

Opioid Addiction Treatment Overview & Community Collaboration

Calvert County Behavioral Health
Recovery Rapid Response
& Mobile Crisis Team



CALVERT COUNTY
HEALTH
DEPARTMENT

Drew Fuller, MD, MPH
Medical Director



Anyone is Vulnerable



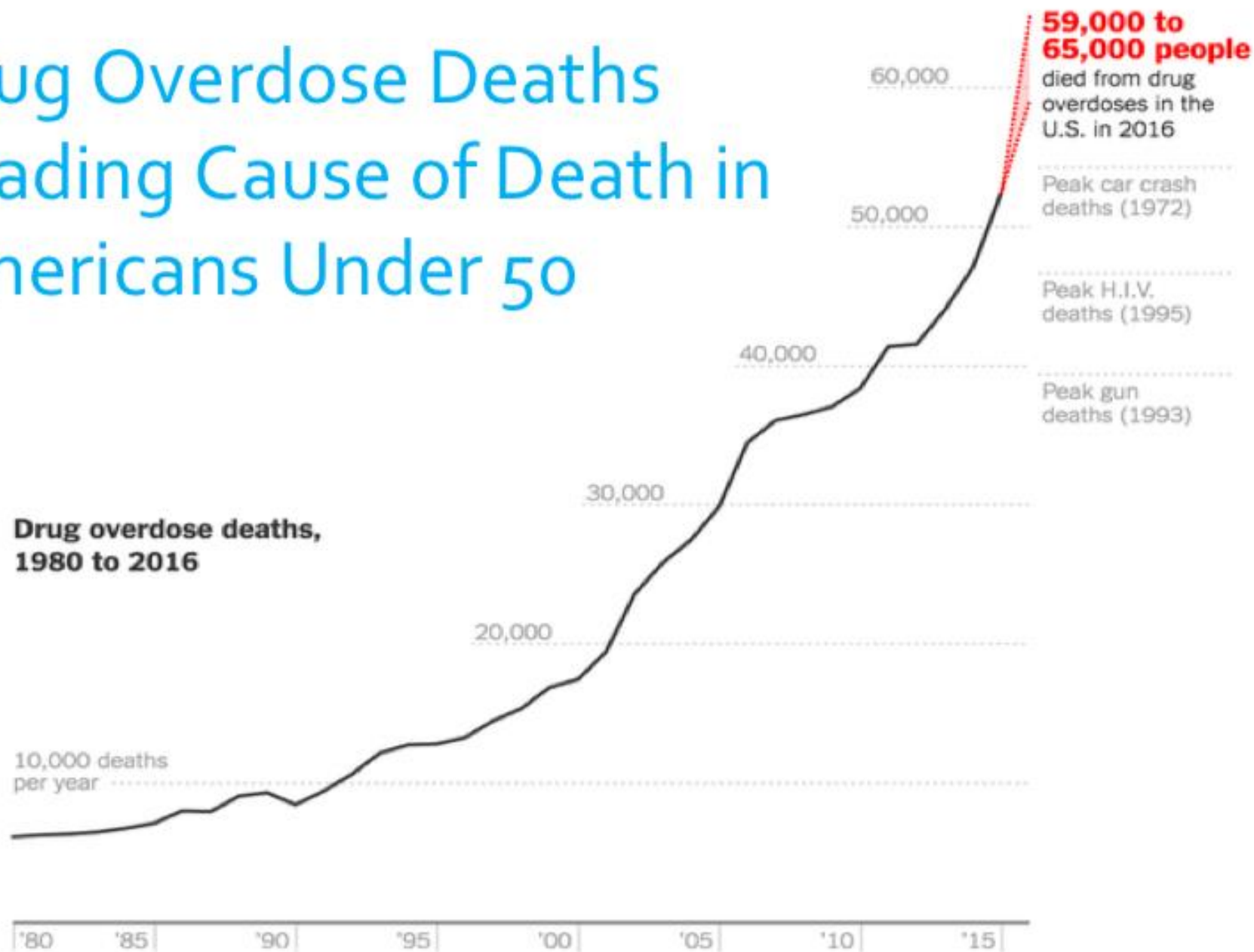
The Great Threat

STIGMA



Drug Overdose Deaths Leading Cause of Death in Americans Under 50

**Drug overdose deaths,
1980 to 2016**



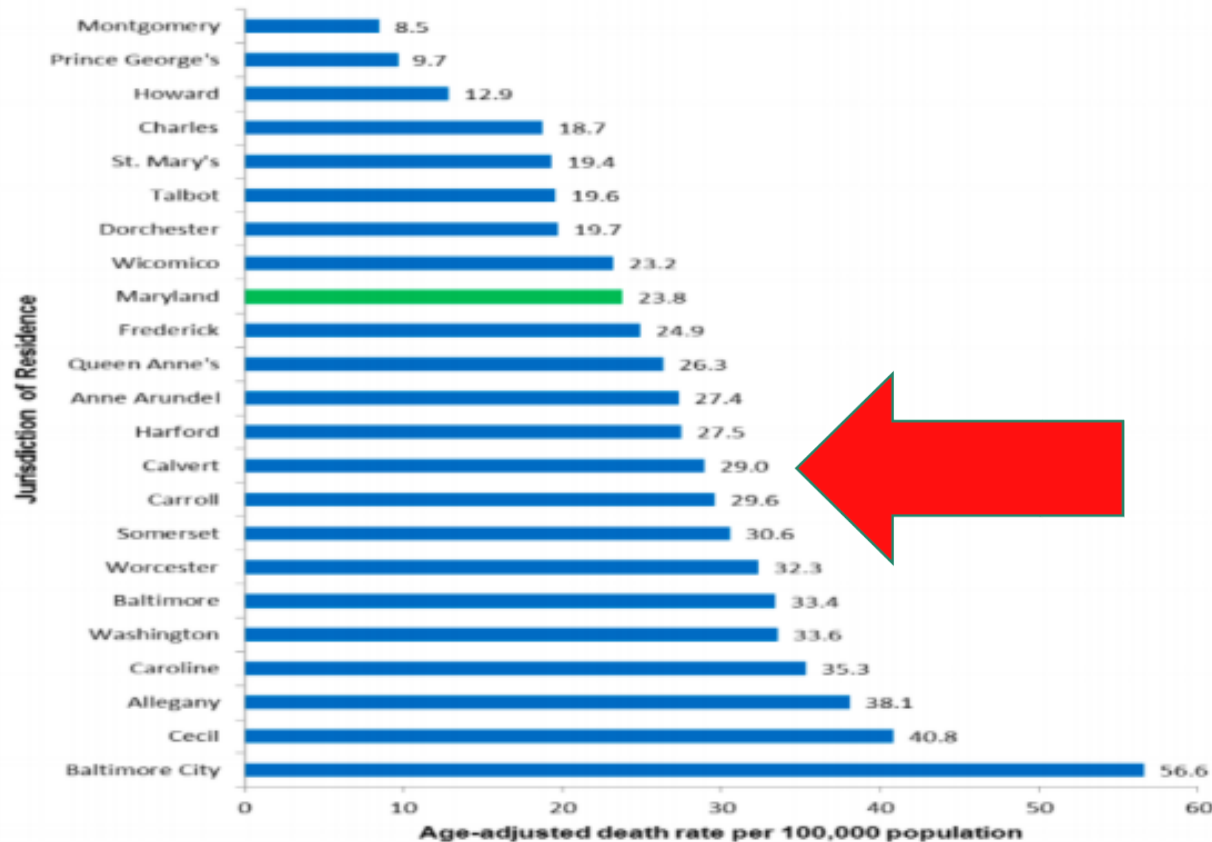
72,000 People Died from Overdose in 2017





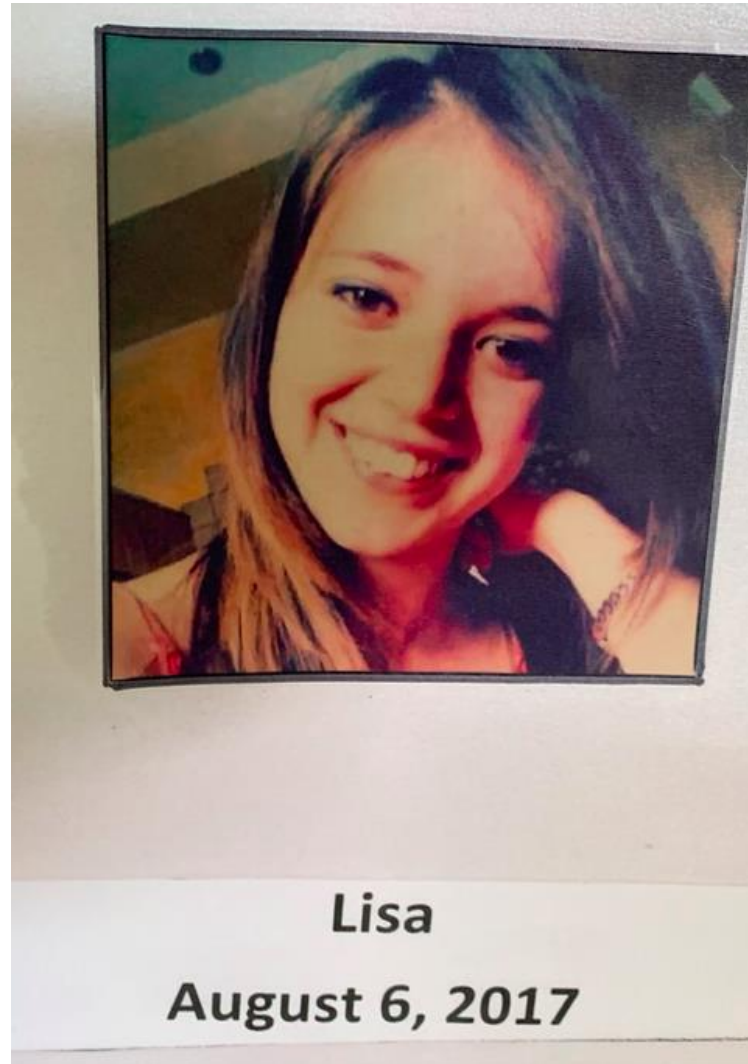
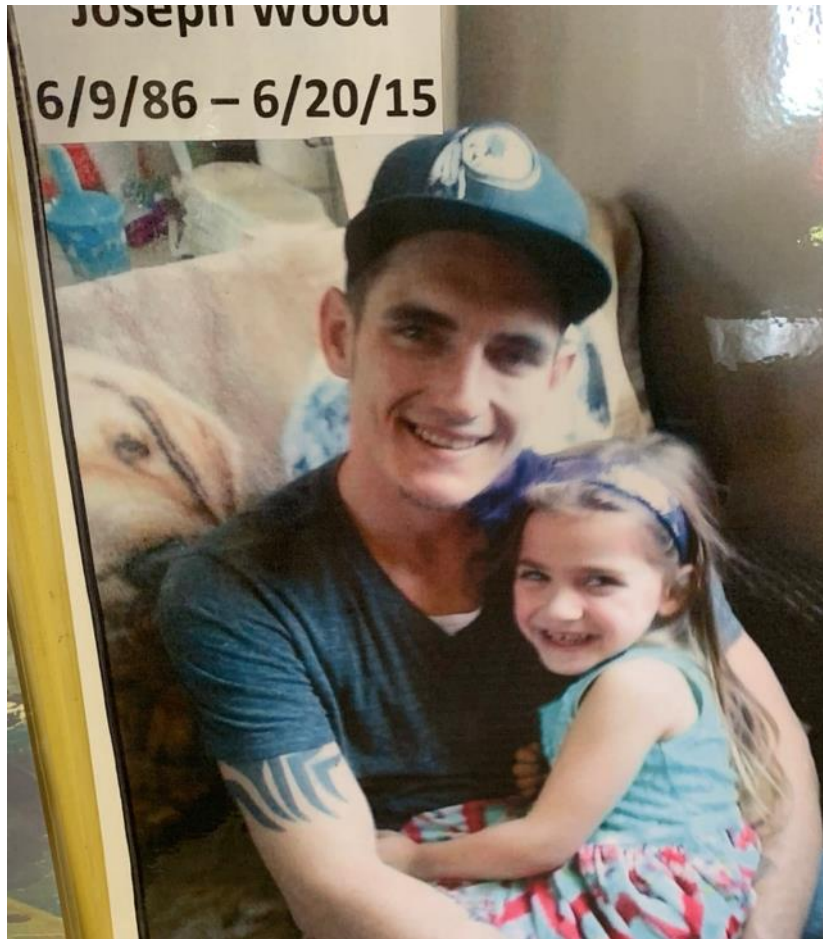
Calvert County – 10th Highest Death Rate in State

Figure 46. Age-Adjusted Mortality Rates^{1,2} for Total Unintentional Intoxication Deaths by Place of Residence,³ Maryland, 2013-2017.



Leading Cause of Death Under Age 49

Real People – Parents & Children in S. Maryland







James Phipps
Jan 17, 1974 - March 18, 2010



Heather Charnley
10/15/82 – 5/3/15

2019 CALVERT COUNTY Heroin/Opioid Overdose Awareness

Overdoses **61** Deaths **14**

24/7 MD Crisis Hotline: 1-800-422-0009

Hope4Calvert.org



CALVERT COUNTY
HEALTH
DEPARTMENT



1 Overdose Death in Calvert County Every

13 Days

Overdose Deaths in Calvert County 2019

	Age
	23
	27
	50
	31
	50
	31
	28
	38
	31
	33
	39
	32
	44
	53
	36
	26
	42
	41

Average Age

34 yo

Young people
with children
are

DYING DAILY



Grandparents as Primary Caregivers



Morphine = 1X
Fentanyl = 100X
Carfentanil = 10,000X

Lethal Dose



Lethal doses of heroin compared to "synthetic" opioids.
New Hampshire State Police Forensic Lab

'Death Pill': Fentanyl Disguised As Other Drugs Linked To Spike In US Overdoses



By DENNIS THOMPSON · HEALTHDAY · August 10, 2016, 12:13 PM

Fake Xanax can be a killer



Prince's Death One Year Later: Investigation Reveals More About His Opioid Fentanyl Use

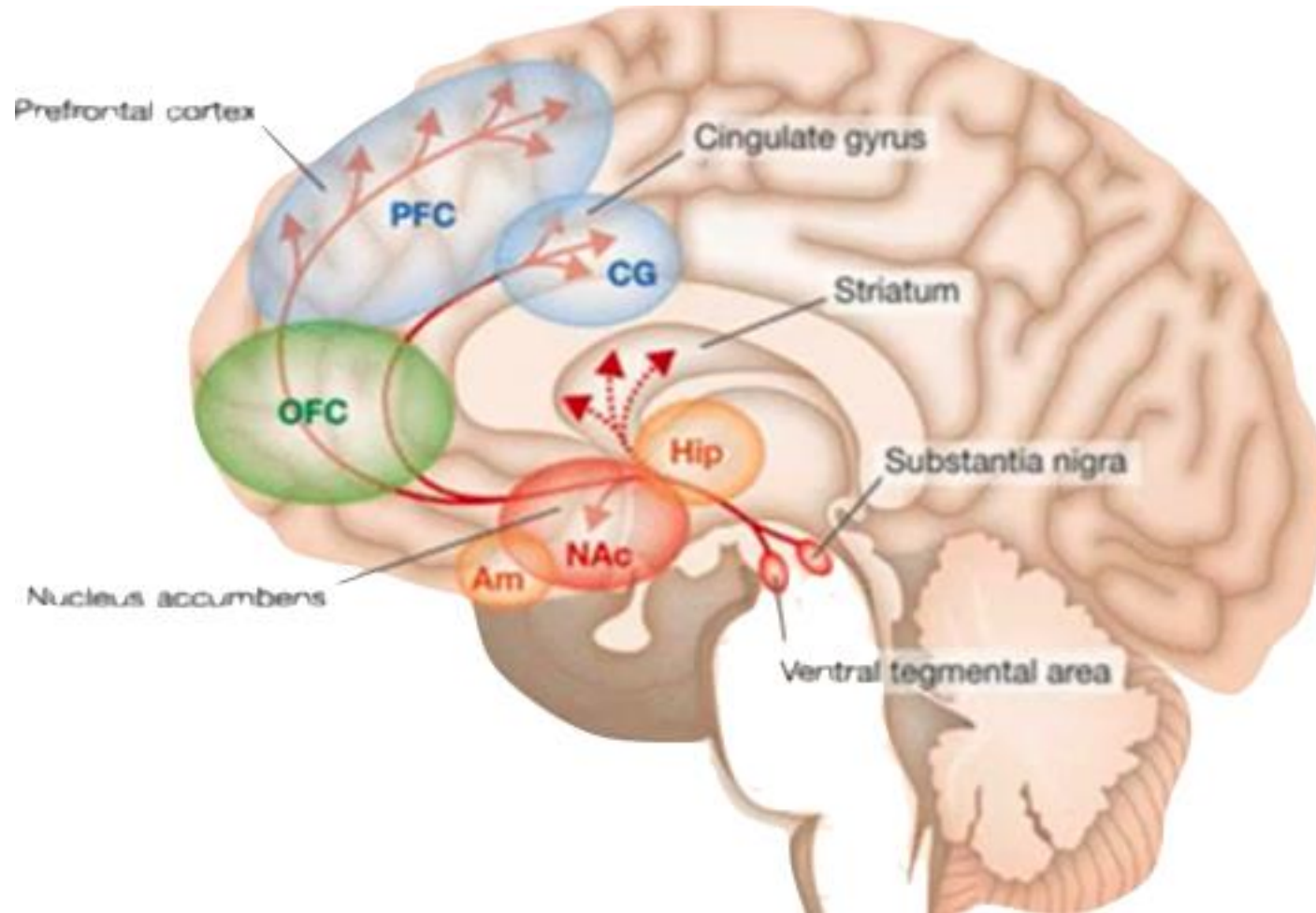
The beloved musician was just 37.



Our investment
managers are
for the long
Just like you

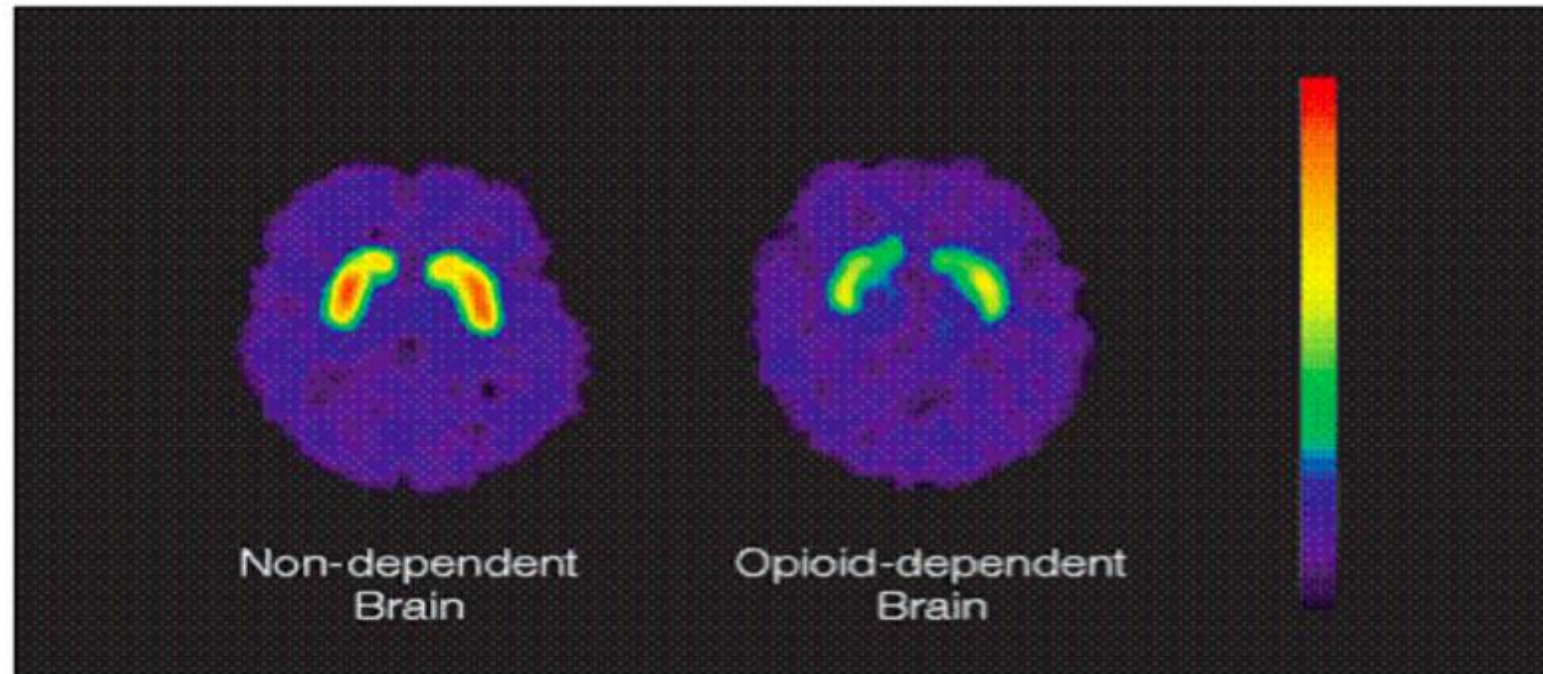
Learn more

Addiction – Treatable Chronic Medical Disease



Biochemical and Structural Changes

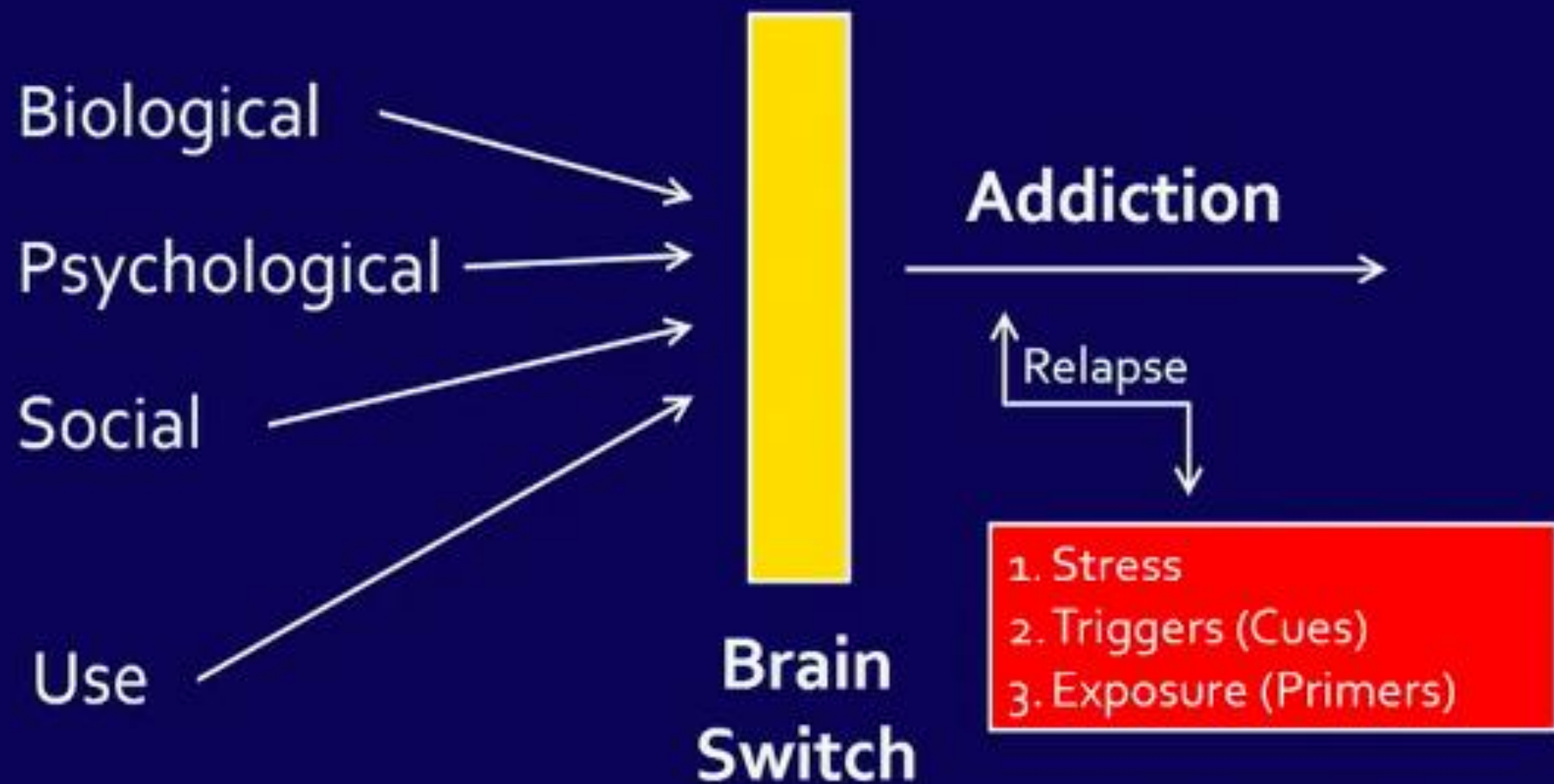
Non-Opioid-Dependent and Opioid-Dependent Brain Images



PET scan images show changes in brain function caused by opioid dependence. The lack of red in the opioid-dependent brain shows a reduction in brain function in these regions.

Reprinted by permission of Nature Publishing Group: *Neuropsychopharmacology*, 1997;16:174-182.

Addiction: A Biopsychosocial Illness



Pediatric Development Disorder

- Use often starts in teenage years
- Adverse Childhood Experiences
 - High ACEs Scores





In Deep





Lifestyle Disease ?



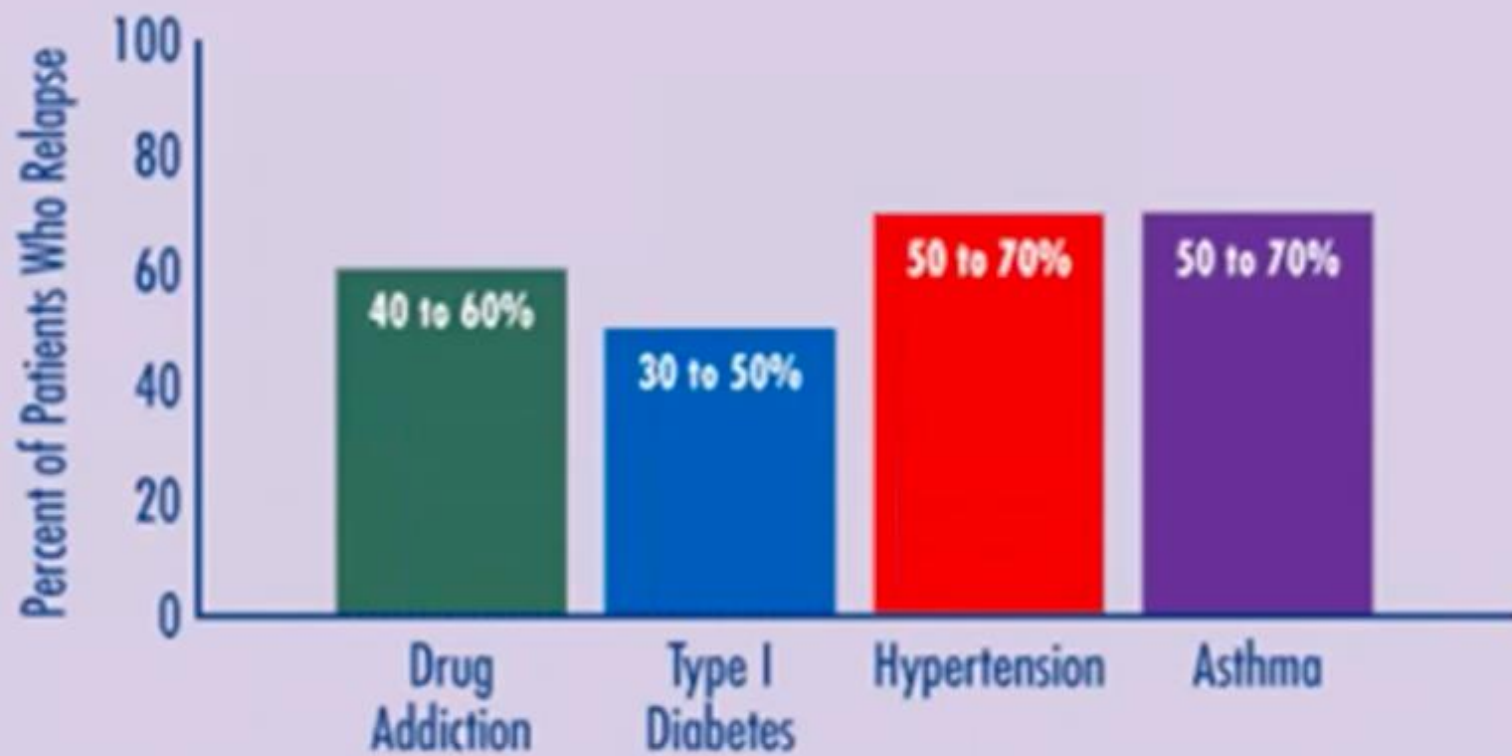
80% Due to Lifestyle Choices

Diabetes Type 2



Relapse rates in chronic diseases

COMPARISON OF RELAPSE RATES BETWEEN DRUG ADDICTION AND OTHER CHRONIC ILLNESSES

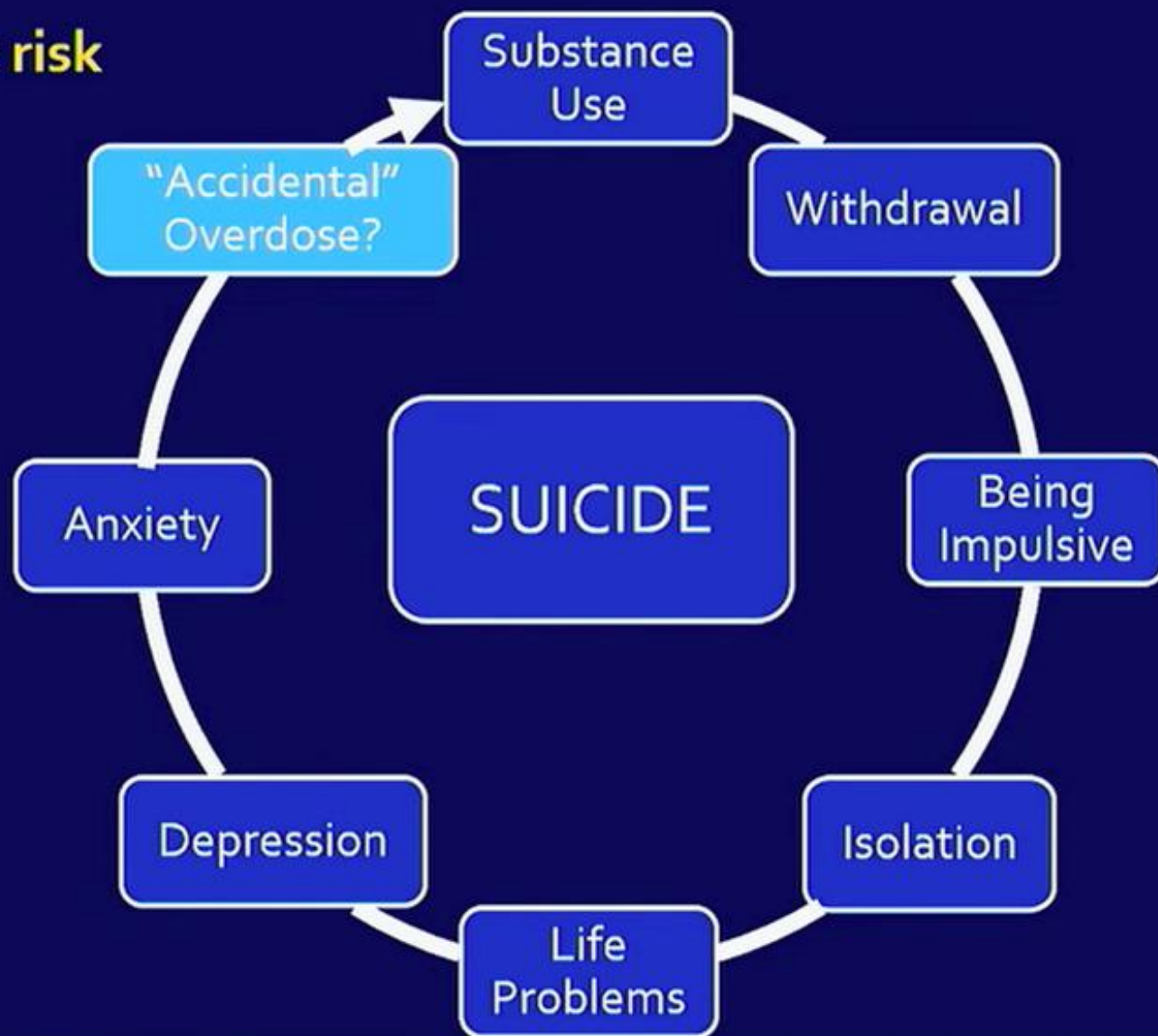


High Death Rate After Overdose
& Narcan (1st responder)

9.9% Mortality (1 year)

Addiction and Suicide

Addiction= 5-10 x risk



Indiana Outbreak of HIV

The New York Times

Rural Indiana Struggles to Contend With H.I.V. Outbreak

Indiana HIV outbreak, hepatitis C epidemic sparks CDC alert

"This is one of the worst documented outbreaks of HIV among IV users in the past two decades."

Dr. Jonathan Mermin,
director of the National
Center for HIV/AIDS, Vir...



HIV outbreak in Indiana grows

Indiana Reports More HIV Cases in Outbreak

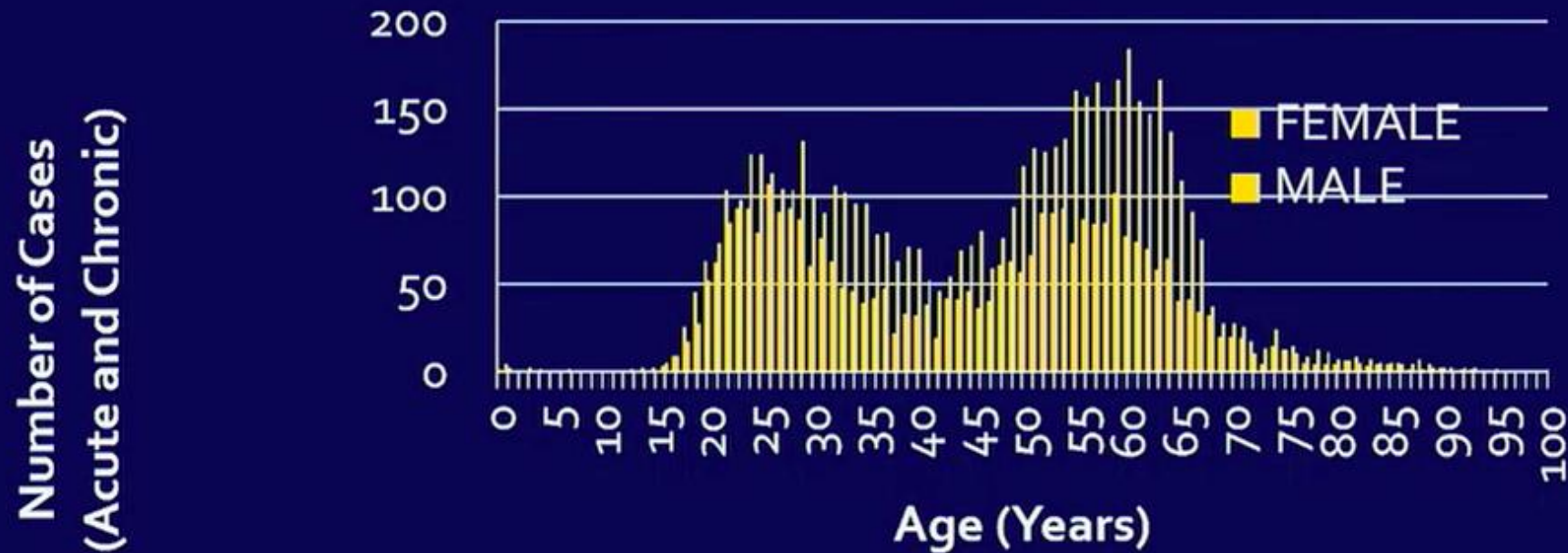
Health officials confirm 120 HIV cases and 10 preliminary positive cases tied to Scott County

Associated Press

April 18, 2015

THE WALL STREET JOURNAL.

Hepatitis C

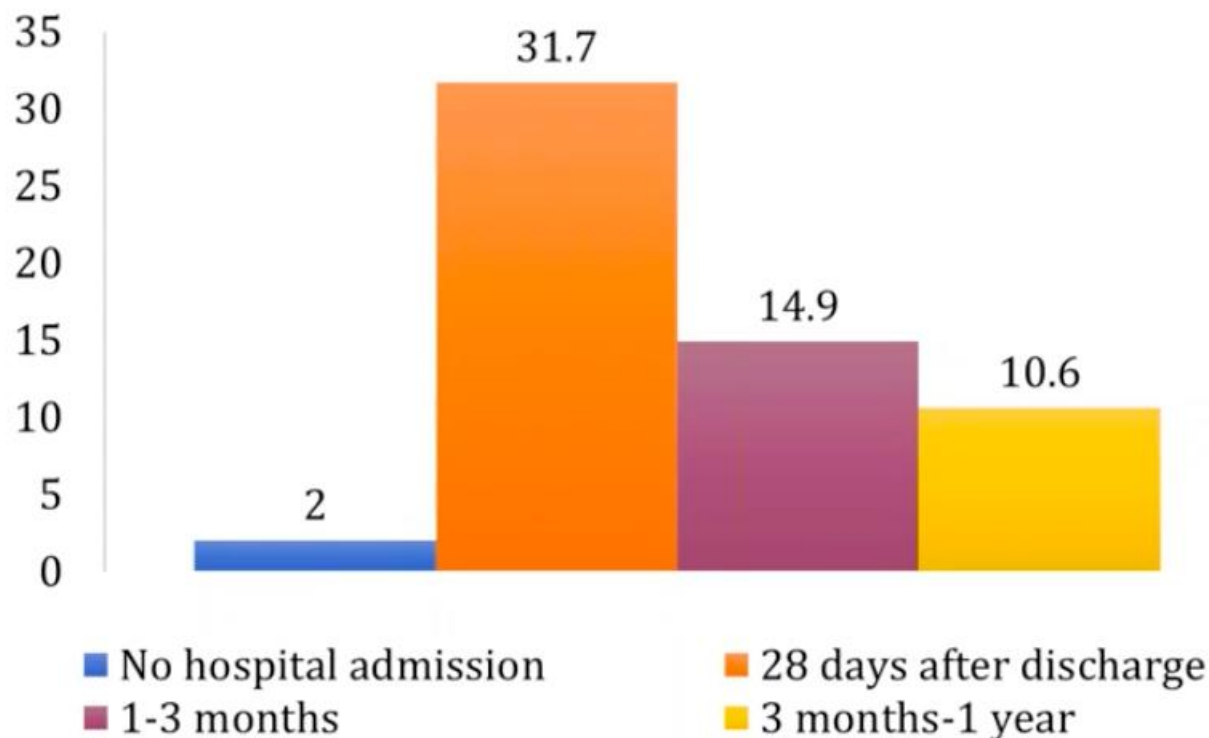


Age Distribution of All Hepatitis C Cases (Confirmed Acute and Confirmed/Probable Chronic) by Sex – New York State (Excluding NYC), 2014

Data Source: New York State Department of Health, Bureau of Communicable Disease Control.

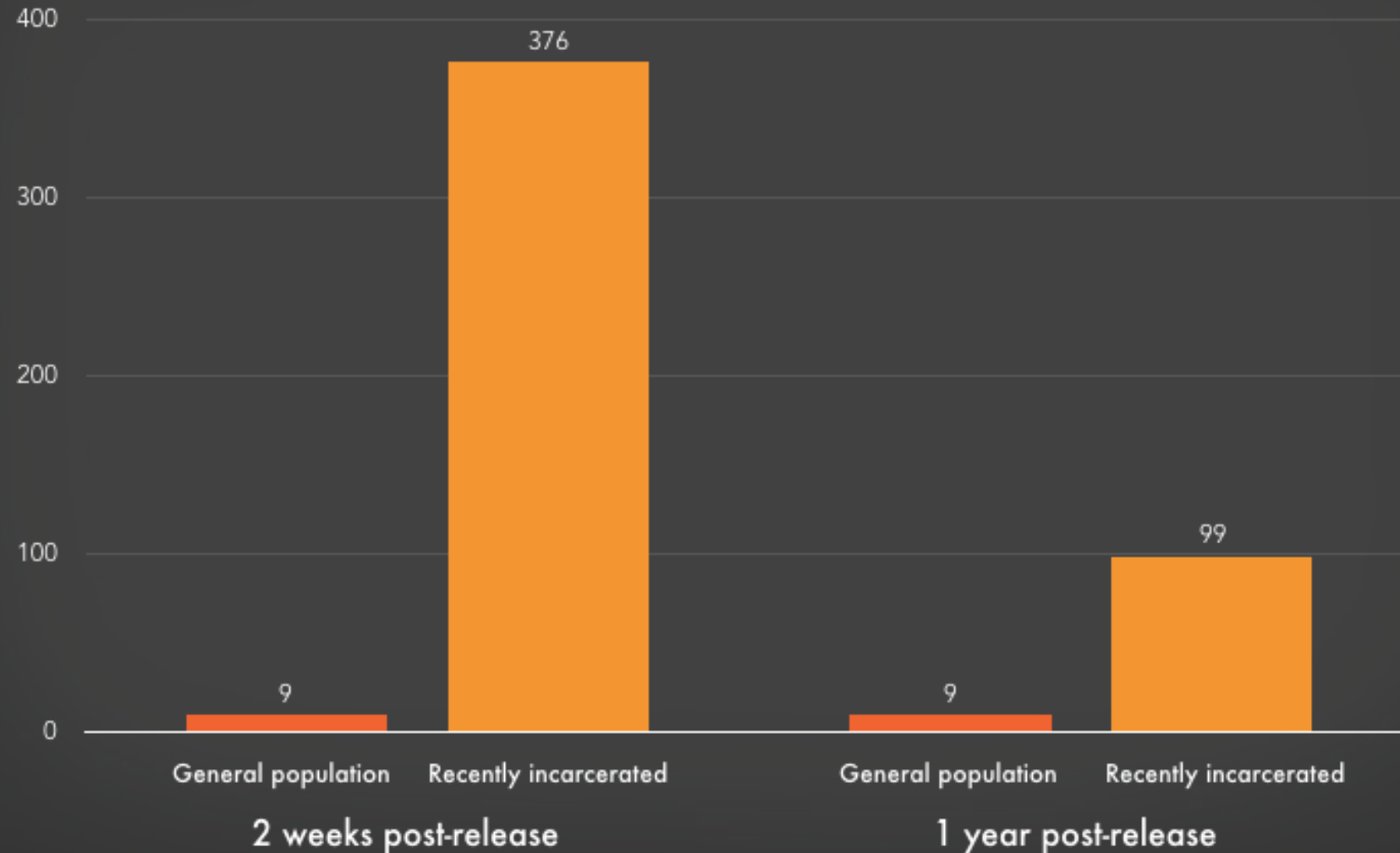
Higher Death Rate after Hospital Admission (if no MAT)

Drug-related death rate per 1000



Recently incarcerated people are over 40 times more likely to die from an opioid overdose

Number of opioid overdose deaths per 100,000 recently incarcerated people in North Carolina compared to rate among the general population in North Carolina



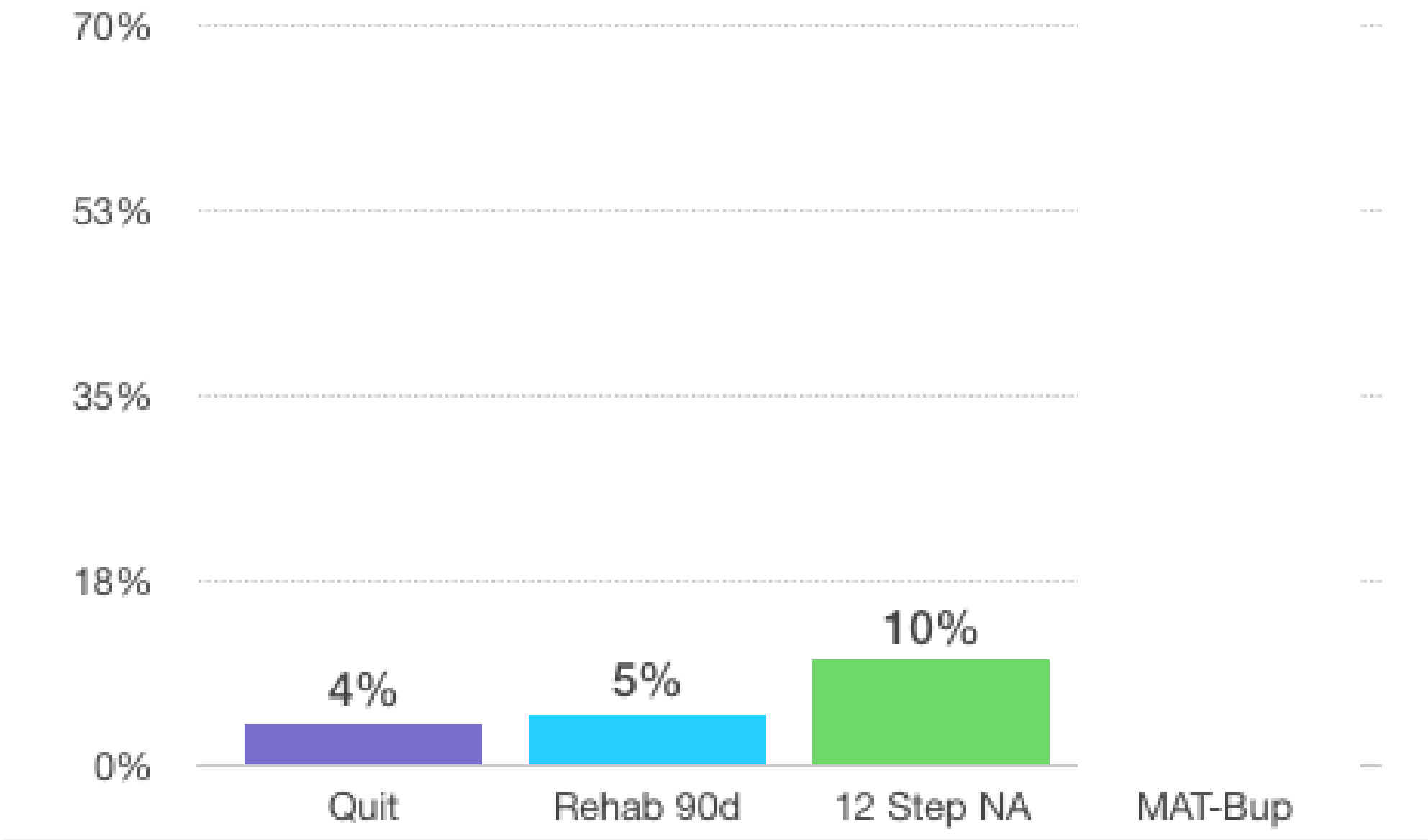
Data Source: "Opioid Overdose Mortality Among Former North Carolina Inmates: 2000-2015" Table 1

A young girl with long brown hair and blue eyes is shown in a close-up, looking over her shoulder with a sad expression. She is resting her head on someone's shoulder, and her hand is visible, resting on the person's shoulder. The background is blurred, showing green foliage.

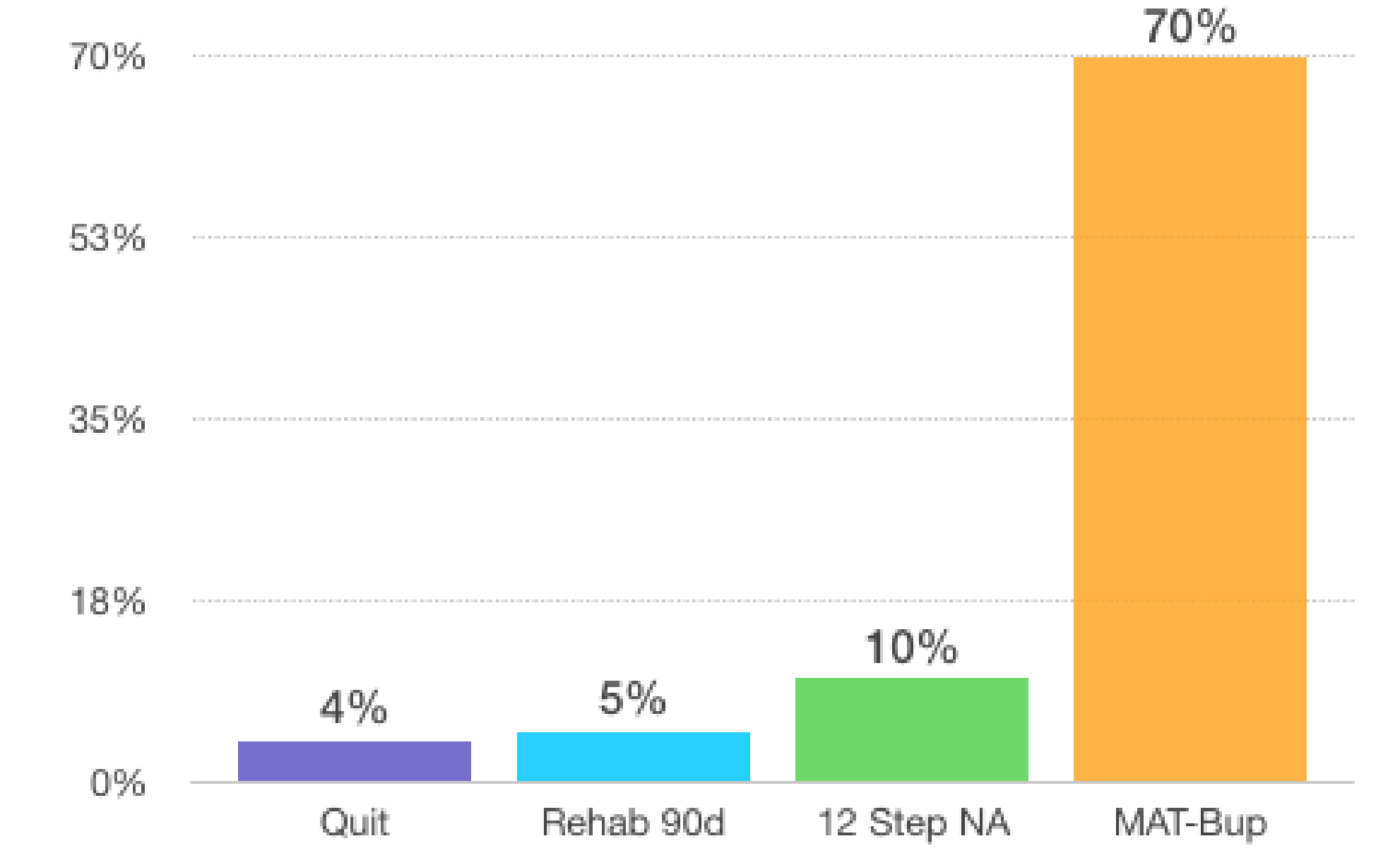
Foster Care Youth: The Innocent Victims of the Opioid Epidemic

Which Treatments Work Best?

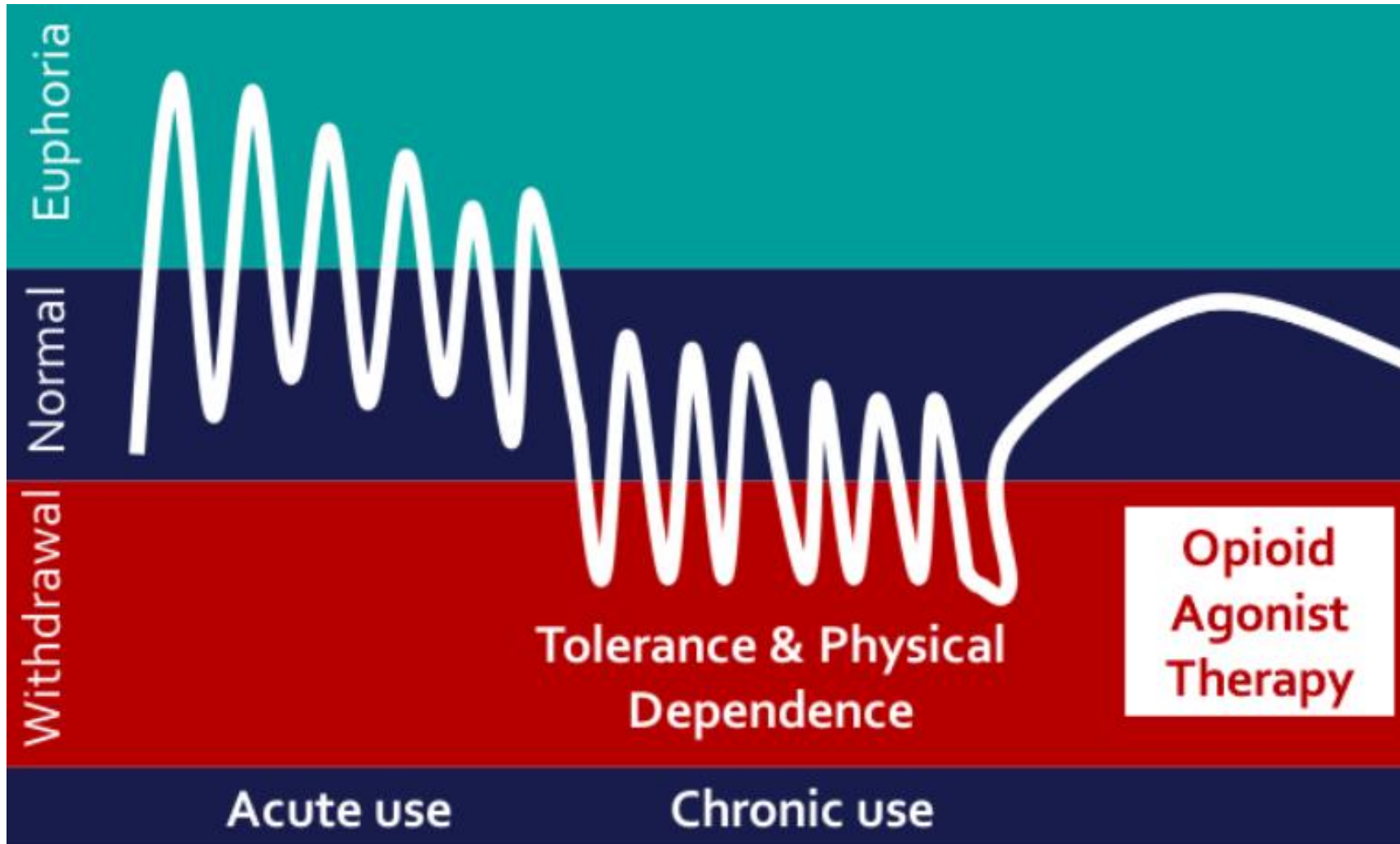
Treatment Effectiveness



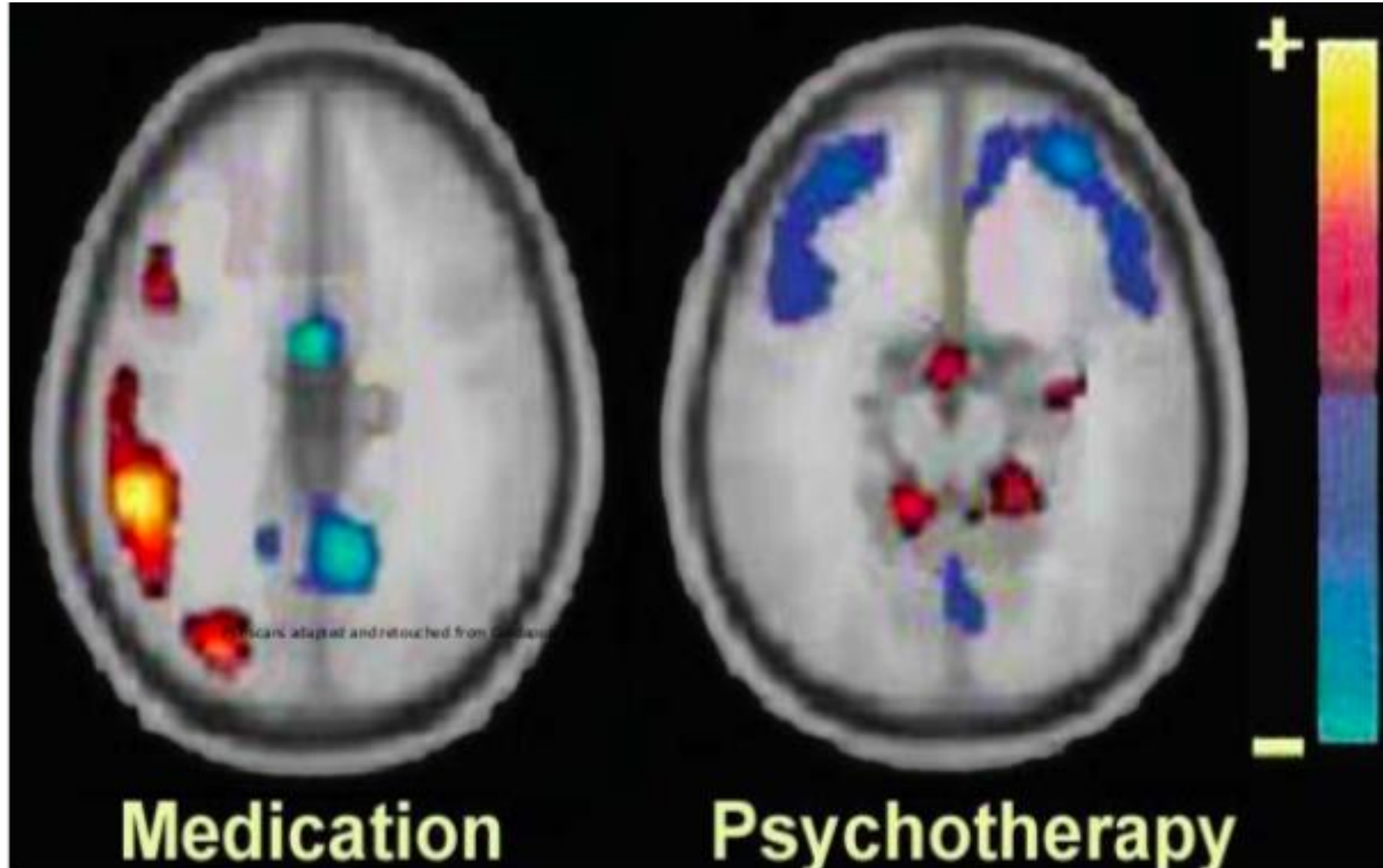
Treatment Effectiveness



OAT Treatment Stability

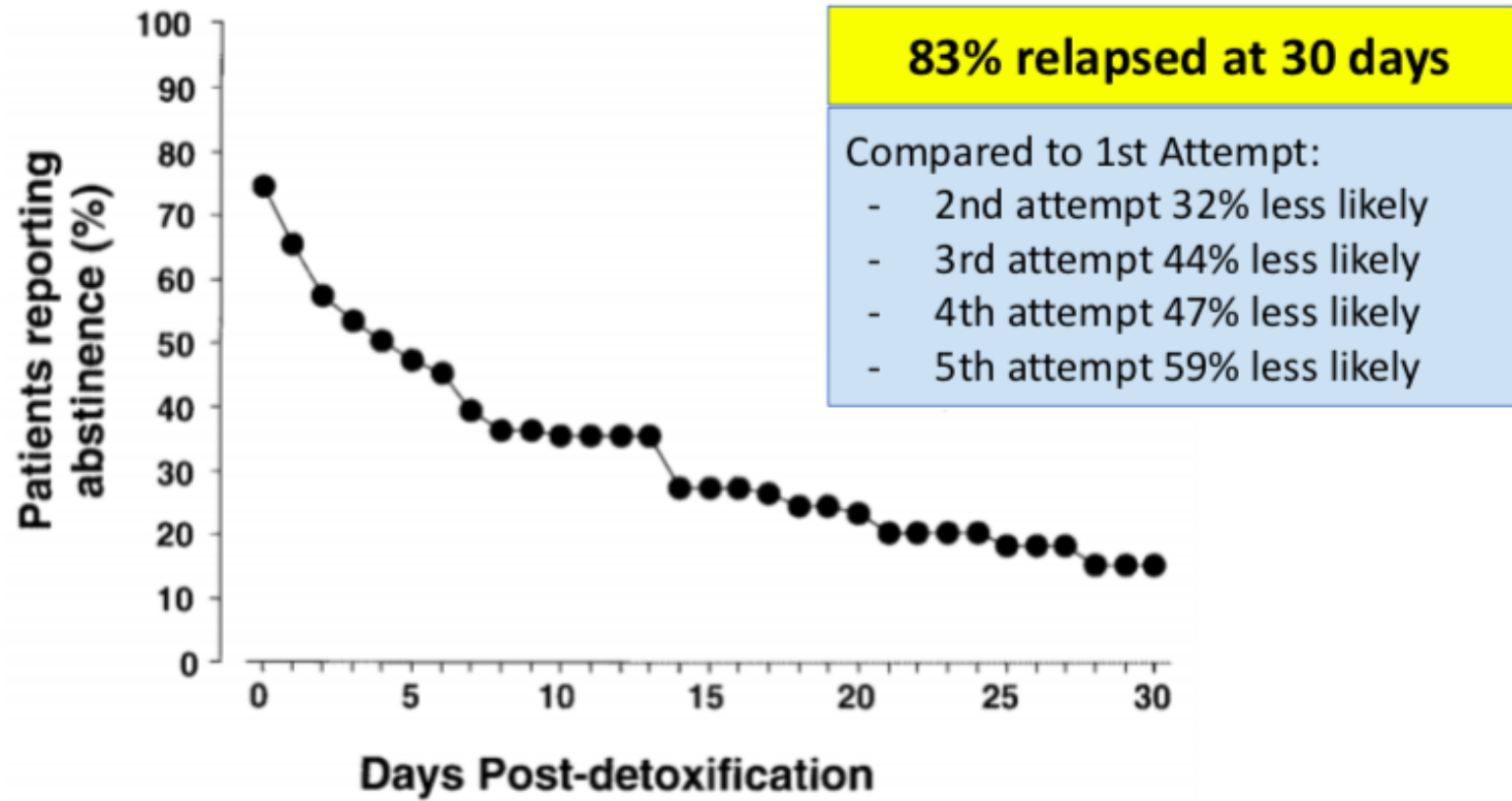


Treatments Impact Different Brain Regions



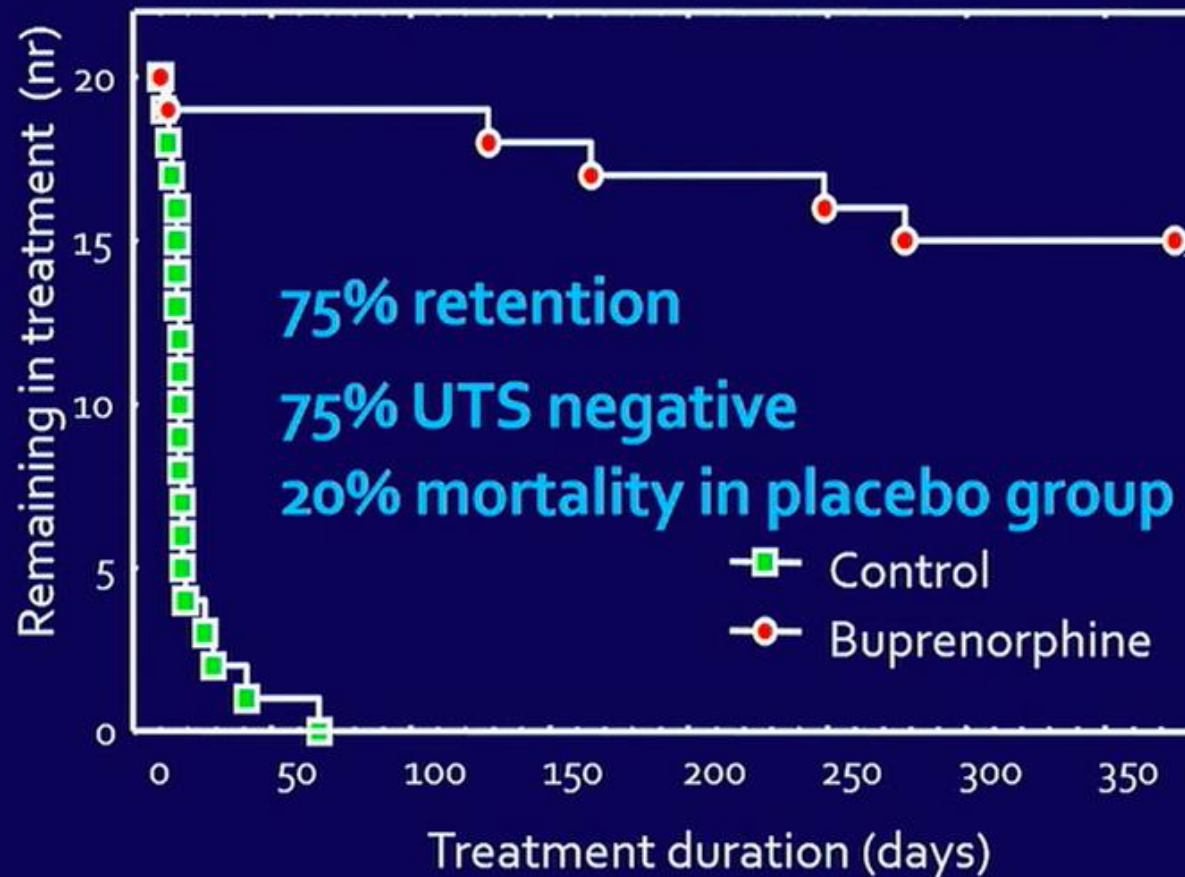
Detox Does NOT Work

Opioid Detoxification Ineffective



Counseling Far More Effective with MAT

Buprenorphine Maintenance vs Detox



Kakko J et al. Lancet 2003

Evidence Based Treatment

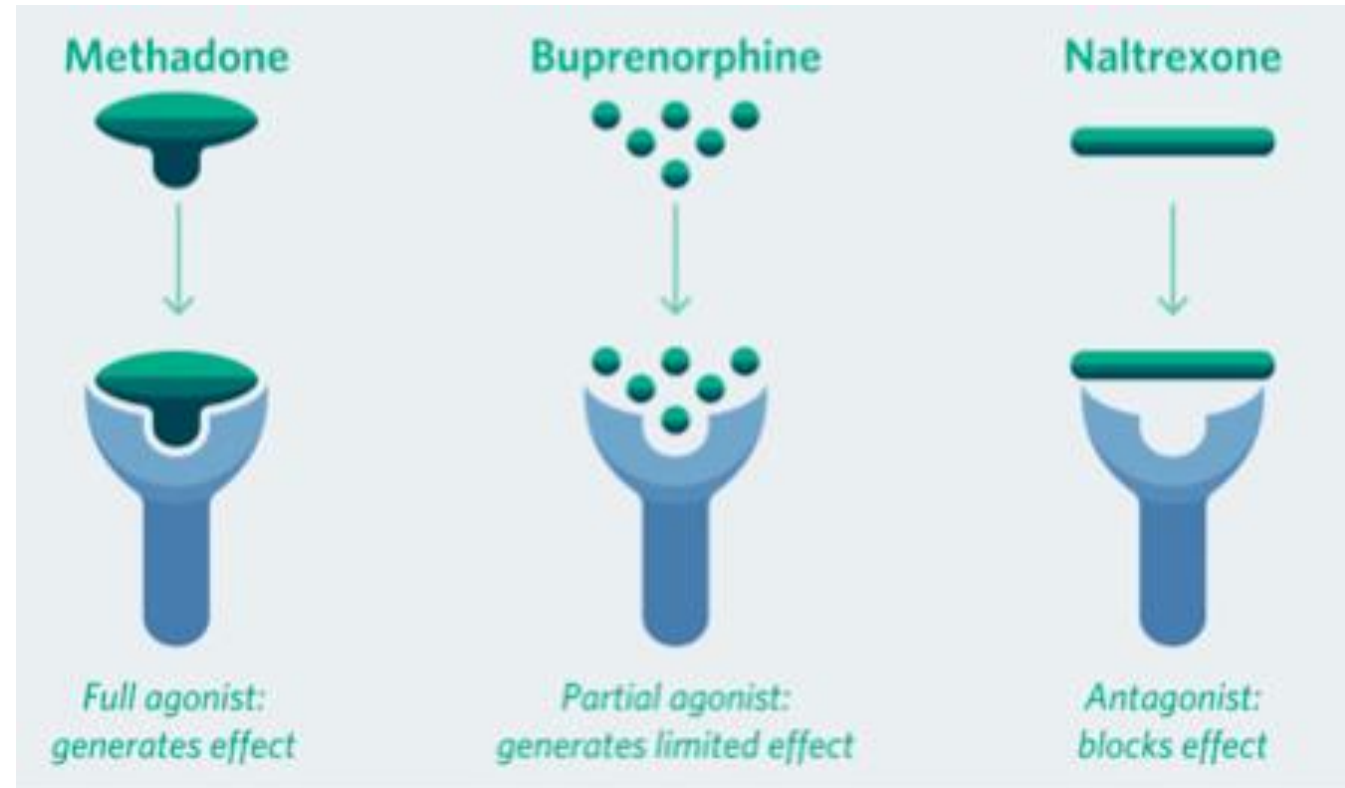
“Access to medication – assisted treatment can mean [the] difference between life or death.”

Michael Botticelli, October 23, 2014

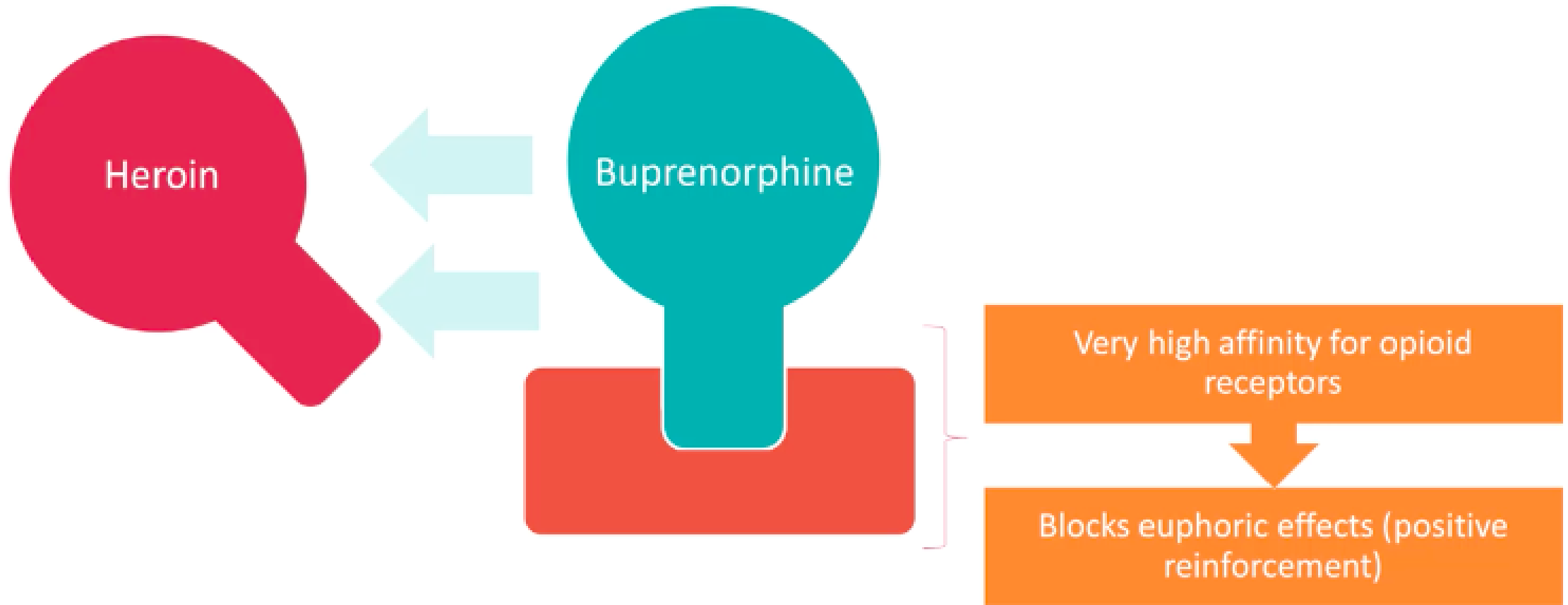
Director, White House Office of National Drug Control Policy

Buprenorphine – Gold Standard, FDA Approved Treatment

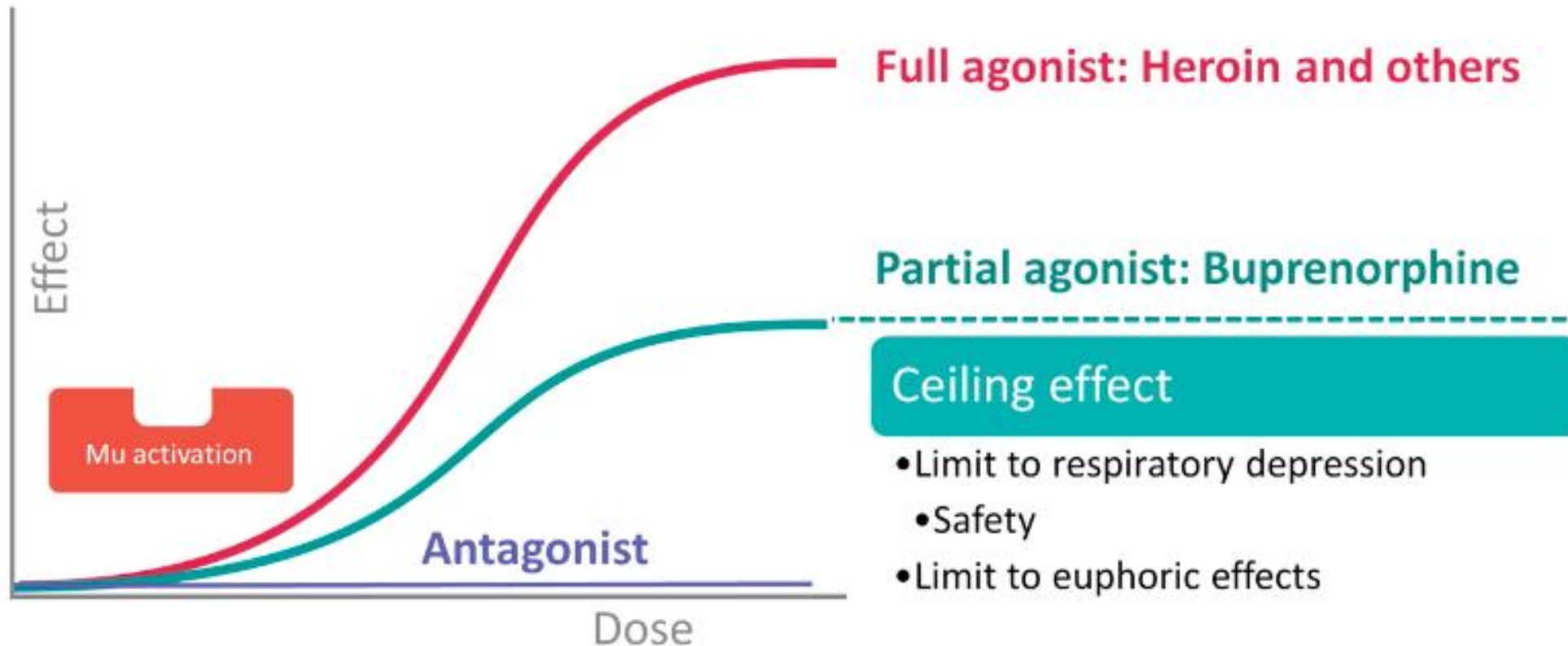
- FDA Approval – 38 years
 - 1981 for Pain
 - 2002 for MAT
- Safe- Very Low OD risk
- Long Effect (24-36 hours)



Buprenorphine Binds 1000x Stronger Than Heroin



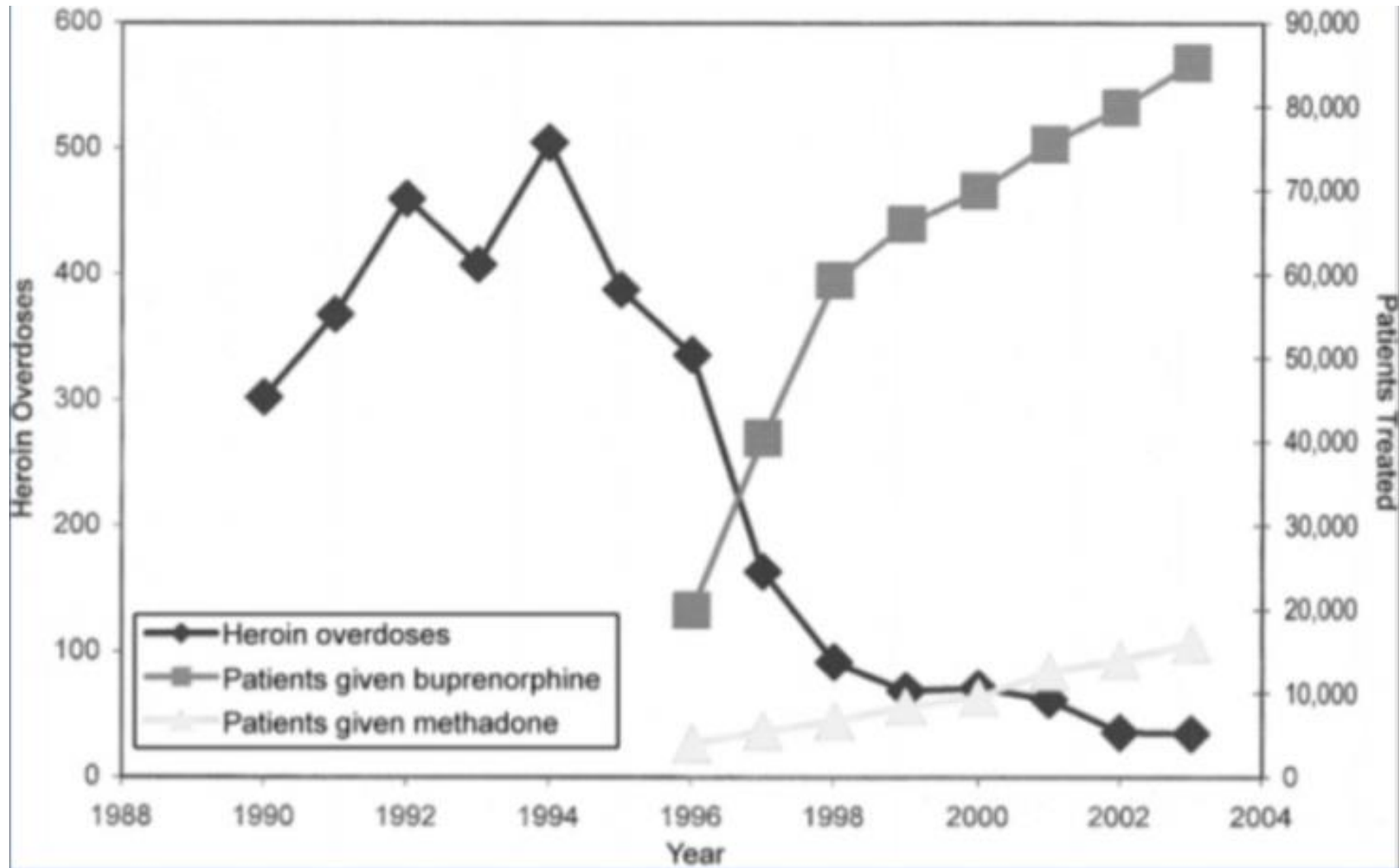
Partial Agonist – Highly Safe



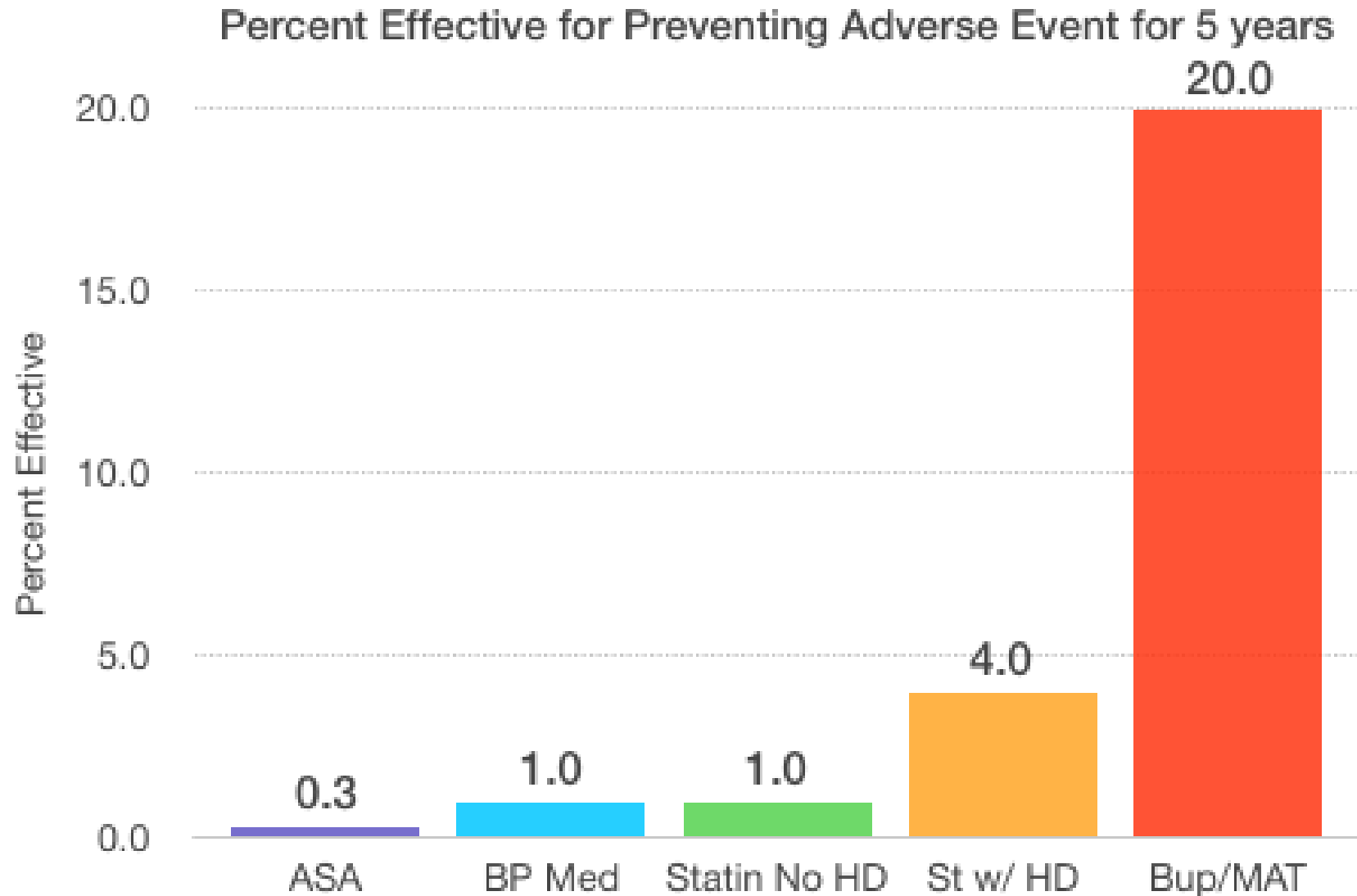
Usually Once or Twice a day



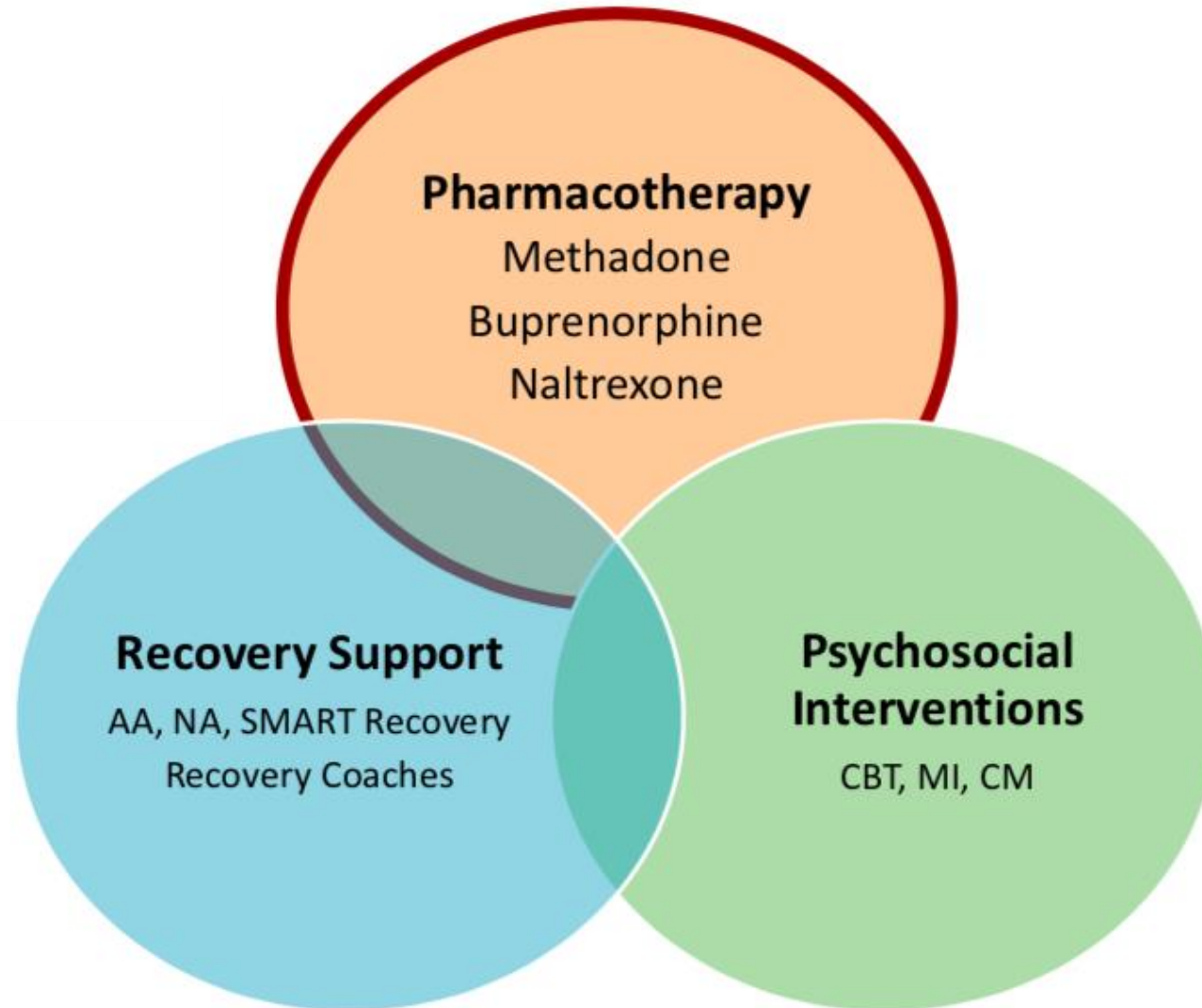
Decreased Death Rate 80%



Impact Greater Than Most Medical Treatments



Comprehensive Approach



Broad Benefits of Treatment

- Get their lives back
“Feel Normal Again”
- Better Parents
- Higher Employment
- Engaged in community
- Up to 80% decrease in mortality
- Decreased Crime 80%
- Decreased assoc illness
- 70-80% remain in recover
- Help Others



Myths & Misconceptions

“Trade one addiction for another”

Trade a life of chaos and harm for stable, safe & highly effective care

“they are just getting high”

Buprenorphine is not a desirable drug of abuse and can cause withdrawal

“They are going to sell the medication”

Diversion happens when treatment gaps exist. **Harm Reduction.**
Attempt at self management

National Academy of Medicine



CONCLUSIONS

OF THE NATIONAL ACADEMIES COMMITTEE

1. Opioid use disorder is a treatable chronic brain disease.

Opioid use disorder is a treatable chronic brain disease resulting from the changes in neural structure and function that are caused over time by repeated opioid use. The behavioral and social contexts are critically important both to its development and treatment. Stopping opioid misuse is extremely difficult. Medications are intended to normalize brain structure and function.

2. FDA-approved medications to treat opioid use disorder are effective and save lives.

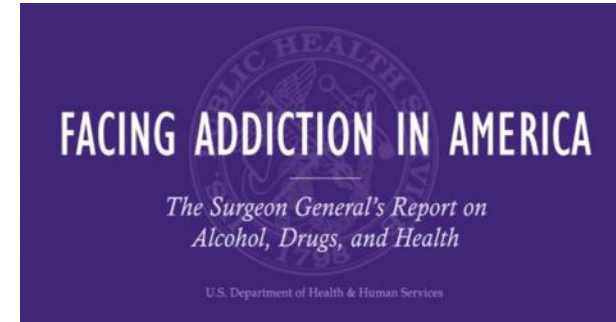
FDA-approved medications to treat opioid use disorder—methadone, buprenorphine, and extended-release naltrexone—are effective and save lives. The most appropriate medication varies by individual and may change over time. To stem the opioid crisis, it is critical for all FDA-approved options to be available for all people with opioid use disorder. At the same time, as with all medical disorders, continued research on new medications, approaches, and formulations that will expand the options for patients is needed.

The National Academies of
SCIENCES • ENGINEERING • MEDICINE

CONSENSUS STUDY REPORT

MEDICATIONS
FOR
OPIOID
USE
DISORDER
SAVE
LIVES

National Support for MAT



ASAM American Society of
Addiction Medicine



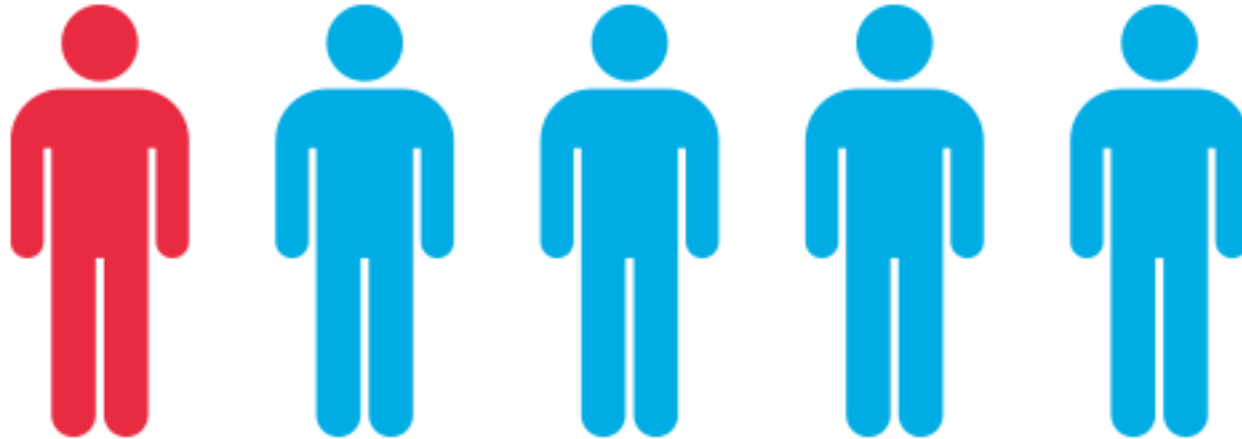
Standard of Care

Medication-Assisted Treatment (MAT) is the standard of care for treating opioid use disorders:

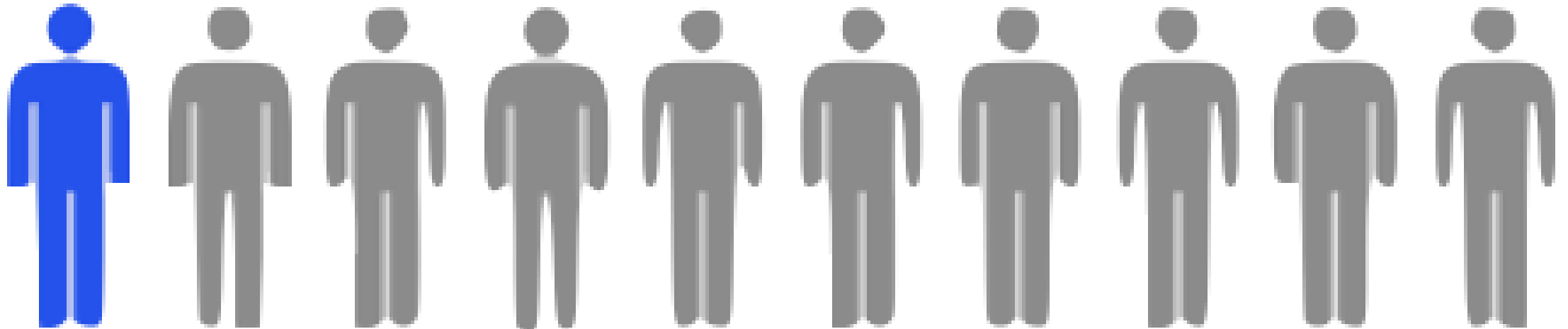
- U.S. Dept. of Health & Human Services (1997)
- National Institute on Drug Abuse (2014, 2018)
- U.S. Surgeon General (2018)
- Substance Abuse & Mental Health Services Administration (2005, 2018)
- National Academy of Sciences, Engineering & Medicine (2019)
- World Health Organization (2004)
- Centers for Disease Control & Prevention (2002)
- American Medical Association (2017)
- American Psychiatric Association (2017)
- American Society of Addiction Medicine (2015)
- American Academy of Addiction Psychiatry
- American College of Obstetricians & Gynecologists (2016)
- National Association of Drug Court Professionals (2013, 2015)



Fewer than 20% of people with Opioid Use Disorder in Treatment



May be as low as 1/10 people with Opioid Use Disorder in Treatment



Window of Readiness Can Close Quickly



Put an end to stigma



Diversion & Harm Reduction

- Mostly used for self treatment or withdrawal avoidance (97%)*
- **Harm Reduction**
 - (Safer than any other opioid)
 - Increase likely of later treatment
- Not a great drug of abuse
 - Slow onset
 - Blocks additional opioids
 - Precipitates withdrawal



Calvert County
Help Lead
State & Nation

Mobile Crisis Team (Opioid Response)

- October 7am-11pm
 - Goal – 24/7/365 (TBA)
- PEER, Counselor, RN, Doctor/Nurse Practitioner (Live and Telehealth)
- Overdose and Crisis Response



Clinical Treatment Area



Mobile Crisis Team

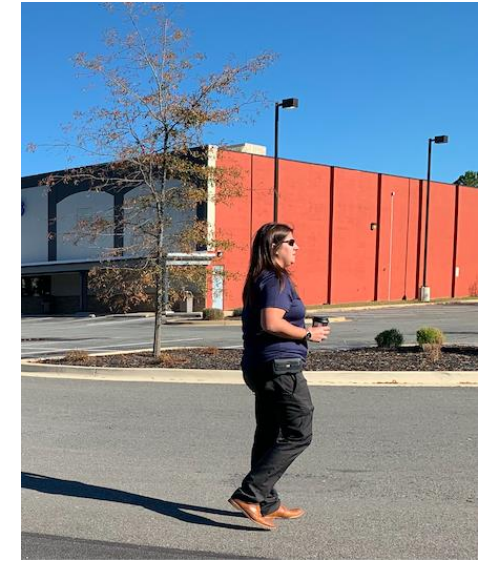
**Doctor/Nurse Practitioner
Nurse**



Licensed Counselor



**PEER Recovery
Specialist**



"Meet Them Where They Are"



Hospital Collaboration

- ED and HD communication
- PEER Recovery Program
- MCT can be called to ER
- Quick Referral & Follow Up
 - Same day / Next Day
 - 7 Days a week



Community Partner Collaborations



EMS & Law Enforcement Collaboration

- Best Patient Engagement & Outcomes
- Decreased turn around times
- Decreased Repeat Calls
- Optimizes resource use



Activation of Mobile Crisis Team

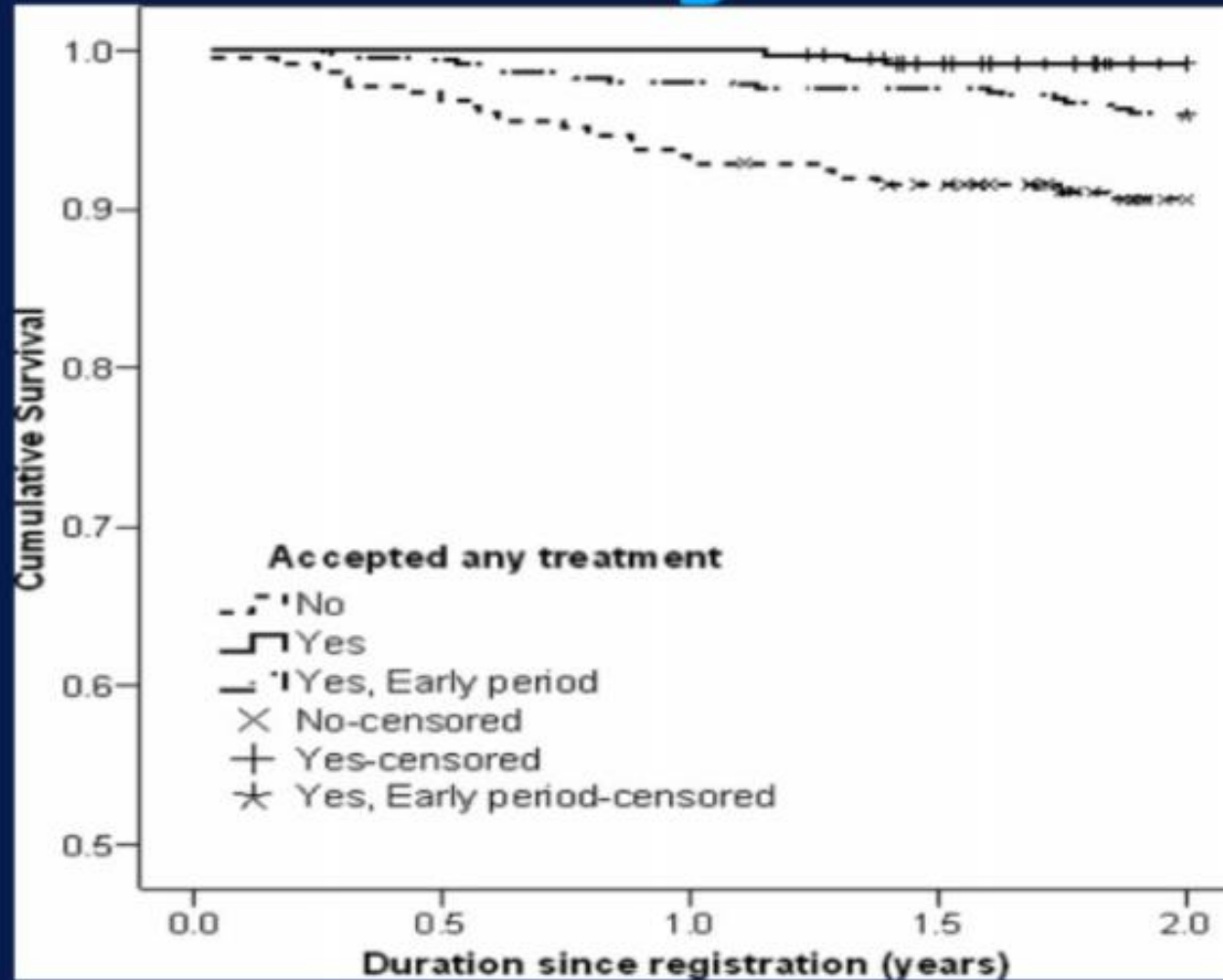
911

CONTACT
RECOVERY RAPID RESPONSE
AT

877-467-5628

7 DAYS A WEEK

People Die Waiting for Treatment



Behavioral Health Rapid Response

- Call Line 7AM-11PM
- Clinical Access 7 days a week
- Walk-in Access
- 4 Location in the County
 - Prince Frederick
 - Barstow (HQ)
 - Lusby
 - Chesapeake Beach

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RECOVERY RAPID RESPONSE
AT
877-467-5628
7 DAYS A WEEK

Calvert County Health Dept at Chesapeake Beach



Calvert County Health Dept at Chesapeake Beach

- Open M-F 9-5
- Medically Assist Treatment
- Counseling
 - Individual
 - Group
- Intake Screening





“Treating addiction allows
me to help individuals
realize their hopes and
dreams.”

Christina Delos Reyes, MD, FASAM
Psychiatrist
ASAM member since 1995

[Read My Story](#)

[Share Your Story](#)

What If Everything Changed? We Could End OD

Prevention



Treatment



Harm
Reduction



We Can
End
Overdose

The Better Option

Opioid Addiction



MAT & Recovery



Progress Through Recovery

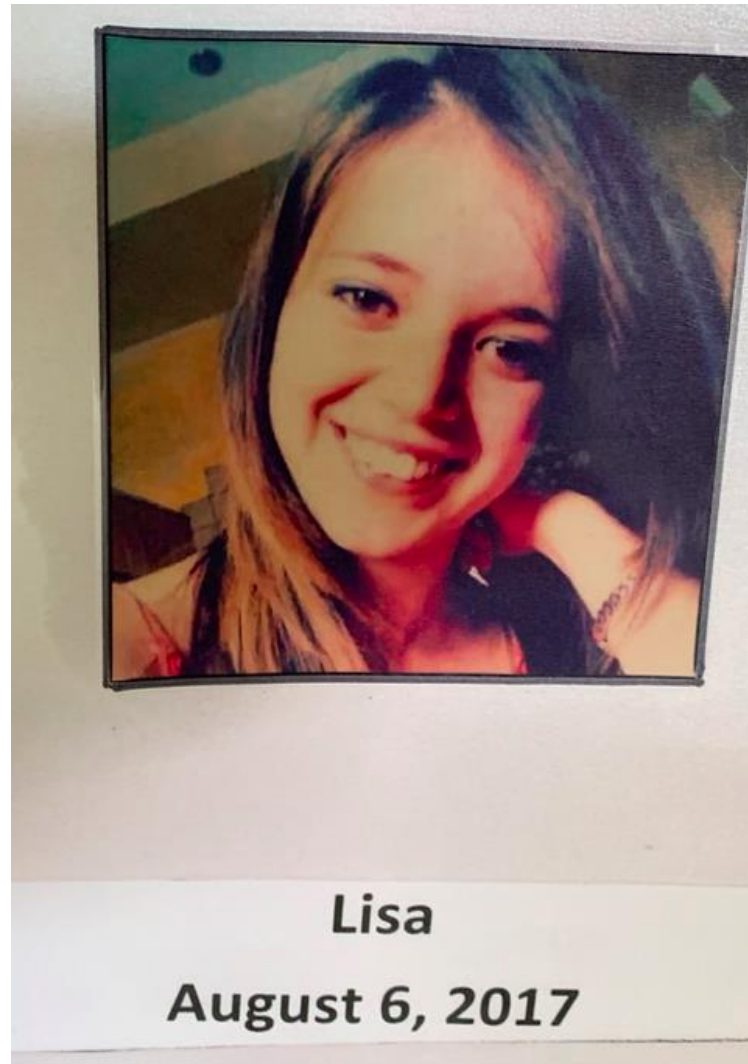
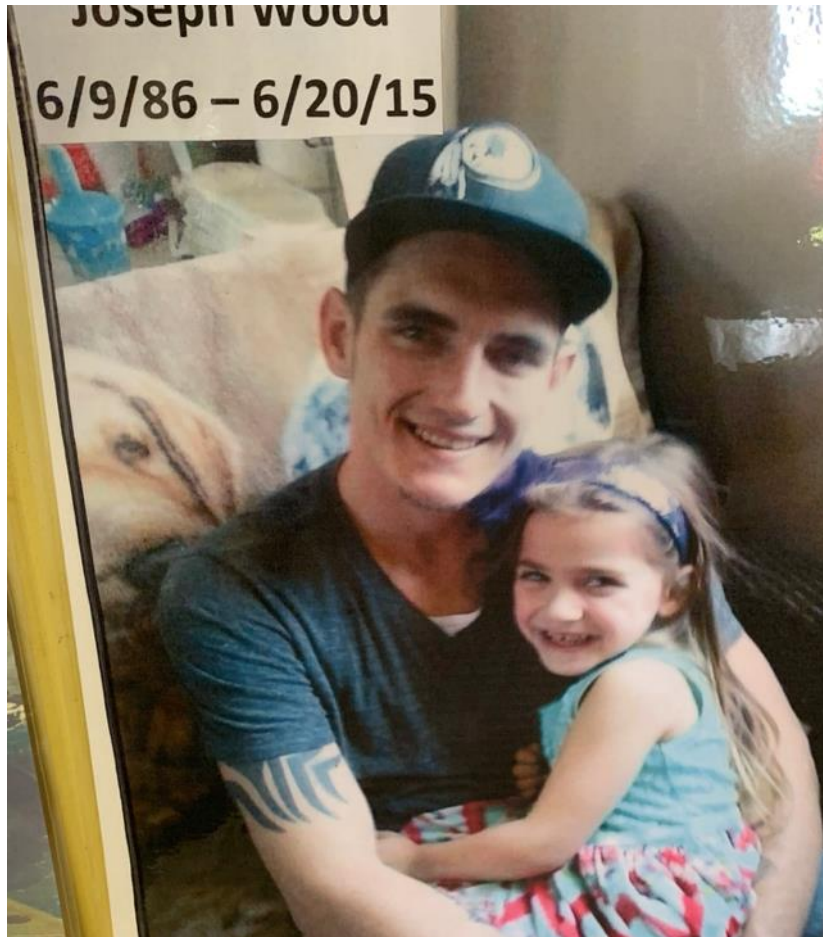
Team Effort



Their Destiny



Our Citizens Deserve the Most Effective Treatments





CALVERT COUNTY
BEHAVIORAL HEALTH

**RECOVERY RAPID
RESPONSE**



877-467-5628
7 DAYS A WEEK

Contacts

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7 DAYS A WEEK
