

# Opioids & Stimulants in Utah

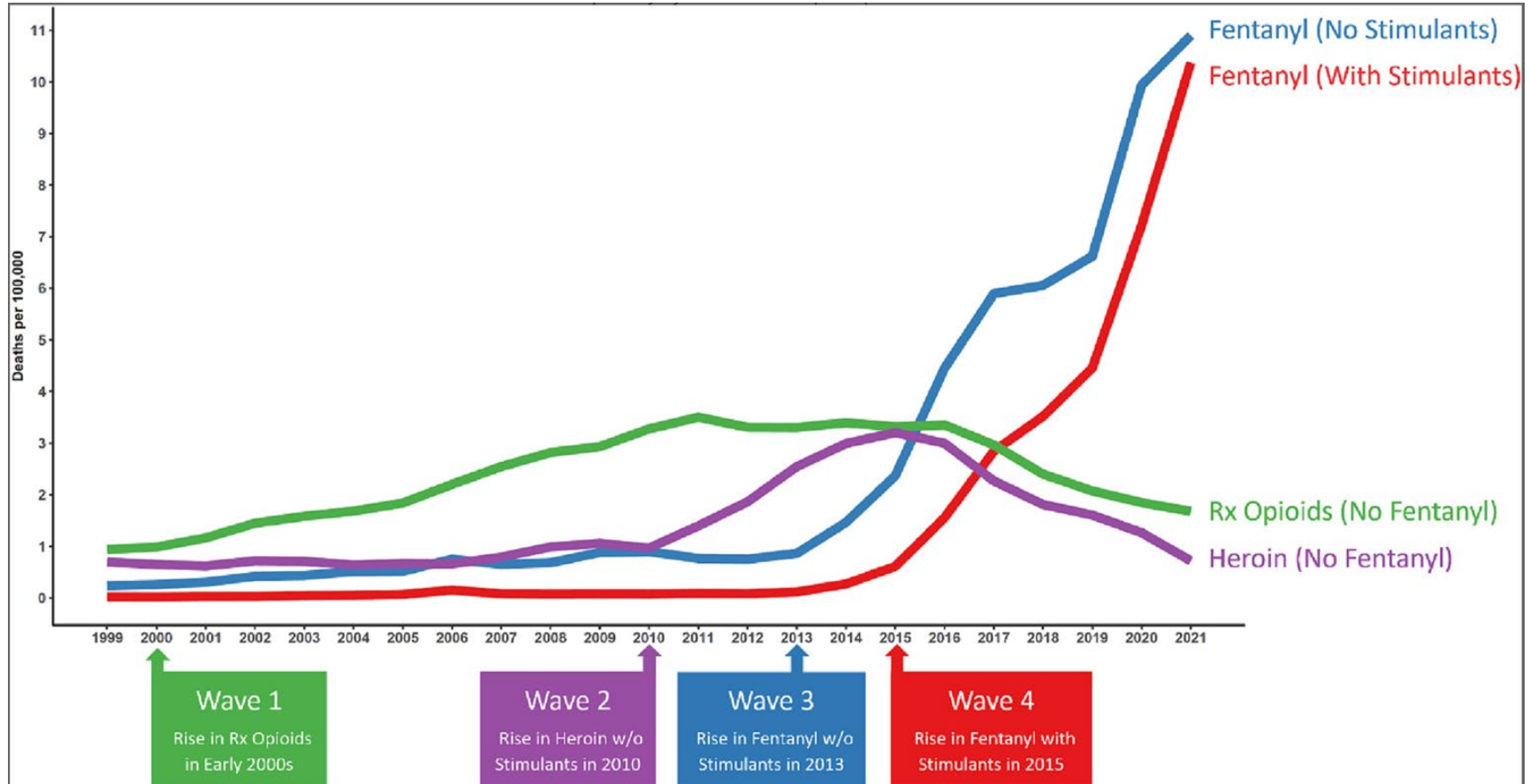
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VaRonica Little, LCSW  
2023 Rural Opioid & Stimulant Wellness Summit

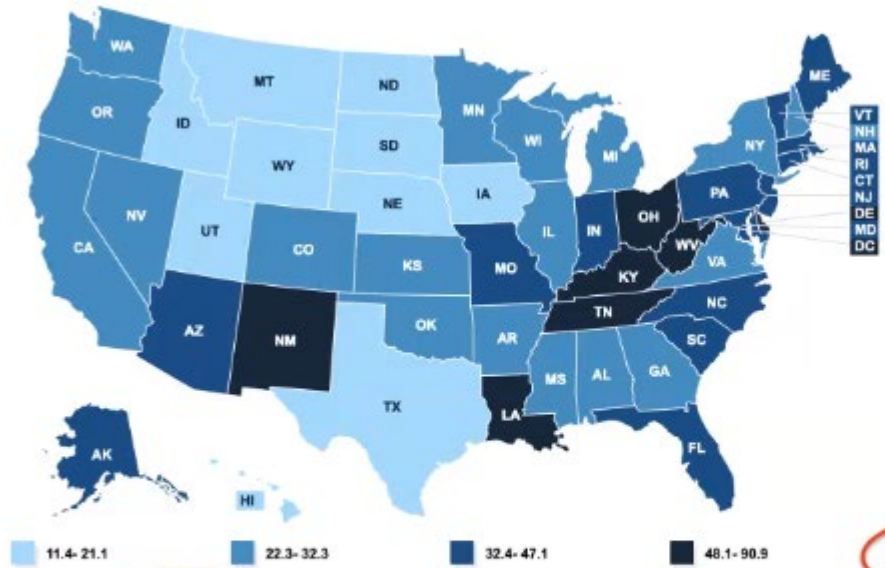
“We must accept finite disappointment, but never lose infinite hope.”

- Martin Luther King, Jr.

# National Overdose Trends



# 2021 All U.S. Overdose Death Rates



2021 Utah 42<sup>nd</sup>

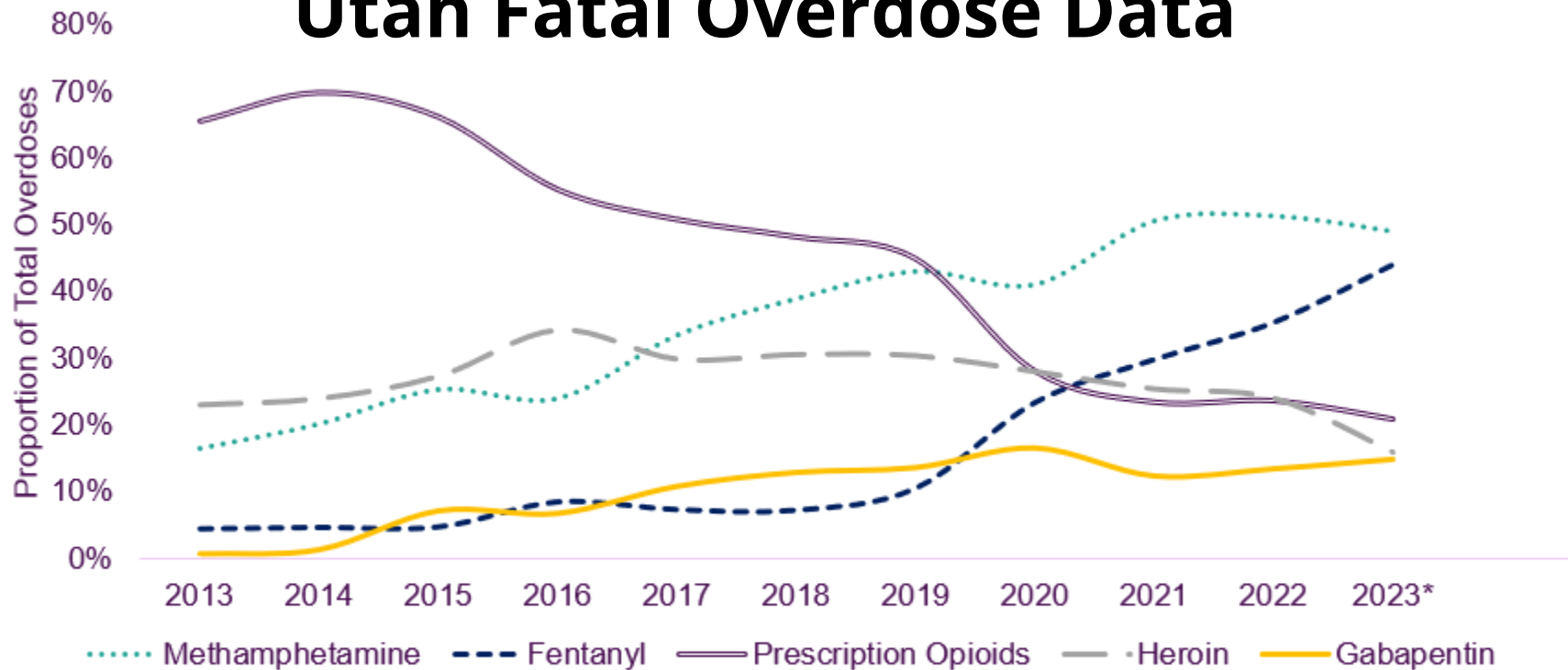
Location	All Drug Overdose Death Rate (Age-Adjusted)
United States	32.4
Utah	21.1

2012 Utah 4<sup>th</sup>

Location	All Drug Overdose Death Rate (Age-Adjusted)
1. West Virginia	32.0
2. Kentucky	25.0
3. New Mexico	24.7
4. Utah	23.1

<https://www.kff.org/statedata/collection/opioid-epidemic/>

# Utah Fatal Overdose Data

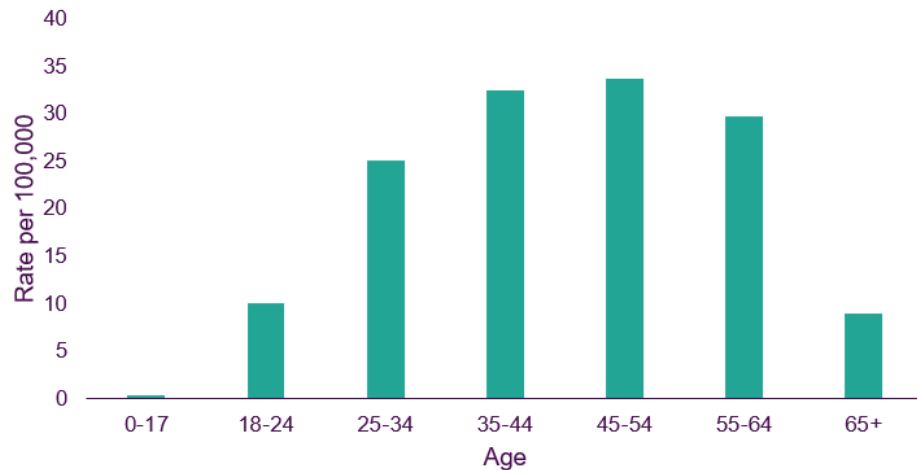
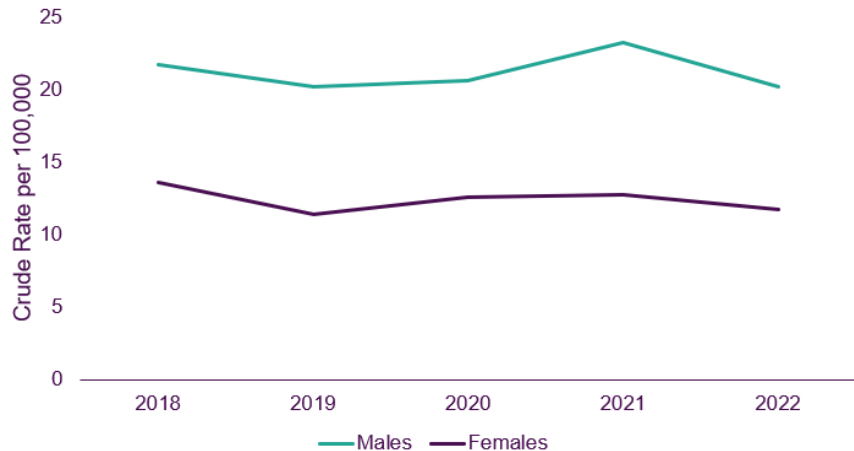


\*Partial data

This shows partial data from the Office of the Medical Examiner for 2023 (data through June 30, 2023)



# Utah Fatal Overdose Data



Utah Death Certificate Database,  
Office of Vital Records and  
Statistics.



Utah Department of  
**Health & Human**  
Services

# Race

## Utah Fatal Overdose Data

Utah population (2022 census )  
3,380,800

### Race

White 90.3%

Hispanic or Latino 14.8%

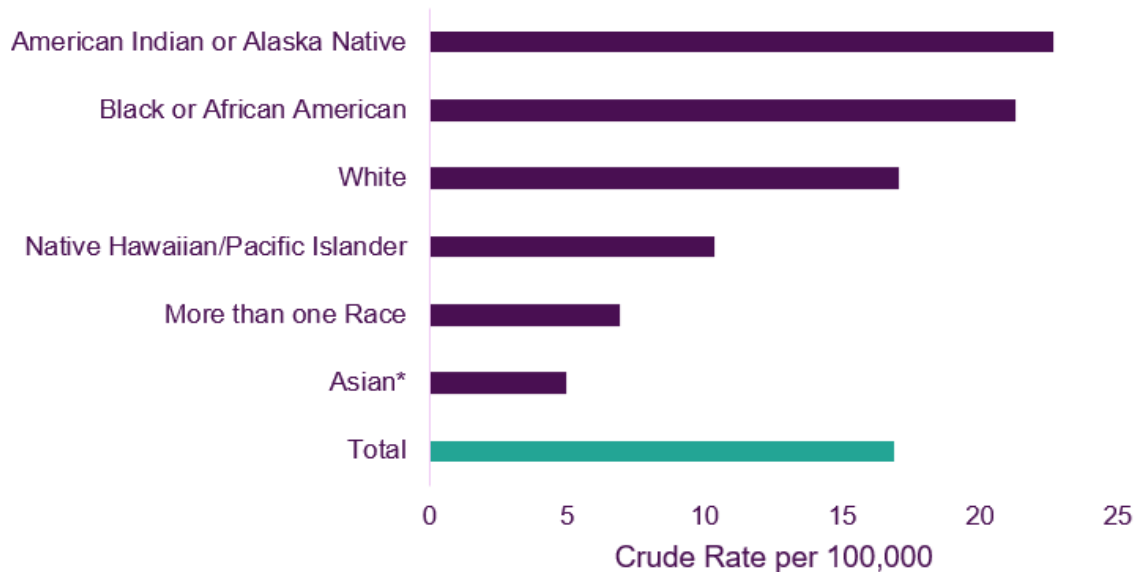
More than one Race 2.8%

Asian 2.7%

American Indian and Alaska Native  
1.6%

Black or African American 1.5%

Native Hawaiian / Pacific Islander 1.1%



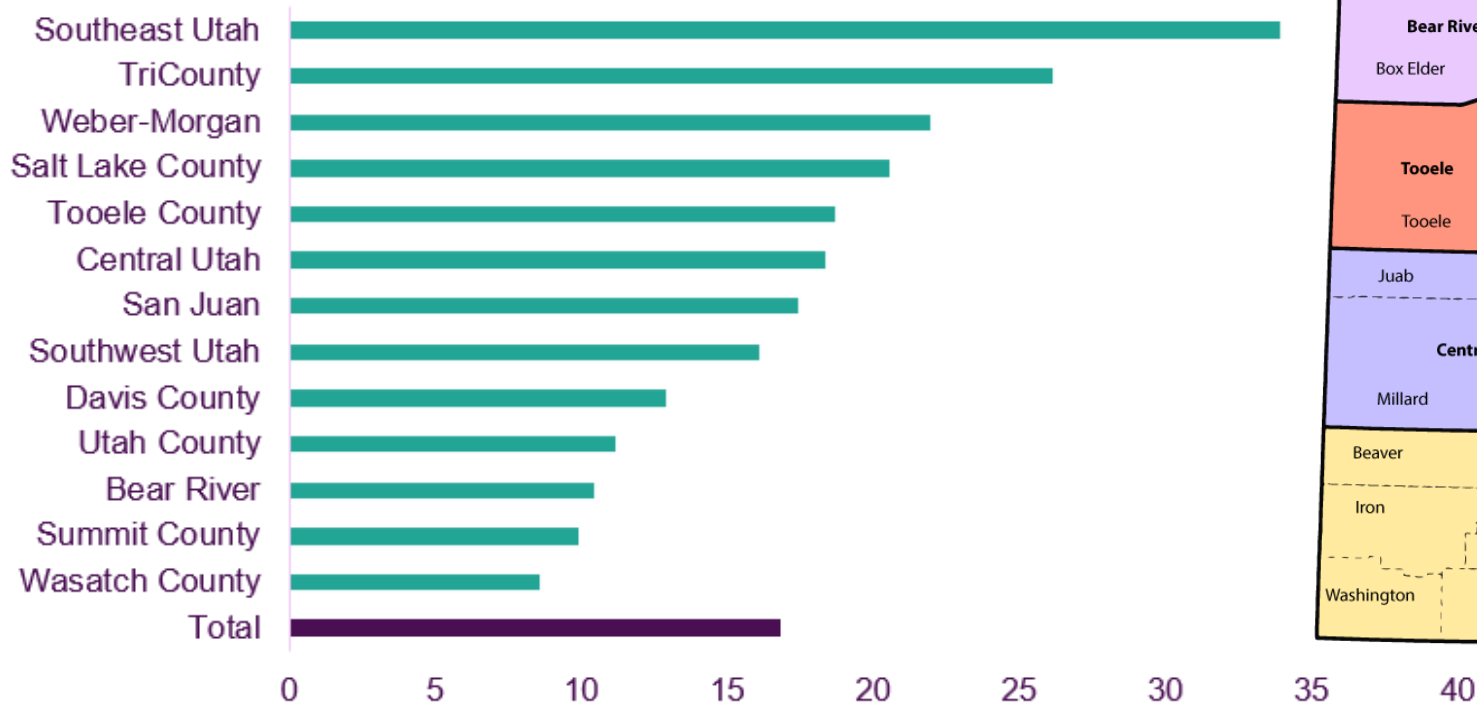
\*Rate is unstable per DHHS standards

Utah Death Certificate Database,  
Office of Vital Records and  
Statistics.

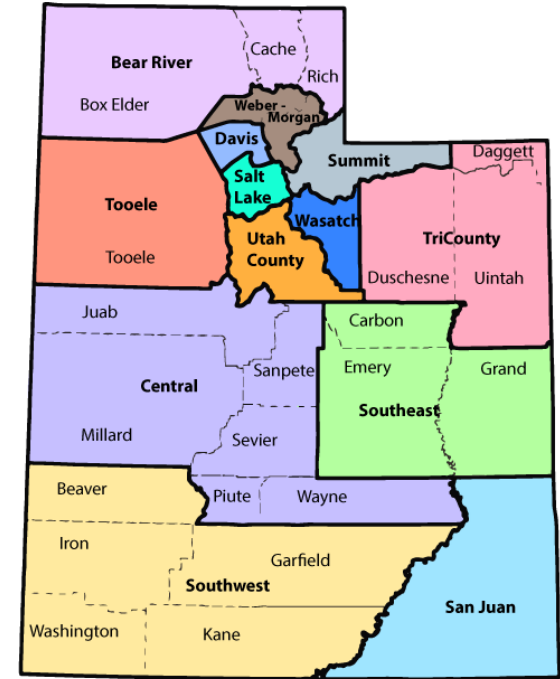


Utah Department of  
**Health & Human**  
Services

# Utah Fatal Overdose Data



Map of Utah's 13 Local Health Districts



Utah Death Certificate Database,  
Office of Vital Records and  
Statistics.



Utah Department of  
**Health & Human**  
Services

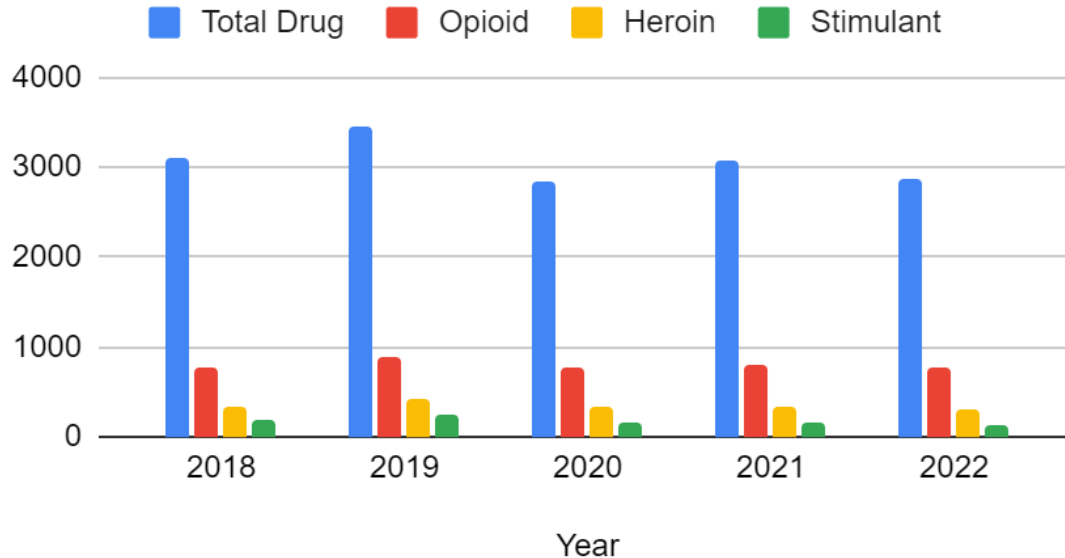


# Not all overdoses are fatal

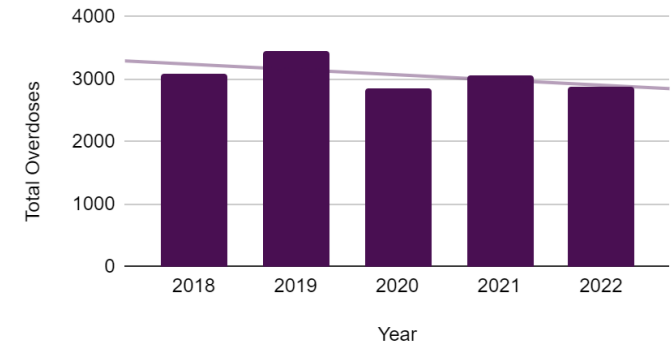


# Non-Fatal Overdose Data

## Total Drug, Opioid, Heroin and Stimulant

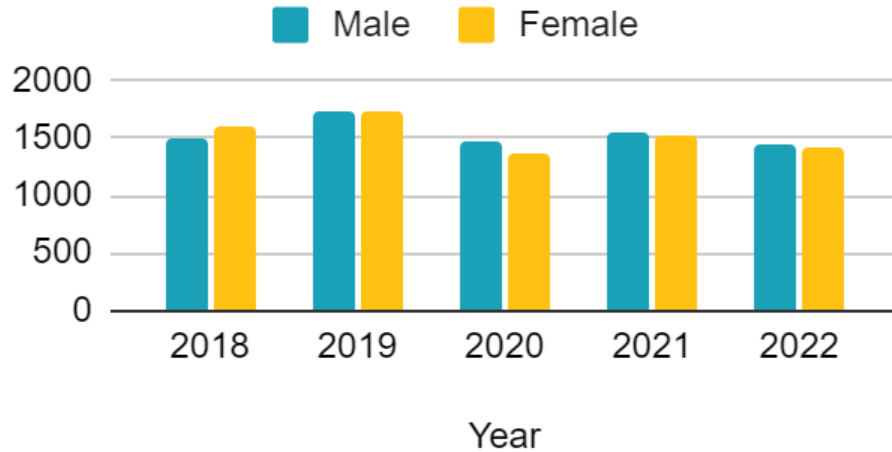


## Total Overdoses by Year

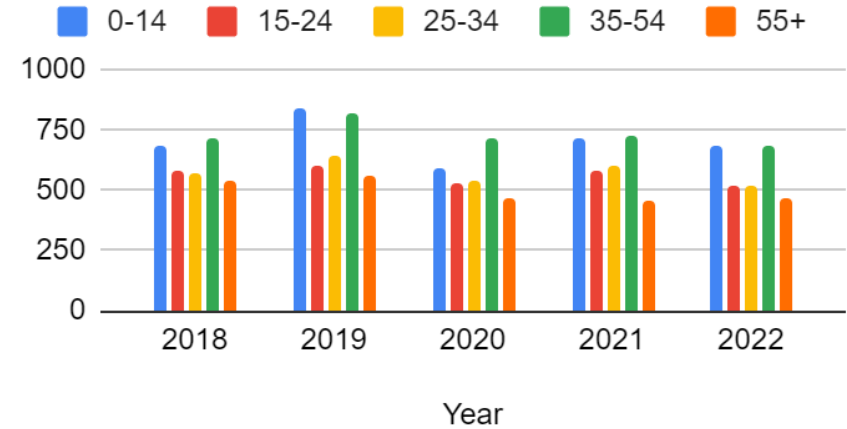


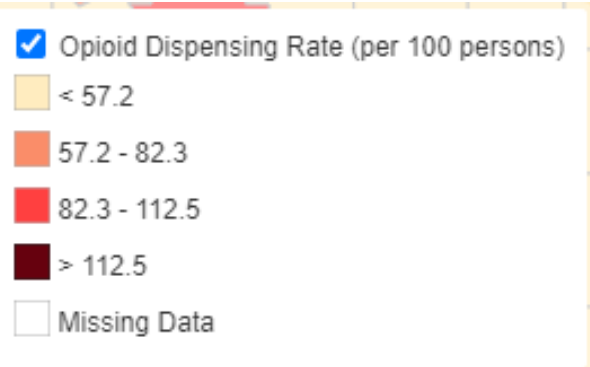
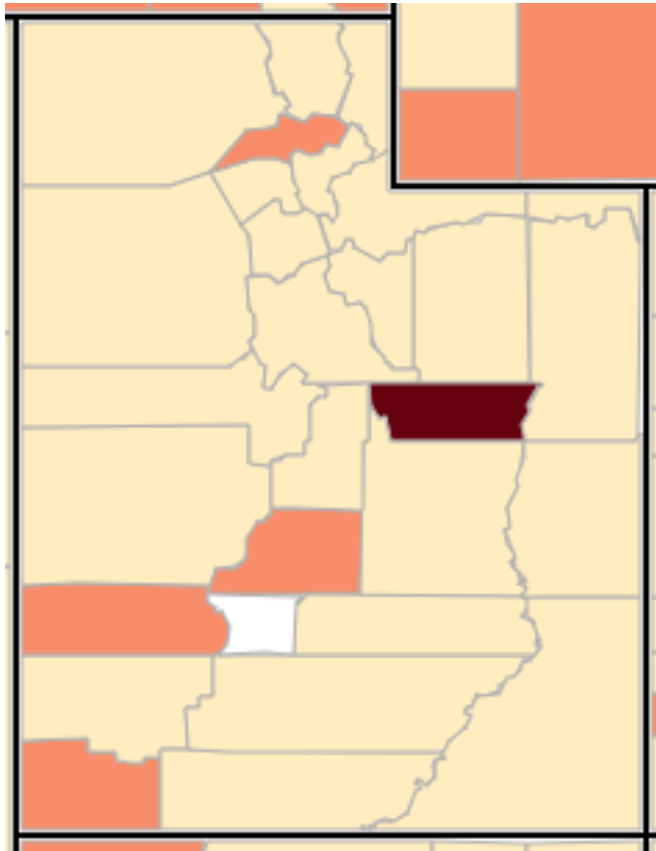
# Non-Fatal Overdose Data

## Total Drug Overdoses by Sex



## Total Drug Overdoses by Age





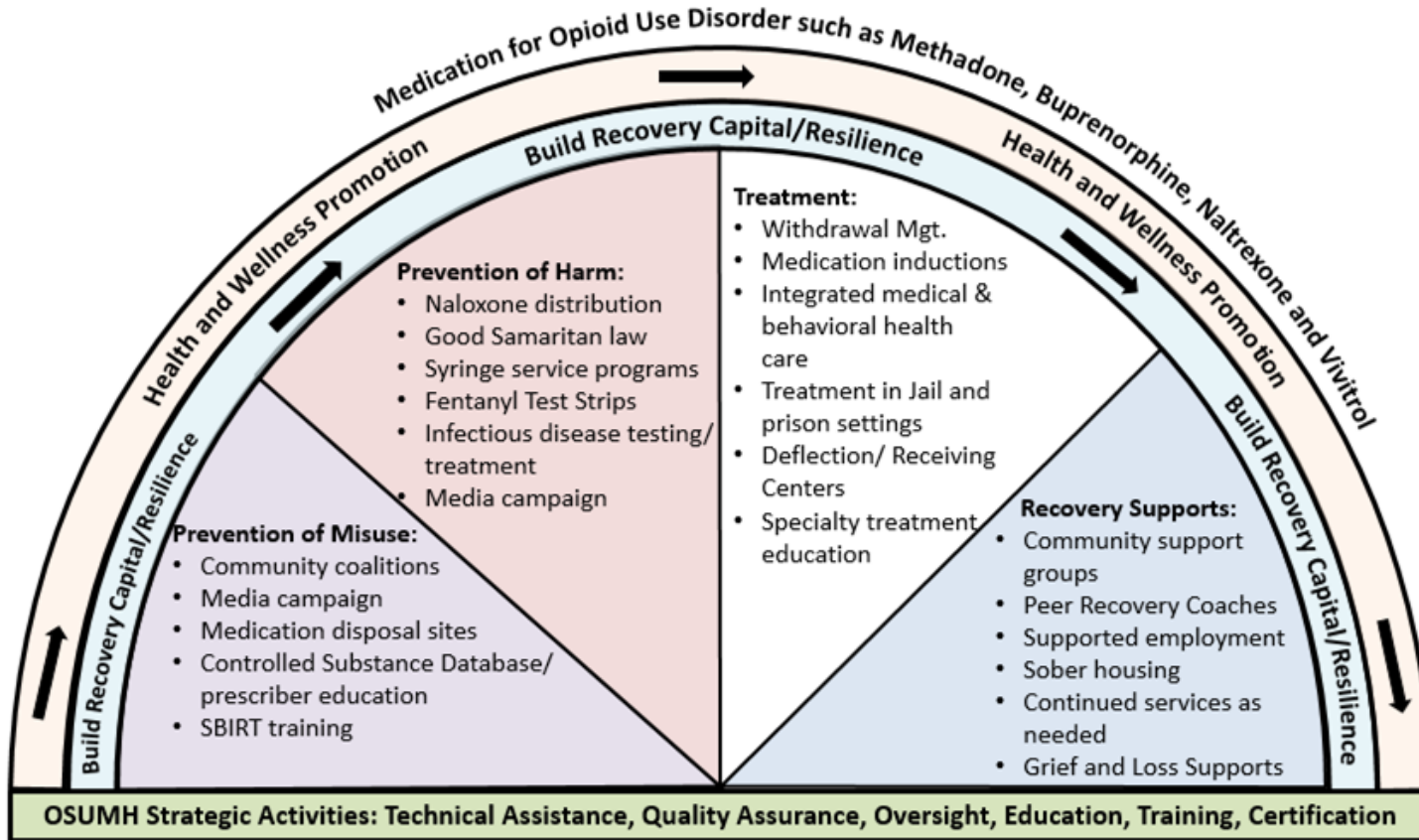
Utah's dispensing rate is 48.8  
which is higher than the  
national average of 43.3



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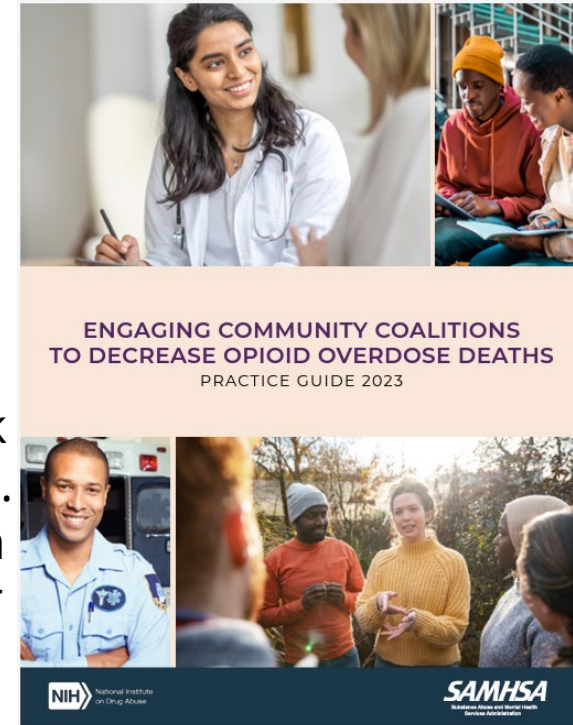
With all of this information what do we do?

# It's all a continuum of care





- Prevention is simple—reduce factors that increase risk and increase factors that promote resilience or coping.
- \$1 invested in prevention can result in a \$36 savings in healthcare, law enforcement, social services and other governmental expenditures.



# Prevention Campaigns

## Know Your Script

### PROPER STORAGE & DISPOSAL

#### PROPER STORAGE

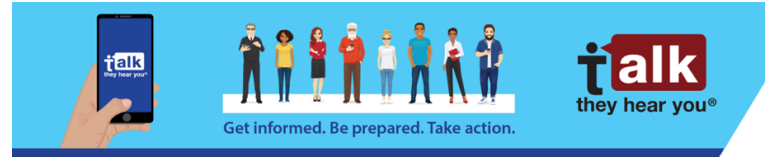
Over 50% of abuse prescriptions are obtained from friends & family, often taken from a medicine cabinet.

- 1 Make sure your medications are out of sight and out of reach from children and guests. Lock boxes work well.
- 2 Teach your children about medication safety.
- 3 Never tell children medication is candy to get them to take it.
- 4 Make sure the safety cap is locked. Twist until you hear the click or you can't twist anymore.
- 5 Keep track of how much medication you've used and keep a list of all medications in the house.

#### PROPER DISPOSAL

Don't contaminate our groundwater! Dispose of unused or expired medications in a secure drop box—visit [knowyourscript.org](http://knowyourscript.org) to find one nearest you. If you can't make it to a drop box follow these trash disposal tips:

- 1 Do NOT crush tablets or capsules
- 2 Mix medications with items such as kitty litter, a soiled diaper or used coffee grounds.
- 3 Place the mixture in a sealed device (e.g., plastic bag).



### SAMHSA's "Talk. They Hear You."® Campaign Launches New Mobile App for Parents



The Substance Abuse and Mental Health Services Administration's (SAMHSA) new "Talk. They Hear You."® **campaign mobile app** helps parents and caregivers prepare for some of the most important conversations they may ever have with their kids. The app shows parents how to turn everyday situations into opportunities to **talk with their kids about alcohol and other drugs**. It also equips them with the necessary **skills, confidence, and knowledge** to start and continue these conversations as their kids get older.

#### Features of the new app include:

- Sample conversation starters
- Ways to keep the conversation going
- An interactive practice simulation section
- The opportunity to earn badges for practicing and having real-life conversations
- A resources section with informative and useful videos, fact sheets, brochures, infographics, guides, toolkits



# Talk they hear you app





**DEA NATIONAL <sup>Rx</sup>  
 TAKEBACK**

Saturday, October 24 | 10 a.m. – 2 p.m.  
[DEATakeBack.com](http://DEATakeBack.com)



*Please place pills and patches in a sealable bag for disposal.*

**BEFORE YOU TAKE AN OPIOID, TAKE A MOMENT TO ASK YOUR DOCTOR:**

- 1 Am I at risk for addiction?
- 2 Will something else work?
- 3 How long will I be taking them?
- 4 Are you prescribing the lowest possible dose?
- 5 What's the plan to taper me off?



**Walmart Pharmacy**

reminds you to bring your unused medications to a takeback location near you:

**Walmart**  
 1851 W Hwy 40 Vernal  
 Stewart's Marketplace  
 245 W Hwy 40 Roosevelt  
 Duchesne County Sheriff's Department  
 21554 W 9000 S Duchesne



**OPIOID-OVERDOSE REDUCTION  
CONTINUUM OF CARE APPROACH (ORCCA)**  
PRACTICE GUIDE 2023



**1**

Opioid overdose  
prevention education and  
naloxone distribution in  
higher risk populations



**2**

Effective delivery of  
medication for opioid use  
disorder treatment with  
outreach and delivery to  
higher risk populations



**3**

Safer opioid prescribing  
and dispensing





## The reality behind Utah's addiction

**603**

Utahns died as a result of drug overdose in 2021.

**67%**

of Utah overdose deaths were opioid related overdoses in 2021.

**29%**

of Utah overdose deaths were due to fentanyl related overdoses in 2021.

**46**

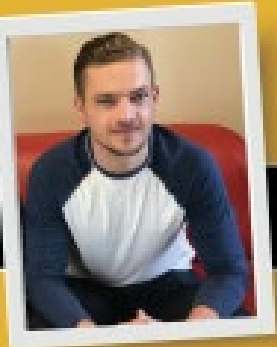
Utahns died from drug overdose on average each month in 2021.

**YOU** and Naloxone  
Saved **MY** Life

Saved **MY** Life

**CALL 911**

**UtahNaloxone.org**



**Heroin. Pills. It All Kills.**

**NALOXONE SAVES. GET IT.**

**UtahNaloxone.org**



## Hepatitis C virus (HCV)

### What is hepatitis?

Hepatitis means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected. Heavy alcohol use, toxins, some medications, and certain medical conditions can cause hepatitis, however hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are hepatitis A, hepatitis B, and hepatitis C. Although all types of viral hepatitis can cause similar symptoms, they are spread in different ways, have different treatments, and some are more serious than others.

### How is hepatitis C spread?

The hepatitis C virus is usually spread when someone comes into contact with blood from an infected person. This can happen through:

#### → Sharing drug-injection equipment

Today, most people become infected with hepatitis C by sharing needles, syringes, or any other equipment used to prepare and inject drugs.

#### → Birth

Approximately 6% of infants born to infected persons will get hepatitis C.

#### → Healthcare exposures

Although uncommon, people can become infected when healthcare professionals do not follow the proper steps needed to prevent the spread of bloodborne infections.

#### → Unregulated tattoos or body piercings

Hepatitis C can spread when getting tattoos or body piercings in unlicensed facilities, informal settings, or with non-sterile instruments.

#### → Sharing personal items

People can get infected from sharing glucose monitors, razors, nail clippers, toothbrushes, and other items that may have come into contact with infected blood, even in amounts too small to see.

#### → Blood transfusions and organ transplants

Before widespread screening of the blood supply in 1992, hepatitis C was also spread through blood transfusions and organ transplants.

HCV is **not** spread by casual contact, including sharing eating utensils, breastfeeding, hugging, kissing, holding hands, coughing, or sneezing. It is also not spread through food or water.

Many people who live with HCV do not know they have it.

### What is hepatitis C virus (HCV)?

Hepatitis C is a liver disease caused by the hepatitis C virus. When someone is first infected with the hepatitis C virus, they can have a very mild illness with few or no symptoms or a serious condition which requires hospitalization. For unknown reasons, fewer than half of people who get hepatitis C are able to clear, or get rid of, the virus without treatment in the first 6 months after infection.

Most people who get infected will develop a chronic, or lifelong, infection. Left untreated, chronic hepatitis C can cause serious health problems including liver disease, liver failure, liver cancer, and even death.



# Rapid HIV and HCV Testing Guidance

#### Harm Reduction Issues

## HEPATITIS C

Hepatitis C (HCV) is a virus that affects the liver. It's the most common blood-borne virus in the U.S. and **affects roughly 2.5 million people** according to the CDC. Shared syringes are one of the most common ways to spread this illness, putting people who use drugs at increased risk of contracting it.

Thanks to robust harm reduction services and advances in treatment, HCV is both preventable and curable. Harm Reduction is dedicated to demanding access to treatment for people regardless of insurance. These advocacy efforts are getting us closer to eliminating HCV.



# Syringe Service Programs

The **Utah Syringe Exchange Network (USEN)** is a coalition of over 30 community agencies, state and local governments, law enforcement, medical providers and other stakeholders working together to collaborate on comprehensive Harm Reduction services for people who use drugs in Utah. Members provide expertise, contribute ideas, make connections, leverage resources, and research existing programs to design best practice operating procedures and effective, sustainable implementation of syringe exchange efforts in Utah.



Partners

Members of the Utah Syringe Exchange Network are valuable partners in the state's progress toward comprehensive and accessible harm reduction services.



Community Members

All Utah residents are stakeholders in the Utah Syringe Exchange Network. USEN invites community members to engage in Utah's harm reduction movement.



Participants

The Utah Syringe Exchange Network exists to increase access and improve services for syringe exchange participants in every part of the state.

## It is not just needles

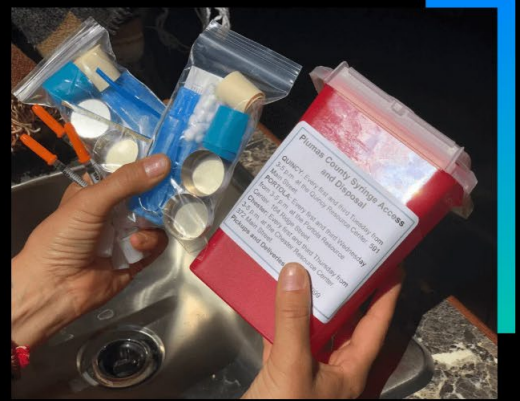
### Harm Reduction Issues

# SAFER DRUG USE

We recognize that using drugs introduces risk – but there are ways to make it safer. People can reduce their risk of HIV, hepatitis C, overdose, and other drug-related harms by applying evidence-based harm reduction strategies around safer drug use.

We offer basic information about drug use and safer-use tips for people who use drugs and providers to get on the same page.

[Discover the Principles of Harm Reduction](#)



# FIVE STEPS TO REVERSE AN OVERDOSE

1. Assess the person
2. Call 911
3. Rescue breathing
4. Administer naloxone
5. Monitor and support



## SIGNS OF AN OPIOID OVERDOSE

Learn how to spot an overdose and what to do.



Breathing  
slow or absent



Cannot be woken up  
or not moving



Choking  
or coughing, gurgling,  
or snoring sounds



Dizziness  
and disorientation



Cold  
or clammy skin



Pupils  
extremely small



Discolouration  
of lips and nails

## CALL 911 IMMEDIATELY!

Your address: \_\_\_\_\_

THEN:



Give breaths  
1 breath every  
5 seconds



Use naloxone  
if you have it

## How do we know who needs services and how to direct them?



HEALTHCARE  
SOLUTIONS  
FOR UTAHNS

Wednesday, December 7, 2022

**8:00 AM-  
4:00 PM**

Utah Cultural Celebration Center  
1355 W 3100 S, West Valley City, Utah 84119

**UHPP ANNUAL CONFERENCE**





# Finding opportunities for interventions

*Screening*



*Safety  
Planning*



*Safe  
Means*



# Addressing shared risk and protective factors in a comprehensive way

## Individual

- Education
- Emotional regulation
- Unemployment
- Substance use
- Problem solving skills

## Relationship

- Family conflict
- Relationship conflict
- Communication skills
- Prosocial/antisocial peers
- Family support/connection

## Community

- Neighborhood economic status
- Community attachment/connectedness
- Recreational opportunities
- Availability of drugs/weapons
- Access to resources

## Society

- Cultural norms
- Economy health
- Media portrayals
- Law/policies

# MEDICATIONS FOR OPIOID OVERDOSE, WITHDRAWAL, & ADDICTION

Medications for opioid **overdose**, **withdrawal**, and **addiction** are safe, effective and save lives.

The National Institute on Drug Abuse supports research to develop new medicines and delivery systems to treat opioid use disorder and other substance use disorders, as well as other complications of substance use (including withdrawal and overdose), to help people choose treatments that are right for them.

FDA-approved medications for opioid addiction, overdose, and withdrawal work in various ways.

- ◁ **Opioid Receptor Agonist**  
Medications attach to opioid receptors in the brain to block withdrawal symptoms and cravings.
- ◁ **Opioid Receptor Partial Agonist**  
Medications attach to and partially activate opioid receptors in the brain to ease withdrawal symptoms and cravings.
- ◁ **Opioid Receptor Antagonist**  
Medications block activity of opioid receptors in the brain to prevent euphoric effects (the high) of opioids and alcohol and help reduce cravings.
- ◁ **Adrenergic Receptor Agonist**  
A medication that attaches to and activates adrenergic receptors in the brain and helps alleviate withdrawal symptoms.

## REDUCES OPIOID USE AND CRAVINGS

**Methadone**  
Daily liquid or tablet  
  
Dolophine®, Methadose®  
Generics available

**Naltrexone**  
Monthly Injection  
  
Vivitrol®

**Buprenorphine**  
Daily tablet  
Monthly injection  
  
Sublocade®  
Generic tablets available

**Buprenorphine/  
Naloxone**  
Daily film under the tongue or tablet  
  
Zubsolv®, Suboxone®  
Generics available

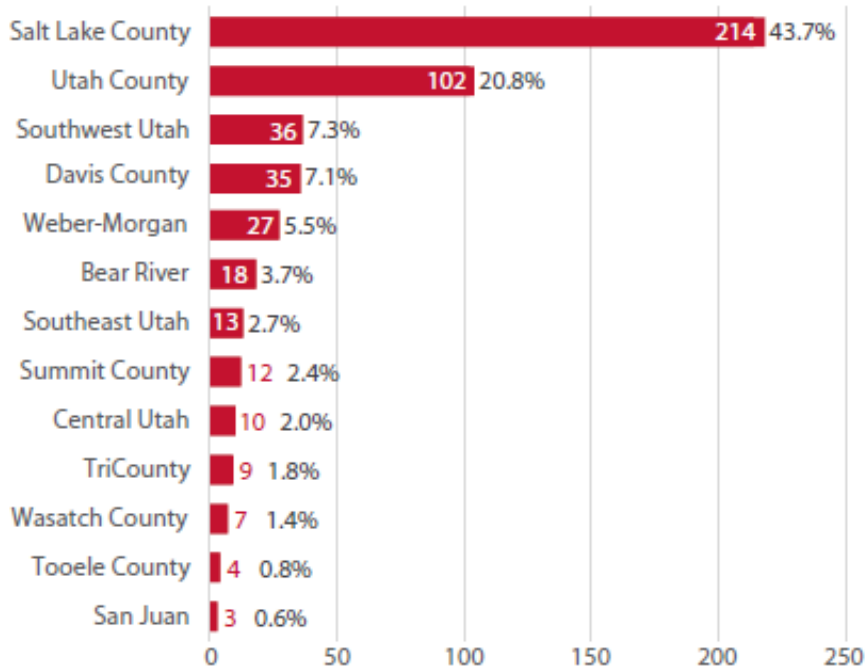
## TREATS WITHDRAWAL SYMPTOMS

**Lofexidine**  
As-needed tablet  
  
Lucemyra®

## REVERSES OVERDOSE

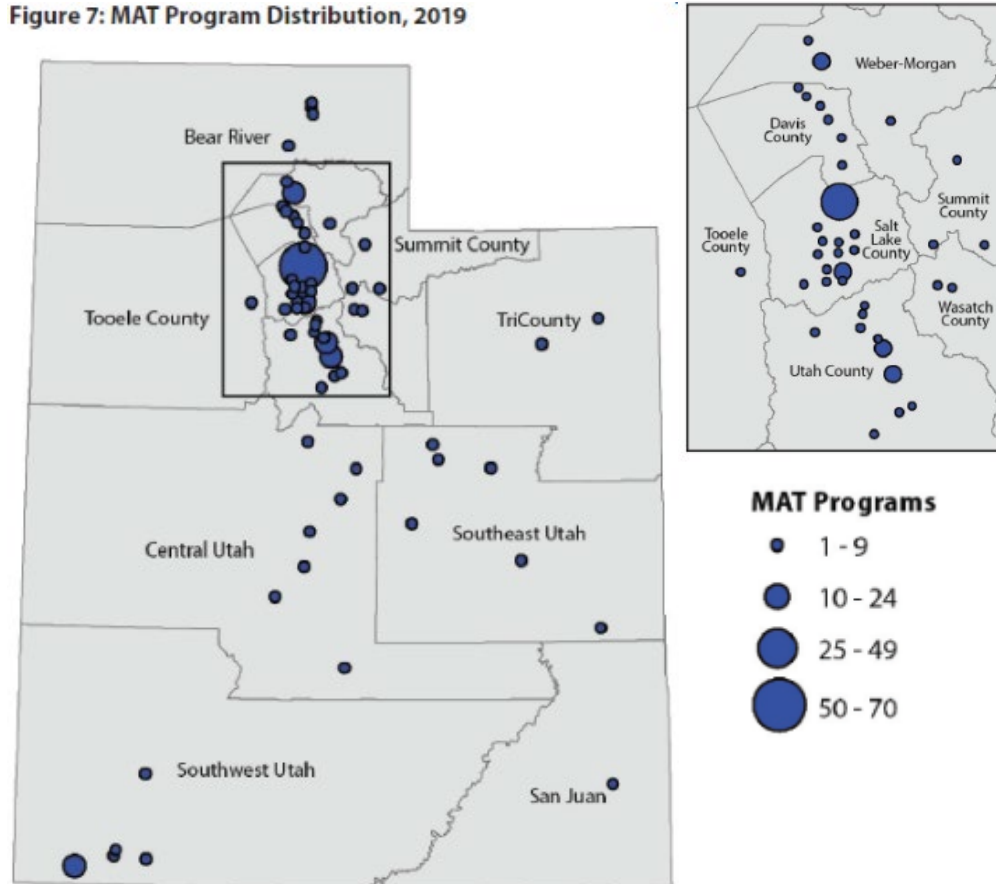
**Naloxone**  
Emergency nasal spray or injection  
  
Kloxxodo®, Narcan®, Zimhi™  
Generics available

**Figure 4: Total Medication Treatment Options (MAT, OTP, and OBOT) by Local Health District, 2019**

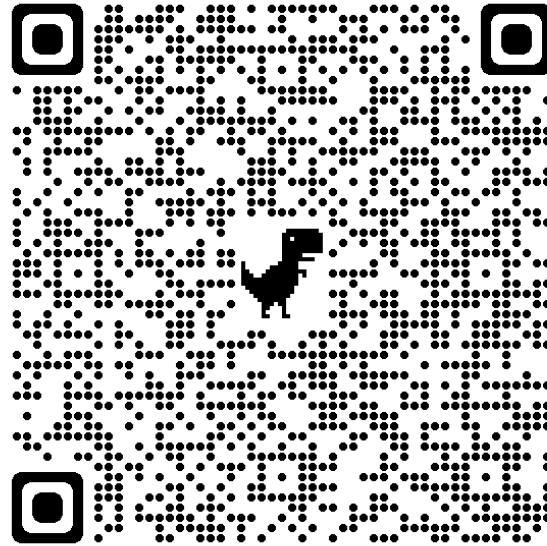


Source: Kem C. Gardner Policy Institute's inventory of Utah OUD medication treatment options.

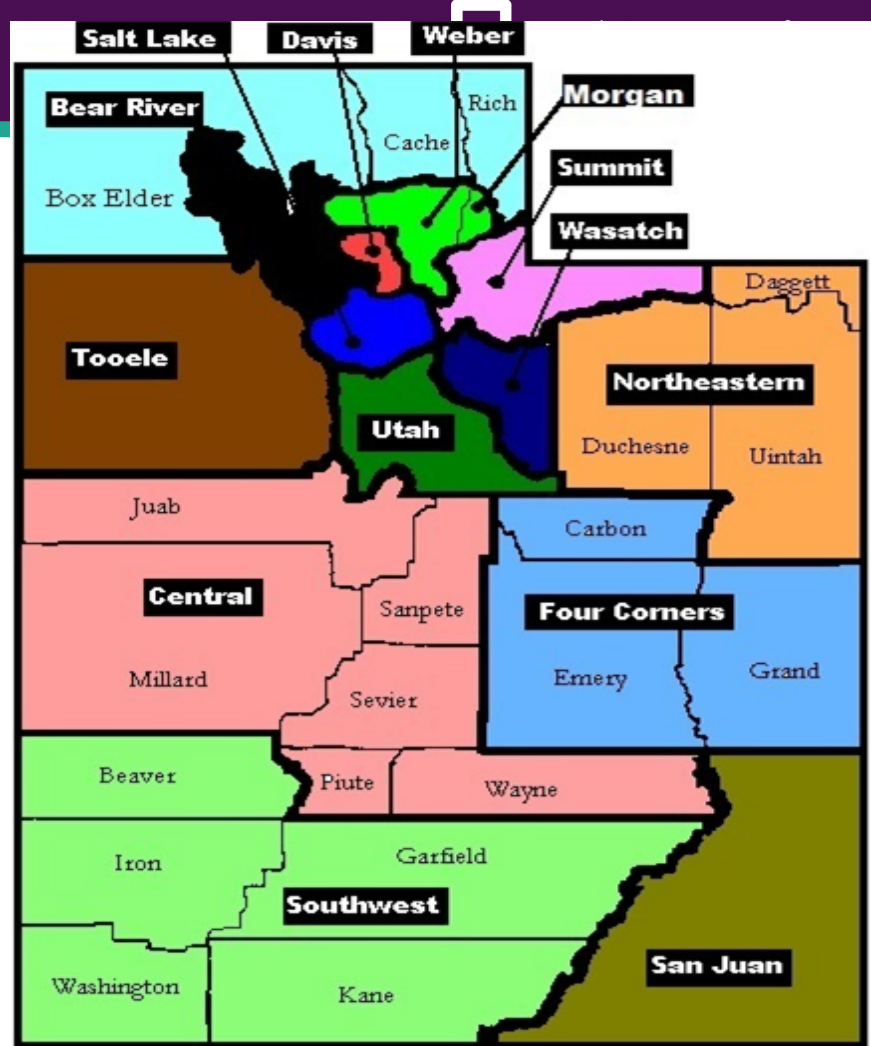
**Figure 7: MAT Program Distribution, 2019**



# Implementation Toolkit for incarcerated MOUD programs



Utah's local substance abuse authorities provide publicly funded services throughout the state





# UTAH ACUDETUX

TRAINING | ADVOCACY | COMMUNITY ACUDETUX

Bringing the ear acupuncture 5-needle protocol (5NP) to Utah (and beyond!)



- Community Recovery Organizations
- Peer Recovery Coaches/ Peer Supports
- Housing
- Employment
- Education/ Skills Training
- CRAFT Family Support Groups





## YOU ARE NOT ALONE.

Healthcare Professionals can be affected by substance use disorder just like anyone else. If left untreated, this can lead to many negative effects for medical professionals and patients alike.

REACH OUT AND LEARN MORE



Supporting  
and keeping  
professionals  
safe and  
cared for



### WHO ARE WE

We are a confidential Professional Health Program provided by the Utah Department of Commerce, Division of Occupational and Professional Licensing (DOPL). We currently provide services to Physicians, Physician Assistants, Nurses, Pharmacists, Veterinarians, Podiatrists and Dentists licensed by DOPL. UPHP is an alternative to public disciplinary action for licensed medical providers who have substance use disorders.



### WHAT WE DO

UPHP serves to promote the health and well being of licensed healthcare professionals through coordination of assessment, treatment placement, and long term aftercare monitoring.

# Some call it post-vention



## Grief of Overdose Death

### A Clinical Education Program

Nearly 42,000 people in the US died from opioids in 2016, a 28 percent surge from the previous year. Overall, Utah ranked 20th in the rate of drug-overdose deaths in 2016 — about 22.3 deaths per 100,000 people. Utah is one of 22 states with an overdose rate higher than the national average. This amounts to 466 opioid overdose deaths. We estimate that there are 25 affected survivors for each death by opioid overdose, some 1,150 family members and friends.

This clinical training program is intended for mental health/substance abuse agency clinicians, interventionists and direct care staff, community and hospital based mental health and medical personnel, first responders, clergy, and other interested professionals who may be called upon to address those bereaved by overdose death.

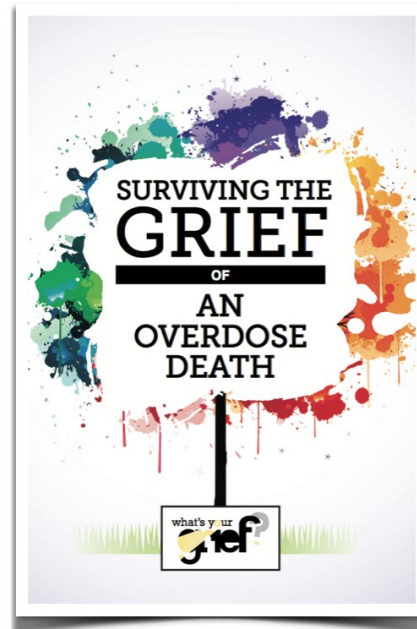
**Eight hours of clinical education. CEUs available.**

**Opportunity to participate in ongoing clinical practice study.**



This program is facilitated by

Caring Connections: A Hope and Comfort in Grief program at the University of Utah.  
in collaboration with Utah Department of Human Services-Substance Abuse and Mental Health  
katherine.p.supiano, PhD, LCSW 801-581-2322 katherine.supiano@hsc.utah.edu



# Where do we go from here

Reduce stigma

Increase awareness

Support holistic living (housing, education, employment)

Increase access to services

Serve those who are incarcerated

Expand death investigations



*Expand  
evidence  
based  
programs*



*Enhance  
community  
specific  
interventions*

**Prevention Works,  
Treatment is Effective  
& People Recover**

# Any Questions?

**VaRonica Little**  
**Utah State Opioid Treatment Authority**  
**[vlittle@utah.gov](mailto:vlittle@utah.gov)**