

RESOLUTION

Subject: Implementing Strategies to Expand Use of Harm Reduction Programs

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Referred to: Reference Committee

WHEREAS, there has been an increase in the number of overdose deaths by 14.5% from 2020 to 2021, of which 90% of overdose deaths involved opioids, and in 2021, “2,250 Kentucky residents died from a drug overdose” where, and “fentanyl was identified in 1,639 of those deaths”¹; and

WHEREAS, Kentucky statute 218A.133 provides exemption from prosecution for drug paraphernalia if a user or witness is seeking assistance with a confirmed drug overdose²; and

WHEREAS, Kentucky statute 217.186 dictates that the Kentucky Department of Public Health “shall develop clinical protocols to address supplies of an opioid antagonist” and its administration in schools and that the board of any private, parochial, or public school district may permit opioid antagonists to be kept for use in the reversal of an opioid overdose on premises³; and

WHEREAS, fentanyl test strips are considered “drug paraphernalia” under Kentucky statute 218.A500, and therefore, it is declared unlawful to use or possess fentanyl test strips⁴; and

WHEREAS, KRS 218.A500 allows items exchanged at local substance use outreach programs “not be deemed drug paraphernalia while located at the program” but does not protect individuals possessing fentanyl test strips in other circumstances⁴; and

WHEREAS, research on harm reduction programs distributing fentanyl test strips demonstrated a statistically significant change in consumer behavior, while needle exchange programs reduce transmission of HCV and HIV up to 50%^{5,6}; now, therefore, be it

RESOLVED, that KMA endorse policies that increase use of harm reduction programs including, but not limited to, providing civil and criminal immunity for the use of “drug paraphernalia” designed for harm reduction such as drug contamination testing and injection drug preparation, use, and disposal supplies; and be it further

RESOLVED, that KMA encourages local health departments across Kentucky to expand access to harm reduction measures for drug addiction including but not limited to drug contamination testing and injection drug preparation, use, and disposal supplies.

References:

- ¹ Kerry Harvey and Van Ingram. 2021 Overdose Fatality Report. Kentucky Office of Drug Control Policy. Commonwealth of Kentucky Justice and Public Safety Cabinet. 2022.
- ² Exemption from prosecution for possession of controlled substance or drug paraphernalia if seeking assistance with drug overdose. 218A.133. Effective 2015.
- ³ Definition -- Provider prescribing or dispensing opioid antagonist -- Administration by third party -- Use of opioid antagonist by person or agency authorized to administer medication -- Immunity from liability -- Administrative regulations -- Use of opioid antagonist by schools -- Use of opioid antagonist by licensed health care provider. 217.186. Effective 2022.
- ⁴ Definitions for KRS 218A.500 and 218A.510 -- Unlawful practices -- Substance abuse treatment outreach program -- Informing peace officer about presence of needles or other sharp objects before search -- Retail pharmacy exception -- Penalties. 218A.500 Effective 2015.
- ⁵ Centers for Disease Control and Prevention. Syringe Services Program Fact Sheet. National Center for HIV, Viral Hepatitis, STD, and TB Prevention. 2019.
- ⁶ Goldman, JE. et al. Perspectives on rapid fentanyl test strips as a harm reduction practice among young adults who use drugs: a qualitative study. *Journal of Harm Reduction*. 2019;16(3). <https://doi.org/10.1186/s12954-018-0276-0>

RELEVANT AMA AND AMA-MSS POLICY

Prevention of Drug-Related Overdose D-95.987

1. Our AMA: (a) recognizes the great burden that substance use disorders (SUDs) and drug-related overdoses and death places on patients and society alike and reaffirms its support for the compassionate treatment of patients with a SUD and people who use drugs; (b) urges that community-based programs offering naloxone and other opioid overdose and drug safety and prevention services continue to be implemented in order to further develop best practices in this area; (c) encourages the education of health care workers and people who use drugs about the use of naloxone and other harm reduction measures in preventing opioid and other drug-related overdose fatalities; and (d) will continue to monitor the progress of such initiatives and respond as appropriate.
2. Our AMA will: (a) advocate for the appropriate education of at-risk patients and their caregivers in the signs and symptoms of a drug-related overdose; and (b) encourage the continued study and implementation of appropriate treatments and risk mitigation methods for patients at risk for a drug-related overdose.
3. Our AMA will support the development and implementation of appropriate education programs for persons receiving treatment for a SUD or in recovery from a SUD and their friends/families that address harm reduction measures.
4. Our AMA will advocate for and encourage state and county medical societies to advocate for harm reduction policies that provide civil and criminal immunity for the use of “drug paraphernalia” designed for harm reduction from drug use, including but not limited to drug contamination testing and injection drug preparation, use, and disposal supplies.