

Providers raise the bar for opioid treatment on L.I.

Often when doctors are called upon to help curb the opioid epidemic, they're told simply to prescribe fewer opioids. In fact, that's a key component of the plan President Donald Trump announced Monday. But a group of medical professionals and advocates on Long Island, which accounts for a disproportionate share of the state's overdose deaths, are pushing for clinicians from all disciplines to also take on a greater role in treating opioid-use disorder and advocating for evidence-based solutions.

At an event in Cold Spring Harbor hosted by Long Island Congregations, Associations and Neighborhoods, or LI-CAN, Saturday, attendees were particularly critical of the shortage of doctors with waivers to prescribe buprenorphine and the fact that only a few emergency departments offer the medication.

State data show that there were 521 opioid overdose deaths in Nassau and Suffolk counties in 2016, accounting for about 14% of fatal overdoses statewide that year, although Long Islanders make up only about 7.5% of the state's population. The number of fatalities on Long Island rose last year, with as many as 600 dead, according to a report in Newsday.

Dr. Richard Rosenthal, director of the new Division of Addiction Psychiatry at Stony Brook Medicine, said he thinks eastern Long Island has a long way to go to improve its opioid treatment options. He approached Stony Brook with the idea for the division about a year ago.

"Knowing Long Island had a bad opioid epidemic and looking through Stony Brook's website and not seeing a formal addiction-treatment platform, immediately that's a red flag for me," Rosenthal said. He added that he sees a lot of opportunity to train doctors outside of psychiatry in screening for and treating addiction.

"The goal of the Division of Addiction Psychiatry is really to try to have no wrong door where people enter the system to start getting identification and treatment for substance-use disorder," Rosenthal said.

Thanks in part to LI-CAN's advocacy, things are starting to change. Catholic Health Services of Long Island and Northwell Health are piloting emergency department programs in which they will offer to initiate buprenorphine treatment, which can alleviate symptoms of withdrawal, for people who have overdosed on opioids.

Opioid users who are seen in an emergency department and offered immediate access to buprenorphine, as well as a referral to treatment, are far more likely to remain under care than those who are only offered a referral, according to a 2015 study published in the Journal of the American Medical Association.

It's not just on Long Island where this evidence-based intervention is still rare, however. For instance, Mayor Bill de Blasio announced Monday that the city is investing \$22 million more per year in the HealingNYC program, in part to bring peer advocates to more emergency departments at NYC Health + Hospitals so they can connect people who have overdosed to treatment. However, only two of the five emergency departments that have the program also offer buprenorphine, a city spokeswoman said.

"Establishing this intervention as the standard of care is a way to light behinds on fire," said Dr. Lloyd Sederer, chief medical officer at the state Office of Mental Health. "Because then doctors and hospital administrators would understand they could get hurt on licensing review if they're not doing this."