



OVERDOSE DATA TO ACTION

QUARTERLY NEWSLETTER

THEME: Opioid Stewardship

March 2023: Volume 2, Issue 1

PAGES 2 - 4

- Why Care About Opioid Stewardship and What is it?

PAGE 5

- Free Opioid Training Course
- National Prescription Drug Take Back Day, April 22, 2023

PAGE 6

- Harm Reduction Strategies: Naloxone Distribution Program – Vending Machines

PAGE 7

- Drug Overdose Surveillance in San Diego County

PAGE 8

- San Diego County's Opioid Prescribing Trends (2019-June 2022)

PAGE 9

- Opioid Stewardship
- Surveillance and Prevention Grant Strategies

SAN DIEGO COUNTY OVERDOSE DATA TO ACTION (OD2A): OPIOID STEWARDSHIP

Welcome to the second issue of the *Overdose Data to Action (OD2A) Quarterly Newsletter*, from the Public Health Services (PHS) department, in the County of San Diego Health & Human Services Agency (HHSA). PHS is one of 66 recipients of the OD2A grant, awarded in 2019, by the Centers for Disease Control & Prevention (CDC). Grantees were awarded funding to focus on surveillance and prevention strategies, which are described on *page 7*. This OD2A grant is implemented, in partnership with Behavioral Health Services, to support the County Harm Reduction Strategy. This newsletter serves as a communication tool to 1) highlight new and innovative ways to identify and collect data, 2) share prevention strategies to address drug misuse and overdose, and 3) provide resources to promote opioid stewardship. Over the next five months of last year of the current grant cycle, the naloxone distribution program and a public education campaign will be two of several key activities. In addition, efforts are in progress to apply for the next 5-year OD2A grant cycle, due on May 8, 2023. While the current grant has focused on prescription opioids, the next grant cycle will focus on illicit opioids – the cause of predominant opioid deaths in our community, as well as nationwide. Collectively, the OD2A grant efforts, County Harm Reduction Strategy, and Opioid Settlement Funds Strategic Framework are being integrated to address the single goal of saving lives from opioid drug use in San Diego residents. 🔄



Figure 1.

Source: CDC, 2019. The image above illustrates the key strategies of the OD2A grant.

Let's Examine, Enlighten, and Empower San Diego.



What is Opioid Stewardship & Why Care About It?

What is “Opioid Stewardship?”

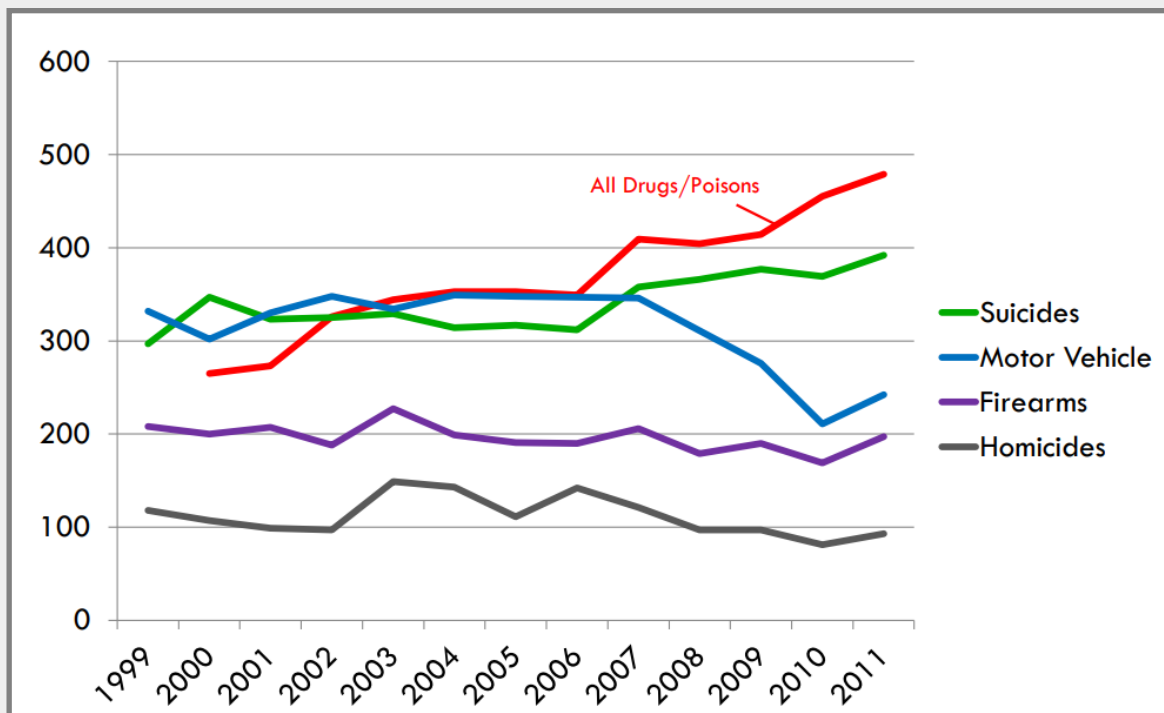
Opioid stewardship includes the sensible and appropriate opioid prescribing habits, management of the effects of the use of opioids, and appropriate opioid disposal. Related outcomes include being aware of diversion prevention strategies, identifying and treating opioid use disorder, and reducing mortality associated with opioid overdoses. The three pillars of opioid stewardship include acute pain management, harm reduction, and identification and treatment of opioid use disorder. The OD2A grant is conducting activities to address these three pillars. These include information on best practices of pain management (i.e., presentations and academic detailing); naloxone distribution program, a part of the County’s harm reduction strategy; and a navigation program for individuals admitted to emergency departments due to near-overdose admissions.

History of Local Efforts

In 2013, the Prescription Drug Abuse Medical Task Force began working with local partners, including the Health and Human Services Agency, Hospital Association of San Diego and Imperial Counties, and the San Diego County Medical Society, to launch the *Safe Prescribing in the Emergency Department* media campaign to educate local Emergency Department (ED) physicians on prescribing habits and opioid stewardship. The intended goal was “to activate the medical community as a force to prevent prescription drug misuse, addiction, and death in San Diego County.”

See the following link for local historical data, from 1999 to 2011, related to prescription drug use and related deaths: [San Diego Prescription Drug Abuse Medical Task Force](#). Most notably, the continual increase of deaths due to drugs and poisons, compared to the steady or decreasing number of deaths due to other non-natural deaths, seen in **Figure 2** below.

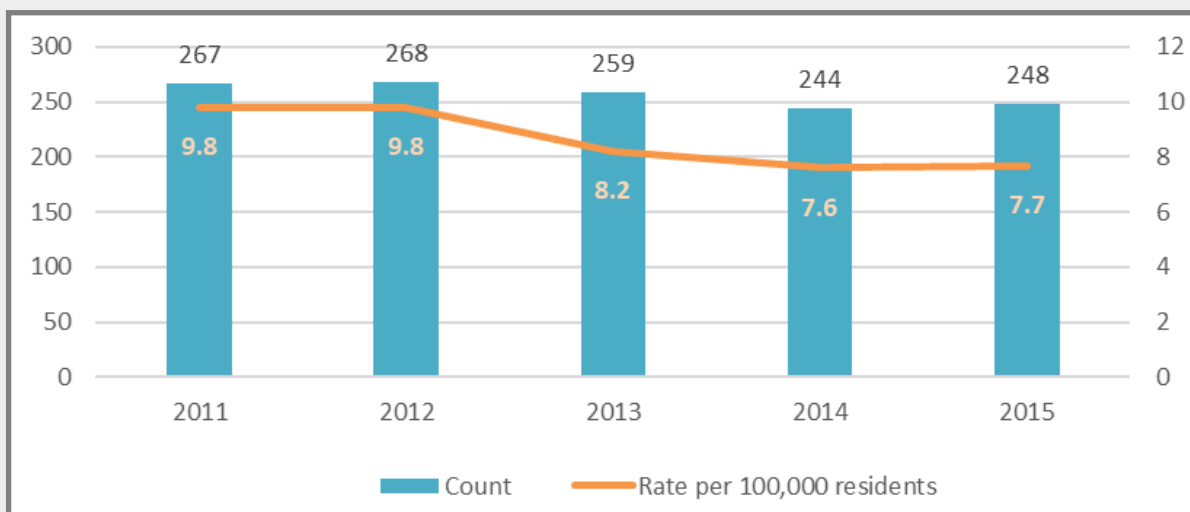
Figure 2. Non-Natural Drug Deaths in San Diego County, 1999-2011.



Source: San Diego Prescription Drug Abuse Medical Task Force, 2012.

From 2011 to 2015, the count and rate of unintentional deaths due to prescription drugs were decreasing, most notably during 2013 when the ED campaign was launched, as seen in **Figure 3**.

Figure 3. Unintentional Prescription Drug Related Deaths in San Diego County, 2011-2015.

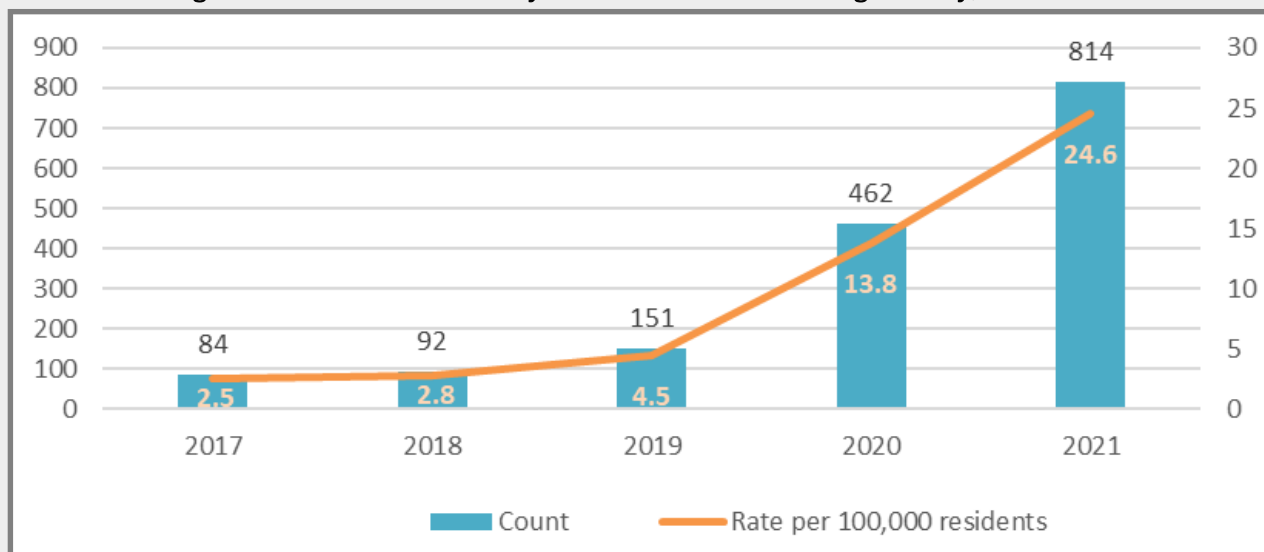


Source: County of San Diego Medical Examiner’s Office.
 Population estimates source: San Diego Association of Governments (SANDAG), 2010 Census.

In 2016, the Centers for Disease Control and Prevention (CDC) released the [Guideline for Prescribing Opioids for Chronic Pain](#). CDC engaged healthcare systems to develop quality improvement (QI) measures aligned with the CDC Prescribing Guideline recommendations. These guidelines encouraged uptake and use of evidence-based practices to create tools for healthcare systems.

Over the following years, in San Diego County and across the nation, deaths due to prescribed opioids declined and deaths due to illicit opioids, especially fentanyl, began to increase, as evidenced by **Figure 4**.

Figure 4. Unintentional Fentanyl-Caused Deaths in San Diego County, 2017-2021.



Source: County of San Diego Department of the Medical Examiner.

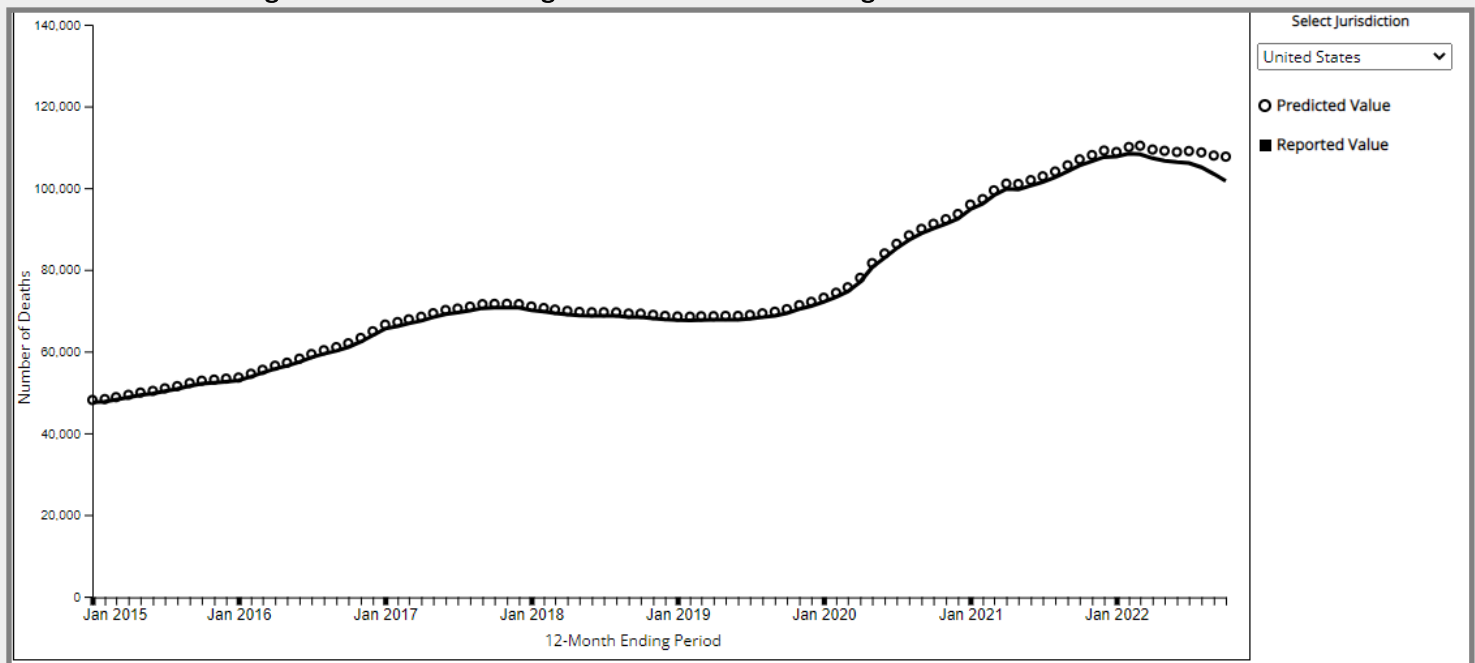
Population estimates source: SANDAG, Current Estimates, 2021.

Note: These data represent only deaths examined by the County of San Diego Department of the Medical Examiner and those that had toxicology. There are over 22,000 deaths each year in San Diego County, the Department of the Medical Examiner investigates around 3,000 deaths a year.

Impact of the COVID-19 Impact on Opioid Use

During the COVID-19 pandemic, drug overdose deaths increased due to illicit opioid use. [CDC data released in November 2021](#) (See *Figure 5* below) showed the “12 Month-ending Provisional Counts of Drug Overdose Deaths,” for 2015 to 2022, and the number of deaths occurring in the 12-month period of each year. In early 2020, the number of reported deaths due to drug overdose quickly began to increase. For the 12-month period from March 2021 to February 2022, drug overdose deaths were over 108,000, the highest number ever recorded. Factors contributing to this increase include psychosocial stressors related to isolation, unemployment, risk of eviction, and temporary loss of prevention and drug treatment programs.

Figure 5. 12 Month-ending Provisional Counts of Drug Overdose Deaths: United States



Source: Centers for Disease Control and Prevention, 2023. (See notes below.)

Based on available for analysis on: March 5, 2023.

NOTES: Reported provisional counts for 12-month ending periods are the number of deaths received and processed for the 12-month period ending in the month indicated. Drug overdose deaths are often initially reported with no cause of death (pending investigation), because they require lengthy investigation, including toxicology testing. Reported provisional counts may not include all deaths that occurred during a given time period. Therefore, they should not be considered comparable with final data and are subject to change. Predicted provisional counts represent estimates of the number of deaths adjusted for incomplete reporting. Deaths are classified by the reporting jurisdiction in which the death occurred. Percent change refers to the relative difference between the reported or predicted provisional numbers of deaths due to drug overdose occurring in the 12-month period ending in the month indicated compared with the 12-month period ending in the same month of the previous year. Drug overdose deaths are identified using ICD-10 underlying cause-of-death codes: X40–X44, X60–X64, X85, and Y10–Y14.

According to a [survey](#) conducted among United States acute care hospitals in 2018, only 23% had adopted an Opioid Stewardship Program. In San Diego County, several acute care hospitals have Opioid Stewardship Programs, and PHS encourages additional healthcare systems to develop and implement stewardship programs in their local facilities.

As part of the OD2A grant, academic detailing and community presentations are being conducted by Champions for Health to educate prescribers (i.e., physicians, physician assistants, nurse practitioners, pharmacists, and dentists) about the three pillars of opioid stewardship. In addition, several program and strategies are in development, including a public education campaign, a robust naloxone distribution program, and a strategy to provide navigation for individuals who present to the emergency department for a near overdose. 🌱

FREE OPIOID TRAINING COURSE WITH CONTINUING EDUCATION CREDITS NOW AVAILABLE ONLINE

The County of San Diego, Public Health department has partnered with Champions for Health and The Doctor's Company to develop a self-paced academic detailing curriculum for health care professionals. The curriculum is entitled *Innovations and Smart Approaches in Safe Prescribing* and is comprised of a series of on-demand courses, free of charge.

Course content includes eliminating internal bias regarding opioid use disorder, providing alternatives to opioids, safe prescribing of opioids, and treatment of substance use disorder.

Other topics include **opioid stewardship**, benzodiazepine stewardship, opioid and benzodiazepine tapering, and naloxone instruction.


These training tools can be accessed online. To date, 53 prescribers have utilized this curriculum.

If interested in learning more about substance use disorder (SUD), SUD treatment & safe opioid prescribing, please view our [Academic Detailing curriculum](#). Participants can obtain CME credit upon completion. 🌟

Schedule a FREE consult with a safe prescribing expert!


Would you like an opportunity to engage in a personalized, virtual, one-on-one Q&A with a safe prescribing expert? Sessions are about 30 minutes, and completely customizable to fit your schedule. Topics on safe and practical alternatives to opioids, benzodiazepine stewardship, opioid and benzodiazepine tapering, buprenorphine training, and naloxone.

If you are interested in scheduling a session, please contact Katy Rogers at katy.rogers@championsfh.org or (619) 508-4460.



**DEA NATIONAL
TAKEBACK**

Saturday, April 22, 2023
10 am—2 pm
DEATakeBack.com



SAN DIEGO COUNTY LOCATIONS:

SOUTHERN	NORTHERN	MILITARY
<ul style="list-style-type: none"> ◆ Otay Ranch Town Center 2015 Birch Rd., Chula Vista ◆ Coronado Police Station 700 Orange Ave., Coronado ◆ Imperial Beach Sheriff's Station 845 Imperial Beach Blvd., Imperial Beach 	<ul style="list-style-type: none"> ◆ Tri-City Medical Center 4002 Vista Way, Oceanside ◆ Escondido Police Station 1163 N. Centre City Pkwy., Escondido ◆ Poway Sheriff's Station 13100 Bowron Rd., Poway ◆ San Marcos Sheriff's Station 182 Santar Place, San Marcos ◆ North County Regional Center Courthouse 325 S. Melrose Dr., Vista ◆ Carlsbad Police Department 5750 Orion St., Carlsbad 	<ul style="list-style-type: none"> (Military, Retirees, Beneficiaries, & Staff Only) ◆ Naval Medical Center San Diego (Balboa) Baxter Circle Between Bldg. 2 & 3 ◆ Navy Exchange 32nd St., in the NEX Lot @ Callagan Hwy gate ◆ MCAS Miramar Exchange 2660 Elrod Ave., San Diego ◆ Naval Air Station North Island Building No. 2017, San Diego
<p>CENTRAL</p> <ul style="list-style-type: none"> ◆ SDPD Eastern Division 9225 Aero Dr., San Diego ◆ SDPD Northwestern Division 12592 El Camino Real, San Diego ◆ SDPD Western Division 5215 Gaines St., San Diego ◆ San Diego State University 6095 Canyon Crest (on the corner of College Avenue), San Diego ◆ Mesa College Police Station 7250 Mesa College Dr. Bldg. Q-100 	<ul style="list-style-type: none"> ◆ El Cajon Police Department 100 Civic Center Way, El Cajon ◆ La Mesa Police Department 8085 University Ave., La Mesa ◆ Alpine Sheriff's Station 2751 Alpine Blvd., Alpine 	


- ANONYMOUS
- CONTACTLESS
- DROP OFF
- DRIVE-THROUGH

Veterinary Medications Accepted



Vaping devices accepted only if batteries have been removed.

Sharps Not Accepted



To find the collection site nearest you, visit <https://www.DEATakeBack.com>

National Prescription Drug Take Back Day

Saturday, April 22, 2023

10:00am—2:00pm

The DEA's National Prescription Drug Take Back Day occurs twice a year in April and October, with the goal of providing communities a way to safely dispose of unneeded medications.

During Take Back events in San Diego County, in 2022, 13,049 pounds of medications were safely disposed. ([2022 Report Card, San Diego County Prescription Drug Abuse Task Force](#))

Collection sites are located throughout San Diego County year-round. To find the nearest collection site to you or your patients, please visit the DEA's [Take Back Day](#) website, or the [Prescription Drug Drop-Off Site Interactive Map](#) located on the County of San Diego Behavioral Health Services website. 🌟



County of San Diego Harm Reduction Strategies

Naloxone Distribution Program—Vending Machines

Strategy 5

The County of San Diego (County) Naloxone Distribution Program (NDP) continues to make strides in its effort to saturate the community with naloxone. Since July 1, 2022, the County NDP has expanded its provider distribution network to **85 distributing partners**, has allocated more than **25,000 kits** to community partners for distribution, and **on March 2, 2023, placed its first naloxone vending machine** at the South Bay Regional Recovery Center of McAllister Institute in Chula Vista, CA!

This first machine is available to the public Monday-Friday from 8am to 5pm. Anyone interested in accessing naloxone can enter the lobby at McAllister Institute and access it free-of-charge by completing a registration and brief (about 2 minutes), state required online training. Upon completion of the training, an individual receives a pin number that can be entered directly into the machine to access the naloxone. The vending machine itself is not designed to serve as emergency or immediate access to naloxone, so if someone is acutely experiencing an overdose, bystanders should call 9-1-1 immediately. Instead, the vending machine is meant to increase community access to naloxone so that people can get it ahead of time, carry it with them, and use it if they encounter an overdose.

The placement of this first vending machine marks an important milestone for the program and introduces an innovative way to amplify the County's overarching goal to distribute 33,000 naloxone kits by June 30, 2023. Up until now, the program has been distributing naloxone in person via community training events and targeted outreach. With the addition of naloxone vending machines, the County NDP program aims to get naloxone into the hands of everyone who needs it by making it as accessible as possible.

Plans to place an additional 11 machines (12 in total) are underway with expected placement of all machines throughout the County by June 30, 2023. The second and third vending machines are scheduled to be placed the week of April 3rd. The second machine will be placed at T.H.E.C.I.R.C.L.E. by Epiphany, a community-based organization serving a high needs community and the third at El Dorado Community Services Center, a local treatment program. 🌈

For more information on how to receive a naloxone training, access naloxone, or become a naloxone distribution provider, contact the County of San Diego Behavioral Health Services Harm Reduction Team at HarmReduction.HHSA@sdcounty.ca.gov.



Naloxone vending machine located at the South Bay Regional Recovery Center of McAllister Institute in Chula Vista, CA.

For additional information on naloxone or the County of San Diego naloxone vending machines, please scan the QR code below.

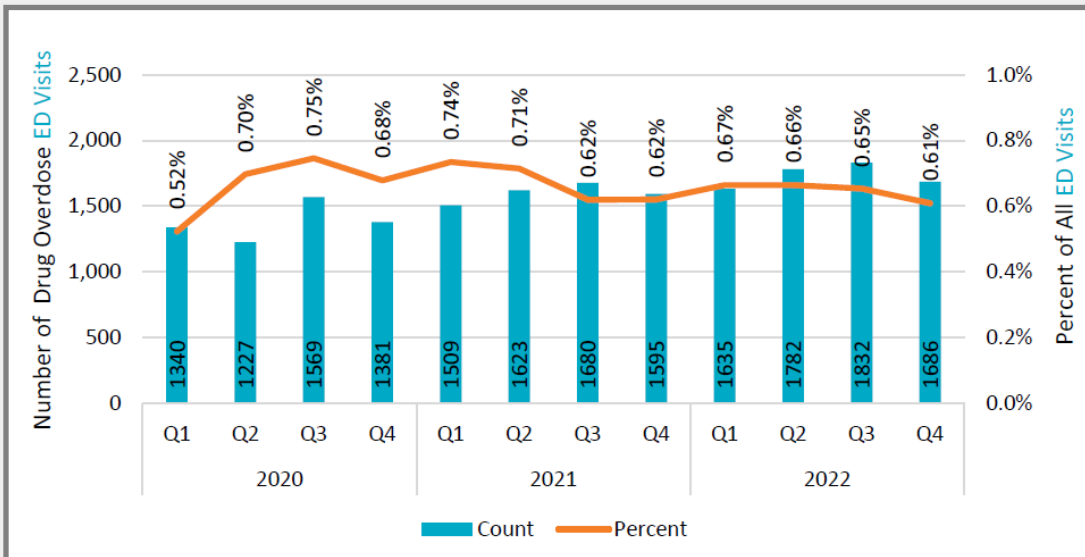


Drug Overdose Surveillance in San Diego County

Strategy 3

The County of San Diego Epidemiology and Immunization Services Branch conducts drug overdose surveillance using emergency department (ED) data from 16 local hospitals. 🌐

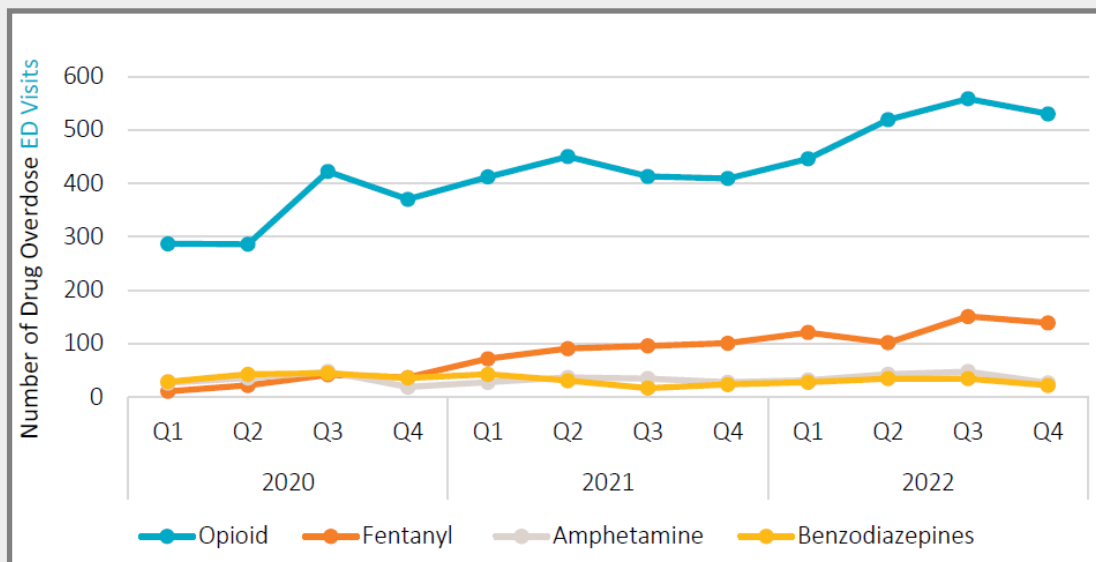
Figure 6. Emergency Department Visits for Drug Overdose by Year, Q1 2020- Q4 2022



• **Figure 6** shows the number of ED visits for overall drug overdoses increasing from the beginning of 2020, through **Quarter 4**,* 2022, while averaging 0.7% of all ED visits.

*Calendar Year

Figure 7. Emergency Department Visits for Drug Overdose by Drug, Q1 2020- Q4 2022



• **Figure 7** displays the number of ED overdose visits by select drugs. Opioid and fentanyl overdose ED visits were 1.9 and 12.7 times higher, respectively, in **Quarter 4**,* 2022 than in Quarter 1 2020.

*Calendar Year

¹Drugs are categorized based on key words in chief complaint data and ICD-10 diagnostic codes when available. They may not represent the final diagnosis. Categories are not mutually exclusive; a single ED visit may involve more than one drug category.

Figure 6 & 7: Prepared by County of San Diego Epidemiology and Immunization Services Branch, 2023.

Coming soon: Overdose Surveillance Quarterly Report.



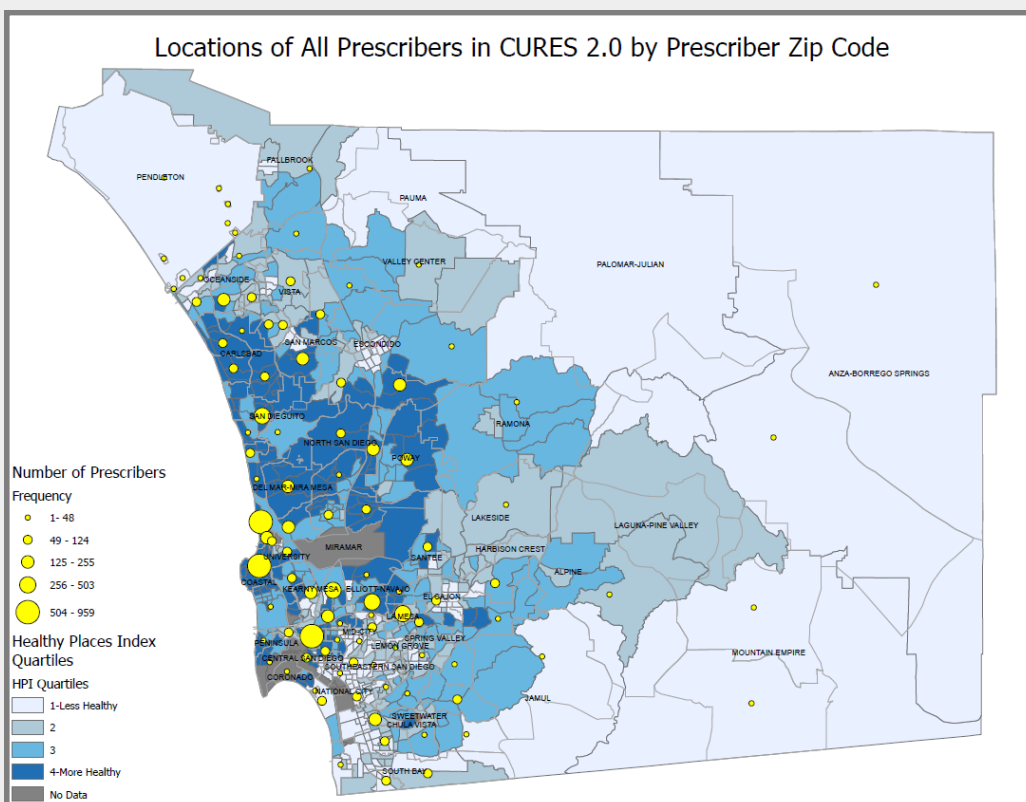
San Diego County Opioid Prescribing Trends

Strategy 4

The OD2A grant intends utilization of surveillance data to inform evidence-based strategies that address the opioid crisis. The California Prescription Drug Monitoring Program, also known as the Controlled Substance Utilization Review and Evaluation System (CURES 2.0), is a database of Schedule II-V controlled substance prescriptions dispensed in California. The OD2A evaluation team in Public Health Services analyzed de-identified CURES data, from 2019 to **June 2022** (January to June data is new since the *December 2022 Quarterly Newsletter*), to assess prescribing behavior in San Diego County. The overall prescribing trends provide valuable information to inform continuing efforts in **opioid stewardship** and provider education. 🌱

GENERAL TRENDS IN CURES 2.0				
ALL PRESCRIBERS				
	2019	2020	2021	2022 (Jan-Jun)
Number of prescriptions written	1,102,514	1,009,208 (-8%)	988,149 (-2%)	476,515 (-52%)
Average Daily Dose (all prescriptions)	47.4	46.4 (-2%)	45.4 (-2%)	45.3 (-.2%)
Average days supply per patient	8.5	8.4 (-1%)	8.0 (-5%)	9.6 (+20%)
Average days supply per prescriber	10.2	10.4	10.4	10.8
Number of prescriptions written for over 50 MME/day	297,874	257,101 (-14%)	226,457 (-12%)	102,760 (-55%)
Number of prescribers who on average prescribed over 50 MME/day	1,351	1,216 (-10%)	1,132 (-7%)	922 (-19%)

- **Table 1** displays the general trends of decreasing opioid prescribing (amount of prescriptions, dosage, and days supply) by all opioid prescribers found on CURES 2.0 from 2019 to June 2022.



- **Figure 8** displays the location of all opioid prescribers in CURES 2.0 from January to June 2022. Majority of opioid prescribers in CURES 2.0 were located in the central region.

Source: Table 1 & Figure 8 - Prepared by County of San Diego Surveillance, Epidemiology, and Evaluation Unit, 2023.

Coming Soon: Opioid Stewardship Toolkit

Strategy 7



Opioid stewardship, like other pharmaceutical stewardship initiatives, such as antibiotic stewardship, does not aim to remove opioids entirely from clinical practice, but rather to identify the most effective clinical contexts and ensure patients and providers are best informed regarding potential risks and benefits. This not only means providers making appropriate clinical choices, but also being supported by strong clinical decision-making processes, policies, and educational programs from their healthcare systems. A toolkit is currently being designed for San Diego County healthcare systems, including hospitals, Federally Qualified Health Centers (FQHCs), and pharmacy benefit managers (PBM) that support these systems. This tool will allow users to familiarize themselves with current information and best practices surrounding opioid stewardship and to support their providers in selecting the most suitable means for managing pain in their patients. Watch for this toolkit coming soon! If you are interested in learning more, visit SanDiegoCounty.gov/OD2A. 🌟

Overdose Data To Action Surveillance & Prevention Grant Strategies



Surveillance Strategy

- **Innovative Surveillance Strategy:** Focus on new and innovative ways to collect data on drug misuse and overdose tailored to a community's needs. (Strategy 3)

Prevention Strategies

- **Prescription Drug Monitoring Programs (PDMPs):** Better utilize prescription drug monitoring program (PDMP) data to inform prescribing practices. (Strategy 4)
- **State and Local Integration:** Improve state and local prevention efforts to build more effective and sustainable surveillance and implement community-level interventions. (Strategy 5)
- **Linkage to Care:** Ensure people are connected to the care they need by leveraging systems and upstream prevention efforts. Such as, developing a system to track care connections to Medication Assisted Treatment for individuals experiencing nonfatal overdoses. (Strategy 6)
- **Provider and Health Systems Support:** Support healthcare providers and health systems with drug overdose prevention and response, including expanding the use of evidence-based prescribing and treatment practices. (Strategy 7) 🌟

FOR MORE INFORMATION ABOUT OPIOID OVERDOSE PREVENTION IN
SAN DIEGO COUNTY

PLEASE VISIT: WWW.SANDIEGOCOUNTY.GOV/OD2A

FOR ADDITIONAL QUESTIONS, COMMENTS, OR SUGGESTIONS,

PLEASE EMAIL:

PHS.OD2A@sdcounty.ca.gov

The Public Health Services department, in the County of San Diego Health and Human Services Agency (HHSA), in collaboration with HHSA Behavioral Health Services department, would like to thank the medical community for their efforts and support during the opioid epidemic. While the County is seeing a decrease in the morphine milligram equivalent (MME) dosage and the overall number of opioids prescribed in San Diego County, the medical community must remain vigilant and persistent as the illicit opioid-related overdose numbers continue to climb. It is the intent of this OD2A grant to promote efforts in opioid surveillance, prevention, linkages to care, and treatment to reduce overdoses related to opioid prescription drugs, as well as reduce illicit opioid drug use.

The Overdose Data to Action (OD2A)

Quarterly Newsletter

is published by the Public Health Services Department, in the County of San Diego Health and Human Services Agency (HHSA).

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This newsletter is produced as a result of funding from the CDC Overdose Data to Action (OD2A) grant with a focus on five surveillance & prevention strategies. These activities are implemented by Public Health Services (PHS) and Behavioral Health Services (BHS).

Below are the OD2A strategy leads

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- Prevention Strategy 4 & 7:** Wilma Wooten, MD, MPH, Public Health Officer
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