Opioid Use, Misuse, and Abuse

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Arkansas RX Drug Monitoring Program (AR PMP)

Became operational in March 1, 2013

6,597 prescribers, pharmacists and their delegates registered on the PMP which includes over 28 million prescription records as of February 29, 2016

Component in ACT 1208 of 2015 that requires using the PMP for a prescriber who treats a patient for chronic non-malignant pain for > 3 months with an opioid at a daily dosage > 15 mg morphine equivalent doses

Purpose

- Enhance patient care
- Help curtail the misuse/abuse of controlled substances
- Assist in combating illegal trade in and diversion of controlled substances
- Enable access to prescription information by practitioners, law enforcement agents, and other authorized individuals

What is the AR PMP

Database that collects and stores prescribing and dispensing data for controlled substances

- Schedules II, III, IV, and V and any other drugs specified

AR law requires that each dispenser submit, by electronic means, information regarding each prescription dispensed for a controlled substance

- The information should be submitted to the database weekly for the previous week (i.e. Sunday through Saturday)

March 2013-2014

- Law enforcement made 125 queries related to the database
  - 16 arrests for doctor shopping
  - 2 convictions
  - 21 queries which led to opening other cases

What does the “dispenser” have to submit?

Dispenser’s identification number

Date the RX was filled

Prescription number

Whether RX was new or a refill

National Drug Code number for the controlled substance

Qty of the controlled substance

Days supply dispensed

Number of refills

A patient identifier (not SS# or DLN)

Patient’s name

Patient’s address

Patients DOB

Patient’s gender

RX identification number

Date RX was issued by the prescriber

Source of payment for the prescription

Can we share the data?

May share with any pharmacist or physician listed on the PMP report

Cannot fax information, but may clarify and share information with other practitioners if there is a pharmacist-patient relationship and physician relationship

When can those of us on border towns share data?

Missouri doesn't have legislation passed to create a PMP

Arkansas currently shares data with 16 other states:

- Colorado
- Illinois
- Indiana
- Kansas
- Kentucky
- Louisiana
- Maryland
- Minnesota
- Mississippi
- New Mexico
- Nevada
- Oklahoma
- South Carolina
- South Dakota
- Tennessee
- Utah

Can I let my techs access the PMP

ACT 1208 of 2015 allows delegate access. This allows a prescriber or pharmacist to delegate patient querying, improving workflow and increasing usage.

Abuse Deterrent Technology (ADT)

No ADT is going to be a panacea.

There are some encouraging sounding economic based studies out there.

- They leave out one very important consideration.

Abusers vs Addicts

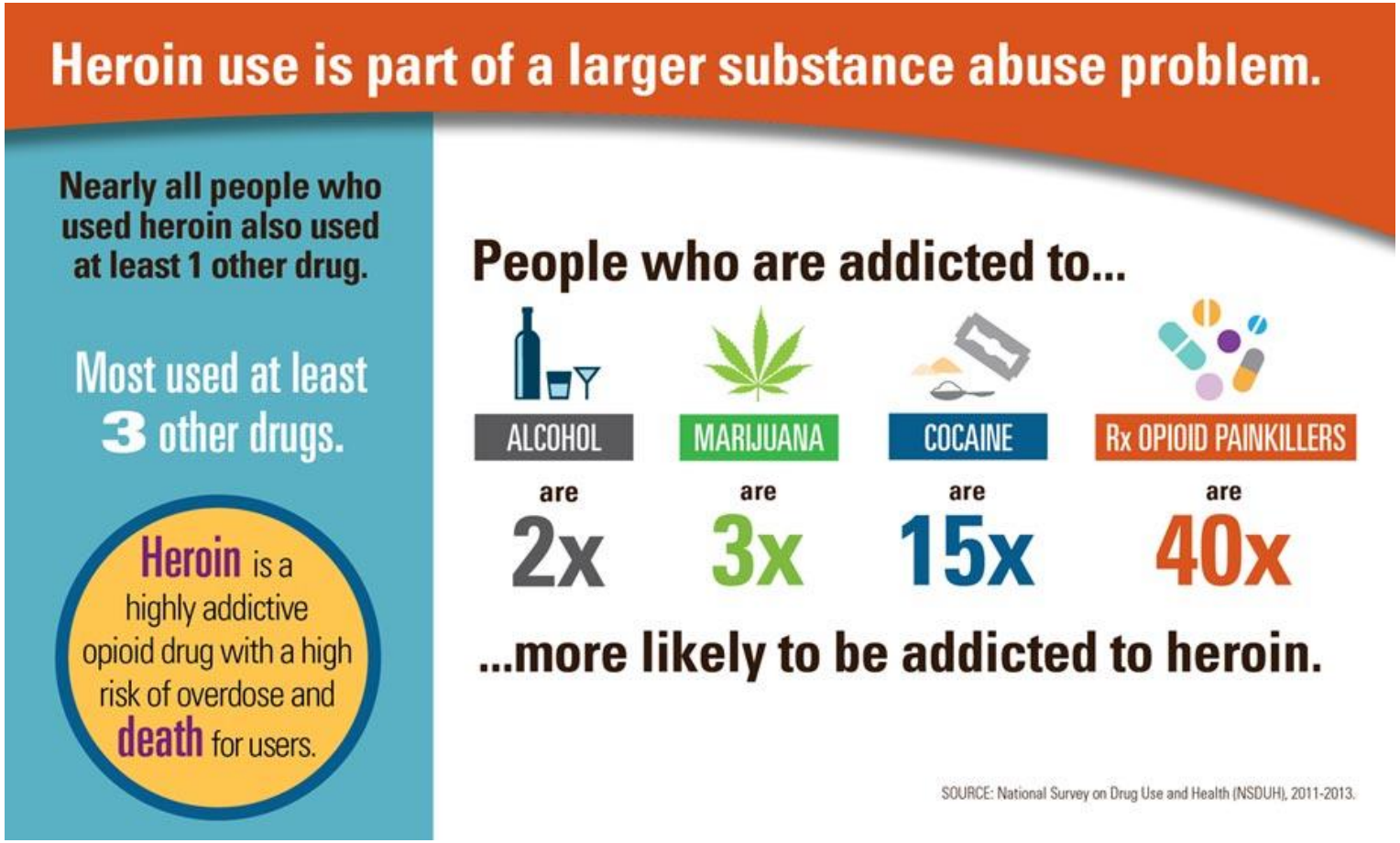
- All addicts are abusers, but not all abusers are addicts.
- Do not substitute one for the other.

Addicts will find a way.

- Increase oral intake
- Defeat the ADT
- Migrate to another agent

HEROIN

The Gateway to Heroin



Cicero T, Ellis M. **Abuse-Deterrent Formulations and the Prescription Opioid Abuse Epidemic in the United States Lessons Learned From OxyContin.** *JAMA Psychiatry 2015*

Researched Abuse, Diversion, and Addiction-Related Surveillance (RADARS) data

Demonstrated some benefit in reducing abuse.

65% of respondents stated moving to heroin was the best alternative.

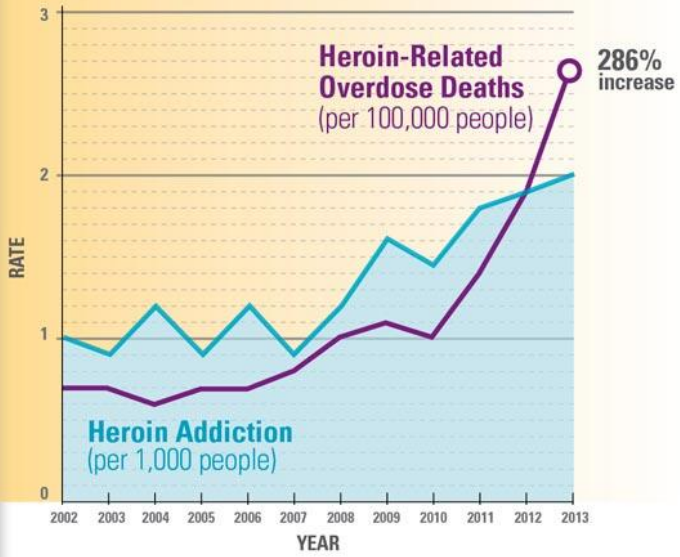
- Easier to obtain on the street than oxycodone
- Cheaper

Why the increase?

Heroin Use Has INCREASED Among Most Demographic Groups

	2002-2004*	2011-2013*	% CHANGE
SEX			
Male	2.4	3.6	50%
Female	0.8	1.6	100%
AGE, YEARS			
12-17	1.8	1.6	--
18-25	3.5	7.3	109%
26 or older	1.2	1.9	58%
RACE/ETHNICITY			
Non-Hispanic white	1.4	3	114%
Other	2	1.7	--
ANNUAL HOUSEHOLD INCOME			
Less than $20,000	3.4	5.5	62%
$20,000–$49,999	1.3	2.3	77%
$50,000 or more	1	1.6	60%
HEALTH INSURANCE COVERAGE			
None	4.2	6.7	60%
Medicaid	4.3	4.7	--
Private or other	0.8	1.3	63%

Heroin Addiction and Overdose Deaths are Climbing



SOURCES: National Survey on Drug Use and Health (NSDUH), 2002-2013.
National Vital Statistics System, 2002-2013.

Solutions

Promote the PMP

Educate and reeducate professionals using the CDC guidelines

- Colleges
- Boards

Other Tools

- Technology to identify high risk patients (medical/pharmacy/insurance data)
- ADT's

Patient Assistance

- PSA's
- Education
- Addiction Programs