

August 1, 2019



D.C. Update: NASADAD welcomes new Research Analyst, SAMHSA announces new CSAT Director, and more



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News from NASADAD

Jose Silva joins NASADAD Research and Program Applications Department

The National Association of State Alcohol and Drug Abuse Directors (NASADAD) is pleased to announce that Jose Silva, MPH, MSW has joined our team as a Research Analyst. Mr. Silva is a recent graduate of the University of Pittsburgh with a dual master's degree in public health and social work. Before arriving at NASADAD, Jose was an Education/Employment Specialist in the Behavioral Healthcare Division of the Arlington County Department of Human Services, and spent time as a Trauma Survivors Network Fellow with the Allegheny Health Network. To contact Jose, email jsilva@nasadad.org.



Around the Agencies

SAMHSA announces new director of CSAT and new Chief Medical Officer

The Substance Abuse and Mental Health Services Administration (SAMHSA) announced [Dr. Louis Trevisan](#) as the new director for the Center for Substance Abuse Treatment (CSAT). Dr. Trevisan is a board-certified Addiction Psychiatrist and

prior to coming to SAMHSA, he served as the Substance Use Disorder Lead Consultant for the Department of Veterans Affairs (VA) National TeleMental Health Center. During this time, he also provided direct substance use disorder services via telemental health to rural areas of Maine, Massachusetts, and Rhode Island via the Office of Rural Health at the VA Connecticut Healthcare System (VACHS). Dr. Trevisan received his medical degree from the Oregon Health Sciences University School of Medicine and completed his residency in Adult Psychiatry at Yale University Department of Psychiatry and Yale-New Haven Hospital.

SAMHSA also announced [Dr. Neeraj Gandotra](#) as the new Chief Medical Officer (CMO). Prior to coming to SAMHSA, Dr. Gandotra served as CMO for the fourth largest nationwide addiction treatment network where he developed national strategies specifically aimed at reducing risk and improving outcomes. Dr. Gandotra also served as Medical Director of Addiction Treatment Services at Johns Hopkins, the Center for Addiction and Pregnancy, and various federally qualified health centers. Dr. Gandotra is a member of the American Society of Addiction Medicine (ASAM) and American Academy of Addiction Psychiatry (AAP). He received his medical degree from the Universidad Iberoamericana (UNIBE) School of Medicine, completed his Psychiatric residency at Howard University, and completed a Psychiatric Fellowship at Yale University School of Medicine.

[New report on Indian Health Service hospitals' opioid prescribing practices](#)

The Department of Health and Human Services (HHS) Office of Inspector General (OIG) recently released a [report](#) titled "IHS Needs to Improve Oversight of its Hospitals' Opioid Prescribing and Dispensing Practices and Consider Centralizing its Information Technology Functions." According to the report, an audit was conducted at five Indian Health Services (IHS) hospitals and found that hospitals did not consistently follow the Indian Health Manual when prescribing and dispensing opioids. Through a patient record review, the OIG determined that hospitals did not always review patient treatment and causes of pain within required timeframes, perform urine drug screens, review patient records before filling prescriptions from a non-IHS provider, and maintain appropriate documentation. The OIG also found that "IHS's decentralized IT management structure led to vulnerabilities and weaknesses in implementing security controls at all five hospitals," a potential threat to patient health information. The OIG recommended that IHS work with hospitals to ensure they follow the Indian Health Manual and to consider centralizing their IT systems.

[Interagency Coordinating Committee on the Prevention of Underage Drinking \(ICCPUD\) Holds Stakeholder Meeting](#)

On Thursday, August 1, the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD) held a stakeholder meeting to provide an update on the status of efforts to prevent underage drinking both within the federal government and State governments. Robert Morrison, Executive Director of NASADAD, participated in the event. The ICCPUD began meeting in 2004 and was made permanent through the Sober Truth on Preventing Underage Drinking (STOP) Act – legislation approved by Congress and signed by President Bush in 2006.

Johnetta Davis-Joyce, Director of the Center for Substance Abuse Prevention (CSAP) within the Substance Abuse and Mental Health Services Administration (SAMHSA), kicked off the meeting. Dr. Ralph Hingson, Director of Epidemiology and Prevention Research within the National Institute of Alcohol Abuse and Alcoholism (NIAAA) provided an overview of data describing underage drinking efforts across the country. Dr. Craig Thomas, Director of the Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion within the Centers for Disease Control and Prevention (CDC) provided an overview of the plan and goals established in the STOP Act. Rob Vincent, Public Health Analyst within CSAP, then reviewed recent activities authorized in the

STOP Act – including adult media campaigns, drug-free communities enhancement grants, and more.

The STOP Act also required the development and release of an annual report regarding each State's efforts related to underage drinking. The first report was released in 2012. Over time, different reports have been added to the core document. For example, State Performance and Best Practices for the Prevention and Reduction of Underage Drinking describes 26 evidence-based legal policies regarding underage drinking. This report also includes information on individual State's performance on six underage prevention and treatment measures. Another supplemental document available includes a State-by-State description of enforcement data that includes categories such as compliance checks, sanctions against retailers, minor in possession citations, and more. To see the STOP Act Report to Congress and supplemental reports, click [here](#).

Dr. Nora Volkow discusses the importance of community support for MAT patients

Dr. Nora Volkow, Director of the National Institute on Drug Abuse (NIDA), recently discussed the importance of community support for patients who are receiving medication-assisted treatment (MAT). A video recently released by the Psychiatry & Behavioral Health Learning Network features her [speaking](#) at the Rx Drug Abuse & Heroin Summit in Atlanta, GA earlier this year. In the video, Dr. Volkow said that MAT is effective, but many patients lack access to the medication or stop taking it prematurely. The biggest challenge, according to Dr. Volkow, is that patients who are initiated on MAT are not provided with adequate community supports to keep them engaged in treatment and recovery. These supports are necessary for reintegration with family, the community, and obtaining employment. Dr. Volkow noted the importance of communities coming together to create these support systems for individuals entering recovery.

In the News

Study examines rural-urban trends of opioid overdoses in Missouri emergency departments

A [study](#) recently published in *The Journal of Rural Health* examined geographical trends in nonfatal opioid, heroin, and non-heroin opioid overdoses in the State of Missouri from 2012-2016. Researchers analyzed hospital billing data from emergency departments (ED), which were aggregated into 6 progressively rural groups. According to the study, Missouri's two most urban counties had significantly higher rates of opioid overdoses and saw larger percentage increases in rates compared to rural areas. Non-heroin opioid overdoses had lower overdose rates, which remained more stable than heroin trends over the study period. Researchers concluded that a greater understanding of geographical factors could drive evidence-based programming and appropriate resource allocation.

Study examines relationship between binge drinking and prescription opioid misuse

The *American Journal of Preventive Medicine* recently published a [study](#) titled "Binge Drinking and Prescription Opioid Misuse in the U.S., 2012-2014." According to the study, one in five prescription opioid deaths also involved alcohol use, however little is known about the relationship between drinking patterns and prescription opioid misuse. Data from the National Survey on Drug Use and Health (NSDUH) was analyzed with a focus on the prevalence of self-reported past-30-day prescription opioid misuse and drinking patterns. Results of the study found that 1.6% of all individuals aged 12 years or older and 3.5% those who binge drink also reported prescription opioid misuse. Overall, the prevalence of prescription opioid misuse increased significantly with binge drinking frequency. Researchers concluded that evidence-based strategies for preventing binge drinking could have an effect on reducing prescription opioid misuse.

Heroin overdose trends among insured individuals

A [study](#) recently published in *The American Journal of Managed Care* examines heroin overdose trends among insured individuals, focusing on healthcare utilization preceding an overdose and prior prescription opioid use. Researchers found that heroin overdose rates were initially much lower in the commercially insured group than among Medicaid beneficiaries. However, rates increased faster among commercially insured individuals compared with Medicaid enrollees from 2010 to 2014, reaching the same overdose rate between the groups for 15-24 year-olds in 2012. Two-thirds of commercially insured patients had an outpatient visit in the 6 months prior to their heroin overdose, leading researchers to conclude that intervention strategies in outpatient settings could be particularly important for young, commercially insured patients.
