

**HB 464: Public Health - Overdose and Infectious Disease Prevention Services Program  
Testimony IN SUPPORT. HGO Committee. 2-28-2020. Jasleen Salwan, M.D., M.P.H.**

MDDCSAM is a chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

Overdose prevention sites, sometimes referred to as “supervised drug consumption facilities,” save lives by providing a space for people who use drugs to do so under the observation of a trained professional. The observer can administer the opioid overdose reversal agent naloxone when needed. This simple and humane intervention is saving lives every day in Canada, Europe, and Australia. It is much needed in the U.S. By allowing community-based organizations to create these sites, Maryland can lead the way in combatting the national opioid crisis.

In addition to preventing overdose deaths, overdose prevention sites provide syringe exchange services to limit the spread of infectious diseases related to intravenous drug use. These include HIV, hepatitis, and skin infections. Evidence supports overdose prevention sites’ evidence and cost-effectiveness in this domain: treating these infections is far more costly than creating the overdose prevention facilities.

Preventing overdose deaths and reducing infectious disease are sufficient justification for this bill. Under the philosophy of harm reduction, any policy that improves the health of people who use drugs is considered worthwhile, because the alternative of doing nothing will certainly lead to more deaths.

But there’s another reason to support overdose prevention sites. In addition to limiting the adverse events suffered by people who use drugs, overdose prevention sites connect people to treatment. Published literature shows an increase in utilization of addiction treatment services among people after using an overdose prevention site. Offering a safe, nonjudgmental space for people to use drugs can be the first step in building the trust necessary for a therapeutic alliance.

Overdose prevention sites are indeed safe. No deaths have been reported at any of the more than 100 sites around the world. In addition, there is no evidence that overdose prevention sites increase drug trafficking or crime in their surrounding neighborhoods. In light of this evidence, we appreciate that the bill affords legal protections to individuals who would utilize overdose prevention sites in the state of Maryland.

Decades of failed policies under the “War on Drugs” have proven that we cannot force people to stop using drugs. We can only make safe and evidence-based treatments available and accessible. And until a person is ready to seek treatment, it is our collective duty to keep them alive. No one can benefit from treatment when they are dead.

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