



Midwest
Injury
Prevention
Alliance

PROJECT LAZARUS

Fred Wells Brason II fbrason@projectlazarus.org

Project Setting Wilkes County, NC



Believes that communities are ultimately responsible for their own health and that every drug overdose is preventable.

Prevention – Intervention - Treatment

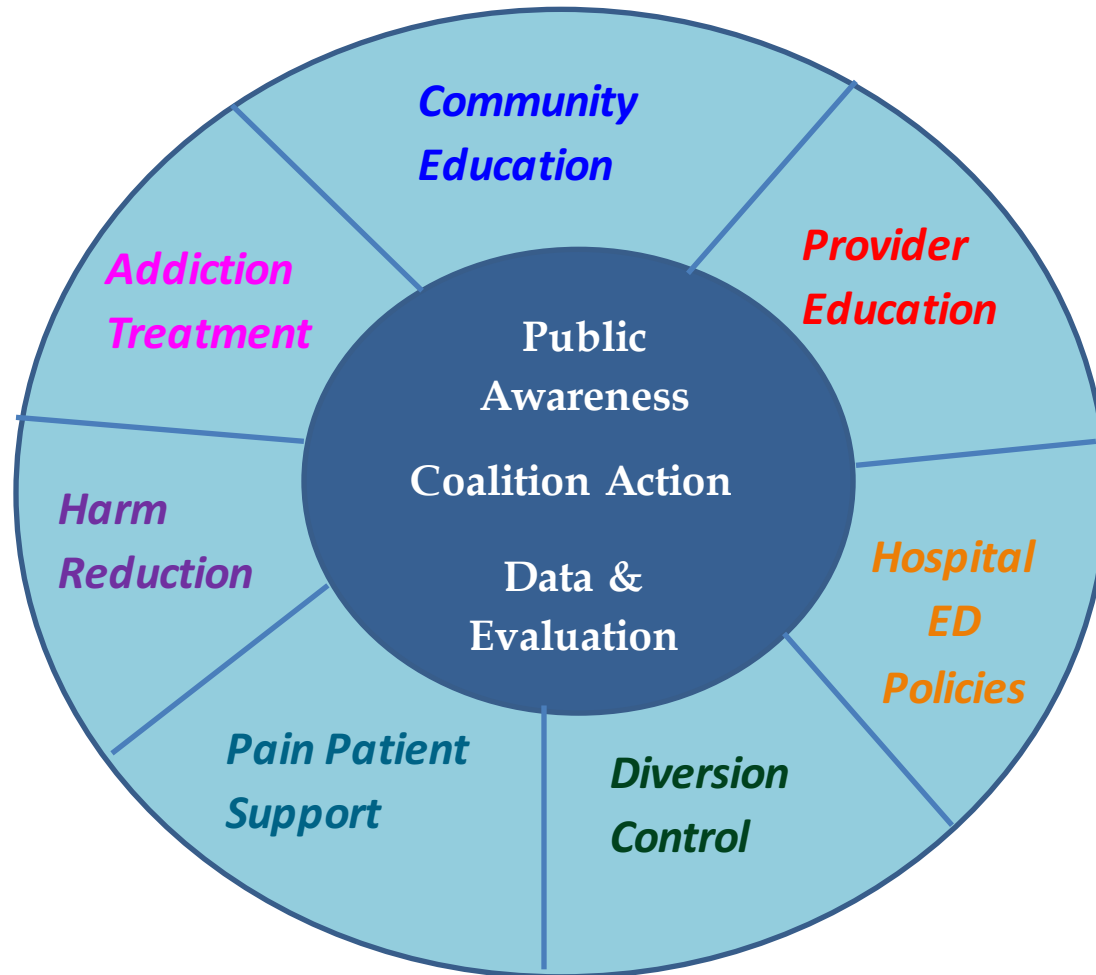
- ***Preventing opioid/opiate poisonings***
- ***Presenting responsible pain management***
- ***Promoting Substance Use Treatment and Support services***

Overdose – Who, What, When, Where, Why, How?

The WHO:

- ◆ Patient misuse – *respiratory depression*
- ◆ Family/Friends sharing to self medicate
- ◆ Accidental ingestion
- ◆ Recreational User
- ◆ Substance Use Disorder/Treatment/Recovery

Project Lazarus Model



The Project Lazarus model can be conceptualized as a wheel, with three core components (The Hub) that must always be present, and seven components (The Wheel) which can be initiated based on specific needs of a community.

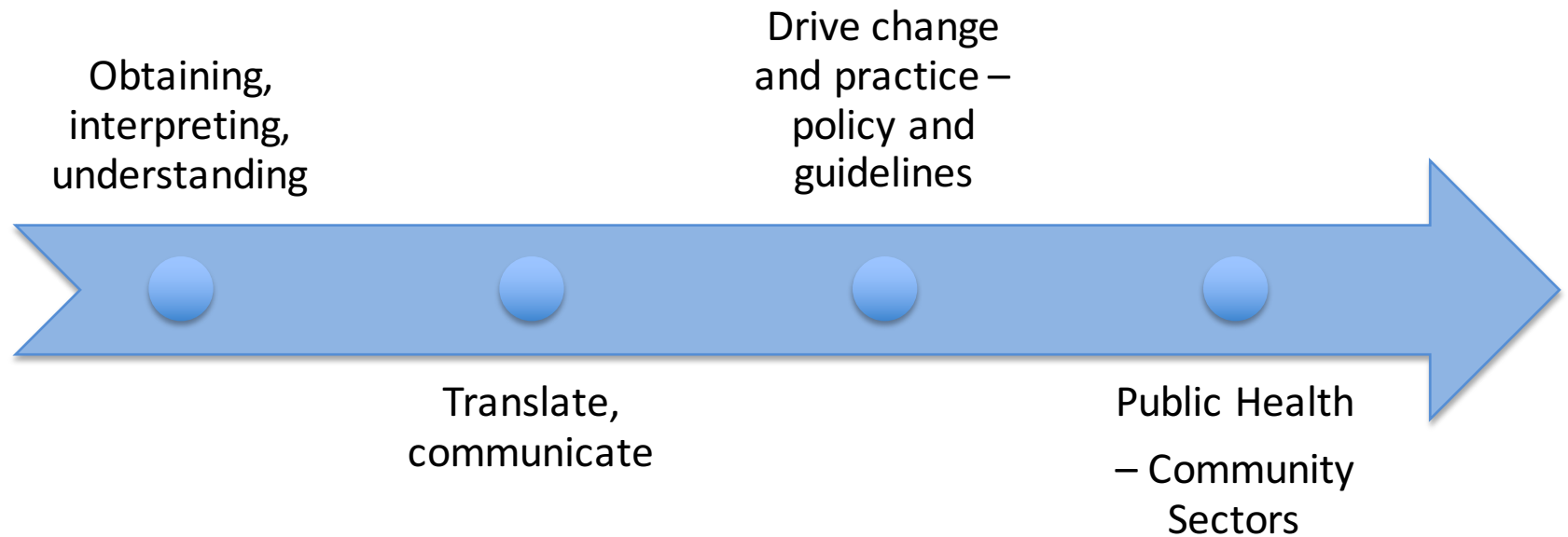
- I. **Public Awareness** – is particularly important because there are widespread misconceptions about the risks of prescription drug misuse and abuse. It is crucial to build public identification of prescription drug overdose as a community issue. That overdose is common in the community, and that this is a preventable problem must be spread widely.
 - *Identify issue at local level*
 - *Broad-based outreach – all population groups*

- II. **Coalition Action** - A functioning coalition should exist with strong ties to and support from each of the key sectors in the community, along with a preliminary base of community awareness on the issue. Coalition leaders should also have a strong understanding of what the nature of the issue is in the community and what the priorities are for how to address it.
 - *Community Sectors*
 - *Why am I needed*
 - *What do I need to know*
 - *What needs to be done*

Epidemiologic Profile of Unintentional Poisonings NC

- All poisoning deaths
- Opioid OD
- Heroin OD
- All Hospital and ED admission/visits; medicine and drugs
- Opioid patients
- Opioid prescribers
- Benzodiazepine patients
- Buprenorphine patients
- Prescription/patient sleep aid
- Prescription/patient stimulants
- Self-inflicted Hospital/ED; medicine and drugs
- Self-inflicted poisoning and opioid deaths

Varying sources and levels of Data



The SPOKES

PROJECT LAZARUS

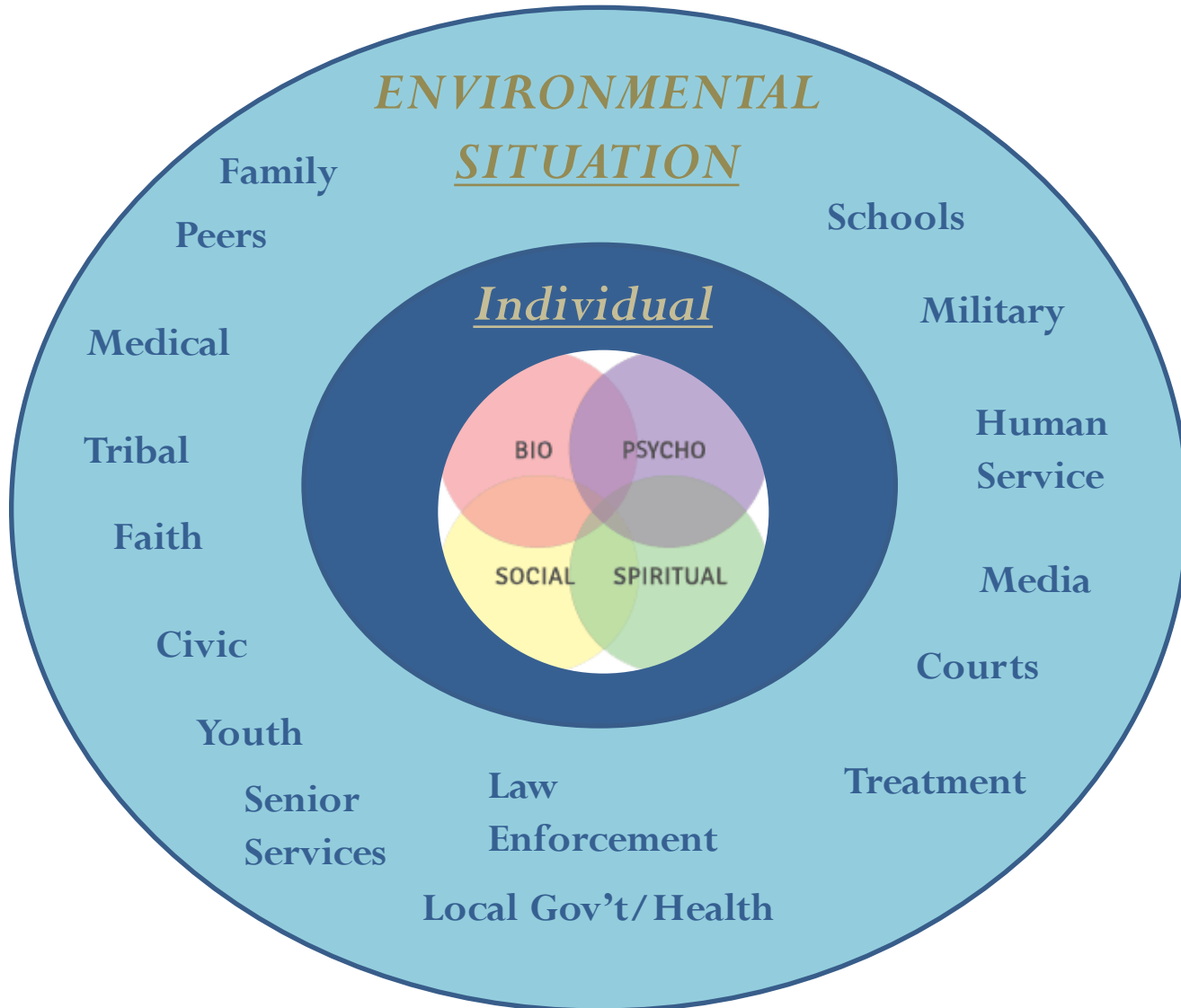


Community Education –

- efforts are those offered to the general public and are aimed at changing the perception and behaviors around sharing prescription medications, and improving safety behaviors around their use, storage, and disposal.

“Prescription medication: take correctly, store securely, dispose properly and never share.”

COMMUNITY



Chronic Pain Initiative – CPI

PURPOSE

- Reduce risk of patient overdose
- Reduce risk of patient medication diversion
- Treatment of chronic pain
 - Exploring options instead/
in addition to medications

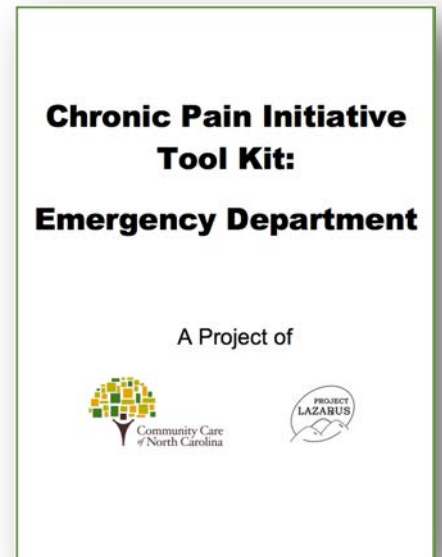
OUTREACH

- Reached via trainings with Continuing Medical Education Units (CME), lunch and learn, Grand Rounds, webinars
- Use of the Prescribers Toolkit
 - Overdose/Respiratory Depression Risks and assess benefits
 - Patient education/Prescribing naloxone/Abuse Deterrent Formulations
 - Use of Prescription Drug Monitoring Program



Hospital Emergency Department (ED) Policies - it is recommended that hospital ED's develop a system-wide standardization with respect to prescribing narcotic analgesics as described in the Project Lazarus/Community Care of NC Emergency Department Toolkit for managing chronic pain patients:

- 1) Embedded ED Case Manager
- 2) "Frequent fliers" for chronic pain, non-narcotic medication and referral
- 3) No refills of controlled substances
- 4) Mandatory use of PDMP (CSRS)
- 5) Limited dosing (10 tablets)
- 6) Naloxone prescription



THE SPOKES cont. Diversion Control

Project Lazarus - Project Pill Drop

PROJECT LAZARUS

Diversion Control – Law Enforcement, Pharmacist and Facility training on forgery, methods of diversion and drug seeking behavior



Pill Take Back Events – Permanent Pill Disposal

“Now available for retail pharmacies, hospitals and clinic with pharmacy”

**Wilkes Sheriffs Office, N. Wilkesboro PD,
Brame Huie and Wilkes Family Pharmacy**

Project Pill Drop placards placed in medical offices and pharmacies



Supporting Pain Patients



Supporting pain patients goes beyond access to opioids.



“Meeting patients where they are at” means that small changes at home can lead to less pain.

The Spokes- Naloxone Harm Reduction

PROJECT LAZARUS

- Overdose prevention training
- Increasing access to naloxone (Narcan)
 - Individuals, family members, law enforcement, first responders
- Distributing a script that gives patients specific language they can use with their family to talk about overdose and develop an action plan, similar to a fire evacuation plan
- Naloxone access to community, tribal groups and military
 - Operation OpioidSAFE



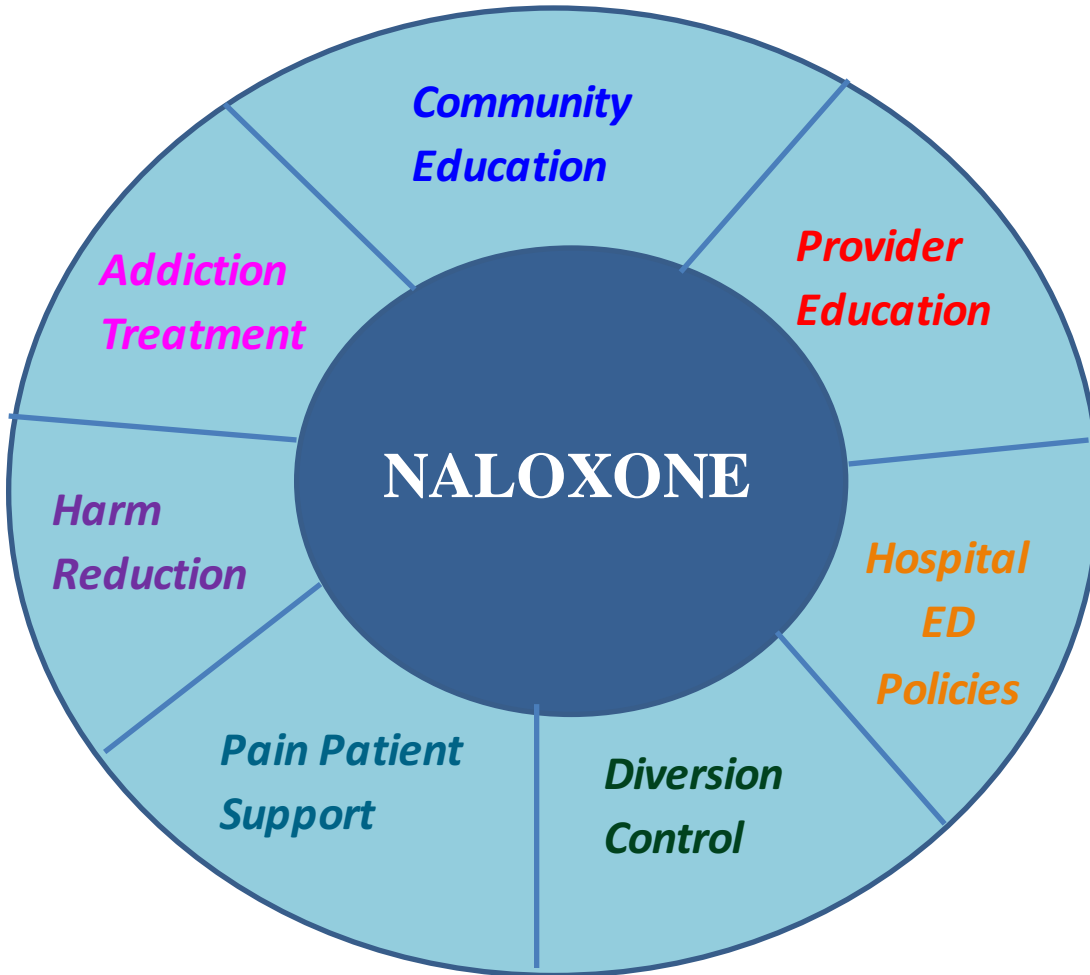
Risks of Opioid-Induced Respiratory Depression

Persons are at risk of overdose if there is a combination of prescription opioids with any of the following:

- Smoking, COPD, emphysema, asthma, sleep apnea, or other respiratory issue
- Renal dysfunction or hepatic disease.
- Known or suspected concurrent alcohol use.
- Concurrent benzodiazepine prescription.
- Concurrent SSRI or TCA anti-depressant prescription.

- Recent emergency medical situation for opioid poisoning and/or intoxication.
- Suspected history of illicit or non-medical opioid use.
- Prescription for a “high” dose opioid
- Methadone prescription (specifically, opioid naïve patients).
- Recent release from incarceration.
- Recent release from an opioid detox or mandatory abstinence program.
- Enrolled in a methadone or buprenorphine detox and/or maintenance program for addiction or pain.
- Voluntary request from patient or family member.
- Difficulty accessing EMS due to distance, remoteness, etc.

Naloxone in community health



Prescribers...co-prescribing
Healthcare organizations
Individuals
Family members
Pharmacies
Addiction Treatment Facilities
Mental Health Agencies
Public Health Departments
Sheriff's and Police Depts.
Pain Management Clinics
First Responders
Medicaid Case Management
Harm Reduction
Emergency Departments
Medical Practice Facilities
Indian Reservation
Military

<http://www.projectlazarus.org/patients-families/videos>



A Kaiser Permanente [study](#), which recommends a universal prescribing method, in which naloxone would be indicated for all patients prescribed chronic opioids. The study revealed a need for increased awareness and dialogue surrounding the prescription of naloxone in conjunction with opioids.

Clinicians who were surveyed were reluctant to prescribe naloxone because they did not want to offend patients by talking to them about a risk of overdose and because there hasn't been consensus over who should be prescribed the drug.

FDA approval of the [EVZIO[®] \(naloxone HCl injection\) auto-injector](#), which can be prescribed by physicians. We have commended the FDA for expediting the approval process to quickly increase access to this medicine, which undoubtedly will save lives by reducing death from opioid-related overdose.

The Veterans Health Administration's [Overdose Education and Naloxone Distribution program](#) for all veterans in treatment for a substance use disorder or taking opioids chronically.

Anti-heroin bill will make overdose treatment more accessible

MADISON (WKOW)-- A life-saving drug, which reverses the effects of a heroin overdose, will soon be more available to everyone.

Naloxone, also known as Narcan, can bring people back after a heroin overdose. **A bill approved by the state Senate Thursday clarifies state law, allowing pharmacies to sell Naloxone, as long as they have a written standing order from a doctor.** It's headed to Gov. Scott Walker. His office told 27 News the Governor will sign it.

Addiction treatment, especially opioid therapy like methadone maintenance treatment or buprenorphine treatment, has been shown to dramatically reduce overdose risk. Unfortunately, access to treatment is limited by three main factors:

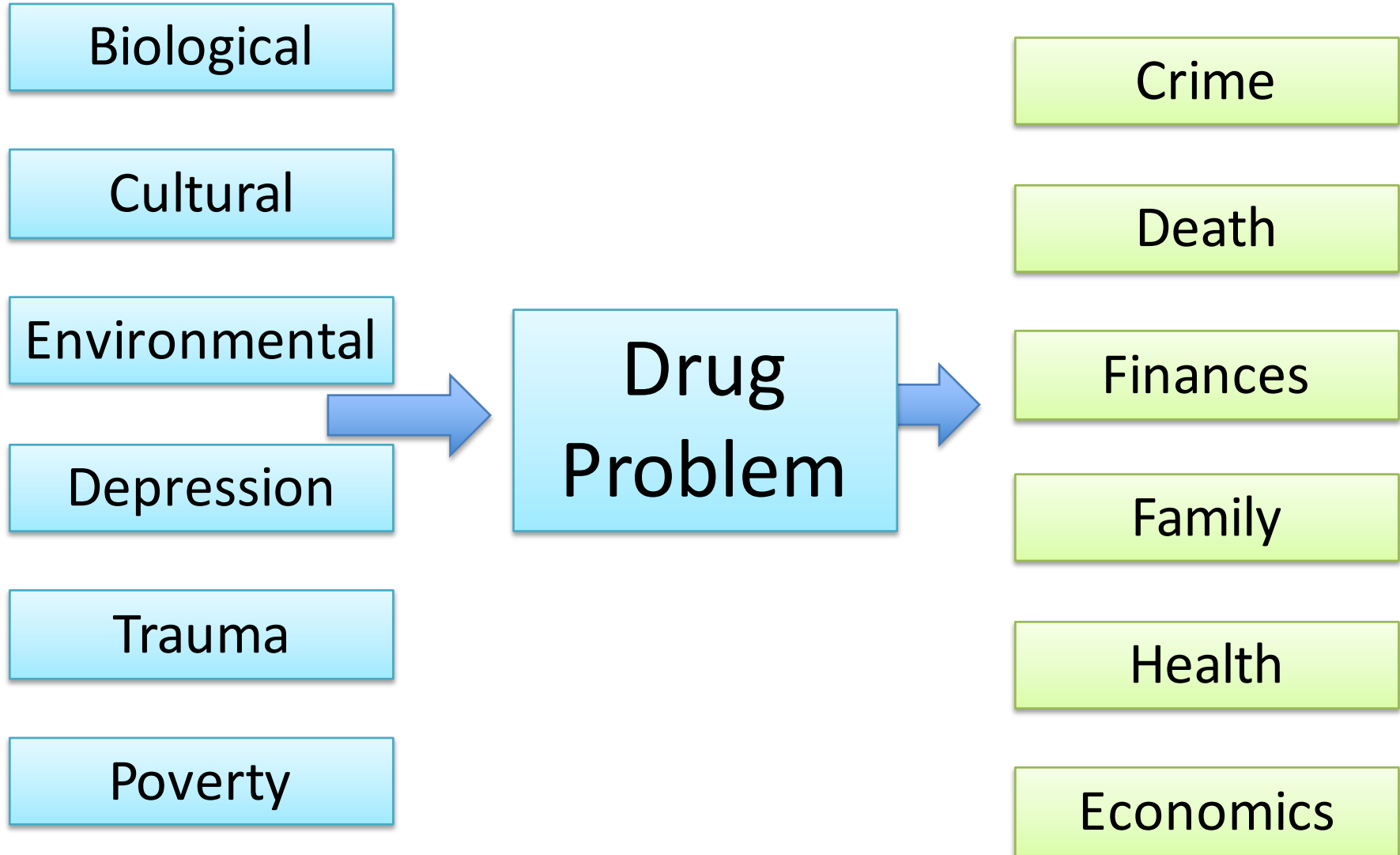
- **Acceptance, Availability** and **Accessibility** of treatment options,
 - Negative attitudes or **stigma** associated with addiction in general and drug treatment.

**There is not one treatment that works for everyone,
but there is treatment for everyone!**

Integration

Law Enforcement – Behavioral Health – SA Treatment – ED –
Health Department – Medical Providers – Crisis Pregnancy

Drug Problem?



Local methadone clinic helps reduce Rx deaths

Posted: Wednesday, March 12, 2014 2:00 pm

Jule Hubbard

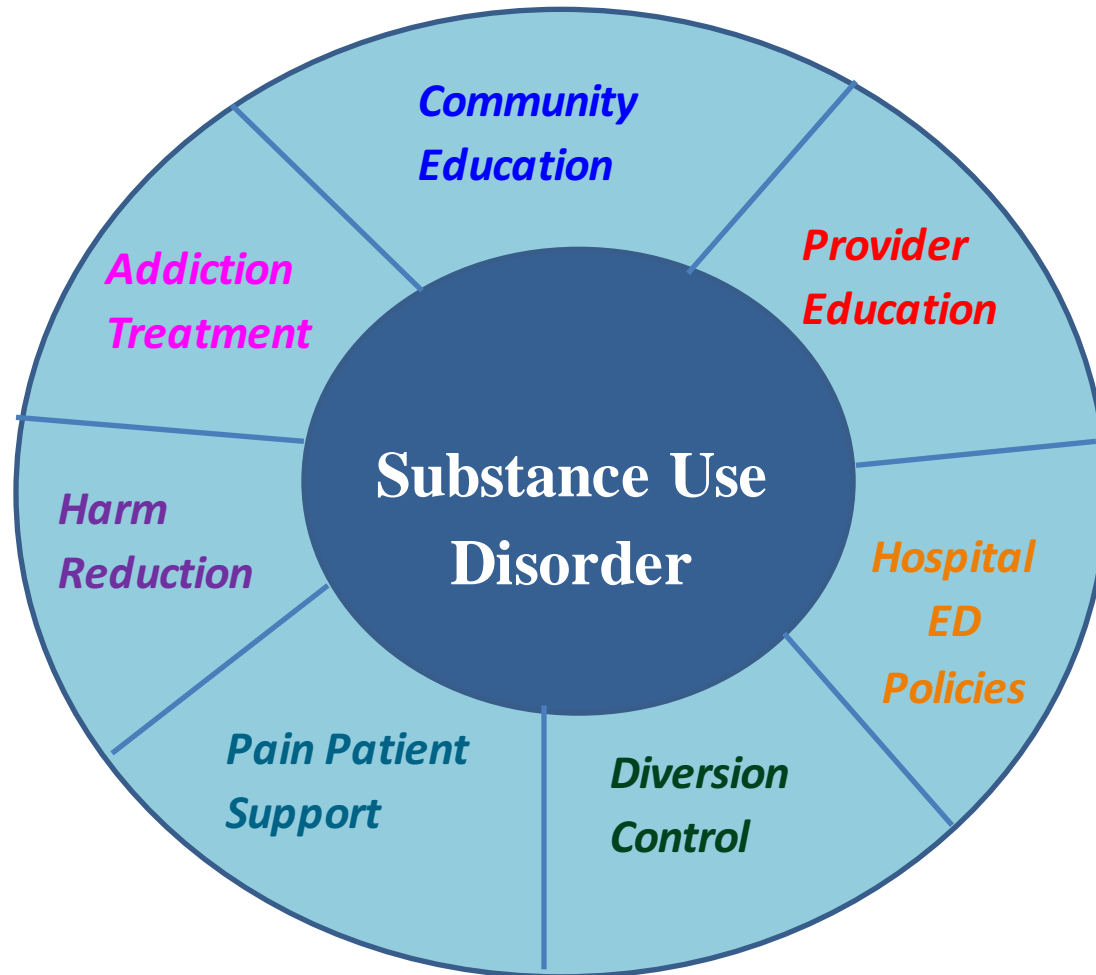
Mountain Health Solutions, Wilkes County's only methadone clinic, is credited with helping to bring a dramatic reduction in deaths from prescription pain medication overdose in Wilkes in the last five years...



http://www.journalpatriot.com/news/article_dbd0f6e8-aa0c-11e3-8435-001a4bcf6878.html

- OTP SA treatment admissions
2010 - 0, 2015 - 400+
- Churches supporting individuals in treatment

Project Lazarus Model



The Project Lazarus model can be conceptualized as a wheel, with three core components (The Hub) that must always be present, and seven components (The Wheel) which can be initiated based on specific needs of a community.

Lazarus Recovery Services



Lazarus Peer Guides (LPGs)

offer friendly companionship and successful experience navigating the pathway toward recovery.

PROJECT LAZARUS

We have:

- A stable recovery.
- A desire to enrich lives.
- Specialized training and certification to handle a crisis, an overdose, and save lives.

Supportive Roles

Empathic Support
Resource Support
Constructive Support
Connective Support

Lived Experience

Problem-Solving:
Crisis Intervention
Community Navigation
Family Involvement

Support Groups



Lazarus Recovery Services

Extending a Warm Hand



Wilkes County NC RESULTS

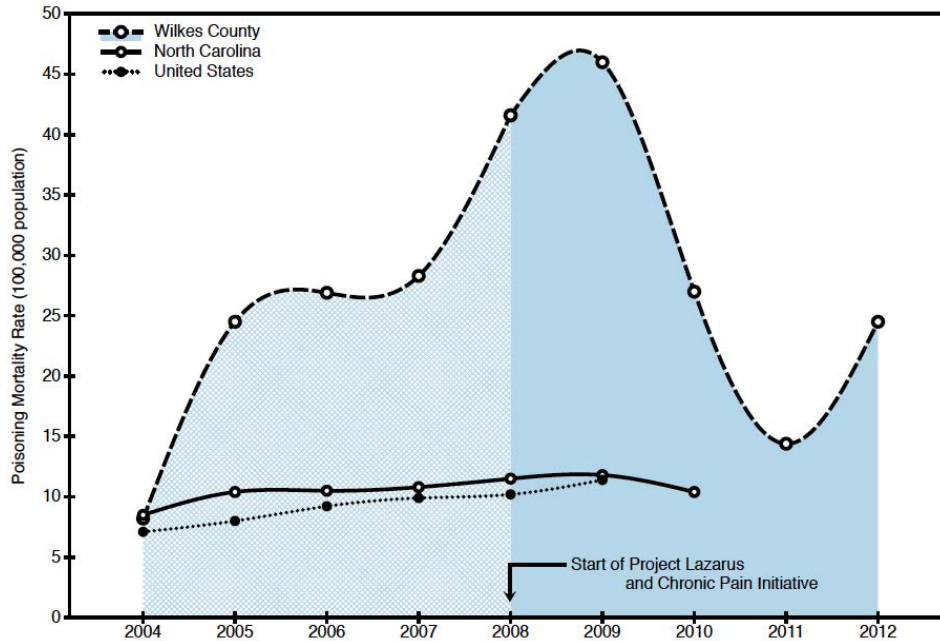


www.projectlazarus.org
Fred

The overdose death rate dropped 69% in two years after the start of Project Lazarus and the Chronic Pain Initiative.



Wilkes County Results



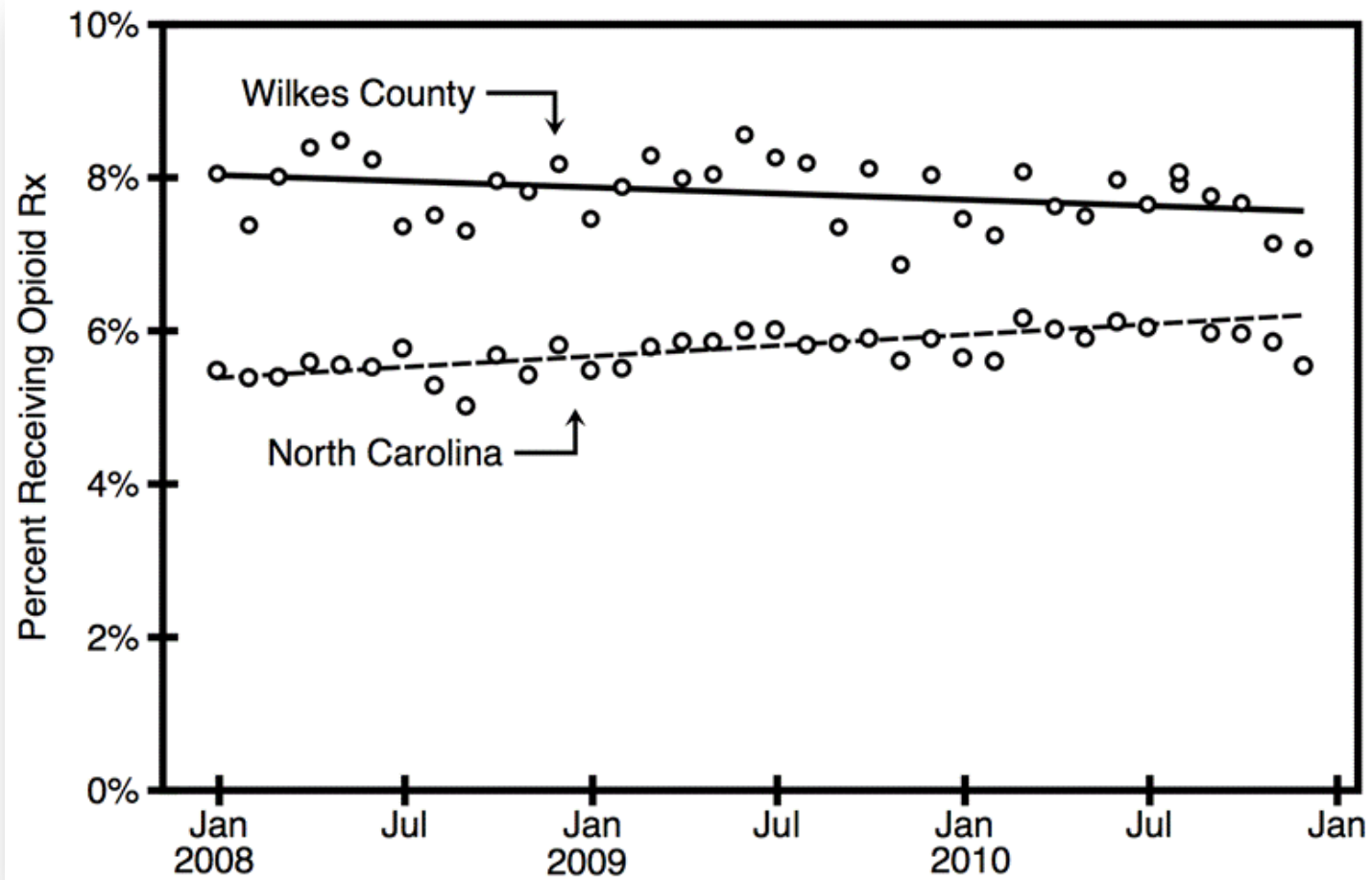
- Wilkes School SA incidences
7.3 per 1000 2011-2012
4.9 2012-2013
3.4 2013-2014
- SA ED visits down 15.3 %
- Involuntary commitments reduced/Less SA calls
- Diversion Tips increased
- OTP SA treatment admissions
2010 - 0, 2015 - 400+
- Churches supporting individuals in treatment

- Wilkes Scripts related to overdose
2008 – 82%, 2011 – 0%

- Operation OpioidSafe, US Army Ft. Bragg, NC **15 OD's per 400 soldiers to 1 per 400.**
The non-fatal opioid overdose rate for 2008 and 2009 was 17 per 1000 soldiers. That rate dropped to 1.4 per 1000 soldiers according to WTU Brigade surgeon statistics.

Wilkes County Opioid Prescribing

Wilkes County had higher than state average opioid dispensing during the implementation of Project Lazarus and the Chronic Pain Initiative. Access to prescription opioids was not dramatically decreased.



Venues to help build coalitions



Community forums must be repeated to motivate the necessary stakeholders to take action.



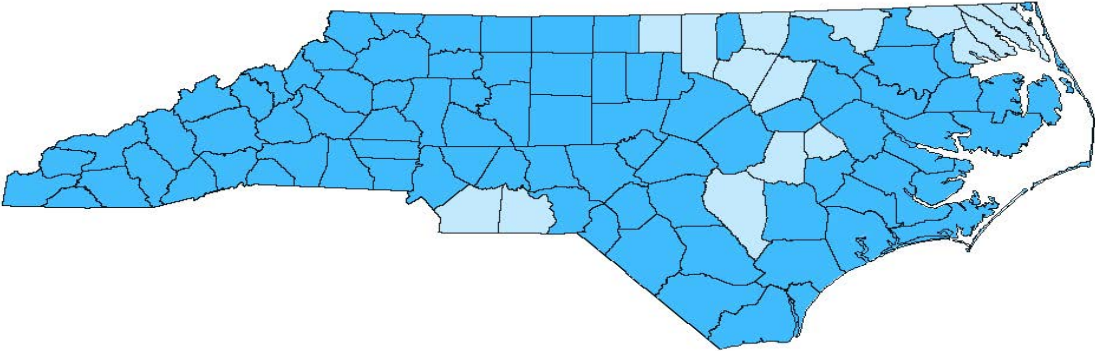
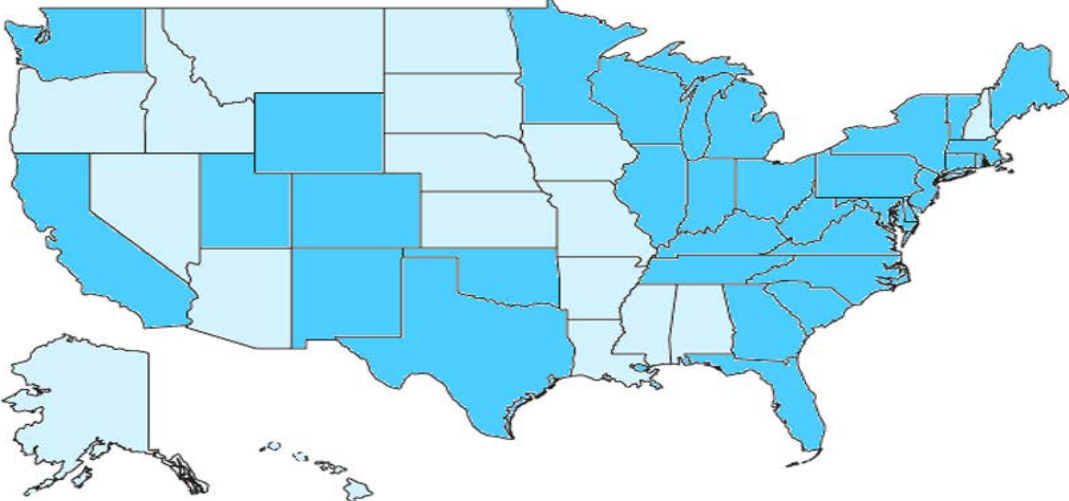
Can coalitions help reduce Rx drug abuse?

- Counties with coalitions had **6.2%** lower rate of ED visits for substance abuse than counties with no coalitions (but this could be due to random chance)
- In counties with coalitions **1.7%** more residents received opioids than in counties without a coalition.
- **However, counties with a coalition where the health department was the lead agency had a statistically significant 23% lower rate of ED visits ($X^2=2.15, p=0.03$) than other counties.**

Level 3: *"People have talked about doing something, but so far there isn't anyone who has really taken charge. There may be a few concerned people, but they are not influential.*

- **For every unit increase in county leadership there is a 2.7-fold increase in the odds of having community forums & workshops, after accounting for other prevention efforts and resources.**

Project Lazarus Replication



Project Lazarus.org

PROJECT LAZARUS



Fred Wells Brason II
5368 NC Hwy 16 S
Moravian Falls, NC 28654
336-667-8100
fbrason@projectlazarus.org
*Robert Wood Johnson Community Health
Leader Award 2012*

STATEMENT OF R. GIL KERLIKOWSKE DIRECTOR OFFICE OF NATIONAL DRUG CONTROL POLICY EXECUTIVE OFFICE OF THE PRESIDENT 2013

“Project Lazarus is an exceptional organization—not only because it saves lives in Wilkes County, but also because it sets a pioneering example in community-based public health for the rest of the country.”