

## Availability increased with approval of naloxone as OTC medication

August 3 2024, by Elana Gotkine



Recently, there was an increase in availability of naloxone after it was approved to be sold as an over-the-counter (OTC) medication, according to a study published online July 26 in *JAMA Health Forum*.



Grace T. Marley, Pharm.D., from the UNC Eshelman School of Pharmacy in Chapel Hill, North Carolina, and colleagues examined whether the accessibility and cost of <u>naloxone</u> at North Carolina community pharmacies changed after OTC naloxone became available. Data were collected from shoppers at 192 pharmacies in a longitudinal survey study. Data were collected from March to April 2023 (before OTC naloxone could be sold at pharmacies) and from November 2023 to January 2024 (after naloxone was sold at pharmacies).

The researchers found that from before to after naloxone availability at pharmacies, there was an increase in same-day naloxone availability from 42.2 to 57.8 percent. The mean quoted out-of-pocket cost decreased from \$90.93 to \$62.67 pre- to post-OTC availability. In both the pre- and post-OTC phases, mean costs were significantly higher at independent pharmacies than chain pharmacies (\$109.47 versus \$86.40 and \$77.59 versus \$57.74, respectively). In the pre-OTC phase, there was no difference seen in <u>out-of-pocket costs</u> by urbanicity, while mean costs were significantly higher at suburban and rural versus urban pharmacies in the post-OTC phase (\$88.67 and \$65.43, respectively, versus \$53.58).

"This study found elevated out-of-pocket costs for naloxone at independent pharmacies compared with chain pharmacies and in rural and suburban pharmacies compared with urban pharmacies," the authors write. "Overall, future work should evaluate OTC naloxone pricing strategies at pharmacies and evaluate methods to increase its same-day availability."

**More information:** Grace T. Marley et al, Naloxone Availability and Cost After Transition to an Over-the-Counter Product, *JAMA Health Forum* (2024). DOI: 10.1001/jamahealthforum.2024.1920



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