

A LOCAL PERSPECTIVE ON HIGH-POTENCY OPIOIDS: FENTANYL OVERDOSES AT THE UNITING MEDICALLY SUPERVISED INJECTING CENTRE (UNITING MSIC)

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Introduction:

In Canada, fatalities related to fentanyl overdose have resulted in emergency responses such as “pop-up supervised injections facilities (SIFs)” or mobile drug consumption rooms (DCRs). In Sydney, Australia, fentanyl extracted from prescription patches has been recorded as drug type injected by Uniting MSIC since September 2012.

Methods:

Two retrospective clinical audits using routinely collected data on client visits and overdoses at Uniting MSIC were conducted to assess the risk of fentanyl overdose in comparison with heroin and with other opioids (Nov 2012 – September 2015 and May 2017 - ongoing). Rates of overdose per 1000 injections and relative risks (RR) of overdose were calculated. Case studies were collected to demonstrate the challenges posed in clinical management of fentanyl use and subsequent overdose.

Key Findings: In the first audit period, 189,203 injections by 4177 individuals occurred, with fentanyl injections increasing by 1000%, heroin injections increasing by 70% and, prescription opioids(PO) injections declined. Fentanyl injections had a higher risk of overdose than those with heroin (RR = 2.2) and with other POs (RR = 7.9). Data from the second audit period as well as clinical insights and case studies will be presented.

Discussions and Conclusions:

To the date of abstract submission, fentanyl extracted from prescription patches has been the single high-potency opioid injected at Uniting MSIC; it has been linked with a higher risk of overdose than any other opioid. Overdoses were managed with oxygen and naloxone.

Implications for Practice:

An influx of high-potency opioids in Australia would likely increase the risks of opioid overdose. Suitable interventions that could identify fentanyl on the local drug scene and that can manage increased overdose rates would be urgently required.