

PUBLIC HEALTH BRIEF:

Opioids and Sudbury & Districts

Public Health Sudbury & Districts, December 16, 2019



Public Health
Santé publique
SUDBURY & DISTRICTS

“The opioid overdose crisis is a complex problem that we know will take time to turn around. To have a significant and lasting impact, we need to continue working together on whole-of-society changes. This includes addressing the **stigma** that surrounds substance use, implementing further **harm reduction** measures and **reducing barriers to treatment**. It also means continuing to work together to better understand and address the drivers of this crisis, such as **mental illness**, and **social and economic** factors that put Canadians at increased risk.”

Dr. Theresa Tam, Co-Chair, Special Advisory Committee on the Epidemic of Opioid Overdoses
[Joint Statement](#) December, 2019

Epidemiology

Morbidity and mortality:

Extracted from [Public Health Ontario Interactive Opioid Tool](#)

* Extracted from Community Drug Strategy [phsd.ca/cds](#)

	Cases		Rates (Per 100,000)	
	PHSD	Ontario	PHSD	Ontario
CGS Paramedic Services calls*: <i>suspected opioid-related incidents</i>				
• 2018 total	• 200			
• 2019 January to October	• 386			
Emergency department visits:				
• 2017 total	• 86	• 7,764	• 43	• 54.6
• 2018 total	• 178	• 9,154	• 88.9	• 63.4
• 2019 January to June	• 183	• 9,366		
Hospitalizations				
• 2017	• 40	• 2,145	• 20	• 15.1
• 2018	• 53	• 2,108	• 26.5	• 14.6
• 2019 January to June	• 38	• 1,072		
Deaths:				
• 2017	• 34	• 1,265	• 17	• 8.9
• 2018	• 32	• 1,474	• 16	• 10.2
• 2019 January to June preliminary	• 28	• 824		

Characteristics of PHSD residents with an opioid-related death

- Occupational data: not available
- Sex: 60 male, 22 female (PHO Interactive Tool, April 2017 to June 2019)
- Circumstances and demographics: (Office of the Chief Coroner for Ontario, April 2017 to June 2019):
 - 90% accidental
 - 81% White
 - 44% aged 25 to 44
 - Most lived in a private residence
 - Most used and died in a private residence

The publicly funded needle exchange program is implemented in Greater Sudbury by PHSD, Sudbury Action Centre for Youth (SACY), Réseau ACCESS Network, and Ontario Aboriginal HIV/AIDS Strategy (OAHAS), who collectively report the following:

	2018* (to October)	2019 (to October)
Needles distributed*	1,277,084	1,169,511
Return rate**	64%	62%

*For 2018, 1,544,126 needles were distributed in Greater Sudbury, return rate of 65%.

**Underestimated as does not include returns to CGS kiosks.

Naloxone

The publicly funded naloxone distributors locally are PHSD, Réseau ACCESS Network and pharmacies who report the following doses distributed:

- 2018 – 10,392
- 2019 January to October – 13,808

Community Response

Community Drug Strategy

Pillars

- Health Promotion**
 - Opioid poisonings response plan
 - Surveillance and early warning
 - Communications – media, social media, website, presentations
 - Empowerment and resiliency
 - Spotlight on STIGMA
- Enforcement**
 - Community safety & target on suppliers with Joint Force Operation partners
 - Naloxone training
- Harm Reduction**
 - Naloxone program
 - Needle exchange
 - Service access
 - Spotlight on safer consumption
- Treatment**
 - Expansion of treatment options and crisis response
 - First responders training for diversion options
 - Needs based planning and gap analyses

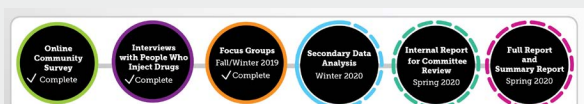
Spotlight on Stigma

- [Those People are Us](#)
- [We are Jeff](#)



Spotlight on Safer Consumption

Needs Assessment and Feasibility Study

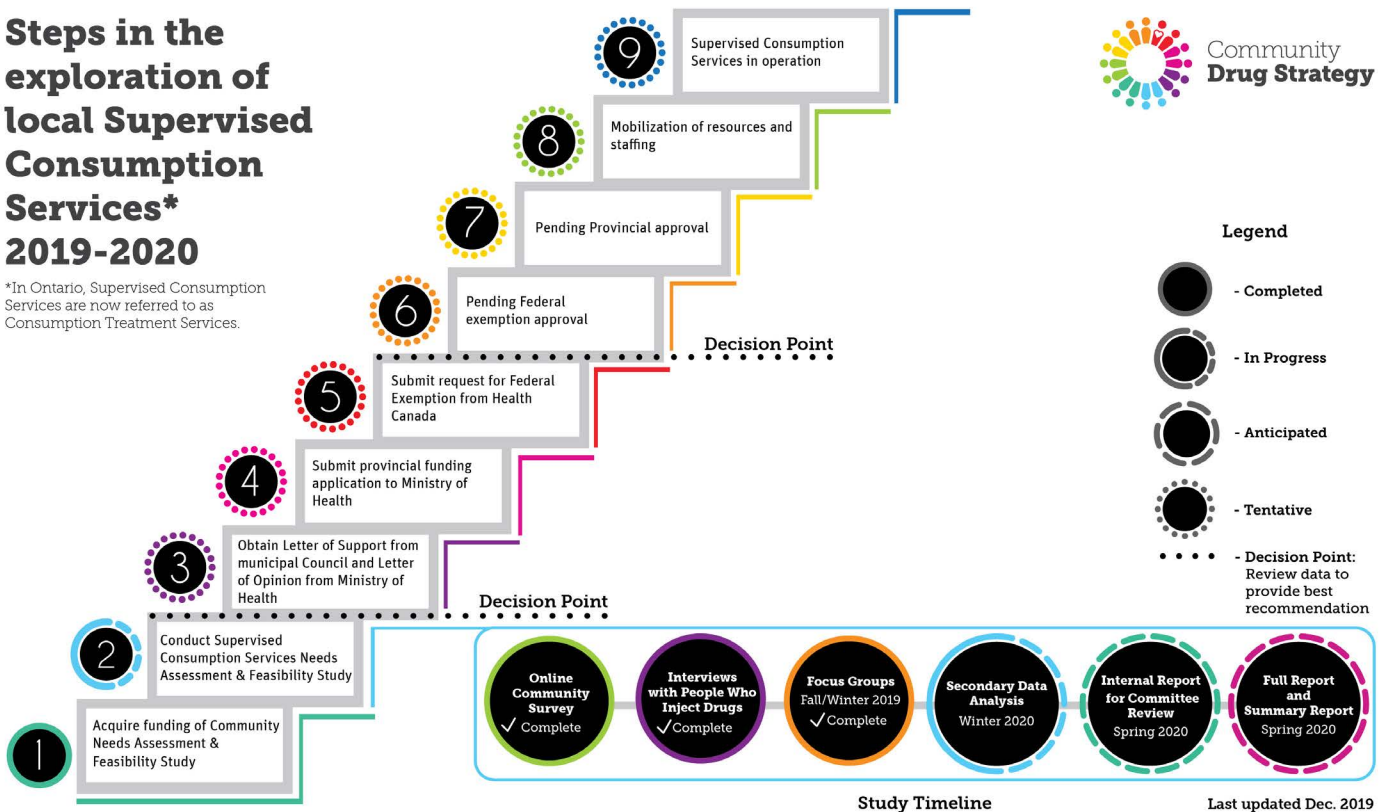


- Strong intersectoral partnerships vs multi-sector challenge
- Northern resiliency vs rural/northern health inequities and unique challenges
- Engaged leadership vs significant gaps in mental health systems including transitions
- Political will vs stigma and NIMBY
- Comprehensive NAFS vs community acceptability and funding
- Focus upstreamⁱⁱ vs investing mostly in downstream interventions

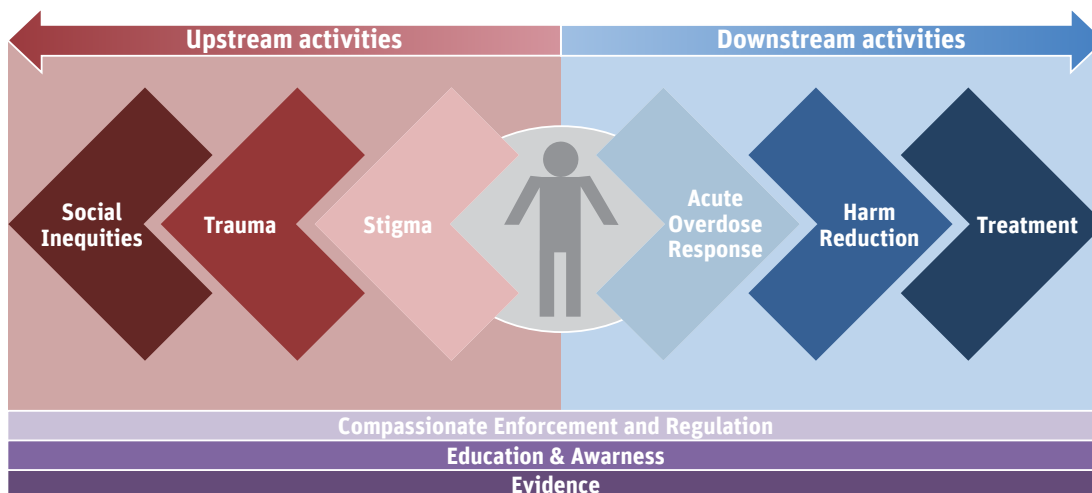
ⁱOur community's exploration of local supervised consumption services is described in the diagram below, current to December 2019.

Steps in the exploration of local Supervised Consumption Services* 2019-2020

*In Ontario, Supervised Consumption Services are now referred to as Consumption Treatment Services.



ⁱⁱAn effective community drug strategy must invest concurrently in upstream interventions while meeting downstream demands. While enforcement, emergency response and treatment, and harm reduction will always be necessary, the intensity of the burden of substance use on individuals and society will only lessen with improvements in social and economic conditions and reductions in stigma and exclusion.



<https://www.oecd.org/health/health-systems/Canada%E2%80%99s-Opioid-Crisis-Presentation-OECD.pdf>