APA Official Actions

Joint Position Statement of the American Psychiatric Association and the American Academy of Addiction Psychiatry: Opioid Overdose Education and Distribution of Opioid Overdose Reversal Agents

Approved by the Board of Trustees, December 2023 Approved by the Assembly, November 2023

"Policy documents are approved by the APA Assembly and Board of Trustees... These are ... position statements that define APA official policy on specific subjects..." – APA Operations Manual

Issue:

The number of yearly drug overdose deaths in the United States has been increasing over the past 20 years, with a sharp rise in the past five years that has been largely attributed to synthetic opioids (primarily fentanyl). In 2020 alone, the number of drug overdose deaths exceeded 100,000, a 28% increase from the prior year, with three out of four of these deaths involving opioids. Many of these deaths could have been prevented with a rapid-acting opioid antagonist (e.g. naloxone) that can be used to reverse an opioid overdose, though numerous legal and financial barriers have prevented the large-scale distribution and use of this lifesaving medication.

Individuals with elevated risk of opioid overdose include, but are not limited to, those with (1) suspected or known opioid use (prescription or non-medical), (2) prior opioid overdose or medical encounter for opioid intoxication/poisoning, (3) a history of any substance use disorder, or (4) risk of returning to opioid use after a period of abstinence. An opioid overdose reversal agent should be offered to those with household members at risk of accidental ingestion or overdose, including children, as well as by patient request. These individuals can be trained to administer as opioid overdose reversal agent as a nasal spray or as an intramuscular injection.

APA POSITION:

The American Psychiatric Association and American Academy of Addiction Psychiatry support efforts to expand access to overdose education and distribution of opioid overdose reversal agents for individuals and communities at elevated risk of opioid overdose as well as bystanders, family members, and those who may be in a position to respond to an opioid overdose. Given the growing racial disparities in opioid overdose mortality rates and access to safe, lifesaving drugs, opioid overdose reversal agent distribution should be prioritized in black, indigenous, and people of color

(BIPOC) communities. People living in rural and urban medically underserved areas should also be prioritized.

APA and AAAP supports state and federal opioid overdose reversal agent access laws and other regulatory mechanisms that enhance the availability, affordability, and use for community-based organizations and laypersons, as well as laws and regulations that protect providers and civilians who respond to an overdose.

APA and AAAP supports: (1) making opioid overdose reversal agents available over the counter; (2) directing funds toward the purchase of opioid overdose reversal agents for community-based overdose education and distribution of opioid overdose reversal agents; (3) opioid overdose reversal agent access laws to protect those who administer, prescribe, or dispense opioid overdose reversal agents; and (4) Good Samaritan/medical amnesty laws to encourage the use of opioid overdose reversal agents and enable people to contact authorities for assistance during overdose emergencies without fear of arrest or prosecution.

Author: Council on Addiction Psychiatry & American Academy of Addiction Psychiatry