

April 27, 2023

**Re: Support for LD 1364, An Act to Prevent Opioid Overdose Deaths by Establishing Safe Consumption Sites**

Good afternoon members of the Criminal Justice and Public Safety Committee,

My name is Kinna Thakarar, and I am here to **support LD 1364**. I am an infectious disease and addiction medicine physician researcher, and I have presented nationally and internationally on harm reduction and conduct health services research. I have also served on the Infectious Disease Society of America (IDSA)'s opioid use taskforce. Currently, I am leading a federally funded harm reduction grant based here in Maine.

Not only can people who use drugs experience overdoses, but they face complications from drug use such as HIV, viral hepatitis, and other serious infections such as endocarditis, a heart infection that can be fatal. As I have previously shared with this committee, **these infections are also costly**, the cost of treating endocarditis in Maine is approximately \$150,000 per patient, and last year, we saw over 120 patients with these types of serious infections my hospital [1]. In 2020, Maine some of had the highest rates of acute hepatitis B and C in the nation B [2] [3], many of these cases in the setting of drug use. These infections are costly, but also preventable with harm reduction strategies.

It is a recommendation of the IDSA, [4], and many other professional societies, that we expand access to safe consumption sites, I've had the opportunity to visit a site in Canada and have seen firsthand the incredible work the staff at these centers do to save lives and prevent infections. There has been rigorous scientific evidence to show that safe consumption sites are effective. We know that they **prevent overdose deaths – and notably, there has never been a fatal overdoses at a site**. They also **increase use of treatment, reduce practices associated with infections, reduce public drug use and syringe litter**, and are **cost-effective and reduce burden on emergency medical services** (5-11).

Rhode Island has authorized a two-year pilot program, And New York City has now also demonstrated that operating safe consumption sites in the U.S. is possible (12-13). With adequate support, I strongly believe we can implement safe consumption sites here in Maine.

Our current harm reduction grant has shown that when trust is built between patients, community partners, and clinicians, people can be successfully linked to care. We are fortunate to have syringe service program staff who have built these trusting relationships; what we need now is a safe place where people can receive the care they need and deserve. I understand that some people may have concerns about the bill, however, I would be more than willing to discuss a workable solution.

I also want to emphasize that there is **not one solution** to a problem as complex as the overdose crisis, but it is **imperative that we utilize as many tools as possible** in addressing this crisis. LD 1364 is an important step in expanding the tools in our toolbox here in Maine.

I'm available if any of you have any questions after this meeting. Thank you for all the work that you do.

Respectfully,



Kinna Thakarar, DO MPH

## References

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