MASSACHUSETTS MEDICAL SOCIETY

Understanding Supervised Injection Facilities

The MMS has been engaged for several years in efforts to address the opioid misuse epidemic. Recognizing that physicians must be an important part of the solution to this epidemic, the MMS formed a Task Force on Opioid Prescribing and Physician Communication in 2014.

One area of focus has been to address opioid prescribing and use patterns, so that physicians can help to prevent development of substance use disorder among their patients.

- MMS provided significant input and education regarding the state law that imposes prescribing guidelines intended to mitigate the risk of new substance use disorder.
- We have also worked at the federal level on a law that allows patients to request that only part of an opioid prescription be filled, allowing them to reduce their risk of new dependence.
- MMS has made opioid-related continuing medical education content available to prescribers free of charge, with more than 10,000 physicians and other health care professionals completing a total of nearly 30,000 opioid CME courses since May 2015.
- We have provided input to the state regarding mandatory use of MassPAT, the prescription drug monitoring tool, and have helped to inform our members about what their individual prescribing trend reports mean for them.

Since we began these efforts in early 2015, researchers have reported decreases of more than 20% in the numbers of Massachusetts patients receiving opioid prescriptions.

- This is important progress, and we will continue to work with our members and the broader medical community to continue to ensure appropriate prescribing of opioids.
- It is also important to recognize that for some patients, opioids are still medically appropriate, and patient education is a major part in treating their pain while preventing dependence.

However, while we are seeing opioid prescribing decrease, the number of opioid overdose deaths continues to increase. The medical community must do what it can to address this.

- In 2016, roughly 2,000 overdose deaths in Massachusetts were attributed to opioid use.
- It is important that we continue our efforts to prevent substance use disorder, but we also must do a better job at saving the lives of persons who inject drugs; access to naloxone can help us achieve that.
- We also must continue to work toward improved access to treatment, so that we can support patients seeking recovery; this includes medication-assisted treatment, an

important part of evidence-based, comprehensive care for patients with substance use disorder.

Supervised injection facilities (SIF) have demonstrated that they can be one component of the solution to the opioid crisis.

- SIFs are safe, clean spaces where people can inject previously obtained drugs under the supervision of trained medical professionals.
- SIFs do not provide illicit drugs, but do have a supply of life-saving naloxone in case of the need for medical intervention following an overdose.
- There are not currently any SIFs in the U.S., but they have been operating for many years in Europe, Australia, and Canada.
- The Massachusetts Medical Society undertook a thorough review of the medical evidence surrounding SIF availability and use, and in April, the House of Delegates approved a resolution directing the MMS to advocate for a pilot SIF program under the direction of a state-led task force.

SIFs have been proven to save lives, and even to open doors to recovery.

- In Vancouver, Canada, the SIF was shown to a reduce overdose mortality by 35 percent in its service area.
- The Vancouver SIF also reported a 30 percent increase in the rate of detoxification use and an increase in initiation of methadone maintenance therapy.
- Access to a clean, safe space for injection is also likely to protect against infections such as HIV and hepatitis C that are commonly associated with non-sterile injection practices
- SIFs also appear to protect persons who inject drugs – especially women – from the street violence that can be associated with public injectable drug use.

Communities with SIF locations have not reported negative consequences.

- SIFs have reported a reduction in public injection and injection-related litter.
- Data suggest there is little change in the number of drug deals, nor is there an increase in the number of persons who inject drugs or an increase in crime in the area of a SIF.
- In Vancouver, business leaders and law enforcement have expressed support for its SIF as having a positive impact on the community where it is located.

The MMS will continue to explore solutions to the opioid crisis. Robust evidence suggest that development of a SIF pilot program in Massachusetts should be included in those solutions.