MEDICATION-ASSISTED TREATMENT CENTERS OF EXCELLENCE

April 22, 2022 **BIWEEKLY NEWSLETTER** Vol. 47

JUSTICE DEPARTMENT ISSUES GUIDANCE ON PROTECTIONS FOR PEOPLE WITH OPIOID USE DISORDER UNDER THE AMERICANS WITH DISABILITIES ACT

The Department of Justice announced that it has published guidance on how the Americans with Disabilities Act protects people with OUD, including those who take medication for OUD and who are in treatment or recovery from discrimination in a number of settings, including employment, healthcare and participation in state or local government services and programs. The publication, "The Americans with Disabilities Act and the Opioid Crisis: Combating Discrimination Against People in Treatment or Recovery," is intended to help people understand their rights under federal law and to provide guidance to entities covered by the ADA about how to comply with the law. The publication is part of the department's comprehensive response to the opioid crisis, which promotes prevention, enforcement and treatment. Through outreach, technical assistance and enforcement under the ADA, the Civil Rights Division seeks to ensure that those in treatment and recovery can successfully participate in their communities and the workforce.

WHAT'S INSIDE

UPCOMING EVENTS

MAT LUNCH HOUR: CITY OF PATERSON'S RAPID ACCESS TO BUPRENORPHINE PROGRAM

WEDNESDAY, APRIL 27TH FROM 12:00-1:00 PM

Co-hosted with the Camden Coalition, the MAT Lunch Hours are hour-long virtual meetings to hear from experts and discuss the latest in clinical and non-clinical issues affecting the MAT patient population.

OBAT NAVIGATOR MONTHLY RESOURCE CALLS & SKILLS LAB

THURSDAY, MAY 19TH FROM 12:00-1:00 PM

The Camden Coalition is offering monthly resources calls & skills labs to provide ongoing opportunity for OBAT navigators & other SUD navigators/case managers to continue learning through:

- Hour-long deep dive of particular content areas
- Discussion of (de-identified) patient cases & support thinking through patient engagement strategies, potential resources, & how to practice self-care while doing this work
- Presentations & sharing updated resources about relevant topics

These events take place every 3rd Thursday of the month from 12pm - 1pm

MAY'S PROJECT ECHOS

PROJECT ECHO IS STRAIGHT-FORWARD, SPECIFIC AND APPLICABLE. AT EVERY LIVE SESSION WE EXPLORE ACTIVE PATIENT CHALLENGES FROM MULTIPLE PERSPECTIVES. WE EACH HOLD A PIECE OF THE PUZZLE AND EVERYONE IS WELCOME TO SHARE EXPERIENCES. YOU'LL MEET PRACTITIONERS FROM ACROSS THE STATE THROUGH A SIMPLE VIDEO INTERFACE AND BECOME PART OF A COLLEGIAL COMMUNITY. YOU'LL HAVE A COMFORTABLE PLACE TO RETURN AND WILL BUILD ON WHAT YOU'RE LEARNING, MONTH TO MONTH.

SUD MAT PROJECT ECHO: EMBRACING THE LONG-TERM USE OF MOUD

FRIDAY, MAY 6TH FROM 12:00-1:00 PM

This session will discuss the rationale for supporting the long-term use of MOUD.

SUD CQI PROJECT ECHO: MEASURING TREATMENT GOALS

FRIDAY, MAY 13TH FROM 12:00-1:00 PM

This SUD continuous quality improvement session will discuss how to measure treatment goals for your patients.

RECENT LITERATURE

TEXT-MESSAGING TO PROMOTE SMOKING CESSATION AMONG INDIVIDUALS WITH OPIOID USE DISORDER: QUANTITATIVE AND QUALITATIVE EVALUATION

Individuals with OUD who smoke cigarettes have high tobacco-related comorbidities, lack of access to tobacco treatment, lack of inclusion in smoking cessation trials, and remain understudied in the mobile health field. The purpose of this study was to understand patients' with OUD perceptions of 1) text message programs to promote smoking cessation, 2) content and features to include in such a program, and 3) how message content should be framed. Analysis of questionnaire data from this December 2018 to February 2019 study indicated that 95% of participants owned a cell phone and 60% of participants reported that they would be interested or very interested in receiving text messages about smoking cessation. Text messages about the health benefits of quitting were rated the highest among various categories of text messages, suggesting that such interventions for people with OUD and smoke cigarettes may motivate and support smoking cessation efforts.

RECOVERY FROM OPIOID USE DISORDER: A 4-YEAR POST-CLINICAL TRIAL OUTCOMES STUDY

There are a lack of studies that investigate the long-term outcomes following treatment with MOUD. Additionally, these studies have prioritized opioid use and treatment utilization outcomes including retention, when other outcome measures regarding long-term, multidimensional trajectories for recovery are needed. This study investigated a diverse array of outcomes for individuals with OUD at an average of 4.2 years post clinical trial participation, which included those who participated in long-acting injectable buprenorphine studies, and examined longer term OUD recovery outcomes. Participants reported continued abstinence from opioids and psychosocial functioning. These encouraging results highlight the multidimensional nature of recovery from OUD, and further support the importance of embracing the long-term use of MOUD.

RECENT LITERATURE (CONT.)

ASSOCIATIONS BETWEEN CLASSIC PSYCHEDELICS AND OPIOID USE DISORDER IN A NATIONALLY-REPRESENTATIVE U.S. ADULT SAMPLE

There has been some "buzz" beyond FDA-approval treatments for opioid use disorder. Classic psychedelics (psilocybin, peyote, mescaline, LSD) have been linked to the alleviation of various substance use disorders and may hold promise as potential treatments for OUD. This study aimed to assess whether these psychedelic substances lowered the odds of OUD and aimed to replicate and extend findings from Pisano et al. (2017) that found classic psychedelic use to be linked to lowered odds of OUD in a nationally representative sample. Lifetime psilocybin use was associated with lowered odds of OUD, but no other substances, including other classic psychedelics, were associated with lowered odds of OUD. Additionally, sensitivity analyses revealed psilocybin use to be associated with lowered odds of seven of the 11 DSM-IV criteria for OUD. Future clinical trials and longitudinal studies are needed to determine whether there is a causal relationship between the use of psilocybin and lowered odds for OUD.

LEGISLATIVELY MANDATED IMPLEMENTATION OF MEDICATIONS FOR OPIOID USE DISORDERS IN JAILS: A QUALITATIVE STUDY OF CLINICAL, CORRECTIONAL, AND JAIL ADMINISTRATOR PERSPECTIVES

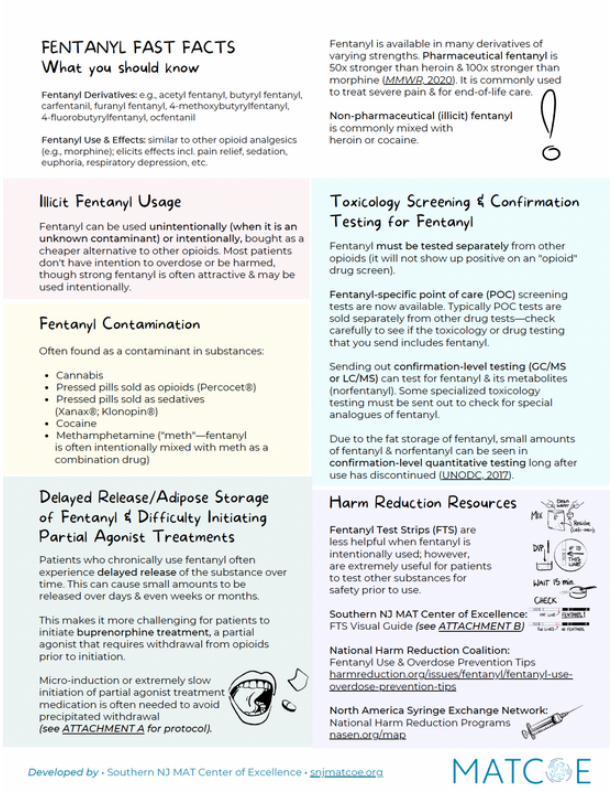
People who are incarcerated and have OUD are at an increased risk of overdose and death. Despite this, few correctional systems provide all FDA approved MOUD to patients with OUD. This study reports on the implementation of MOUD in seven Massachusetts' jails following a state legislative mandate to provide access to all FDA-approved MOUD and to connect with treatment upon release. Participants included clinical, correctional, and senior jail administrators who were interviewed. They detailed how the mandate helped to facilitate acceptance of MOUD and assisted with continuity of care. Factors that affected adoption included decision-making around administration of agonist medications, staff perceptions and training, and changes to infrastructure and daily routines. Leadership was critical in changing the culture. System-based characteristics of incarcerated individuals presented challenges with treatment initiation, but inter- and intra-agency "bridging factors" reduced duplication of effort and led to quick, innovative solutions. Implementation of MOUD in jails requires collaboration with and reliance on external agencies. Preparation for implementation should involve systematic reviews of available resources and collaboration with treatment agencies and providers. We must all recognize the cultural shift needed to ensure program success.

RESOURCES

PRESCRIBER EDUCATION TIP SHEET

This past year, Camden County officials shared efforts to raise awareness of fentanyl, a synthetic opioid that is 80 to 100 times more potent than morphine and that is continuing to contaminate drugs purchased on the street including marijuana, pressed pills, cocaine, methamphetamine, and heroin. A recent review of overdose deaths in New Jersey revealed that 93% of victims had opioids in their systems and 70% had fentanyl, further intensifying the urgent need for educational efforts spanning providers, patients, peers, and the general public.

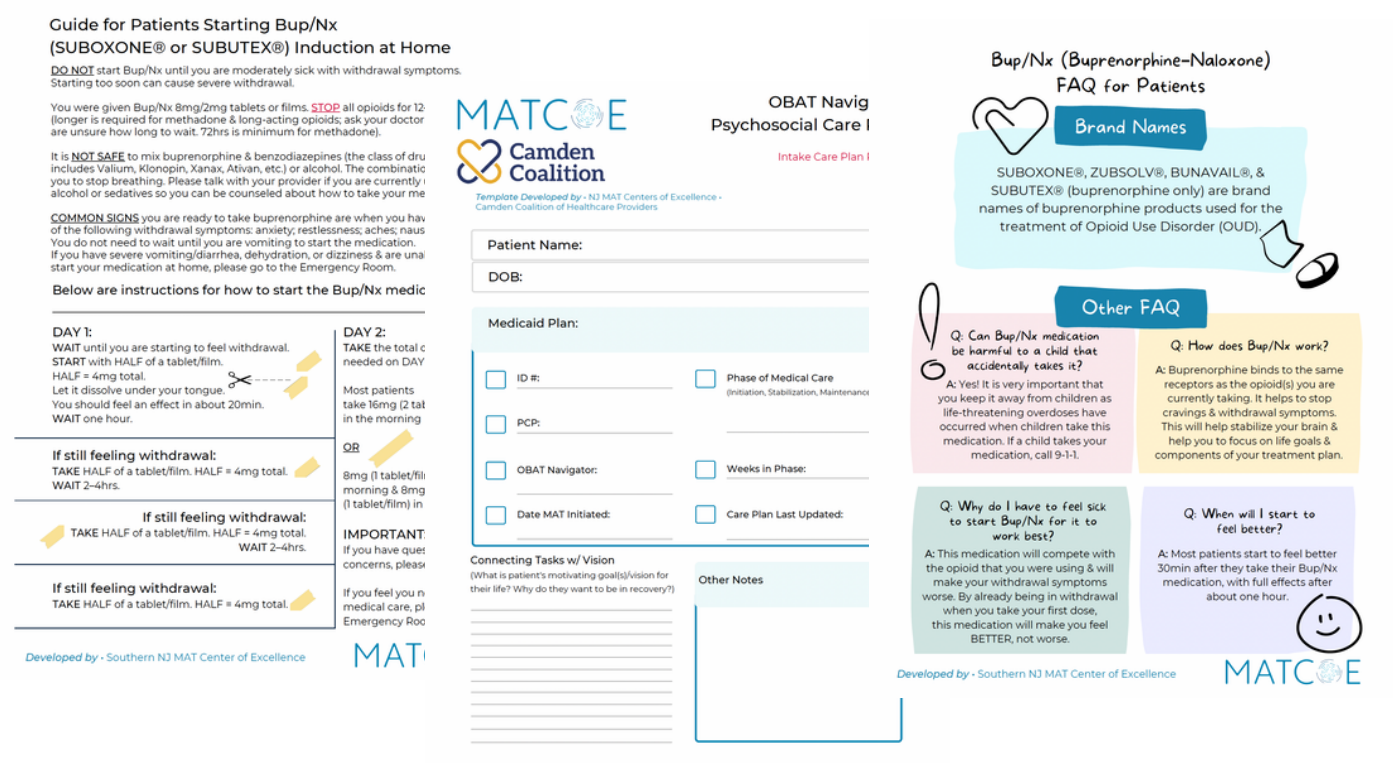
At the NJ MAT Centers of Excellence, we remain dedicated to raising awareness of low-barrier and lifesaving MAT and harm reduction strategies including naloxone, syringe services programs, and fentanyl test strips. Please reference and share our prescriber education tip sheet covering initiation of partial agonist treatments and buprenorphine micro-induction patient health communication, toxicology screening and confirmation testing, and harm reduction resources.



RESOURCES FOR SPECIAL POPULATIONS

Further, we are excited to share our new resources for special populations! Download our delivery planning for pregnant patients who are on medication for opioid use disorder packet, covering vaginal delivery planning, Cesarean section guidelines for patients on buprenorphine, breastfeeding/chestfeeding guidelines, and pain relief guidelines for patients on buprenorphine. Additional patient health communication materials on neonatal abstinence syndrome, smoking and breastfeeding harm reduction, and related topics will be made available soon on our Southern NJ MAT Center of Excellence website at snjmatcoe.org.

RESOURCES (CONT.)



OFFICE-BASED ADDICTION TREATMENT SUPPORT PACKET

We are excited to share our office-based addiction treatment support packet for new or updated practice implementation! Download our new patient intake forms, navigator care plan guide, buprenorphine/naloxone sublingual home induction protocol, and FAQs on medication for opioid use disorder for patients and loved ones.

Special thanks to our protocol writers, Southern NJ MAT Center of Excellence physician leaders Kaitlan Baston, MD, DFASAM and Rachel Haroz, MD, FAACT; and our NJ MATCOE and Camden Coalition of Healthcare Providers navigator care plan guide collaborators. To request the forms in varying dot phrase templates, please contact our content manager Patricia Fortunato at fortunato-patricia@cooperhealth.edu.

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24/7 MAT Provider Hotline: 844-HELP OUD (844-435-7683)

Northern NJ MAT COE Website & Email
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