



pennsylvania
DEPARTMENT OF HEALTH

Public Hearing on House Bill 1393

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Testimony of:

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Good Morning Chairman Kauffman, Chairman Briggs, and the members of the House Judiciary Committee. Thank you for the opportunity today to testify on House Bill 1393, which would decriminalize the use of fentanyl test strips in Pennsylvania. I am Physician General Dr. Denise Johnson and with me today is Roseanne Scotti, Senior Technical Advisor on Syringe Access Services, who will also be available to answer any questions from the Committee.

As you know, drug overdose deaths remain one of the greatest health crises facing our Commonwealth. While the COVID-19 pandemic continues, the number of drug overdoses increased in 46 of Pennsylvania's 67 counties in 2020. While the Opioid Disaster Declaration has expired, the Department of Health and the entire Wolf Administration remain committed to combating this ongoing crisis. Meeting this challenge requires as many tools in the toolbox as possible to help prevent overdose deaths and help get people into treatment. As such, we are very encouraged to be included in this conversation today and welcome the opportunity to highlight House Bill 1393 as a critical harm reduction tool that would help reduce overdose deaths of Pennsylvanians.

Drug overdose is the leading cause of accidental death in Pennsylvania. Our families and communities are being devastated by the loss of loved ones, and it does not have to be this way. 4,458 people died from drug overdoses in 2019 and 5,067 people died from drug overdoses in 2020. Pennsylvania has the third highest number of overdose deaths in the nation, many of which are caused by substances laced with fentanyl. Fentanyl is a synthetic opioid that is about 50 to 100 times as potent as morphine. Fentanyl is increasingly found in heroin and more recently in other drugs including cocaine and methamphetamine. Nationally, overdose deaths involving fentanyl have quadrupled in recent years.ⁱ

The COVID-19 pandemic has only exacerbated these health crises. Social isolation, stress and financial uncertainty are linked to an increase in substance use disorders, relapses for those in recovery, and more people using drugs in isolation. Using drugs in isolation increases the risk of fatal overdoses. Pennsylvania had achieved significant reductions in overdose deaths in 2018, and had a similar rate in 2019, but reports for 2020 are reflecting a worrying increase with more than 5,060 deaths based on preliminary estimates.

Since there is not one silver bullet to ending the opioid crisis, Pennsylvania is utilizing numerous interventions including expanded access to naloxone - the antidote to opioid overdose – along with expanded access to effective drug treatment including medication for opioid use disorder, and prevention and anti-stigma campaigns. A tool currently missing from our toolbox is the subject of House Bill 1393, which would allow for the possession and use of fentanyl testing strips.

Fentanyl testing strips are a simple, inexpensive, and evidence-based method to prevent drug overdose. Fentanyl testing strips are small strips of paper, costing about \$1.00 each, that can detect the presence of fentanyl in any drug, whether in pill, powder or injectable form.ⁱⁱ These test strips do not contain fentanyl. The strips are dipped into water in which a small amount of drug has been added. They indicate the presence of fentanyl by the appearance of a red line on the strip, similar to a home pregnancy test.

A growing body of research has shown that making fentanyl testing strips available to people who use drugs can be effective in helping people reduce their risk of overdose.ⁱⁱⁱ In addition, providing access to fentanyl testing strips through public health providers and harm reduction programs presents an

opportunity to engage with people who use drugs and offer them additional services including drug treatment. Simply put, those who overdose and die cannot go into treatment. Allowing the use of fentanyl test strips gives those people a chance to stay alive and get into treatment.

Some states have begun legalizing fentanyl testing strips or otherwise allowing for the use of fentanyl testing strips. Arizona^{iv}, Maryland,^v and Washington State,^{vi} have legalized fentanyl testing strips. Other states, including California, Connecticut, New Jersey, Ohio, Texas, and Utah have begun using and distributing fentanyl testing strips, despite having a drug paraphernalia law that defines them as drug paraphernalia. In Pennsylvania, fentanyl testing strips are considered drug paraphernalia under the Drug Device and Cosmetics Act.^{vii} Despite this, some public health and harm reduction organizations are also using and distributing the strips. Unfortunately, they could face legal repercussions for doing this. House Bill 1393 would remove the fear of legal repercussions and allow these organizations to use fentanyl testing strips as an overdose prevention tool and as a tool to engage people with opioid use disorder and connect them to drug treatment and other social services.

Recently the federal government announced that states can use federal funding to purchase fentanyl testing strips.^{viii} This announcement, along with the increased federal funding for substance use prevention, rescue, treatment and recovery, would support any efforts to purchase and provide fentanyl testing strips should this legislation become law. The Department of Health believes fentanyl testing strips would be another helpful tool in our toolbox to prevent overdose deaths. We support House Bill 1393 and applaud Representative Struzzi for being a leader in this critical fight.

Further, we know that this is not the only harm reduction legislation which Pennsylvania could use to expand our efforts to keep people alive to seek treatment. Rep. Struzzi is also leading on legislation to allow syringe service programs to operate in Pennsylvania. We know that Pennsylvania's opioid use crisis is compounded by the related public health challenge of rising rates of HIV and Hepatitis C. We can and should act to prevent these needless overdose deaths and reduce the transmission of HIV and Hepatitis C caused by sharing contaminated syringes. More broadly allowing syringe services programs would be a powerful tool in the fight to overcome these health crises. Syringe Services programs are public health programs that serve the community by addressing the health needs of people who use drugs. Syringe services programs provide access to clean syringes and dispose of used syringes. They provide access to drug treatment and other social services, HIV and hepatitis testing, naloxone and a range of other health services. To be clear, these programs do not exist to encourage drug use, nor are they safe injection sites – they are rather a social services intervention existing to build trust with participants to ultimately help them get treatment for substance use disorder along with any other healthcare need they may have.

Syringe services programs have existed in Philadelphia and Pittsburgh under decisions made by local authorities for more than two decades, but other communities in Pennsylvania have not been able to benefit from the experience of these programs. While Philadelphia and Pittsburgh were leaders in operating syringe services programs, Pennsylvania is behind the curve. All our neighboring states, including Ohio, West Virginia, New York, New Jersey, Virginia, Maryland, and Delaware, have passed statewide legislation allowing for syringe services programs. Additionally, former Vice President Pence authorized syringe services programs in Indiana when he was Governor. Both the Trump Administration and the Biden Administration highlighted the public health benefits of syringe services programs and

began supporting them through availability of federal funding. In fact, Pennsylvania is one of only 10 states that do not yet allow for syringe services programs to operate statewide.

This public health emergency is doubly tragic because drug overdose deaths and HIV and Hepatitis C infections are preventable. The Centers for Disease Control and Prevention (CDC) declares that syringe services programs are a critical component for reducing overdose deaths and reducing the transmission of blood-borne diseases. Individuals who participate in syringe service programs are five times more likely to enter drug treatment and syringe services programs are associated with a 50 percent reduction in HIV and Hepatitis C infections.

Syringe services programs also increase public safety and protect law enforcement and first responders by taking back and properly disposing of used syringes. These programs also save taxpayer money by reducing transmission of blood-borne diseases. A recent study found that the syringe services program in Philadelphia helped avert more than 10,000 cases of HIV and thus saved the city approximately \$243 million a year in healthcare costs. The total savings to the city was estimated to be \$2.4 billion over 10 years. By providing access to sterile syringes, these programs also prevent the transmission of other potentially deadly infections, including cellulitis, osteomyelitis, endocarditis, and intracranial and intraspinal abscess. There are currently tens of thousands of hospital admissions annually in our state for these infections and reducing these infections would save lives and save money.

Expanding syringe services programs across our state will save thousands of lives and prevent untold numbers of HIV and Hepatitis C infections. Fewer families will have to suffer the loss that so many Pennsylvanians have already suffered. Pennsylvania will untie the hands of local health departments, medical professionals, social service providers and volunteers to save lives and prevent the spread of diseases.

If enacted, House Bill 1393 and the Syringe Services proposal will provide more tools at our disposal to help keep Pennsylvanians alive long enough to get into treatment. Thank you again for the opportunity to discuss House Bill 1393, harm reduction policies generally, and the critical role they can play in saving the lives of Pennsylvanians. We are happy to take any questions you may have at this time.

ⁱ <https://www.cdc.gov/opioids/basics/fentanyl.html>

ⁱⁱ <https://www.healthaffairs.org/doi/10.1377/hblog20210601.974263/full/>

ⁱⁱⁱ <https://pubmed.ncbi.nlm.nih.gov/33333419/>

^{iv} <https://thehill.com/homenews/state-watch/554419-arizona-legalizes-test-strips-that-detect-fentanyl>

^v https://www.times-news.com/news/local_news/maryland-to-see-increase-in-fentanyl-drug-testing-strips/article_bc6181e8-60f6-54a8-8431-315ae737dade.html

^{vi} <https://www.doh.wa.gov/YouandYourFamily/DrugUserHealth/OverdoseandNaloxone/FentanylTestStrip>

^{vii} Act of 1972, P.L. 233, No. 64

^{viii} <https://www.cdc.gov/media/releases/2021/p0407-Fentanyl-Test-Strips.html>