

# Surgeon general nominee fought HIV outbreak in rural Indiana

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The nomination of Jerome Adams, MD, to be the next U.S. Surgeon General is being hailed by physician organizations and public health advocates familiar with how he responded to an HIV outbreak in rural Indiana in which 95 percent of the cases were related to injection drug use.

Dr. Adams, in his role as Indiana's state health commissioner, has also been recognized for continuing to advocate a wide range of interventions to combat the nation's opioid epidemic.

These include needle-exchange programs (also called syringe service programs), wide availability of naloxone, promotion of drug take-back programs, increasing access to evidence-based and comprehensive treatment, and integrated pain-management programs that emphasize functionality and outcomes rather than elimination of pain.

"We need every tool at our disposal to fight this epidemic," Dr. Adams wrote in a recent op-ed column in *The Indianapolis Star*. "Syringe service programs do not increase drug use and in fact do the opposite. Studies have found that people who participate in SSPs are up to five times more likely to enter treatment for substance-use disorder than people who inject drugs but don't participate in a syringe service program."

## Makes naloxone available without Rx

On June 30, Dr. Adams renewed his statewide standing order allowing individuals to obtain naloxone at nearly 500 locations without a prescription.

Dr. Adams, who has acknowledged that his brother has a substance-use disorder, spoke out about destigmatizing the disease in his *Indianapolis Star* column.

"The faces of this epidemic are our children, our friends, our neighbors," he wrote. "Illegal drug use is just that—illegal. But we must also acknowledge that addiction is a chronic disease that changes the

brain, not a moral failure.”

In addition to his medical degree from the Indiana University School of Medicine in Indianapolis, Dr. Adams earned a master’s degree in public health, with a focus on chronic disease prevention, from the University of California at Berkeley. He became Indiana’s health commissioner in October 2014 and is an anesthesiologist at the Sidney & Lois Eskenazi Hospital in Indianapolis—the flagship facility of the state’s largest public health care system, Eskenazi Health.

Among those cheering Dr. Adams’ nomination were the Indiana State Medical Association, the American Society of Anesthesiologists, the American Public Health Association and the AMA, which noted that his nomination is one the Association “strongly supports.”

“As Indiana State Health Commissioner, Dr. Adams has advocated strongly for physicians to play a leading role in reining in the opioid epidemic, fought to reduce infant mortality, and pushed for a needle-exchange program to tackle his state’s HIV outbreak,” AMA President David O. Barbe, MD, MHA, (@DBarbe\_MD) said. “Dr. Adams, an AMA member, will bring unique experience and energy to this office.”

Dr. Adams has received bipartisan support from Indiana’s Senators, Republican Todd Young and Democrat Joe Donnelly. Donnelly invited Dr. Adams to speak at a Feb. 24, 2016 hearing that the Senate Special Committee on Aging held on the issue of senior citizens’ opioid use.

## Addressing epidemic’s root causes

In his testimony, Dr. Adams described the outbreak that occurred in rural Scott County, Ind., and noted how the situation there was not unique.

“The Scott County HIV outbreak was not the beginning of a problem, but the culmination of an opioid epidemic that has been building for more than a decade,” Dr. Adams said. “There are hundreds of places like Scott County across the country. If we don’t address the root causes of this epidemic, namely the overflow of prescription opioids into communities and the lack of options for those battling substance-use disorder, other places across the country will find themselves dealing with a situation like the one in Scott County.”

Last year, *The New England Journal of Medicine* published a review of the Scott County HIV epidemic and the state’s public health response. The authors noted that there were only five HIV infections diagnosed in the community from 2004 through 2013. The state began an investigation in January 2015 after an “alert disease intervention specialist” identified a cluster of 11 newly diagnosed infections.

## State responded rapidly to outbreak

Eventually, 181 diagnosed infections were linked to the outbreak between Nov. 18, 2014, and Nov. 1, 2015, with 173 of the patients reporting injection drug use. Also, 167 patients were co-infected with the Hepatitis C virus (HCV).

“This outbreak prompted the state to declare a public health emergency that facilitated a rapid, multi-tiered public health response that included immediate access to health insurance and HIV care and treatment, as well as the creation of a syringe-exchange program, in response to this HIV and HCV outbreak, that had previously been illegal under Indiana state law,” the *NEJM* authors wrote.

They concluded that the outbreak highlighted the vulnerability and challenges rural communities face, but also how “implementation of HIV testing and treatment, syringe-service programs, and medication-assisted treatment are necessary to help prevent a similar outbreak in the future.”

Dr. Adams would replace Sylvia Trent-Adams, PhD, RN. She has served as acting surgeon general since Vivek Murthy, MD, a Barack Obama appointee, resigned in April at President Donald Trump’s request. Dr. Murthy had also made fighting the opioid epidemic a priority of his tenure. No confirmation hearing has yet been scheduled for Dr. Adams.

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