Testimony of Heath Myers  
Public Health & Community Services Overdose Prevention Coordinator, City of Bangor  
before the Joint standing Committee on Criminal Justice and Public Safety  
April 28th, 2017

Good afternoon, Senator Rosen and Representative Warren distinguished members of the Joint Standing Committee on Criminal Justice and Public Safety. My name is Heath Myers and I am the Overdose Prevention Coordination and a Public Health Educator for the city of Bangor. I am not here today to testify for or against LD 1326. However, I would like to share information about community distribution of naloxone.

In an opioid overdose, death is preventable with the use of naloxone, and every second matters. The people most likely to witness an overdose are laypersons namely high-risk opioid users, their friends, their families, and social service providers (1). Systematic reviews of Overdose Education and Naloxone Distribution (OEND) programs demonstrate that with minimal training, laypeople can safely and effectively save lives using naloxone (2).

OEND programs can dramatically decrease overdose death rates. Community research in Massachusetts indicated that communities with OEND programs experienced 46% less overdose deaths than communities without OEND programs (3).

Providing naloxone to laypeople could have a substantial impact in rural communities where emergency services can take significantly longer to reach an overdose emergency. In fact, per capita the three rural counties I serve saw a significantly higher overdose death rate compared to the Maine’s most populated county. Cumberland County’s saw 26.7 deaths per 100,000 people while Hancock County saw 31.2 per 100,000, Penobscot County 37.5 per 100,000, and Washington County a stunning 63.6 per 100,000 (4).

Beyond their life-saving value, research has demonstrated that OEND programs are a cost-effective strategy for communities (5). However, in rural states a lack of stable funding is identified as one of the most substantial challenges related to sustaining an OEND program (6).

On a personal note, I have provided overdose prevention education to over 1500 Mainers in the past year and a half. The overwhelmingly majority ask if I can provide them or someone they know with naloxone.

As a community, Maine certainly has major challenges to overcome before reversing the opioid crisis. I would be more than happy to make myself available to legislatures in order to provide more detailed research to inform the hard work ahead. In closing, I want to thank the members of the committee and the legislature at large for doing the hard work of crafting public policy aimed at preserving human life in the face of this drug crisis.

Heath Myers  
Bangor Public Health and Community Services  
103 Texas Avenue, Bangor, ME 04401
Sources:


