

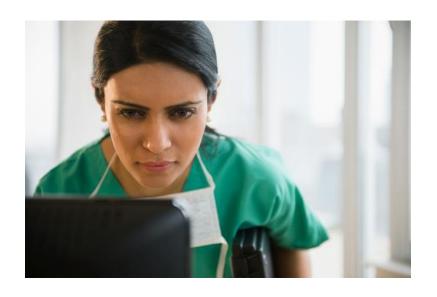
Escalation of the Opioid Epidemic During COVID-19

Patrice A. Harris, MD, MA
American Medical Association
Immediate Past President

Winter 2020

Progress on opioids tempered by increased mortality

- Opioid prescribing has decreased by 37% since 2014.
- PDMP registration and use continues to increase; more than 739 million queries were made in 2019.
- Treatment capacity is increasing. More than 85k physicians are certified to provide buprenorphine to treat opioid use disorder.
- Physicians are enhancing their education more than 700k physicians and others took CME in pain management and substance use disorders in 2019.
- Naloxone prescriptions increased to nearly 1 million in 2019.

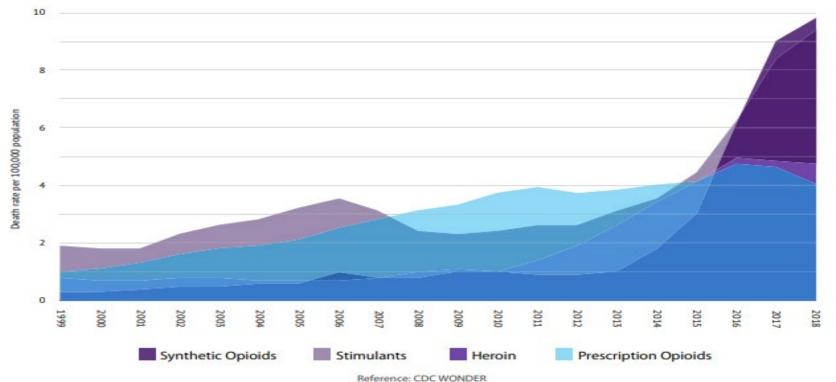


Results of AMA Opioid Task Force 2020 Progress Report





Concerning trends fueled by illicit drug-related overdose and death



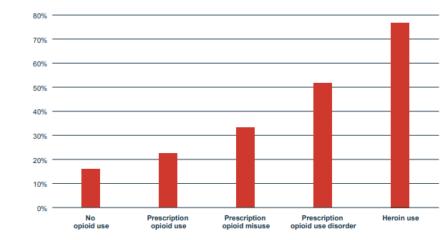




Substance Use Disorders and criminal justice

- A person using opioids is more than 3x as likely than non-opioid user to become part of the criminal justice system. (NSDUH)
- Nearly one-third to one-half of inmates report withdrawal or symptoms of severe drug dependence.

 Criminal Justice Involvement Among Adults in the United States with Varying Levels of Opioid Use, 2015-2016



Source: Winkelman et al. (2018). All pairwise comparisons significant at p < .05.

SAHMSA report: Use of Medication-Assisted Treatment for Opioid Use Disorders in Criminal Justice Settings



Commitment to evidence-based care

- Expanding and improving physician education about as it relates to opioid use disorder
- Increasing access to MOUD and comprehensive, multidisciplinary, multimodal pain care;
- Removing the stigma associated with having an opioid use disorder or chronic pain
- Advocating for sound policies and remove obstacles that stand in the way of timely treatment.







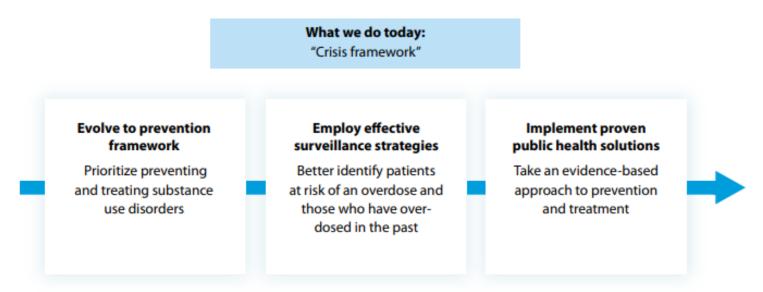
Recommendations of AMA's Opioid Task Force

- Remove prior authorization, step therapy and other administrative burdens for MAT.
- Enforce state and federal mental health and substance use disorder parity laws.
- Remove barriers to pain care.
- Increase access to treatment for pregnant women and mothers.
- Support access to treatment within the civil and criminal justice systems.





What a proactive, coordinated approach looks like



What we must do tomorrow:

Integrated, sustainable, predictable and resilient public health system

2020 AMA Opioid Task Force Progress Report





States are eliminating prior authorization for MOUD

- October 2018 Landmark agreement in Pennsylvania ends prior auth for MAT under state-regulated plans.
- 2019 15 states have introduced legislation or taken other action based on AMA Model Legislation —a dozen have been enacted.
- AMA calls on other states to remove barriers to evidence-based care for opioid use disorder.



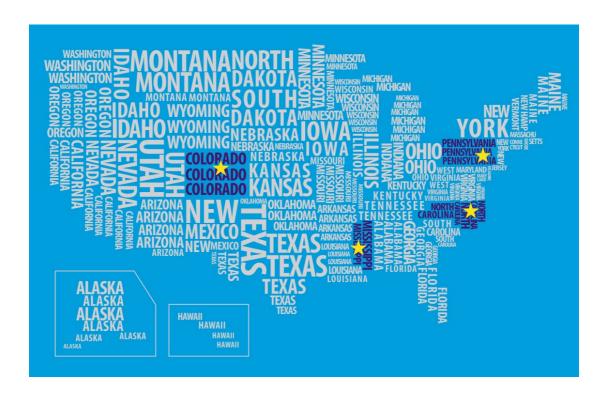




National Opioid Policy Roadmap

Keys areas to take action:

- Improving access to evidencebased treatment for opioid use disorder.
- Enforcing parity laws.
- Addressing network adequacy and enhancing workforce.
- Expanding pain management options.
- Improving access to naloxone.
- Evaluating policy success and barriers.







Stigma of Opioid Use Disorder impedes solutions



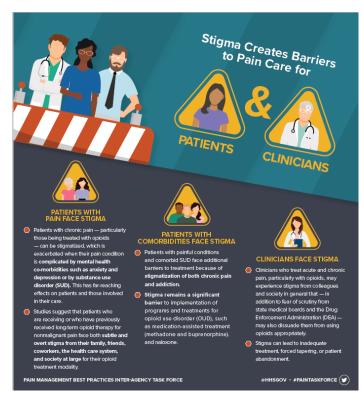




Pain management best practices

- Calls for individualized patient-care decisions – not arbitrary thresholds;
- Supports PDMP use when clinically appropriate;
- Emphasizes need for access and affordability of comprehensive, multidisciplinary, multimodal pain care;
- Recognizes urgent need to address stigma as a barrier to care.

Recommendations of HHS Pain Management Best Practices Inter-Agency Task Force Report, 2019







We need to harness all available evidence

Racial/Ethnic and Age Group Differences in Opioid and Synthetic Opioid– Involved Overdose Deaths Among Adults Aged ≥18 Years in Metropolitan Areas — United States, 2015–2017

Kumiko M. Lippold, PhD1,2; Christopher M. Jones, PharmD3; Emily O'Malley Olsen, PhD4; Brett P. Giroir, MD1

https://www.cdc.gov/mmwr/volumes/68/wr/pdfs/mm6843a3-H.pdf

Nonfatal Drug and Polydrug Overdoses Treated in Emergency Departments — 29 States, 2018–2019

Stephen Liu, PhD1; Lawrence Scholl, PhD1; Brooke Hoots, PhD1; Puja Seth, PhD1

https://www.cdc.gov/mmwr/volumes/69/wr/pdfs/mm6934a1-H.pdf







Issue brief: Reports of increases in opioid- and other drug-related overdose and other concerns during COVID pandemic

*Updated October 31, 2020

In addition to the ongoing challenges presented by the COVID-19 global pandemic, the nation's opioid epidemic has grown into a much more complicated and deadly drug overdose epidemic. The AMA is greatly concerned by an increasing number of reports from national, state and local media suggesting increases in opioid- and other drug-related mortality—particularly from illicitly manufactured fentanyl and fentanyl analogs. The media reports below cite data from multiple and varied sources, including national, state and local public health agencies, law enforcement, emergency medical services, hospitals, treatment centers, research journals and others.

AMA MEMBERSHI MOVES

Mitigating the impact of COVID-19 on the overdose epidemic

The AMA calls on states to:

- Take advantage of DEA and SAMHSA guidance to continue/increase access to buprenorphine;
- Take advantage of increased flexibility to provide Take-Home doses for methadone;
- Increase access to syringe service programs







COVID-19 Buprenorphine Provider Survey

Key findings:

- 78 percent said COVID-19 pandemic has caused them to put on hold or reduce in-person visits;
- 75 percent have used virtual visits to maintain medication to treat OUD; 48 percent have used it to initiate treatment;
- 76 percent perceive patient satisfaction with virtual visits to maintain medications for OUD.
- Source: AAAP









www.end-overdose-epidemic.org