2017 President's Challenge

Jay C. Butler, MD, CPE

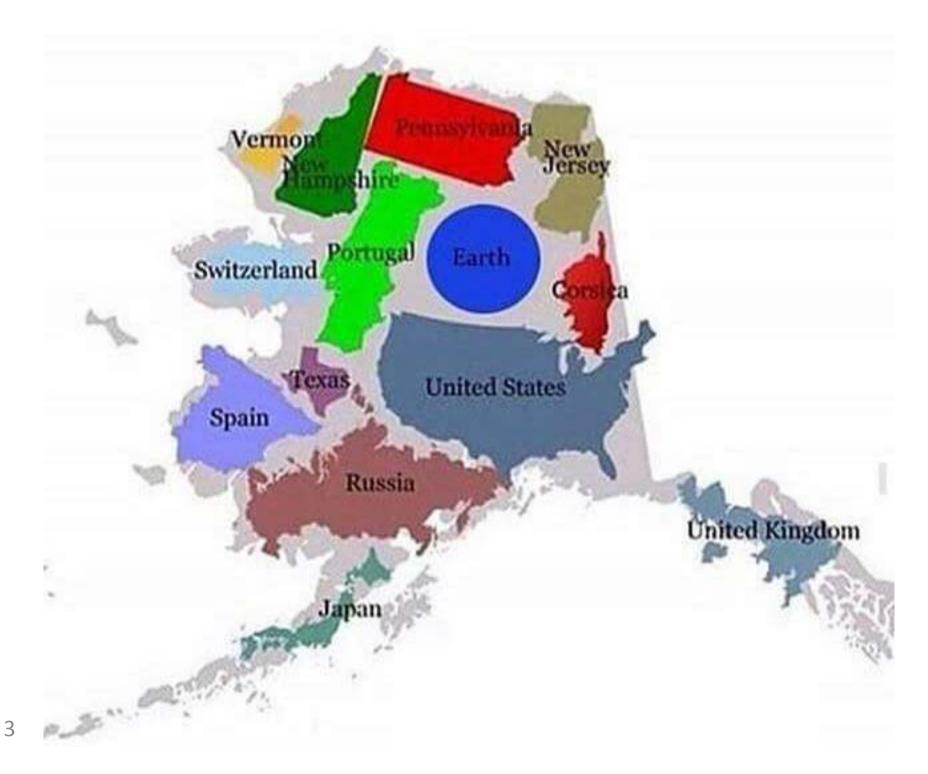
Chief Medical Officer,

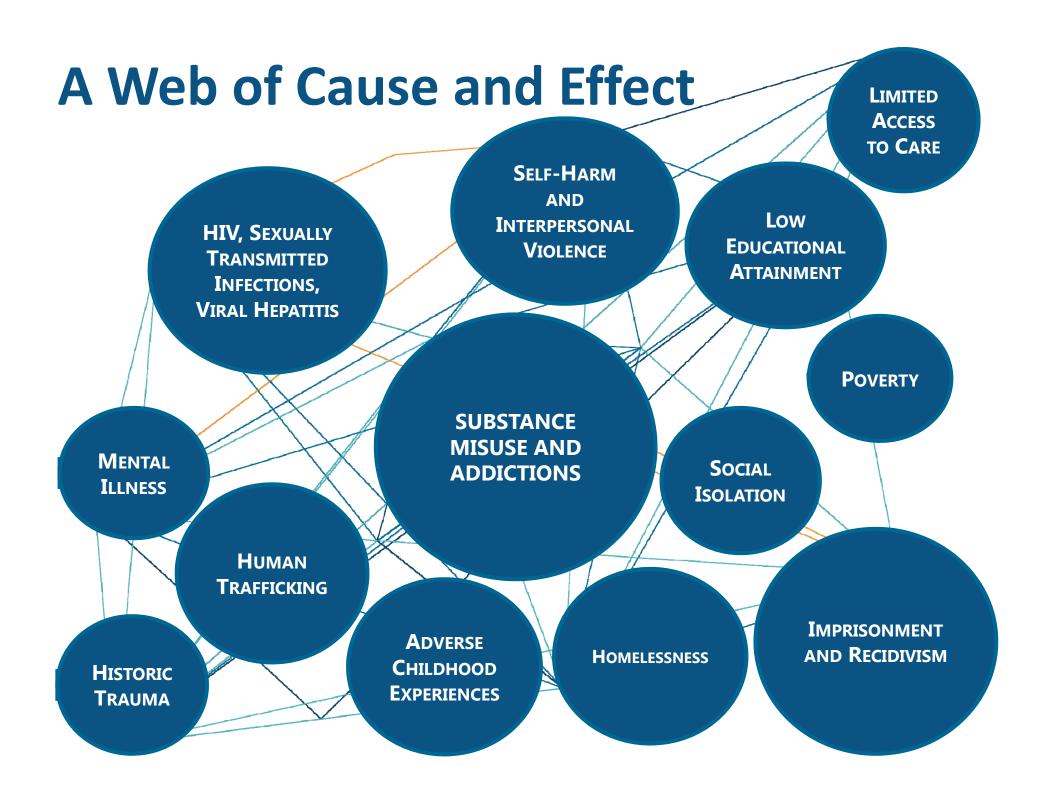
Alaska Department of Health and Social Services

Director, Division of Public Health





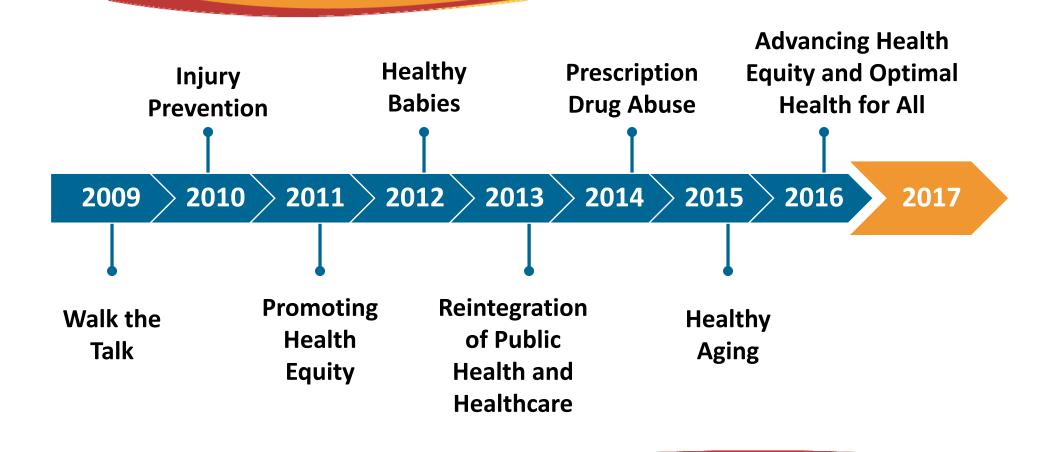




2017 Challenge:

Public Health Approaches to Preventing Substance Misuse and Addictions

Building on Past Challenges



Scope of Substance Misuse and Addictions

Legal Substances

Alcohol, Marijuana

Illicit Substances

Heroin, Methamphetamines, Synthetic Cannabinoids, Cathinones

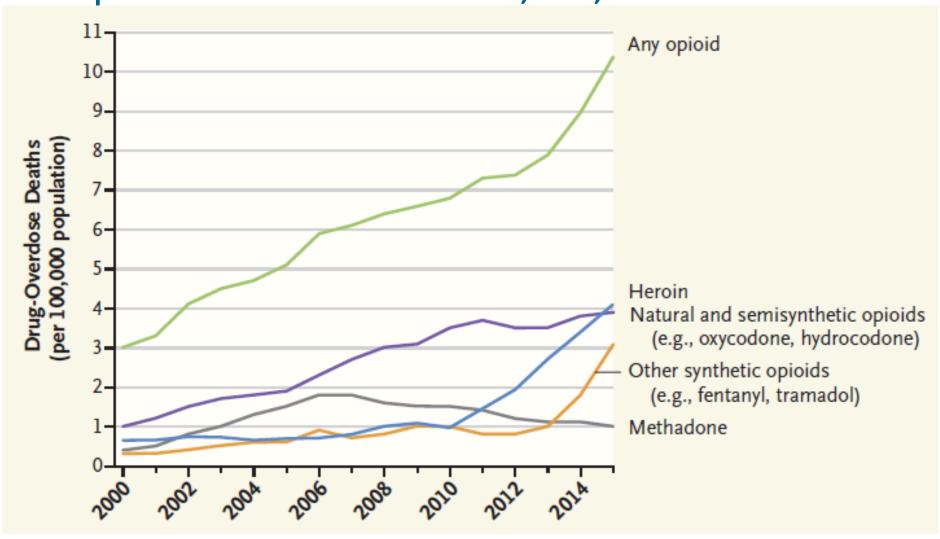
Therapeutic
Substances and
Prescription Drugs

Opioids, Amphetamines, Benzodiazepines

Emerging Technologies

Powdered Alcohol, Vaping Devices, Designer Psychoactives

Opioid Overdose Deaths, US, 2000-2015



Frank RG, Pollack HA. N Engl J Med 2017; 376:605-7



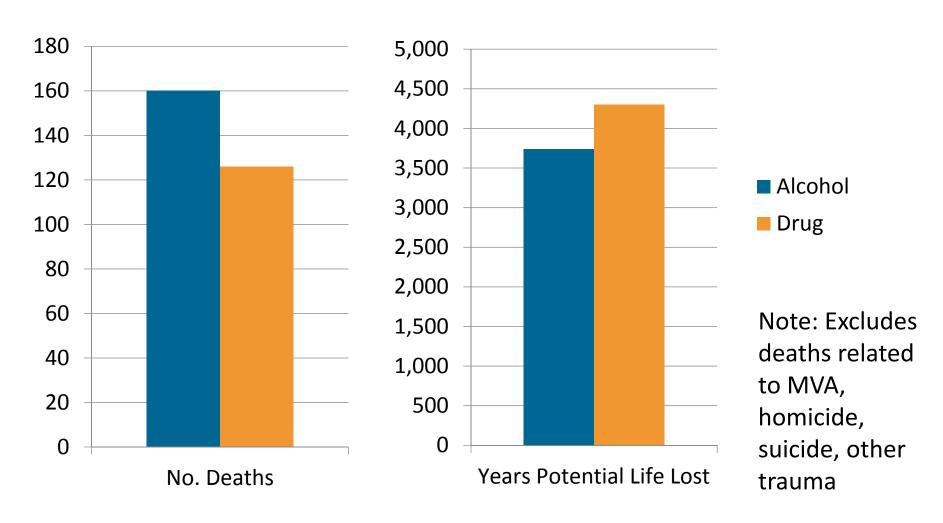
Angry parents protest anesthesiologist accused of over-prescribing opiates

Author: Alex DeMarban ① Updated: 5 days ago Published 5 days ago



Tracy Jones displays a prescription bottle containing ashes of her late daughter, Courtney, while awaiting the arrival of Dr. Mahmood Ahmad for his appeals hearing on Thursday morning. (Erik Hill / Alaska Dispatch News)

Alcohol- and Drug-Induced Deaths and Premature Deaths, Alaska, 2015



Source: Alaska Division of Public Health, Alaska Vital Statistics 2015 Annual Report

Substance Misuse and Addictions: Prevention Framework

Public Health Practice Paradigms

Acute Health Event Control and Prevention

Diagnose a

Diagnose and treat addictions and substance use disorders

Reduce the need to self-medicate, control access to addictive substances, and promote protective factors life-threatening adverse SNEPs outcomes Naloxone Ignition Interlock

Prevent

Screening and Treatment

Remove Stigma

Understanding of Addiction as a Chronic Condition of the Brain

Taxation Age Restrictions

Limited Advertising Prevention of ACEs

Personal and Community Resiliency

Adolescent Risk Reduction Promote Mental Wellness

Effective PDMPs and Use of Data

Rational Pain Management Judicious Prescribing

Environmental Controls and Social Determinants





Chronic Disease Screening

and Management









2016 - 2019 Strategic Map

Develop and Leverage Public Health Approaches to Prevent Substance Misuse, Addictions, and Related Consequences

Reduce Stigma and Change Social Norms Increase Protective Factors and Reduce Risk Factors in Communities

Strengthen Multi-Sectoral Collaboration Strengthen Prevention Infrastructure Optimize the Use of Cross-Sector Data for Decisionmaking











Foster Cultural Competence and Relevance

Cross-Sectoral Collaboration is Key









Justice and Corrections



Medical Boards



Healthcare Providers



Hospitals and Clinics



Community Coalitions



Businesses and Labor



Media



Emergency Medical Services



Social Services
Agencies



Faith Communities



Pharmaceutical Industry



Educators



Third-Party Payers

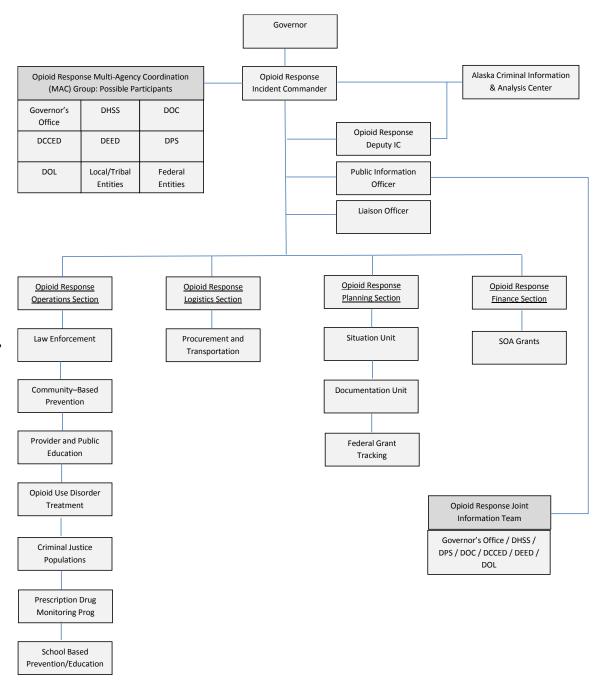


Others



Alaska Opioid Response Incident Command System

- State Disaster Declaration
 - February 15, 2017
- Administrative Order 287
 - Multi-agency approach
 - Local, Tribal, State, Federal, and Non-Governmental Agencies
- Multi-Agency Coordination (MAC) Group
- Incident Command System
- Alaska Criminal Information and Analysis Center
- Joint Information System



"No silver bullet exists to stem the tide of prescription drug abuse in America...The lack of an easy solution requires all of us to treat the opioid crisis as a nonpartisan issue and adopt an 'all hands on deck' approach."

Congressman Hal Rogers (R-KY) May 11, 2016



What Can We Do?

Increase access to naloxone

- Provide public and professional education on administering naloxone and managing overdose
- Eliminate liability and financial barriers
- Authorize standing orders, third-party prescribing, and pharmacist independent dispensing

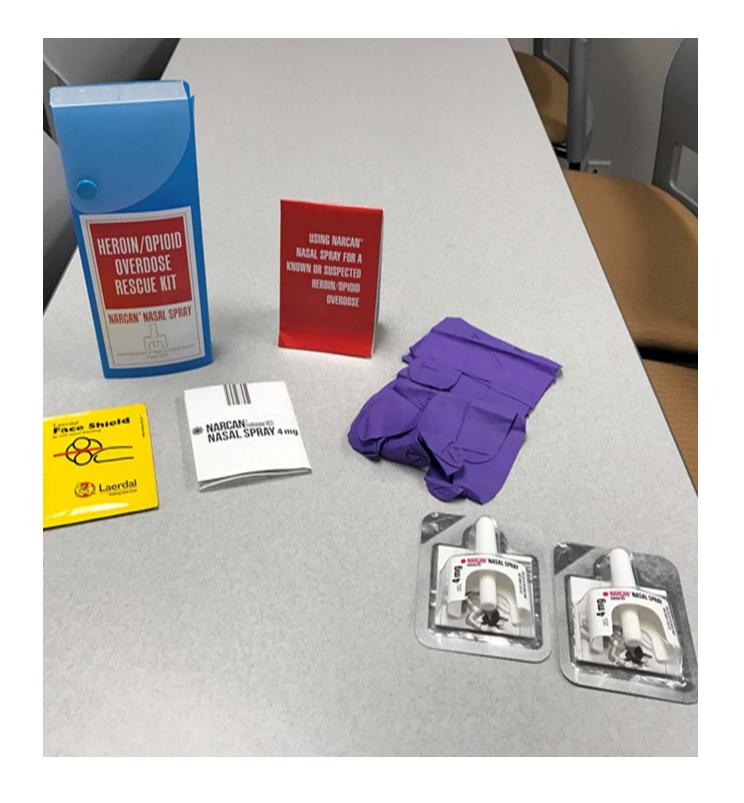
Support clean needle use

- End "drug paraphernalia laws" that restrict access
- Support syringe and needle sales and exchange programs

Reduce impaired driving

- Support widespread and sustained use of ignition interlocks
- Implement sobriety checkpoints







Volunteers assemble 'rescue kits' in hopes of preventing overdose deaths

Author: Marc Lester ① Updated: February 13 🏥 Published February 12



About 35 volunteers helped package Heroin/Opioid Overdose Rescue Kits in a storage room at MyHouse, a homeless youth center in Wasilla on February 9, 2017. (Marc Lester / Al**20**a Dispatch News)

What Can We Do?

Reframe "addictions"

- Promote a science-based understanding of addictions
- Increase awareness of addictions as chronic health conditions



Increase screening and diagnosis

 Incorporate Screening, Brief Intervention and Referral to Treatment (SBIRT) into healthcare and social services

Improve access to withdrawal symptom management and support for recovery

- Remove barriers to access to therapy for withdrawal symptom management and maintenance of recovery
- Train prescribers and dispensers on identifying and managing addictions
- Increase facilities and providers
- Encourage third-party payer coverage

"We have to stop treating addiction as a moral failing, and start seeing it for what it is: a chronic disease that must be treated with urgency and compassion."

- Dr. Vivek H. Murthy, United States Surgeon General

FACING ADDICTION IN AMERICA

The Surgeon General's Report on Alcohol, Drugs, and Health

U.S. Department of Health & Human Services

Call 1-800-662-HELP or visit samhsa.gov/find-help

Can a 'miracle shot' called Vivitrol break the prison-heroin cycle in Alaska?



Arielle Holmes, 28, is one of three Alaska inmates in Alaska to be the first to receive Vivitrol before her release as part of a pilot project of the state Department of Corrections. (Marc Lester / Alaska Dispatch

What Can We Do?

- Promote healthy families and increase resiliency
 - Promote maternal and early childhood health programs
 - Prioritize pregnant women for screening and access to treatment
 - Utilize tools outlined in CDC's 2016 technical package, "Preventing Child Abuse and Neglect"



- Reduce the prescription supply of opioids in communities
 - Develop and utilize user-friendly, robust PDMPs
- Support safer pain management and judicious prescribing
 - Expand public and professional education, including evidence-based pain management guidelines and non-opioid pain management strategies
 - Encourage providers to take the Surgeon General's pledge
 - Develop and promote safe medication storage practices and drug return programs



PHOTOS BY MICHAEL PENN LAUNEAU EMPIRE

TOP: Surrounded by his Cabinet and staff members, Gov. Bill Walker speaks at a Capitol press conference on Monday about legislation he is introducing to change the way opioids are prescribed and monitored. ABOVE: Andy Jones, Chief of Emergency Programs at the Division of Public Health, demostrates the use of a medication disposal system at a Capitol press conference on Monday.

Gov's bill gives patients option to decline opioids, limit prescriptions

By BECKY BOHRER
THE ASSOCIATED PRESS

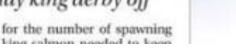
Gov. Bill Walker on Monday proposed additional steps aimed at addressing opioid abuse in Alaska, including pain management training for medical providers and limits on initial prescriptions. The proposal is the latest from Walker, who, in a move applauded by state legislators, last month issued a public health disaster declaration stemming from the abuse of opioids, such as heroin and prescription painkillers.

SEE OPIOID | Page A2

OUTDOORS

Spring king fishing canceled in Juneau

Citing low forecast, ADF&G calls anglers off for two months; May king derby off



What Can We Do?

Use data for assessing the problem and measuring progress

- Standardize and enhance post-mortem toxicological testing in investigation of suspected overdose and suicide deaths (e.g., testing for fentanyl)
- Leverage Violent Deaths Reporting System to increase timeliness and accuracy of data collection and analysis
- Develop syndromic surveillance methodology to identify clusters of overdose and substance toxicity
- Increase capacity to determine risk factors for HCV infection
- Establish access to and capacity to analyze PDMP data
- Utilize BRFSS module assessing ACEs
- Create lines of communication to assure cross-sectoral data sharing

What Will Success Look Like?

Near horizon (next 3 years)

- Reduced deaths from drug overdose
- Declines in motor vehicle crashes from impaired driving
- Fewer self-injection related HIV and HCV infections
- Less unintentional injuries and self-harm related to drugs and alcohol

Further horizons

- Lower rates of drug misuse and addiction, including underage use
- Reduced drug- and alcohol-related incarceration and re-incarceration of persons with addictions
- Lower rates of crime and referrals to child protective services
- Less interpersonal violence, self-harm, and child neglect
- Prevention of excessive prescriptions for controlled substances while improving wellness and function

