



## ASTHO President's Challenge 2014 15 by 15: Reduce Prescription Drug Abuse and Deaths 15% by 2015

ASTHO's President's Challenge is to reduce the rate of nonmedical use and the number of unintentional overdose deaths involving controlled prescription drugs 15 percent by 2015.\* This challenge aims to galvanize support for state health officials and their leadership teams, together with a broad network of partners, to identify strategies for improving health outcomes and reducing human and economic costs associated with prescription drug misuse, abuse, and overdose. ASTHO will build on the already exemplary work and leadership around this issue at the federal, state, and local levels to promote cross-sector, multidirectional collaboration.

Addressing nonmedical use and abuse of controlled prescription drugs will require collaboration across a range of disciplines and fields. The President's Challenge platform reflects a comprehensive approach, spanning multiple domains: **Prevention Strategies, Monitoring and Surveillance, Control and Enforcement, and Treatment and Recovery.** The framework provided by the *ASTHO Prescription Drug Misuse and Abuse Strategic Map: 2013-2015* will guide the challenge, with strategic priorities that support the central challenge of achieving measurable reductions in controlled prescription drug misuse, abuse, and overdose.

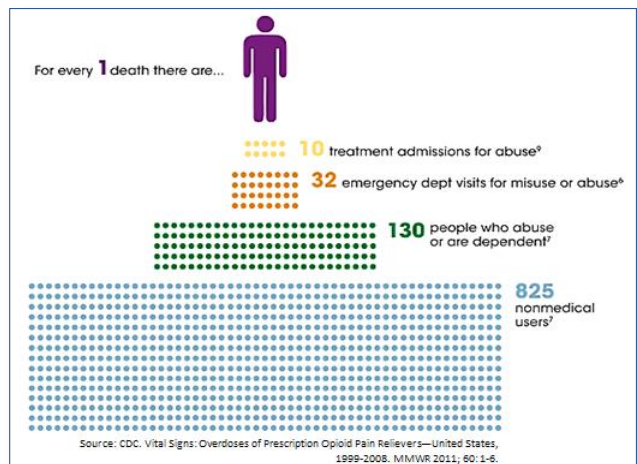
### Background

Since 2009, more people have died each year from drug poisonings than from motor vehicle crashes. In 2010, there were more than 38,000 drug poisoning deaths. Of these deaths, approximately 16,651 involved an opioid analgesic, such as oxycodone, methadone, or hydrocodone. From 1999 to 2010, the number of U.S. drug poisoning deaths involving opioid analgesics more than quadrupled. While the majority (78 percent) of these deaths were unintentional, controlled prescription drugs (i.e., opioids and benzodiazepines) are the primary drivers of overdose deaths—with opioids involved in more deaths than heroin and cocaine combined.

Given that other indicators of misuse and abuse—overdoses, deaths, emergency department visits, and treatment admissions—have also increased, and that opioids represent just one class of prescription drugs that are likely to be abused, the total costs and consequences associated with inappropriate use are much greater.

A study by the National Institute on Drug Abuse (NIDA) found that more than 210 million prescriptions were filled for opioid pain relievers in 2010—the equivalent of giving every American 5 mg of hydrocodone, a typical adult dose for pain, every four hours around the clock for a month. In 2011, 6.1 million Americans

\* Including opioid analgesics, stimulants, tranquilizers, and sedatives.



**Overdose deaths constitute just one dimension  
of the epidemic.**



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### Preventing Prescription Drug Misuse, Abuse, and Overdose

aged 12 or older reported using psychotherapeutic drugs (opioid pain relievers, tranquilizers, stimulants, or sedatives) nonmedically in the past month. From 2008-2010, four out of five people (82.6 percent) who had used opioids and heroin in the past year reported nonmedical use of opioids prior to heroin initiation. Primary admissions for heroin treatment services increased from 33,606 in 2000 to 55,598 in 2010.

#### **Call to Action: Promoting a Comprehensive Approach**

The ASTHO President's Challenge is supported by a call to action that addresses a number of priorities and focus areas. These domains characterize the extent of the prescription drug epidemic and identify key opportunities to create collaboration among a wide range of partners and entities and build an infrastructure that appropriately addresses pain management, addiction, treatment, and recovery, and results in well-aligned, comprehensive efforts.

#### *Expand and Strengthen Prevention Strategies*

Recognizing the full spectrum of prevention (primary, secondary, tertiary), effective strategies reduce the impact of inappropriate use of opioids and drug-related consequences on individuals and communities, while engaging public health officials, healthcare providers, patients and consumers, community members, families, and other stakeholders. Education is offered through community-based programs, policies, trainings, certifications, and other interventions to prevent prescription drug misuse, abuse, and diversion. Guidelines may also encourage judicious prescribing, patient education, referral to primary care, and substance abuse treatment when needed.

#### *Improve Monitoring and Surveillance*

Monitoring is a continuous, dynamic process of data collection and analysis. Surveillance extends monitoring by utilizing data and translating it into improved practice. Improved monitoring and surveillance includes greater application of clinical monitoring tools and use of prescription drug monitoring programs (PDMPs) by physicians, pharmacists, law enforcement agencies, and others. If used properly, PDMPs are one tool to help reduce prescription drug misuse, abuse, and diversion and improve patient care. State licensing boards can also establish standards and protocols in the prescribing of controlled substances.

#### *Expand and Strengthen Control and Enforcement*

Law enforcement authorities are responsible for upholding controlled substance laws, sometimes jointly with health agencies. Together, these authorities, along with other regulators and licensing boards, can identify individuals who unlawfully divert controlled substances. Effective coordination across treatment and enforcement disciplines can improve diversion control and create alternatives to incarceration. Law enforcement officers and first responders play a role in encouraging the use of naloxone and seeking emergency medical assistance to reduce opioid overdose deaths. Third-party payers' policies and practices can also contribute to improved clinical care and substance abuse reduction.

#### *Improve Access to and Use of Effective Treatment and Recovery Support*

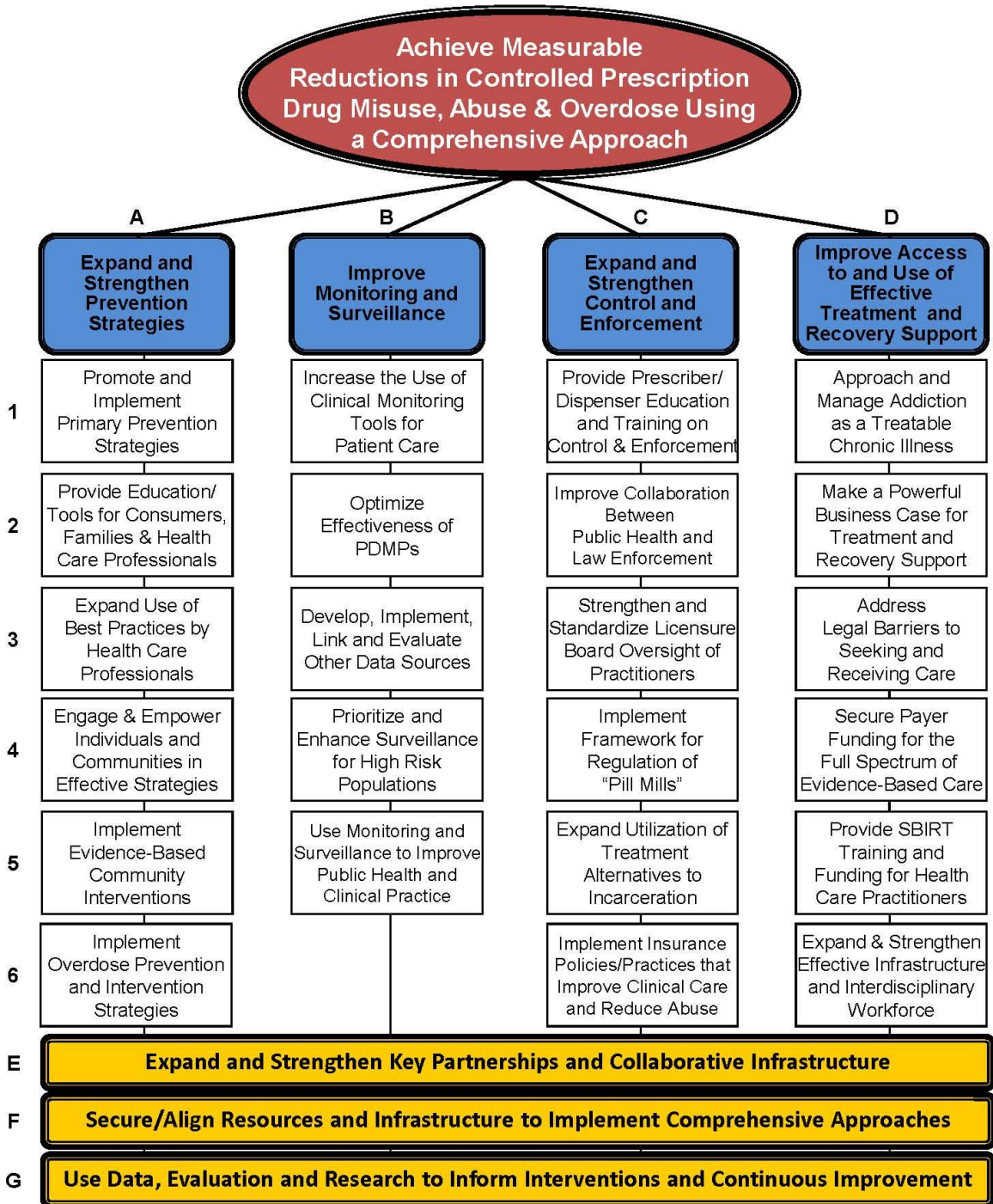
Substance abuse treatment is shown to be effective and helps people achieve recovery. Effective treatment programs give people the skills to reduce or eliminate substance abuse and neutralize addiction's disruptive effects on mental health, productivity, and behavior. The stigma of addiction inhibits effective treatment and recovery; but, like other chronic diseases, addiction can be managed successfully. A wide range of services, program models, and supports are available to individuals in recovery, including recovery-oriented systems of care and mutual aid groups. However, an interdisciplinary workforce must be recruited, trained, and retained to ensure a full spectrum of evidence-based care.



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### ASTHO Prescription Drug Misuse and Abuse Strategic Map: 2013 - 2015



Association of State and Territorial Health Officials

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