

We have spent the last year focused on crises happening within our communities and around the country. While our attention has been fixated on COVID, the economic downturn, various protests, etc., problems we faced in prior years did not just disappear. They are still there, and we still need to address them. One of those problems is that of continuing opioid addiction and overdose incidents and deaths that have devastated communities across this country.

450,000 people were lost due to opioid overdose in the United States between 1999 and 2018, an amount equal to what has been lost in less than a year to COVID. And while the losses are smaller and spread out over nearly two decades, each death leaves behind a loss for others. For each death, someone else may have lost a friend, a brother, a sister, a mother, a father, a child, or someone else they loved to a disease that is still eating through our country.

Even with a decrease in opioid death rates in 2018, those numbers are still 4 times what they were in 1999. Preliminary data from the Centers for Disease Control show that overdose deaths increased 4.6% in 2019. Coupled with lockdowns and the economic decline, there is no telling what those numbers may be for 2020. The overprescribing of opioids led us to this crisis, with many becoming hooked after receiving prescriptions from doctors who were convinced that the drugs were safe. When unable to get what they need from their doctors, they turned to Heroin. From there cheaper and more powerful opioids became available, such as Fentanyl and Carfentanil, once again driving overdose deaths. In addition to illegal drugs there are 52 different prescription opioids available on the market, with others in the pipeline.

Meanwhile, in most areas of the country addiction resources are limited and difficult for many to afford or obtain. Counselors and medical staff are exhausted, and beds are in short supply. Bathroom chemists and overseas sources are developing more powerful drugs that are finding their way onto our streets. EMS and law enforcement resources are at times stretched to their limits. While we continue to make large drug seizures, drugs of all varieties are still plentiful and cheap.

Several years ago, the FRIDAY program partnered with Adaptpharma to provide the opioid overdose reversal drug Naloxone to those on the front lines of this fight. Adaptpharma works with organizations in every state across the country to distribute Naloxone to first responders. In Texas they joined with the University of Texas Health Science Center (UTHSC) in San Antonio, which now serves as the state point of contact for their efforts. Adaptpharma realized that they needed contacts with first responder organizations to assist them with their outreach. The FRIDAY program not only had law enforcement contacts, but the ability to distribute this lifesaving drug and to train officers in its use. Since then, our program has integrated Naloxone training into our 8-hour FRIDAY and ADAPT in-person classes. Even though it has been nearly a year since our last in-person class, we have handed out nearly 1400 two dose kits of Nasal Narcan (Naloxone) to police, fire, and EMS personnel.

Now that the Texas Department of Transportation (TxDOT) has again opened our program to teach in-person classes we are ready to provide training in underage impaired driving enforcement and the prevention of alcohol and drug abuse by minors. We have stocked up on fresh Narcan and are ready as part of an 8-hour class to provide training on its use. The Narcan training is voluntary and up to the host agency.

If you are interested in scheduling a FRIDAY Program class (1-, 2-, 4-, or 8-hour), please contact Lead Staff Instructor Mark Busbee (mark.busbee@texasfriday.org, (512-659-8102), Staff Instructor Tamara

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Mark Busbee

Spencer (tamara.spencer@texasfriday.org), or Program Assistant Kimberly Garza (Kimberly.garza@texasfriday.org). We provide training to both law enforcement and civilian audiences.

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