

Written Submission for the Pre-Budget Consultations in Advance of the 2019 Budget

By:

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List of Recommendations:

- **Recommendation 1:** That the government increase access to life-saving nasal spray for opioid overdose treatment by funding 50% of the cost of its inclusion in provincial drug programs to support distribution in the most impacted communities.
- **Recommendation 2:** That the government mandate co-dispensing of intranasal naloxone for high risk opioid prescriptions in at-risk populations.
- Recommendation 3: That the government undertake a national advertising campaign
 raising awareness and reducing stigma around the dangers of prescription opioid abuse,
 the toxic street drug supply and the availability of harm reduction tools, including nasal
 spray for opioid overdose and street drug testing supplies.

As the committee is aware, Canada is experiencing one of the most serious public health crises in its history. <u>Last year, opioid overdoses claimed the lives of 3,987 Canadians.</u> According to Health Canada, 92% of those overdoses were deemed unintentional.

To put this number in context, during the worst year of the HIV/AIDS crisis, in 1995, that disease claimed the lives of just over 1400 Canadians. The SARS outbreak, which saw an overwhelming public health response in 2003, resulted in 44 deaths domestically. And in 2009/2010, the H1N1 virus killed 428 Canadians. When the 2018 statistics are tallied, opioid related deaths are expected to surpass those resulting from automobile accidents.

The origins of this crisis can be traced to prescription use and abuse of opioid medications. To this day, a significant share of opioid overdose deaths are connected to prescription medication. However, the crisis has taken a severe turn for the worse with the introduction of inexpensive, powerful and extremely toxic opioids like fentanyl and carfentanyl to the Canadian black market. These toxic substances are being found in the illicit street drug supply combined with a variety other drugs, including cocaine, heroin and MDMA, as well as counterfeit pills made to look like prescription opioids.

We welcome the government's efforts to try and control the harm resulting from this crisis, especially the inclusion of harm reduction as a pillar of the Canadian Drugs and Substances Strategy, and the creation of an Opioid Action Plan. Unfortunately, these measures have failed to stop the number of deaths from increasing year over year.

Given the sustained rate of overdose and death due to opioids, we can only conclude that the response to date has been inadequate when compared to the challenge we face. If the government wants to properly confront this unfolding tragedy, the response needs to be an order of magnitude stronger.

Recommendation: Support inclusion of naloxone nasal spray in provincial drug formularies

One small piece of this response needs to be the expanded use and access to nasal spray for opioid overdose treatment. Unlike injectable naloxone, nasal sprays are designed for use in the community by non-health professionals. When administered after an overdose event, this easy to use treatment immediately counteracts the effects of opioids on the user's system. With a higher concentrated dose, one dose of NARCAN naloxone nasal spray can reverse overdose from the most toxic opioids including carfentanyl.

Over the past year, NARCAN naloxone nasal spray has been listed and insured by several provincial and federal drug programs, after having negotiated a common price via the pan-Canadian Pharmaceutical Alliance. However, we know that this treatment is still not getting into the hands of all the people who need it, including in provinces where the opioid crisis has been most severe. Furthermore, most opioid users are unaware of how to access this life-saving medicine.

If the federal government were to fund 50% the cost to include this treatment in provincial drug programs, it would provide a powerful incentive to make this treatment available to at-risk people in their communities via pharmacy. It will also signal the federal government's full commitment to dealing with this deadly problem and spur all provincial drug programs to do the same.

While health care is clearly a provincial responsibility, there is precedent for significant federal intervention in past public health crises.

In 2010, the federal government purchased 50 million doses of H1N1 vaccine at a cost of \$403 million dollars. It also undertook at a \$4.3 million dollar advertising campaign, informing the public of how to access the vaccine, and how to avoid getting infected. This swift government action likely saved hundreds of Canadian lives.

Recommendation: Update opioid prescribing guidelines to include co-dispensing of naloxone

In addition to defraying the cost of nasal spray for overdose treatment, we propose that the government mandate co-dispensing of intranasal naloxone for high risk opioid prescriptions in at-risk populations.

Over the past year, the federal government has shown leadership by covering the cost of naloxone nasal spray for eligible First Nations and Inuit people via the Non-Insured Health Benefits Program, as well as for veterans via the VAC Drug Formulary. While these steps will make a tremendous difference, there is still low awareness among health providers and at-risk populations of the availability of naloxone nasal spray.

Health Canada has made it possible for pharmacists to dispense naloxone without a prescription. The Ontario Pharmacists Association have published guidelines recommending the dispensing of naloxone for at risk patients who have been prescribed opioids. However, the level of co-dispensing remains unacceptably low. We believe that the government should address this gap by updating their opioid prescribing guidelines to include advice on what constitutes a high risk opioid prescription and when it should be co-dispensed with naloxone, particularly for at-risk populations. This common sense measure would help to ensure that Canadians with a potentially lethal opioid supply have ready access to life-saving naloxone right next to it in their medicine cabinet, and help to reduce the stigma associated with overdose.

Recommendation: Increase awareness of the risk and treatments for opioid abuse

Finally, we recommend that the federal government undertake a public health advertising effort related to the opioid crisis, similar to the HIN1 communications effort in 2010. Public awareness around this issue is still unacceptably low, despite the devastating impact it is has had on communities.

The government has a role to play in reducing the stigma associated with opioid addiction and raising awareness regarding how to reduce opioid-related deaths. Legal and illegal opioid users

need to be furnished with basic information on how to mitigate harm to themselves, and where they can access nasal spray for opioid overdose treatment, drug testing kits and treatment options.

I do not doubt the sincerity of members of this government when they say that they want to bring about an end to the opioid crisis in Canada. However, effectively addressing this crisis demands greater urgency and a willingness to break down silos to get required care where it is needed most. Thousands are already dead. Thousands more will die if the Canadian government does not dramatically increase its response.

While this budget proposal will not solve the opioid crisis, it hopefully provides this committee with a few new tools to address it – tools that will save lives.

I thank the committee for its consideration and would welcome the opportunity to further discuss these ideas with you.