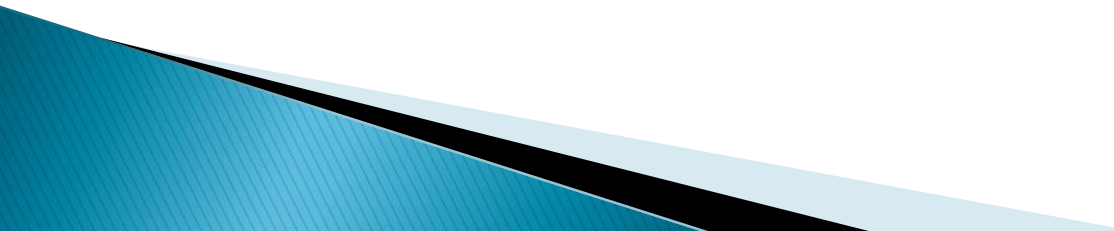




Supporting Communities through Education and Pain Management

- ▶ Opioids – natural and synthetic substances that act at one of the three main opioid receptor systems; with analgesic and CNS depressant effects.
 - Opiates – natural from the opium poppy – morphine and codeine.
 - Synthetic opioids – oxycodone and hydrocodone are semisynthetic; fentanyl, tramadol and methadone are synthetic.

 - ▶ Used as painkillers

 - ▶ Great potential for misuse
- 

Opioids effects

- Tolerance
- Physical dependence
- Sensitivity to pain
- Constipation
- Nausea, vomiting and dry mouth
- Sleepiness and dizziness
- Confusion
- Depression
- Decreased testosterone levels
- Itching and sweating
- Respiratory depression and death

Risk factors for prescription abuse and overdose



Risk Factors for Prescription Opioid Pain Reliever Abuse and Overdose



Obtaining overlapping prescriptions from multiple providers and pharmacies.



Taking high daily dosages of prescription opioid pain relievers.



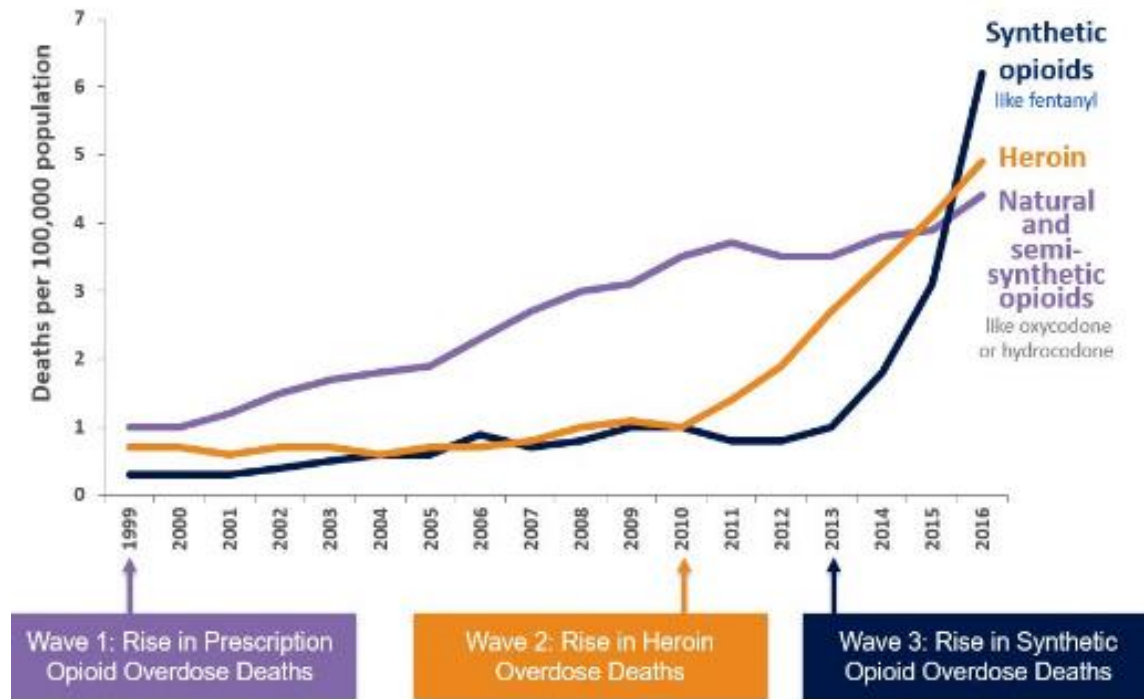
Having mental illness or a history of alcohol or other substance abuse.



Living in rural areas and having low income.

- ▶ The United States is in the middle of an opioid crisis; killing more than 42,000 people in 2016.
- ▶ On average, 115 Americans die every day from an opioid overdose.
- ▶ 40% of all opioid overdose deaths involve a prescription opioid.

3 Waves of the Rise in Opioid Overdose Deaths



SOURCE: National Vital Statistics System Mortality File.

Heroin use is part of a larger substance abuse problem.

Nearly all people who used heroin also used at least 1 other drug.

Most used at least **3** other drugs.

Heroin is a highly addictive opioid drug with a high risk of overdose and **death** for users.

People who are addicted to...



ALCOHOL

are

2x



MARIJUANA

are

3x



COCAINE

are

15x



Rx OPIOID PAINKILLERS

are

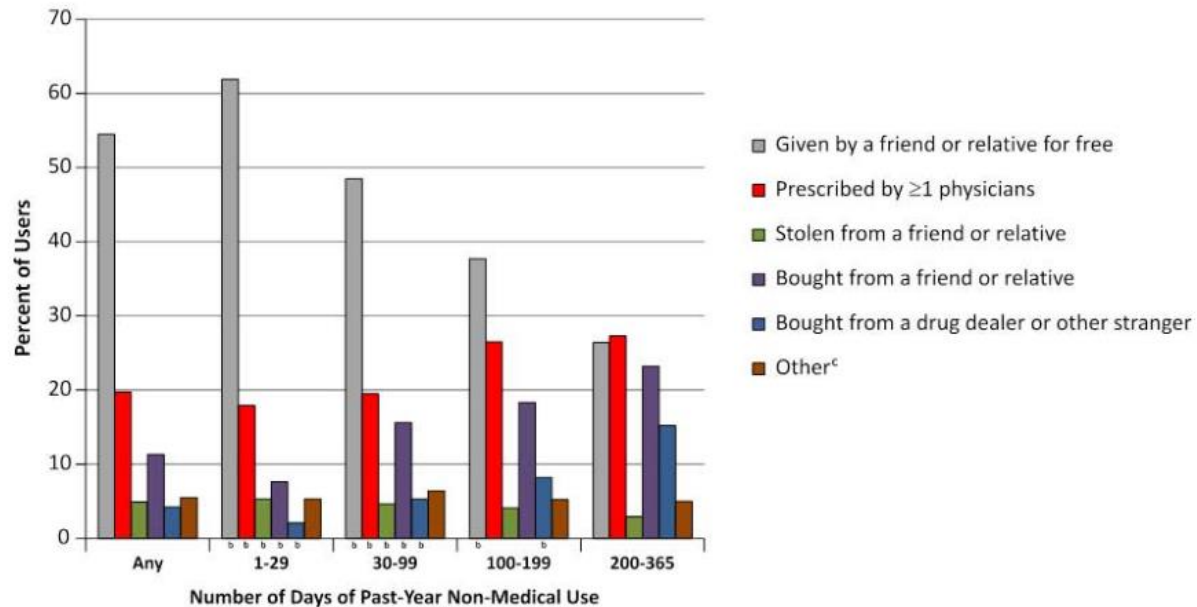
40x

...more likely to be addicted to heroin.



Vital^{CDC}signs™

Sources of Prescription Opioids Among Past-Year Non-Medical Users^a



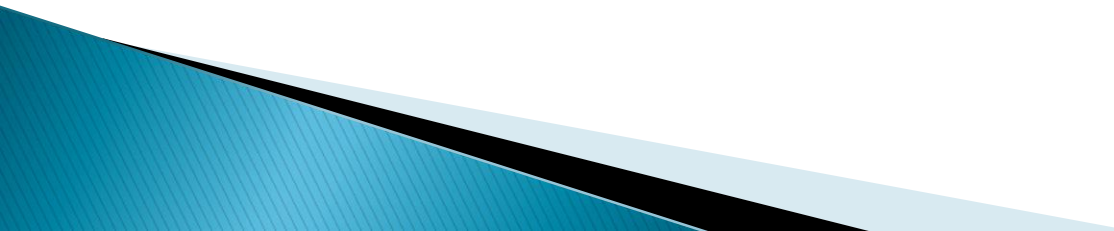
^a Obtained from the US National Survey on Drug Use and Health, 2008 through 2011.⁵

^b Estimate is statistically significantly different from that for highest-frequency users (200-365 days) ($P < .05$).

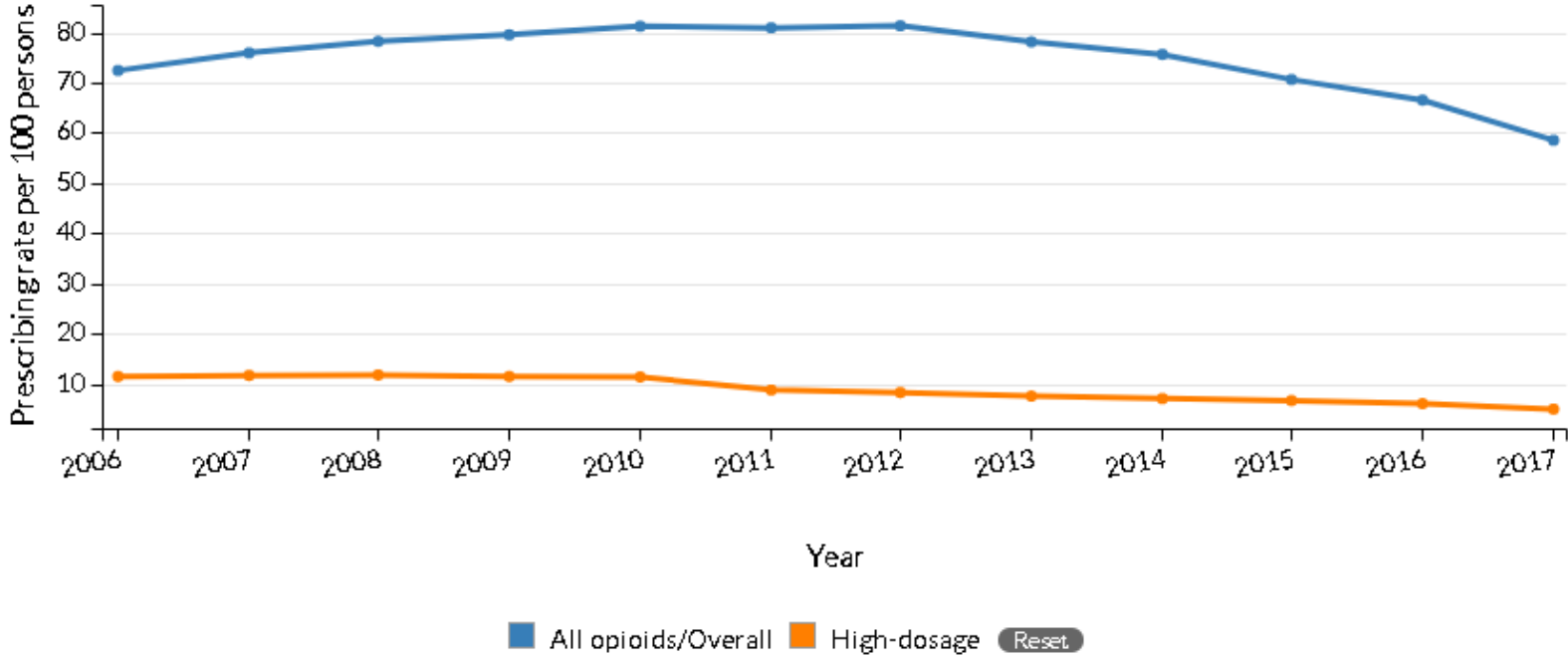
^c Includes written fake prescriptions and those opioids stolen from a physician's office, clinic, hospital, or pharmacy; purchases on the Internet; and obtained some other way.

SOURCE: Jones C, Paulozzi L, Mack K. Sources of prescription opioid pain relievers by frequency of past-year nonmedical use: United States, 2008–2011. *JAMA Int Med* 2014; 174(5):802-803.

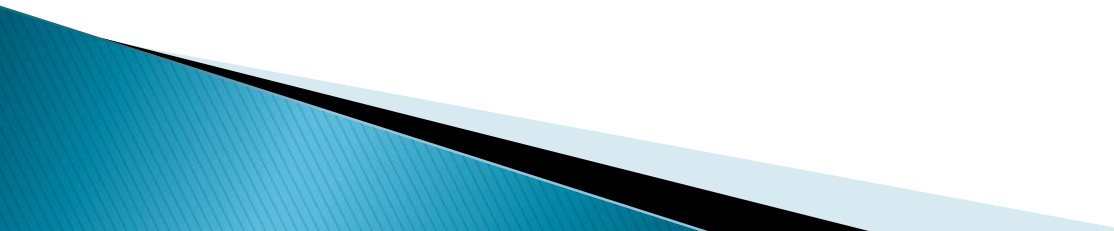
Prescription Opioids

- ▶ Older adults (>40 y/o) are more likely to use prescription opioids than adults aged 20–39
 - ▶ Women are more likely to use prescription opioids than men.
 - ▶ Non– Hispanic whites are more likely to use prescription opioids than Hispanics.
- 

Trends in Annual Opioid Prescribing Rates by Overall and High-Dosage Prescriptions



Source: IQVIA® Transactional Data Warehouse

- ▶ **Combatting the opioid overdose epidemic**
 - Prevention efforts
 - Data quality and tracking trends
 - Supporting healthcare providers and health systems (guidelines)
 - Public safety
 - Raising awareness to consumers
- 

Opioid Abuse Prevention

House Bill 367 - Opioid Abuse Prevention

Requires the Governor's Cabinet Opiate Action Team to make recommendations for instruction in prescription opioid abuse prevention and submit those recommendations to the Department of Education to publish the recommendations online.

Requires the board of education of each local district to select a **health curriculum** that **includes instruction on the dangers of prescription opioid abuse.**

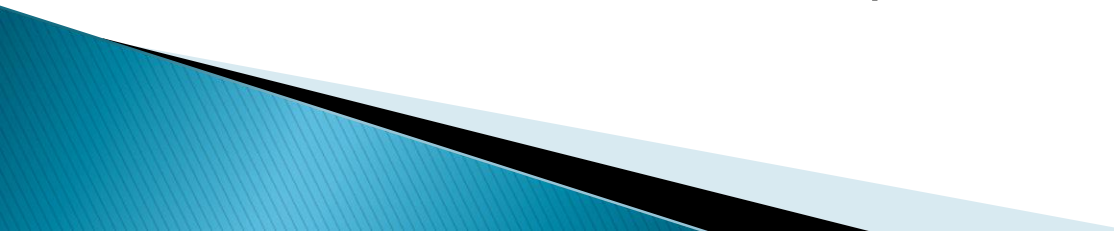
LANGUAGE FROM BILL

*(5) **Health education**, which shall include instruction in: (f) Prescription opioid abuse prevention, with an emphasis on the prescription drug epidemic and the connection between prescription opioid abuse and addiction to other drugs, such as heroin.*

The Role of Community Health Centers in Addressing the Opioid Epidemic

- Health centers are located in medically underserved rural and urban areas, where the impact of the opioid epidemic has been especially devastating.
- As providers of comprehensive primary care services, they are increasingly meeting the treatment needs of their patients with substance use disorders (SUD), including those with OUD.
- Health centers also remove affordability barriers to accessing needed treatment services, particularly for people with OUD who are more likely to have low incomes compared to the general population and are disproportionately covered by Medicaid or are uninsured.

As the primary source of health care for many low-income Americans, health centers play a critical role in addressing the opioid epidemic, through prevention, treatment, overdose reversal, and safe prescribing practices.



The Role of Community Health Centers in Addressing the Opioid Epidemic

- Most health centers reported an increase in the number of patients with OUD in the past three years.
- Nearly half (48%) of health centers provide medications as part of medication-assisted treatment (MAT), considered to be the most effective OUD treatment.
- Health centers in Medicaid expansion states are more likely to provide MAT than those in non-expansion states (54% vs. 38%).
- Health centers face many treatment capacity challenges in responding to the opioid epidemic.
- Many health centers (40%) distribute naloxone, an opioid overdose reversal drug.

The 2018 Survey of Community Health Centers' Experiences and Activities under the Affordable Care Act was conducted by researchers at the Geiger Gibson Program in Community Health Policy at the George Washington University (GW) and the Kaiser Family Foundation Program on Medicaid and the Uninsured, with support and input from the National Association of Community Health Centers (NACHC) and the RCHN Community Health Foundation

The Role of Community Health Centers in Addressing the Opioid Epidemic

As the opioid epidemic continues to escalate, health centers will face ongoing challenges in meeting the demand for OUD treatment. Grant funding plays an important but somewhat limited role in this regard. One-time grants can bolster existing services and support service expansions, but the funding per health center grantee is often modest.

The Health Resources and Services Administration (HRSA) awarded approximately \$195 million in Access Increases in Mental Health and Substance Abuse Services (AIMS) funding for eligible health centers.

Gateway Community Health Center, Inc.

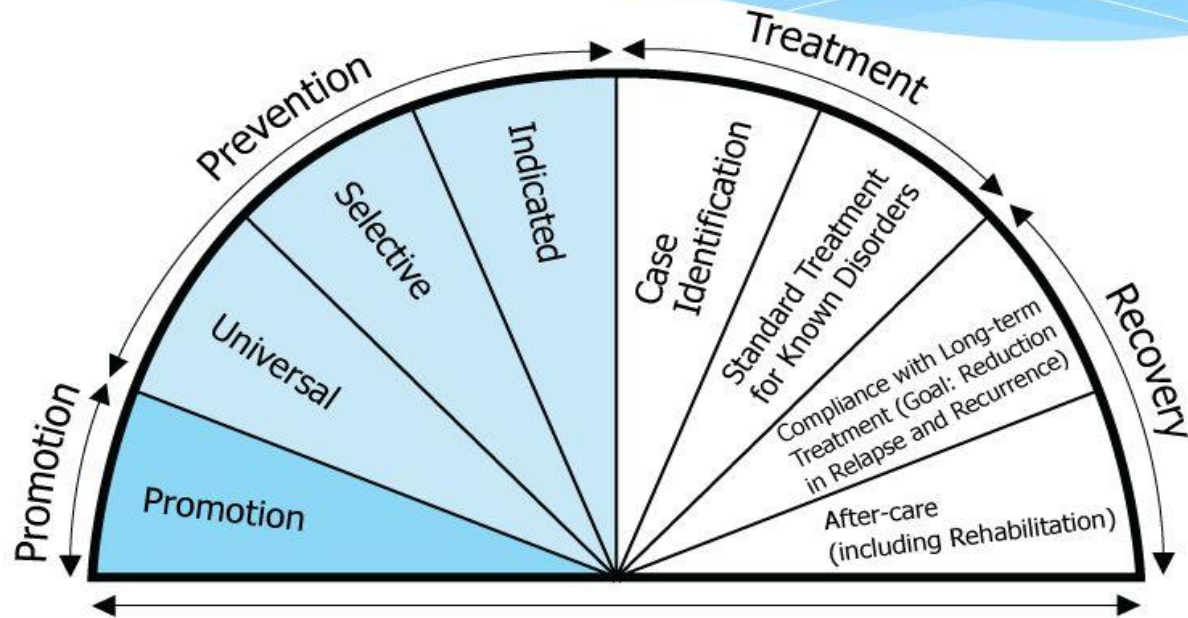


- Gateway Community Health Center, Inc. is a community health center funded by the U.S. Department of Health and Human Services.
- The Center serves all residents in the Texas counties of Webb, Zapata, and Jim Hogg.

Mission statement

“To Provide Quality Healthcare for Everyone”

Continuum of Care



Substance Abuse and Mental Health Services Administration. 2014. Retrieved from <http://www.samhsa.gov/prevention>

Continuum of Care Model

Gateway's Approach

Promotion Education/Awareness

Media

Health Fairs

Presentations
(Community/Clinic)

Community
Coalitions and
Events

Educational
Materials

Prevention

Universal

Patients at Point of Care
PCP, LPC, and Pharmacist
(e.g., PHQ 2 & PHQ 9)

Program Participants:
Lado A Lado; Family
Planning and BCCS.
(Prevention Education Only)

Community: Schools,
Housing Projects, Boys
and Girls Club

Selective and Indicated

Referred by medical
Providers to LPCs and
Health Educators.

Treatment

Recovery

Limited Care Provided by PCP
and/or LPC

Patients are Referred by
Provider to the Appropriate
Agency for Additional
Treatment/Care as per Protocol.



Creating Change

Prevention—Delivered prior to the onset of a disorder, these interventions are intended to prevent or reduce the risk of developing a behavioral health problem, such as underage alcohol use, prescription drug misuse and abuse, and illicit drug use.

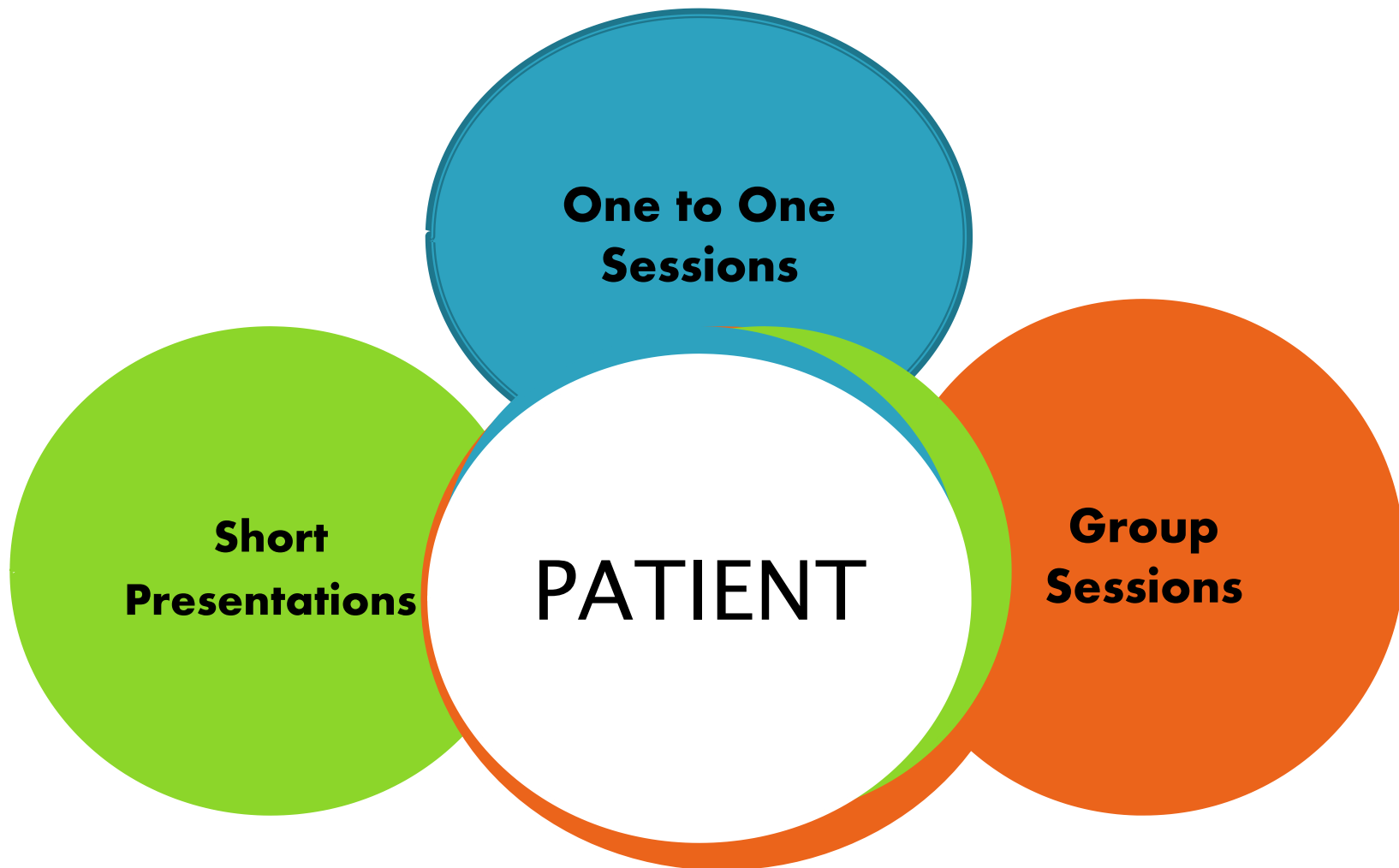


Promotion—These strategies are designed to create environments and conditions that support behavioral health and the ability of individuals to withstand challenges. Promotion strategies also reinforce the entire continuum of behavioral health services.

Treatment—These services are for people diagnosed with a substance use or other behavioral health disorder.

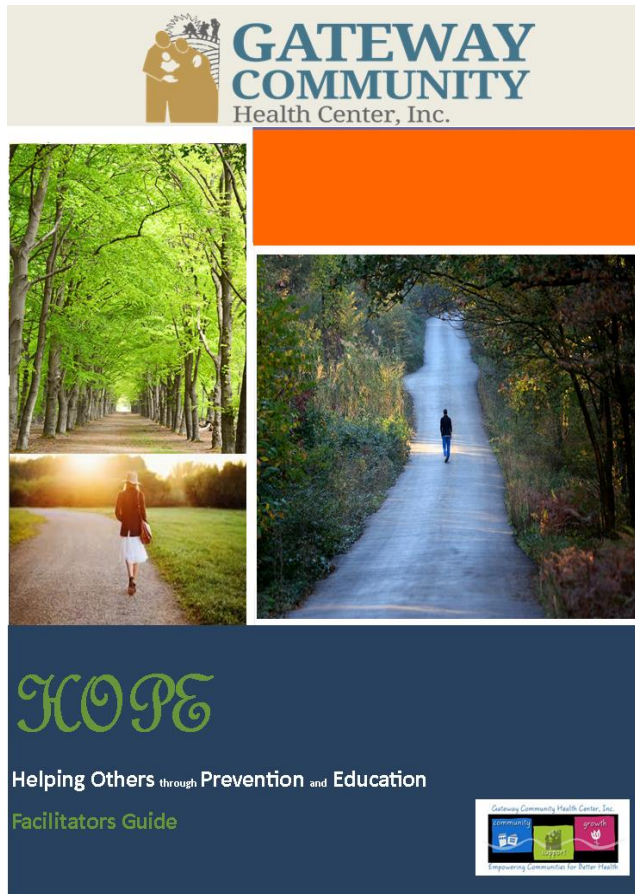
Recovery—These services support individuals' abilities to live productive lives in the community and can often help with abstinence.





Identification of Patients: Diabetes/CVD Self-Management Courses, Weight Management Courses, Pharmacy, Nutritionist, LPC and PCP

Resources for Prevention and Education



Guide Structure

- Session 1
“Planting the Seed”
- Session 2
“Body, Mind and Opioids”
- Session 3
“Taking Control”
- Session 4
“My Freedom”

Substance Use Disorder – HOPE Course

Class Attendance

- Patient completed module 1: Planting the Seed
- Patient completed module 2 : Body, Mind and Opioids
- Patient completed module 3 : Taking Control
- Patient completed module 4 : My Freedom

Patient Goal

- Develop better pain management practices

- Acupuncture
- Chiropractic
- Cognitive behavioral therapy
- Message therapy
- Non- opioid medication
- Taking them as prescribed or only when needed

Adherence

- Patient met goal

Referrals

- Patient was referred to PCP
- Patient was referred to LPC
- Other: _____



Resources for Education and Awareness



Rx Pain Medications

KNOW THE OPTIONS • GET THE FACTS

Managing Your Pain: Which Approach Is Right for You?

Although prescription pain medications can be effective at treating certain types of pain, there are different treatment options and therapies available. Whether one approach is safer and more effective than another will depend on your unique situation.

Do not use this information to diagnose or treat any medical condition. Use this information to help you discuss your pain management options with your provider so that together you can identify the most effective approach to your care. This list is not exhaustive.

To minimize the risk of negative effects and ensure the best possible treatment of your pain:

- Learn as much as possible about the therapy you are considering.
- Discuss all treatments, including complementary and nonpharmacologic practices, with your doctor before beginning or changing a treatment approach.

Acupuncture
Acupuncture is a practice that involves the stimulation of specific points on the body, usually through the insertion of thin needles into the skin.¹
<https://nccih.nih.gov/health/acupuncture/introduction>

Chiropractic
Chiropractic care typically involves manipulation or adjustment of the spine and other parts of the body by a chiropractor or osteopath.^{2,3} Chiropractors are health care professionals who are licensed by the state in which they practice.⁴
<https://nccih.nih.gov/health/spinalmanipulation>
<https://nccih.nih.gov/health/chiropractic/introduction.htm>


Cognitive behavioral therapy
Cognitive behavioral therapy is a form of psychotherapy that focuses on helping patients change their thinking patterns in order to change unhealthy behavior or moods.⁴ Sessions involve structured meetings with a trained mental health counselor or psychologist for a limited amount of time.⁴ Cognitive behavioral therapy often involves relaxation exercises, journal writing, and certain stress and pain relief methods.
<http://www.nlm.nih.gov/health/topics/psychotherapies/index.shtml>

Massage therapy
Massage therapy may have many different forms, but typically massage therapy involves the manipulation of soft tissue for health-related issues.⁵
<https://nccih.nih.gov/health/massage/massageintroduction.htm>

continued. >>>

www.cdc.gov/drugoverdose



Surprising Facts

Opioids can make you throw up—this can even happen to someone given opioids by a doctor—which is why many people don't like taking them.


Your brain makes its own versions of opioids, called endogenous opioids. These chemicals act just like opioid drugs, attaching to opioid receptors in your brain. Endogenous opioids help your body control pain. If you've ever felt pleasantly relaxed after exercising a lot, that feeling was probably caused by the release of these natural chemicals (sometimes called "endorphins") in your brain.

The Search Continues

There is still a lot that scientists don't know about the effects of opioids on the brain. Maybe someday you will make the next big discovery!

Until then, join me—Sara Bellum—in the magazines in my series, as we explore how drugs affect the brain and nervous system.

For printed copies of this publication contact:
NIDA DrugPubs
 1-877-643-2644
drugpubs.drugabuse.gov



HAND OVER MATTER

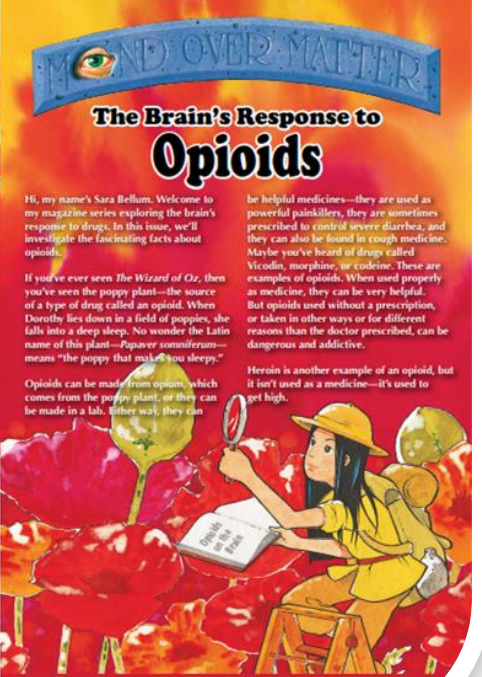
The Brain's Response to Opioids

Hi, my name's Sara Bellum. Welcome to my magazine series exploring the brain's response to drugs. In this issue, we'll investigate the fascinating facts about opioids.

If you've ever seen *The Wizard of Oz*, then you've seen the poppy plant—the source of a type of drug called an opioid. When Dorothy lies down in a field of poppies, she falls into a deep sleep. No wonder the Latin name of this plant—*Papaver somniferum*—means “the poppy that makes you sleepy.”

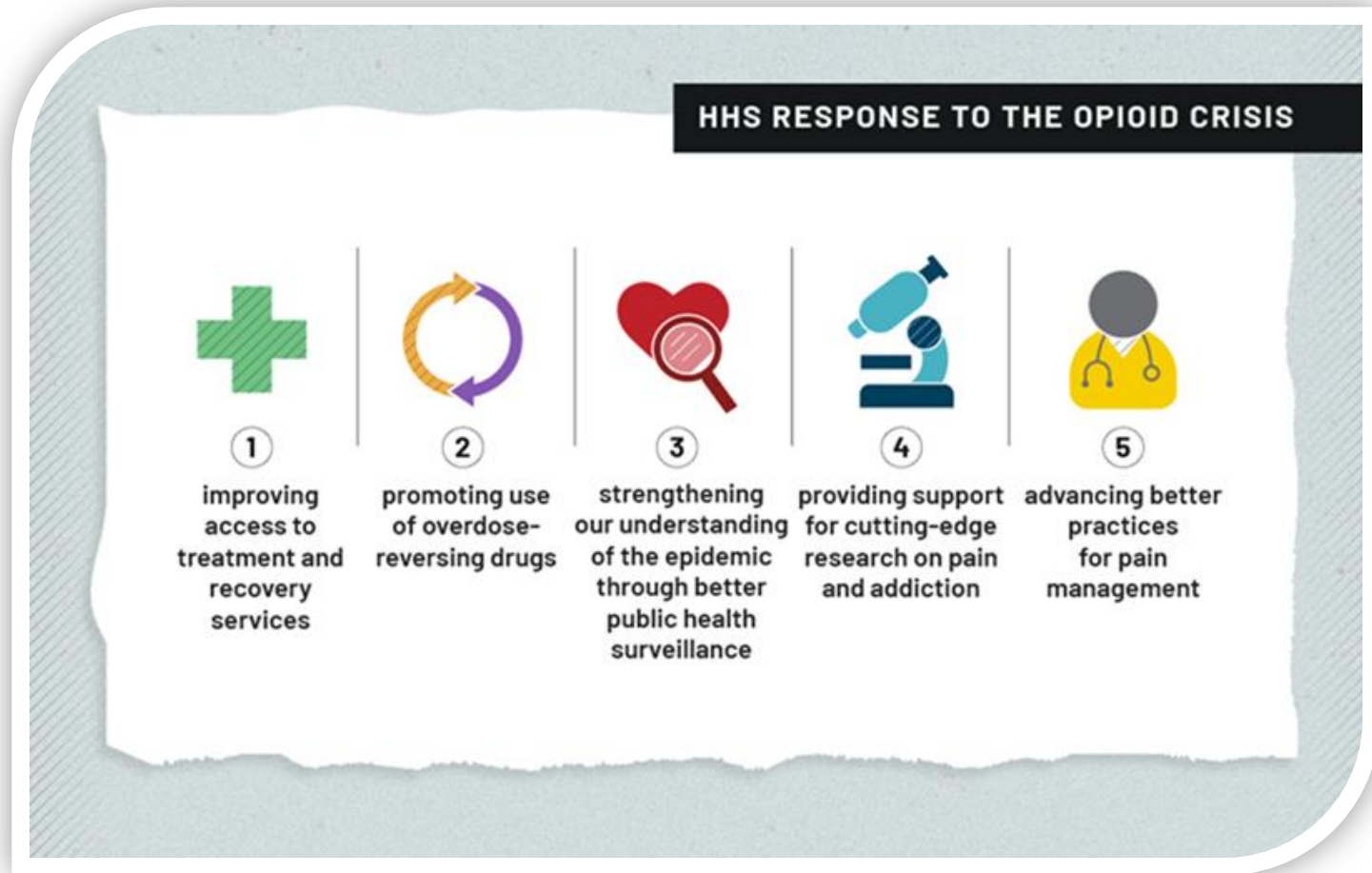
Opioids can be made from opium, which comes from the poppy plant, or they can be made in a lab. Either way, they can be helpful medicines—they are used as powerful painkillers, they are sometimes prescribed to control severe diarrhea, and they can also be found in cough medicine. Maybe you've heard of drugs called Vicodin, morphine, or codeine. These are examples of opioids. When used properly as medicine, they can be very helpful. But opioids used without a prescription, or taken in other ways or for different reasons than the doctor prescribed, can be dangerous and addictive.

Heroin is another example of an opioid, but it isn't used as a medicine—it's used to get high.



National Institute on Drug Abuse

Government Efforts to Combat the Crisis



Creating Change

How can we all help?

Parents/ Families

Discuss the risks of misusing & abusing prescription drugs with their children & be familiar with warning signs.

Healthcare Providers

- Screen their patients to identify signs of misuse & dependence.
- Increase communication with patients of negative effects of misusing prescription drugs
- Monitor rapid increase in medication needed or requested.

Communities & Workplace

- Monitor & maintain a drug free environment
- Keep up to date on latest drug use crisis



THANK
YOU

Dr. Mery Cortes Bergoderi
Meryc.gateway@tachc.org

Otila García
Otilag.gateway@tachc.org
Ph.956-523-3691