



OrCRM

Oregon Coalition for
Responsible Use of Meds

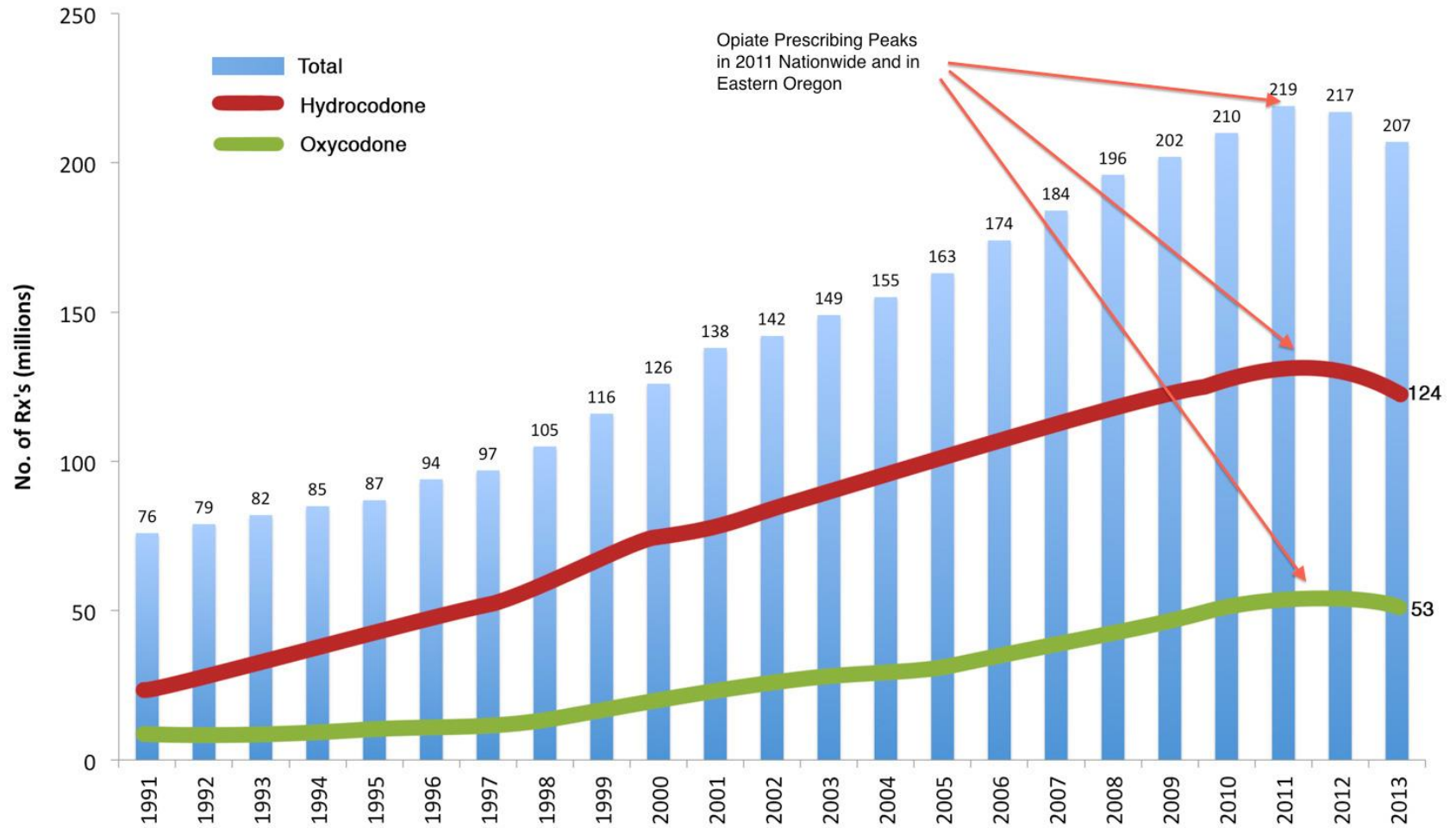
Eastern Oregon Summit to Reduce Rx Abuse

April 24, 2015

Expanding Access to Agonist and Antagonist Therapies

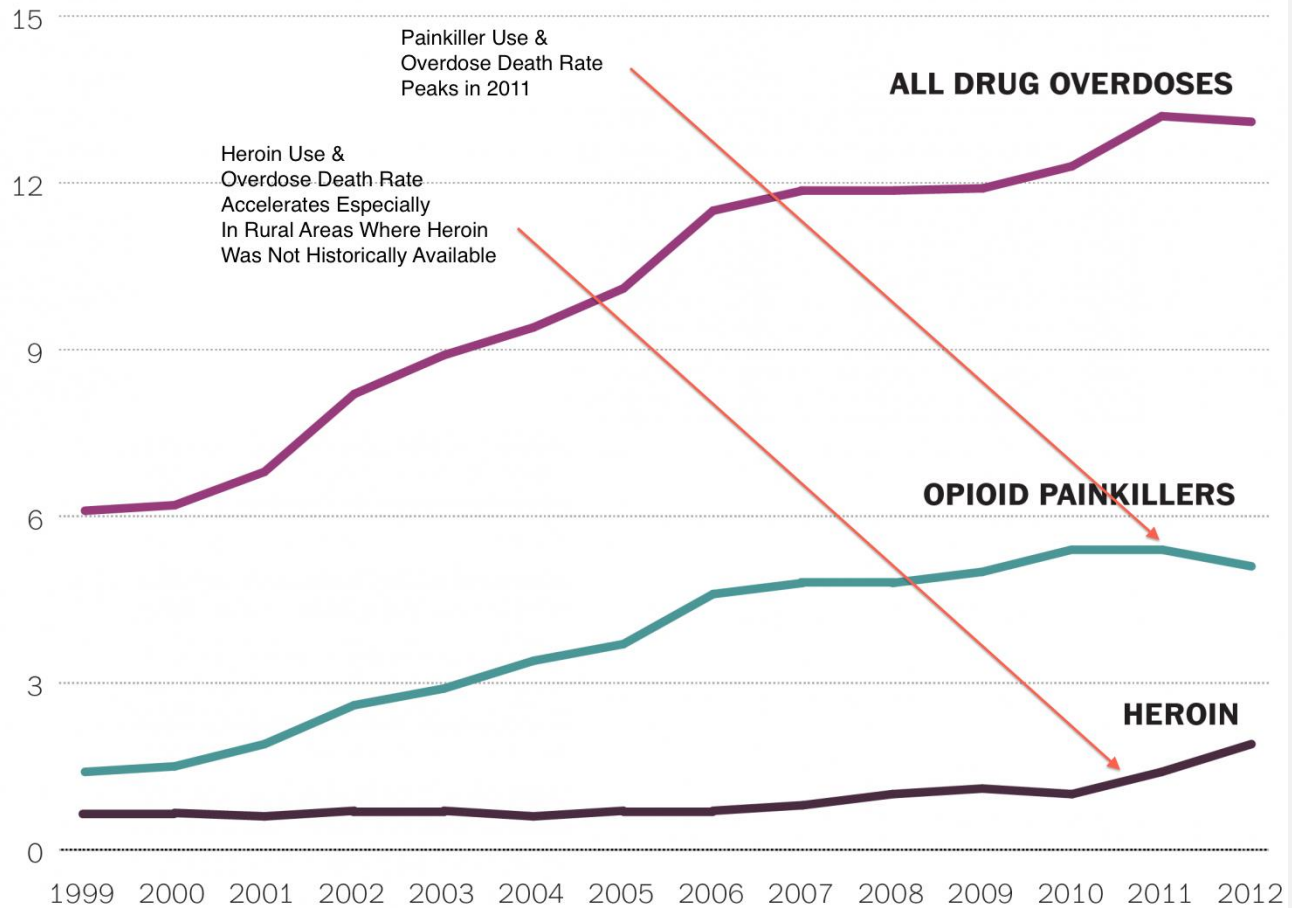
Joel Rice, M.D.

Grande Ronde Recovery, Blue Mountain Associates



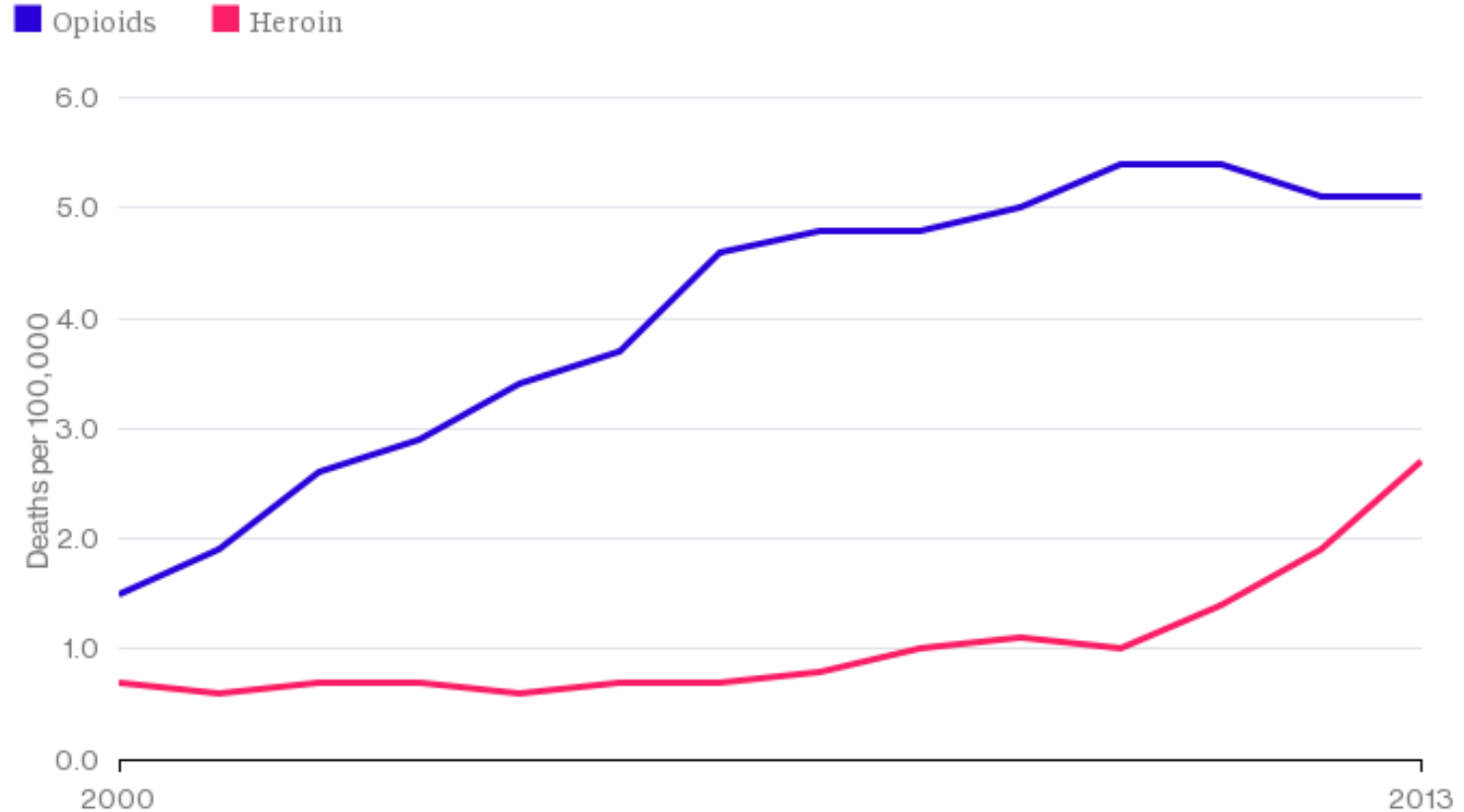
Overall drug overdose death rate has doubled

Age-adjusted death rates, in deaths per 100,000 population, for heroin, opioid painkillers, and all drugs



Heroin Deaths Nearly Tripled Since 2010

The age-adjusted rates for drug overdose deaths

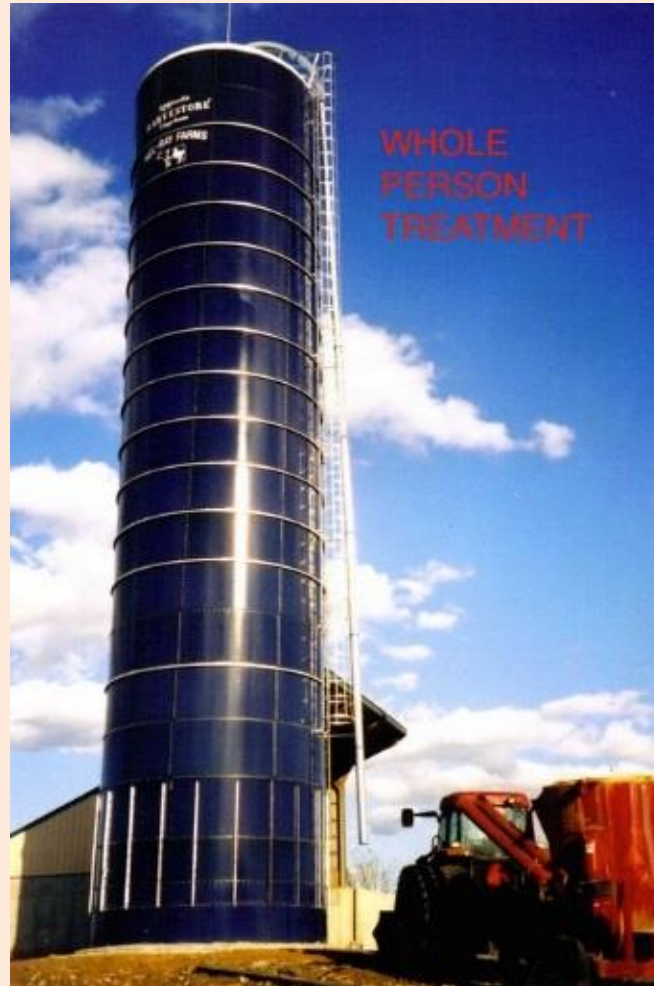


Source: CDC National Center for Health Statistics

Silos of Care



Whole Person Care



Roadblock



Wish List for Eastern Oregon



- Suboxone prescriber in every county
- Intranasal naloxone kits available through OHP and widely prescribed
- Chronic pain clinic led by a psychiatrist within easy driving distance of every county with strong emphasis on functionality and living with pain including a Pain Schema Assessment, Mindfulness Base Stress Reduction (MBSR), Acceptance and Commitment Therapy (ACT), Yoga, Massage, appropriate exercise and spiritual growth
- Identification of and feedback given to outlier prescribers regarding their practice
- Specialized opioid addiction clinics available in every county
- Full integration of psychiatric, addiction, and primary care medicine
- A growing appreciation of what pain and addiction have to teach us about what it means to be human

Wish List for Eastern Oregon Contd.



- Primary care provider opioid treatment plan with all chronic pain patients (over three months of opiate analgesia) to include:
 - Careful assessment of patient's understanding of his medical condition and his pain and what meanings these have for him (his Pain Schema)
 - Sophisticated drug screening
 - PDMP checks
 - Collateral history obtained from family, friends, employer etc.
 - Documentation and assessment of aberrant drug related behaviors (ADRBs)
 - Emphasis on chronic pain as a brain phenomenon heavily influenced by mindfulness, acceptance, gratitude, commitment to our deepest values etc.
- Strict limits on opiate prescribing in ERs and urgent care clinics and required collaboration with PCPS
- Specialized opioid addiction clinics available in every county
- Re-integration of psychiatric and addiction medicine back into primary care