



Prescription Drug Abuse

Wednesday, November 6 at 1:00 p.m. Eastern

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Efforts to Reduce Prescription Drug Abuse

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Center for Substance Abuse Treatment

Substance Abuse Mental Health Services Administration

U.S. Department of Health & Human Services



Grantmakers In Health
November 6, 2013





Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover

History of Prescription Drug Abuse

→ Prescription Drug Abuse is not a new phenomenon:

- In 1980, the Carter Administration convened a White House Conference on Prescription Drug Abuse to focus attention on the problem.
- From 1981 to 1991, the American Medical Association hosted a national Steering Committee on Prescription Drug Abuse that brought together federal agencies and private sector organizations to develop common strategies and programs.

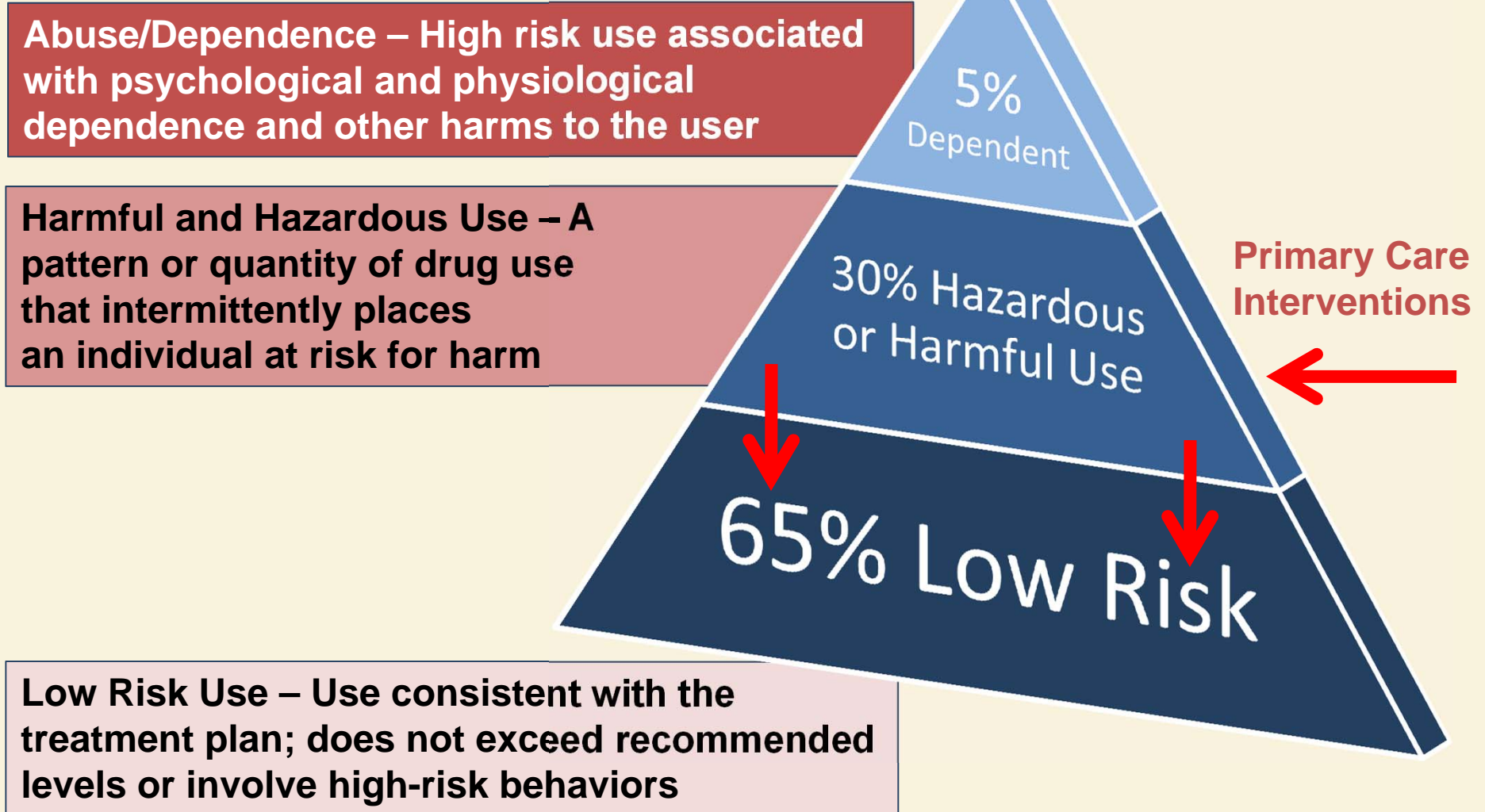
History of Prescription Drug Abuse



→ **The problem has re-emerged in recent years and involves more individuals today than in the past**

- More drugs are available and are used by a larger percentage of the population than in the past, expanding their availability to family members and others.
- New technologies makes it easier to forge prescriptions and otherwise thwart protections built into the drug distribution system.

Patterns of Prescription Drug Misuse

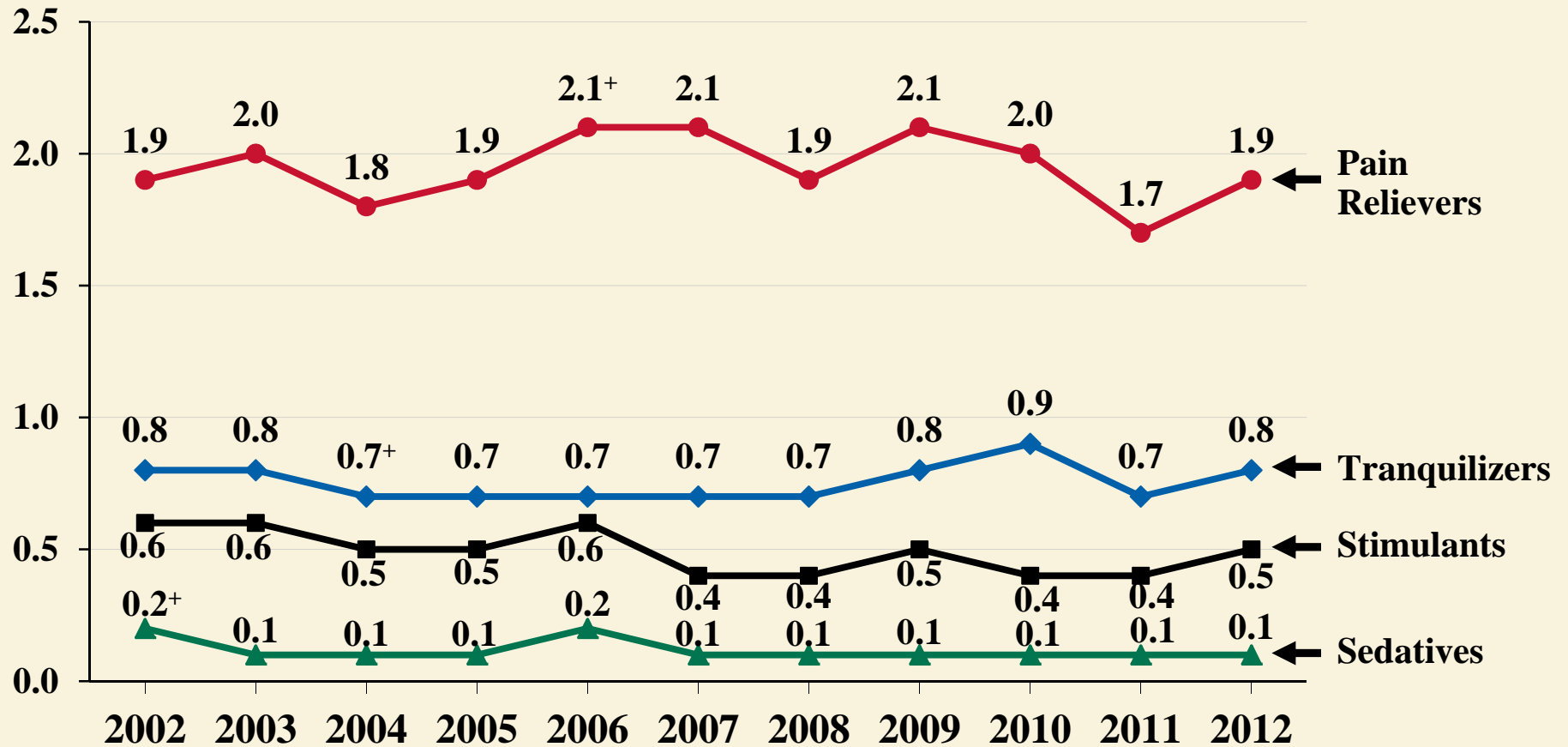


Emerging Patterns and Prognosticators



Past Month Nonmedical Use of Psychotherapeutic Drugs Among Persons >12 years old

Percent Using in Past Month



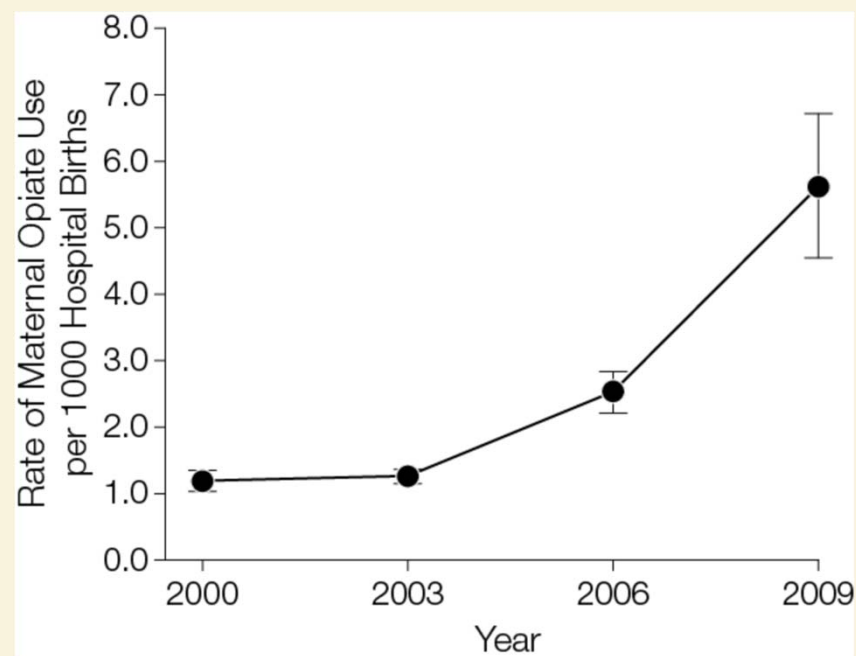
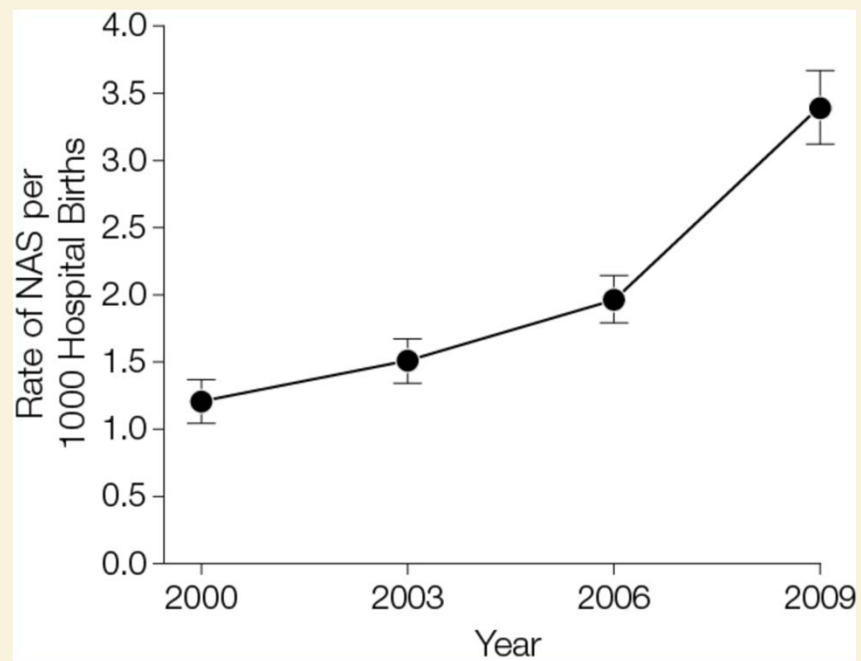
NSDUH 2012

⁺ Difference between this estimate and the 2012 estimate is statistically significant at the .05 level.

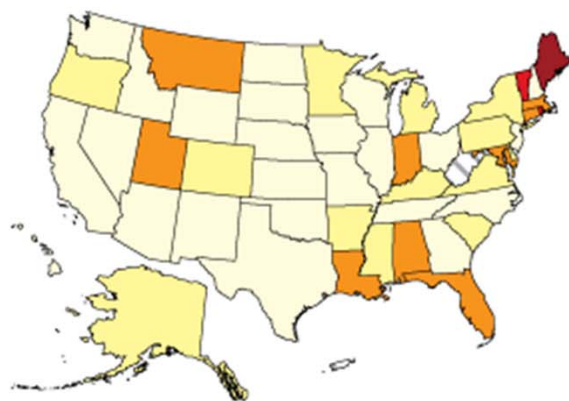
Neonatal Abstinence Syndrome

Neonatal Abstinence Syndrome and Associated Health Care Expenditures: United States, 2000-2009 Stephen W. Patrick, MD, MPH, MS, et al

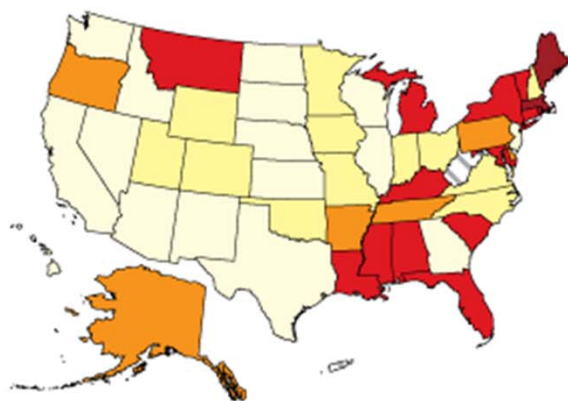
JAMA. 2012;307(18):1934-1940. doi:10.1001/jama.2012.3951



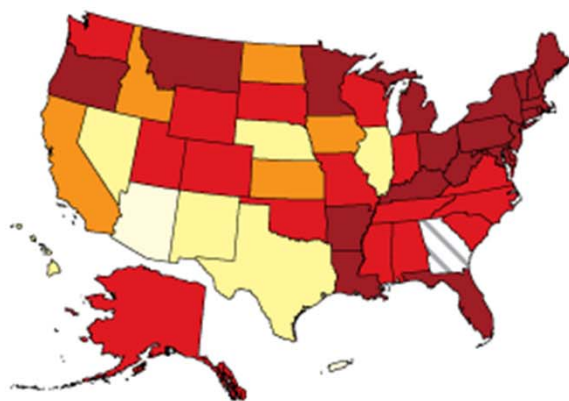
Opiate-Related Admissions to SUD Treatment (Rates per 100,000 population ≥ 12 ; non-heroin)



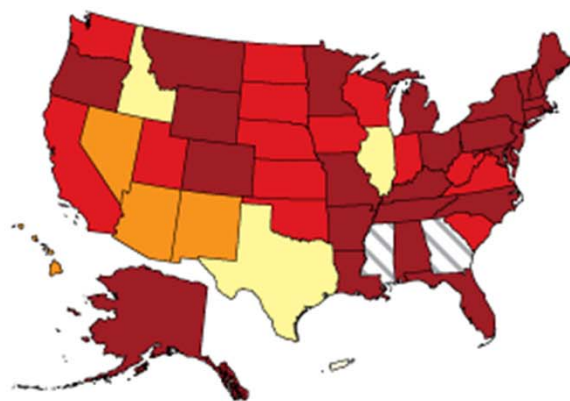
2000
(range 1 – 71)



2002
(range 3 – 109)



2008
(range 1 – 394)



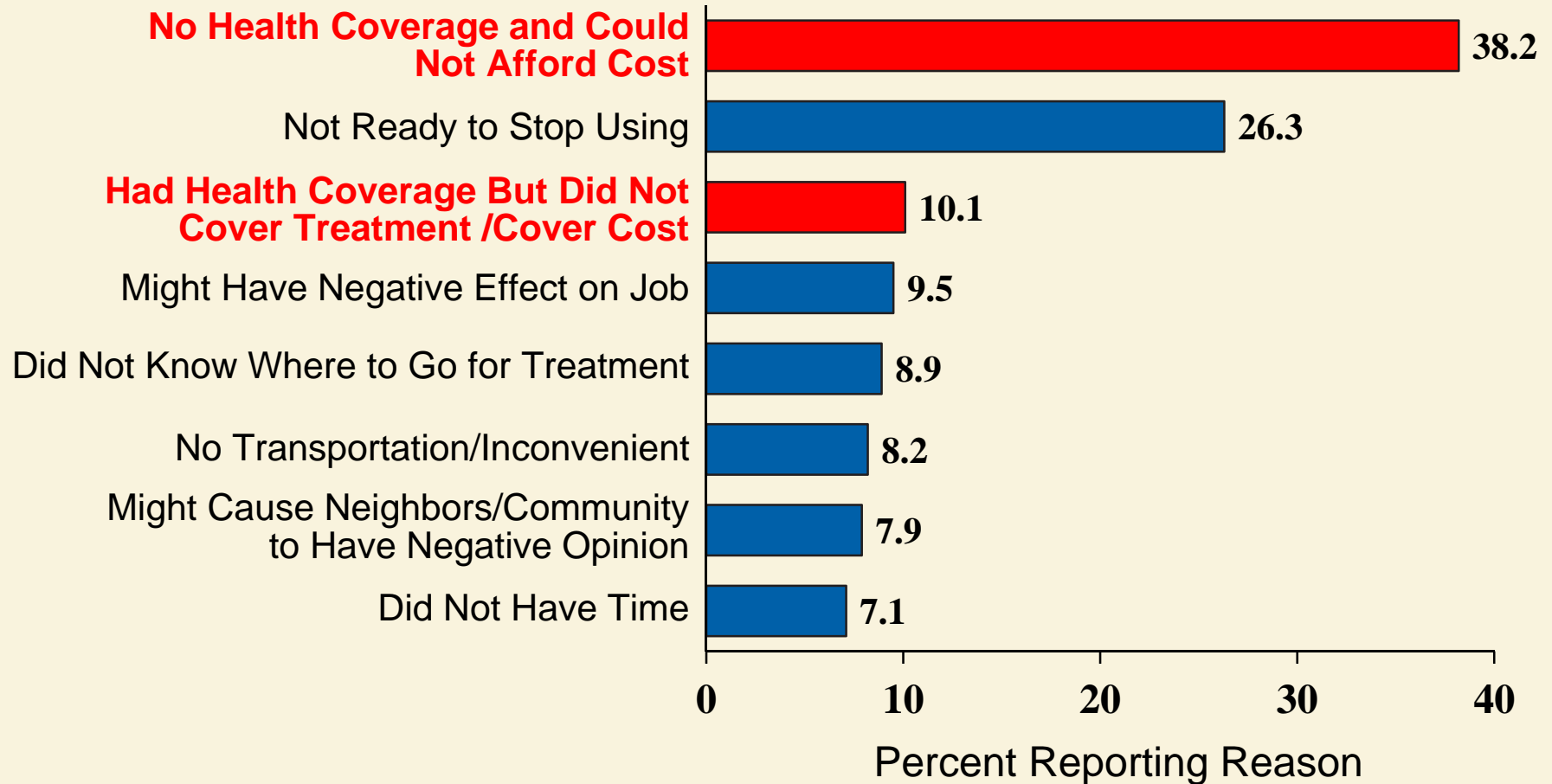
2010
(range 2 – 354)



→ Rate for opiates was 400 percent higher in 2010 than in 2000.

→ Rates increased in every year from 2000 through 2010.

Reasons for Not Receiving Treatment Among Persons ≥ 12 years Old Who Needed & Made an Effort to Obtain Treatment (2009-2012 Combined)



Strategies for Reducing Rx Drug Abuse

→ Partnerships are important:

- **Federal government:** ONDCP, HHS, Surgeon General, CDC, FDA, NIDA and SAMHSA
- **State governments:** NGA, ASTHO, coalition of states with Prescription Drug Monitoring Programs
- **Private-sector organizations:** ASAM, AAAP, AOAAM, CLAAD, CVS and other chain pharmacies

Strategies for Reducing Rx Drug Abuse

→ Common themes of current programs, as defined in the National Drug Control Strategy, are based on both research and experience. They include:

- Prevention and early intervention
- Prescriber and patient education
- Enhanced treatment access and quality
- Overdose prevention and rapid intervention
- Appropriate regulation

SAMHSA's Actions to Reduce Rx Drug Abuse

→ Prevention and Early Intervention:

- SAMHSA supports programs to promote the use of **Screening, Brief Intervention and Referral to Treatment (SBIRT)**, an evidence-based practice that involves:
 - Screening individuals in primary care settings (including hospital ERs) for risk of substance abuse
 - Helping patients accept the need for treatment
 - Helping patients obtain appropriate treatment services.

SAMHSA's Actions to Reduce Rx Drug Abuse

Prevention and Early Intervention: With SAMHSA support, **SBIRT** services are offered in medical and other community settings across the U.S. Outcomes data show that:

Of individuals who screened positive...	At intake	At 6-month follow-up	Change
No substance use	11.6%	32.1%	↑ 177.8%
Being employed	41.8%	45.9%	↑ 9.8%
Being housed	56.2%	61.1%	↑ 8.6%
No arrests	82.4%	95.4%	↑ 15.7%
Being socially connected	68.9%	70.7%	↑ 2.6%

Source: SAMHSA, SAIS, data collected through 08/02/10

SAMHSA's Actions to Reduce Rx Drug Abuse

→ Prescriber and Patient Education:

- SAMHSA supports **live and online CME courses** on prescribing opioids for chronic pain:
 - To date, full-day live courses have been offered at 54 sites in 31 states, reaching more than 9,000 physicians and other health professionals.
 - Online CME courses are offered at no charge through a partnership with Boston University School of Medicine (www.opioidprescribing.com). To date, more than 30,000 physicians and other health professionals have completed at least one course module.

SAMHSA's Actions to Reduce Rx Drug Abuse



- **Prescriber and Patient Education:** A 2012 evaluation of the prescribing courses found that:
 - In evaluations completed by course participants, the average overall score has been 6.0 on a scale of 1 to 7, with 7 designating a “superior” learning experience.
 - In a follow-up survey, more than 76% of participants in the live and online courses reported that they had changed the way they practice as a result of what they learned in a course.

SAMHSA's Actions to Reduce Rx Drug Abuse

→ Prescriber and Patient Education:

- SAMHSA supports the **Physician Clinical Support System for Opioids (PCSS-O)**, through which practicing physicians can receive free mentoring from experts on clinical topics such as prescribing opioids for chronic pain and office-based treatment of opioid-dependent patients (www.pcass-o.org)
- SAMHSA has published information for patients and the public on prescription drug abuse and its treatment (www.samhsa.gov).

SAMHSA's Actions to Reduce Rx Drug Abuse

→ Enhanced Treatment Access and Quality:

- SAMHSA has published **Treatment Improvement Protocols (TIPs)** on treatment with methadone, buprenorphine, and other drugs, as well as on treating chronic pain in persons with substance use disorders (www.samhsa.gov).
- SAMHSA is developing a new **Opioid Brief Guide** for primary care physicians on how to use FDA-approved medications to treat opioid addiction in the medical office.

SAMHSA's Actions to Reduce Rx Drug Abuse

→ Enhanced Treatment Access and Quality:

- SAMHSA supports the **Physician Clinical Support System for Buprenorphine (PCSS-B)**, through which practicing physicians can receive free mentoring from experts on office-based treatment of opioid addiction with buprenorphine (www.pcspb.org).
- For the PCSS-B, SAMHSA is developing a new **curriculum** for use in training additional physicians to use buprenorphine, thus increasing overall treatment capacity.

SAMHSA's Actions to Reduce Rx Drug Abuse

→ Overdose Prevention and Rapid Intervention:

- SAMHSA's new **Opioid Overdose Toolkit** contains five modules, each customized to the specific needs of a target audience:
 - Paramedics, EMS, and other first responders
 - Physicians and other opioid prescribers
 - Patients who are prescribed opioids for pain
 - Overdose survivors and their family members
 - Community members.

SAMHSA's Actions to Reduce Rx Drug Abuse

The image shows the cover of the SAMHSA Opioid Overdose Toolkit. The cover has a blue and teal gradient background. At the top, it says "SAMHSA Opioid Overdose TOOLKIT" in white text. At the bottom, there are two logos: the SAMHSA logo on the left and the SAMHSA logo with the text "Substance Abuse and Mental Health Services Administration" on the right.

SAMHSA
Opioid Overdose
TOOLKIT

Opioid Overdose Toolkit:

- In practical, plain language, the kit outlines steps to take to prevent and treat opioid overdose (including the use of naloxone)
- It also identifies important resources for patients, families, prescribers, and communities.
- The kit is available at no charge at

<http://store.samhsa.gov/product/Opioid-Overdose-Prevention-Toolkit/SMA13-4742>

SAMHSA's Actions to Reduce Rx Drug Abuse

- **Appropriate State Oversight:** SAMHSA provided technical and financial support to the Federation of State Medical Boards (FSMB) updating model policies:
 - **Model Policy on DATA 2000 and the Treatment of Opioid Addiction in the Medical Office** (adopted in January 2013)
 - **Model Policy on the Appropriate Use of Opioid Analgesics in the Treatment of Chronic Pain** (adopted in July 2013)
- SAMHSA also is supporting **training courses** to be offered by FSMB and state Medical Boards on the new policies.

SAMHSA's Actions to Reduce Rx Drug Abuse

→ State Prescription Drug Monitoring Programs:

- SAMHSA implemented the **NASPER** to expand the use of state Prescription Drug Monitoring Programs 2005-2010
- SAMHSA has supported **PDMP-EHR Integration and Interoperability Expansion Grants** (2012-13) to:
 - Improve real-time access to PDMP data by integrating PDMPs with existing EHR technologies (to link with hospital ERs, outpatient facilities, retail pharmacies, etc.)
 - Increase the interoperability of PDMPs across state lines.
 - 9 states are funded, as well as an evaluation by CDC.

SAMHSA's Actions to Reduce Rx Drug Abuse



→ Results:

- A comparison of the combined data for 2009-2010 with the combined data for 2010-2011 show a reduction in prescription drug misuse among persons over age 12 in 10 States.
- These findings suggest that efforts to reduce prescription drug abuse are making progress, although such progress has not been uniform across all States.

Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (January 8, 2013). *The NSDUH Report: State Estimates of Nonmedical Use of Prescription Pain Relievers*. Rockville, MD.

SAMHSA's Actions to Reduce Rx Drug Abuse

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Center for Substance Abuse Treatment

**Substance Abuse and Mental Health Services Administration
(SAMHSA), Department of Health and Human Services**

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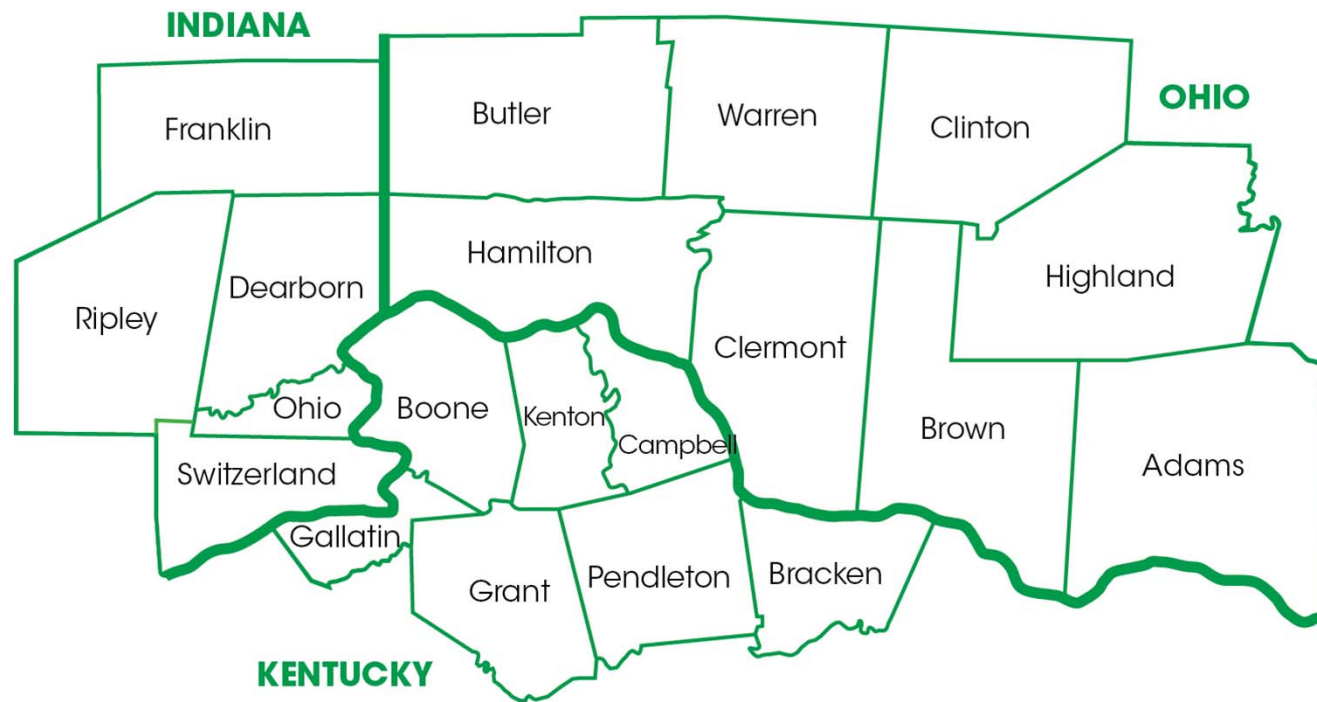
INTERACT FOR HEALTH

A Catalyst for Health and Wellness

Response to the Opioid Epidemic

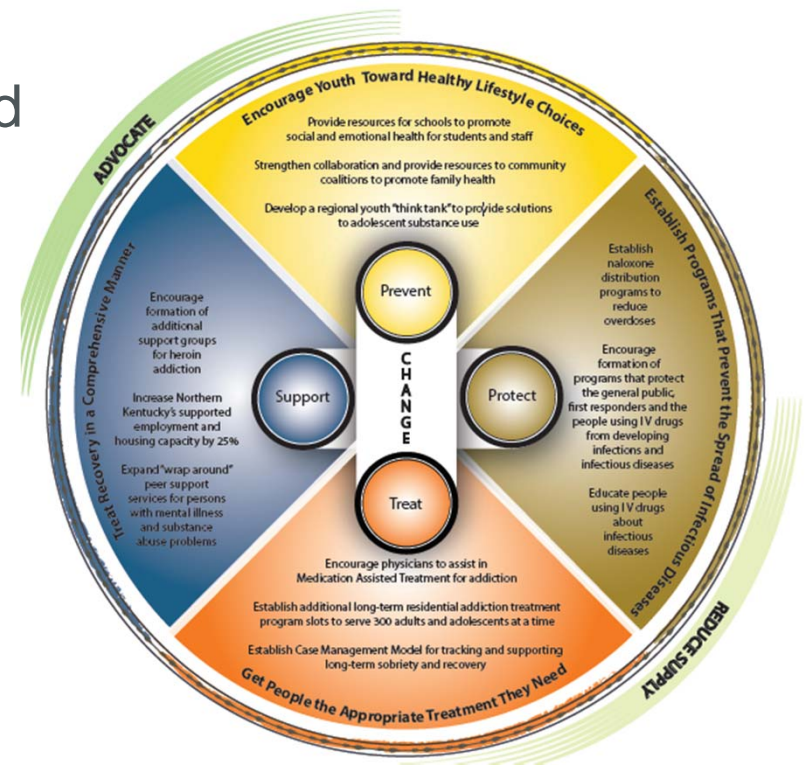
November 6, 2013

Our Service Area



Being a catalyst

- Prospecting for issues
- Convening local stakeholders and experts
- Partnering with community task forces and coalitions
- Focusing on strategic efforts
- Stepping back and letting others lead
- Helping the systems stretch



Grant Making

- Medication-assisted treatment
- Maternal Addictions Program
- Naloxone Distribution through addiction treatment providers
- Syringe Exchange



Policy and Advocacy



- Educating health departments
- Educating business and community leaders
- Educating policy makers
- Educating local advocates

Contact Information



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CLINTON HEALTH MATTERS INITIATIVE

Grantmakers in Health
Presentation
11-06-13



HEALTH MATTERS

ACTIVATING WELLNESS IN EVERY GENERATION



CLINTON HEALTH MATTERS INITIATIVE

CLINTON FOUNDATION'S PURPOSE & APPROACH

The Clinton Foundation helps transform lives and communities from what they are today to what they can be by creating partnerships of great purpose to deliver sustainable solutions and empower people to live better lives.



CLINTON HEALTH MATTERS INITIATIVE

WHAT WE DO

We create partnerships of great purpose to deliver sustainable solutions and empower people to live better lives in **4 key areas**:

GLOBAL HEALTH

HEALTH &
WELLNESS

ENVIRONMENT

ECONOMIC
DEVELOPMENT



CLINTON HEALTH MATTERS INITIATIVE

CLINTON FOUNDATION'S IMPACT

5 MILLION PEOPLE

in developing countries benefitting from lifesaving HIV/AIDS medicine at reduced prices

4.5 MILLION TREES

planted through community reforestation projects in Malawi and Rwanda



30 MILLION STUDENTS

have access to healthier school meals at more affordable prices

4,200 JOBS

created by more than 716 microenterprises in Colombia

400 MILLION LIVES IN OVER 180 COUNTRIES

have been improved through more than 2,300 CGI commitments valued at \$69.2 billion



CLINTON HEALTH MATTERS INITIATIVE



IN NOVEMBER, THE CLINTON HEALTH MATTERS
INITIATIVE WAS LAUNCHED

PREVENTABLE DISEASE IN THE UNITED STATES

70%

of U.S. adults have already been
diagnosed with a chronic disease

75%

of health care costs are currently
spent on treating these conditions



\$127 BILLION

in lost work days by individuals associated with chronic health diseases*

CLINTON HEALTH MATTERS INITIATIVE



WHAT WE DO

- 1) Activate individuals to lead healthier lives by providing a platform to access local, scalable solutions for healthy change agents
- 2) Advance community health by closing gaps in health disparities and focusing efforts in underserved areas
- 3) Engage the private sector through pledges to improve the health and well-being of the nation

CLINTON HEALTH MATTERS INITIATIVE



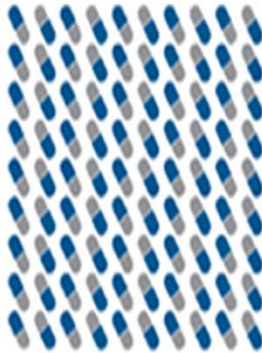
THE NATION'S FASTEST GROWING DRUG PROBLEM



In the U.S.
1 person
DIES
every **19** mins

from a drug overdose, a tragedy driven largely by the misuse of prescription painkillers.³

Between 1993 and 2005
the proportion of college students
abusing prescription drugs
went up dramatically:



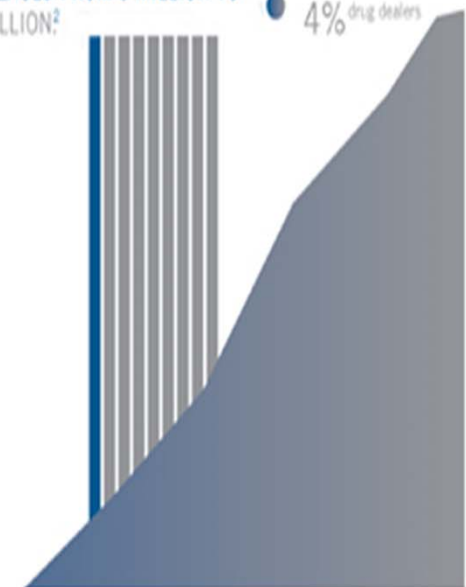
BETWEEN 1991 AND
2010 CONSUMPTION OF
PRESCRIPTION STIMULANTS
INCREASED FROM 5 MILLION TO
45 MILLION²

6600

people per day begin taking
prescription drugs for
non-medical use⁴

PILL
SOURCES⁶
72%
from
friends
and family

17% prescribed
by one doctor
7% other sources
4% drug dealers



Source: Sumall Foundation

CLINTON HEALTH MATTERS INITIATIVE



ON MAY 6TH, PRESIDENT CLINTON ANNOUNCED OUR
WORK



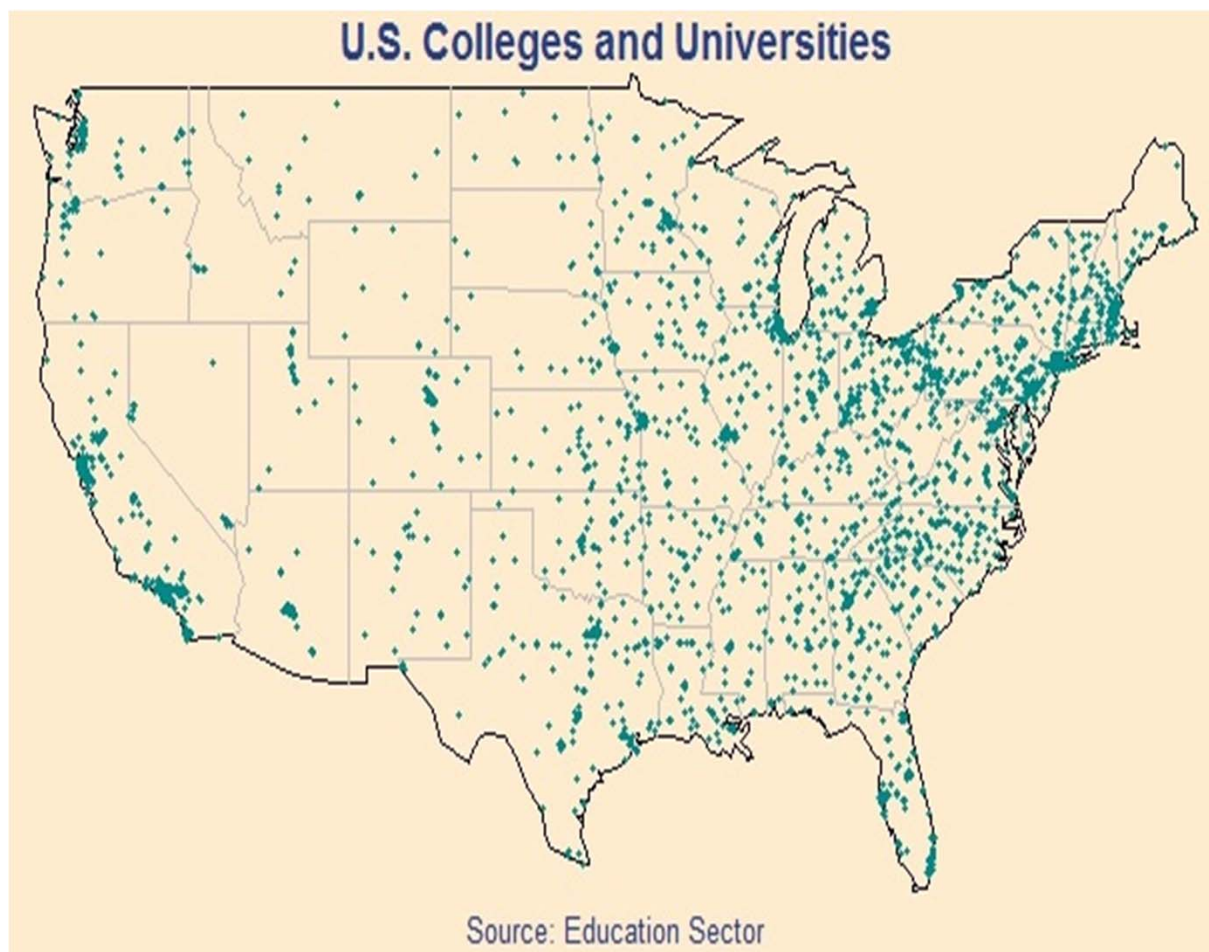
CLINTON HEALTH MATTERS INITIATIVE

OVER THE NEXT 5 YEARS, THE CLINTON HEALTH MATTERS INITIATIVE HAS MADE A COMMITMENT TO ...

- Put the United States on a path to eliminating the chronic prescription drug abuse challenge by the beginning of the next decade, and helping nonmedical prescription drug users get on a safer, healthier path in life.
- Plan to save over **10,000 lives** by cutting in half the number of young people who misuse prescription drugs for the first time.



CLINTON HEALTH MATTERS INITIATIVE

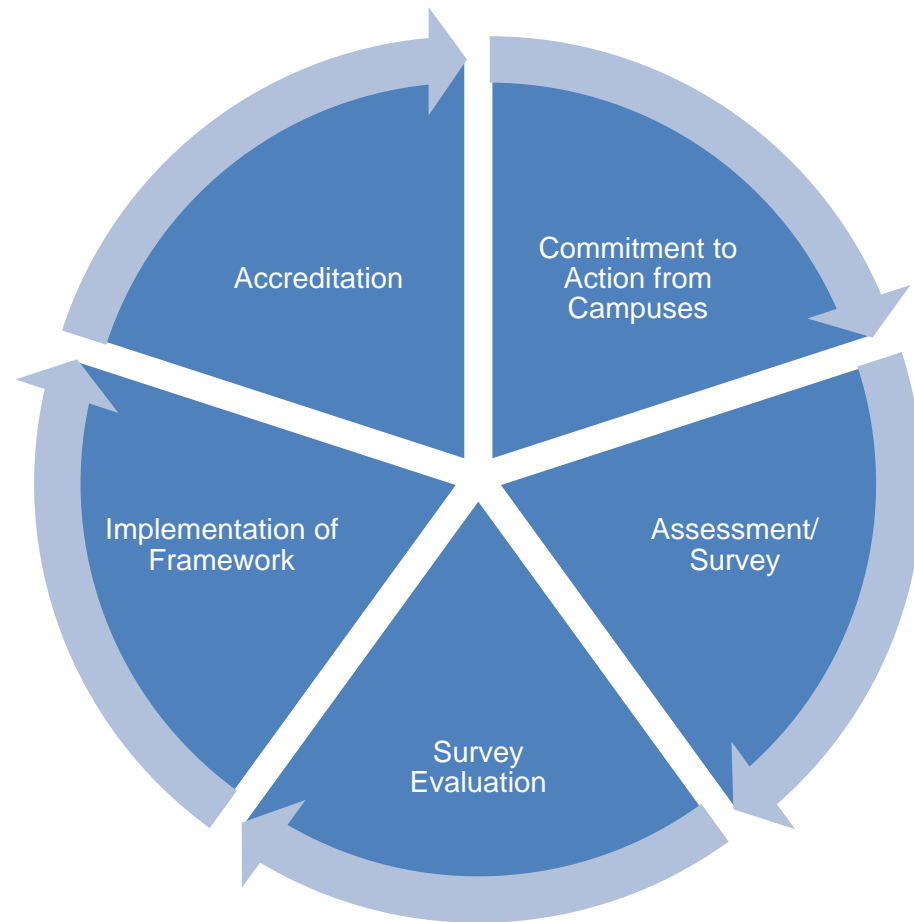


CLINTON HEALTH MATTERS INITIATIVE



OUR STRATEGY ON COLLEGE CAMPUSES

Partnering with the JED Foundation to make college campuses healthier and safer environments, and in turn reduce prescription drug misuse among 18- 26 year-olds.



CLINTON HEALTH MATTERS INITIATIVE



FRAMEWORK OF BEST PRACTICE CRITERIA



CLINTON HEALTH MATTERS INITIATIVE

OUR STRATEGY BEYOND COLLEGE CAMPUSES

- Engage businesses that host physically demanding professions to integrate mental health and prescription drug abuse prevention and treatment support into workplace wellness efforts.
- Work with the pharmaceutical industry and others to improve supply and affordability of Naloxone/Narcan.
- Engage medical associations, physician groups, retail pharmacy chains and others to expand the reach and improve the effectiveness of prescription drug monitoring programs that help detect and prevent the diversion and abuse of prescription drugs.
- Support innovations and advancement in prescriber and practitioner education on safe prescribing and alternative treatment practices.



CLINTON HEALTH MATTERS INITIATIVE

For more information about our program and/or to get involved please e-mail:

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@rainhenderson





Questions?

Please type your question into the Chat Box or press *6 to unmute your phone line and ask a question