

## The Opioid Epidemic in Massachusetts: Can Current Legislation Address New Challenges?

*Sravanthy Gumidyala*

---

Gumidyala S. The opioid epidemic in Massachusetts: can current legislation address new challenges? *Harvard Public Health Review*. 2019;22

In 2016, Massachusetts had an opioid related death rate of about 33 for every 100,000 people, one of the highest rates among all 50 states, and much higher than the national average of about 20.<sup>i</sup> It is difficult to pinpoint why and this has made the epidemic particularly challenging to address. While the state government has implemented various methods to control opioids, these measures may not hold the solution for emerging problems in opioid abuse in the state.

Massachusetts has taken strides to target prescription opioids in particular. Regulations include required continuing medical education programs for providers who prescribe pain medication and ID checks at pharmacies prior to dispensing prescriptions. Drug monitoring programs are required to update their information on a daily basis and Massachusetts legalized medical marijuana, an alternative treatment for pain management. Patients in the state are also required by law to undergo an assessment for drug abuse prior to receiving any opioid prescription. As a result of enacting such legislation, Massachusetts now has one of the lowest percentages of adults receiving prescription opioids. As of

April 2017, only 2.9% of adult patients had an opioid prescription compared to the national average of 5%.<sup>ii</sup> At the same time, enactment of these laws seemed to be coupled with changes in opioid related deaths. 2017 showed the state a 4% decrease in opioid related overdose deaths compared to 2016. This was the first time there had been a decrease since 2010.<sup>iii</sup>

Unfortunately, even with the additional restrictions and an optimistic decrease in opioid deaths in the state, prescription opioids are no longer the major problem. Fentanyl use, a synthetic opioid with effects stronger than those of heroin, is currently the leading cause of opioid related deaths in Massachusetts. While fentanyl can be prescribed, the majority of the fentanyl present and circulating in the state is illicit. According to toxicology reports through March of 2018, 89% of individuals who died this year of drug overdose and received a toxicology screening had fentanyl in their system. Furthermore, based on data collected by the Massachusetts Department of Public Health, there is a higher estimated number of opioid related deaths in the first

half of 2018 compared to the first half of 2017.<sup>iv</sup>

Controlling prescriptions cannot be the main source of intervention. Studies have shown that the most effective way to address the opioid epidemic is to implement a combination of regulations addressing different aspects of opioid drug abuse.<sup>v</sup> Restrictions focusing only on opioid prescriptions may have aggravated the situation in some ways. With limited access to prescription opioids, people often turn to their illicit counterparts which are often more powerful and more deadly. Opioid prescription control is most helpful when it is paired with legislation to expand treatment for those impacted by opioid drug addiction. Increasing the availability of Narcan, an overdose reversing drug, as well as medication-assisted addiction treatment (MAT) programs will more likely prevent deaths in the long term.<sup>vi</sup> Currently, there is a high need for drug abuse treatment.

Yet hope remains for Massachusetts to make changes, and recent events are a testament to that. In August of 2018, the state legislature unanimously passed a bill to expand MAT throughout the state, including in correctional facilities. Governor Baker

signed it shortly thereafter. The legislation also calls for increased access to Narcan, police trainings for crisis interventions, and an increase in studies that look into the impact of supervised injection sites.<sup>vii</sup> This might play a key role in bringing down opioid related deaths in Massachusetts.

Will these programs get to the root of the problem? Massachusetts' recent legislation is one of the first to be passed at the state level, so time will tell if there is a significant impact. Access to illicit drugs such as fentanyl remains widespread as illegal drug trafficking routes pass through many parts the Northeast United States including Massachusetts. This is a complex issue, so an approach that involves multiple policies at all levels is required, including at the federal level to combat drug trafficking in the region. At the same time, the newly signed opioid legislation shows promise. It reflects that legislators recognize that while the epidemic may have started with prescription opioids, the battle cannot end there.

### About the Author

Sravanthy Gumidyala is a student at Harvard College.

---

<sup>i</sup> "Drug Overdose Mortality by State". *Center for Disease Control and Prevention*. January 2018. [https://www.cdc.gov/nchs/pressroom/sosmap/drug\\_poisoning\\_mortality/drug\\_poisoning.htm](https://www.cdc.gov/nchs/pressroom/sosmap/drug_poisoning_mortality/drug_poisoning.htm)

<sup>ii</sup> "State-by-state breakdown of opioid regulations". *Athenainsight*. 2018. <https://www.athenahealth.com/insight/infographic-opioid-regulations-state-by-state>

<sup>iii</sup> Data Brief: Opioid-Related Overdose Deaths Among Massachusetts Residents. *Massachusetts Department of Public Health*. August 2018. <https://www.mass.gov/files/documents/2018/08/24/Opioid->

[related%20Overdose%20Deaths%20among%20MA%20Residents%20-%20August%202018\\_0.pdf](related%20Overdose%20Deaths%20among%20MA%20Residents%20-%20August%202018_0.pdf)

<sup>iv</sup> *Ibid.*

<sup>v</sup> Pitt, Allison L., Humphreys, Keith, Brandeau, Margaret L. "Modeling Health Benefits and Harms of Public Policy Responses to the US Opioid Epidemic." *American Journal of Public Health* 108, no. 10 (2018): pp. 1394-1400.

[https://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2018.304590?url\\_ver=Z39.88-2003&rfr\\_id=ori%3Arid%3Aacrossref.org&rfr\\_dat=crpub%3Dpubmed](https://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2018.304590?url_ver=Z39.88-2003&rfr_id=ori%3Arid%3Aacrossref.org&rfr_dat=crpub%3Dpubmed)

<sup>vi</sup> *Ibid.*

---

<sup>vii</sup>Katzen, Bob. "Beacon Hill Roll Call-August 24, 2018." *The Enterprise*. August 2018.  
<https://www.capenews.net/columns/beacon-hill->

[roll-call---august/article\\_6d6d6f47-f3dd-5ad5-bc8b-907158bdc862.html](https://www.capenews.net/columns/beacon-hill-roll-call---august/article_6d6d6f47-f3dd-5ad5-bc8b-907158bdc862.html)