

# IHS Resources for Prescription Drug Abuse

CAPT Harry J Brown, MD  
Chief Medical Officer, Nashville Area  
Chair, IHS National PDA Workgroup  
December 16, 2015

# Introduction

Today's presentation is part of the ongoing series of *Illicit Substance Use Around the Time of Birth: Education and Prevention Strategies*

Thanks to Dr. Anne Merewood for arranging this series of presentations

Disclaimer: I have no financial interests or conflicts of interest to disclose

# Introduction

Today's presentation will focus on:

1. The current drug use epidemic in America, with some historical background
2. Some of the resources available to healthcare personnel in the IHS

# Historical Perspective

- In the 1980's, the common wisdom was DO NOT USE OPIOIDS FOR CHRONIC NON-MALIGNANT PAIN
- In the 1990's, this all changed
- By the turn of the century, opioids were highly touted for use in ALL chronic pain syndromes
- There was very little basis in high quality medical evidence for these recommendations

# The Problem

Many different drugs of abuse:

- Alcohol
- Methamphetamine
- Prescription pain relievers: opioids (oxycodone, hydrocodone, others)
- Heroin
- Sedatives and tranquilizers

# The Problem

“Americans, constituting only 4.6% of the world’s population, have been consuming 80% of the global opioid supply, and 99% of the global hydrocodone supply, as well as two-thirds of the world’s illegal drugs.”

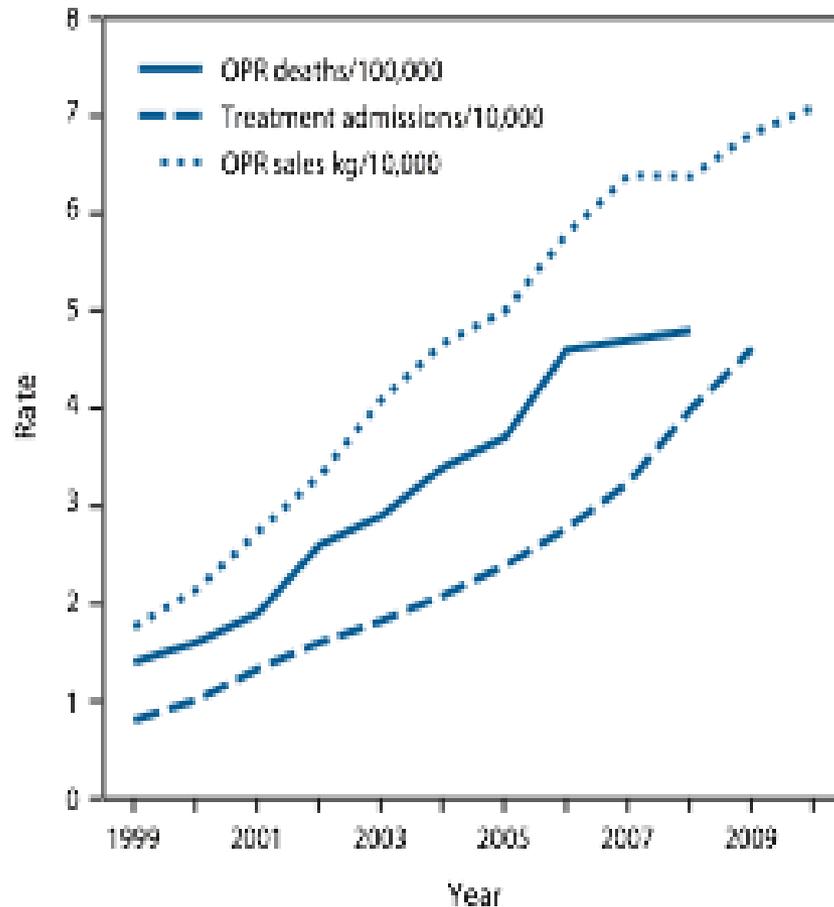
- from L Manchikanti *et al.* Therapeutic Use, Abuse, and Nonmedical Use of Opioids: a Ten-Year Perspective. *Pain Physician* 2010; 13:401 - 435.

# The Epidemic in America

- Sales of opioid pain relievers quadrupled between 1999 and 2010
- Enough OPR were prescribed in 2012 to medicate every American adult with 5 mg of hydrocodone every 4 hours for a month
- Highest rates of OPR for both medical and non-medical use among American Indians/Alaska Natives and non-Hispanic whites

# Opioid Deaths and Sales

FIGURE 2. Rates\* of opioid pain reliever (OPR) overdose death, OPR treatment admissions, and kilograms of OPR sold — United States, 1999–2010



\* Age-adjusted rates per 100,000 population for OPR deaths, crude rates per 10,000 population for OPR abuse treatment admissions, and crude rates per 10,000 population for kilograms of OPR sold.

# IHS Response

- IHS Director was approached in Jan 2012 by NCCMO regarding PDA epidemic
- Director commissioned workgroup summer 2012
- Meeting held in Rockville July 2012 – workplan produced
- Meeting in April 2013 – workplan updated
- Workgroup charged with carrying out workplan in fall of 2013 – formed 7 subgroups

# Major Accomplishments

- IHS Chronic Non-cancer Pain Policy
- IHS Pain Management Website
- Multiple clinical guidelines and model policies
- Enforcement guide
- Prescription Drug Monitoring Program (PDMP) Circular
- Mandatory prescriber training course (“Essential Training for Prescribers”)

# Resources

- Methamphetamine and Suicide Prevention Initiative (MSPI):  
[www.ihs.gov/mspi/](http://www.ihs.gov/mspi/)
- IHS website
  - [www.ihs.gov/asap/](http://www.ihs.gov/asap/)
  - [www.ihs.gov/painmanagement/](http://www.ihs.gov/painmanagement/)
  - [www.ihs.gov/IHM/](http://www.ihs.gov/IHM/)
- SAMHSA website
  - [www.samhsa.gov/tribal-ttac](http://www.samhsa.gov/tribal-ttac)
  - [www.samhsa.gov/captus](http://www.samhsa.gov/captus)
  - [www.samhsa.gov/tloa](http://www.samhsa.gov/tloa)

# IHS Website

The screenshot shows the Indian Health Service (IHS) website homepage. At the top left is the IHS logo, a stylized arrow and feather. The main header features the text "Indian Health Service" and "The Federal Health Program for American Indians and Alaska Natives". On the right, there are links for "A to Z Index", "Employee Resources", and "Feedback", along with a search bar for "ihs.gov". A navigation menu below the header includes "Home", "About IHS", "Locations", "for Patients", "for Providers", "Community Health", "Career Opportunities", and "Newsroom". A "Share This Page" section with social media icons is also present. The main content area is titled "In The Spotlight" and features a large image of a police officer in a car. To the right of the image is a news article titled "New effort targets drug overdoses in Indian Country" with a sub-headline "IHS announces a new agreement to equip BIA law enforcement officers with naloxone for responding to incidents of opioid overdose." Below the article are links for "Watch LIVE" and "IHS Alcohol and Substance Abuse Program". A carousel of smaller images is located below the main content. At the bottom, there are three promotional banners: "find Health Care" with a stethoscope icon, "begin Your Career" with an image of an older man and a young girl, and "Director's Corner" with the IHS logo.

**Indian Health Service**  
The Federal Health Program for American Indians and Alaska Natives

Home About IHS Locations *for Patients* *for Providers* Community Health Career Opportunities Newsroom

In The Spotlight

Share This Page: [Email] [Facebook] [Google+] [Twitter] [LinkedIn] [Pinterest]

## New effort targets drug overdoses in Indian Country

IHS announces a new agreement to equip BIA law enforcement officers with naloxone for responding to incidents of opioid overdose. Naloxone is a medication that reverses the effects of a prescription opioid or heroin overdose and can save lives.

[Watch LIVE](#) from 1 p.m. to 3 p.m. Central time on Wednesday, December 16 our community forum with the White House Office of National Drug Control Policy in Tulsa, Oklahoma.

[IHS Alcohol and Substance Abuse Program](#)

[Opioids: The Prescription Drug & Heroin Overdose Epidemic](#)

Get your flu shot today!

*find* Health Care  
Find a health care facility near you

*begin* Your Career  
Search available jobs at IHS

**Director's Corner**  
Information from the Office of the Director

# MSPI Website



**Indian Health Service**

The Federal Health Program for American Indians and Alaska Natives

[A to Z Index](#) • [Employee Resources](#) • [Feedback](#)

Search ihs.gov

Search

- Home
- About IHS
- Locations
- for Patients
- for Providers
- Community Health
- Career Opportunities
- Newsroom

[IHS Home](#) • [Community Health](#) • [Behavioral Health](#) • [Methamphetamine and Suicide Prevention Initiative](#)

Share This Page:



## Methamphetamine and Suicide Prevention Initiative

- ▶ About MSPI
- ▶ Funded Projects
- ▶ Information on Methamphetamine Abuse and Suicide
- ▶ Project Spotlights
- ▶ Training
- ▶ Resources
- ▶ Best and Promising Practices
- ▶ Best Practices in Use
- ▶ Media Campaigns
- ▶ Evaluation and Reporting
- ▶ Contact Us

## Methamphetamine and Suicide Prevention Initiative



The Methamphetamine and Suicide Prevention Initiative (MSPI) is a nationally-coordinated demonstration project, focusing on providing much-needed methamphetamine and suicide prevention and intervention resources for Indian Country. This initiative promotes the use and development of evidence-based and practice-based models that represent culturally-appropriate prevention and treatment approaches to methamphetamine abuse and suicide prevention from a community-driven context.

### STAY CONNECTED

Use our [Behavioral Health LISTSERV](#) to stay connected.

# Methamphetamine and Suicide Prevention Initiative

- Began in the fall of 2009
- Response of Congress in recognition of problems and disparities
- Aimed at prevention of methamphetamine abuse as well as suicide
- Information, Training, Resources, Toolkit, Best Practices

# Division of Behavioral Health

U.S. Department of Health and Human Services

 **Indian Health Service**  
The Federal Health Program for American Indians and Alaska Natives

[A to Z Index](#) • [Employee Resources](#) • [Feedback](#)

Search ihs.gov

[Home](#) [About IHS](#) [Locations](#) [for Patients](#) [for Providers](#) [Community Health](#) [Career Opportunities](#) [Newsroom](#)

[IHS Home](#) • [Community Health](#)

Share This Page:      

## Community Health

- Behavioral Health
- Environmental Health
- Health Communications
- Health Promotion
- Injury Prevention
- School Health
- Sustainability
- Visualizing Data
- Contacts

## Behavioral Health

Serious behavioral health issues such as substance use disorders, mental health disorders, suicide, violence, and behavior-related chronic diseases have a profound impact on the health of American Indian/Alaska Native (AI/AN) individuals, families, and communities. Through its programs, the IHS [Division of Behavioral Health](#) addresses these issues and follows the current Indian health care system focus on integrated behavioral health and primary care treatment that respects the balance, wellness, and resilience of AI/AN people.

The eight programs in the [Division of Behavioral Health](#) are:

- [Alcohol and Substance Abuse Prevention](#)
- [Domestic Violence Prevention Initiative](#)
- [Forensic Healthcare](#)
- [Mental Health](#)
- [Methamphetamine and Suicide Prevention Initiative](#)
- [Suicide Prevention](#)
- [Telebehavioral Health](#)
- [Youth Regional Treatment Centers](#)



# IHS Chronic Non-Cancer Pain Management Policy (Part 3, Ch 30)

U.S. Department of Health and Human Services

**Indian Health Service**  
The Federal Health Program For American Indians And Alaska Natives

Search

[Home](#)
[About IHS](#)
[Locations](#)
[for Patients](#)
[for Providers](#)
[Community Health](#)
[Career Opportunities](#)
[Newsroom](#)

Share This Page: [Facebook](#) [Twitter](#) [LinkedIn](#) [Pinterest](#) [Email](#) [Print](#)

## Indian Health Manual

### Part 3 - Professional Services

#### Chapter 30 - Chronic Non-Cancer Pain Management

Title	Section
<a href="#">Introduction</a>	3-30.1
<a href="#">Purpose</a>	3-30.1A
<a href="#">Authorities</a>	3-30.1B
<a href="#">Relevant Laws</a>	3-30.1C
<a href="#">Background</a>	3-30.1D
<a href="#">Policy</a>	3-30.1E
<a href="#">Definitions</a>	3-30.1F
<a href="#">Responsibilities</a>	3-30.2
<a href="#">Area Director</a>	3-30.2A
<a href="#">Area Chief Medical Officer</a>	3-30.2B
<a href="#">Indian Health Service Hospital Medical Director or Clinical Director</a>	3-30.2C
<a href="#">Indian Health Service Hospital or Ambulatory Clinic Chief Executive Officer</a>	3-30.2D
<a href="#">Indian Health Service Hospital or Ambulatory Clinic Pharmacy Director</a>	3-30.2E
<a href="#">General Principles</a>	3-30.3
<a href="#">Pain Management</a>	3-30.3A
<a href="#">Pain Assessment Training</a>	3-30.3B
<a href="#">Pain Assessment</a>	3-30.3C
<a href="#">Pain Treatment</a>	3-30.3D
<a href="#">Inappropriate Treatment of Pain</a>	3-30.3E
<a href="#">Use Based on Sound Clinical Judgement</a>	3-30.3F
<a href="#">Compliance</a>	3-30.3G

[Home](#)  
[Parts and Chapters](#)  
[Circulars](#)  
[Special General Memorandums \(SGMs\)](#)  
[General Administration Manual \(GAM\)](#)  
 Delegations of Authority:  
[Commissioned Corps](#)  
[Program](#)  
[Personnel](#)  
[Administrative](#)  
[Transmittal Notices](#)  
[Organizational Charts](#)  
[Functional Statements](#)  
 Questions or Comments. Please contact the [Content Manager](#).

# IHS Chronic Non-Cancer Pain Management Policy

- Released in June 2014
- A model policy – covers assessment, treatment, management of chronic pain programs
- Several years in the making
- CAPT Frances Placide, RADM Dawn Wyllie, CAPT Cynthia Gunderson, Dr. Steve Sanders, CAPT Miles Rudd, CAPT Tracie Patten, CDR Ted Hall, Dr. Chris Fore, Dr. Beverly Cotton, Dr. Susan Karol, Dr. Charlene Avery, and others

# IHS Pain Management Website

www.ihs.gov/painmanagement/

The Top 10...ative Myths Simple Food... Real Simple Prescription ...dical Letter Air Mobilit...- AMC Travel Home | AAAP TeachingPh... Preceptors The Heart ...s on Change why change i... simplicity

U.S. Department of Health and Human Services

**Indian Health Service**  
The Federal Health Program for American Indians and Alaska Natives

A to Z Index • Employee Resources • Feedback

Search ihs.gov Search

Home About IHS Locations for Patients for Providers Community Health Career Opportunities Newsroom Contact Us

IHS Home • for Providers • Health & Wellness Programs • Pain Management

Share This Page: [Social Media Icons]

## Pain Management

- › Proper Patient Assessment
- › Substance Screening
- › Treatment Planning
- › Monitoring
- › Informed Consent
- › Safe Storage of Medications
- › Disposal
- › Legal Considerations for Prescribers
- › Contact Us

## Pain Management



### Meeting the Needs of Chronic Pain Patients

Meeting the needs of patients struggling with chronic pain while at the same time preventing the illegal or harmful use of opioids are two important challenges physicians face. This website on pain management for patients with chronic pain offers basic information about managing chronic pain-including opioid prescribing-with references to more detailed, authoritative materials. Please make use of the materials mentioned throughout this site.

If you decide to use some of the information from this site, make sure you understand and consider the following:

The information available on this site is intended for adults who are licensed health care professionals and for patients. However, this site is not a substitute for clinical judgment and does not offer medical advice. Patients should consult their physicians or, in serious cases, contact emergency services. Health care professionals should confirm information available on this site with other sources.

# IHS Pain Management Websiten

- Patient Assessment, including Substance Screening
- Treatment Planning
- Monitoring
- Informed Consent, Management Agreements
- Safe Storage and Disposal of Meds
- Legal Considerations for Prescribers
- CAPT Tracie Patten, CDR Ted Hall

# Pain Management Website 2.0

- Maternal – Child Section
  - Neonatal Abstinence Syndrome
  - Breastfeeding Guidelines
  - Pregnancy Guidelines
  - Patient Education Material
- Naloxone Material
  - Overdose Prevention, First Responder Material
- Dr. Anne Merewood, CAPT Cynthia Gunderson, several others

# Near Future Resources

- Enforcement Guide
  - CDR Michael Verdugo, CDR David Axt
- Prescription Drug Monitoring Circular
  - CAPT Cynthia Gunderson
- Resource Matrix
  - Dr. Beverly Cotton, Dr. Marcie Ronyak, Walter Castle

# SAMHSA Website

www.samhsa.gov

The Top 10...ative Myths Simple Food... Real Simple Prescription ...dical Letter Air Mobilit...- AMC Travel Home | AAAP TeachingPh... Preceptors The Heart ...s on Change why change i... simplicity

Home Newsroom Site Map Contact Us

Search SAMHSA.gov Search

Facebook Twitter YouTube Blog

Find Help Topics Programs & Campaigns Grants Data Priorities About Us Publications

SHARE+

Year	Alcohol Use (%)	Binge Alcohol Use (%)
2002	28.8*	19.3*
2003	29.0*	19.2*
2004	28.7*	19.6*
2005	28.2*	18.8*
2006	28.4*	19.0*
2007	28.0*	18.7*
2008	26.5*	17.5*
2009	27.2*	18.2*
2010	26.2*	16.9*
2011	25.1*	15.8*
2012	24.3*	15.3*
2013	23.8*	14.8*
2014	22.7	14.2

**New report shows drop in underage drinking**  
SAMHSA finds a significant decrease in underage alcohol consumption and binge drinking.  
[Learn More >](#)

Pause

**Find Help**

BEHAVIORAL HEALTH TREATMENT LOCATOR

NATIONAL SUICIDE PREVENTION LIFELINE

NATIONAL HELPLINE

Disaster Distress Helpline

SAMHSA Blog

**SAMHSA in the News**

**06/18/15**  
SAMHSA division director quoted in USA Today article USA Today

**06/08/15**  
SAMHSA position on 42 CFR, part 2 highlighted in Behavioral Healthcare article

**Featured Resource**

Online Training

# SAMHSA Website

- Tribal Training and Technical Assistance Center (TTAC)
  - Community capacity building
- Center for the Application of Prevention Technologies (CAPT)
  - Focused on prevention resources
- Tribal Law and Order Act (TLOA) Implementation
  - Tribal Action Plans, resource toolkits

# Thank You

- Questions? Comments?
- CAPT Harry J Brown, MD
- 406-247-7129
- [harry.brown@ihs.gov](mailto:harry.brown@ihs.gov)