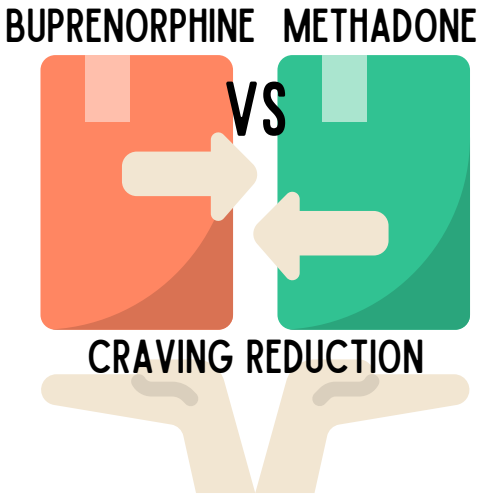
MEDICATION-ASSISTED TREATMENT CENTERS OF EXCELLENCE

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BUPRENORPHINE/NALOXONE AND METHADONE EFFECTIVENESS FOR REDUCING CRAVING IN INDIVIDUALS WITH PRESCRIPTION OPIOID USE DISORDER: EXPLORATORY RESULTS FROM AN OPEN-LABEL, PRAGMATIC RANDOMIZED CONTROLLED TRIAL

A major goal of MOUD is to help reduce cravings for opioids. This exploratory analysis of an open-label randomized clinical trial compared the effectiveness of the BUP/NX flexible model of care relative to the supervised methadone standard of care for craving reduction in individuals with OUD. It found that cravings decreased in both treatment groups over 22 weeks, and were lower in BUP/NX group than the methadone group. The time by treatment group interaction (favoring lower cravings for BUP/NX) was statistically significant at week 2. The findings of reduced cravings for BUP/NX carry significant implications to guiding shared decision-making regarding OUD treatment in this population.

WHAT'S INSIDE

UPCOMING EVENTS

9/2: ECHO: Cannabis Use Disorder in the OUD Patient

9/9: ECHO: Recovery & a Whole Centered Approach to Care

9/15: OBAT Navigator Skills Lab

9/28: MAT Lunch Hour: Mobile Van Units

HEADLINES

Is Daily Supervised Buprenorphine or Naloxone Dosing Necessary?

Improving Uptake of ED-Initiated Buprenorphine

Detoxification, 12-step meeting Attendance, & Non-Fatal Overdoses Among Suburban Population with OUD

Survey: Pharmacy Access Report

RESOURCES

International Overdose Awareness Week 2022

UPCOMING EVENTS



SUD MAT PROJECT ECHO: CANNABIS USE DISORDER IN THE OUD PATIENT

FRIDAY, SEPTEMBER 2ND FROM 12:00-1:00 PM

This MAT SUD session topic will discuss how to address and treat cannabis use disorder in the patient with opioid use disorder.

SUD CQI PROJECT ECHO: RECOVERY AND A WHOLE-CENTERED APPROACH TO CARE

FRIDAY, SEPTEMBER 9TH FROM 12:00-1:00 PM

This SUD continuous quality improvement session will discuss a recovery-oriented approach to care in the patient with opioid use disorder.

OBAT NAVIGATOR MONTHLY RESOURCE CALLS & SKILLS LAB

THURSDAY, SEPTEMBER 15TH 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

MAT LUNCH HOUR: HOPE ONE MOBILE RECOVERY UNITS

WEDNESDAY, SEPTEMBER 28TH FROM 12:00-1:00 PM

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.

RECENT NEWS

IS DAILY SUPERVISED BUPRENORPHINE-NALOXONE DOSING NECESSARY?

This is a recent article published in the BMJ journal that emphasizes the importance of a flexible model for buprenorphine-naloxone dosing, adjusted for the needs of each patient. It finds that although guidelines in several countries such as Australia, Canada, and the UK recommend supervised, daily dosing of buprenorphine when initiating, unsupervised home-inductions provide greater autonomy and has been found to be safe. It therefore suggests that guidelines should adapt to the changing times, which is very important especially in today's age of fentanyl.



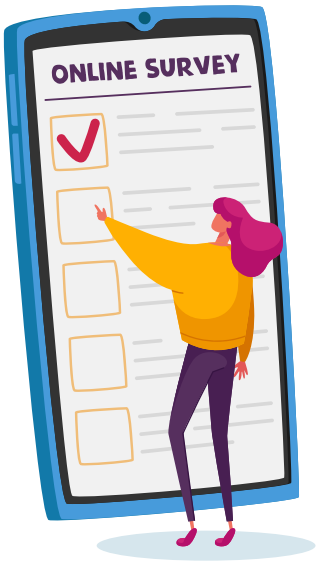
IMPROVING UPTAKE OF EMERGENCY DEPARTMENT-INITIATED BUPRENORPHINE: BARRIERS AND SOLUTIONS

Initiating MOUD in the emergency department remains an important intervention. Particularly with buprenorphine, many public health leaders and emergency medicine specialty societies support this, as it is clinically effective, cost effective, and feasible. Despite this evidence-based intervention, few EDs are initiating buprenorphine. Given this imbalance between evidence-based practice and current practice, identifying behavioral approaches can guide experts to expand buprenorphine initiation into the ED. This paper uses the theory of planned behavior to identify and addresses the 1) clinician factors, 2) institutional factors, and 3) external factors surrounding ED buprenorphine implementation. By understanding these factors, institutions can more readily change their practices to implement this intervention.

RECENT NEWS

DETOXIFICATION, 12-STEP MEETING ATTENDANCE, AND NON-FATAL OPIOID OVERDOSES AMONG A SUBURBAN/EXURBAN POPULATION WITH OPIOID USE DISORDER

Given the over 105k overdose deaths in the U.S. in a 12-month period ending October 2021, it is crucial to assess risk factors associated with opioid overdose to improve interventions. This study examined factors associated with non-fatal overdose among a suburban/exurban population with OUD in Southern California. Nearly 200 people reported at least one overdose in their lifetime. A total of 229 participants identified as male, 124 identified as female, and 2 identified as non-binary. When controlling for demographic factors, non-oral opioid administration at first opioid use, having a history of methadone detoxification, history of buprenorphine detoxification, and history of 12-step attendance were found to be independently and positively associated with lifetime opioid overdose. The article provides evidence that the use of MOUD, particularly opioid agonist therapy with buprenorphine and methadone should be prescribed for long-term use as this leads to better outcomes than if used short-term for withdrawal management (detoxification).



SURVEY: PHARMACY ACCESS REPORT

If you are finding that many pharmacies are out-of-stock of buprenorphine, you are not alone! Anecdotally, more providers are finding that their patients are having difficulty filling their prescriptions for buprenorphine because of stock issues. The American Society of Addiction Medicine (ASAM) is interested in knowing about these cases. Please fill out this ASAM survey regarding pharmacy access to buprenorphine if you are experiencing these issues.

RESOURCES



NJ MAT CENTERS OF EXCELLENCE RECOGNIZE OVERDOSE AWARENESS WEEK 2022 AND REMAIN EVER-DEDICATED TO ENDING THE STIGMA OF ADDICTION

Overdose Awareness Week, recognized by the White House as the week during which International Overdose Awareness Day is memorialized (Wednesday, August 31), is a time of remembrance and recommitment to preventing overdose and supporting people struggling with substance use and substance use disorder within our communities, state, and across the United States and worldwide.

During Overdose Awareness Week and year-round, the NJ MAT Centers of Excellence mourn for the lives lost to overdose in New Jersey and worldwide; acknowledge and address grief and trauma of patients, providers, and staff; and remain ever-dedicated to the Centers of Excellence team vision: To end the stigma of addiction and ensure that all people with substance use disorder have access to high-quality, evidence-based care so they may live full and satisfied lives.

Please share our team's graphic across clinical settings and social media, throughout Overdose Awareness Week, International Overdose Awareness Day, and year-round, to support survivors, loved ones, and all people struggling with grief, stigma, substance use, and substance use disorder.

MEDICATION-ASSISTED TREATMENT
CENTERS OF EXCELLENCE

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

Northern NJ MAT COE Website & Email
Southern NJ MAT COE Website & Email