
 - Expand locations in which overdose prevention education and take-home naloxone are provided, especially in rural areas.

2. Expand access to and provision of treatment for substance use disorders

Healthcare providers:

-Provide Medications for Opioid Use Disorder (MOUD). Treatment with the FDA-approved medications methadone, buprenorphine, or naltrexone are lifesaving and the [most effective forms of treatment for opioid use disorder](#).

-Provide Stimulant (Cocaine, Methamphetamine) Use Disorder Treatment. Unlike opioid use disorder treatment, there are no FDA-approved medications to treat stimulant use disorders, but other therapies have demonstrated effectiveness. For additional information about treatment strategies, see [SAMHSA's Treatment for Stimulant Use Disorders](#).

- South Carolina recently established the [SC HOPES support line](#) to help individuals seek resources for increased symptoms of mental health or substance abuse issues related to the COVID-19 crisis. The statewide support line, which can be reached 24/7 at 1-844-SC-HOPES (724-6737) will connect callers to trained clinicians who can address their specific needs. Share information about this resource widely.

3. Intervene early with individuals at the highest risk for overdose

Harm reduction organizations:

-Link people who are at risk for overdose with care and track their retention in care programs. People who are at risk include those who have recently been treated for a non-fatal overdose. Consider expanding peer navigator programs or using recovery coaches.

Healthcare providers:

- Provide active referral-to-treatment options and recovery support services.
- Implement post-overdose response protocols, including in emergency departments, that incorporate links between public health, treatment providers, community-based service organizations, and healthcare providers. These

protocols promote overdose education, treatment, linkage to care and MOUD, and naloxone distribution.

-Initiate or continue medications for opioid use disorder among people leaving correctional and detention facilities.

4. Improve detection of overdose outbreaks due to fentanyl, novel psychoactive substances (e.g., fentanyl analogs), or other drugs to facilitate an effective response

Medical examiners and coroners

-[Screen specimens](#) using an enzyme-linked immunosorbent assay (ELISA) test that can detect substances including fentanyl and fentanyl analogs.

- Screen for novel psychoactive substances prevalent in your region or when an unexplained increase in drug overdoses occurs.

Harm reduction organizations:

-Partner with public safety and public health to obtain and disseminate the latest information on local drug supply and overdose trends using tools like the [Overdose Detection – Mapping Application Program \(ODMAP\)](#).

Resources for Additional Information

-Full CDC HAN, Increase in Fatal Drug Overdoses Across the United States Driving by Synthetic Opioids Before and During the COVID-19 Pandemic:

<https://emergency.cdc.gov/han/2020/han00438.asp>

-SC, Access to Naloxone: <http://naloxonesavessc.org>

-SC, Screening, Brief Intervention, and Referral to Treatment (SBIRT) model: <http://scsbirt.com>

-SC, Finding Help: <http://justplainkillers.com/find-help/>

-SC, Safe Medication disposal sites for unused prescriptions: <http://justplainkillers.com/drug-safety/>

-SC, SC HOPES support line was established to help residents with substance use or mental health issues related to COVID-19: 1(844)SC-HOPES (724-6737)