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Do Medical Students Know Enough about Naloxone Access and Good Samaritan Laws? Exploring the Need for Additional Training in Harm Reduction

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Background

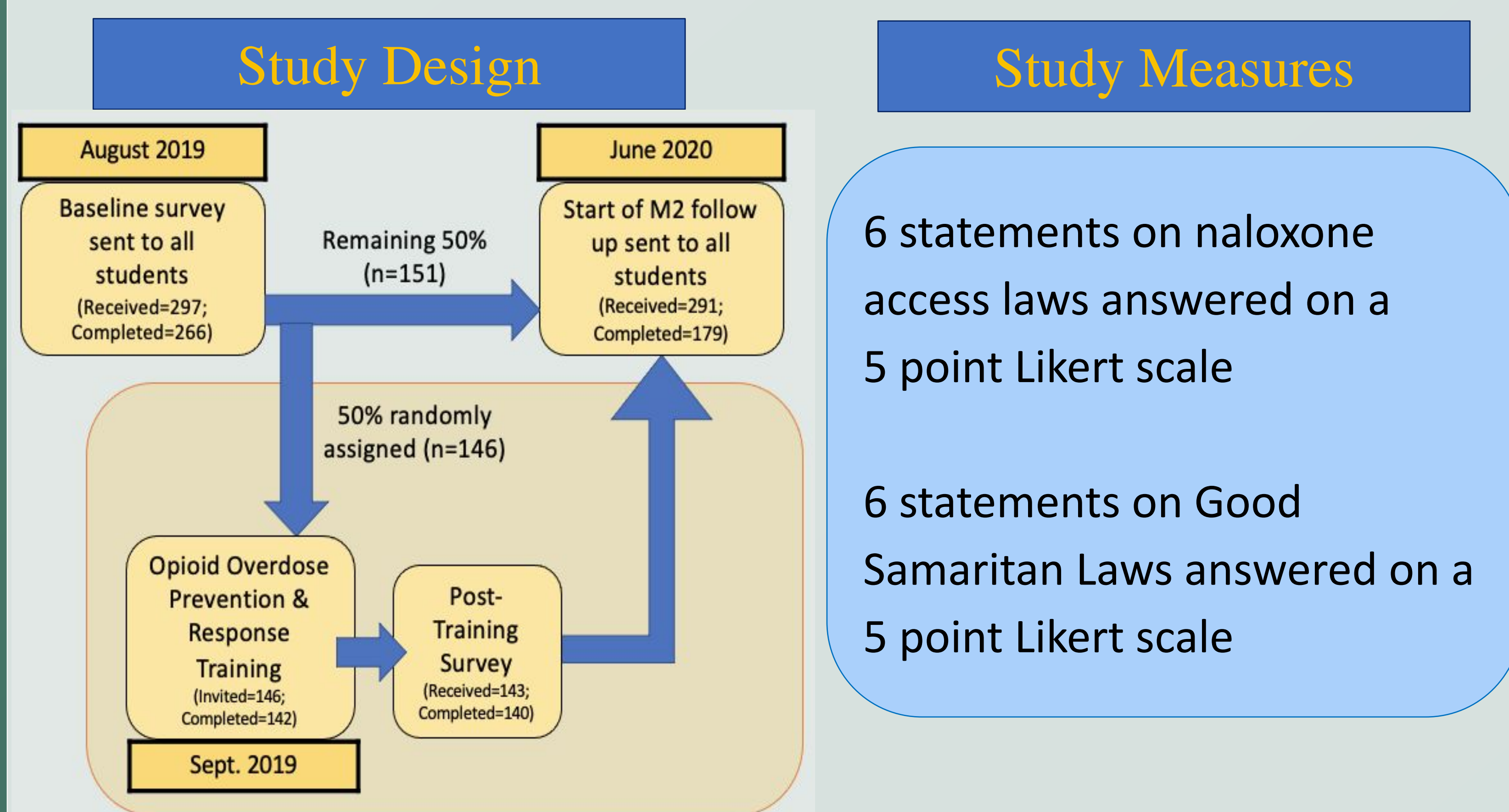
- An estimated 21-68% of overdose bystanders call 911 but many delay or refrain from calling due to fears of adverse consequences and arrest (1,2)
- The majority of states, but not all, have passed a variety of Good Samaritan laws to provide legal protection against prosecution when calling for medical assistance in these situations; however, these laws do not protect against all legal concerns (1,3-5)
- Understanding this knowledge and how it impacts patients is critical to deliver comprehensive treatment and guidance for patients with opioid use disorder (OUD)
- Over 2 million people have an OUD in the U.S (6,7)
- Lack of physician knowledge and comfort in discussing these issues is a barrier to comprehensive care (8)
- Provisional data by the CDC demonstrates an alarming rise in drug overdose death which have increased by ~29% over a 12 month period ending in April 2021 totaling to ~100,306 overdoses (9)
- Evaluating medical student knowledge of and attitudes towards harm reduction is critical to establish whether further education is needed

Objectives

1. Examine the knowledge of incoming medical students towards harm reduction, naloxone distribution, and Good Samaritan laws
2. Explore the changes in harm reduction law knowledge among medical students after 1-year of pre-clinical training

Methods

As part of a curricular improvement project at WSU SOM in an effort to address the overdose epidemic, we are administering annual surveys to identify the impact of different curricular changes. We asked specific questions about naloxone access and Good Samaritan laws

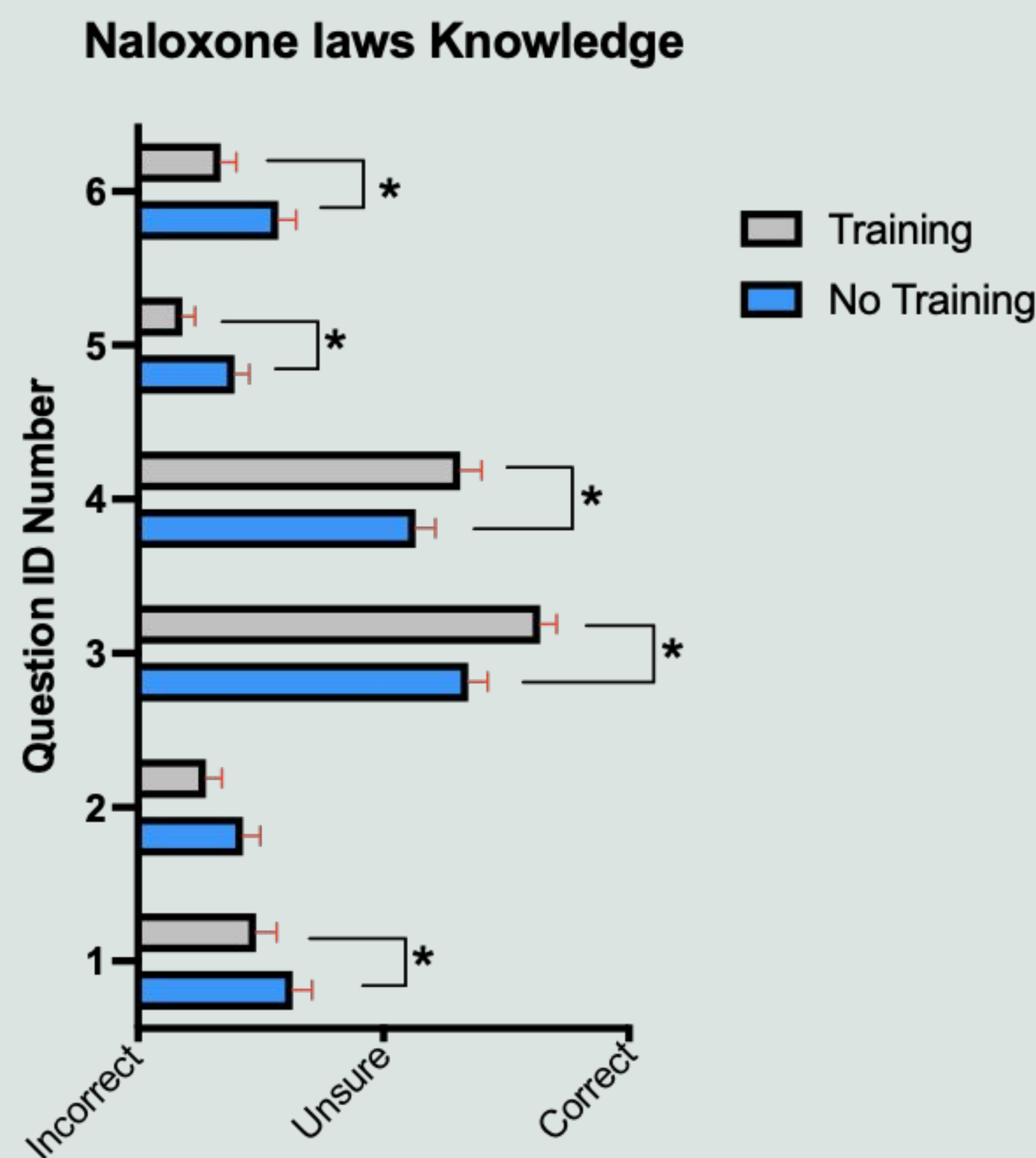


Data analysis: Chi-square comparisons with and without training

Sample Characteristics

- N= 167 total respondents answered both surveys as M1 and M2 students
- Average age = 23.29; 55.7% female; 64.1% White; 13.8% Hispanic/Latinx
- 59.3% from Michigan, 10.8% from California, with a total of 23 states represented

Results: Naloxone Laws

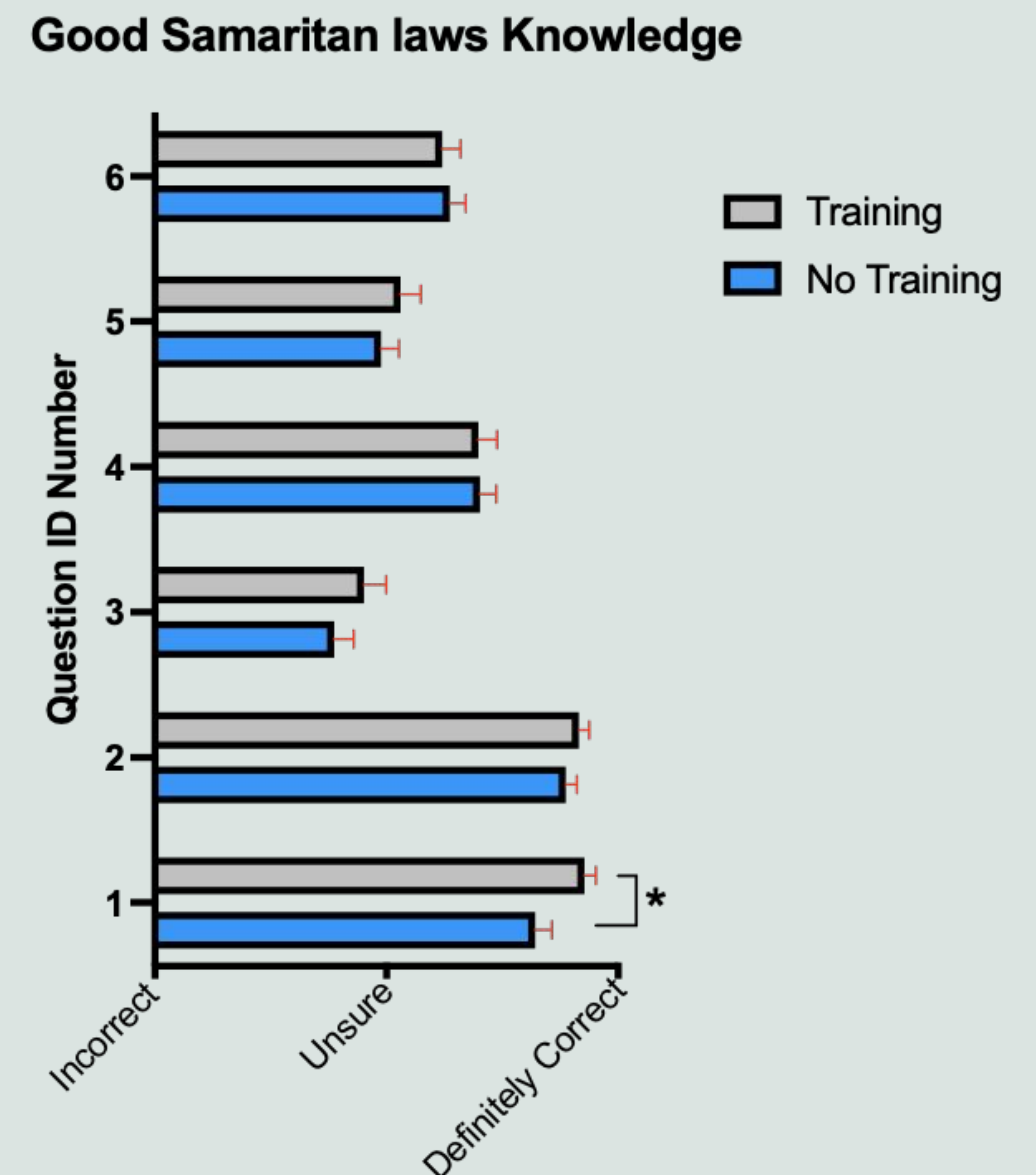


1. A person must obtain a prescription from their physician to purchase naloxone
2. It is only possible to get naloxone if you are personally at risk for an overdose
3. Anyone can obtain naloxone from a pharmacy, they just have to ask the pharmacist
4. Naloxone is available over-the-counter
5. It is illegal to carry naloxone without a prescription
6. If I use naloxone on someone outside of the hospital I could get sued if they died

Discussion

- Medical students interact with patients who use drugs throughout training so it is important they have a strong foundation of knowledge about harm reduction laws
- A brief 1-hour OOPRT resulted in
 - improvements in naloxone laws knowledge
 - inconsistent improvements in Good Samaritan laws knowledge
- These findings emphasize the need for targeted training for medical students regarding legislation that impacts treatment access for individuals with OUD

Results: Good Samaritan Laws



1. Good Samaritan Laws protect doctors who provide medical care outside of the hospital in emergency situations
2. Good Samaritan Laws protect any bystander who provides medical care outside of the hospital in emergency situations
3. If a person uses drugs and calls 911 they are protected against prosecution for ALL CRIMES under Good Samaritan Laws
4. Good Samaritan Laws protect people who use drugs from charges of POSSESSION when they call 911 during an overdose
5. Good Samaritan Laws protect people who use drugs from ANY DRUG-RELATED charges when they call 911 during an overdose
6. If a person shares their drugs with another person and that person overdoses, they can be charged with homicide

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Acknowledgements & Conflict of Interest

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