

Vermont Senate Hearing

Decriminalization of Buprenorphine

4/29/21

Dear Senate Members,

I have been an operating room nurse for 42 years. Never in my career have I seen such an ongoing devastation of young people who have found themselves addicted to an opioid. I have personally witnessed babies born by c section who begin a very uncomfortable welcome to life by experiencing the intense pain of abrupt opioid withdrawal.

I have witnessed patients coming to the operating room with hands the size of boxing gloves from a dirty needle and injecting a substance known as heroin that is not sterile. When we lance these infections green odorous pus pours out. The patient then has to receive up to 10 days of a very expensive intravenous antibiotic.

I have witnessed more than one beautiful young person on our table as an organ donor. These organs are highly sought after due to the youth of the donor. When our staff witnesses this, we cry.

I have witnessed young people on 16 different drips, intubated and severely ill from vegetation on their heart, or endocarditis.

We must stop this epidemic of opioid dependence. It does not take very long for our bodies to become dependent on an opioid. This can happen in a matter of weeks, and with small doses such as oxycodone. A person who takes 10mg of oxycodone a day will become physically addicted in 6 weeks. Withdrawal begins within hours and the person becomes very ill, their body shakes and the cure is another pill.

I applaud Vermont's hub and spoke model. There are challenges to get treatment as we are a rural state. Oftentimes our folks live in poverty and having a reliable vehicle and gas money can be challenging. We can do more so that every Vermonter who needs a medical assisted treatment program can get it. Right now we are only reaching 3 out of 10 Vermonters, which is better than the national average of 2 out of 10.

This legislation which would decriminalize buprenorphine would not only help our folks caught up in addiction as we could then refer them to diversion and treatment. Without this legislation we are turning a blind eye to the needs of our fellow Vermonters who are the marginalized population, many living in poverty. These folks do not need another strike against them in terms of a felony arrest for the possession of a very safe narcotic alternative to heroin.

Buprenorphine is safe. It is extremely difficult to overdose on this medication, and once taken lasts for 24 hours. Therefore no other narcotic will be effective if taken. The reverse is true of heroin, the need for more heroin is multiple times a day, and it is not made in a pharmacy. Every time a young person buys heroin on the street it is a potential overdose.

My colleagues at Dartmouth Hitchcock, especially the anesthesia providers can safely care for a person on buprenorphine. A heroin user terrifies most of us as we have no idea what the patient may have "on board."

The present buprenorphine programs in Vermont require stringent drug testing. This test makes sure the recipient has buprenorphine in their urine so that the prescribed medication is taken and not diverted for cash.

I would like to thank the lawmakers for taking the time to discuss this important life saving legislation. A person on buprenorphine without a prescription is alive, and therefore able to be diverted to a treatment program while not having a felony record.

Thank you so much!

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