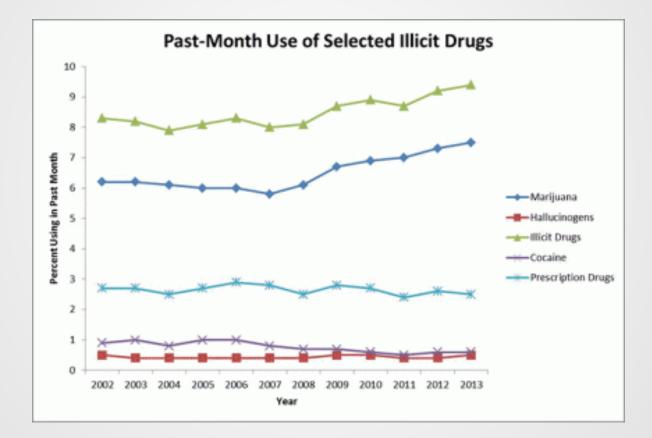
Might As Well Face it You're Addicted to...

Scott Haga PA-C Physician Assistant Spectrum Health Medical Group Center for Integrative Medicine

Why is it a problem?

- 91 Americans die daily from opiate overdose
 - (~130 die daily from colon cancer)
- 1,000 visits daily to ER for not using opiates correctly
- It is a public health epidemic

Use of Illicit Drugs

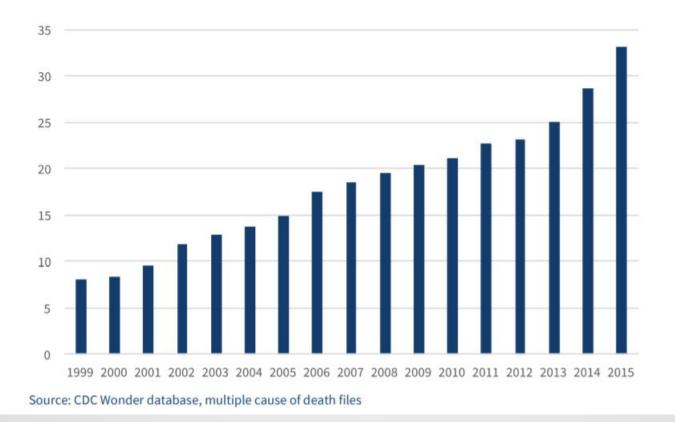


Why is it a problem?

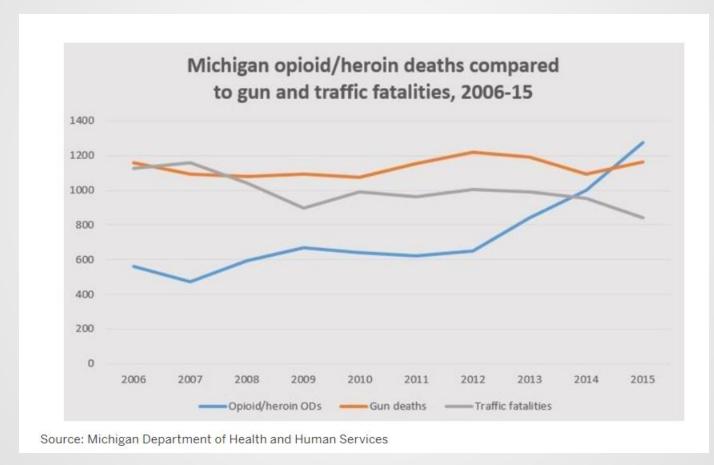
- Binge drinking in the last month
 - Men: 30.2%
 - Women: 16.0%
- Heavy ongoing alcohol use
 - Men: 9.5%
 - Women: 3.3%

Opioid Overdose Deaths

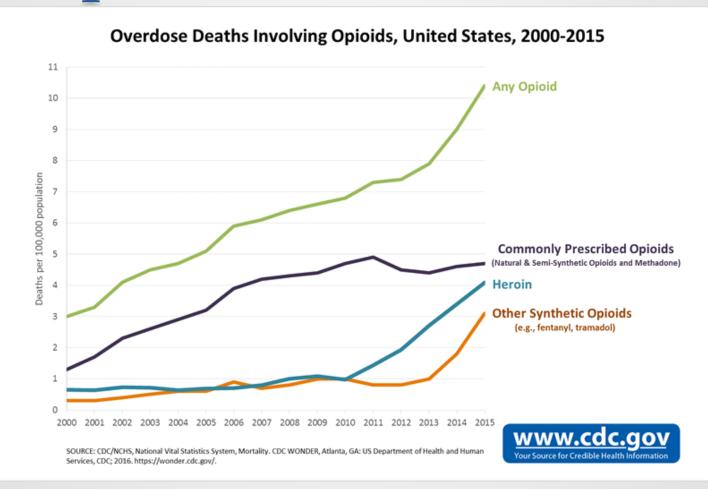
Figure 1. Opioid-involved Overdose Deaths, 1999-2015 (Thousands of Deaths)



Deaths in Michigan

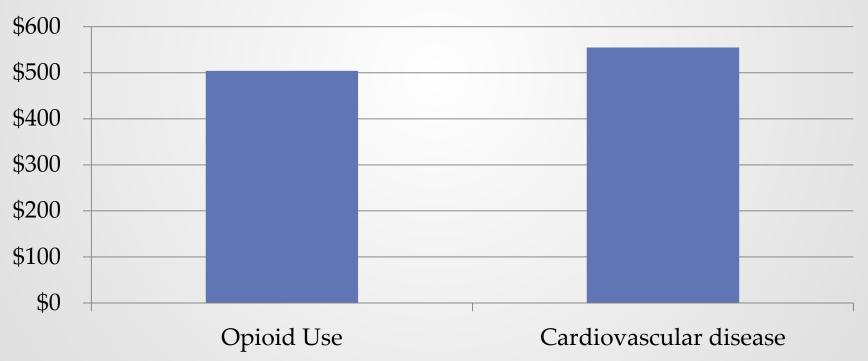


Opioid Deaths in US

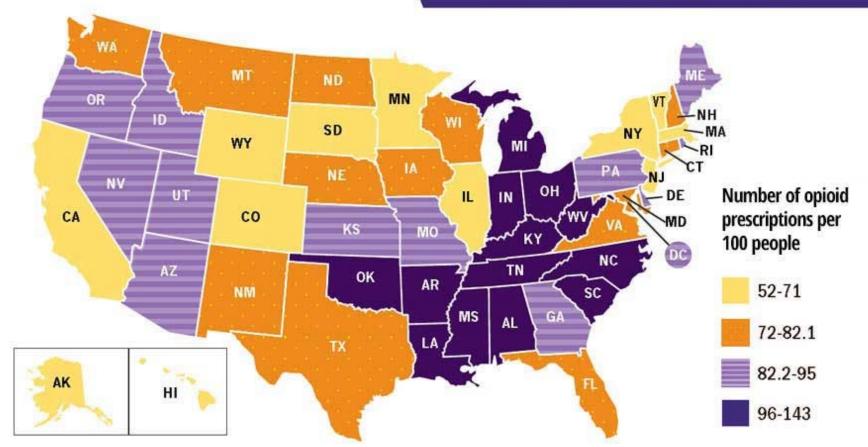


Cost of the Opioid Epidemic

Chronic Disease Costs (billions)



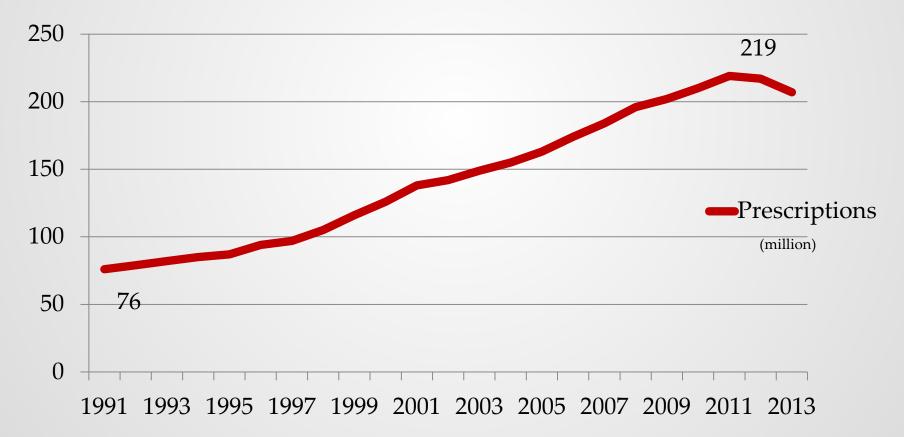
Some states have more opioid prescriptions per person than others.

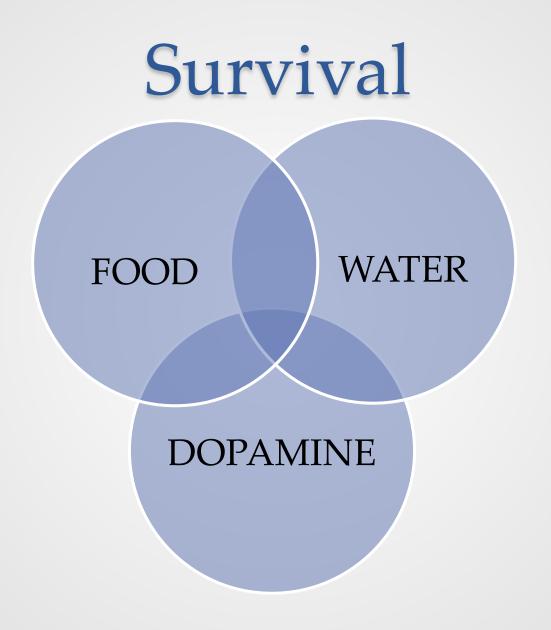


SOURCE: IMS, National Prescription Audit (NPA™), 2012.



Number of US Opioid Prescriptions

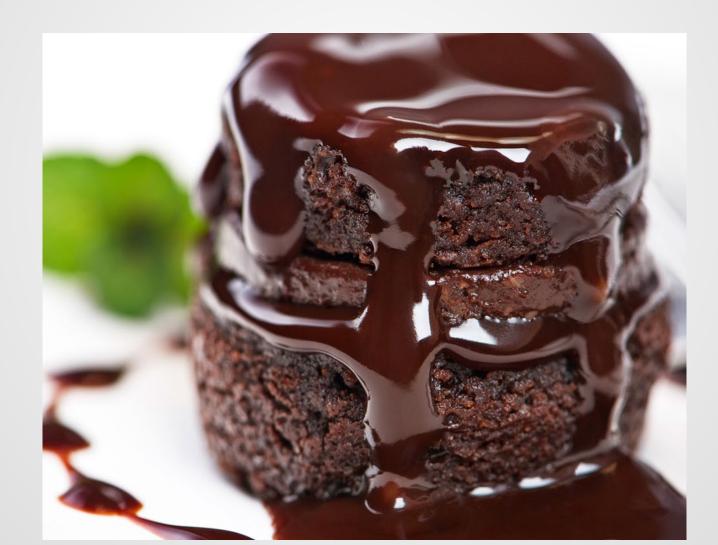


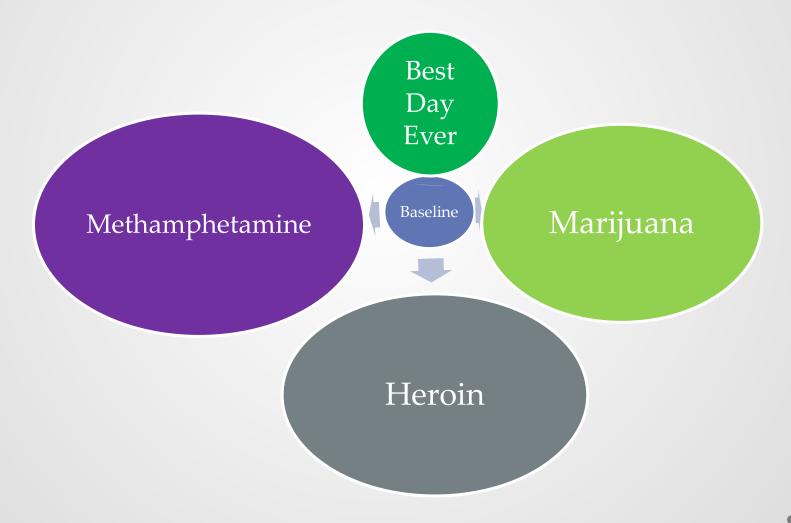


Responses to Dopamine

- Motivation and Drive
- Pleasure
- Food
- Water
- Chocolate







ASAM Definition of Addiction

- Short Definition of Addiction:
- Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.
- Addiction is characterized by inability to consistently abstain, impairment in behavioral control, craving, diminished recognition of significant problems with one's behaviors and interpersonal relationships, and a dysfunctional emotional response. Like other chronic diseases, addiction often involves cycles of relapse and remission. Without treatment or engagement in recovery activities, addiction is progressive and can result in disability or premature death.

DSM-V Diagnosis of a Substance Use Disorder

 \bullet \bullet \bullet

Impaired control over substance use 1-4

- 1. Opioids are often taken in larger amounts or over a longer period than was intended.
- 2. There is a persistent desire or unsuccessful efforts to cut down or control opioid use.
- 3. A great deal of time is spent in activities necessary to obtain the opioid, use the opioid, or recover from its effects.
- 4. Craving, or a strong desire or urge to use opioids.

Social impairment 5-7

- 5. Recurrent opioid use resulting in a failure to fulfill major role obligations at work, school, or home.
- 6. Continued opioid use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of opioids.
- 7. Important social, occupational, or recreational activities are given up or reduced because of opioid use.

Risky use of the substance 8-9

- 8. Recurrent opioid use in situations in which it is physically hazardous.
- Continued opioid use despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by the substance.

Pharmacological criteria

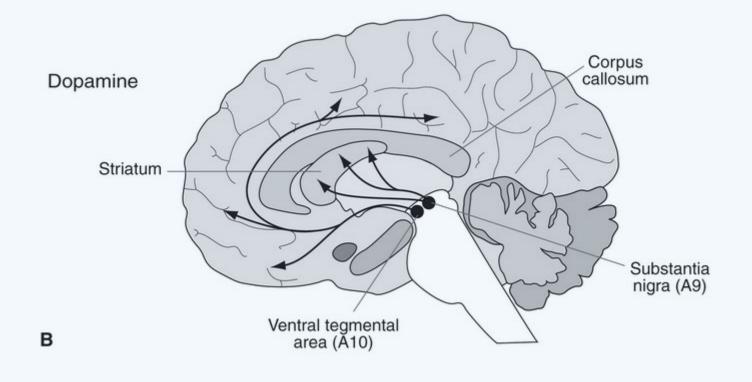
10.Tolerance, as defined by either of the following:

- A need for markedly increased amounts of opioids to achieve intoxication or desired effect.
- A markedly diminished effect with continued use of the same amount of an opioid.
 - **Note:** This criterion is not considered to be met for those taking opioids solely under appropriate medical supervision.

11.Withdrawal, as manifested by either of the following:

- The characteristic opioid withdrawal syndrome (refer to Criteria A and B of the criteria set for opioid withdrawal) OR
- Opioids (or a closely related substance) are taken to relieve or avoid withdrawal symptoms.

Dopamine Reward Pathway



The ASAM Essentials of Addiction Medicine, 2nd Ed.

Screening for SUD

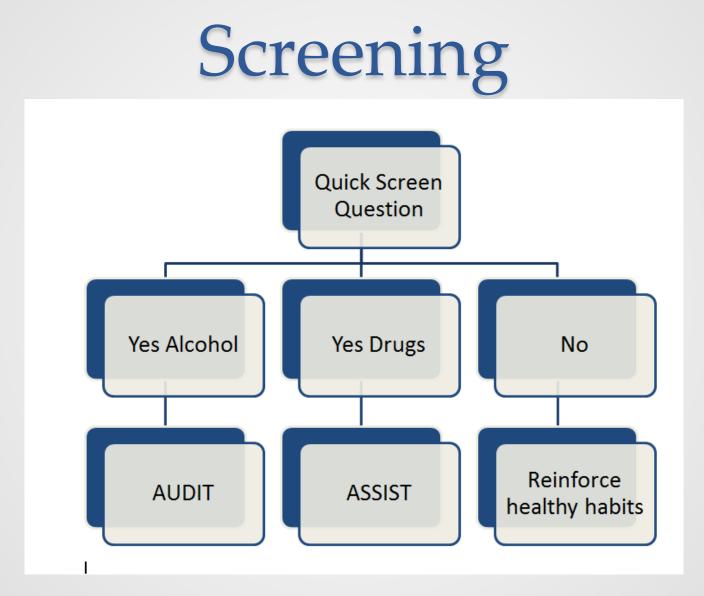
- If you are going to treat it, you need to know that the disease is active
- Pick a screening tool that fits with your practice

https://tinyurl.com/sudscreener

Revised June 2018

Choose evidence-based screening tools and assessment resource materials

Tool Substance type		Patient age		How tool is administered		
	Alcohol	Drugs	Adults	Adolescents	Self- administered	Clinician- administered
		s	creens			
Screening to Brief Intervention (<u>S2BI</u>)	Х	х		Х	Х	Х
Brief Screener for Alcohol, Tobacco, and other Drugs (<u>BSTAD</u>)	X	x		x	x	X
Tobacco, Alcohol, Prescription medication, and other Substance use (<u>TAPS</u>)	х	x	x		Х	х
NIDA Drug Use Screening Tool: Quick Screen (<u>NMASSIST</u>)	×	x	х	<u>See APA</u> <u>Adapted</u> <u>NM ASSIST</u> <u>tools</u>	<u>See APA</u> <u>Adapted NM</u> <u>ASSIST tools</u>	х
Alcohol Use Disorders Identification Test-C (<u>PAUDIT-C (PDF, 41KB</u>))	Х		x		X	Х
Alcohol Use Disorders Identification Test (AUDIT (PDF, 233KB))	х		×			x
Dioid Risk Tool (PDF,		х	х		х	



Quick Screen Question

NIDA Quick Screen Question: In the past year, how often have you used the following?	Never	Once or Twice	Monthly	Weekly	Daily or Almost Daily
Alcohol For men, 5 or more drinks a day					
 For women, 4 or more drinks a day 					
Tobacco Products					
Prescription Drugs for Non-Medical Reasons					
Illegal Drugs					

ASSIST Q1

Que	estion 1 of 8, NIDA-Modified ASSIST	Yes	No
you	your <u>LIFETIME</u> , which of the following substances have a ever used? *Note for Physicians: For prescription medications, please report monmedical use only.		
a.	Cannabis (marijuana, pot, grass, hash, etc.)		
b.	Cocaine (coke, crack, etc.)		
c.	Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.)		
d.	Methamphetamine (speed, crystal meth, ice, etc.)		
e.	Inhalants (nitrous oxide, glue, gas, paint thinner, etc.)		
f.	Sedatives or sleeping pills (Valium, Serepax, Ativan, Xanax, Librium, Rohypnol, GHB, etc.)		
g.	Hallucinogens (LSD, acid, mushrooms, PCP, Special K, ecstasy, etc.)		
h.	Street opioids (heroin, opium, etc.)		
i.	Prescription opioids (fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine, etc.)		
j.	Other – specify:		

ASSIST Q2

Question 2 of 8, NIDA-Modified ASSIST 2. In the past three months, how often have you used the substances you mentioned (first drug, second drug, etc)?	Never	Once or Twice	Monthly	Weekly	Daily or Almost Daily
Cannabis (marijuana, pot, grass, hash, etc.)	0	2	3	4	6
Cocaine (coke, crack, etc.)	0	2	3	4	6
 Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) 	0	2	3	4	6
Methamphetamine (speed, crystal meth, ice, etc.)	0	2	3	4	6
 Inhalants (nitrous oxide, glue, gas, paint thinner, etc.) 	0	2	3	4	6
 Sedatives or sleeping pills (Valium, Serepax, Ativan, Librium, Xanax, Rohypnol, GHB, etc.) 	0	2	3	4	6
 Hallucinogens (LSD, acid, mushrooms, PCP, Special K, ecstasy, etc.) 	0	2	3	4	6
Street opioids (heroin, opium, etc.)	0	2	3	4	6
 Prescription opioids (fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine, etc.) 	0	2	3	4	6
Other – Specify:	0	2	3	4	6

- For patients who report "Never" having used any drug in the past 3 months: Go to Questions 6-8.
- For any recent illicit or nonmedical prescription drug use, go to Question 3.

In the Last 3 Months...

3. <u>In the past 3 months</u> , how often have you had a strong desire or urge to use (first drug, second drug, etc)?	Never	Once or Twice Monthly	Weekly Daily or Almost Daily
4. <u>During the past 3 months</u> , how often has your use of (first			
drug, second drug, etc) led to health, social, legal or financial problems?	Never	Once or Twice Monthly	Daily or Almost Daily
5. <u>During the past 3 months</u> , how often have you failed to do what was normally expected of you because of your use of (first drug, second drug, etc)?	Never	Once or Twice Monthly	Weekly Daily or Almost Daily

Almost done...

6.	Has a friend or relative or anyone else ever	No, never	Yes, but not in	Yes, in the past 3
	expressed concern about your use of (first drug,		the past 3	months
	second drug, etc)?		months	

7. Have you ever tried and failed to control, cut	No, never	Yes, but not in	Yes, in the past 3
down or stop using (first drug, second drug, etc)?		the past 3	months
		months	

Last Question

8. Have you ever used any drug by injection (NONMEDICAL USE ONLY)?	No, never	Yes, but not in the past 3 months	Yes, in the past 3 months
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ASSIST Score

Level of risk associated with different			
Substance Involvement Score ranges for Illicit or nonmedical prescription drug use			
0-3	Lower Risk		
4-26	Moderate Risk		
27+	High Risk		

AUDIT

 How often do you have a drink containing alcohol? (0) Never [Skip to Os 9-10] (1) Monthly or less (2) 2 to 4 times a month (3) 2 to 3 times a week (4) 4 or more times a week 	6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily
 2. How many drinks containing alcohol do you have on a typical day when you are drinking? (0) 1 or 2 (1) 3 or 4 (2) 5 or 6 (3) 7, 8, or 9 (4) 10 or more 	 7. How often during the last year have you had a feeling of guilt or remorse after drinking? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily
 3. How often do you have six or more drinks on one occasion? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily Skip to Questions 9 and 10 if Total Score for Questions 2 and 3 = 0 	 8. How often during the last year have you been unable to remember what happened the night before because you had been drinking? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily
 4. How often during the last year have you found that you were not able to stop drinking once you had started? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily 	9. Have you or someone else been injured as a result of your drinking? (0) No (2) Yes, but not in the last year (4) Yes, during the last year
5. How often during the last year have you failed to do what was normally expected from you because of drinking? (0) Never (1) Less than monthly (2) Monthly (3) Weekly (4) Daily or almost daily	 10. Has a relative or friend or a doctor or another health worker been concerned about your drinking or suggested you cut down? (0) No (2) Yes, but not in the last year (4) Yes, during the last year

AUDIT Score

A score greater than 8 is statistically correlated with harmful drinking

Treatment Approaches for SUD

- Medication Assisted Treatment
- Cognitive Behavioral Therapy
- Twelve-step approaches
- Therapeutic communities
- Community reinforcement/contingency management

(Jaffe et al, 2009)

Pharmacotherapy for SUD

•<u>Alcohol</u>

- Naltrexone (PO &IM)
- Topamax
- Acamprosate
- Disulfiram

•<u>Opiates</u>

- Suboxone
- Methadone
- Naltrexone

<u>Stimulants</u>

Citalopram

<u>Marijuana</u>

- N-acetyl cysteine
- Chantix (?)
- Bupropion (?)

<u>Cocaine</u>

• Citalopram (?)

Relapse

- Low rates (50%) of continuous abstinence at 3 months following treatment
- Common context: social situation, peer influence, negative intra- or interpersonal states
- Access to treatment is a key

Harm Reduction

- It's a continuum, not a polarity
- Clients choose goals; professionals give clear recommendations and feedback
- Often results in setting small, progressive goals

Defining Recovery

What we expect What is reality

