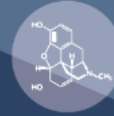




# Opioid Task Force



## Governor's Commission on Alcohol and Other Drugs

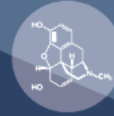
**Date/Time:** May 13, 2021 | **Task Force Chair:** Seddon Savage

<p><b>Welcome &amp; Introductions</b></p>	<p><b>Members Present:</b> Seddon Savage, Ken Bradley, Chief John Bryfonski, Alex Casale, Lauren Chambers, Mark Cioffi, Sara Cleveland, Ryan Fowler, Joe Hannon, Paula Holigan, Stacey Lazzar, Nicole Rodler, Chris Shambarger, Jeffrey Stewart, Eliza Zarka, David Mara  <b>Members Not Present:</b> James Boffetti, Kate Frey, Donald Hunter, Kiera Latham, Paula Mattis, Matthew McKenney, Helen Pervanas  <b>Public Participants Present:</b> Dan Andrus, Carla Smith, Lynne Sullivan, Julie Yerkes, Sydney Lewis, Michaela Hedberg, Macey Muller, Kent Thompson, Tonoka Batts-Settles, Eric Dancause, Kim Perkinson, Melanie Boyd, Kristen Breton  <b>JSI Staff Present:</b> Adriana Lopera, Anna Laurence</p>	
<p><b>Agenda Item</b></p>	<p><b>Discussion</b></p>	<p><b>Action Item</b></p>
<p><b>Welcome and Introduction</b></p>	<ul style="list-style-type: none"> <li>Quorum was reached.</li> </ul>	
<p><b>Review and Approval of April Meeting Minutes</b></p>	<ul style="list-style-type: none"> <li>Mark Cioffi motioned to approve the April meeting minutes. Chief John Bryfonski seconded the motion to approve the meeting minutes. There were no comments on the minutes and a unanimous vote for approval of the meeting minutes.</li> </ul>	<p>CHI will post the April meeting minutes to the task force web page.</p>
<p><b>Drug Pricing and Purity Data Presentation</b></p>	<ul style="list-style-type: none"> <li>Chief Bryfonski presented data on drug price and purity in NH. Price and purity is used to measure availability of the illicit drugs in the marketplace. The data comes from forensic laboratories. He shared data from 2014-2021, depicting a steady increase in the availability of cocaine, fentanyl, and heroin. There was a dip in 2018 but essentially relatively stable since 2019. Heroin and fentanyl seizures have been steadily increasing since the surge in fentanyl and heroin began in New Hampshire in 2012/2013. The number and amount of seizures are somewhat of a predictor of drug availability but not quite as accurate for determining true availability.</li> <li>Chief Bryfonski shared street level pricing data, and purity data. The street level pricing data presented was gathered from the Manchester Police Department and Drug Unit. The data showed the price of fentanyl, methamphetamine, and heroin, since 2017. Between 2017 and 2021 the price per gram for fentanyl on the street has been reduced by about 50%, which shows there is an abundance of the substance available. Methamphetamine is showing substantial changes with</li> </ul>	



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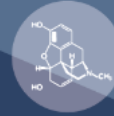
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	<p>price increases in 2018 and 2019. There has been a change from indigenous source methamphetamine to Mexican sourced methamphetamine.</p> <ul style="list-style-type: none"><li>• Over abundance causes substantial price reductions. Pricing increases indicate shortage in availability of a particular substance. Purity has been at a high and stable rate throughout the years suggesting an abundance of supply in the marketplace.</li><li>• Cartels aim to produce over 300% of demand in a particular marketplace to account for seizures to ensure there will still be an abundant supply of substances.</li><li>• Ken Bradley mentioned we are seeing an increase in cocaine seizures. On a national level, starting to see a lot more cocaine seizures in large quantities. Fentanyl is being trafficked in large amounts. There have been seizures in NH that are indicative of large scale operations. There is a never ending supply of cocaine, fentanyl, and methamphetamine. Western portion of the state has heavy fentanyl run supplied up from NY, CT, and Western Mass.</li><li>• Chief Bryfonski noted that supply and availability are important when thinking about opioid use and misuse and fatalities. Demand reduction measures are important but also helpful to look at density of distribution outlets and looking at incidence, for example related to use of alcohol. We see the same with opioids and all illicit drugs. Somewhat of a bleak picture. Consider different ways to make recommendations for supply of drugs. Basic centers of sources for the supply. Central part of state supply comes from Lawrence and Lowell. Chief Bryfonski mentioned we need to put more resources in the transit zone, turnpike for NH. Ability to strategically target and effect street level and midlevel trafficking organizations.</li><li>• Joe Hannon asked how it makes sense to put more effort into supply reduction if it hasn't worked in the past except at local levels? Chief Bryfonski mentioned there have been a number of successes. We have to define what success looks like in terms of reducing supply. Never going to be reduced to zero. In Chief Bryfonski's</li></ul>	
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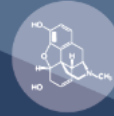
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	<p>opinion, supply reduction does work, but clouded by a narrative that it doesn't work. Have to change our strategy.</p> <ul style="list-style-type: none"> <li>• Seddon Savage noted that the presentation showed as drug prices dropped, purity remained the same. This suggests an ample supply at the same time there was the drop in drug deaths, not what you would expect to if reducing supply reduced use. Would expect that a decreased supply would be associated with a lower overdose death rate.</li> <li>• Ken Bradley noted that Kiera Latham has been working with the data to address discrepancies with some of the deaths that occurred in NH. There may be updates to the data.</li> <li>• Mark Cioffi mentioned it was interesting to see Newport listed as one of the areas across the data sets. Newport area also has some anomalies in some of the numbers of prescriptions per person in that area that have not been fully investigated by the PDMP.</li> <li>• New Hampshire is now seeing an increase in cocaine hydrochloride being trafficked from Colombia.</li> </ul>	
<p><b>Drug Monitoring Initiative</b></p>	<ul style="list-style-type: none"> <li>• We will move this agenda item to the June meeting.</li> </ul>	
<p><b>Discussion of NH Strategies to Reduce Drug Overdoses</b></p>	<ul style="list-style-type: none"> <li>• Seddon Savage continued the conversation from the last meeting on what is contributing to a reduction in opioid drug related overdose. At the last meeting we went through an inventory of activities.</li> <li>• Seddon Savage presented inventory with focus today around drug specific issues.</li> <li>• <b>Opioid supply:</b> One factor that could be impacting overdose deaths. Fentanyl arrived early in NH, There was a surge in deaths when switched from heroin to fentanyl there as an increase in overdose deaths. Inclusion of fentanyl test strips, these are widely available now and people are using them.</li> </ul>	



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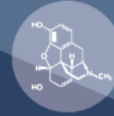
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	<ul style="list-style-type: none"> <li>● <b>Improved prescribing:</b> Reduced availability of excess prescription opioids. We have seen reductions in opioid prescribing, PDMP has been critical in helping understand the trends.</li> <li>● <b>Methamphetamines increasingly used with opioids:</b> Could co-use with opioids reduce opioid related overdose since meth is a stimulant and may counter some sedative effects of opioids, though has no direct effect on respiration. We do not have evidence for this, would require a literature search.</li> <li>● Could cannabis increasingly available have in impact on opioid use? Literature is contradictory with some showing reduced opioid overdose deaths with increased cannabis availability and some showing increase opioid use with increased cannabis use.</li> <li>● The observation was shared that disruption in the drug supply often seems to be associated with increased overdoses. In Claremont there has been an increase in overdoses, both fatal and non fatal linked to the seizure of Bitcoin ATM that disrupted the drug supply.</li> <li>● <b>Next steps:</b> The Task Force put in a request for staff support to gather data on: <ul style="list-style-type: none"> <li>○ Gather data on outcomes or reach of initiative/number of lives touched and on Funding and level of investment of each strategy and to</li> <li>○ Create a timeline that looked at when the initiatives started and ramped up,</li> <li>○ The request came at the same time as the next GC strategic plan is being developed and the formation of a stimulants workgroup. If the task force wants to move forward, Seddon will reach out to the Commission Chair to explore further funding to support this TA request. TF affirmed they would like to move ahead.</li> </ul> </li> <li>● A comment was made regarding concerns that drug prohibition may actually contribute to ongoing drug challenges. The Task Force voiced interested in having a session or a few sessions to educate themselves on both prohibition and legalization models. At the next meeting the Task Force will have 10-15 minutes to discuss how to have this conversation.</li> </ul>	<p>Seddon will discuss further TA funding for completing the inventory of opioid harm mitigation strategies with chair of Governor's Commission and will report back.</p> <p>Seddon and Paula will connect offline regarding whether there is need to move forward with emergency funding from GC for Project First.</p>
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<p><b>Governor's Commission AOD next Funding Request Update</b></p>	<ul style="list-style-type: none"> <li>• The Governor's Commission has proposed deferring the next funding cycle from June until either August or September.</li> <li>• Paula Holigan is applying to a first responder grant for Project FIRST that would allow them to continue the program for another four years.</li> </ul>	<p>Seddon and Paula will connect offline regarding whether there is need to move forward with emergency funding from GC for Project First.</p>
<p><b>Other business &amp; Sector Updates</b></p>	<ul style="list-style-type: none"> <li>• Julie Yerkes, CHI, is working to rebuild Drug Free NH website and partnership. In partnership with the University of NH, building up opioid prevention materials and resources available. There is a calendar of events available on the website. The partnership would like to work with the Task Force members to review resources and to seek an understanding of what resources are needed. Current resources included fact sheets around stimulants as well as harm reduction. If your program would be a good partner for the partnership you can go to <a href="http://drugfreenh.org">drugfreenh.org</a> and become a partner.             <ul style="list-style-type: none"> <li>◦ Seddon Savage recommended creating a resource on safe use among people who are using, i.e. harm reduction.</li> </ul> </li> <li>• May 16 – 22nd- National Emergency Medical Services Week</li> <li>• Dave Mara – Drug Overdose Fatality Review Committee has started meeting. They have been hearing from other states on their successes and pitfalls. Dave Mara can provide a presentation on this group at an upcoming Task Force meeting.</li> <li>• No update on whether Task Force meetings will be in person in the future.</li> </ul>	

**Next meeting: June 10, 2021**