



Research Review

Drug-related Deaths among Recently Released Offenders: A Review of the Literature

KEY WORDS: *fatal overdose, illicit drug use, offenders, opiate users, drug-related deaths*

What we looked at

Severe substance abuse problems are highly prevalent among offenders. Substance abuse programs exist within institutions to address these issues however some offenders return to problematic illicit drug use upon release. Transition to the community may be a stressful period marked by emotional distress which can often trigger relapses. Drug overdose is an important and sometimes deadly consequence of relapse, and is especially problematic for the period immediately following release. The purpose of this review is to examine the recent international literature on drug-related deaths among recently released offenders, factors associated with fatal overdose and interventions for overdose prevention and management.

What we found

A recent international meta-analysis examining drug-related deaths within the first year post-release from prison shows that the initial two weeks following release have a three to eightfold increased risk for drug-related deaths compared to the subsequent ten weeks (Merrall et al., 2010). Overdoses may be the result of a decrease in tolerance to drugs following a sustained abstinence, drug purity variations, or a change in drug use behaviours and route of administration (Moller et al., 2010). Studies examining different drug-using populations found risk factors associated with fatal overdoses; these include opiate use, injection drug use, binge drug use, unstable housing, and polydrug use, especially a combination of depressant drugs (benzodiazepine, alcohol, opiates and other tranquilizers) (Darke, 2003; WHO, 2010). Studies documenting the circumstances under which overdoses occur have found that they are generally witnessed by friends, partners or family (Seal, 2005). Most overdoses are treatable, however regrettably bystanders do not always seek assistance out of fear of legal repercussions, perceived lack of need, or lack of phone access (Seal, 2005). Many countries have adopted community-based Naloxone distribution (a drug used to counteract the effects of opiate overdose) as a means for overdose prevention and management. Naloxone programs typically involve training on its use and effects along with a dose of medicine for use on peer victims. Investigations on the safety and feasibility of these programs have returned largely positive results (Seal, 2005; WHO, 2010). Since most overdoses are being witnessed in the community, offering training on life-saving measures provides invaluable knowledge to those most likely to make use of it. Ensuring accessibility to community methadone

maintenance programs for opiate dependent users is a key component to prevent fatal overdoses.

What it means

Offenders exhibiting severe drug use problems, specifically opiate users, are at a high risk for fatal overdose in the initial weeks following release. As part of CSC's priority to provide continuous care and safe transition into the community, offenders who are at high risk of overdose should be identified and targeted for intervention to prevent drug-related deaths. Overall, this review highlights the importance for practical and effective overdose prevention interventions for the period immediately before and after release, for instance safe-use education and prescription of Naloxone and the continuity of the community Methadone maintenance program. Studies examining the prevalence and characteristics of overdoses among Canadian offender could provide invaluable information on which offenders are most at risk in order to target these susceptible individuals. Additionally, CSC could benefit from a deeper look into innovative life-saving strategies for overdose prevention and treatment.

References

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