February 23, 2018

The Honorable Daniel K. Elwell  
Acting Administrator  
Federal Aviation Administration  
800 Independence Avenue SW, Room 1010  
Washington, DC 20591

Dear Administrator Elwell:

Opioid overdose deaths continue to increase in the United States, with six out of ten drug overdose deaths now involving an opioid. Passenger medical emergencies have and will continue to include opioid overdoses. Unfortunately, passengers may die from opioid overdoses on airplanes from the sheer lack of access to naloxone. Therefore, we urge the Federal Aviation Administration (FAA) to utilize its existing authority immediately to issue regulations requiring that the Emergency Medical Kits (EMK) carried by passenger airlines include naloxone nasal spray to treat opioid overdoses.

Naloxone is a lifesaving medication used for more than 40 years as an emergency treatment to rapidly reverse the life-threatening effects of opioid overdose. Today, naloxone can be delivered by an FDA-approved nasal spray which quickly delivers a 4 mg dose of naloxone in a single concentrated 0.1 ml nasal spray from a compact, ready-to-use device. Naloxone nasal spray can be readily administered when an opioid overdose occurs or is suspected. It does not require assembly, use or disposal of needles, or more than a few minutes' training. Naloxone nasal spray has become widely available and utilized by law enforcement officers as well as basic life support (BLS) providers in pre-hospital settings. Naloxone nasal spray does not replace urgent medical care, but a single dose may revive someone for as much as 20 minutes. Depending on the opioid used, multiple doses of naloxone might be necessary to sustain breathing until medical care can be secured.

There is broad consensus across the medical, drug advocacy and government communities that increased access to naloxone is a critical component of the emergency treatment of opioid overdose. Currently, however, naloxone is not a standard on-board medication in commercial aviation, which renders individuals at a higher risk of death by overdose in the air than on the ground. The Aviation Medical Assistance Act of 1998 (P.L.105-170, 49 U.S.C. 44701) directs the FAA to review the list of required on-board medications. Given the opioid epidemic that our nation is experiencing and the availability of an effective and low cost life-saving intervention already being used by first responders throughout the U.S., we request the FAA to use its statutory authority to:
1) Conduct a review of all required on-board medications from AC No. 121-33B and revise that list to include in the Emergency Medical Kit (EMK) a minimum of four doses of naloxone nasal spray for all commercial flights.
2) Provide Flight Attendants with the necessary training to administer naloxone as first responders.

We look forward to your reply. If you have any questions please direct them to Stephen Schembs, Government Affairs Director, Association of Flight Attendants-CWA at sschembs@afanet.org or (202) 434-0568.

Thank you for your consideration.

The Association of Flight Attendants-CWA, AFL-CIO

Adrian S Hooper Jr., Choopers Guide, the Chooper’s Foundation

Broken No More/GRASP: Grief Recovery After a Substance Passing

Facing Addiction with the NCADD

Hazelden Betty Ford Institute for Recovery Advocacy

Learn to Cope, Taunton, MA

Live4Lali

Man in Recovery Foundation

Massachusetts Society of Addiction Medicine

National Safety Council, Washington, D.C.

PATH: Positive Acceptance Through Healing

The Center for Motivation and Change, New York, N.Y.

The National Center on Addiction and Substance Abuse

Tracey Helton Mitchell, Author of "The Big Fix: Hope after Heroin"

Victoria Allendorf, Executive Director IHH Inc. www.ihateheroin.org