



Legislation Text

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A RESOLUTION calling on the Washington state Legislature to pass Engrossed Substitute House Bill 1671 to expand access to opioid antagonists such as naloxone for opioid overdose.

WHEREAS, deaths from opioid overdose in Washington state have nearly doubled since 2012, and

WHEREAS, four hundred sixty-seven King County residents died of opioid overdose between 2009 and 2011, with the majority coming from prescription medications, and

WHEREAS, opioid antagonists like naloxone have been shown to be an effective tool in reversing opioid overdose, and reducing opioid-related death, and

WHEREAS, naloxone is a cost-effective medication that non-medical people can easily administer through a nasal spray or a shot to the upper arm or leg, and

WHEREAS, community-based naloxone administration is proven to save lives, and from 1996 to 2010, lay people across the country reversed over ten thousand overdoses, and

WHEREAS, a 2013 survey at Public Health needle exchange locations showed that one in five respondents had overdosed at some point in the last year, and

Public Health - Seattle & King County's downtown Seattle needle exchange program recorded one hundred eighty-seven overdose reversals through use of naloxone in two years, averaging over one per week, and

WHEREAS, King County Jail Health Services started a naloxone dispensing pilot program in 2012 that has trained one hundred six people with a history of substance abuse on the use of naloxone, and the pilot program has reported successful overdose reversals by both those trained through the program and friends and

family members trained by the trainees, and

WHEREAS, current Washington law allows limited possession and administration of naloxone by nonlicensed people, Engrossed Substitute House Bill 1671 would clarify and expand distribution rules to allow for distribution of naloxone by non-licensed individuals via standing orders, and

WHEREAS, Engrossed Substitute House Bill 1671 would allow Public Health - Seattle & King County to expand distribution of naloxone in field-based operations by agencies and nonclinical partner organizations throughout King County, and

WHEREAS, the Center for Evaluating Emergency Medical Services in King County supports expanding access to naloxone for emergency medical technicians and paramedics, and

WHEREAS, the time between an overdose and the arrival of paramedics can be significant enough to mean the difference between life and death, and Engrossed Substitute House Bill 1671 would expand access to naloxone to first responders, such as police and fire fighters, who can administer the drug and help patients resume normal breathing an average of five to ten minutes earlier than arrival of paramedics, and

WHEREAS, Engrossed Substitute House Bill 1671 would have a positive impact on equity and social justice by decreasing health disparities caused by opioid overdose, particularly among American Indian and Alaskan Natives, and

WHEREAS, broad access to naloxone is endorsed by many groups, including the Substance Abuse and Mental Health Services Administration, the Office of National Drug Control Policy, the American Public Health Association, the American Pharmacists Association, the Department of Justice, the American Medical Association and the United Nations Office on Drugs and Crime;

NOW, THEREFORE, BE IT RESOLVED by the Board of Health of King County:

The Board of Health calls on the Washington state Legislature to pass Engrossed Substitute House Bill 1671, increasing access to opioid antagonists to prevent opioid-related overdose deaths.