

How physicians are taking on Rx drug use in 2015

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Nearly four dozen people die each day from prescription drug overdoses, according to the Centers for Disease Control and Prevention, and the number of people dying from heroin overdose is rapidly increasing. Effectively reducing opioid misuse and increasing overdose prevention and treatment efforts are a key part of state and federal advocacy in the coming year.

“We are on the cusp of not only really exciting changes with our health care delivery system, but also where we are with drug policy,” Michael Botticelli, acting director of the Office of National Drug Control Policy (ONDCP), told physicians at the AMA State Legislative Strategy Conference earlier this month in New Orleans. “Science and data must guide our work to support all our efforts.”

To start, the focus of 2015 will be on addressing substance use disorders earlier in the disease process, supporting the use of effective prescription drug monitoring programs (PDMPs), expanded access to treatment, and addressing the stigma associated with substance use disorders. Botticelli detailed ONDCP’s goals in each of these areas:

- **Improve PDMPs to make them usable in busy medical practices.** Many states have turned to these data registries to track patients’ use of prescription drugs, but programs may not be effectively implemented into a prescriber’s practice or easy to use. To make PDMPs useful, physicians must be able to delegate authority so others in the practice can get reports. Encouraging innovation that allows data to move from PDMPs to electronic health records is another priority.
- **Expand access to naloxone.** “We need good, sound state legislation,” Botticelli said. This includes making the opioid overdose-reversal drug naloxone available and enacting “Good Samaritan” provisions that allow others to aid an overdose victim without the fear of being arrested. About one-half of states have laws such as these.
- **Reduce the stigma around substance use disorders.** Substance use disorders are a brain disease, and as with other diseases, early intervention is needed. Diabetes and substance use disorders have similar prevalence rates, but a large gap exists between those who seek treatment for each disease, Botticelli said. Physicians can play a key role in

helping patients receive treatment by screening and identifying patients for referral, as well as receiving training to be certified for office-based medication-assisted treatment. “It’s important for us to create a vibrant and visible recovery community in the United States,” Botticelli said. “To be able to walk into a physician’s office for treatment and be indistinguishable from other patients is an important step.”

As physicians and policymakers tackle the prescription drug issue head-on, progress is being made on the state and federal levels. The White House hosted a national summit last June to discuss federal, state and community responses to prescription drug misuse and deaths from overdose, underscoring the enormity and importance of the problem. The AMA supports efforts to address the prescription drug abuse issue require a public health approach, focusing on treatment, prevention and education. Law enforcement alone will not solve the problem.

North Dakota is one of the first states this year to introduce legislation to increase the availability of naloxone, and the AMA will be advocating that all states have such a law by the end of 2015.

Visit the AMA’s Web page on combating prescription drug abuse to learn more.