THE S-O-S-INITIATIVE
Stop Overdose Safely
UNODC-WHO Multi-site study on community management of opioid overdose, including emergency naloxone

ALTERNATIVE TREATMENTS

The S-O-S Initiative, promoting the expanded community management of opioid overdose, was launched by the United Nations Office on Drugs and Crime (UNODC) and the World Health Organization (WHO) at the Commission of Narcotic Drugs (CND) in 2017. In line with the WHO (2016) guidelines on ‘Community Management of Opioid Overdose’, this initiative aims to save lives by promoting access to naloxone and training of potential first responders (including peers and family members) in overdose management. United Nations Member States and other stakeholders are encouraged to work together towards universal coverage of opioid overdose management strategies including naloxone, as outlined in the following table.

THE UNODC WHO MULTI-SITE STUDY ON EMERGENCY NALOXONE MANAGEMENT AND OPIOID OVERDOSING, INCLUDING EMERGENCY NALOXONE

As part of the S-O-S Initiative and under the leadership of UNODC and WHO, a multi-country study is being developed to examine the feasibility of emergency naloxone provision through community-based strategies. The S-O-S Initiative targets, and assess the impact of health-related outcomes. Four project countries, with a high prevalence of opioid use, have been selected to conduct the study, which is open to additional, interested countries to join with their own resources.

This will be presented at a pre-meeting event of the CND 68 in February 2017. The study will seek to assess the effectiveness of the S-O-S Initiative targets, and assess the impact of health-related outcomes. Four project countries, with a high prevalence of opioid use, have been selected to conduct the study, which is open to additional, interested countries to join with their own resources.

In preparation for the study, assessments were conducted to project countries/specific regions (October-November 2016). This was followed by an Expert Group Meeting in Rome (UNODC headquarters) on December 2016 where the draft study protocol was discussed. Implementation of the study protocol is scheduled to begin in the second half of 2017.

The initiative was developed within the framework of the UNODC-WHO Programme on Drug Dependence Treatment and Care (UNODC-WHO), which aims to generate and support, with a particular focus on low- and middle-income countries, practical, evidence-based approaches, policies, programs and strategies to address the health and social effects caused by drug use disorder and overdose.

The intent of the project is to provide guidance on the design, implementation and evaluation of specific national and regional approaches to overdose prevention and response. This initiative is designed to promote collaboration between national authorities, stakeholders and NGOs working in this field to ensure that the potential of naloxone in overdose settings is fully realized.

Effective management of opioid overdose

In 2012, the United Nations Economic and Social Council (ECOSOC) called upon WHO, in collaboration with UNODC to provide evidence and guidance, based on scientific evidence, on prevention, management and reduction of drug overdose in the health system. The first report on the study was published in 2014, and the second in 2016. Drug overdose is a complex public health problem with significant variation in rates around the world.

This initiative aims to support Member States in their efforts to develop policy and legal frameworks for the community management of overdose approach. Moreover, it encourages broad partnerships between national governments, regional organizations, research institutions, civil society, interested funding agencies and other entities to work towards the 90-90-90 targets.

A further aim of this initiative is to mobilize and support people likely to witness an overdose in the community, with particular focus on people who use drugs, peers, as well as family members. The ultimate goal is to contribute towards reducing deaths due to preventable opioid overdose.

Opioid overdose is both preventable and, if witnessed, reversible through the administration of naloxone. An opioid antagonist which rapidly reverses the effects of opioids, its availability, effectiveness and ease of use, make it a highly effective intervention. Naloxone is typically administered in a self-injectable form. While naloxone is highly effective, it can be administered by anyone, even those without medical training. This makes it an accessible option for both first responders and individuals who may witness an overdose event.

The study protocol was discussed. Implementation of the study protocol is scheduled to begin in the second half of 2017.

With an estimated 2016-18 drug-related deaths in 2016, corresponding to 0.4-0.6 deaths per 100,000 people aged 15-44, the number of drug-related deaths worldwide is unacceptably high, with significant variation in rates around the world.

Table 1: Opioid overdose (per 100,000 individuals aged 15-44 years)

<table>
<thead>
<tr>
<th>Country</th>
<th>Opioid overdose (per 100,000 individuals aged 15-44 years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>USA</td>
<td>1.25</td>
</tr>
<tr>
<td>Canada</td>
<td>1.25</td>
</tr>
<tr>
<td>Australia</td>
<td>0.85</td>
</tr>
<tr>
<td>Mexico</td>
<td>0.65</td>
</tr>
<tr>
<td>Russia</td>
<td>0.45</td>
</tr>
</tbody>
</table>

SUMMARY

Opioid overdose is both preventable and, if witnessed, reversible through the administration of naloxone, an opioid antagonist which rapidly reverses the effects of opioids. Unfortunately, effective community management programs, medications and the respective data are not available to a sufficient extent worldwide.

In the framework of the S-O-S Initiative, the UNODC-WHO Multi-site study on community management of opioid overdose aims at providing the required basic data and knowledge to policymakers in the following areas:

- Implement universal naloxone coverage for people likely to overdose
- Measure the feasibility, effectiveness and impact of universal naloxone coverage
- Inform health policy by assessing the effects of community-based naloxone provision on opioid-related mortality

ACKNOWLEDGEMENTS