


Overdose Lifeline, Inc.




Indiana nonprofit on the front-lines of the Opioid Health Crisis since 2014

- ADVOCACY >>
- HARM REDUCTION >>
- TRAINING + EDUCATION >>
- YOUTH PREVENTION + EDUCATION >>
- SUPPORT >>

Information > OverdoseLifeline.org


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Our work ...





Narcan (naloxone) is now available over the counter **as a result of our work**

Our Youth Awareness Prevention Program is now used in **more than 18 U.S. states** by over **300 delivery partners**




Engaged **264 First Responder Departments**. Trained over **15,000 First Responders** and over **3,000 layperson** on Narcan.





First in the U.S. to deliver an **evidence-based personality-targeted approach** to adolescent substance use prevention



Saved **thousands of Indiana residents' lives**

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Session goals

- Acquire understanding of the opioid public health crisis: what is occurring, how we arrived here, the contributors and risk factors.
- Learn how to increase communications and training for managers and employees to raise awareness of the health crisis.
- Identify the steps an organization can take to support staff and address the opioid crisis.



Employees health and wellness

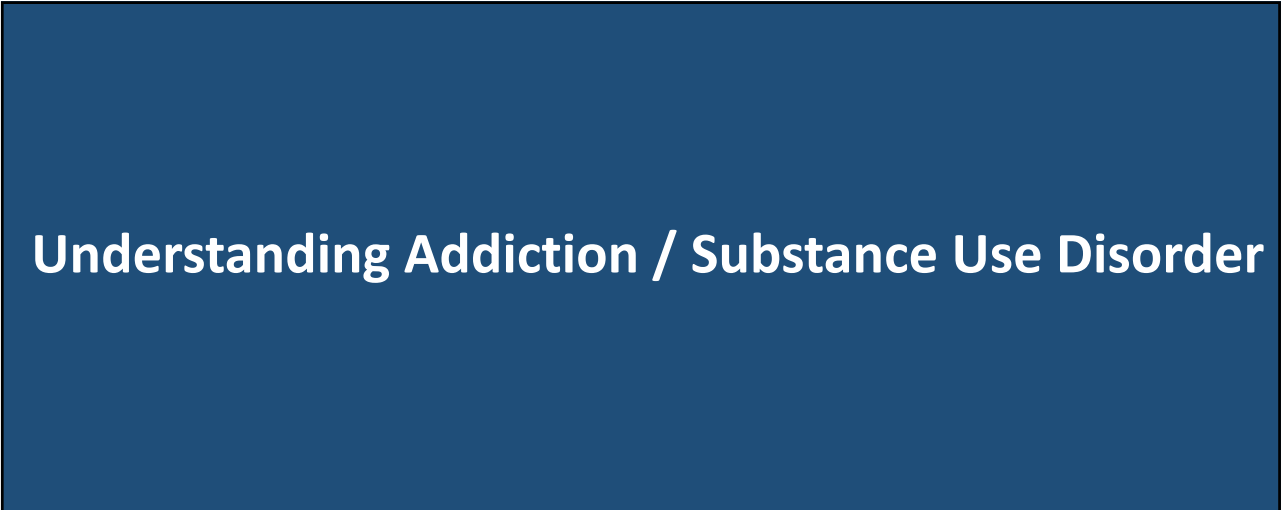


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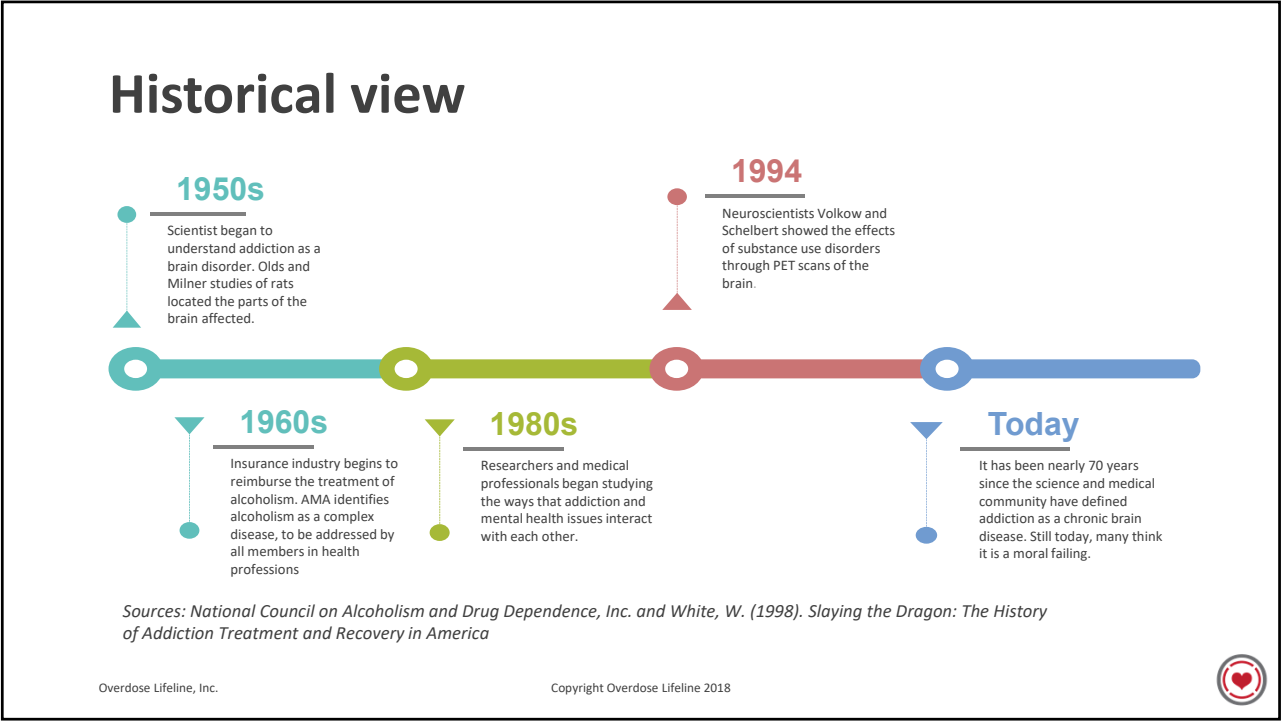
Understanding Addiction / Substance Use Disorder



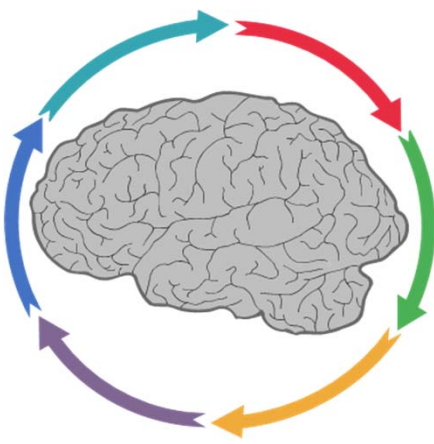
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Differences between those who **use substances** and those with **Substance Use Disorder**.
One can be **mentally dependent** on things but addiction suggests a more severe turning point where **changes in the brain occur**.



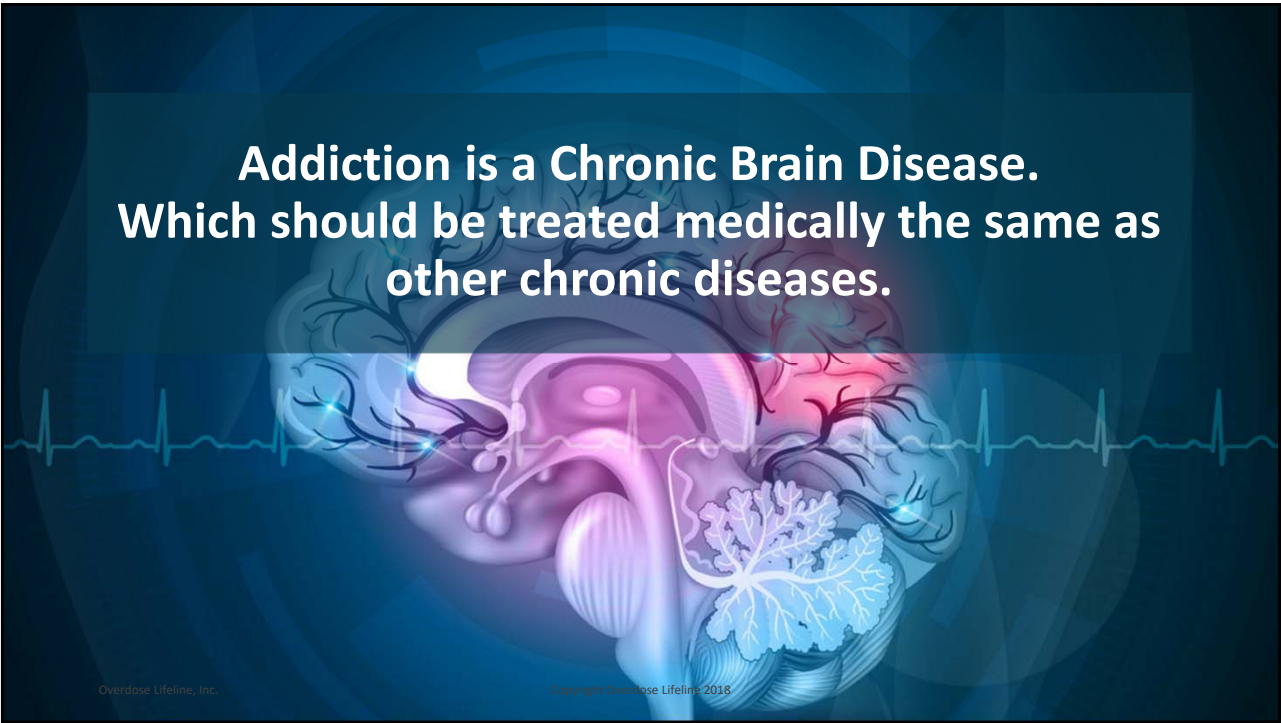
Source: National Institute of Drug Abuse: The Science of Drug Abuse and Addiction, Updated August 2016

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**Addiction is a Chronic Brain Disease.
Which should be treated medically the same as
other chronic diseases.**



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Setback Rates – Chronic Disease

Chronic Disease	Setback Rate Range
Type 1 Diabetes	30 - 50%
Drug Addiction	40 - 60%
Hypertension	50 - 70%
Asthma	50 - 70%

Source: National Institute on Drug Abuse, Source : McLellan et al., JAMA, 284:1689-1695, 2000.

Setback (Relapse) -

a deterioration in someone's state of health after an improvement.

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“ We don’t tell diabetics that we won’t give them medicine if they don’t follow their diet,” says Kelly Clark, M.D., an addiction expert.


“We don’t expect a person with a chronic disease to be 100 percent adherent to their treatment. **There is no cure for a chronic disease, so we need to help people with management of that disease.”**

Source: National Safety County (NSC) Prescription Nation 2018.


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How many Americans are affected? Symptomatic




5 MILLION



10 MILLION



15 MILLION




22 MILLION


Source: Substance Abuse and Mental Health (SAMHSA), Surgeon General's Report, November 2016)

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How many Americans are affected?




45 MILLION AMERICANS AFFECTED

Source: Substance Abuse and Mental Health (SAMHSA), Surgeon General's Report, November 2016

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Most are employed

- 69% of the estimated 22 million illicit drug users are employed full or part time.
- Most binge / heavy alcohol users are also employed. Of Adult binge drinkers, 79% (41 million people). Adult heavy drinkers, 76% (12 million people) are employed.

Source: 2013 National Survey on Drug Use and Health

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Treatment barriers



Only **1 in 10** Receive Treatment

Barriers – Stigma and Discrimination

Leads others to avoid living, socializing or working with, renting to, or employing people with addiction.

It leads to low self-esteem and hopelessness.

And it deters the public from caring and wanting to pay for care.

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Stigma and Discrimination

Worst of all, it often causes people with addiction to become so embarrassed or ashamed that they conceal symptoms—and avoid seeking the very treatment, services, and support they need and deserve.

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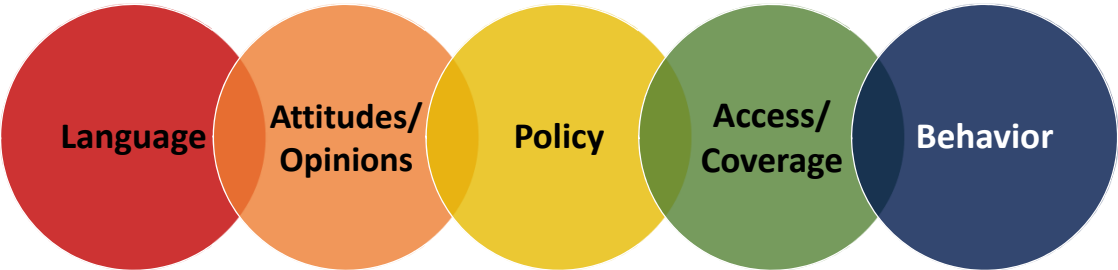


Stigma and Discrimination

Family and loved one's experience stigma. Hesitate to take action, to ask for help. They carry guilt and shame – affecting their health and wellness.


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How stigma is spread



Language **Attitudes/Opinions** **Policy** **Access/Coverage** **Behavior**


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Opioids

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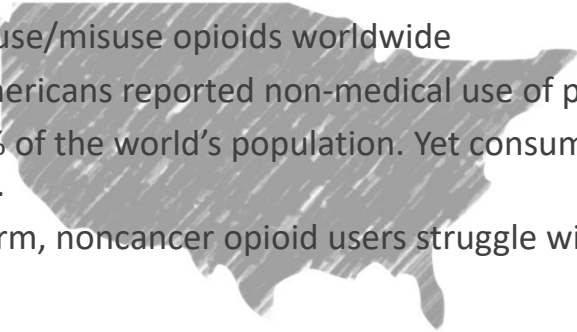
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Opioids/Opiates

High potential for addiction, misuse, and overdose


- 36 million abuse/misuse opioids worldwide
- 12 million Americans reported non-medical use of prescription opioids
- America is 5% of the world’s population. Yet consumes 80% of the global opioid supply.
- 1 in 4 long-term, noncancer opioid users struggle with addiction



**America is 5% of world’s population.
Consumes 80% of global supply.**

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The family of opioids





Natural

Morphine - Codeine - Opium




Semi-Synthetic

Vicodin - Percocet - Oxycodone - Heroin




Fully Synthetic

Fentanyl - Methodone



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euphoria

[yoo-fawr-ee-uh, -fohr-]

noun


- a state of intense happiness and self-confidence:
She was flooded with euphoria as she went to the podium to receive her Student Research Award.
- Psychology.* a feeling of happiness, confidence, or well-being sometimes exaggerated in pathological states as mania.

Opioids are often misused because they produce euphoria in addition to pain relief. Every person responds differently: some individuals like the way that opioids make them feel, others experience little euphoria effect, or do not like this feeling.

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Taken as prescribed – New CDC Guidelines




When opioids are taken as “prescribed” by a Doctor following the **NEW CDC Opioid Prescribing Guidelines**, they help people recover from a surgery or an injury.


But when opioids are not taken as prescribed, or when they are “misused,” they are tremendously risky.

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Prescription opioid misuse



Misuse

Take More Than Prescribed

Take More Often Than Prescribed


Not Your Prescription

Take to Get High

Change How You Take Them (Crush)

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The Opioid Epidemic

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The U.S. is in the midst of an **opioid public health crisis** with every American state, county, socio-economic and ethnic group impacted.


Drug overdose deaths continue to increase in the United States. From 1999 to 2016, more than **630,000 people have died** from a drug overdose.

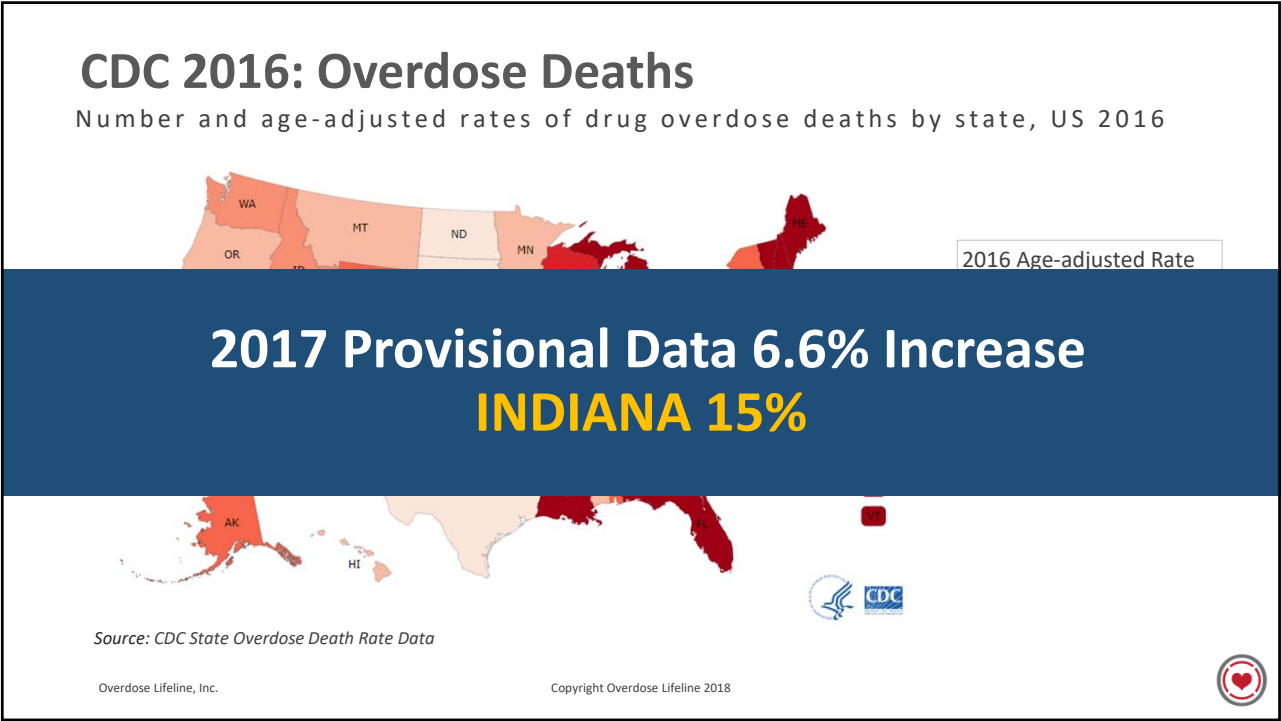
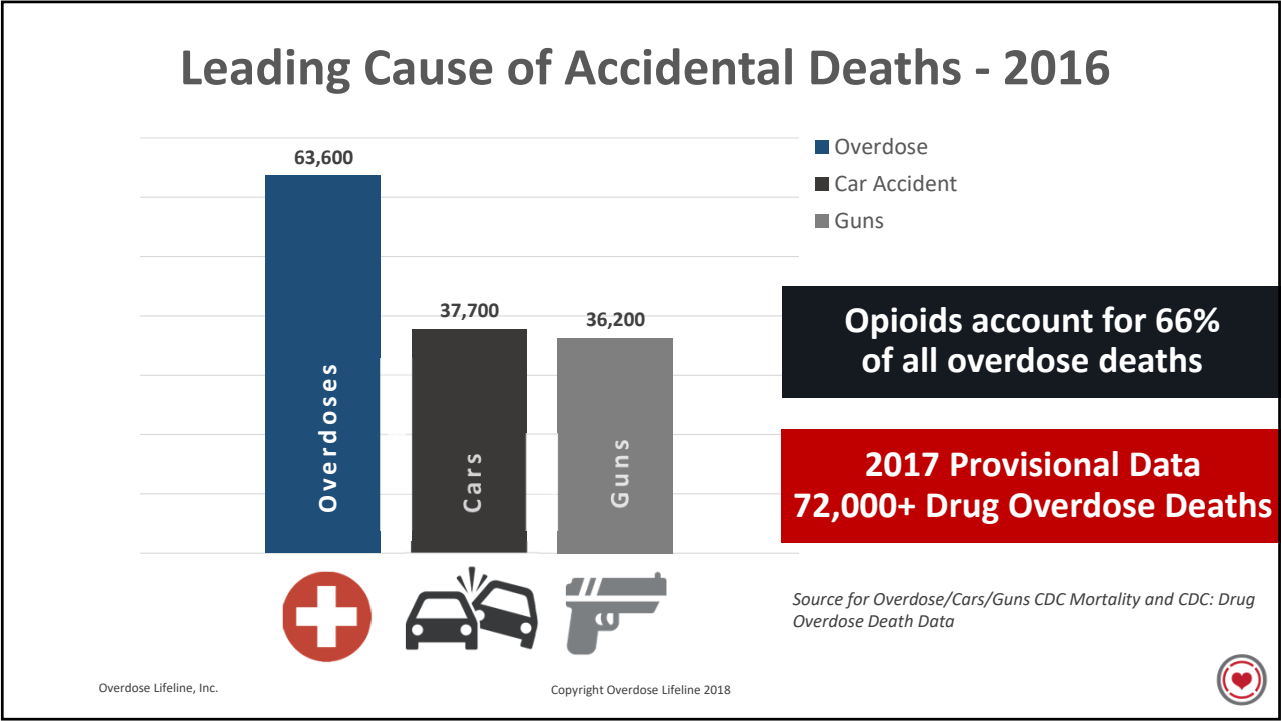
Drug Overdose Deaths are Preventable

Source: CDC Drug Overdose Death Data

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Every day...



Sources: CDC . DAWN Report; 2013

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Contributors and Risk Factors

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Opioid prescribing practices

2016 Opioid Prescribing Practices

Number Opioid Prescriptions Per 100 People

- 30-49
- 50-69
- 70-82
- 83-99
- 100-121

Source: CDC Annual Surveillance Report of Drug-Related Risks and Outcomes, 2017

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Rx

214 MILLION
Prescriptions for Pain
Medicine Written in 2016

Nearly Enough for
Every American Adult
to Have a Prescription

Opioid prescribing practices

2016 Opioid Prescribing Practices

Number Opioid Prescriptions Per 100 People

- 30-49
- 50-69
- 70-82
- 83-99
- 100-121

Source: CDC Annual Surveillance Report of Drug-Related Risks and Outcomes, 2017

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Rx

Indiana
84 Pain
Prescriptions
Written for Every
100 People

Misrepresentation of Opioid’s Addictive Risks

A 1980 New England Journal of Medicine *Letter to the Editor* was referenced by doctors, academics, pharmaceutical companies and others as evidence that few users would develop addictions and that increased prescribing was justified.

Source: 1980 NEJM Letter to the Editor and The Economist, April 2017: Makers and distributors of opioid painkillers are under scrutiny

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The NEW ENGLAND JOURNAL of MEDICINE

ADDICTION RARE IN PATIENTS TREATED WITH NARCOTICS

To the Editor: Recently, we examined our current files to determine the incidence of narcotic addiction in 39,946 hospitalized medical patients¹ who were monitored consecutively. Although there were 11,882 patients who received at least one narcotic preparation, there were only four cases of reasonably well documented addiction in patients who had no history of addiction. The addiction was considered major in only one instance. The drugs implicated were meperidine in two patients,² Percodan in one, and hydromorphone in one. We conclude that despite widespread use of narcotic drugs in hospitals, the development of addiction is rare in medical patients with no history of addiction.

JANE PORTER
HERSHEL JICK, M.D.
Boston Collaborative Drug Surveillance Program
Waltham, MA 02154 Boston University Medical Center

Paths to prescription opioid use disorder (addiction)

RX Misuse

Cultural & Societal

Pain 5th Vital Sign

Healthcare Incentive

Dosage & Duration

Source: Edlund, MJ et al. The role of opioid prescription in incident opioid abuse & dependence among individuals with chronic noncancer pain. Clin J Pain 2014

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Paths to heroin use

- Prescription pain drug misuse
- Availability and cost
- Purity – Seeking different effect
- Progression from other drugs



4 in 5 New Heroin Users Started Out Misusing Prescription Pain Pills

Sources: CDC Drug Overdose Death Data, Jones et al Sep 2013, Cicero TJ, Ellis MS, Surratt HL, Kurtz SP, JAMA Psychiatry 2014

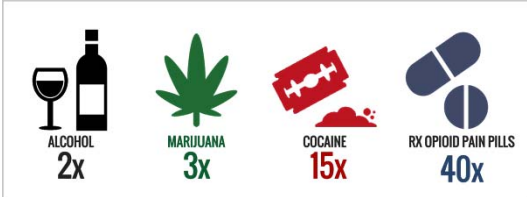
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Paths to heroin use

- Prescription pain drug misuse
- Availability and cost
- Purity – Seeking different effect
- Progression from other drugs


Individuals who misuse alcohol or other drugs are “X” times more likely to use heroin






ALCOHOL 2x MARIJUANA 3x COCAINE 15x RX OPIOID PAIN PILLS 40x

Sources: CDC Drug Overdose Death Data, Jones et al Sep 2013, Cicero TJ, Ellis MS, Surratt HL, Kurtz SP, JAMA Psychiatry 2014


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Who is affected?



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Young adults / youth

15

Age of First Misuse

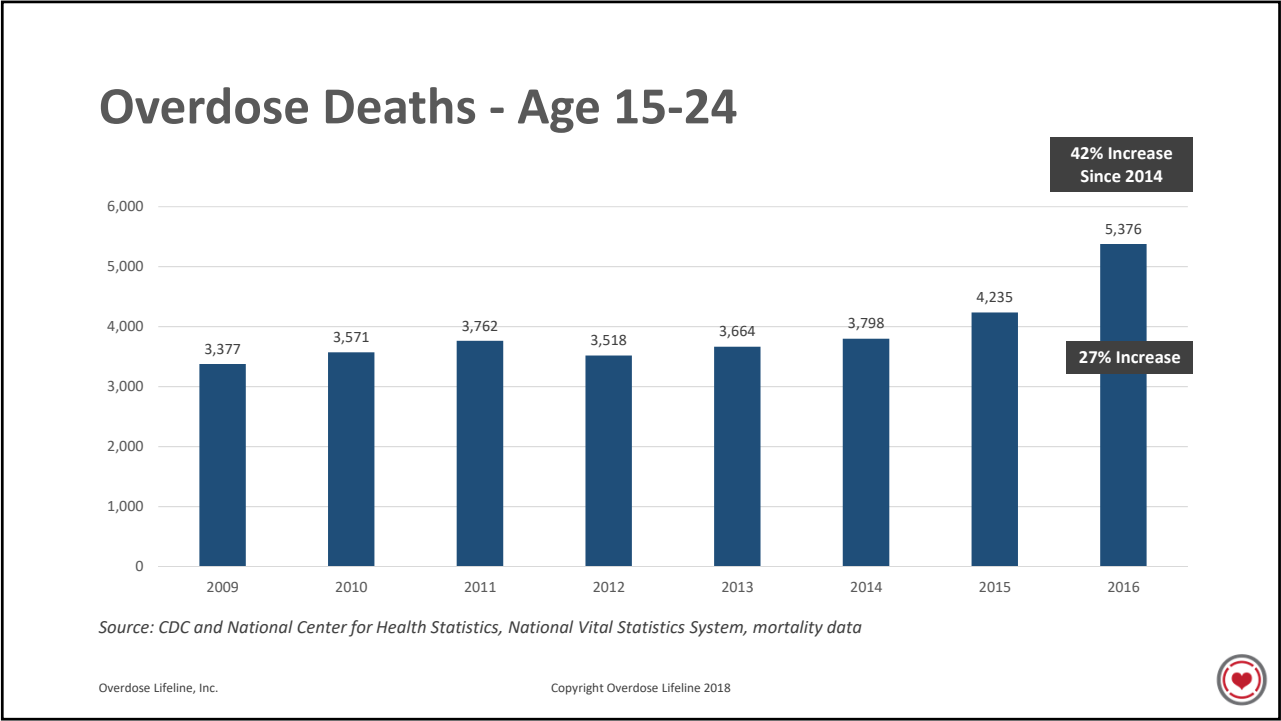
Perception: Low Risk

Misuse of RX Pills - Socially Accepted w/ Peers

Over 90% Get from Family/ Friends Medicine Cabinets

Source CDC Drug Overdose Death Data - Opioids

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Age and hereditary risk factors

Alcohol or Drugs Before Age 15
5 TIMES
Family Member
4 TIMES

Two main factors that lead to substance use disorders/addiction – **early onset of use** and **biologic factors**.

Reduce or **eliminate youth exposure** to addictive substances.

Source: Center for Behavioral Health Statistics & Quality. 2015 National Survey on Drug Use and Health: Detailed Tables. SAMHSA, Rockville, MD; 2016.

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Opioids after wisdom teeth removal nearly triple risk of long-term use, study finds

Research Recommends –
Dentists and oral surgeons consider prescribing non-opioid painkillers first, and if that isn't enough, prescribing less than the seven-day opioid supply recommended by the American Dental Association.

Source: Harbaugh, University of MI, JAMA 2018

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Employees / Employers Impact

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An estimated **\$74 billion is lost every year in reduced work productivity due to excessive alcohol consumption from absences, reduced output, premature retirement or death, or reduced earning potential.**

Source: 2013 National Survey on Drug Use and Health

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Employers face mounting costs related to untreated substance use disorder (SUD) among their workforce.

Opioid use disorder (OUD) is **even more costly. Workers with OUD miss more work and have higher health care usage than workers with other SUDs.**

Source: National Safety Council (NSC) Prescription Nation 2018

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Employee / employer impact

- The number of eligible workers is declining due to opioid over-prescribing (Krueger, 2017)
- Seven in 10 companies report being directly impacted by prescription drug misuse (National Safety Council, 2017)
- Employee retention and recruitment is affected
- Ages 25-54 have been hardest hit. Labor force participation among this age group is more likely to be lower in areas with high opioid prescribing rates (Krueger, 2017)
- It is affecting the employee and/or the employees' family

Source: National Safety County (NSC) Prescription Nation 2018.


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Employee access barriers


Of the 22 million people who needed treatment for an illicit drug or alcohol use problem, only 2.3 million received substance use treatment. Few who have a need get access.




AVAILABILITY of Treatment Programs



HIGH COSTS of Treatment Services




LACK of Insurance Coverage



TRAVEL TIME for Outpatient Treatments

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**For employers, providing access to treatment
can produce **substantial savings**, exceeding costs
by a ratio of 12 to 1.**

Source: National Institute of Drug Abuse (NIDA) Principles of Drug Addiction Treatment: A Research-Based Guide

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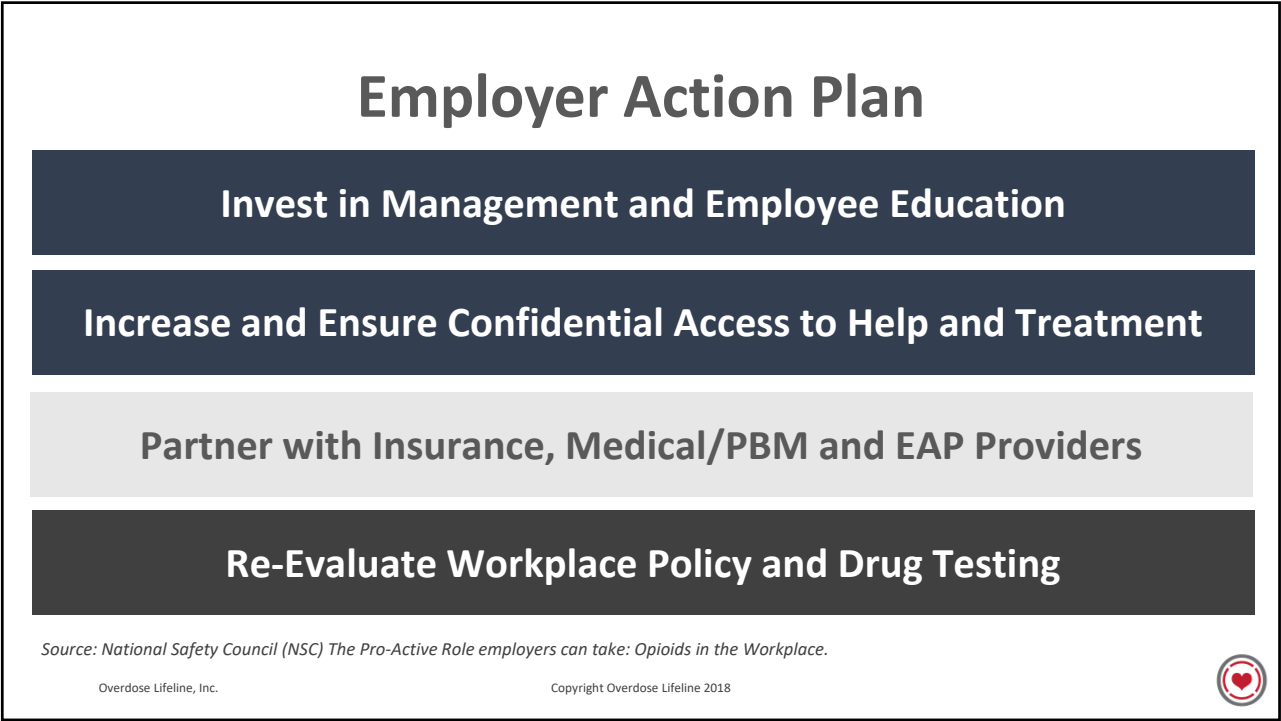


Solutions

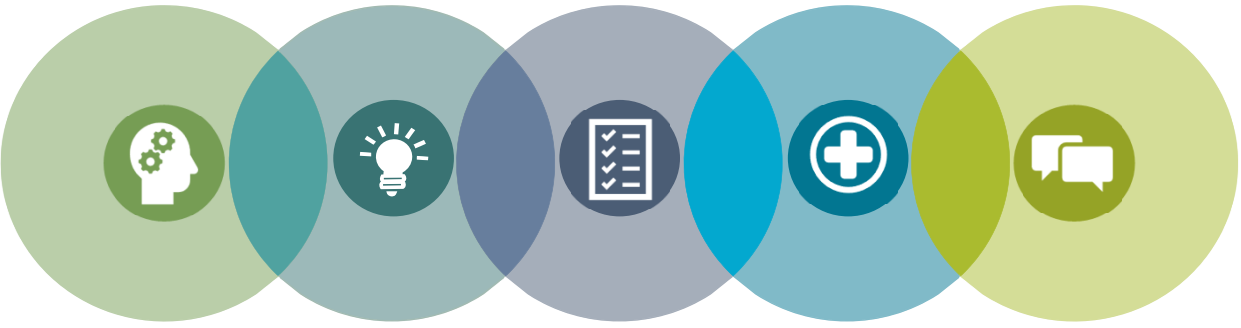
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Employer Solutions



Learn About the Issue Access NSC & SAMHSA Resources & Toolsets	Update Drug-Free Workplace Program & Drug Testing Policy	Structure Insurance, PBM & EAP Programs to Address Opioids	Apply Early Intervention Reduce Costs, Improve Employee Health, & Increase Performance	Advocate for Treatment & Recovery Services and Removal of Barriers with you State and Local Legislators
Educate Management	Train Staff and Stock Naloxone (NARCAN) with Other First Aid	Require Evidence-Based Opioid Treatment Services from Providers	Encourage Employees to Seek Help & Support	
Educate Employees				

Source: National Safety Council (NSC) The Pro-Active Role employers can take: Opioids in the Workplace.


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Research indicates that employer supported and monitored treatment yields **better sustained recovery rates** than treatment initiated at the request of friends and family members.

Source: Weisner et al, 2009

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How you benefit


Employers directly benefit by helping workers get treatment and enter long-term recovery.

When individuals with substance use disorders receive treatment and recover, **absenteeism decreases by 36%** and work turnover **decreases by 13%** compared to a person with an active substance use disorder.

Source: Shatterproof, NSC, NORC at the University of Chicago: A Substance Use Cost Calculator for Employers

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We can help. Today, we have training programs and education for managers, employees, communities and youth.

TRAINING + EDUCATION >>

YOUTH PREVENTION + EDUCATION >>

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Justin Phillips, Executive Director, justin@overdose-lifeline.org
Kournaye Sturgeon, Director of Education, kournaye@overdose-lifeline.org

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