

MANCHIN, BIPARTISAN GROUP OF SENATORS CALL ON CDC TO BETTER SUPPORT FORENSIC MEDICINE AS OVERDOSE DEATHS CONTINUE TO RISE

Bipartisan Letter Outlines the Toll of Addiction Epidemic on Coroners, Medical Examiners; Calls for More Resources to Better Support Forensic Medicine as They Stand on Front Line of Addiction Crisis

Washington, D.C. – U.S. Senator Joe Manchin (D-WV) joined a bipartisan group of Senators in urging the Centers for Disease Control and Prevention (CDC) to provide more resources and better support for forensic medicine practitioners as overdose deaths in the United States overwhelm medical examiners, coroners, and toxicologists. The letter presses CDC on how it plans to ensure the forensic medicine community has the tools and support it needs to collect and share data to better understand, predict, prevent, and treat the

addiction crisis. The Senators said in part: "We must do more to address the growing demands on the forensic medicine workforce. As overdose deaths continue to rise, these practitioners face a significant demand for autopsies and toxicology testing. Suspected overdose cases are not all the same and are not all based on a single drug or single piece of evidence, resulting in an enormous workload and tremendous physical and emotional strain for medical examiners, coroners, and toxicologists."

Senators Sherrod Brown (D-OH) Dianne Feinstein (D-CA), Mike Crapo (R-ID), Amy Klobuchar (D-MN), Jeanne Shaheen (D-NH), Richard Blumenthal (D-CT), Angus King (I-ME), Ed Markey (D-MA), Cory Booker (D-NJ),

Tammy Duckworth (D-IL), and Maggie Hassan (D-NH) also signed the letter.

According to CDC, there were more than 63,000 deaths in the U.S. due to drug overdoses, five times higher than the rate in 1999. The letter outlines the strain of increased overdose deaths on the forensic medicine community, as well as importance of collecting data on overdose deaths.

Full text of the letter can be found here and below:

Dear Dr. Redfield
Congratulations on your recent appointment as Director of the Centers for Disease Control and Prevention (CDC), and thank you for your commitment to bringing our nation's opioid overdose epidemic "to its knees." We value CDC's work

in addressing this public health crisis and write to ask for your continued support for forensic medicine practitioners, including medical examiners, coroners, and toxicologists, who can play a key role in collecting data and responding to this crisis, but who lack the resources and support necessary to do so.

According to CDC's data, drug overdoses caused over 63,600 deaths in the United States in 2016 – five times the number of overdose deaths in 1999.[1] Drug overdoses continue to increase across the entire United States population – spanning race, gender, and age. Timely and accurate data, such as those collected by CDC, are vital for making important policy decisions by helping to identify trends and prioritize resources.

As you may be aware, the opioid overdose epidemic has not only taken a devastating toll on the health of our nation but has also overwhelmed the capacity of our forensic medicine community. We appreciate CDC's support for initiatives like the Enhanced State Opioid Overdose Surveillance (ESOOS) program, which provides funding to 32 states and the District of Columbia to improve the tracking of opioid-involved overdoses, both fatal and nonfatal. Notably, portions of ESOOS funding directly support medical examiners and coroners, including comprehensive toxicology testing. By allocating funding to forensic medicine services, the ESOOS program provides valuable support for all of our public health professions working on the grave frontlines of the drug overdose crisis.

However, we must do more to address the growing demands on the forensic medicine workforce. As overdose deaths continue to rise, these practitioners face a significant demand for autopsies and toxicology testing. Suspected overdose cases are not all the same and are not all based on a single drug or single piece of evidence, resulting in an enormous workload and tremendous physical and emotional strain for medical examiners, coroners, and toxicologists. In addition, many states face physical resource constraints, such as inadequate refrigerated storage for bodies, as well as insufficient laboratory capacity for quick turnaround of testing. When these professionals are forced to perform an unreasonably high number of autopsies or must wait weeks to months for confirmatory testing, we jeopardize accuracy and compromise a valuable source of data from the frontlines of this epidemic.

Furthermore, we recognize that while the nation is currently plagued by the drug overdose epidemic, the next major disease outbreak may not be far behind. In addition to their vital role in addressing drug overdoses, the forensic medicine community can provide additional public health information by identifying novel infectious agents and detecting acts of bioterrorism. A 2013 survey of medical examiners and coroners conducted by CDC found that 97 percent of respondents indicated an interest in a medical examiner-based surveillance system for infectious diseases, though commonly cited barriers were inadequate funding, resource, personnel and infrastructure.[2] There is an urgent need to better support forensic medi-

cine practitioners in the United States, and we believe that CDC can help fulfill this function. We kindly request your written response to the following questions:

1. In the past, CDC has issued workforce assessment reports such as the 2009 report titled "Strategic Options for CDC Support of the Local, State, and Tribal Environmental Public Health Workforce".[3] Is the agency willing to develop a similar workforce assessment and accompanying strategy for supporting the forensic medicine workforce?

2. Understanding that forensic medicine issues span the realms of public health and law enforcement, we recognize the need for collaboration between CDC and other agencies, such as the Department of Justice, in order to comprehensively address these issues. How can CDC play a role in strengthening interagency initiatives to support the forensic medicine workforce?

3. CDC previously ran a program known as the "Medical Examiner Coroner Information Sharing Program" from 1986-2004, which was terminated during a reorganization of the agency. Can you please describe any gaps left by the termination of this program? How can CDC better support information sharing and surveillance by forensic medicine practitioners?

We appreciate your full attention and responsiveness to this urgent and important matter. We look forward to working with you to better support the forensic medicine community and in turn promote national public health.

Gov. Justice requests federal disaster declaration for recent flooding

CHARLESTON, WV – Flooding, landslides, mudslides and wind damage in eight counties, from severe storms during the week of Memorial Day, have prompted Gov. Jim Justice to seek a major disaster declaration from President Donald J.Trump.

Gov. Justice had declared a State of Emergency for Berkeley, Grant, Hampshire, Hardy, Jefferson, Mineral, Morgan and Pendleton counties on June 4, after significant rainfall that started May 28.

Submitted to the Federal Emergency Management Agency, the letter from Gov. Justice requests Public Assistance for those eight counties and Hazard Mitigation Assistance statewide.

The joint preliminary damage assessment for this event identified more than \$4.5 million in eligible costs and damage, Gov. Justice told the president. Hampshire County was at the center of the affected area with over 40 percent of the verified damage, his letter said. Gov. Justice noted that 2018 has been marked by a series of flooding events in the Mountain State, with President Trump issuing a major disaster declaration for 20 counties in response to major flooding in February.

"Fortunately, this most recent disaster did not result in any reported injuries or deaths," Gov. Justice wrote. "However, this disaster could have had far more tragic consequences had it not been for the local responders and National Guard personnel who effected 18 swift water rescues."

Public Assistance aids state and local governments as well as certain private nonprofit organizations with debris removal, emergency protective measures and the repair or replacement of disaster-damaged facilities. Gov. Justice requested all available categories of Public Assistance for the eight counties.

Governor Justice told the president that the resources expended included road closures, evacuations and rescues by local, state and volunteer responders; debris removal and emergency measures by the state Division of Highways; stream evaluations by the West Virginia Conservation Agency; swift-water rescues and liaison deployments by the National Guard; and overall response coordination by the state Division of Homeland Security and Emergency Management.

Hazard Mitigation Assistance helps to fund measures meant to prevent or reduce long-term risk posed by natural hazards to life and property.

"This disaster is an unfortunate continuation of the series of storms that have continued to plague portions of West Virginia," Gov. Justice wrote, adding that "I believe this event created conditions that are beyond local and state capability to effectively respond."