Faster, Easier Access to Medication Assisted Treatment for Opioid Use Disorder

Paul Lewis, Multnomah County Health Officer
Jim Shames, Jackson County Health Officer
Objectives

• Attendees will understand the critical role that buprenorphine can play in reducing the morbidity and mortality associated with opioid use disorder.

• Attendees will learn about different models of care around delivery of MAT services: buprenorphine delivery in the ED, community justice, syringe exchange, hospitalized patients, etc.

• Attendees will explore community strategies for achieving the goal of providing these life saving treatments "on demand."
Disclosures

• Paul Lewis
  • Nothing to disclose

• Jim Shames
  • Nothing to disclose
We know where we encounter people needing treatment (Portland Metro Example)

<table>
<thead>
<tr>
<th>Site</th>
<th>Estimated Number per year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detox</td>
<td>2500 (Hooper, CODA, DePaul)</td>
</tr>
<tr>
<td>Emergency Room Overdose</td>
<td>1000+</td>
</tr>
<tr>
<td>Jail Booking</td>
<td>&gt;10,000 encounters (All substances, Multco only)</td>
</tr>
<tr>
<td>Total</td>
<td>&gt; 13,000 opportunities</td>
</tr>
</tbody>
</table>
Figure 1
How OUD Medications Work in the Brain

Methadone
- Full agonist: generates effect

Buprenorphine
- Partial agonist: generates limited effect

Naltrexone
- Antagonist: blocks effect

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All Patients Deserve to Know that Medication Aids Recovery

![Medication versus Placebo](image)

Connery, Harvard review of psychiatry, 2015, Vol.23(2), p.63-75
OUD is a Chronic Disease

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### Percentage of Patients Who Relapse

<table>
<thead>
<tr>
<th>Condition</th>
<th>Percentage</th>
<th>Genetic factors</th>
<th>Environ Factors</th>
<th>Chronic</th>
<th>Various Meds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type 1 Diabetes</td>
<td>30 to 50%</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Drug Addiction</td>
<td>40 to 60%</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Hypertension</td>
<td>50 to 70%</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Asthma</td>
<td>50 to 70%</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

[Link to source](https://www.drugabuse.gov/publications/media-guide/science-drug-abuse-addiction-basics)
Integrated Components of Successful OUD Treatment

• Medication to break the intoxication-withdrawal-craving cycle
• A Safe Place to Call Home
• Living Wage Employment
• Meaningful Relationships
• Behavioral Therapy
Opioid Misuse: Risk Factors

**Fixed**
- Male > Female
- Youth > Older Adult
- Genetic Variants
  - Dopamine, GABA, serotonin, opioid receptors, enzymes, transporters

**Changeable**
- Education
- Poverty
- Length of exposure to opioids
- Adverse Childhood Experiences
Patients Ready to Start MAT
  ED
  Out-patient Clinic
  Detox
  Jail
  Law Enforcement

Bridge Clinic/ED
  Assess
  Start MAT
  Adjust Dose
  Identify Intensity of Follow-up Treatment
  Achieve Stability
  On-going medical and social support

Maintenance MAT
  OTP
  Primary Care
  Non-OTP SUD Treatment
  Integrated Mental Health/Primary Care Clinic
HB 4143

- Pilot and Evaluate Peer Supported OUD Treatment
  - Coos, Jackson, Marion, Multnomah Counties
  - Begin January 2018
  - Administered by State Opioid Treatment Authority
Models

• ED to start buprenorphine
• In-patient hospitalization
• Out-patient
• Jail/law enforcement
Panel Discussion and Next Steps