



ERIE COUNTY DEPARTMENT OF HEALTH



Public Health
Prevent. Promote. Protect.

Melissa C. Lyon, MPH
Director

Kathy Dahlkemper
County Executive

September 25, 2019

Chairman Yaw and members of the committee,

I am Melissa Lyon, Director of the Erie County Health Department. Thank you for inviting me to testify today regarding access to the Prescription Drug Monitoring Program (PDMP) and ways we can further work to combat the opioid crisis.

The prescribing of opioids quadrupled in this country between 1999 and 2010.

In 2016, eight out of every ten people in Erie was given a legal opioid prescription (or 80 Opioid Prescriptions per 100 persons)

Between 2015 and 2017, there was a 92% increase in the number of drug-related overdose deaths in Erie County

In 2017, Erie County suffered 43 overdose deaths per 100,000 people, nearly double the national average of 22 deaths per 100,000.

There is also a tremendous economic cost to the opioid crisis. In 2016 alone, Pennsylvania spent over \$53.77 billion dollars in fatalities, health care spending, addiction treatment, criminal justice and lost productivity.

Pennsylvania's Prescription Drug Monitoring Program is one of the most promising tools available to address prescription drug misuse, abuse and diversion. PDMP data can reveal:

- Prescribing rates that may be consistently higher or lower for controlled substances
- Providers who prescribe controlled substances in large or excessive quantities
- Pharmacies that dispense controlled substances in large or excessive quantities
- Individuals prescribed dangerous combinations of drugs
- Individuals who may be addicted and receiving multiple prescriptions for commonly misused drugs from multiple providers and/or pharmacies
- Geographic locations of patients receiving dangerous amounts, combinations or are engaged in doctor/pharmacy shopping

606 West Second Street, Erie, PA 16507 • Phone: (814) 451-6700 • Fax: (814) 451-6767 • TTY/TDD: (814) 451-6237
www.ecdh.org • www.facebook.com/ecdh.org • www.twitter.com/eripublichealth

Our mission is to preserve, promote, and protect the health, safety, and well-being of the people and the environment in Erie County.

Our Privacy Notice can be obtained by calling us or visiting our website.

Because of the role of prescription opioids play in opioid use disorder and overdoses, it is critical we focus on reducing prescribing by licensed physicians, nurse-practitioners, and physicians' assistants.

However, because I do not have access to the PDMP, I do not know how many prescribers are prescribing opioids in Erie County. If there is an unusually high prescriber, or pill mill, or if a particular area has high overdose or fatality rate.

While other states are expanding their use PDMP data, some state health departments are struggling to translate the data at the local level into community public health initiatives. To fully address the prescription drug epidemic, allow for the utilization of new tools and approaches. Local health departments are well positioned to employ PDMP data to serve both a public health and public safety objective.

Local health departments need access to the resources to be able to make these critical assessments and the ability to reach critical assessments and the ability to reach out to those in my community to counter this epidemic.

There is NO cost to the state for this. It does not require additional bureaucracy, the purchase of software or programs, payments to contractors or any other financial expenditure. It simply requires allowing localities to utilize existing data.

The substantial burden of the current opioid epidemic has resulted in a disparity between the need for substance abuse treatment and the current capacity of the health care delivery system to meet that need. In 2017, over 47,600 people died of opioid-related drug overdoses in the United States. That same year, an estimated 11.4 million people aged 12 and older misused opioids, including 11.1 million misusers of prescription pain relievers and 886,000 heroin users. The majority of individuals in need of treatment do not receive it. In 2016, one-fifth (21.1%) of those with any opioid use disorder received specialty substance abuse treatment, including 38 percent of those with heroin use disorder and nearly 20 percent of those with prescription pain reliever use disorders.

In Pennsylvania, between Jan 01, 2018 - Aug 10, 2019, there were 15,987 emergency room visits for opioid overdoses. In 2017, Pennsylvania experienced more than 5,400 drug-related overdose deaths. However, fatal drug overdoses are just the tip of the iceberg. In 2003, an analysis estimated that there are twenty nonfatal opioid-related overdoses for every fatal overdose.

Emergency room and emergency response units are responding to significant increases in non-fatal drug overdoses and those who experience a drug overdose are significantly more likely to experience another. Thus it is critical we are able to offer targeted services to those in our communities that suffer a nonfatal drug overdose. Unfortunately, this kind of actionable data on nonfatal overdoses is not currently

available to local public health officials in Pennsylvania, greatly hindering our ability to prevent the next overdose death.

Geography is essential to accurately evaluating and understanding any discrepancy between need and capacity. It is important to consider that county size and population are not necessarily indicators of substance abuse treatment need. Counties are not equivalent in geographic area, shape, and population size and therefore comparisons on treatment needs strictly across the county level may not be appropriate.

Simply increasing capacity for treatment may not effectively increase availability (or decrease opioid-related overdoses) if prevention efforts are not tailored to the areas they are designed to serve. While current efforts have made some inroads, they do not allow for local health departments to address the overflow of prescription opioids, assess nonfatal overdoses or analyze the growing number of deaths within each community. Other factors, such as substance use treatment financing, also affect opioid addiction treatment availability

Rural areas may not have the same volume of need for substance use disorder treatment as urban areas, yet they may possess additional barriers to care that make accessibility to treatment challenging. For example, patients traveling long distances to receive treatment may face obstacles related to transportation or infrastructure that make continuity of treatment difficult.

Mortality review teams allow localities to examine and understand the circumstances surrounding fatal drug overdoses and identify interventions designed to prevent future deaths. These teams can summarize the findings from the reviews local deaths and make recommendations about how to utilize those findings to inform prevention strategies and programming. They can also be used to highlight some of the prevention activities accomplished locally and at the state level throughout the year. Thus it is critical to recognize the importance of evidence-based prevention strategies and the value of effective death reviews to inform those strategies.

The Pennsylvania Department of Health website specifically states that County and Municipal Health Departments receive state funding for “services are aimed at improving the respective community's public health via the provision of direct health services, health education and community health leadership and control. Emphasis is placed on primary and secondary preventive health services. The overall goal of these programs is to reduce morbidity and mortality among the local service population and to promote healthy lifestyles.” Despite that mission statement, local health departments are being actively prevented from using existing tools that should be at their disposal.

Data is showing a decline in drug overdose deaths since 2017 and continues to trend downward in Erie County. However, just this year, 2019, Erie County, reported 34 preventable overdose deaths- this is still too many. There is more work to be done. Pennsylvania must continue to focus on saving lives

through harm reduction and evidence-based prevention strategies, expanding treatment access and getting patients into treatment. It is therefore critical to provide local health departments with the data we need to design, implement and evaluate our response efforts, allow for the reporting of non-fatal drug overdose events to state and local health departments and analyze any opportunities to prevent future deaths.

Thank you for the opportunity to testify and I look forward to continuing to work with you to fight the current opioid epidemic.