The U.S. is currently undergoing a serious, and mostly iatrogenic opioid epidemic. We have been monitoring opioid use in San Mateo County for the past three years. Background data and specific information on San Mateo County follows.

The CDC guideline for prescribing opioids for chronic pain, released in 2016, offers us the best way to combat the opioid epidemic. To the extent possible, please follow the CDC guideline. While not universally applicable, these 12 very basic recommendations apply to most practices. They are paraphrased below:

1. Non-pharmacologic therapy and non-opioid pharmacologic therapy are preferred for non-terminal chronic pain.
2. Don’t start opioid therapy for non-terminal chronic pain unless you have a plan on how to stop therapy.
3. Before starting and periodically during opioid therapy, discuss with patients known risks and realistic benefits of opioid therapy and your patient’s responsibilities and your responsibilities for managing therapy.
4. When starting opioid therapy for chronic pain, start with short-acting agents.
5. Use the lowest dose possible. Be very concerned about increasing the dose over 50 morphine milligram equivalents (MME)/day.
6. Long-term opioid use often begins with treatment of acute pain. Use lowest dose and shortest time. Three (3) days or less will often be sufficient; more than seven (7) days will rarely be needed for acute pain. Dependence can happen much more quickly than you think in certain patients.
7. Evaluate benefits and harms with patients within 1 to 4 weeks of starting opioid therapy for chronic pain. Reassess at least every 90 days to evaluate benefits and harms.
8. Consider co-prescribing Naloxone.
9. Use CURES 2.0 to monitor your patients. (In addition, it is California law to register for CURES AND to check CURES when prescribing controlled medications.)
10. Regularly do urine drug screening.
11. Avoid prescribing opioids and benzodiazepines concurrently.
12. Arrange treatment with buprenorphine or methadone in combination with behavioral therapies for patients with opioid use disorder.
13. While not included in CDC guideline, the use of controlled medication contracts with any patient on controlled substances chronically, is a best practice that should be adopted.

Full CDC guideline can be found at: https://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm
**Background:** The U.S. is currently undergoing a serious, and mostly iatrogenic opioid epidemic. San Mateo County is not immune to this phenomenon. There have been the most dramatic and tragic examples of this epidemic around the country. While each of you has probably encountered tragic examples in your individual patients, I am not aware of any situations here that of the same scope that have happened elsewhere in the country. However, we remain at risk of a worsening situation and should work together to avoid a host of very bad outcomes for our patients and our community.

**What we know locally:**
- There are an estimated 7,800 people in San Mateo County dependent on opioids.
- Approximately 60 people had drug-induced deaths in 2015. This is slightly on the rise since 2007. A great majority of these deaths were NOT related to opioids.
- Over 350,000 prescriptions for opioids were filled for residents of ours in 2015. This is slightly on the rise since 2010.
- The mean number of prescriptions per prescriber is around 100, with the median being 22. This is stable since 2010.
- Approximately 20 prescribers write over 1,000 prescriptions per year with approximately 100 writing over 500 per year. The top prescriber wrote over 3,900 prescriptions. This is stable since 2010.
- 24 million opioid pills were prescribed to San Mateo County residents last year. This is 43 pills for everyone over the age of 18. This is up 5% since 2010.
- The number of buprenorphine prescribers is on a steep increase and now numbers more than 180.
- Recreational use of prescription drugs in adolescents is increasing, likely related to the overwhelming number of these prescribed drugs in our community.
- While heroin use occurs here, I cannot find much evidence of significant heroin use in the county. I believe it’s important that we all work to keep it this way.
- The prevalence of synthetic fentanyl laced drugs is likely to increase. We’ve already seen it in California and across the U.S. Patients overdosing on fentanyl have frequently required multiple doses of naloxone.

**While we won’t have perfect knowledge of the significant entrance of fentanyl laced drugs into our county, we have set up several more timely surveillance systems to monitor fentanyl AND changes in patterns of heroin use.** They include:

1. Tracking opioid calls to CA Poison Control (daily)
2. Through the 911 system, an alert will be generated when patients require two or more doses of naloxone (real time)
3. Emergency Department drug overdose tracking via Essence (daily)
4. Alert from San Mateo County Coroner’s office of overdose clusters or possible fentanyl cases (daily)
5. Review of death certificates (biweekly)
6. Systematic communication with the Narcotics Task Force (biweekly)

**What you can do:**
- For most practices: Follow the CDC guideline: [www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm](http://www.cdc.gov/mmwr/volumes/65/rr/rr6501e1.htm).
- Share this alert with your colleagues.
- Register and check CURES 2.0 before prescribing controlled medications.
If you're a Medical Director, please use these recommendations to strengthen and reinforce good practices with your providers.

Educate patients: There are a myriad of websites for patient education on this topic. The Health Department has developed one that is localized to San Mateo County: [www.smchealth.org/opioid-safe](http://www.smchealth.org/opioid-safe).

There are some local resources for providers at [www.smchealth.org/opoid-safe-prescriptions](http://www.smchealth.org/opoid-safe-prescriptions).

If you suspect a patient is opioid dependent and/or has multiple prescriptions, please refer them to their contracted substance use treatment provider. If they are not privately insured, they may contact the San Mateo County Behavioral Health and Recovery Services at 1-800-686-0101 for treatment or to develop an agreement to taper opioid use.

Notify the San Mateo County Public Health Department immediately of any confirmed or suspected fentanyl overdose cases or any multiple overdose cases. **Call (650) 573-2346** to notify us. This is the same number for reporting cases of communicable disease.

If you notice anything unusual, please let us know at the number above. It is often the astute clinician who recognizes something out of the ordinary that is the best surveillance system of all.