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The Honorable John P. Sarbanes
U.S. House of Representatives
2444 Rayburn House Office Building
Washington, DC 20515

Dear Representative Sarbanes:

On behalf of the physician and medical student members of the American Medical Association (AMA), I am writing to express our support for H.R. 3680, the “Co-Prescribing to Reduce Overdoses Act of 2015.” By creating a grant program to allow co-prescribing of opioid overdose reversal drugs, such as naloxone, H.R. 3680 would give patients at risk of addiction and overdose better access to these lifesaving drugs, thereby helping address the nation’s epidemic of opioid overdose deaths.

The AMA is working on a number of fronts to implement specific strategies to reduce prescription opioid misuse, abuse, overdose, and overdose deaths and strongly supports increasing access to naloxone, which is a safe and effective medication that reverses prescription opioid and heroin overdose and saves lives. Naloxone has no psychoactive effects and does not present any potential for abuse. The AMA has supported new state laws to put naloxone into the hands of appropriately trained first responders and friends and family members who may be in a position to help save lives. It is well documented that naloxone has saved thousands of lives across the nation, and the AMA encourages physicians to co-prescribe naloxone to their patients at-risk who are taking opioid analgesics.

Since the mid-1990’s, community-based programs have been offering naloxone and other opioid overdose prevention services to persons who use these drugs, their families and friends, and service providers (e.g., health care providers, homeless shelters, and substance abuse treatment programs). These services include education regarding overdose risk factors, recognition of signs of opioid overdose, appropriate responses to an overdose, and administration of naloxone. H.R. 3680 would help to expand access to naloxone and other lifesaving opioid overdose reversal drugs through federally qualified health centers, opioid treatment programs, and other entities deemed appropriate by the Secretary of the U.S. Department of Health and Human Services, expand training about co-prescribing of opioid overdose reversal drugs, and allow increased community outreach regarding the availability of such drugs.

The AMA applauds your leadership on this important public health issue, and looks forward to working with you to help move this legislation forward in Congress.

Sincerely,

James L. Madara, MD