

Combating the Opioid Overdose Death Epidemic: New Thinking and Action Steps



ROBERT L. DUPONT, MD
PRESIDENT
INSTITUTE FOR BEHAVIOR AND HEALTH, INC.
WWW.IBHINC.ORG

OCTOBER 25, 2017

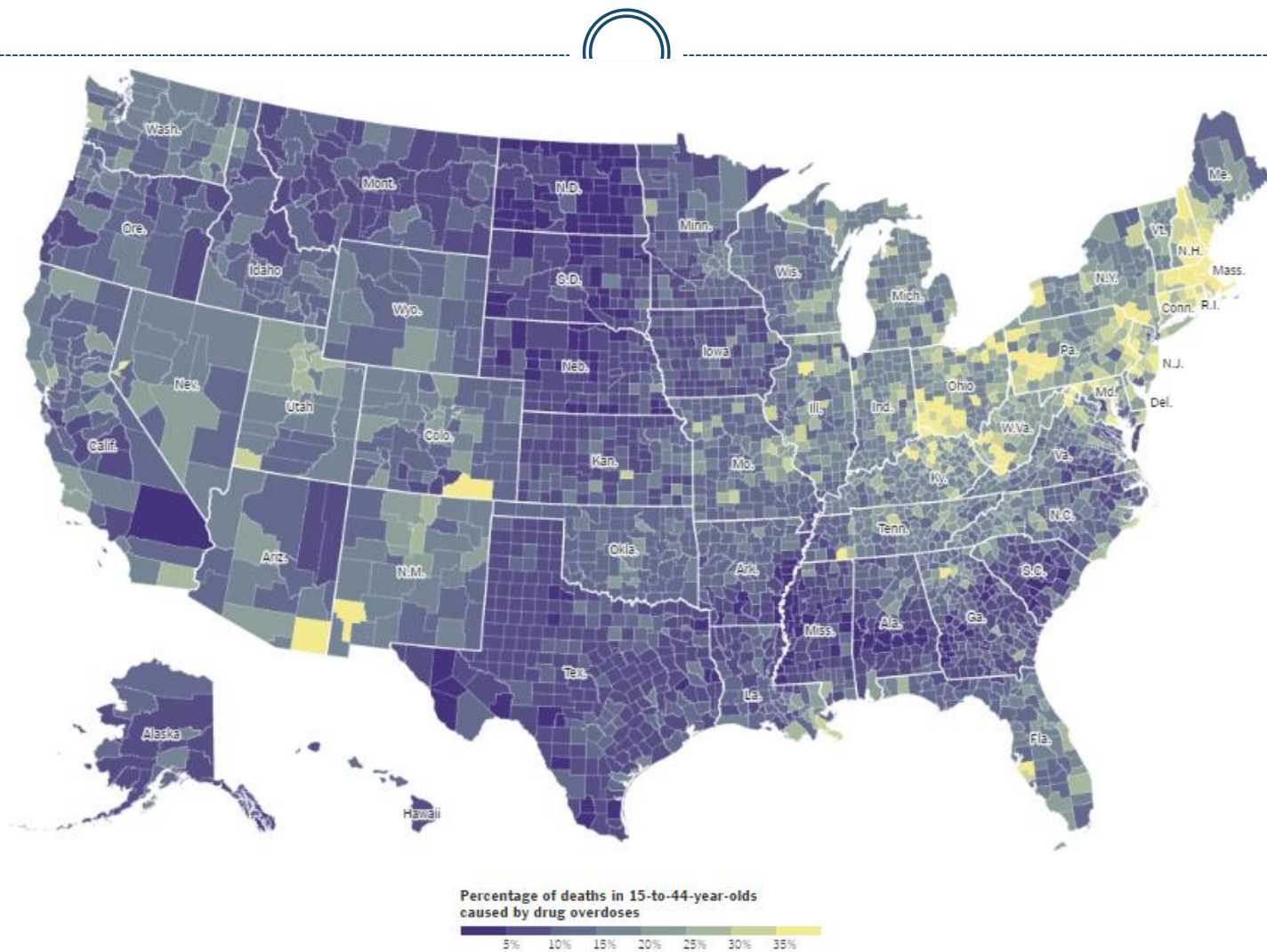
REVIVE RVA:
REGIONAL SOLUTIONS TO THE OPIOID CRISIS
RICHMOND, VA

The Opioid Overdose Epidemic



- A once-in-a-generation opportunity to improve addiction prevention and treatment
- 2.5 million Americans age 12 and older have an opioid use disorder
- An estimated 64,000 drug overdose deaths in 2016
- Drug overdose deaths are now the leading cause of death for Americans under age 50

Percent of Overdose Deaths Among 15-44 Year-Olds

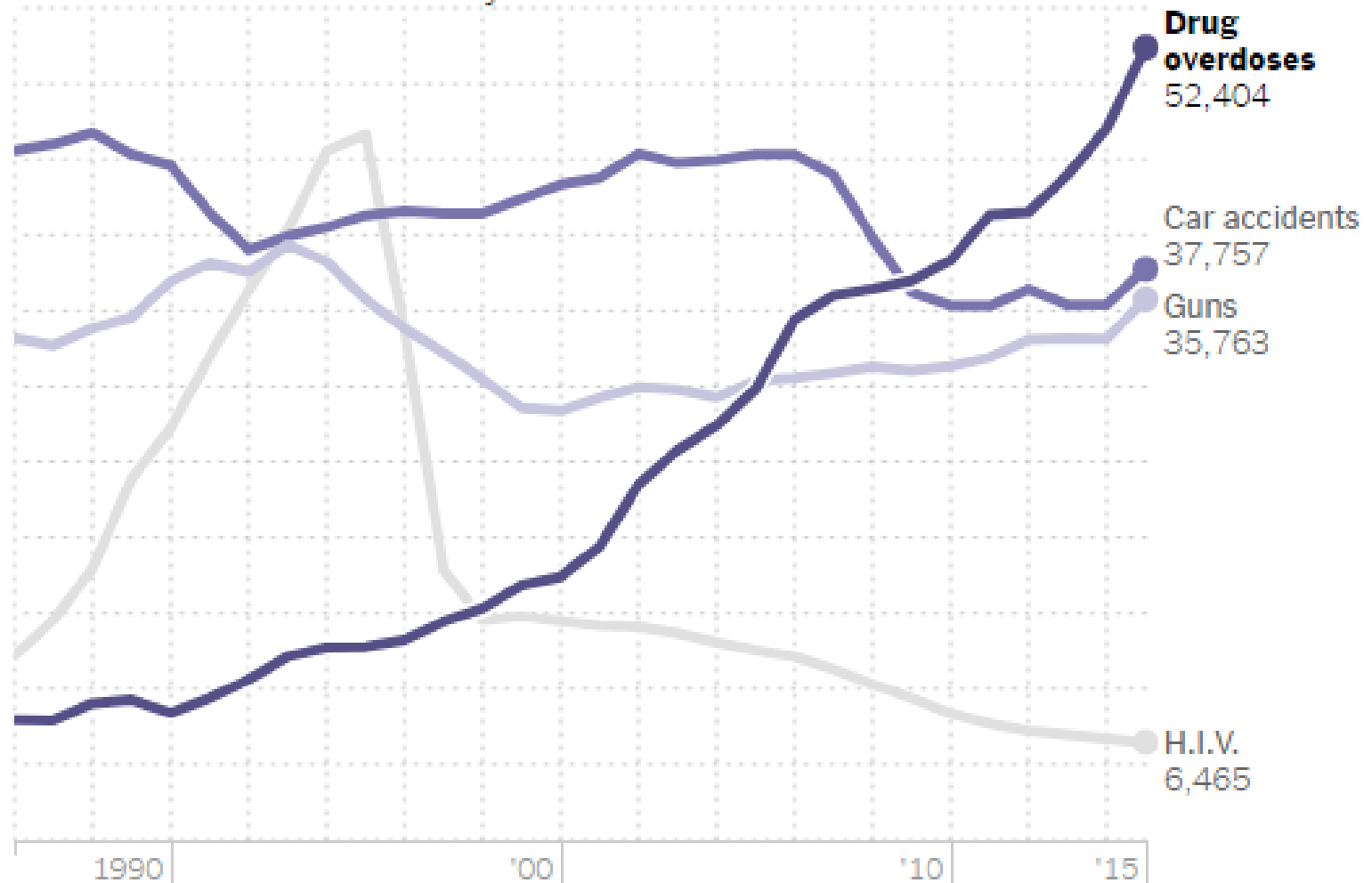


Note: In counties with fewer than 10 drug overdose deaths, the map combines observed totals with modeled estimates.

Deaths from: Overdose, Car Crashes, Guns, HIV

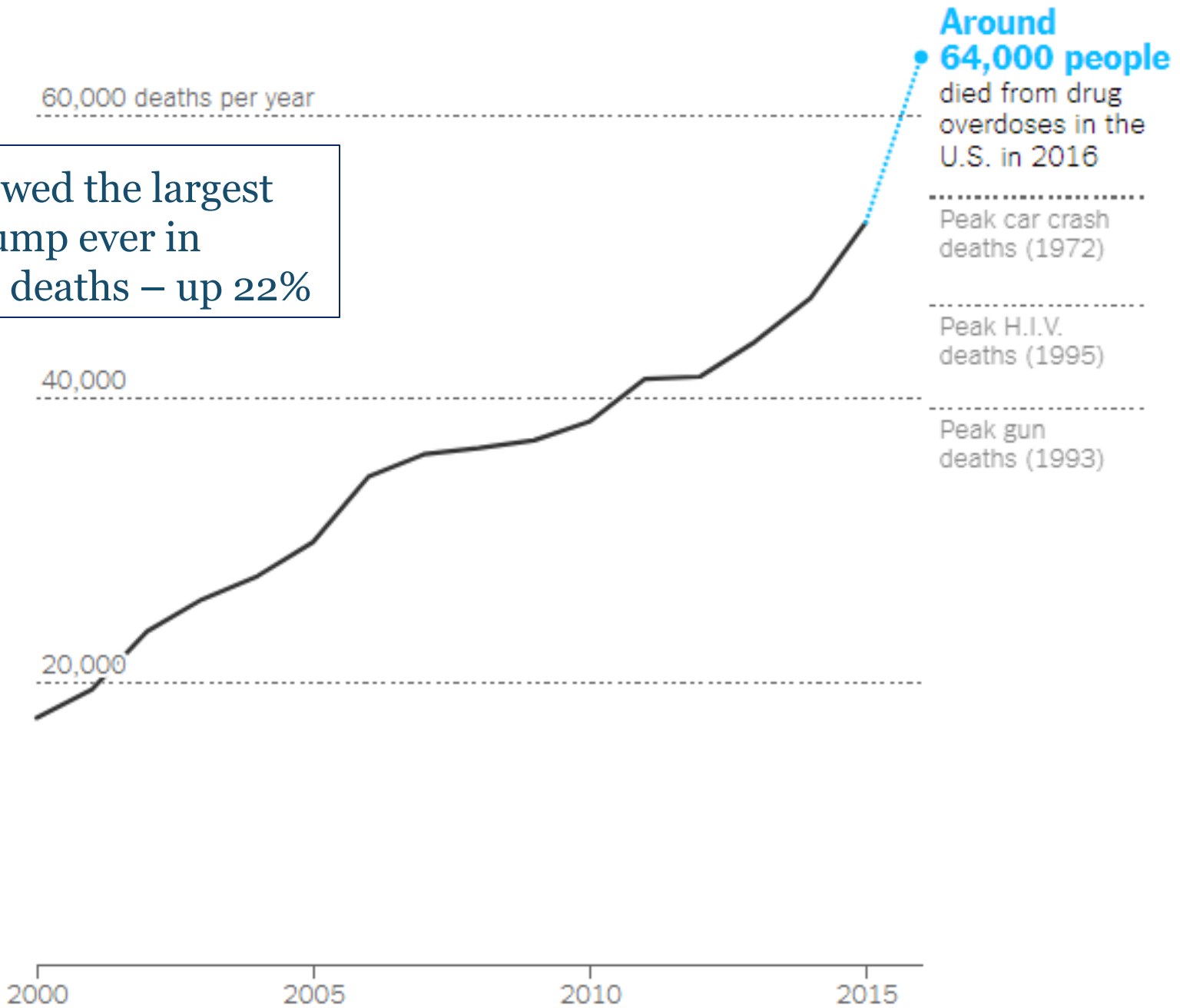


The number who die each year from...



Total U.S. drug deaths

2016 showed the largest annual jump ever in overdose deaths – up 22%



Around 64,000 people

died from drug overdoses in the U.S. in 2016

Peak car crash deaths (1972)

Peak H.I.V. deaths (1995)

Peak gun deaths (1993)

Overdose Deaths are Not Just about Opioids: Polysubstance Use Among Drug-Caused Deaths in FL

Drug	# Drug Caused Deaths	In Combination with other Drugs	Median # Drugs
Alprazolam	566	96.2%	3
Carisoprodol	33	94.2%	3
Cocaine	830	85.8%	2
Diazepam	162	99.3%	4
Fentanyl	642	91.0%	2
Heroin	706	96.3%	3
Hydrocodone	229	97.0%	3
Ketamine	6	100%	3.5
Methadone	262	90.3%	2
Morphine	858	95.8%	3
Oxycodone	535	94.8%	2
Tramadol	91	84.2%	2

Sequence of Drug Use



- Today about 75% of opioid abusers initiated opioid use with a prescription opioid vs. the 1960s when over 80% initiated opioid use with heroin
- Nearly half of patients for opioid use disorder reported their first exposure to opioids was through a prescription from their physician prescribed to treat pain
 - Of these, **94.6%** reported experience with at least one other psychoactive substance prior to or coincident with their first exposure to a prescribed opioid:
 - Alcohol - 94.6%
 - Nicotine/tobacco - 89.5%
 - Marijuana - 87.5%

Massive Prescribing of Opioids Remains a Problem



- The US is home to less than 5% of the world's population but consumes 80% of the medical opioid medicine supply
- Pharmaceutical companies and physicians bear heavy burdens of responsibility
- Current efforts are curbing opioid prescriptions and beginning to address the needs of the millions of Americans stranded on high-dose opioids

The Opioid Problem is...



- Bigger than the opioids
- Bigger than the very real problem of overprescribing of opioids
- At the root is the problem of “recreational pharmacology” – using chemicals that super-stimulate the brain for self-controlled pleasure

Action Steps to Combat the Overdose Epidemic



(1) PREVENTION

(2) TREATMENT

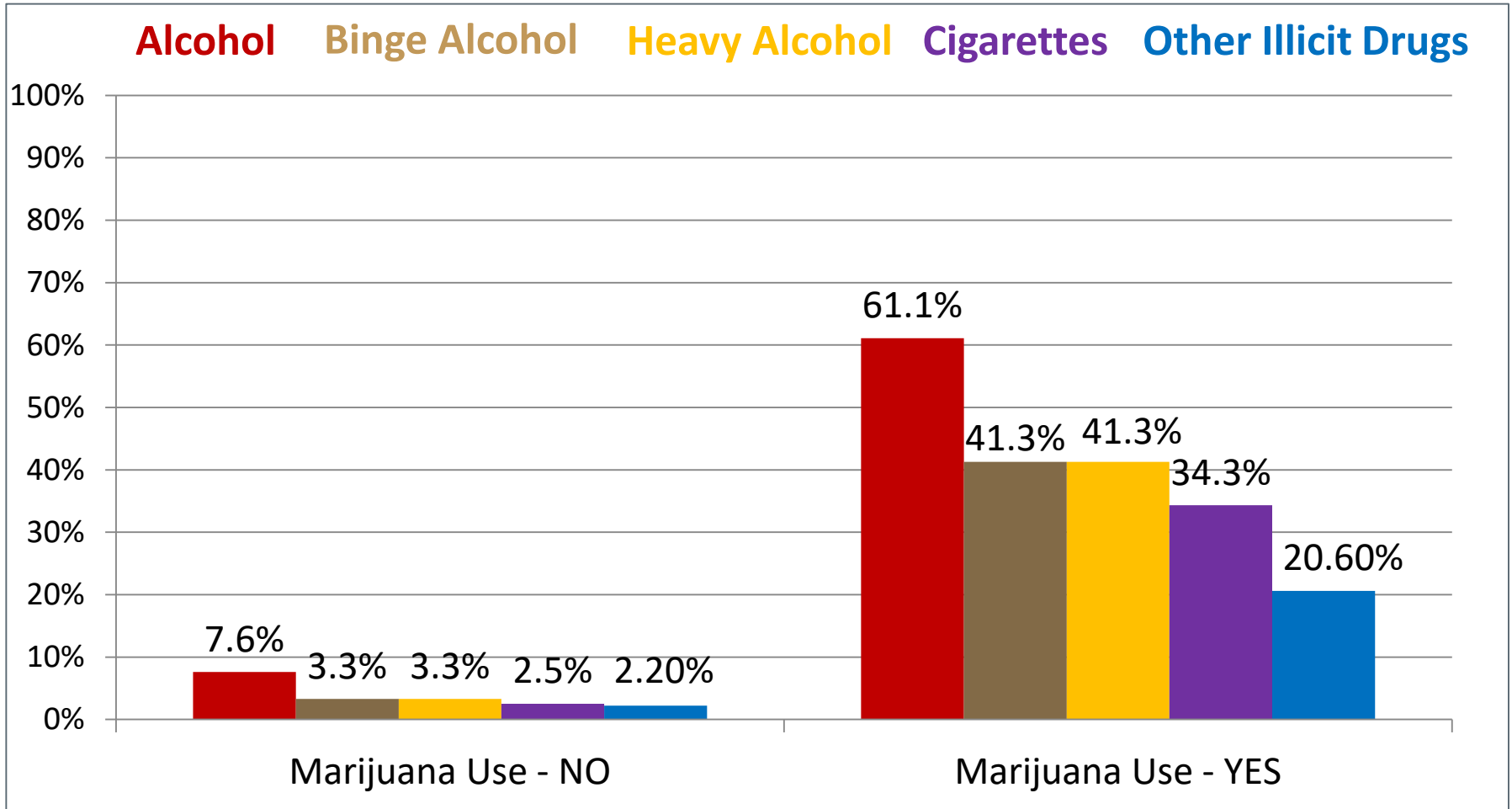
(3) SUPPLY REDUCTION

(1) Youth Prevention



- Ninety percent of substance use disorders are rooted in drug and alcohol use beginning in the uniquely vulnerable teenage years
- No one supports underage substance use, all of which is illegal
- The use of any alcohol, tobacco or marijuana is highly correlated with the use of other two: these are the **three gateway drugs**

Prevalence of Past Month Substance Use by American Youth Aged 12-17 in 2014 *by Past Month Marijuana Use*

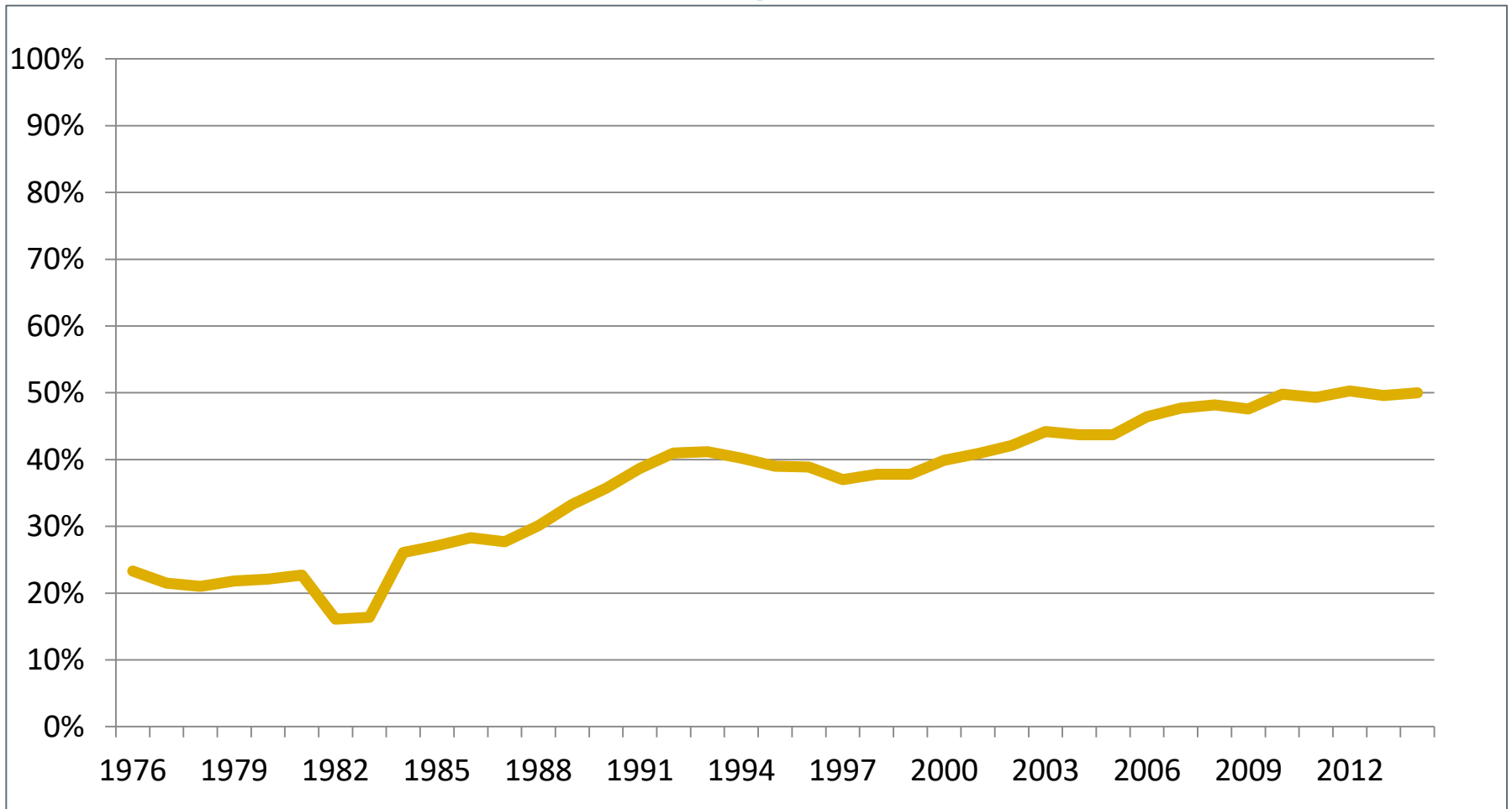


Support a Healthy Choice for Youth

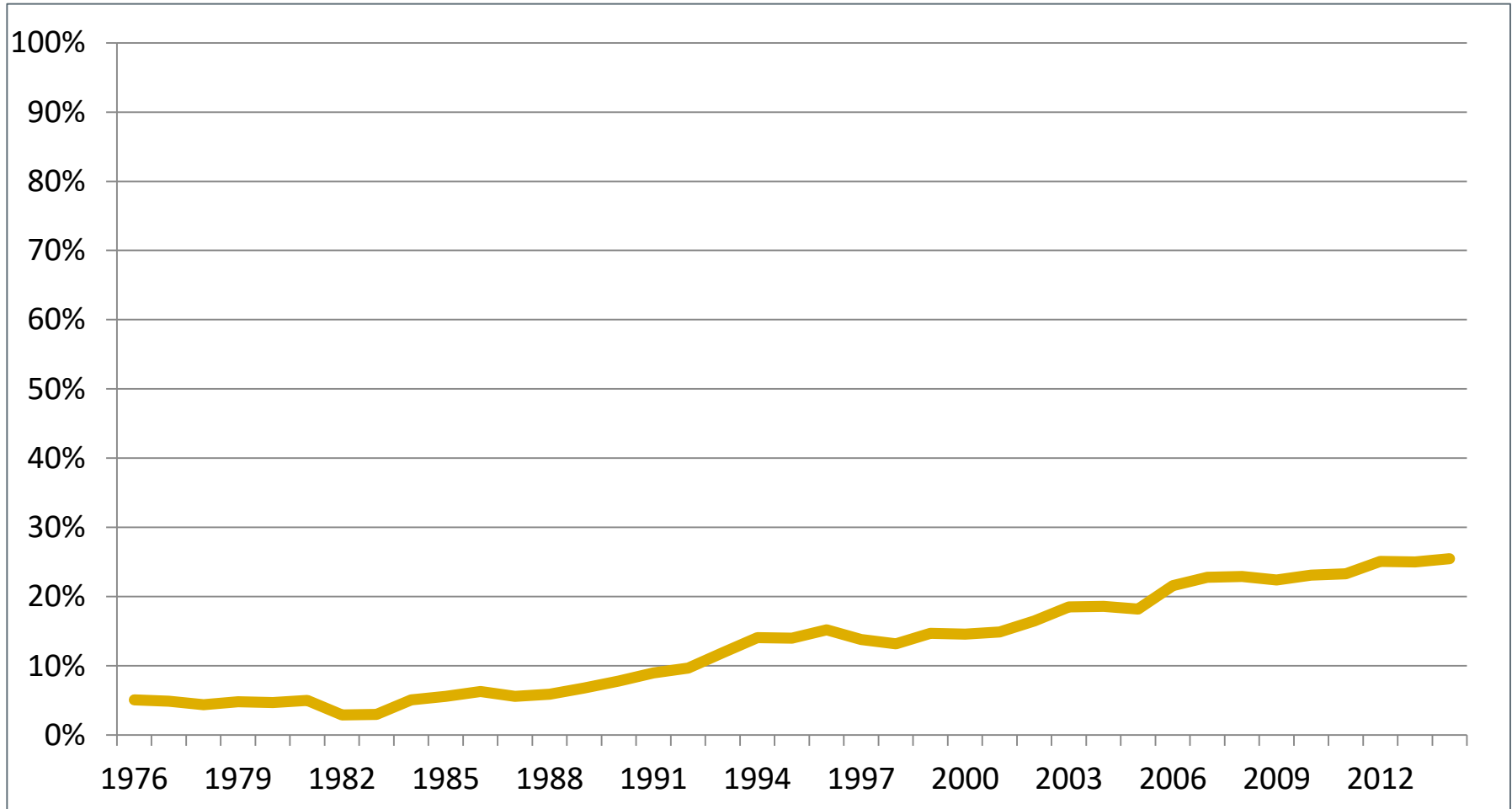


- For teens, substance use initiation is a single decision – to use or not to use – rather than a series of decisions about individual substances of abuse
- Youth substance use prevention needs to support the primary goal: **“No use of any alcohol, tobacco, marijuana or other drugs by youth under 21 for reasons of health”**
- This goal is achievable – as demonstrated by American youth who have made this choice

Past Month Abstinence from Alcohol, Cigarettes, Marijuana and Other Illicit Drugs by US High School Seniors: 1976-2014



Lifetime Abstinence from Alcohol, Cigarettes, Marijuana and Other Illicit Drugs by US High School Seniors: 1976-2014



Next Steps for Prevention



- Recruit and guide families to carry the prevention message
- Mobilize education and health care in this mission

(2) Improve Treatment



- Treatment is now stand-alone, short-term episodes of care. But addiction is often a life-long biological disorder
- Even medication-assisted treatment (MAT) which is considered for life, faces the reality that virtually all patients leave treatment:
 - About half of buprenorphine patients leave in 3-6 months and about half of methadone patients leave in 6-9 months
 - Almost all patients leaving MAT relapse to opioid use
- Many patients continue to use alcohol and other drugs while in treatment
- Relapse is the most common outcome of treatment

The Fundamental Question



- What is the goal of the treatment of substance use disorders?
 - Reduced use of the “problem” drug while in treatment?
 - Temporary abstinence?
 - **OR** is it long-term abstinence – and more?
- Now is the time for a new and better standard to judge the treatment of substance use disorders

Setting Our Sights Higher



- The goal of health care is to create a system of care for serious chronic disorders beginning with prevention and extending through disease identification to intervention, treatment and long-term disease management
- For substance use disorders this includes regular, and random, testing for relapses which are responded to rapidly

As For Prevention, So For Treatment



- Mobilize and guide families to identify problem-generating substance use and to insist on the goal of sustained recovery
- Link the “touch points” provided by the criminal justice to treatment
- Link Emergency Department- and community-based overdose treatments of naloxone to sustained abstinence-oriented treatment

Recovery is Possible



- Look to the front lines – our own family members, friends and colleagues who are in sustained recovery
- They are the pathfinders – learn how they got into stable recovery and the roles of treatment and recovery support in their inspiring stories

(3) The Drug Supply System

(The Largely Ignored Elephant in Drug Policy Discussions)



- The new element and the most menacing challenge today is the decentralized and rapidly improving illegal drug distribution system that is delivering a wider variety of drugs of higher potency, lower cost more convenience than ever before
- Today's drug suppliers are targeting suburban and smaller communities as well as rural areas where there is little law enforcement and no threat of the violence faced in inner cities

A False Drug Policy Choice



- Choosing between law enforcement or treatment as if these were mutually exclusive options is foolish and counterproductive
- Together law enforcement and treatment can do more than either can do alone to combat the opioid epidemic

Doing More of the Same is Not Good Enough



- This “National Emergency” creates a once-in-a-generation opportunity
- The key to improving prevention, treatment and law enforcement is to raise our sights
- Legalizing and legitimizing recreational pharmacology deepens the crisis

The Three Step Normalization of Recreational Pharmacology



1. Decriminalize
2. Medicalize
3. Legalize and Commercialize

The Better Way



- Promote and encourage youth to grow up drug-free
- Promote sustained recovery as the goal of addiction treatment

The Family's Encounter with Addiction



- Is recapitulated in the community's and the nation's encounter
- Starts with ignoring and minimizing the drug problem
- Moves to enabling – prolonging and worsening the drug problem
- Eventually, painfully and after crisis rejects the drug use humanly and forcefully

Only after everything else has been tried – and failed...



- The crisis of drugs leads to new – better – thinking for families, communities and nations

Final Summary



- Identify the “national emergency” not just as opioid use but as nonmedical drug use
- Focus community prevention on the goal for youth under age 21 of no use of alcohol, nicotine, marijuana and other drugs for health with a strong backing of families, education and healthcare
- Focus treatment on the goal of sustained recovery, meaning no use of alcohol, marijuana and other drugs and involvement in long-term recovery support
- Focus new and augmented law enforcement efforts on drug supply reduction and link the criminal justice system to both prevention and treatment efforts

Thank you!
Questions + Comments



Institute for Behavior and Health, Inc.



- IBH is a 501(c)3 non-profit organization that develops strategies to reduce drug use
- For more information and resources, visit the IBH websites:
 - www.IBHinc.org
 - www.PreventTeenDrugUse.org
 - www.StopDruggedDriving.org
 - www.PreventionNotPunishment.org

References



- Center for Behavioral Health Statistics and Quality. (2016). Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health (HHS Publication No. SMA 16-4984, NSDUH Series H-51). Available: <https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2015Rev1/NSDUH-FFR1-2015Rev1/NSDUH-FFR1-2015Rev1/NSDUH-National%20Findings-REVISED-2015.htm>
- CDC National Center for Health Statistics, National Vital Statistics System (2017). Provisional counts of drug overdose deaths, as of 8/6/17. Atlanta, GA: CDC. Available: https://www.cdc.gov/nchs/data/health_policy/monthly-drug-overdose-death-estimates.pdf
- Cicero, T. J., Ellis, M. S., & Kasper, Z. A. (2017). Psychoactive substance use prior to the development of iatrogenic opioid abuse: A descriptive analysis of treatment-seeking opioid abusers. *Addictive Behaviors*, 65, 242-244.
- Cicero, T. J., Ellis, M. S., & Surratt, H. L. (2014). The changing face of heroin use in the United States: a retrospective analysis of the past 50 years. *JAMA Psychiatry*, 71(7), 821-826.
- DuPont, R. L. (2015, July 1). It's time to re-think prevention: increasing percentages of adolescents understand they should not use any addicting substances. Rockville, MD: Institute for Behavior and Health, Inc. Available: www.PreventTeenDrugUse.org
- DuPont, R. L. (2016). Seizing the moment to improve addiction treatment. *ASAM Magazine*.
- DuPont, R. L., & McLellan, A. T. (2017). "Facing Addiction in America: The Surgeon General's Report on Alcohol, Drug Abuse and Health": A New Agenda to Turn Back the Drug Epidemic. Rockville, MD: Institute for Behavior and Health, Inc. Available: https://www.ibhinc.org/s/IBH_Report_A_New_Agenda_to_Turn_Back_The_Drug_Epidemic.pdf

References



- Florida Drug-Related Outcomes Surveillance and Tracking System (FROST). Accessed March 27, 2017. Available: <http://frost.med.ufl.edu/frost/>
- Institute for Behavior and Health, Inc. (2014). *The New Paradigm for Recovery: Making Recovery – and Not Relapse – the Expected Outcome of Addiction Treatment*. Rockville, MD: Author.
- Katz, J. (2017a, September 7). Fentanyl deaths in 2016: up 540% in three years. *The New York Times*. Available: <https://www.nytimes.com/interactive/2017/09/02/upshot/fentanyl-drug-overdose-deaths.html>
- Katz, J. (2017b, April 14). You draw it: just how bad is the drug overdose epidemic? *The New York Times*. Available: <https://www.nytimes.com/interactive/2017/04/14/upshot/drug-overdose-epidemic-you-draw-it.html>
- Manchikanti, L., Fellows, B., Ailinani, H., & Pampati, V. (2010). Therapeutic use, abuse and nonmedical use of opioids: a ten-year perspective. *Pain Physician*, 13(5), 401-435.
- National Center on Addiction and Substance Abuse at Columbia University. (2011). *Adolescent Substance Use: America's #1 Public Health Problem*. New York, NY: Author.
- Rudd, R. A., Seth, P., David, F., & Scholl, L. (2016). Increases in drug and opioid-involved overdose deaths — United States, 2010–2015. *Morbidity and Mortality Weekly*, 65(50-51), 1445-1452. Available: <https://www.cdc.gov/mmwr/volumes/65/wr/mm655051e1.htm>