

This Heroin Treatment Is Saving Lives in Europe's Overdose Crisis. Two Doctors Are Bringing It to Canada Themselves.

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Hundreds more entrenched substance users in Canada could have access to [life-saving heroin-assisted treatment](#) by the end of the year thanks to decades of [research collaboration](#) between Canadian and European doctors, if the British Columbia health officials allow doctors to use it.

The first shipment of inhalable prescription heroin procured by [British Columbia's only non-profit pharmaceutical company](#) will arrive from Europe by the end of the month, a step Canadian experts and advocates are hailing as key to curbing the country's surging overdose crisis.

It will be enough for about 400 more people for 4 months, more than tripling the number of people who use substances with access to prescription heroin in Canada, all of whom are in B.C.

"People are dying so we have not stopped trying to get them what they need. The numbers are worse than ever in terms of overdose deaths," said Dr. Martin Schechter, co-founder of Fair Price Pharma, which agreed not to name its federally licensed European supplier.

Schechter and former B.C. Provincial Health Officer Dr. Perry Kendall formed Fair Price Pharma last year to take providing essential substance use medication into their own hands in the face of what Schechter called "entirely political" decisions not to fund [heroin-assisted treatment \(HAT\)](#).

"Our strategy in B.C. has not been successful. It really is time to do something different."

Fair Price Pharma's announcement comes after years of Canadian governments citing [cost and supply reasons against importing or manufacturing](#) pharmaceutical-grade heroin, known as diacetylmorphine or DAM, for a select group of entrenched substance users.

In the 20 months since COVID-19 sent Canada's overdose crisis into a tailspin, British Columbia has lost more than 2,500 people in what will be [consecutive record years for deaths](#), and the country's total death toll since 2016 surpassed 21,000. Vancouver has been the [hardest hit municipality in Canada](#), reporting at least 651 residents dying between January 2020 and June 2021.

Provincial government [efforts to expand prescription alternatives](#) to increasingly poisoned and fatal street drug formulations have stopped short of pharmaceutical heroin for entrenched users.

But HAT, including inhalable and more widespread injectable heroin, has seen astounding positive and stable results in Germany, Denmark, [Britain, the Netherlands](#) and Switzerland since the country [became the first to offer it in the 1990s](#). There are 1,400 patients throughout the EU, an additional 1,000 in Switzerland, and most DAM is supplied by Swiss manufacturer DiaMo Narcotics.

The treatment aims to separate patients from the toxic street supply and reduce the destabilizing effects of always trying to find one's next dose when the supply is criminalized. Patients receive two to five supervised injections or inhalable doses of prescription heroin per day, at a specialized clinic or with their family physician.

After their dosage has been adjusted and a relationship established with the clinician, they can begin to take up to three days' supply home with them.

The flexible treatment option has likely also contributed to Switzerland and the EU avoiding the pandemic-driven surge in overdose deaths that has battered people who use substances in Canada, two European doctors told The Tyee.

"One of the major factors why we have such high retention rates and why people enter so readily is because patients have a choice," said Dr. Marc Vogel, a substance use clinician in the Swiss canton of Thurgovia.

But right now, only about 130 patients in Canada, all in Vancouver and Surrey, B.C., receive heroin-assisted treatment, about 0.3 per cent of all 83,000 people estimated to be opioid-dependent in B.C. Only a dozen have been able to take the medication home since July, [a North American first](#).

And restrictive guidance and physician hesitance make detox spaces and even first-line treatments like methadone and Suboxone [difficult to access and stay on](#) for many substance users in B.C.

"We need at least 500 more slots in Vancouver alone," said Dr. Scott MacDonald, a substance use specialist at Vancouver's Crosstown Clinic, which delivers HAT in the Downtown Eastside neighbourhood. "We have over 300 names on our waitlist, and we get knocks on the door daily asking for care."

A [body of evidence from 25 years](#) of heroin-assisted treatment in Europe shows the medication helps entrenched substance users stabilize their lives, find reliable housing and work, and reduce the need to commit survival crimes.

In Switzerland and other EU member states, HAT usage rates have stayed stable at about five to eight per cent of substance users, of whom an estimated 95 per cent receive treatment in Switzerland.

"Critics were afraid it would be a honey-pot effect and people would flock to HAT but that has not been the case," said Vogel.

The European evidence and contact with researchers there helped Vancouver doctors get permission for two [landmark clinical trials](#) on injectable heroin and opioid treatments in the early 2000s, said MacDonald.

Those trailblazing trials, one of which was led by Schechter, confirmed the positive results seen in Europe with DAM and opioid hydromorphone. As a result, health care and policing costs were also

saved, by an estimated \$140,000 annually per participant compared to the average \$45,000 annually for one patient's treatment.

"That's why it's so mystifying, why the one injectable treatment that has been studied medically the most is the same one being omitted from the (provincial) guidelines in B.C.," said Schechter.

Other prescription alternatives like fentanyl patches are B.C.'s priority, a spokesperson for the Ministry of Mental Health and Addictions told The Tyee, based on guidance from physicians. The Tyee has also reached out to Health Canada and to DiaMo Narcotics for comment.

It is unclear how many lives could have been saved in Canada had HAT been accessible before the pandemic.

But forthcoming data from the European Monitoring Centre for Drugs and Drug Addiction indicates the pandemic did not have the same devastating effect on overdose deaths in European Union member states, including those with HAT, as it did on Canada.

"For the moment we haven't seen major increases in overdose deaths in 2020," said Dr. Isabelle Giraudon, a lead public health analyst at the EU agency which analyzes member state data to assist with coordinated European responses to the crisis.

"Being able to keep people on an accessible and attractive treatment option during lockdowns certainly helped."

Schechter and MacDonald hope offering inhalable HAT for the first time in Canada will help reach new pockets of users and connect them with health and social services.

"If there are hundreds of people accessing supervised consumption sites on a daily basis to inhale their substances, then clearly the current options are not attracting them or keeping them in care," said MacDonald.

Fair Price Pharma is ready to process the raw medication into four dosages to distribute to Vancouver clinics, who have already said they want to use it, at \$9 a dose — if the provincial government and health authority get on board.

"We're still waiting for the health care system to catch up with three decades of evidence, from Europe and from right here in Vancouver," said Schechter.

"All these life-saving treatments are sitting on the bench," said MacDonald.