



TEXT OF ONLINE SUBMISSION TO THE PHARMACEUTICAL BENEFITS ADVISORY COMMITTEE (PBAC) FOR NYXOID (NALOXONE NASAL SPRAY)

The Australian Injecting and Illicit Drug Users League (AIVL) is the Australian national peak organisation representing the state and territory peer-based drug user organisations and issues of national relevance for people with lived experience of drug use. AIVL's purpose is to advance the health of people who use/have used illicit drugs and for more than 20 years, AIVL has undertaken projects that seek to increase understanding and improve policy and program responses on issues that affect the lives of people who use drugs.

AIVL supports the listing of Nyxoid Nasal Spray on the Australian Pharmaceutical Benefits Scheme (PBS) as an additional means to prevent adverse consequences of non-fatal overdoses and, more significantly, reversal of otherwise fatal overdose.

The injectable form of Naloxone is currently listed on the PBS. Penington Institute's '*Saving lives: Australian naloxone access model*' report outlines the impact that Naloxone has had on reversing the effects of overdose, thus saving lives. Whilst effective, there is a need for Nyxoid Nasal Spray to also be listed as it removes risks and challenges associated with the use of injecting equipment.

Family and friends are often the first responders to an overdose. Training is carried out in some areas around the country on how to use the injectable version of Naloxone however, given that this involves the use of injecting equipment it can be a daunting experience for the uninitiated. Even with training, administering Naloxone via injection presents challenges and requires a degree of composure in a crisis situation – something which many lay people are not accustomed to, especially when it involves a loved one. A study by Eggleston, '*A Randomized Usability Assessment of Simulated Naloxone Administration by Community Members*', found that community members could more rapidly, and with greater success, administer nasal spray naloxone as opposed to the intramuscular injection.

Furthermore, the injectable form of Naloxone presents barriers to usage due to it needing to be provided in a 'kit' with numerous pieces of equipment. In order for Naloxone to be successfully administered, all components of the kit need to be accessible. If over time, pieces have been lost, removed or used for other purposes it renders the kit useless in a critical time of need. This problem is overcome with Nyxoid being a single complete piece within itself.

Importantly, Nyxoid Nasal Spray removes the risks associated with the use of injecting equipment. The components of the injectable Naloxone kit give rise to a risk of transmission of blood borne viruses, including Hepatitis C and HIV. Blood-to-blood contact could occur via the act of breaking open the glass ampoule or in the context of injecting. Additionally, once administered, Naloxone presents the dilemma of injecting equipment disposal whereas this is not a cause for concern with Nyxoid.

Prisons and custodial centres are high risk settings for overdose. For example, in the ACT no medical staff are available at the Alexander Maconochie Centre overnight. In the event of an overdose between these hours, due to corrections staff not carrying injectable Naloxone, the ambulance service must be called. Response time is approximately 20 minutes. In the situation of an overdose this could

mean the difference between life and death. If Nyxoid Nasal Spray were to be made widely available and accessible, corrections staff could carry the drug without concerns associated with injecting equipment and thereby administer the lifesaving drug easily and with minimal training. These benefits extend to other first responders such as law enforcement.

A PBS listing of Nyxoid would ensure a systems response to ensuring that Nyxoid is made available to and accessed by the community it is designed to aid. Due to its PBS listing, injectable Naloxone currently reaches its target group to a certain extent, predominately through community-based services and initiatives. Without PBS listing it will be difficult to achieve awareness and a sustained uptake of Nyxoid, which has the potential to make Naloxone more easily accessible and readily usable for a broader range of community members and first responders.

In summary, AIVL strongly supports the listing of Nyxoid on the PBS for the reasons outlined. Naloxone is a vital drug for reversing overdoses however, as outlined above the injectable method has limitations. Nyxoid provides an alternative for instances when the injectable version is unsuitable. Without a PBS listing though the cost will be prohibitive and be inaccessible to the community it serves to benefit.

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