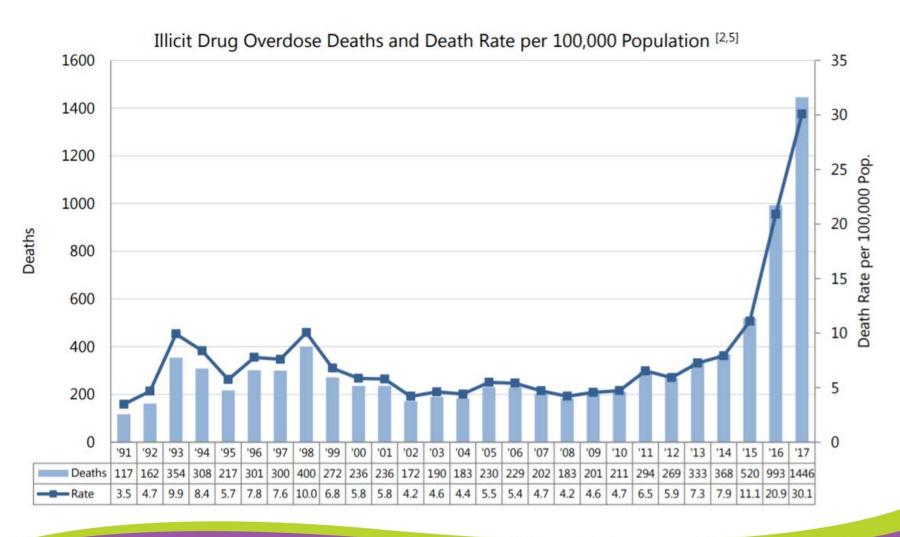
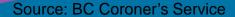
Opioid Overdose Emergency and VCH Response

Reka Gustafson, Deputy Chief Medical Health Officer
Chris VanVeen, Director, Strategy & Public Health Planning
Vancouver Coastal Health
April, 17th 2018



Overdose Deaths in BC

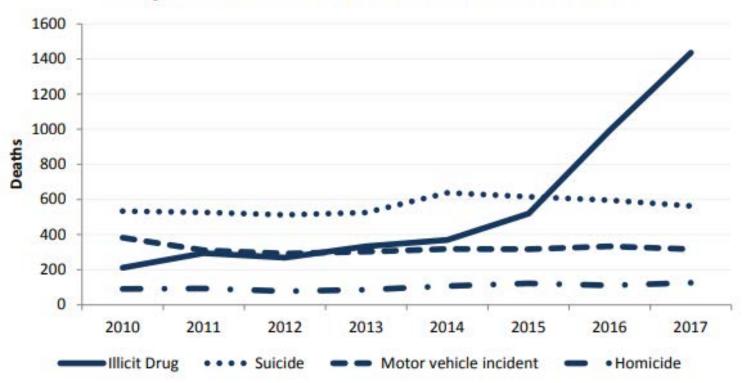






Unnatural Deaths in BC

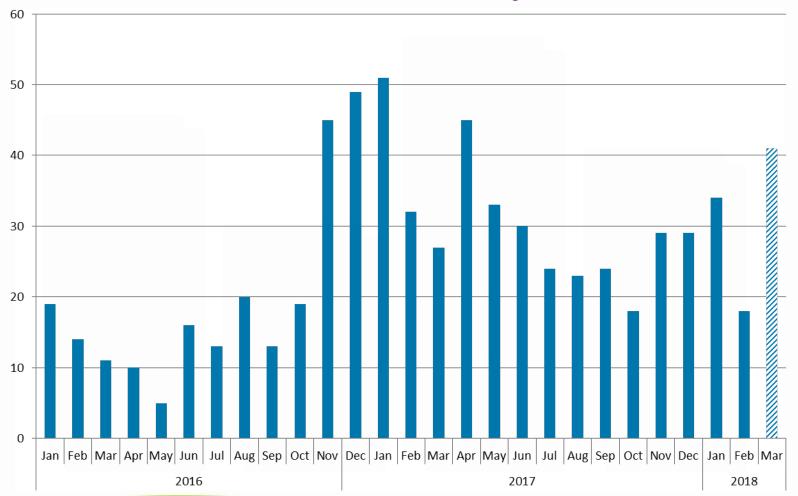
Major Causes of Unnatural Deaths in BC







Overdose deaths in the City of Vancouver





Gender and Age

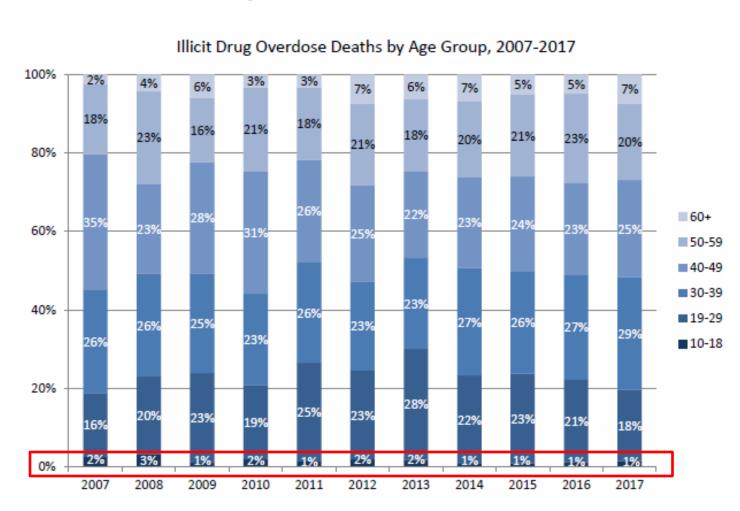
Illicit Drug Overdose Deaths by Gender, 2007-2017 ^[2]											
Gender	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Female	47	49	55	49	82	75	79	86	102	193	179
Male	155	134	146	162	212	194	254	283	417	789	834
Total	202	183	201	211	294	269	333	369	519	982	1,013

Illicit Drug Overdose Deaths by Age Group, 2007-2017 ^[2]											
Age Group	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
10-18	5	6	2	4	4	5	6	3	5	12	15
19-29	33	36	46	40	74	61	94	83	118	206	184
30-39	53	48	51	49	75	61	77	101	135	262	291
40-49	70	42	57	66	77	66	74	85	126	230	250
50-59	36	43	33	45	54	56	61	72	108	223	198
60-69	4	8	12	7	10	19	21	25	26	46	69
70-79	1	0	0	0	0	1	0	0	1	3	6
Total	202	183	201	211	294	269	333	369	519	982	1013

Source: BC Coroner's Service



Age Distribution



BC Coroner's Death Review Panel

- Review of 1,854 deaths
- January 1, 2016-July 31, 2017
- Panel convened Oct. 11, 2017





Summary of Review Findings

- A substantial number of overdose deaths occurred among persons with recent health care and/or recent or previous B.C. Corrections involvement;
- The vast majority of overdose deaths occurred among persons who used substances regularly; (80% regular users)
- Most overdose deaths occurred among persons using alone; (52% used alone, 25% in presence of others)
- The majority of overdose deaths occurred in private residences;
- The identification of illicit fentanyl in overdose deaths continues to rise;
- Many of the decedents had sought treatment services in the past and experienced relapses;
- Opioid agonist therapies are an effective component of an opioid use disorder treatment continuum; and,
- There are no provincial regulations for evidence-based standards for addiction treatment.



Reducing Overdose Deaths: Recommendations

- Regulate treatment and recovery programs and facilities
 - Establish regional Addiction Programs
 - Regulate recovery homes/detox including standards for provision of evidence-based treatment
- 2. Expand oral and injectable Opioid Agonist Therapy
 - Include referral pathways for those at overdose risk
- 3. Expand drug checking services



Comprehensive Package of Interventions



Priorities 2018

- Overdose Prevention Services
 - Establish as a standard of practice, not just stand-alone sites
- 2. Drug Checking and Harm Reduction Services
 - Fentanyl test strips and spectrometers: Potential to reduce risk among those consuming drugs in private residences
 - Low barrier distribution of hydromorphone pills
- 3. Referral to Outreach Teams
 - Screen for opioid use at healthcare sites e.g. Emergency Departments, First Responders
 - Refer to outreach teams for follow-up, linkage to care
- 4. Treatment options available where needed
 - Methadone, Suboxone[®], oral morphine, injectable hydromorphone
 - Continuity of care for those leaving Provincial Corrections
 - Monitor cascade of care



Overdose Prevention Services

Drug Checking



Mobile Overdose Prevention Site







Acute Overdose Case Risk Management

VCH Overdose Outreach Team (OOT)
 September 1st to March 31st 2018

- 862 clients in total
- 91%, 0-5 days following referral



 Overdose Outreach Team has started receiving referrals from Vancouver Police Department



Treatment and Recovery



Injectable Opioid Agonist Therapy







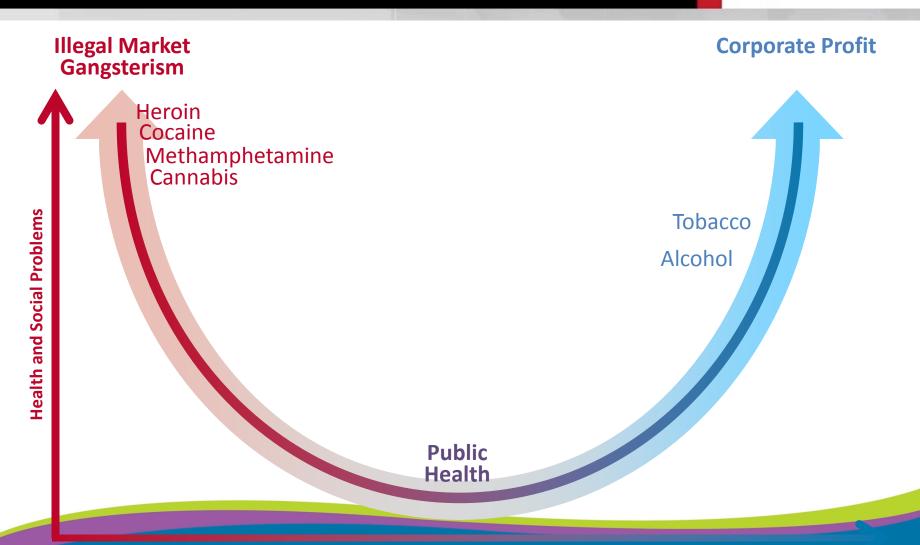
Prevention

Early childhood experiences Trauma and trauma-informed practice Resilience and health literacy in youth Racism and culturally competent care Pain and adequate treatment of pain Social isolation and stigma Government polices



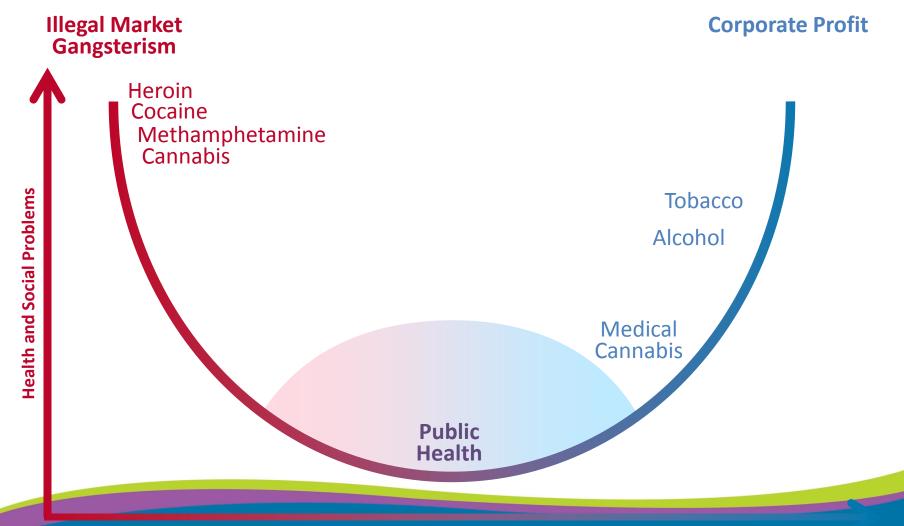
The Paradox of Prohibition





The Paradox of Prohibition





Community Action Teams

- Announced Feb. 1 in Abbotsford
- Communities with most urgent need
- Membership: Municipality, First Nations, First Responders, Community Agencies, Divisions of Family Practice, Lived experience/family groups
- Up to \$100,000 in grant funding available per community



