
NIH Intervention to Reduce Opioid-Related Overdose Deaths



A National Institutes of Health's HEALing (Helping to End Addiction Long-Term) Communities Study evaluated a data-driven intervention aimed at reducing opioid-related overdose deaths by engaging communities to implement evidence-based practices, such as increasing naloxone distribution and enhancing access to medication for opioid use disorder. The findings are published in the *New England Journal of Medicine*.

The NIH initiated the HEALing Communities Study, a four-year, multisite research project, to test evidence-based interventions across healthcare, justice, and behavioural health settings to reduce overdose deaths. Currently, over 100,000 people die annually from drug overdoses, with more than 75% involving opioids. Despite the proven effectiveness of various practices in preventing or reversing opioid overdoses, they remain underused due to numerous barriers.

As part of the intervention, researchers worked with community coalitions to implement evidence-based practices from the Opioid-Overdose Reduction Continuum of Care Approach. These practices included increasing opioid education and naloxone distribution, improving access to medication for opioid use disorder, and promoting safer opioid prescribing and dispensing. Communication campaigns were also conducted to reduce stigma and increase demand for these practices.

Communities were assigned to receive the intervention (between January 2020 and June 2022) or to a control group (which received the intervention between July 2022 and December 2023). Researchers compared opioid-related overdose death rates between the intervention and control communities from July 2021 to June 2022.

During the intervention period, communities implemented 615 evidence-based strategies (254 related to overdose education and naloxone distribution, 256 related to medications for opioid use disorder, and 105 related to prescription opioid safety). However, there was no statistically significant difference in opioid-involved overdose death rates between the intervention and control groups during the comparison period (47.2 deaths per 100,000 people in the intervention group versus 51.7 in the control). The study did not find a statistically significant reduction in opioid-related overdose death rates during the evaluation period.

The study identified three factors that likely weakened the intervention's impact. First, the COVID-19 pandemic disrupted the implementation of evidence-based practices. Second, communities had only ten months to implement selected practices and insufficient time to recruit staff, change clinical workflows, or develop collaborations. Lastly, changes in the illicit drug market, including the rise of fentanyl and xylazine, posed new challenges for treating opioid use disorder and preventing overdoses.

The HEALing Communities Study, launched in 2019, is the largest addiction prevention and treatment implementation study ever conducted, spanning 67 communities in Kentucky, Massachusetts, New York, and Ohio—states severely affected by the opioid crisis.

The study engaged communities to implement hundreds of evidence-based strategies, showcasing the potential of leveraging community partnerships and data-driven decisions to support the adoption of effective public health measures at the local level. The project brought together researchers, providers, and communities to promote the use of proven strategies like medications for opioid use disorder and naloxone.

Study researchers emphasise the importance of ongoing commitment to evidence-based strategies, acknowledging that the study facilitated the implementation of numerous strategies that could save lives.

Source: [NIH/National Institute on Drug Abuse](#)

Image Credit: iStock

Published on : Sun, 16 Jun 2024