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Meet the Member

**Maggie Schroeder, Branch Manager for the Adult Substance Use Treatment and Recovery Services Branch, Division of Behavioral Health, Developmental & Intellectual Disabilities, State of Kentucky**

Maggie Schroeder is the Branch Manager for the Adult Substance Use Treatment and Recovery Services Branch at the Division of Behavioral Health, Developmental & Intellectual Disabilities for the State of Kentucky. Ms. Schroeder has a Master’s Degree in Clinical Psychology and Political Science and is a Licensed Clinical Alcohol and Drug Counselor (LCADC). She has over 30 years of experience in providing behavioral health and substance use services to individuals and their families including case management and therapeutic intervention services as well as providing clinical and administrative supervision.

Around the Agencies

**ONDCP to Develop National Nonfatal Overdose Tracking System**

Dr. Rahul Gupta, Director of the Office of National Drug Control Policy (ONDCP), and David Holtgrave, Senior Policy Analyst at ONDCP, recently published a [Viewpoint in the Journal of the American Medical Association](https://www.jama.com) announcing...
that ONDCP will develop a national nonfatal overdose tracking system. ONDCP has created a Drug Data Interagency Working Group to lead the development of the system in collaboration with federal agencies and will begin by reviewing all existing sources of data on nonfatal overdoses. The national tracking system aims to:

- Estimate national incidence and prevalence of nonfatal overdoses;
- Estimate unmet need for medical and social services;
- Predict trends in fatality rates of overdoses to help public health systems respond more effectively;
- Estimate success of overdose intervention programs; and,
- Analyze emerging threats.

**FDA Publishes Timeline of Activities and Significant Events Addressing Opioid Use**

The Food and Drug Administration (FDA) has published a timeline tracing key developments the United States has made in addressing opioid use disorder (OUD) and the U.S. opioid overdose crisis. The timeline provides chronological information about FDA activities and other significant events to address OUD from 1911 to today. Additional actions and details about the events in the timeline can be found here.

**DOJ Launches New England Prescription Opioid Strike Force to Crack Down on Illegal Opioid Prescriptions**

The Department of Justice’s (DOJ) Criminal Division recently announced the formation of the New England Prescription Opioid (NEPO) Strike Force, a joint law enforcement effort to combat unlawful prescribing of opioids in the New England region. The Strike Force consists of the Health Care Fraud Unit in the Criminal Division’s Fraud Section, three federal districts’ U.S. Attorneys’ Offices, as well as law enforcement partners at the Department of Health and Human Services Office of the Inspector General (HHS-OIG), the Drug Enforcement Administration (DEA), and the Federal Bureau of Investigation (FBI). The group aims to identify and investigate health care fraud schemes in the New England region and prosecute those involved in the illegal distribution of prescription opioids and other prescribed controlled substances. The Strike Force will work closely with other federal and State law enforcement agencies, including the State Medicaid Fraud Control Units, to tackle health care fraud and drug diversion schemes by physicians, pharmacists, and other medical professionals. View the announcement here.

**Research Roundup**

**NIH Identifies New Brain Mechanism In Impulsive Cocaine-Seeking Rats**

As stated in the news release, scientists from the National Institutes of Health’s (NIH) National Institute on Drug Abuse (NIDA) published a study that found that blocking certain acetylcholine receptors in the lateral habenula (LHb) made it harder for rats to resist seeking cocaine. Using a Go/NoGo model, they found that response inhibition for cocaine is impaired by blocking a certain type of muscarinic acetylcholine receptor, known as M2Rs. These receptors could be potential targets for treating impulsive drug seeking and substance use disorders (SUD). Developing safe and effective medications to treat cocaine and other stimulant use disorders is critical to expanding the choices for people seeking treatment and recovery. The study was funded by the NIDA Intramural Research...
COSSAP Report: How Courts and Jails are Partnering to Support Medication-Assisted Treatment

The Bureau of Justice Assistance’s (BJA) Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP) published a report on corrections agencies establishing community partnerships to create medication-assisted treatment (MAT) programs for individuals with opioid use disorder (OUD) who have been arrested or incarcerated. The report features case studies on partnerships between jails and courts that have increased access to MAT, their strategies for launching programs, and the factors that make them successful. The report highlights the importance of stakeholder engagement across the justice system and how community education and flexibility among stakeholders can help jails and courts collaborate to better address OUD.

Small Study Suggests Approved Insomnia Drug Can Aid in Opioid Recovery

A study published in the Science Translational Medicine journal by a team of researchers from Johns Hopkins University School of Medicine, backed by the National Institutes of Health’s (NIH) Helping to End Addiction Long-term (HEAL) Initiative found that an approved drug for insomnia, suvorexant (Belsomra®), could help reduce sleeplessness in those being treated for an opioid use disorder (OUD). The researchers gave the drug to people during and immediately after tapering off opioids and over a week-long period they found that individuals who took suvorexant slept significantly more while curbing their opioid withdrawal and craving. The data showed that those taking suvorexant over four days while tapering off opioids slept 90 minutes longer per night on average and continued to sleep for an extra hour a night in the four days following the tapering period. There was also no evidence that suvorexant comes with a risk for drug misuse. However, because the study was small (26 people) and short-term, it lacks the statistical power to confirm meaningful differences.

Webinars to Watch

COSSAP Webinar: Innovative Efforts to Distribute Naloxone to Justice Involved Populations

The Bureau of Justice Assistance’s (BJA) Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP) and RTI International are hosting a webinar on the use of vending machines as a strategy for widespread distribution of Naloxone to individuals released from jail facilities. This no-cost webinar is on July 13, 2022, at 2:00 p.m. (ET). The webinar will cover the processes by which States can support Naloxone distribution, including strategies for implementation and funding streams, as well as the barriers to the distribution of Naloxone. Specifically, the presentation aims to:

- “Provide some understanding of why Naloxone distribution to returning citizens is important.
- Describe the barriers and facilitators towards the distribution of naloxone through vending machines.
- Give insight into multiple federal funding sources being used to purchase vending machines and the various types of products that communities are distributing.”