



MDDCSAM is a chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

SB 618 – Senate Finance - Overdose and Infectious Disease Prevention Services Program
Provided by Scott J. Whetsell, MD, MBA, FASAM

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SUPPORT

Chair Griffith and Members of the Finance Committee,

My name is Scott Whetsell and I co-chair the Public Policy Committee for the MD-DC Society of Addiction Medicine (MDDCSAM). I am writing to you today on behalf of the MD-DC Society of Addiction Medicine in favor of the passage of SB 618 which would establish overdose prevention sites (OPS) statewide.

According to data from the Department of Health, 2518 Marylander's died of an opioid related overdose in 2020. The number of opioid-related deaths increased 20% between 2019 and 2020 and 90% of all intoxication related deaths were due to opioids. The 2021 National Survey on Drug Use and Health released by the Substance Abuse and Mental Health Services Administration (SAMHSA) indicates 94% of people aged 12 and older with a substance use disorder failed to receive any treatment. **It is clear from the aforementioned statistics that our current local and national strategy is failing to protect our citizens, and the time has come for a new approach.**

Fortunately, Maryland already has the governance and administrative knowledge within the Department of Health to quickly and effectively establish overdose prevention sites in accordance with SB 618. **As a practical matter, overdose prevention sites are syringe service programs with additional clinical staff who intervene to save an individual in event of an overdose. In addition to overdose treatment and providing safe needles to curb the transmission of infectious diseases, OPS provide an added access point to refer individuals to treatment program or other social services.** The Department of Health, through its Center for Harm Reduction Services can leverage the existing syringe service program framework and the existing partnerships with local health departments and community-based organizations to create OPS services.

To further illustrate how the framework for OPS outlined in SB 618 already exists in Department of Health's syringe service program, one need look no further than the locations of the syringe service programs themselves. SB 618 calls for no more than six OPS programs to be established. Two in urban areas, two in suburban areas, and two in rural areas. A review of overdose deaths in 2020 by county puts

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Baltimore City, Baltimore County, Montgomery County, Prince George's County, Washington County and Cecil County as 6 of the 7 top counties for total deaths. **All of these counties currently have local health departments operating syringe service programs; each of which could be transitioned to an overdose prevention site, quickly fulfilling SB 618's statutory requirements.**

It is clear that the state of Maryland has both the need for overdose prevention sites and the relevant expertise at the state and local level to successfully implement these programs. It is the Maryland-DC Society of Addiction Medicine's desire, and the wish of the thousands of Maryland families whom have lost loved ones to opioid-related overdoses, that you give this legislation a favorable recommendation and begin the process of turning the tide on the opioid epidemic.