MEDICATION-ASSISTED TREATMENT CENTERS OF EXCELLENCE

Feb 17, 2023 BIWEEKLY NEWSLETTER Vol. 68



OPTIMIZING OPIOID SETTLEMENT FUNDS TO SAVE LIVES: INVESTING IN EQUITABLE SOLUTIONS

This is an article in HealthAffairs that outlines short to long-term investments for the use of the opioid settlement funds that would provide the greatest outcomes for overcoming the polysubstance use crisis. These include:
1)Expanding harm reduction services and supplies to prevent overdose
2)Facilitate engagement in low-barrier treatment with MOUD
3)Promotion of social services and prevention programs rooted in evidence and public health

WHAT'S INSIDE

UPCOMING EVENTS

3/2: Myths and Realities of Harm Reduction

3/3: ECHO: Addressing OUD in Special Populations

3/11: ECHO: Quality Improvement Application Case Studies

3/16: OBAT Navigator Skills Lab

HEADLINES

Longitudinal Associations Btwn Age 20 Problematic Substance Use and OUD Incidence at Age 30

Association Btwn Opioid Tapering and Subsequent Health Care Use, Medication Adherence & Chronic Condition Control

Ending Medical Complicity with Skilled-Nursing Facility Discrimnation Against People w/ OUD

RESOURCES

SNJ COE Expands Statewide Services

UPCOMING EVENTS



MYTHS AND REALITIES OF HARM REDUCTION: A PANEL DISCUSSION

FRIDAY, MARCH 2ND FROM 1:00-3:00 PM

LOCATION: MONTCLAIR STATE UNIVERSITY BUSINESS SCHOOL, 1ST FLOOR, ROOM 101

NJ lost nearly 3,000 people to preventable drug overdoses in 2022. Harm reduction, a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use, can help save lives. Join the panel of experts, including our Clinical Pharmacist/Academic Detailer, Dr. Clement Chen to learn about harm reduction strategies and their potential for helping people who use drugs stay alive.

SUD MAT PROJECT ECHO: ADDRESSING OUD IN SPECIAL POPULATIONS

FRIDAY, MARCH 3RD FROM 12:00-1:00 PM

QUALITY IMPROVEMENT APPLICATION: CASE STUDIES

FRIDAY, MARCH 10TH FROM 12:00-1:00 PM

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.

OBAT MONTHLY SUD NAVIGATION SUPPORT CALLS

THURSDAY, MARCH 16TH FROM 12:00-1:00 PM

The Camden Coalition offers monthly resources calls & skills labs (every 3rd Thursday) 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

RECENT NEWS

LONGITUDINAL ASSOCIATIONS BETWEEN AGE 20 PROBLEMATIC SUBSTANCE USE AND OUD INCIDENCE AT AGE 30 - FINDINGS FROM AN URBAN COHORT



This study of approximately 1,400 people in an urban cohort sought to identify associations between several substance use disorders, including nicotine, alcohol, and cannabis use disorder and disorder criteria at age 20, with the incidence of opioid use disorder by age 30. It finds that lifetime nicotine use disorder at age 20 predicted age 30 lifetime OUD and that the number of cannabis use disorder criteria and nicotine dependence severity scores at age 20 predicted any OUD criteria between the ages of 20 and 30. These findings suggest that substance use in young adults who live in urban areas may predict onset of OUD and OUD criteria.



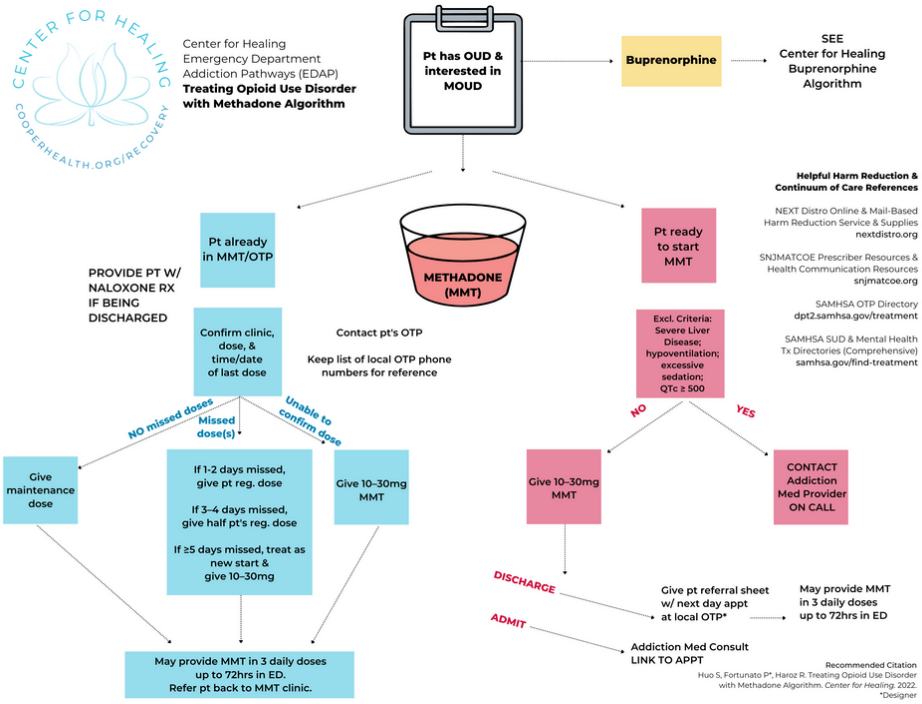
ASSOCIATION BETWEEN OPIOID TAPERING AND SUBSEQUENT HEALTH CARE USE, MEDICATION ADHERENCE, AND CHRONIC CONDITION CONTROL

This is a study that examined the association between opioid tapering and subsequent health care utilization, medication adherence, and management of chronic conditions. In this cohort study of over 113,600 patients from January 1st, 2008 to December 31st, 2019, tapering was associated with statistically significant fewer primary care visits and more emergency department visits and hospitalizations. Amongst those with hypertension and diabetes, tapering was associated with greater nonadherence to medications. This provides evidence of the potentially deleterious effects of opioid tapering that prescribers and policymakers must consider.

RECENT NEWS

ENDING MEDICAL COMPLICITY WITH SKILLED-NURSING FACILITY DISCRIMINATION AGAINST PEOPLE WITH OPIOID USE DISORDER

This is a commentary describing how stigma has impacted the transitions of care for patients with OUD who may need the services of skilled nursing facilities. It addresses the reasons why the stigma occurs, the difficulties of securing appropriate referrals just because a patient is on MOUD, and steps to help overcome potentially discriminatory practices.



METHADONE INITIATION IN THE EMERGENCY DEPARTMENT FOR OUD: A CASE SERIES

This case series describes the initiation of methadone in the emergency department at our Southern COE Cooper University Hospital, highlighting the importance of this setting for patients with OUD who may otherwise not enter care. It describes the screening process for patients with OUD, assessment, treatment, as well as the linkage and ongoing care to an opioid treatment program.

RESOURCES

SOUTHERN NJ MATCOE EXPANDS STATEWIDE TRAINING, EDUCATION, & CONSULT SERVICES



As part of the NJ MAT Centers of Excellence mission, our partners at Cooper University Health Care and Rowan-Virtua School of Osteopathic Medicine are expanding CME trainings on a large-scale, offering both didactic and asynchronous forms of educational content in varied lengths with provision of free CME for physicians and CME designations for advanced practice providers, in addition to creation and dissemination of prescriber education resources. The team is also expanding "elbow to elbow" consultation services both on-site at Cooper and Rowan Medicine and through "office hours" in virtual capacity for physicians, APPs, and interdisciplinary clinical staff in order to further address clinical practice issues.

The team's next training, didactic in-person format, is scheduled for Friday, March 31 from 8am to 5pm at Cooper University Hospital in Camden. The course content will focus on a comprehensive overview of hospital-based addiction care, including how to diagnose and manage the most common SUDs, managing patient-directed discharge, and harm reduction strategies, and will be presented by St. Joseph's Health System Chief of Pain and Addiction Medicine, Alexis LaPietra, DO, FACEP; Cooper Center for Healing Medical Director and the program's PI, Rachel Haroz, MD, FAACT; Medical Director of Recovery Village Cherry Hill at Cooper and Cooper Addiction Medicine Fellowship Program Director, Ryan Schmidt, MD, FASAM; and Cooper Addiction Medicine Fellow, Brittany Cesar, MD.

For registration and CME information, and for further information in regard to the training series and related SNJMATCOE training and education, please contact SNJMATCOE Content Manager, Patricia Fortunato: fortunato-patricia@cooperhealth.edu