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THE OPIOID CRISIS IN CANADA

The Opioid Crisis in Canada

Federal Approach to a National Public Health Crisis

CICAD 63
April 2018

YOUR HEALTH AND SAFETY... OUR PRIORITY.



Summary

- To provide an overview of the opioid crisis in Canada
- To highlight key federal actions to address the opioid crisis
- To highlight federal priorities for action

What are Opioids?

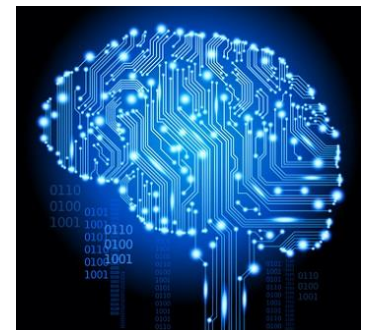
Opioids

- Opioids are drugs with pain relieving properties that are used primarily to treat pain.
 - Prescribed medications: fentanyl, morphine, oxycodone, hydromorphone, medical heroin
 - Produced or obtained illegally
- Opioids can also induce euphoria (feeling high), creating potential for them to be used improperly.



Problematic opioid use

- Problematic use of opioids can occur in multiple ways such as:
 - Using an opioid medication that was not prescribed for you
 - Taking an opioid medication improperly (taking more, wrong time)
 - Taking illegally produced or obtained opioid



Opioid Use Disorder

- Opioid use disorder changes the brain making it hard to stop using.

Substance use has long been a reality



Problematic Substance Use



Medical Use



Occasional Drug Use

But circumstances have changed fundamentally...

Prescription opioid use in Canada has been increasing, and the illegal drug supply has become contaminated

1. High rates of opioid prescribing

- Canada is the second highest per capita consumer of opioids among all countries
- In 2016, more than 20 million prescriptions for opioids were dispensed
- A recent CIHI report suggested that overall quantity of opioids dispensed in Canada declined between 2012 and 2016. However, the proportion of people prescribed strong opioids remained steady

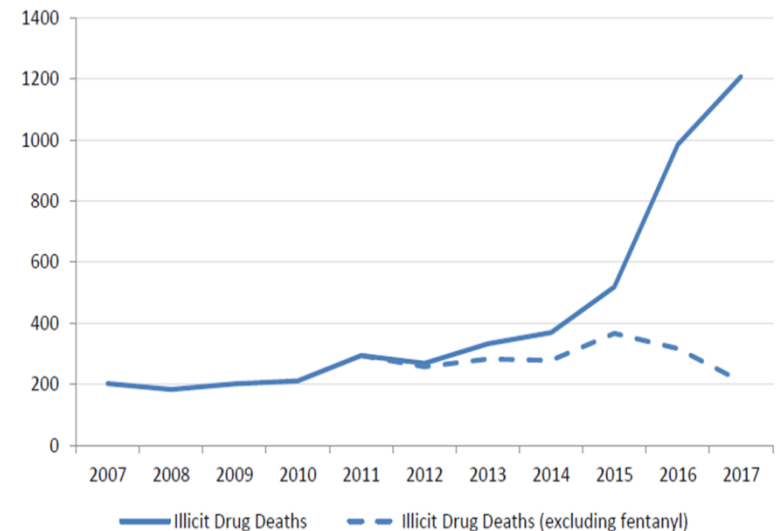
2. Emergence of strong synthetic opioids (e.g., fentanyl, carfentanil)* in illegal drug supply

- In Canada, the percentage of deaths involving fentanyl or fentanyl analogues was 74% from January to June 2017 (compared to 53% in 2016)
- Fentanyl was detected in 82% of illegal drug-related deaths in BC between January and October 2017

* fentanyl – ~100 times stronger than morphine

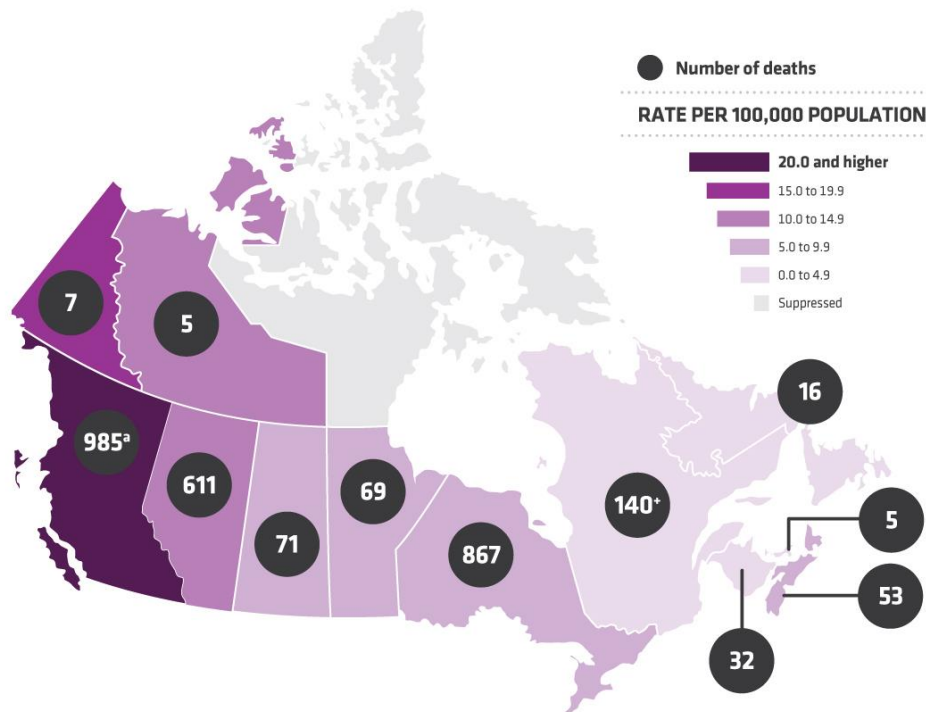
* carfentanil – ~10,000 times stronger than morphine

Illicit Drug Overdose Deaths Including and Excluding Fentanyl in British Columbia

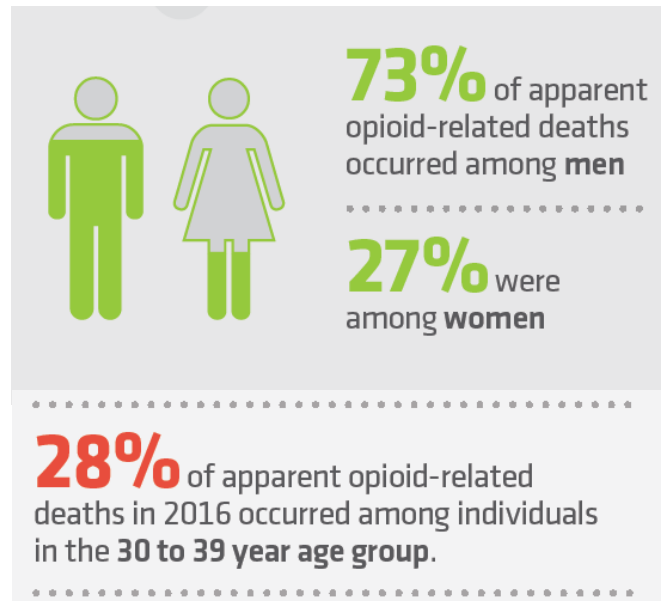


This has resulted in Canada's Opioid Crisis

There were 2,861 apparent opioid-related deaths in Canada in 2016



* British Columbia reports unintentional deaths related to all illicit drugs including, but not limited to, opioids.
* Expected to rise

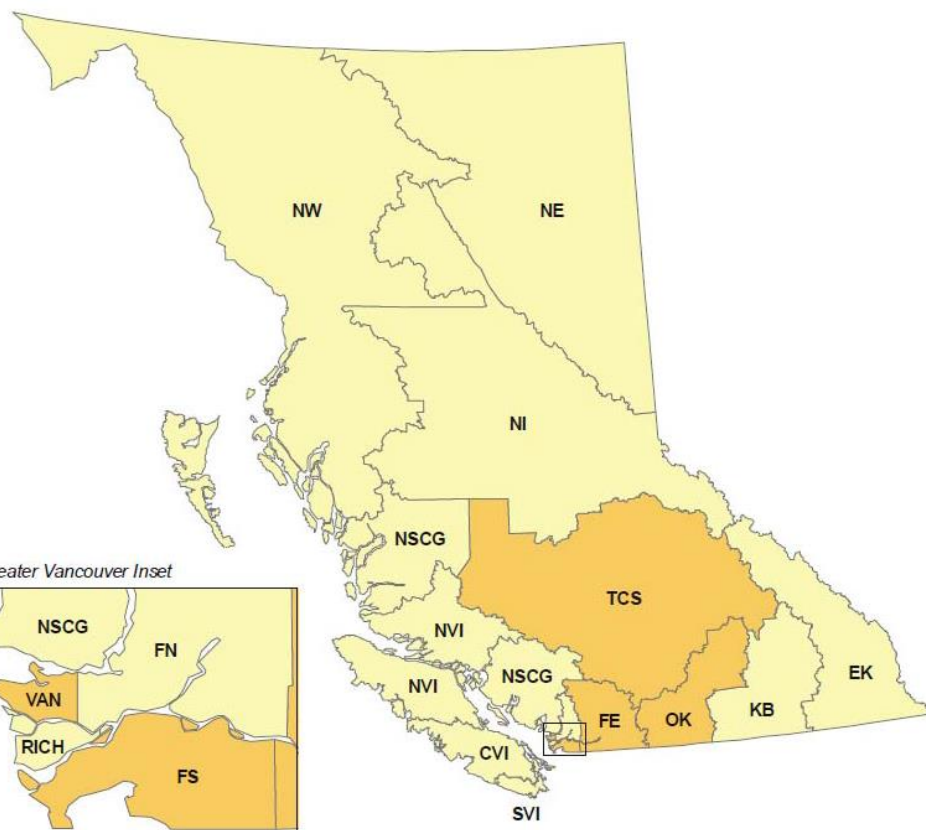


The number of opioid-related deaths are expected to exceed 4,000 in 2017

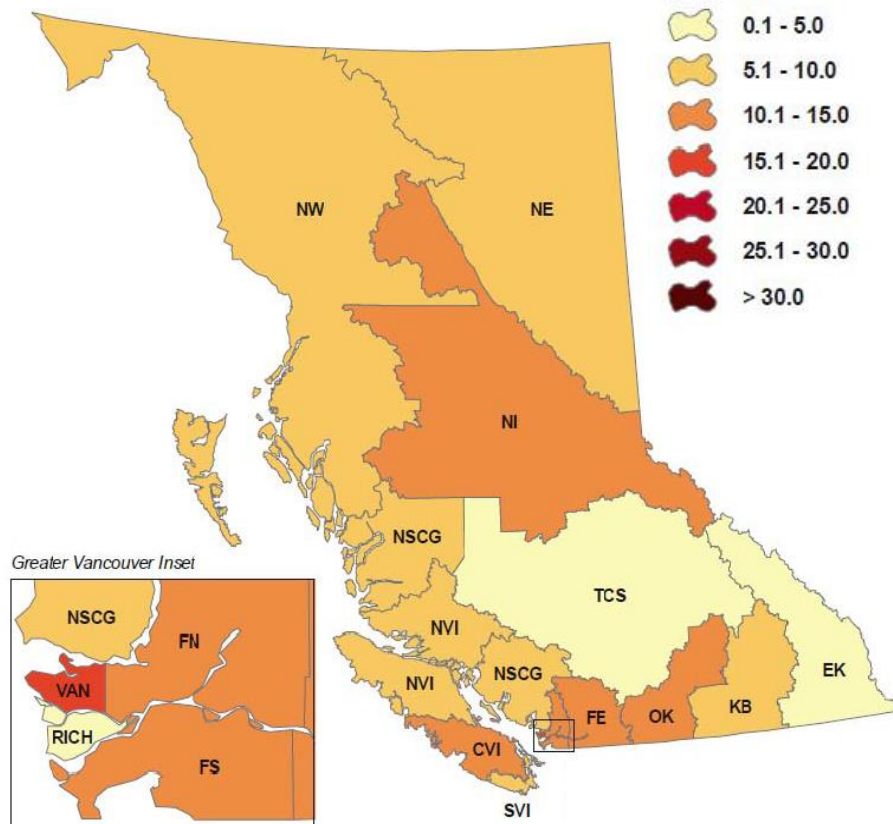
The initial spike in deaths first manifested in Vancouver, but has rapidly migrated to many parts of BC

Evolution of the Number of Illicit Drug-Related Deaths in British Columbia

2010



2015

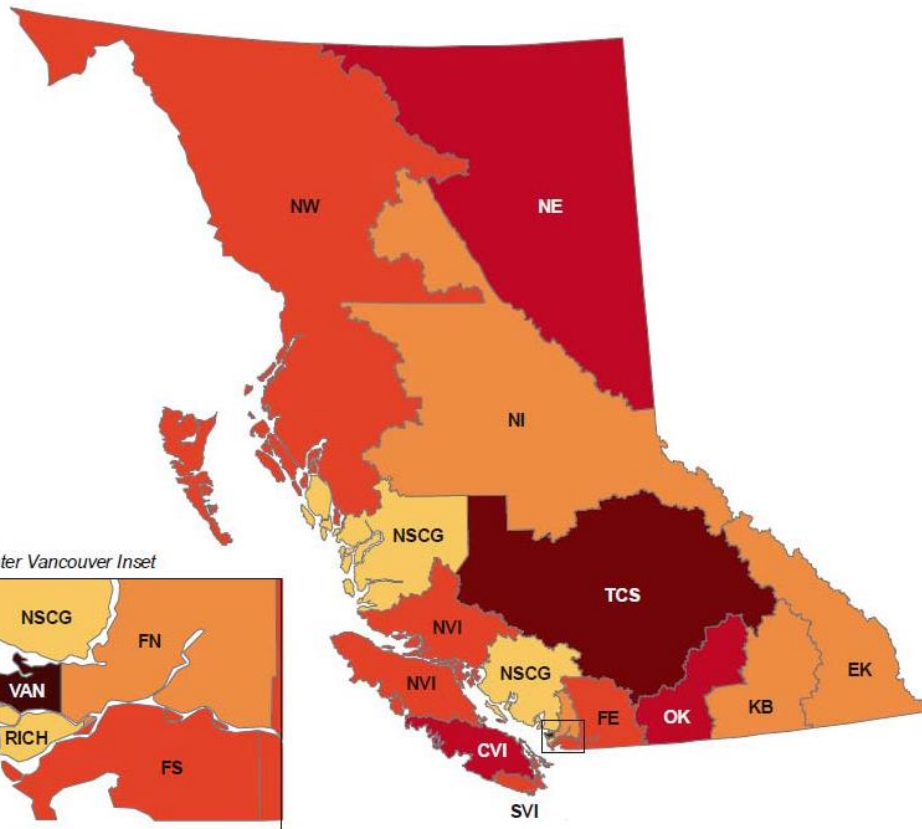


Rate per 100,000
population by HSDA

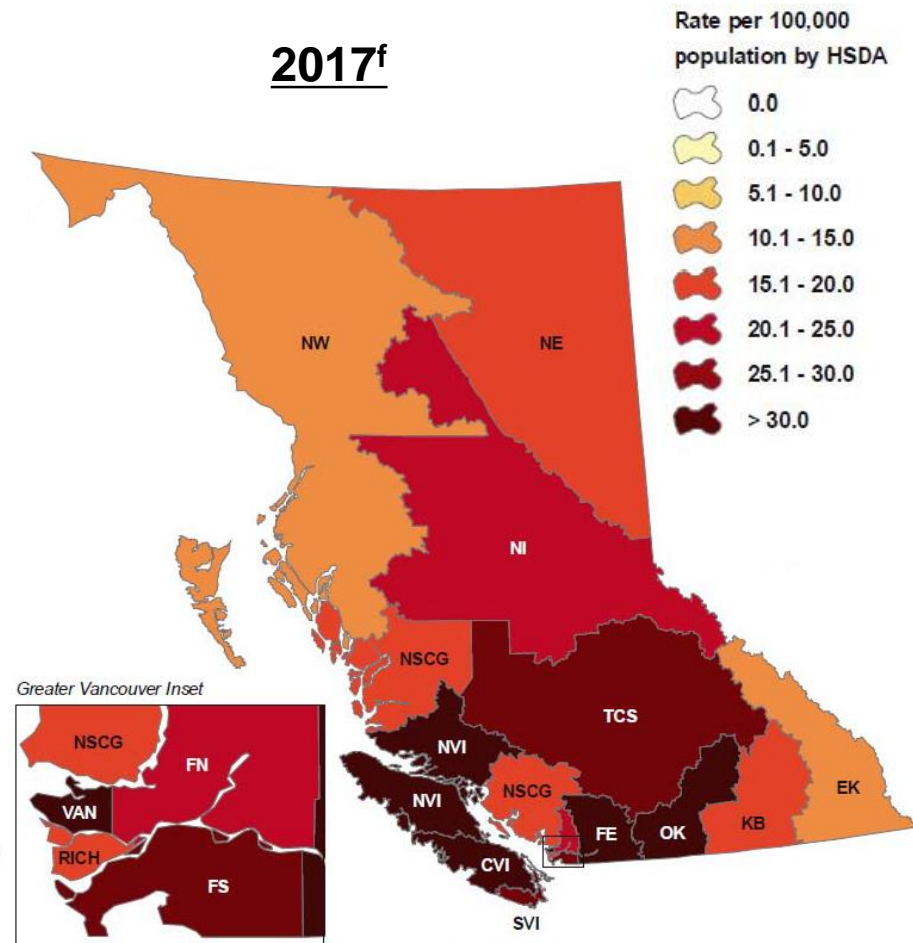


The initial spike in deaths first manifested in Vancouver, but has rapidly migrated to many parts of BC

2016

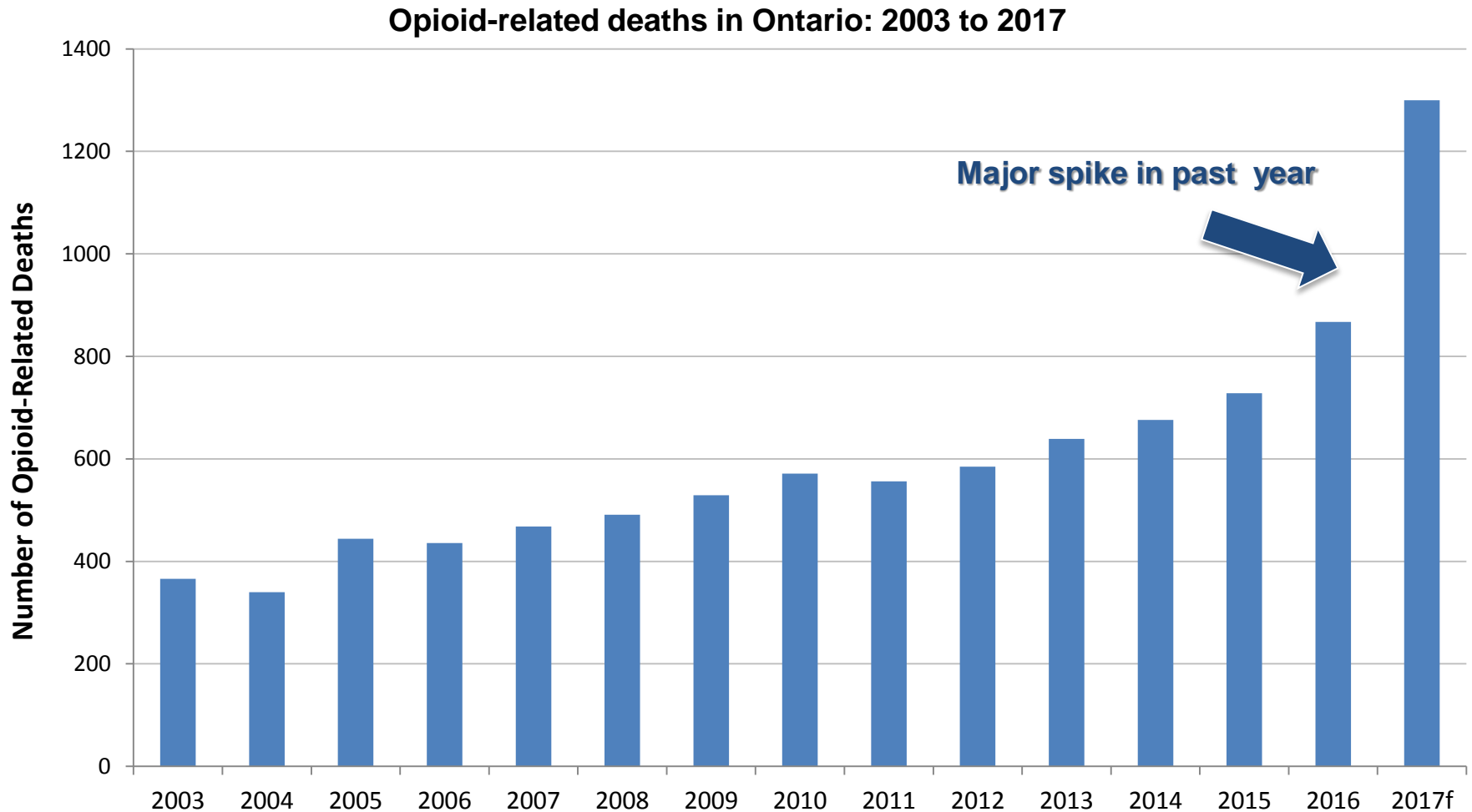


2017^f



f = forecasted

A similar rise in opioid-related deaths is now also evident in other regions of Canada such as Ontario

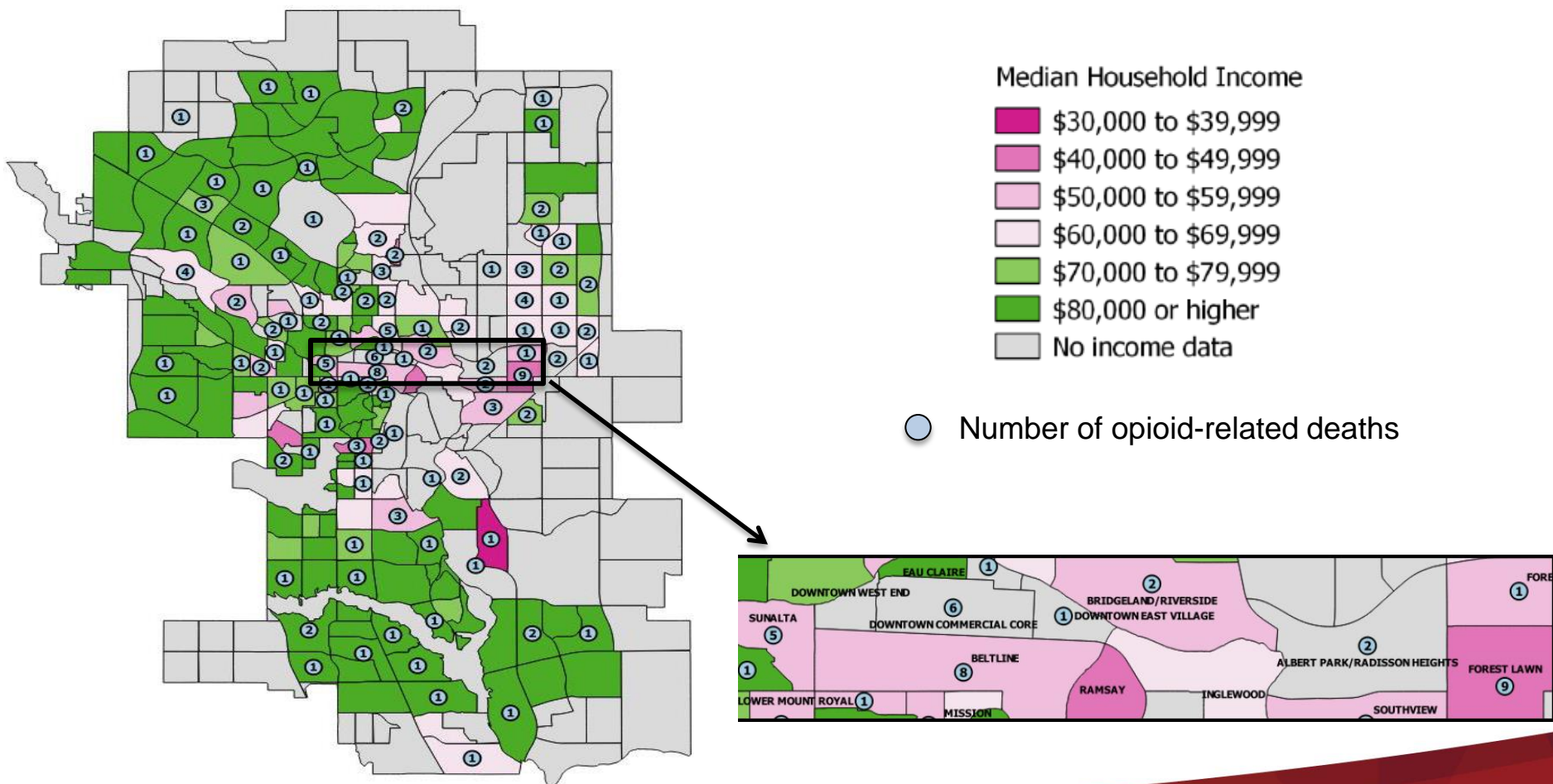


f = forecasted (based on number of opioid-related deaths in May-July 2017)

Source: Public Health Ontario

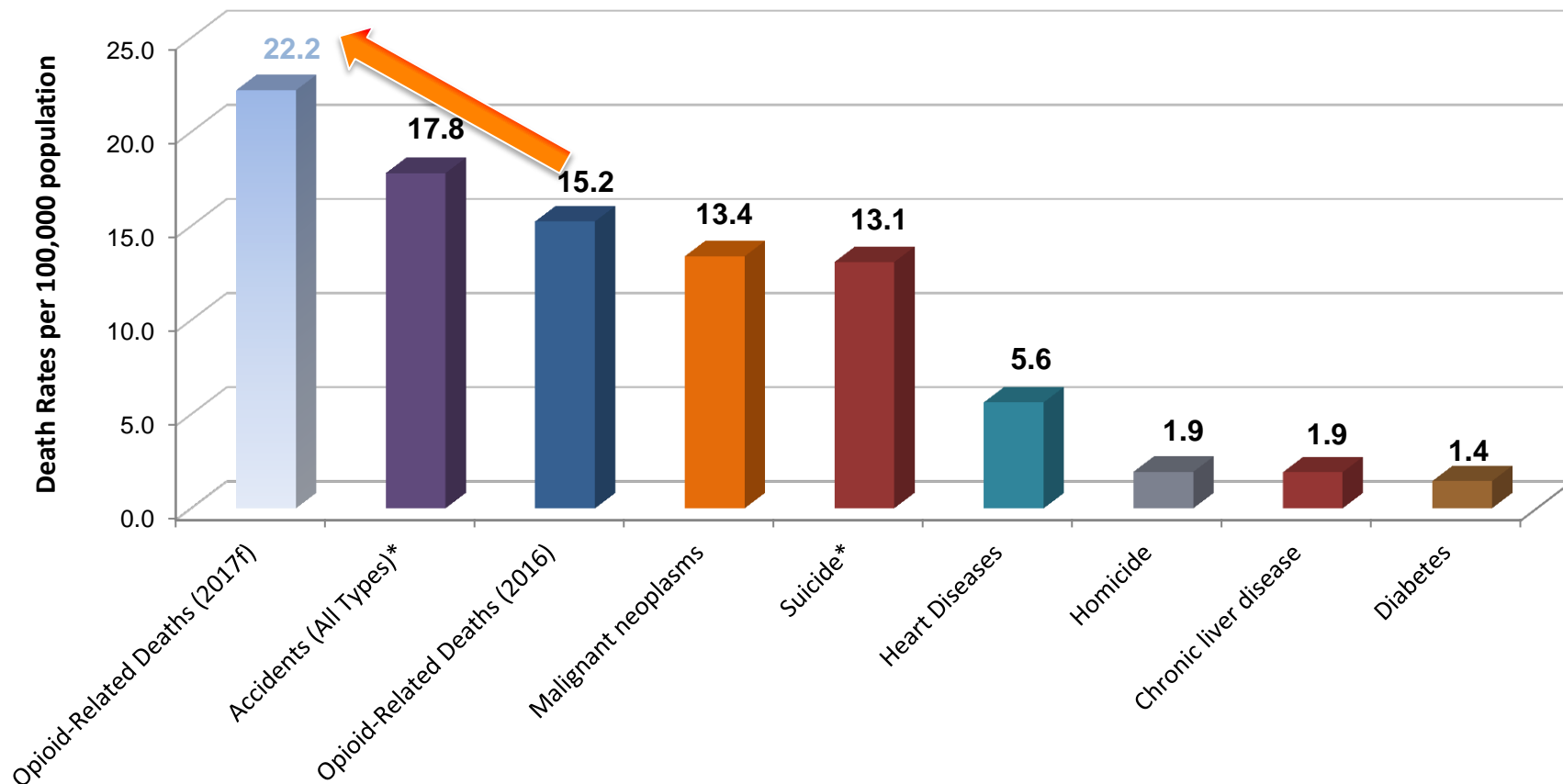
Municipal-level data are more limited, but what's available clearly show all income levels and neighborhoods affected

Opioid-Related Deaths in the City of Calgary by Median Household Income of Neighbourhood (Jan - Sept 2017)



The sharp rise in opioid-related deaths has made it a leading cause of mortality among working-age Canadians

Rates by Leading Cause of Deaths for Canadians Aged between 30 and 39 (2014)



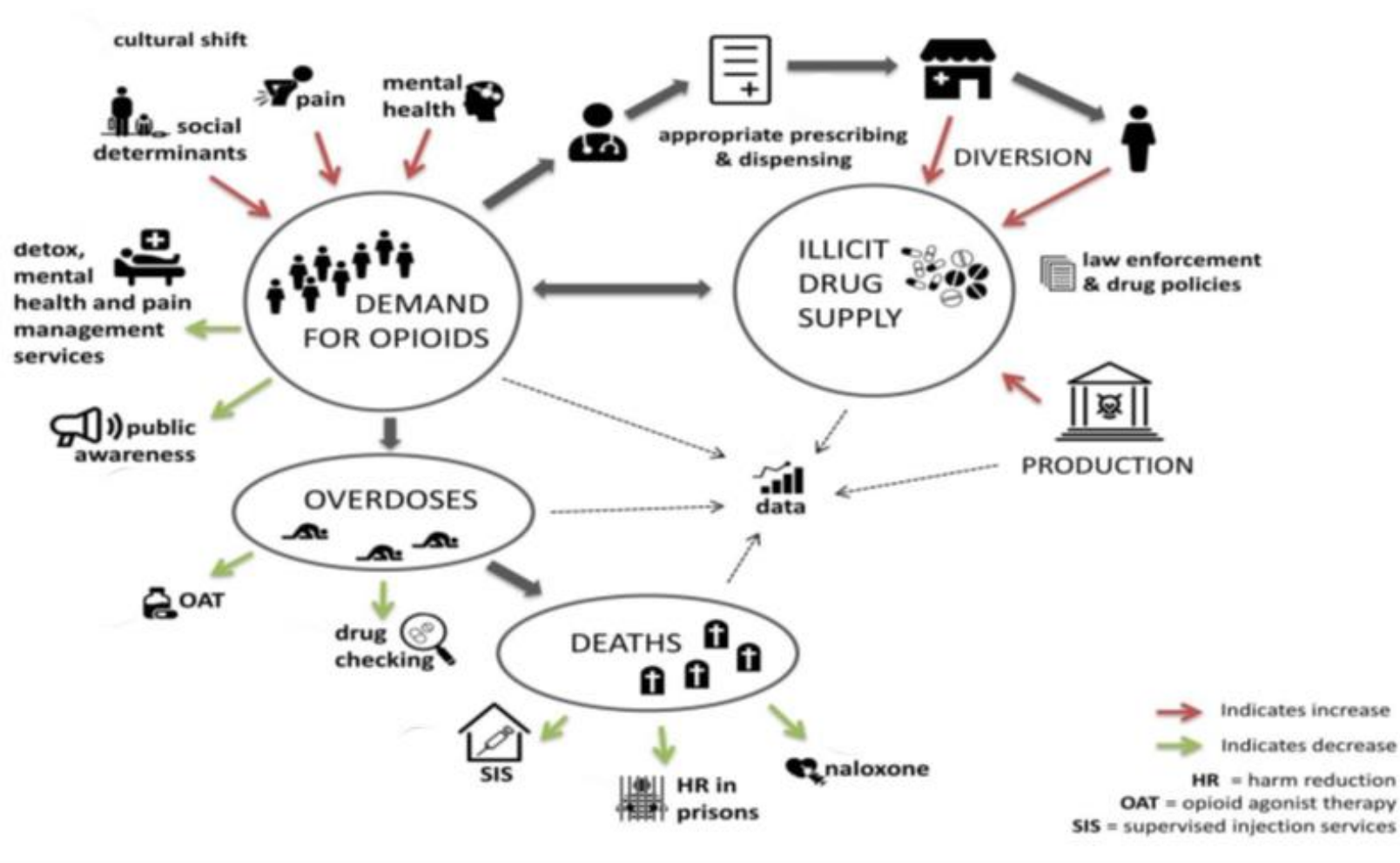
f = forecasted (based on an estimated 4,000 opioid-related deaths in 2017)

*Data on accidents and suicide may include opioid-related deaths

Additional Context

- In BC and AB the majority of deaths were alone and were in private residences
 - In BC, nearly 90 per cent of people who died were alone inside a home when they suffered an overdose
- In ON, over the past 5 months, opioid-related emergency department visits have almost doubled
 - *Source: Ontario Public Health Opioid Tracker*
- While deaths are occurring in and around larger urban areas, many smaller communities are impacted as well
- Data from BC and AB indicated that First Nations communities are disproportionately affected

Addressing the crisis is a complex public health issue...



Adapted from: British Columbia Overdose Action Exchange Meeting Report , 2016

... requiring a whole of society approach



... under leadership of the Minister of Health

- Ministerial Mandate Commitment
 - “Work closely with other orders of government, as well as substance use experts, service providers, first responders, law enforcement, and people with lived and living experience in order to ensure Canada’s response to the current opioid crisis is robust, well-coordinated, and effective.”
- We have responded through:
 - significant new federal investments;
 - enacting new legislation; and,
 - fast-tracking regulatory action.



The Government of Canada is coordinating a whole-of-government approach that is grounded in compassion and evidence.”

Source: Government of Canada Actions on Opioids 2016 and 2017

Federal Approach on Canada's Opioid Crisis

PUBLIC HEALTH EMERGENCY RESPONSE

Enabling a coordinated pan-Canadian response to the opioid crisis

Data, surveillance and research | Public communications | P/T and stakeholder engagement | Surge capacity, mobilization and support

PREVENTION



Preventing problematic opioid use

Implement the Health Portfolio's
Problematic Prescription Drug Use
Strategy

Improve prescribing practices

Better inform Canadians about the risks of
opioids

TREATMENT



Supporting innovative
approaches to treatments

Better access for rural and remote First
Nations communities

Improve access to medication-assisted
treatments for opioid use disorder

Improve treatment options for pain
management

Share knowledge on treatments for opioid
use disorder

Increase cooperation between the
criminal justice system and social services
sector (e.g., Drug Treatment Courts)

HARM REDUCTION



Supporting a range of tools and
measures for individuals and
communities

Support the establishment of supervised
consumption sites

Facilitate access to naloxone

Ensure timely laboratory drug analysis
information is shared between partners

Support legislation to protect individuals
who seek emergency assistance for
overdose

Reduce public health consequences of
problematic drug use

ENFORCEMENT



Addressing illegal drug
production, supply and
distribution

Continue enforcement on the importation,
exportation and trafficking of illegal opioids

Pursue legislative, regulatory, policy and
programmatic changes to better control
substances and equipment

Collect, assess and share information with
law enforcement agencies domestically
and internationally

Support education and training for law
enforcement

AN APPROACH SUPPORTED BY STRONG EVIDENCE

Better identifying trends, targeting interventions, monitoring impacts and supporting evidence-based decisions

- Facilitate timely and comparable data collection and methodologies
- Consult experts and support research and knowledge sharing

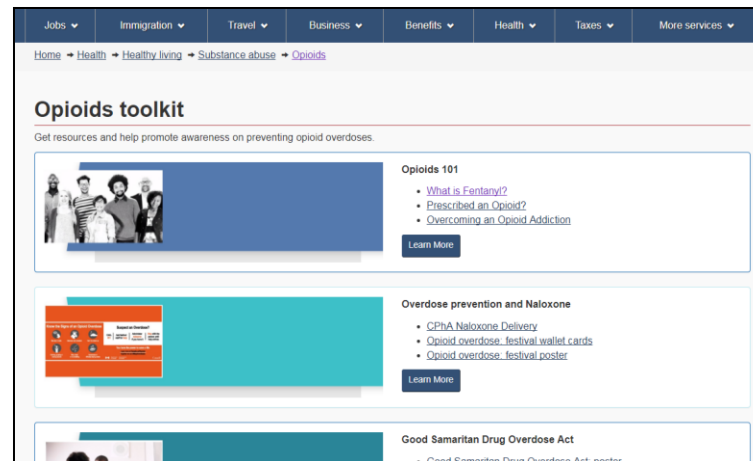


PREVENTION

Preventing problematic opioid use



- Updated guidelines for opioid prescribing
- Public information toolkit
- Outreach to festivals and universities



TREATMENT

Supporting innovative approaches to treatments



- Supporting the development of national treatment guidelines
- Supporting drug treatment courts / collaborative approaches in provinces and territories
- Coverage for opioid agonist treatments in some First Nations and Inuit communities
- Consulting on barriers to prescribing and dispensing methadone
- Allowing the import of medications, not yet authorized in Canada, for urgent public health needs (e.g., Diaphin)

Brand name	Medicinal ingredient(s)	Dosage form	Strength	Route of administration	Foreign identifying code or number	For Information Purposes			
						Foreign regulatory authority / Foreign country	Canadian jurisdiction notifying for the drug	Urgent public health need	Applicable Foreign Indication (Intended use or purpose of the drug)
Diaphin i.v.	diamorphine	Injectable	10 g/vial	Intravenous	55561	Swissmedic / Switzerland	British Columbia	Opioid crisis	Substitution therapy in case of severe heroin dependence as part of a treatment program with prescription heroin.
Diaphin IR 200	diamorphine	Tablet	200 mg	Oral	57724	Swissmedic / Switzerland	British Columbia	Opioid crisis	Substitution therapy in case of severe heroin dependence as part of a treatment program with prescription heroin.
Diaphin SR 200	diamorphine	Tablet	200 mg	Oral	57720	Swissmedic / Switzerland	British Columbia	Opioid crisis	Substitution therapy in case of severe heroin dependence as part of a treatment program with prescription heroin.
Vivitrol	naltrexone	Injectable	380 mg/vial	Intramuscular	63459-300-42	FDA / USA	British Columbia	Opioid crisis	For the prevention of relapse to opioid dependence, following opioid detoxification.

HARM REDUCTION

Supporting a range of tools and measures for individuals and communities

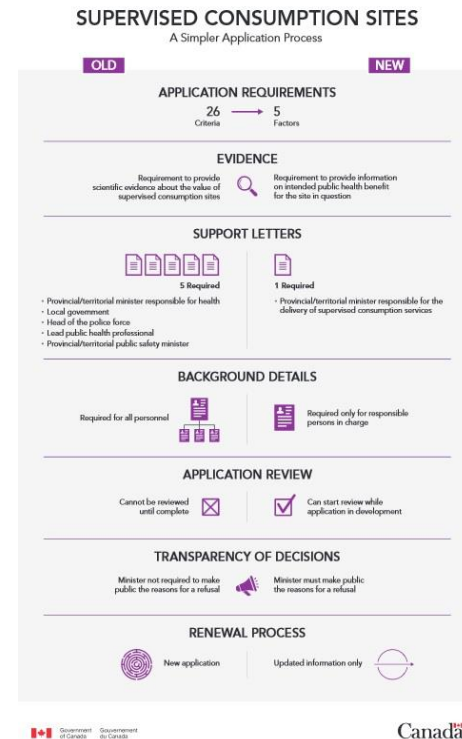


- Making naloxone more widely available without a prescription



- Providing take home naloxone kits for people being released from prison

- Streamlined process for supervised consumption sites
- Temporary overdose prevention sites if province or territory indicate an urgent public health need
- *Good Samaritan Overdose Act*

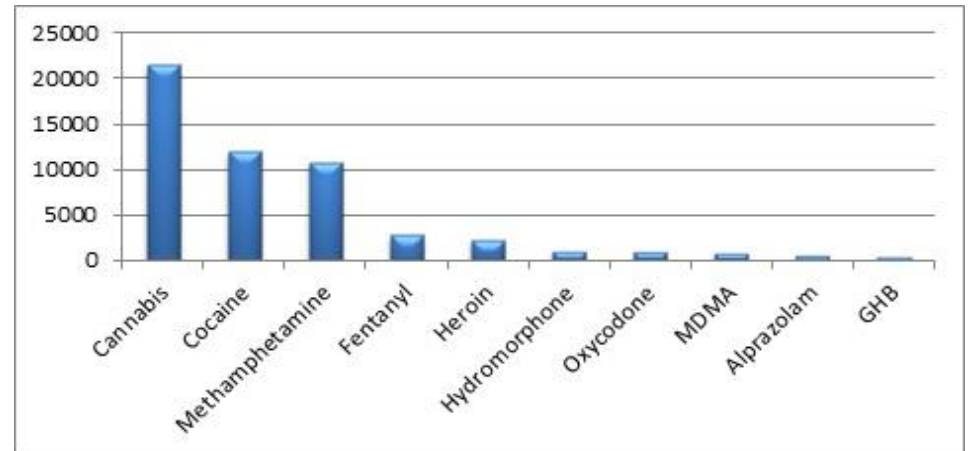


ENFORCEMENT

Addressing illegal drug production, supply and distribution



- RCMP national operational strategy for synthetic opioids
- Regulatory changes to control fentanyl precursors
- Legislative changes to control pill presses and new dangerous substances entering the illegal market
- Collaboration with China and other international partners to disrupt the import of illegally produced fentanyl
- Drug Analysis Service: Summary report of samples analysed



**Top 10 controlled substances identified in Canada
from Jan 1 to June 30, 2017**

EVIDENCE

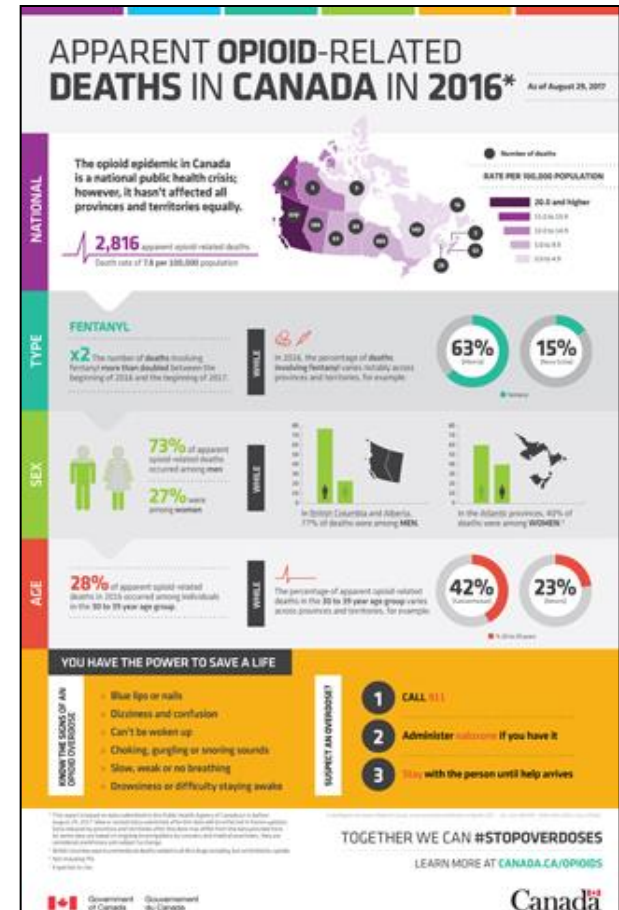
AN APPROACH SUPPORTED BY STRONG EVIDENCE



- National surveillance of apparent opioid-related deaths with provincial-territorial collaboration
 - Dedicated field epidemiologists embedded in Provinces and Territories
- Research on interventions for preventing and treating problematic substance use



- Facilitating the translation of evidence into policies and practice
- Supporting innovative approaches and interventions through the Substance Use and Addictions Program (SUAP)



Moving Forward: Key Federal Priorities for Actions

Increase access to treatment

- Explore removing regulatory barriers to treatment
- Support dissemination and implementation of National treatment guidelines
- Expand treatment options in First Nations and Inuit communities
- Support pilot projects on safer pharmaceutical alternatives to illegal drugs (e.g., hydromorphone)
- Provide emergency funding to provinces and territories for treatment services

Support innovative approaches

- Authorize supervised consumption sites to offer drug checking services
- Support pilot projects to provide drug checking services
- Explore new ways in using and sharing data to help those on the front lines
- Work with provinces and territories to establish a streamlined protocol for temporary overdose prevention sites should the province or territory indicate urgent public health need
- Expand the Substance Use and Addictions Programs to fund innovative approaches to treatment and prevention

Address stigma

- Engage people with lived and living experience
- Address stigma through awareness and training
- Fund peer-support pilot projects
- Make better linkages between social strategies and fair treatment for people who use drugs
- Launch a public education campaign