



Implementation of safe supply alternatives during intersecting COVID-19 and overdose health emergencies in British Columbia, Canada, 2021


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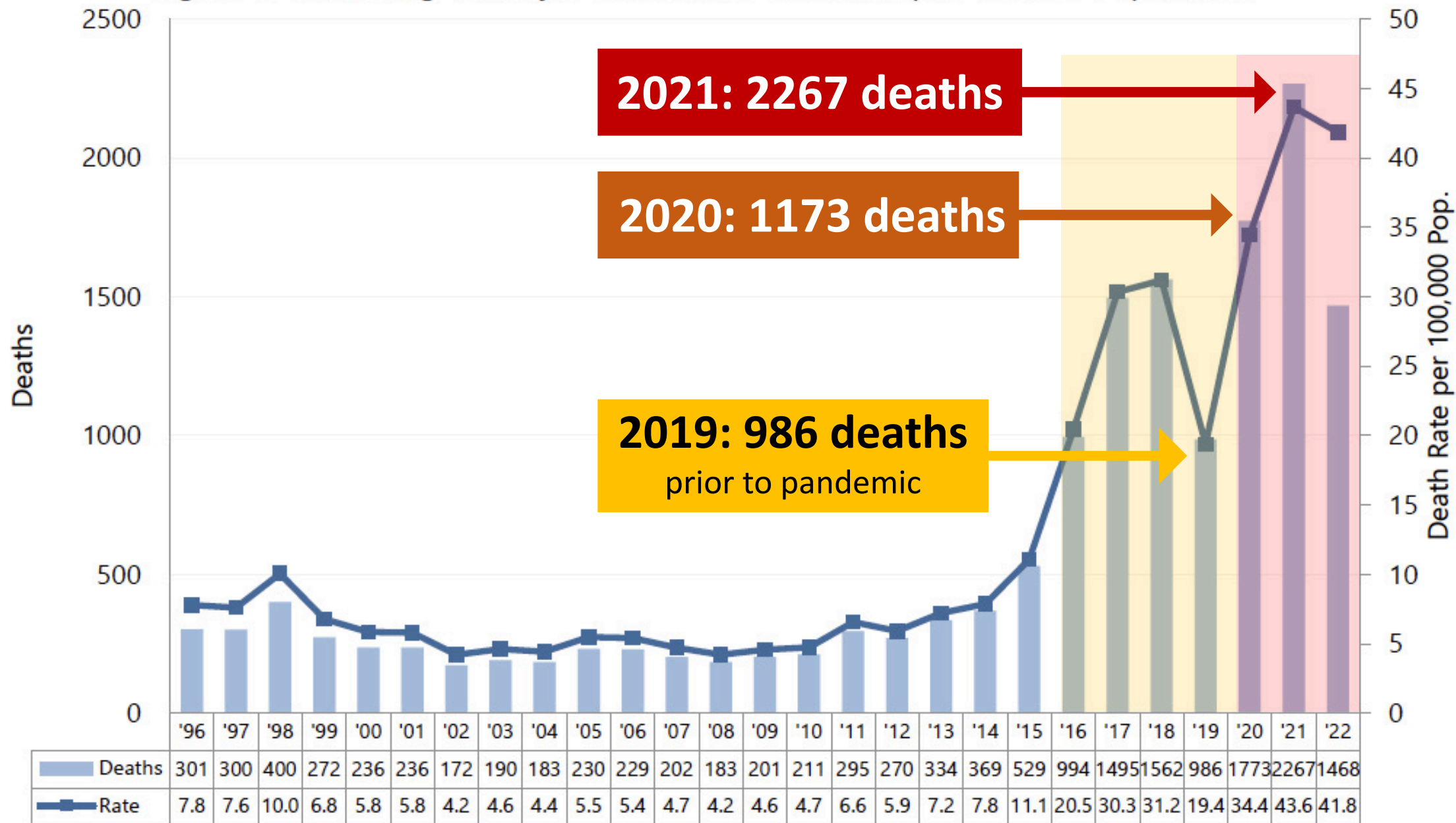
The authors have no conflict of interest to declare.





THE OVERDOSE CRISIS

Figure 1: Illicit Drug Toxicity Deaths and Death Rate per 100,000 Population [3,5]



WHO IS ELIGIBLE?



- AT RISK OF COVID INFECTION OR HAVE A SUSPECTED CASE
- ACTIVE SUBSTANCE USE OF OPIOIDS, STIMULANTS, ALCOHOL, BENZOS OR TOBACCO.
- HIGH RISK OF WITHDRAWAL OR ODI

WHO CAN PRESCRIBE?



- WORK WITH YOUR EXISTING DOCTOR OR NURSE PRAC.
- DON'T HAVE ONE? CONTACT HEALTH SERVICES (911) AND ASK TO BE CONNECTED TO A RAPID ACCESS CLINIC

WHAT ARE SOME COMMON SUBSTANCES?



- OPIOIDS: HYDROMORPH, M-ESLON, OXYCODONE
- STIMULANTS: DEKEDRON, METHYLPHENIDATE
- BENZODIAZEPAMS: ALPRACOLAM, CLONAZEPAM
- ALCOHOL
- TOBACCO
- DOSAGE DEPENDS ON USE? ALTERNATIVE DRUGS MAY BE AVAILABLE

HOW WILL IT WORK?



- YOU WILL LIKELY RECEIVE A SCRIPT FOR 23 DAYS
- SCRIPT SHOULD NOT END ON WEEKEND OR MONDAY
- PRESCRIBER CAN HELP FIND A DELIVERY OPTION

REPORT ANY ISSUES

FOR ANY ISSUES, TEXT OR CALL BC YUKON
HARM SURVIVORS (778-801-5920)

The Risk Mitigation Guidelines

HYPE

HOW TO ACCESS SAFER DRUGS NOW



WHO IS ELIGIBLE?

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WHAT ARE SOME OPTIONS?

- **OPIOIDS:** HYDROMORPH, M-ESLON, OR OAT
- **STIMULANTS:** DEXEDRINE, METHYLPHENIDATE
- **BENZOS:** DIAZEPAM, CLONAZEPAM
- **ALCOHOL / TOBACCO:** OPTIONS BASED ON AVAILABILITY
- **DOSAGE DEPENDS ON USE / ALTERNATIVE DRUGS MAY BE OFFERED**



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THESE STEPS WERE CREATED FROM THE BCCSU GUIDELINES:
"RISK MITIGATION: IN THE CONTEXT OF DUAL PUBLIC HEALTH EMERGENCIES"

RISK MITIGATION

IN THE CONTEXT OF DUAL
PUBLIC HEALTH EMERGENCIES

Interim Clinical Guidance



Risk Mitigation was a clinical guideline that facilitated access to prescription opioids, stimulants, and benzos to people dependent on illicit drugs during the COVID-19 pandemic

Intended to reduce the risk of...

- **Withdrawal during self-isolation**
- **Exposure to COVID-19**
- **Exposure to the toxic drug supply**

DO YOU WANT FREE DRUGS?

HOW TO ACCESS SAFER DRUGS NOW

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DISPENSATION

- Prescriptions dispensed / delivered daily.
- Remote locations can be dispensed weekly.
- Witnessed dosing not required.

DRUG OPTIONS

OPIOIDS	MAX DAILY
Hydromorphone, 8mg tablet	112 mgs
AND/OR	
M-Eslon, SR Morphine	480 mgs
STIMULANTS	
Dextroamphetamine, SR & IR	80 mgs
OR	
Methylphenidate, SR & IR	100 mgs

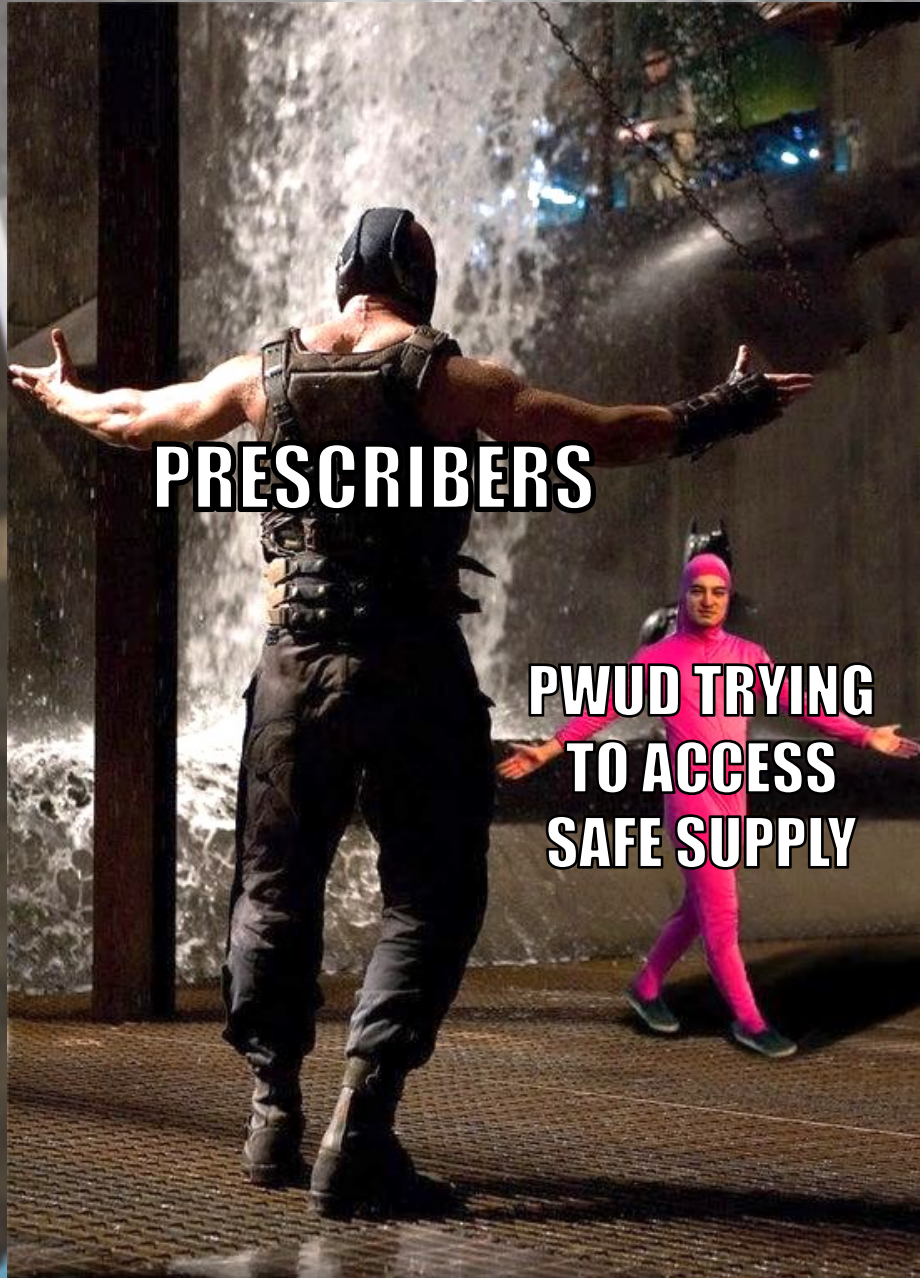


CORONAVIRUS

ME, AFTER A LIFE OF QUESTIONABLE PARTNERS, ILLICIT DRUG USE AND NO WILL TO LIVE

ELIGIBILITY

- **At risk of COVID-19 infection, confirmed COVID-19 positive, or with a suspected case (symptomatic and self-isolating)**
- **History of ongoing active substance use (opioid, benzos, stimulants)**
- **High-risk of withdrawal, overdose, or other harms related to drug use.**



PRESCRIBERS

**PWUD TRYING
TO ACCESS
SAFE SUPPLY**

ELIGIBILITY

- At risk of COVID-19 infection, confirmed COVID-19 positive, or with suspected case (symptomatic)
- History of ongoing substance use (opioid, benzodiazepine)
- High-risk of relapse, overdose, or other harms related to drug use.

- **Confirmed COVID-19 positive (symptomatic and self-isolating)**



The background image shows a laboratory environment. On the left, a person wearing a white lab coat is partially visible, holding a clear plastic bag containing dried plant material. In the upper left corner, a vibrant red rose is in bloom. The floor is made of grey tiles, some of which have purple graffiti that reads 'Laborty'. A large white circle is centered over the image, containing the text 'Qualitative Research' in a bold, black, sans-serif font.

Qualitative Research

Recruitment

Posters In
HR Services

Screening
by Phone

Interview
by Phone



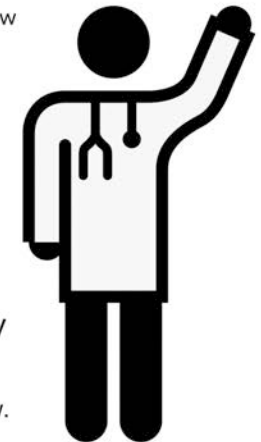
Have you tried to get
STIMULANT Safe Supply
during COVID?

Researchers at BC Centre on Substance Use want to interview people who use stimulants about their experiences of risk mitigation prescribing guidelines during COVID.



You may be eligible to participate if:

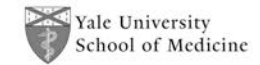
- You use meth, crack or cocaine
- You got, or tried to get, a stimulant prescription between March 2020 and today



Participants will receive \$30 for a 30-60 minute interview.

For more information please call 778-945-5676 or email stimulant.study@bccsu.ubc.ca

This study is being led by Dr. Ryan McNeil (Principal Investigator). October 19th, 2020. Ethics Approval #H17-00557





RESULTS

COVID-19 increased vulnerability and overdose risk

“The border closed and meth went from being clean to being shitty. Then you paid an arm and a leg for shitty stuff, which you never used before.”

Access to no-cost pharmaceuticals reduced vulnerability & overdose

“The [hydromorphone] kept me alive – guaranteed me that I was gonna be alive because the dosage doesn’t change. With down, you don’t know. One batch can be stronger than another.”

Program reduced participant's need to
engage in criminalized activities

3

“It wouldn't cost me anything, because
my medical would cover it. I wouldn't
have to go out and do thing I don't like
doing, like sex work, or stealing, or any
of that kind of thing.”

Doses were often insufficient, and many still wanted to get high

“It’s just fucking boring. I don’t really feel the rush... It’s like having cereal with no milk. It’s just like jerking off with no busting a nut. You know what I mean? It’s not the same. There’s no comparison.”

A photograph of a dilapidated building with graffiti and a large circular overlay containing the word 'SUMMARY'. The building has a brick wall with graffiti, including the word 'Gang' in red. A window is boarded up with plywood. A large tree trunk is on the right, and a white cabinet is chained to it. A pile of debris is in the foreground.

SUMMARY