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MEDICINE™**

National overview: America's opioid epidemic

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July 2018



**National
landscape**

**AMA
Opioid
Task
Force**

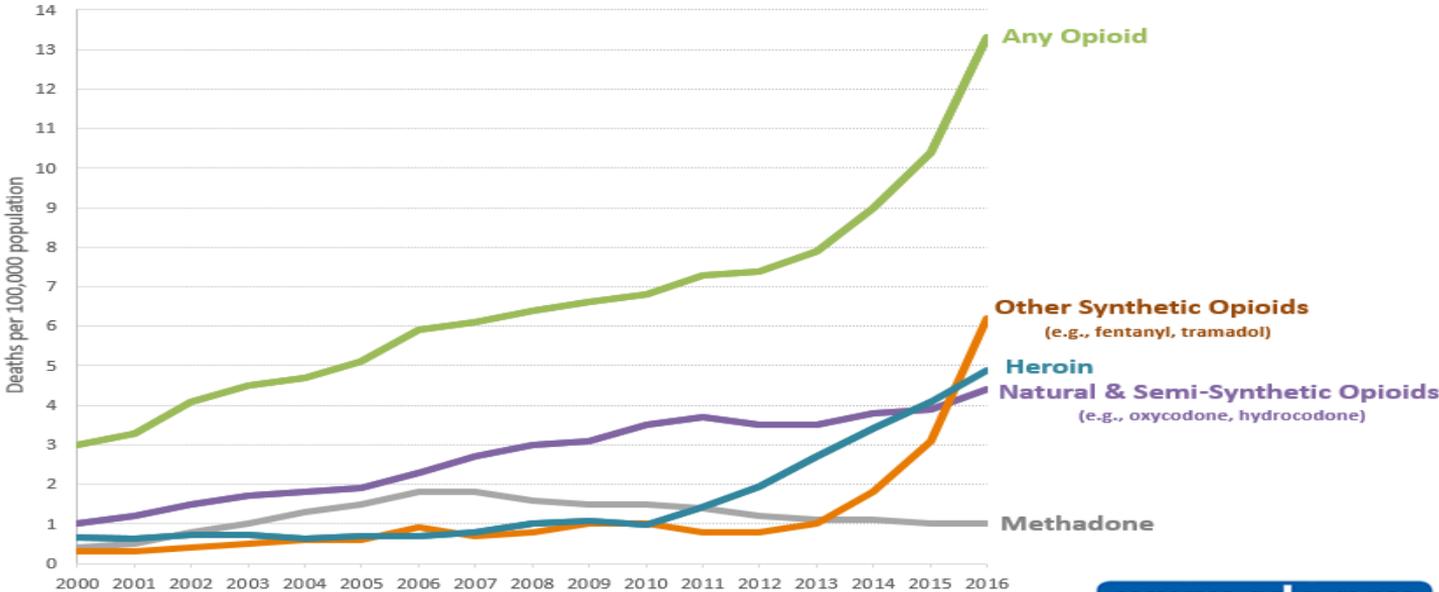
**Policy
efforts**

**Barriers
to care**

**Reasons
for
optimism**

Illicit fentanyl and heroin leading causes of opioid-related mortality

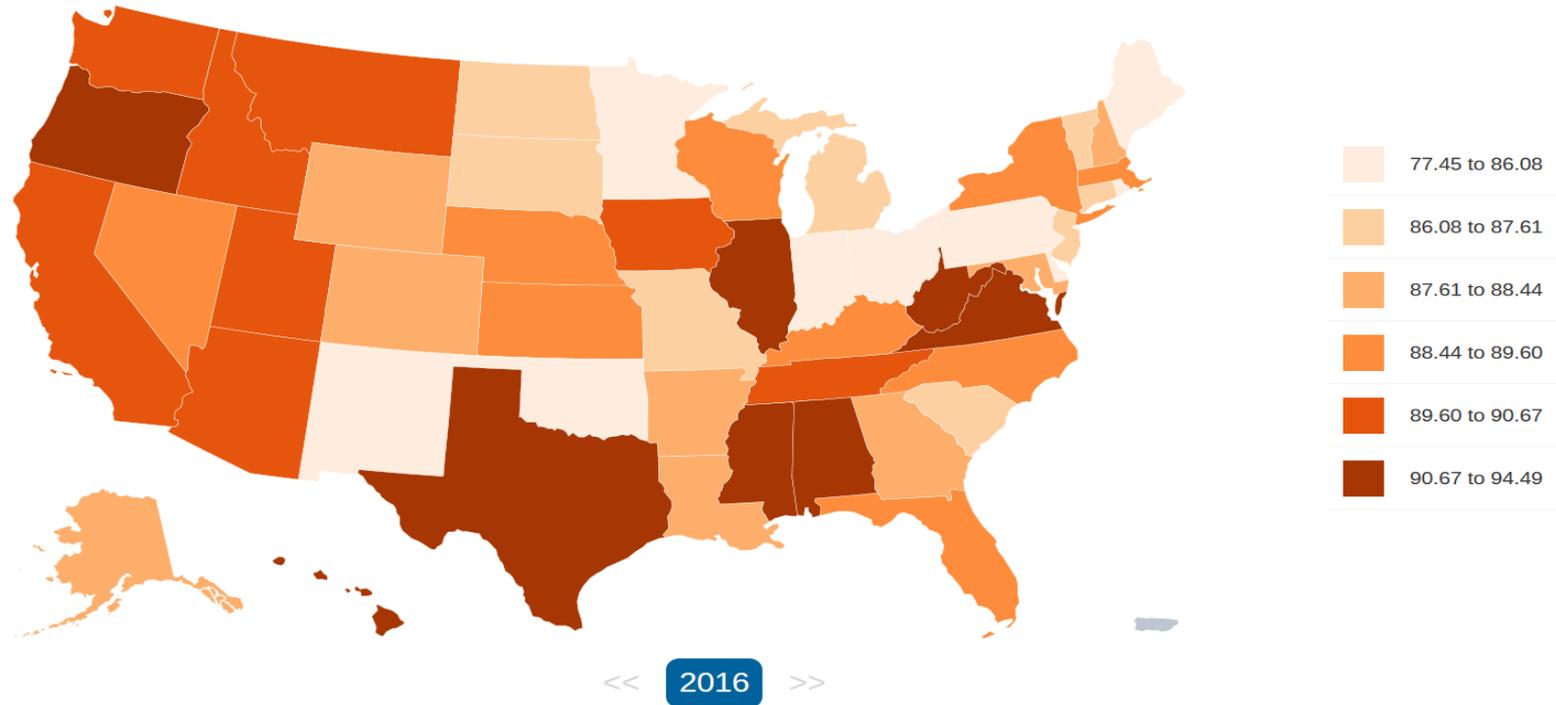
Overdose Deaths Involving Opioids, by Type of Opioid, United States, 2000-2016



SOURCE: CDC/NCHS, National Vital Statistics System, Mortality. CDC WONDER, Atlanta, GA: US Department of Health and Human Services, CDC; 2016. <https://wonder.cdc.gov/>.



Percent population needing but not receiving treatment for illicit drug use



Source: NSDUH, <http://opioid.amfar.org/indicator/pctunmetneed>

AMA Opioid Task Force recommendations

PDMPs

Register for and use your state PDMP to make more informed prescribing decisions

TAKE ACTION >

Education

Ensure you have the education and training on effective, evidence-based treatment

TAKE ACTION >

Treatment

Support and advocate for comprehensive care for patients in pain and those with a substance use disorder

TAKE ACTION >

Stigma

Removing stigma is essential to ending the nation's opioid epidemic

TAKE ACTION >

Naloxone

Expand access to naloxone in the community and through co-prescribing

TAKE ACTION >

Safe Storage and Disposal

Work with your patients to promote safe storage and disposal of opioids and all medications

TAKE ACTION >

www.end-opioid-epidemic.org

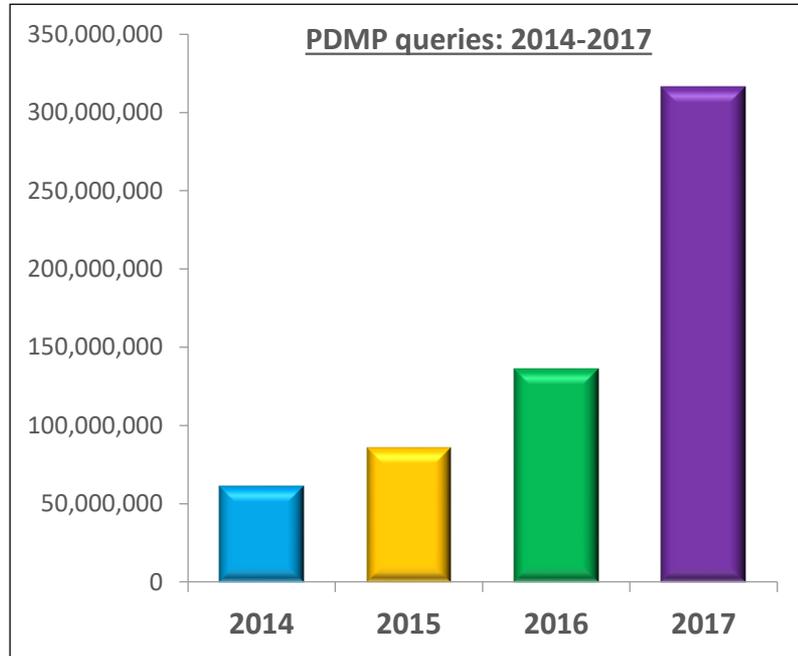
AMA works with, advocates to and learns from everyone who can make a difference



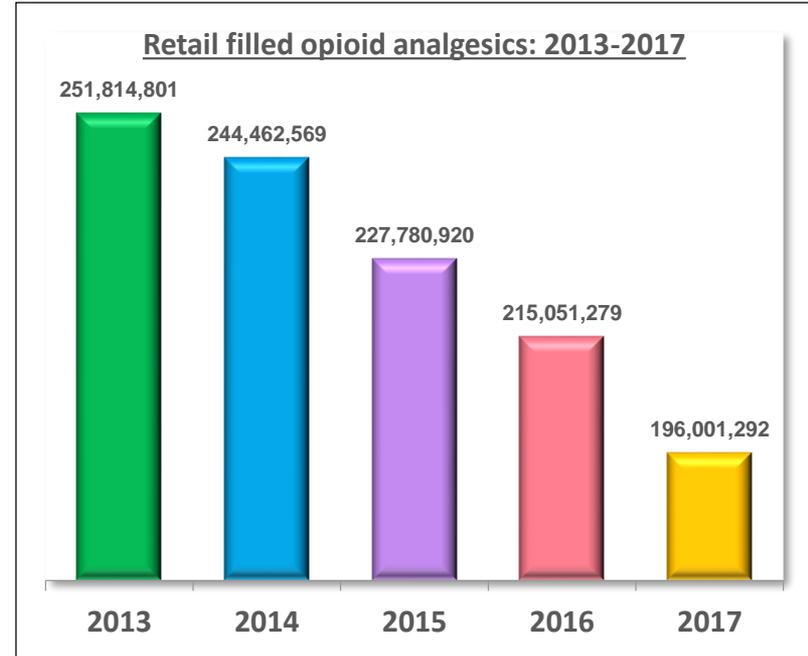
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Physicians taking action: PDMP use increasing; opioid supply decreasing



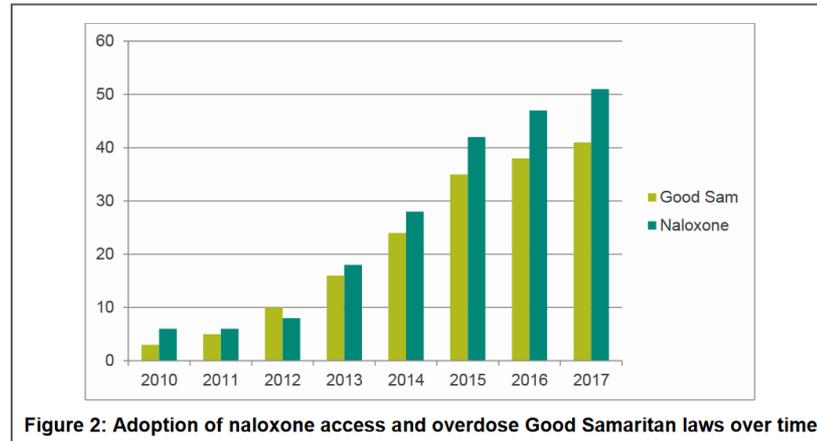
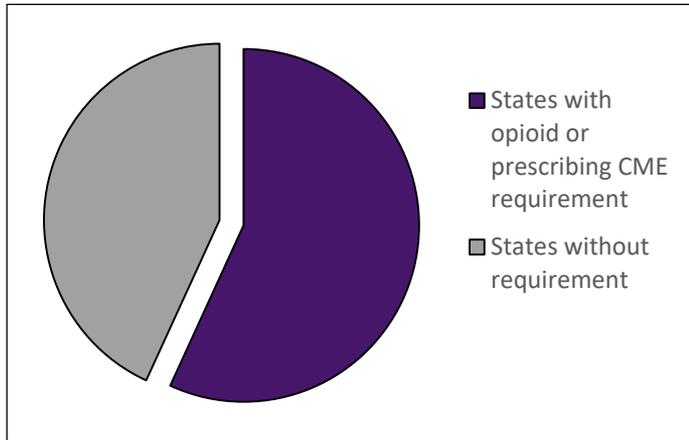
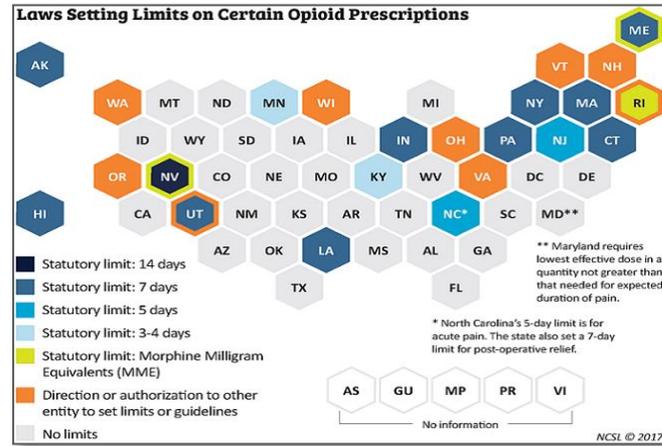
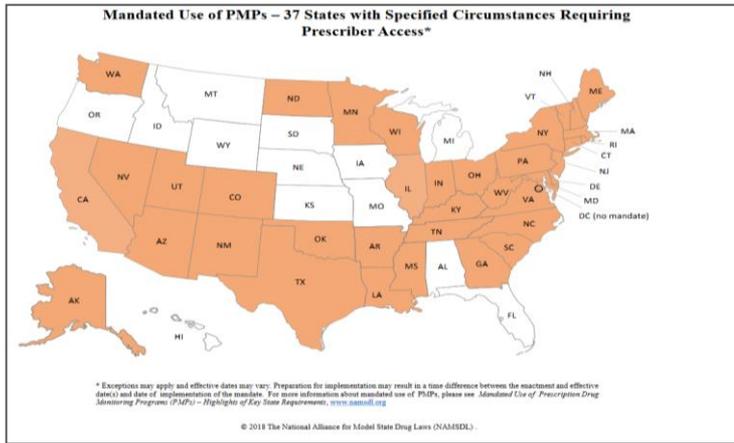
Source: AMA survey of state PDMP administrators



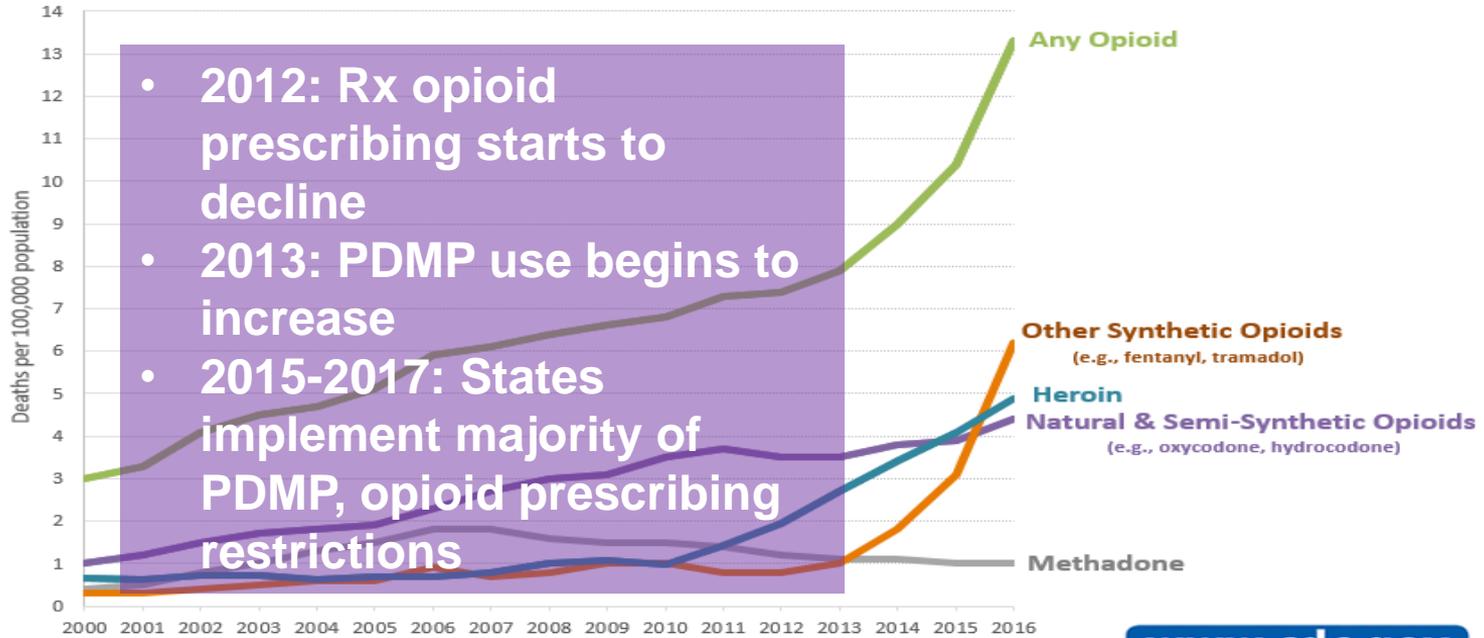
Source: Xponent, IQVIA; PayerTrak, IQVIA

AMA Opioid Task Force recommendations and results

- **Use state PDMPs to help inform clinical decision making**
 - 2014: 60M queries / 2017: 300M queries
- **Enhance our education**
 - 2015-2016: 118,000 CME and other courses accessed, attended and viewed
 - 2017: 549,000+ CME and other courses accessed, attended and viewed
- **Co-prescribe naloxone to patients at risk of overdose**
 - Naloxone Rx's increased in 2017, from approx. 3,500 to 8,000 Rx's dispensed per week
 - Every state now has an expanded naloxone access law based on AMA model state legislation – up from about 25 in 2014
- **Become trained and certified to treat patients with a substance use disorder**
 - There are now more than 50,000 physicians certified to provide in-office buprenorphine to treat patients with a substance use disorder; 15,000 in just the past year



Overdose Deaths Involving Opioids, by Type of Opioid, United States, 2000-2016



- 2012: Rx opioid prescribing starts to decline
- 2013: PDMP use begins to increase
- 2015-2017: States implement majority of PDMP, opioid prescribing restrictions

SOURCE: CDC/NCHS, National Vital Statistics System, Mortality. CDC WONDER, Atlanta, GA: US Department of Health and Human Services, CDC; 2016. <https://wonder.cdc.gov/>.

www.cdc.gov
Your Source for Credible Health Information

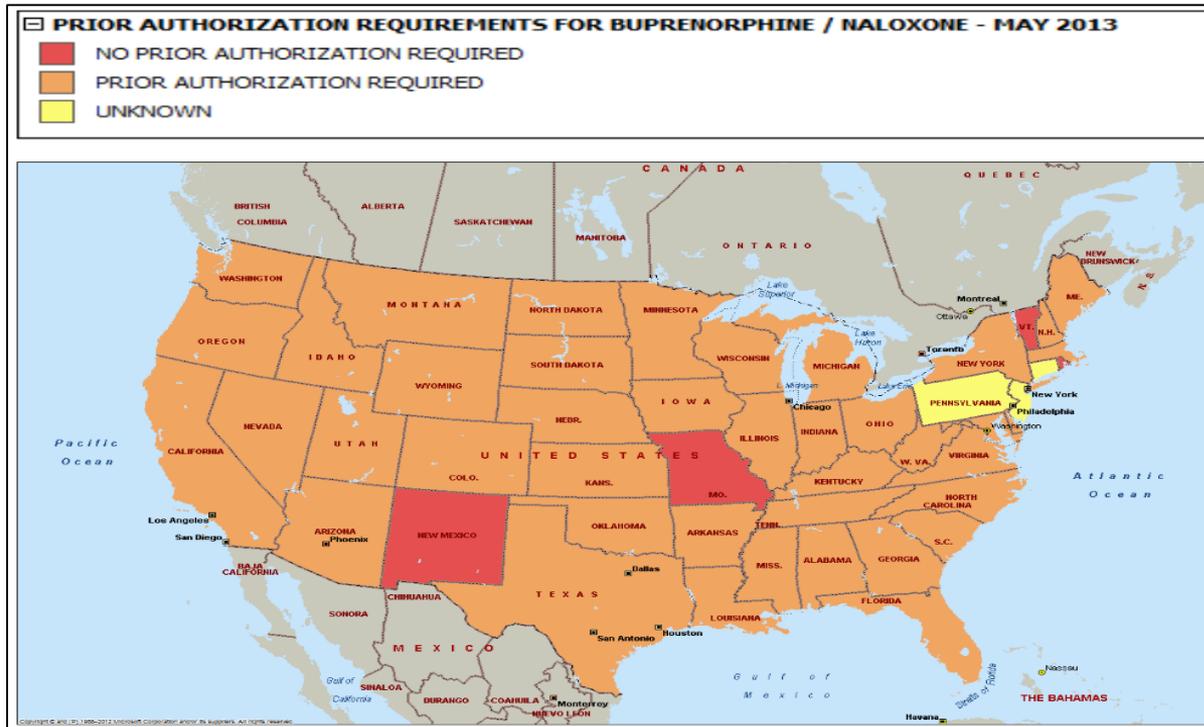
Which guideline/recommendation/best practice/policy is a physician supposed to follow?



STATE LAWS



Barriers to MAT are nationwide



“Advancing Access to Addiction Medications: Implications for Opioid Addiction Treatment.” The American Society of Addiction Medicine, 2013.
https://www.asam.org/docs/default-source/advocacy/aaam_implications-for-opioid-addiction-treatment_final.pdf?sfvrsn=cee262c2_25

“[Cost and prior authorization] makes me want to go out and use [drugs],” Mandy said. “It’s way easier to get opiates or heroin. ... It’s so much easier than dealing with this bullshit.”

<https://www.vox.com/science-and-health/2018/6/4/17388756/opioid-epidemic-health-insurance-buprenorphine>

Chicago Tribune

WEDNESDAY, MAR. 7, 2018

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By Fred Schulte
JULY 3, 2018
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HUFFPOST PERSONAL 07/05/2018 08:31 am ET | Updated 3 hours ago

There's Another Opioid Crisis We Don't Talk About And I'm Trapped In The Middle Of It

Rick Lunkenheimer
Guest Writer



Chronic pain patients, overlooked in opioid crisis, getting new attention from top at FDA

Jayne O'Donnell and Josephine Chu, USA TODAY Published 3:17 p.m. ET July 2, 2018 | Updated 4:29 p.m. ET July 3, 2018



A few of the reasons why we have reason to be optimistic



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Adolescent Substance Use and Addiction Program



There is much more work to do

- Ensure all formularies include all FDA-approved forms of medication assisted treatment (MAT)
- Remove administrative barriers to treatment, including prior authorization.
- Increase oversight and enforcement of parity laws for mental health and substance use disorders
- Ensure patients have access to affordable, non-opioid pain care.
- Put an end to stigma. Patients with pain or substance use disorders deserve the same care and compassion as any other patient with a chronic medical condition.

