

February 15, 2017

Dear Executive Directors,

As you are aware, in April 2016 the Provincial Health Officer, Dr. Perry Kendall, declared a public health emergency related to the increased incidence of drug overdose fatalities in BC.

In 2016, there were 914 drug overdose deaths reported in BC, an increase of almost 80% over the number of deaths in 2015. The number of illicit drug overdose deaths in December 2016 (142) was the highest recorded in a month in BC and is more than double monthly average of illicit drug overdose deaths since 2015. The overdose emergency has touched all communities in British Columbia, with some communities impacted harder than others. The Interior Health region has been one of the hardest hit health authorities with 156 overdose deaths recorded in 2016, a rate of 21.0 per 100,000 persons. The rate we are experiencing is second only to the Vancouver Coastal Health region where the rate is 21.7 per 100,000 persons.

Many people at highest risk of overdose may have opioid use disorders, for which they are not engaged and retained in effective treatment. Opioid agonist treatments (OAT)— using medications such as buprenorphine/naloxone (Suboxone®), and methadone—are the most effective, evidence-based treatments in reducing non-medical use of opioids, improving physical health and reducing death rates. You may be aware that the British Columbia Center on Substance Use (BCCSU) is a new provincial resource for clinical guidance, medical education and scientific research on addictions. The BCCSU has been working with regional Divisions of Family Practice to provide educational sessions on opioid use disorder treatment with buprenorphine/naloxone. Buprenorphine/naloxone is now being recommended as a first line agent over methadone in new provincial guidelines on the clinical management of opioid use disorder (http://www.bccsu.ca/care-guidance-publications/).

In addition, as of July 1, 2016, the College of Physicians and Surgeons of BC (CPSBC) <u>removed the</u> <u>requirement for physicians to hold a methadone license in order to prescribe buprenorphine/naloxone</u>, meaning that now, once trained, every physician in BC is able to prescribe this life-saving medication without a special exemption.

Interior Health is working on improving the reach of OAT in our region by extending support to existing Interior Health OAT clinics across the region, as well as organizing educational sessions through the Divisions of Family Practice to discuss the new provincial guidelines for the clinical management of opioid use disorder over the coming months. To become a prescriber you must review the CPSBC

Community Health and Service Centre 505 Doyle Street Kelowna BC VIY 0C5 Web: interiorhealth.ca Trevor Corneil, MD FRCPC VP Population Health & Chief Medical Health Officer Telephone: (250) 469-7070 ext. 12791 Fax: (250) 868-7826 E-Mail: trevor.corneil@interiorhealth.ca guidelines for prescribing buprenorphine/naloxone and complete an online course (<u>www.suboxoneCME.ca</u>).

By way of this letter, I am inviting you to join a network of regional physicians with experience or interest in treating opioid use disorders with buprenorphine/naloxone. Such a network would offer physicians a community of practice and a way to share expertise and information about ancillary supports in treating this patient population.

As of February of this year, we are able to provide physicians interested in offering OAT in both health authority and private clinics funding to complete the training.

Please contact Interior Health's regional addiction medicine lead Dr. Leslie Lappalainen for more information about this training, and to inquire about other resources available to support the care of persons with opioid use disorder. She can be reached by email at <u>leslie.lappalainen@medportal.ca</u>, or by phone via our regional substance use treatment operational lead Ms. Corrine Dolman at 250-469-7070 ext. 12926. In addition, if you are interested in hosting an educational session for your area about the new guidelines, please contact Cheyenne Johnson (<u>cheyenne.johnson@cfenet.ubc.ca</u>).

Finally, the BCCSU is also able to provide addiction treatment expert support for GPs through the provincial Rapid Access to Consultative Expertise (RACE) shared care telephone advice line. It is available for general practice or other physicians and is open Monday through Friday, from 8:00 a.m. to 5:00 p.m., 1-877-696-2131.

We look forward to hearing from you.

Sincerely, then

Dr. Trevor Corneil MD, MHSC, FCFP, FRCPC Vice President of Population Health & Chief Medical Health Officer

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