

## Overview of Opioid Overdoses in Vermont

After a decrease in the number of fatal opioid overdoses in 2019, preliminary data indicate that the number of opioid-related fatalities among Vermont residents increased in 2020 (158 fatalities), 2021 (217) and 2022 (239)<sup>1</sup>. In 2022, Fentanyl is involved 93% of all accidental and undetermined opioid-related fatalities, while cocaine was involved in 49% of opioid-related fatalities, and xylazine in 28%.<sup>2i</sup> As more substances are involved in overdose fatalities, it becomes ever more important to ensure adequate access to and utilization of the opioid antidote medication, naloxone, often known as the brand name Narcan®, for Vermonters who use illicit drugs and prescription opioids.

### KEY POINTS

- **51,289 doses of naloxone were distributed to community partners in 2022.**
- **EMS administered 1,161 doses of naloxone to 818 individuals.**

## Community Naloxone Distribution

The Health Department's Opioid Overdose Prevention and Reversal Program (OOPRP) collaborates with community-based organizations to distribute naloxone and provides overdose response training, opioid misuse prevention training, and referrals to harm reduction and treatment services across Vermont. As one piece of the State of Vermont's coordinated effort to reduce opioid-related fatalities, the OOPRP works to ensure that first responders and the public are trained in overdose response. The goal of the OOPRP is to distribute naloxone overdose rescue kits to Vermonters at risk of overdose, family members of those at risk, and anyone who may be able to help in the event of an overdose. As fentanyl is being found in many illicit substances in addition to heroin, it is important for anyone using any powder or pill not purchased at a pharmacy to have naloxone on hand and teach loved ones where it is kept and how to use it in case of an opioid overdose.

The OOPRP supports community naloxone distribution through three pathways:

- Narcan® Kit Program
- Harm Reduction Pack (HRP) Program
- First Responder Leave Behind Kit (LBK) Program

More information about each of these programs can be found below and for more information on where to access Narcan® visit [vthelplink.org](http://vthelplink.org).

<sup>1</sup> [Vermont Department of Health - Monthly Opioid-Related Fatal Overdoses](#)

<sup>2</sup> [Vermont Department of Health - Opioid-Related Fatal Overdoses Among Vermonters](#)

# Naloxone Distribution and Administration

## Narcan® Kits Program

These kits include 2 doses of 2 mg nasal naloxone (Narcan®) and instructions provided by the Department of Health. The intention of this pathway is to provide Narcan® to people with whom the organization has the opportunity to provide other resources or, will likely have an ongoing relationship. This allows for ongoing conversations to happen about overdose prevention methods, treatment and recovery supports, and other harm reduction information. Narcan kits should be used when there is likely to be the opportunity to have these conversations. For more information contact: [naloxone@vermont.gov](mailto:naloxone@vermont.gov).

## Harm Reduction Packs (HRPs)

Harm Reduction Packs are intended to be offered to people where there is a high likelihood there will not be an ongoing relationship with the individual or within outreach settings for those who may not be engaged with recovery and harm reduction services. These packs include 2 doses of 4 mg nasal naloxone (Narcan®), instructions provided by the Department of Health, and information on a variety of topics including but not limited to harm reduction, treatment and recovery services, HIV and hepatitis C fact sheets, prevention methods, and other harm reduction information. For more information contact: [AHS.VDHHRP@vermont.gov](mailto:AHS.VDHHRP@vermont.gov).

## First Response Naloxone Leave Behind Kits (LBKs)

Leave Behind Kits are provided to people following an interaction with a first responder such as law enforcement or EMS. EMS are required to offer Leave Behind Kits to individuals who refuse transportation to the hospital following an opioid overdose. EMS are also encouraged to provide these in any circumstance in which opioid use might be indicated, even if the original call to the first responder was not opioid related. These kits include two doses of 4 mg Narcan®, instructions, information on harm reduction, treatment, and recovery services, and information on Vermont 211. For more information contact: [naloxone@vermont.gov](mailto:naloxone@vermont.gov).

## Changes to the OOPRP in 2022

To ensure the OOPRP continues to be responsive to the changing opioid overdose landscape and overall needs of those this program serves, the OOPRP went through an extensive quality improvement project. This project was conducted to best align data collection efforts with current Narcan® and overdose prevention programming evaluation needs. The Health Department completed this project in close partnership with the organizations who distribute the highest number of doses of naloxone to Vermonters. During the duration of the quality improvement project, data collection efforts from community organizations to the Health Department were paused with a new data collection form for the Narcan® Kit program launching in January 2023.

## Naloxone Distribution by the Vermont Department of Health

The following table contains data on naloxone-related kits and materials distributed to community partners by the Vermont Department of Health. This includes naloxone kits provided to OOPRP community naloxone distribution sites, harm reduction packs given to distribution sites, and EMS providers leaving naloxone kits behind on scenes with high-risk individuals. Historic data may change if there are delays in reporting. All data in the following tables should be considered preliminary until final data are published.

# Naloxone Distribution and Administration

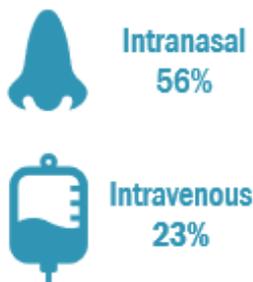
Distribution of Naloxone Doses from the Vermont Department of Health – 2022					
	Q1	Q2	Q3	Q4	Total
<b>Narcan Kit Program:</b> Number of Narcan® doses distributed to community sites	4,335	7,219	6,599	7,073	25,226
<b>Harm Reduction Packs (HRP):</b> Number of Narcan® doses distributed to community HRP sites	4,532	4,712	7,640	4,774	21,658
<b>Leave Behind kits:</b> Number of Leave Behind Narcan® doses provided to EMS and Law Enforcement Agencies (878 kits containing 1756 doses)	738	322	326	370	1,756
EMS Use: Number of 4 mg naloxone doses provided to EMS	218	367	413	285	1,283
EMS Use: Number of 2 mg naloxone doses provided to EMS	282	304	416	364	1,366
<b>Doses of Naloxone Distributed</b>	<b>10,105</b>	<b>12,924</b>	<b>15,394</b>	<b>12,866</b>	<b>51,289</b>

## Naloxone Administration by Emergency Medical Services (EMS) Personnel

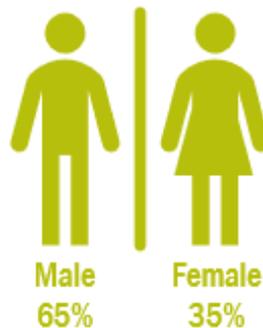
Naloxone is administered by EMS personnel when medically indicated in several scenarios, including perceived overdoses and cardiac arrests. These administrations are captured in Vermont’s State Incident Reporting Network (SIREN) database. SIREN data indicate that Vermont

### Demographic Breakdown of Individuals Administered Naloxone by EMS (2022)

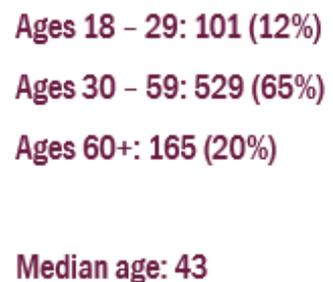
#### Route of Administration



#### Sex



#### Age

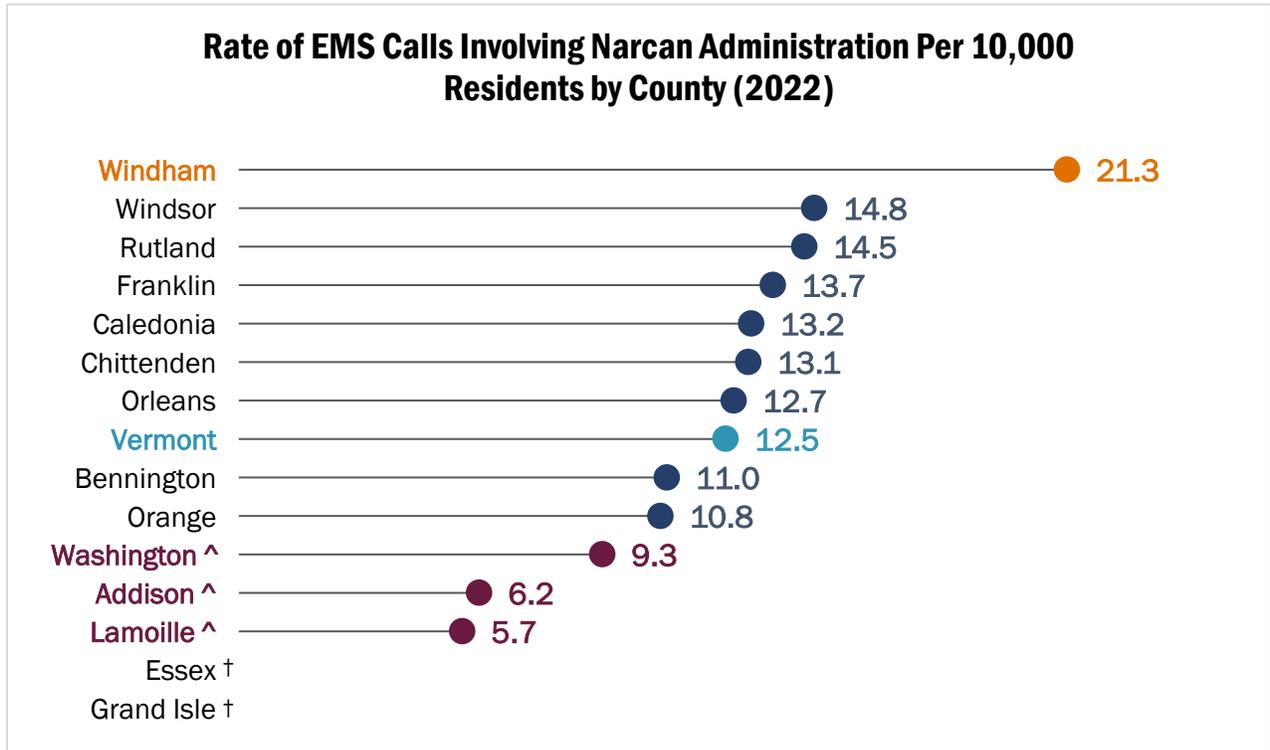


Source: Vermont State Incident Reporting Network (SIREN), 2022

EMS agencies administered 1,161 doses of naloxone to 818 individual patients in 2022 (8 of these incidents occurred out of state, accounting for 16 total administrations of naloxone).

# Naloxone Distribution and Administration

Addison, Lamoille, and Washington Counties had significantly **lower** rates of administrations per 10,000 residents in 2022, while Windham County had a significantly **higher** rate of administrations per 10,000 residents. All other counties were statistically similar to **Vermont** overall.



Source: Vermont Statewide Incident Reporting Network (SIREN), 2022

† Essex and Grand Isle Counties have been suppressed due to insufficient data

^ Statistically significant at 0.05 level, compared to Vermont rate (12.5 per 10,000 Vermonters)

## Preliminary SIREN Data – 2022

The following tables contain data from the Statewide Incident Reporting Network (SIREN). These data outline the use of naloxone by emergency medical personnel in Vermont. These data are updated on a quarterly basis. Historic data may change if there are delays in reporting. All data in the following tables should be considered preliminary until final data are published. Note – because EMS agencies do not administer a ‘standardized’ 4mg dose of naloxone, SIREN data are not comparable to those collected by OOPRP sites.

## Naloxone Distribution and Administration

Number of Individual Patients Administered Naloxone via EMS by County of Incident – Preliminary 2022 Data					
	Q1	Q2	Q3	Q4	Total
Addison	*	*	8	*	23
Bennington	9	11	7	14	41
Caledonia	**	13	*	12	40
Chittenden	32	59	67	63	221
Essex	0	*	0	0	*
Franklin	17	15	17	20	69
Grand Isle	0	0	*	0	*
Lamoille	*	*	*	*	15
Orange	7	8	6	11	32
Orleans	6	9	10	10	35
Rutland	12	22	22	32	88
Washington	10	10	24	12	56
Windham	16	16	25	41	98
Windsor	23	14	31	18	86
Out of State	*	*	*	*	**
<b>Total</b>	<b>153</b>	<b>190</b>	<b>230</b>	<b>245</b>	<b>818</b>

Number of Individual Patients Administered Naloxone via EMS by Gender and Age, and Number of Doses Received – Preliminary 2022 Data					
	Q1	Q2	Q3	Q4	Total
<b>Gender</b>					
Male	94	112	151	170	527
Female	57	78	79	73	287
<b>Age</b>					
< 17	*	*	*	*	*
18 – 29	16	20	36	29	101
30 – 59	97	115	151	166	529
60 +	35	49	39	42	165

\*Fewer than 6 records – data have been suppressed.

\*\* Secondary suppression to prevent the suppressed data from being computed by subtraction from the row or column total.

# Naloxone Distribution and Administration

Number of Individual Patients Administered Naloxone via EMS by Number of Doses Received – Preliminary 2022 Data					
Number of Doses Received	Q1	Q2	Q3	Q4	Total
1	103	130	155	167	555
2	38	48	67	55	208
3	*	10	*	18	36
4	7	*	*	*	15
5	*	0	0	*	*
7	0	0	0	*	*

Number of Naloxone Administrations via EMS by Route of Administration – Preliminary 2022 Data					
	Q1	Q2	Q3	Q4	Total
Intranasal	125	156	173	199	653
Intravenous (IV)	56	56	75	82	269
Intraosseous (IO)	28	24	27	22	101
Intramuscular (IM)	*	20	**	28	68
Other/Miscellaneous	11	8	26	25	70

\*Fewer than 6 records – data have been suppressed.

\*\* Secondary suppression to prevent the suppressed data from being computed by subtraction from the row or column total.

## Key Takeaways:

The OOPRP plays a critical role in addressing the opioid epidemic by focusing services to people who are using drugs, their loved ones, or others that may be in a position to help in the event of an opioid overdose. The program helps to ensure communities have access to overdose education, training, naloxone, and referrals to other services. Overdose prevention training provides guidance on how to prevent, recognize, and respond to an overdose. In addition to reversing overdoses, the community sites and EMS agencies across the state are helping to build community networks and employ a comprehensive response to the opioid epidemic.

**For more information on the OOPRP:** <http://www.healthvermont.gov/naloxone>

**For more information on SIREN:** <https://www.healthvermont.gov/siren>

**For more information on overdose prevention strategies:** [www.knowodvt.com](http://www.knowodvt.com)

**For more information on harm reduction, treatment, and recovery services:** [www.vthelplink.org](http://www.vthelplink.org)

**For data questions:** Chelsea Dubie, [Chelsea.Dubie@vermont.gov](mailto:Chelsea.Dubie@vermont.gov)