

September 5, 2019



D.C. Update: SAMHSA announces \$932 million in State Opioid Response Grants, Recovery Month kicks off, and Surgeon General releases advisory on marijuana



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### Around the Agencies

#### **HHS announces \$1.8 billion in funding to States to address opioid crisis**

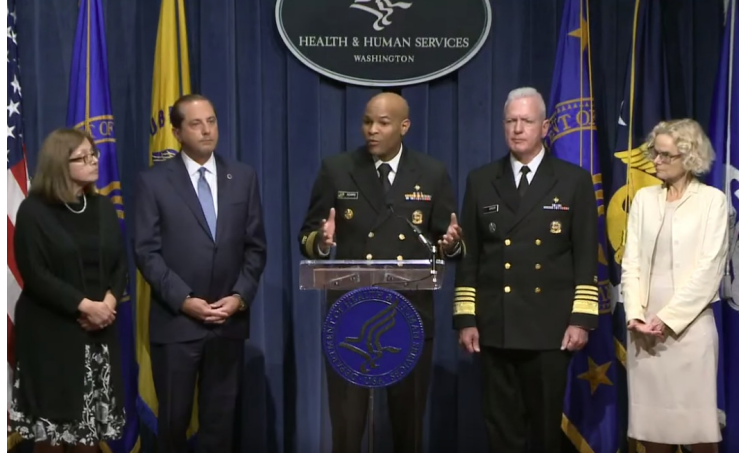
Yesterday the Department of Health and Human Services (HHS) [announced](#) more than \$1.8 billion in funding for States to continue efforts to combat the opioid crisis by “expanding access to treatment and supporting near real-time data on the drug overdose crisis.” The announcement includes [\\$932 million](#) through the Substance Abuse and Mental Health Services Administration (SAMHSA) as part of the State Opioid Response (SOR) grants. Congress appropriated \$1.5 billion for SOR in FY 2019, and this funding of \$932 million is in addition to the \$487 million released earlier this year.

The funding announcement also includes \$900 million for the Centers for Disease Control and Prevention (CDC) for a three-year cooperative agreement with States, territories, and localities to increase understanding of the opioid crisis and improve prevention and response activities, including tracking overdose data as closely to real-time as possible to support overdose prevention work. The CDC has released [\\$301 million for the first year of the agreement](#). Secretary of HHS, Alex Azar, noted that “our country is seeing the first drop in overdose deaths in more than two decades, more Americans are getting treatment for addiction, and lives are being saved... We will continue executing on the Department’s [5-Point strategy](#) for combating the opioid crisis.”

#### **Surgeon General**

### **advisory on the impact of marijuana on developing brains**

Last week, Surgeon General Jerome Adams [announced](#) an advisory on the impact of marijuana on the developing brain. In particular, the [advisory](#) focuses on the detrimental effects of marijuana on pregnant women and



adolescents. During the announcement, the Surgeon General was joined by Secretary of the Department of Health and Human Services, Alex Azar; Assistant Secretary for Mental Health and Substance Use, Dr. Elinore McCance-Katz; Assistant Secretary for Health, Admiral Brett Giroir; and Director of the National Institute on Drug Abuse, Dr. Nora Volkow.

In the advisory, Vice Admiral Adams states that, “I, Surgeon General VADM Jerome Adams, am emphasizing the importance of protecting our Nation from the health risks of marijuana use in adolescence and during pregnancy. Recent increases in access to marijuana and in its potency, along with misperceptions of safety of marijuana endanger our most precious resource, our nation’s youth.”

The advisory includes resources on marijuana for parents and parents-to-be; youth; States, communities, tribes, and territories; and health professionals.

### **GAO releases report on safe and effective disposal of unused opioids**

The U.S. Government Accountability Office (GAO) recently released a [report](#) to congressional committees in response to a provision in the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act requiring the GAO to review patient disposal of unused opioids. The report addresses available methods for the safe disposal of unused prescription opioids and what is currently known about patients’ use of these methods. GAO examined available studies and found that many patients are unaware of the federal recommendations for disposal or choose not to dispose of unused prescriptions, even with 70% of the U.S. population living within 5 miles of permanent collection sites. According to the report, several studies found that, “between one-quarter and three-quarters of patients stored unused opioids for future use or had misplaced their unused opioids,” and “85 percent of intentional misuse occurs with the patient’s knowledge—for example, when a patient sells or gives away unused prescription opioids.” To address this, the GAO notes that the Food and Drug Administration (FDA) and some physician organizations have created educational efforts to encourage safe disposal. For example, the FDA launched a public awareness campaign called “[Remove the Risk](#)” in April 2019.

### **CDC announces decline in opioid overdose deaths and rise in concomitant drug use**

The Centers for Disease Control and Prevention (CDC) examined trends in opioid overdose deaths in their Morbidity and Mortality Weekly [Report](#) released last week. Researchers analyzed 25 States participating in the CDC’s State Unintentional Drug Overdose Reporting System (SUDORS) from 2017-2018 and noted a decrease of 4.6% in overdose deaths associated with prescription opioids and illicit synthetic opioids (excluding fentanyl). However, during the same

time period, researchers found that illicitly manufactured fentanyl (IMF) overdose deaths increased by 11% and the majority of opioid deaths (62.6%) co-occurred with one or more of the following drugs: benzodiazepines, cocaine, and methamphetamine. Researchers indicated that “continued increases in IMF deaths highlight the need to broaden outreach to persons at high risk for IMF overdoses and improve linkage to risk-reduction services and evidence-based treatment.” The study also noted the importance of prevention and treatment efforts that attend to polysubstance use.

### **NIDA offers toolkit for educating teens during out of school time**

The National Institute on Drug Abuse (NIDA) [announced](#) a new toolkit for “out of school time” organizations that offer programming before and after school, on weekends, and during school breaks. The NIDA Toolkit for Out of School Time includes science-based educational activities on drug use and was designed for educators, parents, and youth-serving organizations. The activities and lessons can be used together or independently and can be customized to fit the organization’s needs. Examples of activities in the toolkit include Brain Power!, which educates teens on the science behind drug use, and the Drugs & Health Blog, which helps teens make connections between what they hear from peers and the science behind drug use/misuse.

### **NIDA announces game to educate teens on addiction**

The National Institute on Drug Abuse (NIDA) has [released](#) “Jeopardy Drug Use”, an educational game based on the [NIDA for Teens Drug Facts](#). The game is intended to teach teens about addiction through an interactive answer-and-question format, similar to the popular game Jeopardy, after they have reviewed NIDA’s pages on the brain and addiction, marijuana, prescription drugs, tobacco/nicotine/e-cigarettes, and inhalants.

### **OJJDP and NIJ releases report on juvenile arrest trends**

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the National Institute of Justice (NIJ) within the Department of Justice (DOJ) recently released a “Juvenile Arrests, 2017” [report](#). Based on data from the Federal Bureau of Investigation’s Uniform Crime Reporting program, the total number of arrests involving juveniles in 2017 was at its lowest level in nearly four decades. However, juvenile arrests vary by demographic group and offense. Relative declines have been greater for males than for females across many offenses, with the female share continuing to increase since 1980. In addition, arrest rates involving violent crimes tend to be higher for African American youth than white youth, and liquor law violations were higher for American Indian and white youth.

## **Research Roundup**

### **Study finds primary care appointment characteristics influence opioid prescribing practices**

A recent [study](#) from the *Journal of the American Medical Association* (JAMA) examined the relationship between primary care clinic appointment times and opioid prescribing. According to the study, “time pressure to provide a quick fix” is commonly cited as a reason why opioids are frequently prescribed in the United States. Researchers posited that as the workday progresses and appointments run behind schedule, clinicians may be more likely to prescribe opioids. Results of the study showed a 33% relative increase in opioid prescribing over the course of the workday and a 17% relative increase as appointments started later than initially scheduled. Researchers concluded that

characteristics of appointment timing have an effect on clinical decision-making for opioid prescribing.

### Study examines effects of postoperative opioid prescribing guidelines

In a [letter](#) to the editor of *The New England Journal of Medicine* (NEJM), University of Michigan researchers discussed a new study titled, "Statewide Implementation of Postoperative Opioid Prescribing Guidelines." The Michigan Surgical Quality Collaborative (MSQC), in partnership with the Michigan Opioid Prescribing Engagement Network (OPEN), used data to develop prescribing guidelines for nine surgical procedures and measured the effect on prescribing in a statewide hospital collaborative. Results of the study showed that "despite the reductions in prescription size and opioid use, no clinically important changes in satisfaction or pain scores were observed." Researchers concluded that evidence-based prescribing guidelines lead to reduced postoperative opioid prescription size without compromising patient satisfaction or pain levels.

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### Upcoming Events September is Recovery Month

Every September, the Substance Abuse and Mental Health Services Administration



NATIONAL  
RECOVERY  
MONTH 2019  
30th Anniversary

(SAMHSA) sponsors Recovery Month to increase awareness and understanding of mental and substance use disorders and celebrate the people in recovery. This year's Recovery Month theme is "Join the Voices for Recovery: Together We Are Stronger." Recovery Month works to promote and support new evidence-based treatment and recovery practices, a strong recovery community, and the dedication of providers and community members who help make recovery possible. The [Recovery Month website](#) offers a list of events happening throughout the month of September in communities across the U.S., as well as promotional materials and a series of personal recovery stories.