



Health Advisory

October 18, 2018

Recent Surge in Opioid Overdose Events in San Francisco

San Francisco experienced a surge in lay and professional opioid overdose reversals, as well as suspected deaths, in September 2018. The DOPE Project (naloxone distribution program) reported an increase in overdose events in the Civic Center area; 393 lay opioid overdose reversals were recorded from June-August 2018. The San Francisco Fire Department administered naloxone to 113 persons in September 2018, nearly twice the 63 administrations from September 2017. During the first 2 weeks of September 2018, 15 suspected opioid overdose deaths occurred according to the Office of the Chief Medical Examiner, at least three times more than expected, most of which involved fentanyl. Finally, in September 2018, the Clinical Laboratory of Zuckerberg San Francisco General Hospital for the first time identified several potent analogues of fentanyl, such as acryl-fentanyl, in street drug samples.

Although San Francisco has not yet experienced the sustained fentanyl overdose crisis faced by eastern U.S. regions, fentanyl has been found as a white powder and in counterfeit pills, black tar heroin, cocaine, and methamphetamine, resulting in local overdose events and deaths. The proportion of opioid overdose deaths due to fentanyl increased from 6% in 2014 to 23% in 2017. These cases frequently involve methamphetamine, cocaine, or another opioid. Death from fentanyl toxicity can be more rapid than from other opioids, thus prompt peer response is essential.

We recommend that anyone using any street-purchased drugs carry naloxone, the short-acting opioid antagonist. Naloxone can be administered by witnesses as a first aid measure, is covered by Medi-Cal, Healthy SF, and most health plans, and can be furnished without a prescription by pharmacists registered to do so. Additional measures include advising anyone using street-purchased drugs to test their drugs for fentanyl (test strips available at syringe access sites), use “tester” doses to ensure there are no unexpected effects, and if using in a group, stagger drug use so that someone is alert to help others if needed.

Actions requested of SF clinicians:

1. Refer patients with opioid use disorder to treatment. Treatment can be accessed at methadone programs or through the triage center at 1380 Howard St.
2. Ensure patients who access ANY street-purchased drugs have naloxone. Either prescribe naloxone directly or direct people to the pharmacy at 1380 Howard Street or to syringe access sites. Patients should be encouraged to keep the medication with them at all times.
3. Advise patients who use drugs to test their drugs, use “tester” doses, and stagger drug use.



Resources for Substance Use Treatment and Naloxone:

Treatment Referrals:

SFDPH triage center–Treatment Access Program (TAP) @ 1380 Howard St, 8am-4:30pm weekdays

BAART Clinic @ 433 Turk St, 7:30am-12pm same day; 415-928-7800, ask for intake counselor

List of physicians who provide buprenorphine: <https://www.samhsa.gov/medication-assisted-treatment/physician-program-data/treatment-physician-locator>

Naloxone:

CBHS Pharmacy @ 1380 Howard St. Mon-Fri walk-in 9:30 a.m.-4 p.m. (no prescription required)

DOPE Project: Contact Kristen Marshall at marshall@harmreduction.org or 919-637-8632 for distribution schedule

Prescribing information (scroll down to Naloxone Prescribing, Education, and Awareness):
<http://www.sfhealthnetwork.org/employee-physicians/pain-management-resources/>

Program Contact Information:

Substance Use Research Unit, Population Health Division

Email nose.naloxone@sfdph.org