Community Pharmacy Survey; Naloxone Education, Access, and Distribution

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BACKGROUND

In 2013 NY State (NYS) logged 1,589 opioid related deaths.¹ Naloxone is a non-scheduled opioid antagonist that has been proven to rapidly reverse life-threatening opioid induced respiratory depression (OIRD). Pharmacist initiated naloxone prescriptive authority varies by state. NYS requires either a provider-initiated prescription or a collaborative practice agreement and registration "as an opioid overdose prevention program to furnish naloxone under a non-patient specific prescription (standing order)".² The objective of this study was to ascertain the availability of naloxone by community pharmacies and identify barriers, for accessing naloxone within the Capital District.

Per § 52.16(c) of 11 NYCRR 52 (Insurance Regulation 62), limiting coverage by type of illness, accident, treatment, or medical condition is prohibited. To comply with these regulations, issuers should provide naloxone coverage on an outpatient basis when prescribed by authorized providers.³

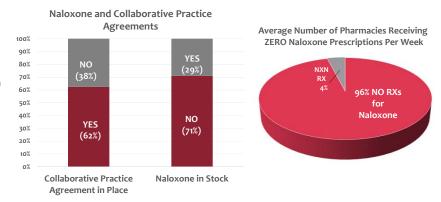
METHODS

Study authors approached pharmacies in Albany County and three surrounding counties (Rensselaer, Saratoga, and Schenectady) to ascertain availability of naloxone and potential pharmacist distribution barriers. Contact was made by student pharmacists and pharmacy residents by phone or in person. Participation was voluntary and responses were kept anonymous.

Participants were asked:

- > Amount and formulation of naloxone currently on the shelf
- > Prescreens of a collaborative practice agreement to prescribe naloxone
- Number of prescriptions filled weekly for any in-home naloxone products
- Characteristics of patients the pharmacist believed would be an appropriate for an in-home naloxone prescription
- Willingness to use an available risk-assessment tool that accurately quantified percent risk for OIRD in order to qualify patients for a naloxone prescription





Reported Reasons For Not Stocking

Naloxone

Other

Not Sure

Tight

Inventory

32%

High Cost

Demand

Of the study participants:

> 146 pharmacies were contacted

- > 88% responded that it is appropriate for patients with an opioid abuse disorder to have naloxone
- > 80% responded that it is appropriate for patients on chronic opioid therapy to have naloxone
- > 86% responded that it would be beneficial to have a quick tool for assessing OIRD

CONCLUSIONS

- Naloxone procurement and distribution by pharmacies is fragmented
- This survey demonstrates that the majority of pharmacies are not receiving requests for naloxone by prescription:
 - Due to high product cost and inventory restrictions, pharmacies are not stocking naloxone
 - > Lack of medical RX
 - Pharmacies are not employing collaborative privileges already in place
- Community pharmacists overall in the NYS Capital Region have the opportunity to play a key role for ensuring naloxone access, however are overall underutilized
- To assist in identifying and qualifying patients for OIRD, pharmacists agreed that a tool for determining risk would be beneficial

REFERENCES

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