

The Opioid Epidemic: The Indian Health Service Response to a National Crisis

CAPT Stephen "Miles" Rudd, MD, FAAFP Chief Medical Officer/Deputy Director, Portland Area IHS Chair, IHS National Committee on Heroin, Opioids, and Pain Efforts (HOPE) All Tribes and Urban Indian Organization Call May 15, 2017

The Problem

The Opioid Epidemic

"The misuse and abuse of prescription medications have taken a devastating toll on the public health and safety of our Nation.... the Centers for Disease Control and Prevention has characterized prescription drug overdose as an epidemic, a label that underscores the need for urgent policy, program, and community-led responses."

R. Gil Kerlikowske

Director of the Office of National Drug Control Policy

Prescription Drug Abuse: Strategies to Stop the Epidemic 2013

In the United States:

On average, 50 people die from prescription pain medication overdoses every day.

- Prescription pain medication is responsible for more than 475,000 visits to emergency rooms every year.
- Drug poisoning deaths the majority of which are related to prescription drugs — surpassed traffic-related crashes as the leading cause of injury death in 2009. *Prescription Drug Abuse: Strategies to Stop the Epidemic, 2013*

In the United States:

- The most common drugs involved in prescription opioid overdose deaths include:
 - Methadone
 - Oxycodone (such as OxyContin[®])
 - Hydrocodone (such as Vicodin[®] or Norco[®])
 - Among those who died from prescription opioid overdose between 1999 and 2014:
 - Overdose rates are highest among people aged 25 to 54 years.
 - Overdose rates were higher among non-Hispanic whites and American Indian/Alaska Natives, compared to non-Hispanic blacks and Hispanics.
 - Men are more likely to die from overdose, but the mortality gap between men and women is closing.



4

In the United States:

- Overdose is not the only risk related to prescription opioids. Misuse, abuse, and opioid use disorder (addiction) are also potential dangers.
 - In 2014, almost 2 million Americans abused or were dependent on prescription opioids.
 - As many as 1 in 4 people who receive prescription opioids long term for non-cancer pain in primary care settings struggles with addiction.
 - Every day, over 1,000 people are treated in emergency departments for misusing prescription opioids.



Increase in Availability

Americans use 80% of the global supply of opioids and 99% of hydrocodone, but make up only 4.6% of the world's population.

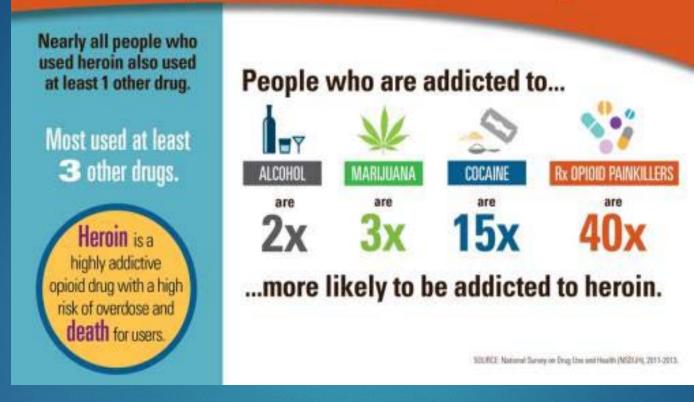
"Institute of Addiction Medicine, Inc."

From 1999 to 2013, the amount of prescription painkillers prescribed & sold in the U.S. nearly **OUADRUPLED**.



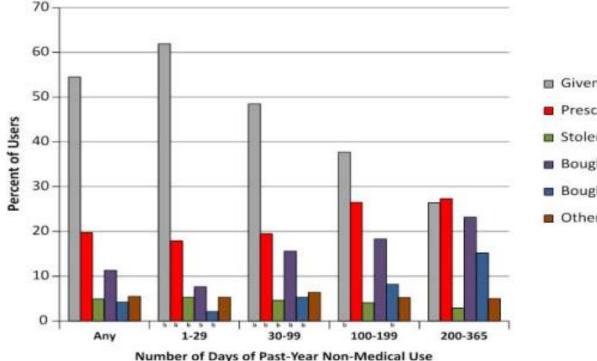
Yet there has not been an overall change in the amount of pain that Americans report.

Heroin use is part of a larger substance abuse problem.



Substance Abuse Problem

Non-medical Sources of Prescription Opioids



Sources of Prescription Opioids Among Past-Year Non-Medical Users^a

- Given by a friend or relative for free
- Prescribed by ≥1 physicians
- Stolen from a friend or relative
- Bought from a friend or relative
- Bought from a drug dealer or other stranger
- Other^c

* Obtained from the US National Survey on Drug Use and Health, 2008 through 2011.⁵

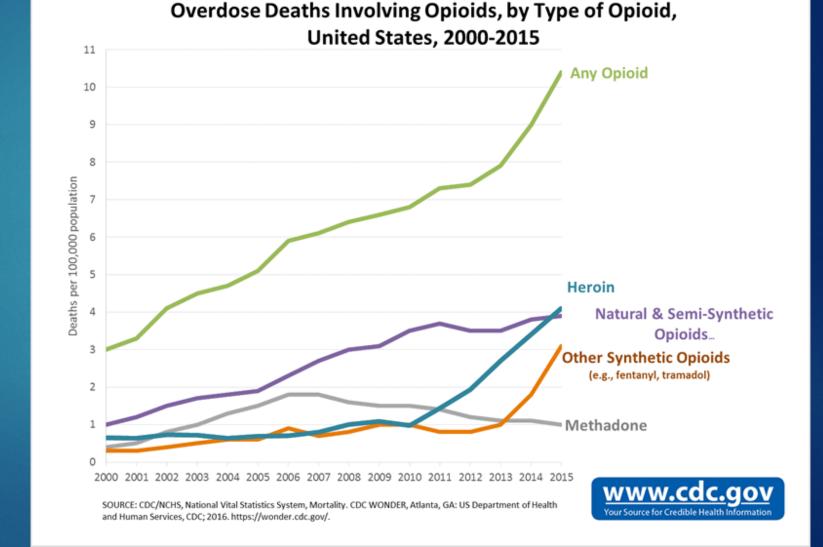
^b Estimate is statistically significantly different from that for highest-frequency users (200-365 days) (P<.05).</p>

^c Includes written fake prescriptions and those opioids stolen from a physician's office, clinic, hospital, or pharmacy; purchases on the internet; and obtained some other way.

SOURCE: Jones C, Paulozzi L, Mack K. Sources of prescription opioid pain relievers by frequency of past-year nonmedical use: United States, 2008–2011. JAMA Int Med 2014; 174(5):802-803.

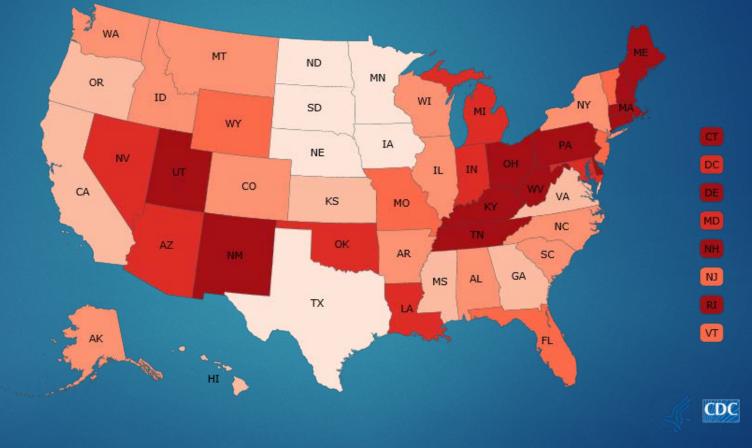
Heroin & Other Opioid Deaths on the Rise

Heroin and synthetic opioid deaths (e.g., fentanyl) are driving the recent rapid increase in opioid deaths in the US



9

Age-adjusted rates of drug overdose deaths by state, 2015

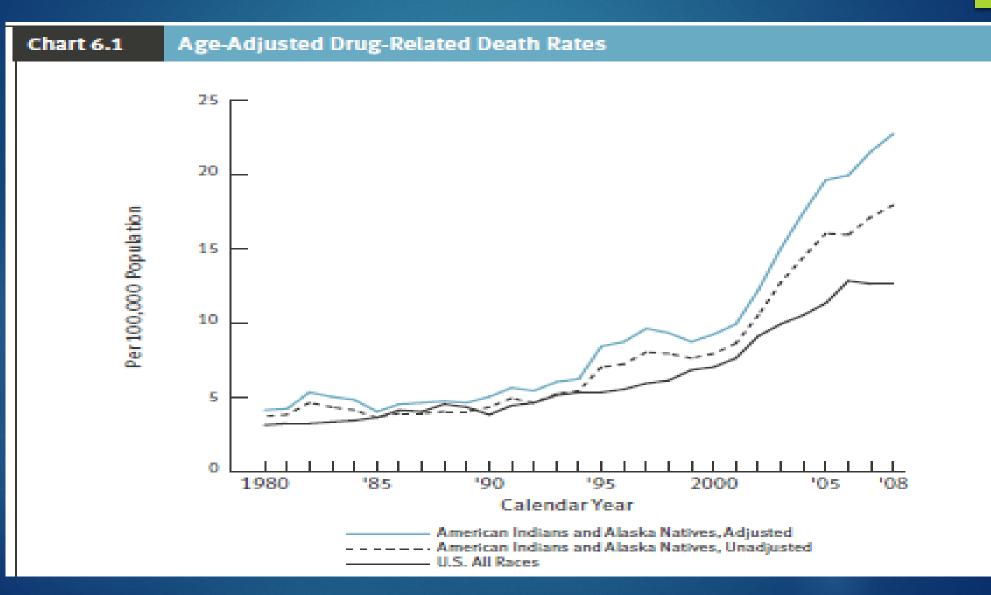


2015 Age-adjusted rate

2.8 to 11.0
11.1 to 13.5
13.6 to 16.0
16.1 to 18.5
18.6 to 21.0
21.0 to 41.5

IHS- Drug-Related Death Rates, 1980—2008

11



Indian Health Service and Federal Response

IHS Prescription Drug Abuse (PDA) Workgroup

- Established by the IHS Chief Medical Officer and the National Combined Councils in July, 2012.
- Focus areas:
 - Patient care
 - Policy development/implementation
 - Education
 - Monitoring
 - Medication storage/disposal
 - Law enforcement

Policy Efforts

IHM Part 3, Chapter 30- Chronic Non-Cancer Pain Management

- Published in June 2014.
- Provides best practice guidelines surrounding management of chronic non-cancer pain.
- Currently under revision to ensure alignment with CDC Guideline for Prescribing Opioids for Chronic Pain- United States, 2016.
- IHM Part 3, Chapter 32- State Prescription Drug Monitoring Programs
 - Published June 2016.
 - Establishes requirement for IHS Federal prescribers to register with State PDMP to request reports for new patients, and when prescribing opiates for acute pain (>7 days of treatment) and chronic pain.



CDC Guideline for Prescribing Opioids for Chronic Pain — United States, 2016





Clinician Supports

IHS Websites

Pain Management www.ihs.gov/painmanagement

Opioid Dependence Management www.ihs.gov/odm





Clinician Supports

IHS Chronic Pain and Opioid Management TeleECHO Clinic

Weekly video conference

Allows front-line clinicians to consult with experts in:

- Pain management
- Addictions
- Behavioral Health

Weekly format rotating to noon hour for each time zone.





Presidential Memorandum

- Addressing Prescription Drug Abuse and Heroin Use- Oct. 21, 2015
 - Adequate training of medical professionals on appropriate pain medication prescribing practices.
 - Increased utilization of naloxone.
 - Increased access to medication-assisted therapy (MAT) for opioid dependence.
 - Reduced utilization of methadone.

Presidential Memorandum --Addressing Prescription Drug Abuse and Heroin Use

MEMORANDUM FOR THE HEADS OF EXECUTIVE DEPARTMENTS AND AGENCIES

SUBJECT: Addressing Prescription Drug Abuse and Heroin Use

By the authority vested in me as President by the Constitution and the laws of the United States of America, and in order to reduce prescription pain medication and heroin overdose deaths, promote the appropriate and effective prescribing of pain medications, and improve access to treatment, I hereby direct the following:

Section 1. Policy. The epidemic of prescription pain medication and heroin deaths is devastating families and communities across the country. Prescription drugs -- especially opioid pain medications -have been implicated increasingly in drug overdose deaths over the last decade. According to the Centers for Disease Control and Prevention (CDC), the number of overdose deaths involving prescription opioids quadrupled between 1999 and 2013, with more

Opiate Training

IHS Essential Training on Pain and Addiction (ETPA)

- IHS specific training developed with cooperation by the University of New Mexico.
- Web-based live trainings (5 hour course) conducted since Jan. 2015.
- IHS Special General Memorandum 2016-05: Mandatory Training for Federal Prescribers of Controlled Substance Medications
 - All IHS Federal prescribers of controlled substances are required to complete EPTA training.
 - By the end of 2016, 2931 participants had completed the ETPA course.
 - ▶ 1296 IHS Federal controlled substance prescribers (96%).



Naloxone

IHS-BIA Memorandum of Understanding- December 2015

- Agreement that IHS Federal pharmacies will provide naloxone and training on its use to local BIA Tribal Police for use by First Responders.
- IHS pharmacists have developed a training curriculum and toolkit.
- Co-Prescribing
 - Recommend pharmacy-based program
 - www.ihs.gov/odm.resources





Medication Assisted Treatment (MAT)

- Medication-assisted treatment is treatment for addiction that includes:
 - The use of medicine
 - Counseling
 - Support systems



- Treatment that includes medication is often the best choice for opioid addiction.
- If a person is addicted, medication allows him or her to regain a normal state of mind, free of drug-induced highs and lows.

Medication Assisted Treatment (MAT)

Office-Based Opioid Treatment Training

- Live web-based training sponsored by American Osteopathic Academy of Addiction Medicine and SAMHSA.
 - Provides 8 hours needed to obtain waiver to prescribe buprenorphine in an office-based setting:
 - Webinar training (4.25 hrs)- 3 modules
 - Online study/exam (3.75 hrs)- 5 modules, 24 questions.
- Pain Management Intensive Training- Albuquerque, NM- March 2017
 - Included optional 4 hour MAT training.
 - Duplicate training planned for later in 2017 in Portland Area.

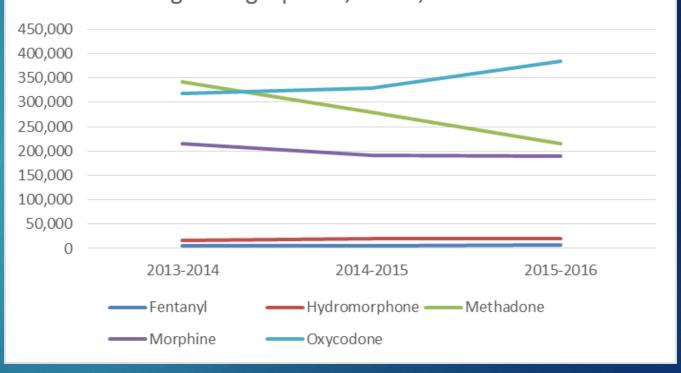
Methadone

- Methadone has dual roles:
 - Used as a long-acting opioid in pain treatment.
 - Used for opiate maintenance to treat opioid dependence disorder (opiate addiction)
- Chemical properties of methadone increase risk compared to other opioids
 - Can cause cardiac rhythm complications.
 - More likely to cause an opiate overdose.
- Guidelines recommend against using methadone as a first-line opioid choice.
- IHS monitors prescribing data on methadone and trains providers on proper pain management.

Methadone

- Methadone prescribing noted to be higher in both the private sector and IHS within the Pacific Northwest.
- Analysis of methadone procurement data has been provided annually to Portland Area sites utilizing The VA Pharmacy Prime Vendor.
- Methadone procurement has decreased
 37% since 2014 (-60% for Federal sites).

Long-Acting Opiates, PAIHS, 2013-2016



National Committee on Heroin, Opioids, and Pain Efforts (HOPE)

- New IHS Committee created in March 2017
- Evolved out of the Prescription Drug Abuse Workgroup
- Purpose:
 - Promote appropriate and effective pain management.
 - Reduce overdose deaths from heroin and prescription opioid misuse.
 - Improve access to culturally appropriate treatment.

HHS Strategies

Address by Thomas Price, MD, Secretary, Dept. of Health & Human Services, National Rx Drug Abuse and Heroin Summit- Apr. 19, 2017 Improving access to treatment and recovery services. Promoting use of overdose-reversing drugs. Strengthening our understanding of the epidemic through better public health surveillance. Providing support for cutting edge research on pain and addiction. Advancing better practices for pain management.



- Alcohol and Substance Abuse Program: <u>https://www.ihs.gov/asap/</u>
- Pain Management: https://www.ihs.gov/painmanagement/
- Opioid Dependence Management: <u>https://www.ihs.gov/odm</u>
- Methamphetamine and Suicide Prevention Initiative: <u>https://www.ihs.gov/mspi/</u>
- Youth Regional Treatment Centers: <u>https://www.ihs.gov/yrtc/</u>
- Tele-behavioral Health: <u>https://www.ihs.gov/telebehavioral/</u>

Questions?

