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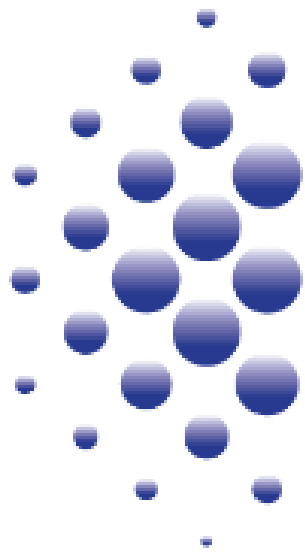
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# Opioid Addiction & Medication Assisted Treatment

Presented by: Dr. Anjali Nandi, PhD, MAC, LAC

Facilitated by: Greg Brown

Sept 30, 2020



BJA's

# **Comprehensive** Opioid, Stimulant, and Substance Abuse

Program

# Webinar Information

This project was supported by Grant No. 2019-MU-BX-K031 awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the U.S. Department of Justice's Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the SMART Office. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.

# Pre-Webinar Information



Participants will be muted for the duration of the webinar.

Questions and comments can be asked using the question box in the control panel.



Presentation slides, instructor bios, and corresponding resources can be found in the handouts section of the control panel.

Live transcript/captions available at <https://www.streamtext.net/player?event=IASA>

# Post-Webinar Information

- At the end of the webinar, a short evaluation will appear (pop-up blocker must be turned off).
- A recording of this webinar will be available in approximately 2 weeks at [www.ncjtc.org](http://www.ncjtc.org).
- A certificate of attendance will be sent within 2 weeks to participants who:
  - ✓ Attend the entire live webinar
  - ✓ Complete the evaluation

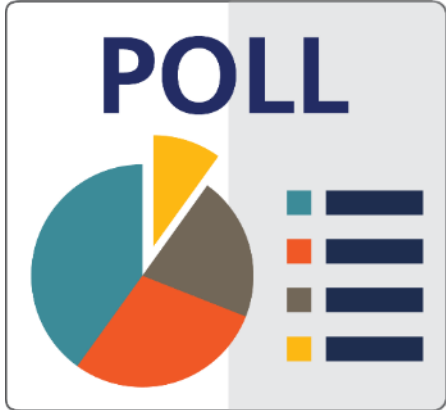
**Note:** Certificates will not be provided for viewing the recorded webinar.



# Poll Questions

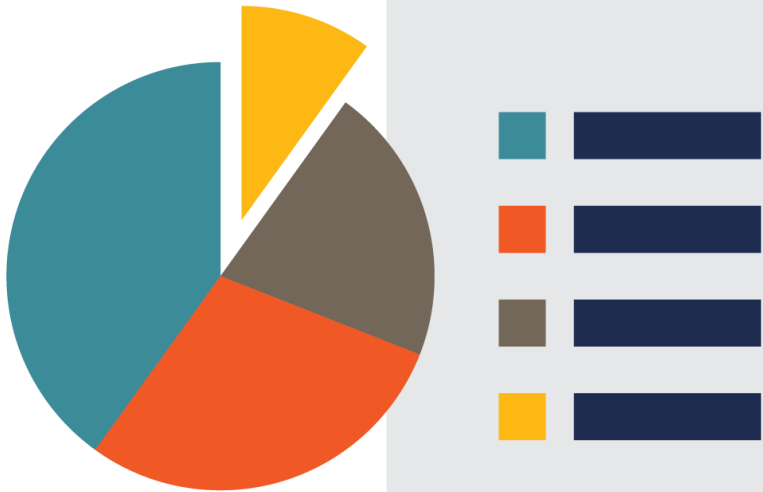
Poll questions may be asked during the webinar.

This is your time to weigh in with your thoughts.



Please respond promptly; polls are open for a short period of time.

# POLL



## Which of the following best describes your role?

- Victim Services / Victim Advocate
- Probation / Community Corrections
- Law Enforcement
- CAC Worker, Social Worker, Mental Health Worker
- Other



# Learning Objectives

- ① Understand the impact of addiction on the brain.
- ② Explore the latest research on opiate addiction and medication assisted treatments.
- ③ Examine common concerns related to medication assisted treatments.



**Dr. Anjali Nandi, PhD, MAC, LAC**  
Associate, NCJTC  
*Presenter*



**Kevin Mariano**  
Project Coordinator, NCJTC  
*Panelist*



**Greg Brown**  
Program Manager, NCJTC  
*Moderator*



# What is Addiction?

- Treatable brain disease
- Chronic, recurring, relapsing illness
- Characterized by craving and seeking
- Persists in spite of negative consequences
- Behavior is harmful by some acceptable standard
- Diagnosable



# Neurobiology of Addiction

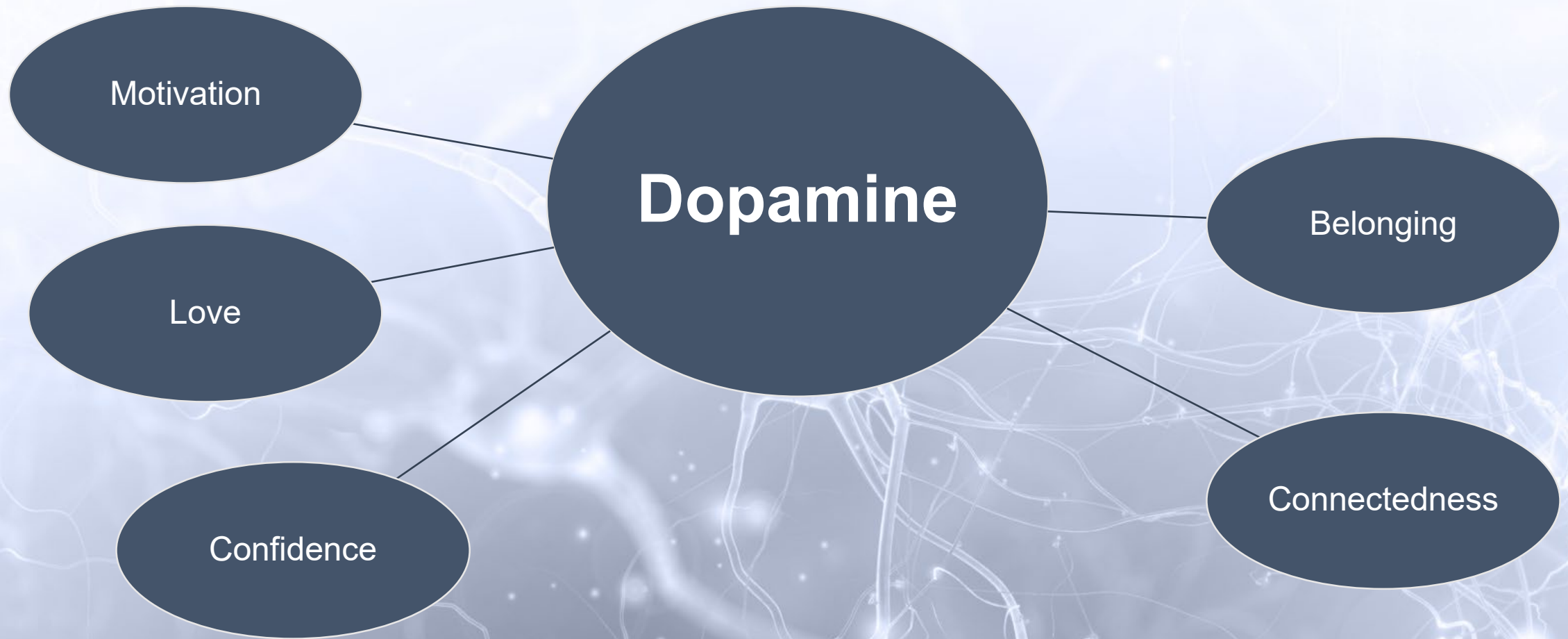
## Limbic System

- Emotions
- Reactions
- Survival
- Matures early
- Reward

## Frontal Cortex

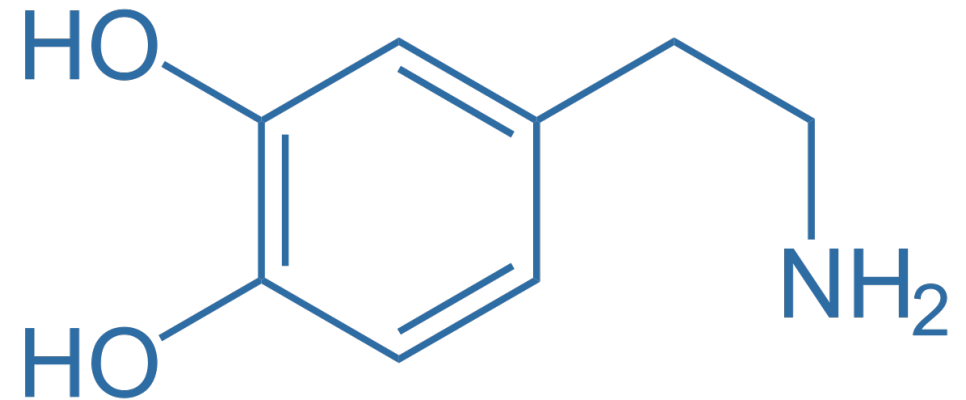
- Consequences
- Problem solving
- Pros/cons
- Complex decisions
- Executive Functions

# Neurobiology of Addiction



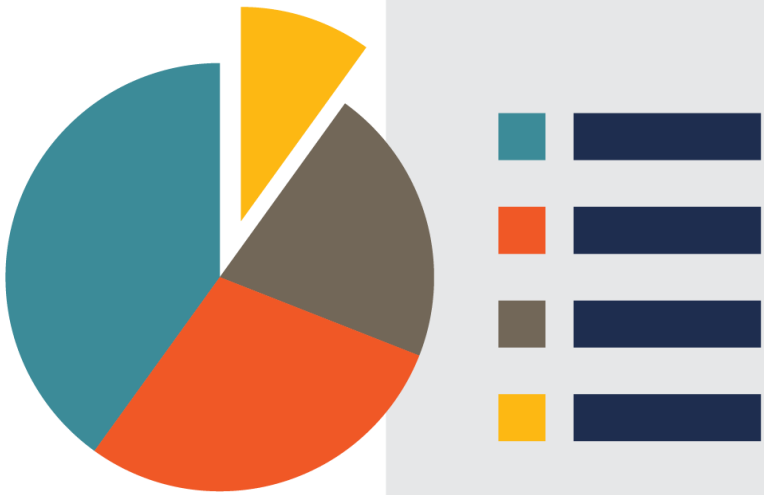
# Dopamine

- Ranges between 50 and 100 ng/deciliter
- Drugs increase dopamine to about 10x that amount
- Homeostasis: normal range
- Body fights to get back to homeostasis
- Adaptations to bring back homeostasis





# POLL



If the relative size of craving for water is a baseball and food is a football, what is the relative craving size for drugs/alcohol?

- Basketball
- Beach ball
- Four footballs
- Even bigger

A collection of medical supplies including several glass vials of different sizes, some containing clear liquids, and several capsules and tablets scattered around. A large medical syringe with a needle is prominently displayed in the foreground, angled towards the right. The background is a plain, light-colored surface.

# Opiate Use Disorder

- Chronic brain disease related to the use of opiates:
  - Prescription drugs like oxycodone, hydrocodone, codeine, morphine, fentanyl
  - Illicit drugs like heroin
- Produce pleasure, relieve pain
- Affected over 2.6 million Americans in 2018
- Drug overdose and death
- 4 in 5 heroin users started by misusing prescription painkillers



# Treatment of Opiate Use Disorder

- Relapse rates are high
- Without medication, relapse rates can be as high as 90%
- Combining medication and treatment is the most effective way of treatment opiate addiction
- This is especially true for people with limited social support and stability, trauma, and the presence of adverse childhood experiences

# Prognosis

## Better Prognosis

- Extensive social support
- Access to healthcare
- Access to counseling
- Well supported



## Poor Prognosis

- Limited social support
- Limited stability
- Trauma
- Adverse childhood experiences

# What is MAT?

Medication Assisted Treatment (MAT) is using a combination of medication and counseling to treat a substance use disorder.

MAT is more successful at treating opiate addiction than using counseling or behavioral therapies alone.





# Goal of MATs

- Full recovery
- Improve survival
- Increase retention in treatment
- Decrease illicit opiate use, criminal activity among people with substance use disorders
- Increase ability to gain and maintain employment
- Improve birth outcomes among women who have substance use disorders and are pregnant
- Reduce likelihood of contracting HIV and Hep C

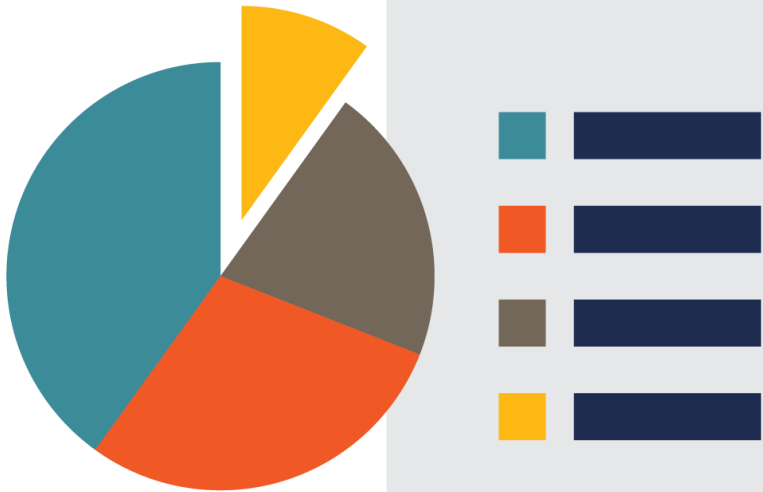


The background of the slide features a faded, blue-tinted image of a playground. In the foreground, there are several swings hanging from a metal frame. In the background, there are two large teepees and a small building, possibly a playhouse or a small house, situated in a grassy field.

# Data on American Indian/ Alaska Native (AI/AN) population

- Three times as many are diagnosed with substance use disorders compared to white Americans.
- Twice as many require treatment for addiction compared to any other racial and ethnic group.
- Highest rates of alcohol-related deaths.
- Higher opioid mortality rate than any other racial and ethnic group.
- Implementation of MATs is significantly lower than the general population.

# POLL



**Do you worry that MATs are just substituting one drug for another?**

- Yes
- No
- Unsure

# Common Concerns

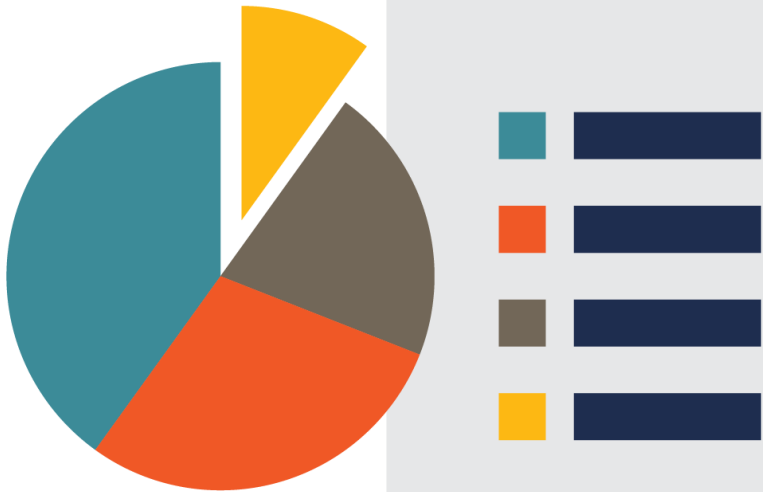
What is the difference between providing a medication and using the substance?

Isn't this just substituting one drug for another?

- Intensity and Effect
- Dosage is not enough to get high
- Reduces cravings and withdrawal
- Allows brain circuitry to rebalance



# POLL



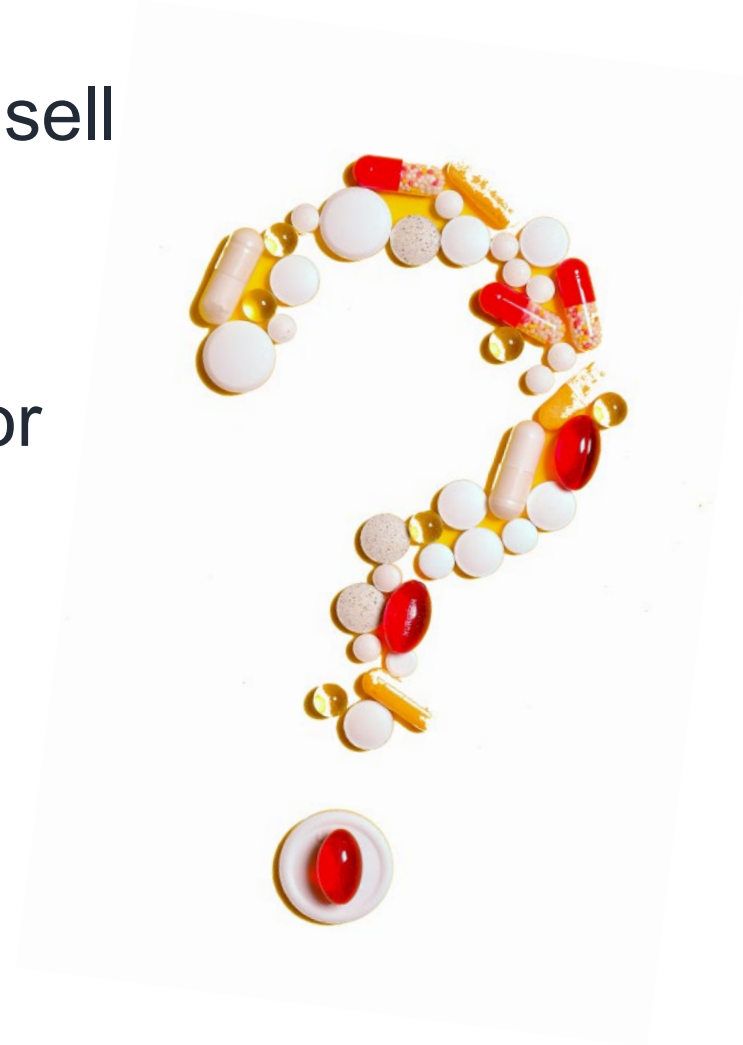
**Do you worry that clients will just sell their medications on the streets?**

- Yes
- No
- Unsure

# Common Concerns

Wouldn't people who are given medications just sell them to fund their drug habit?

- Diversion is uncommon
- When it does occur, it is primarily used for managing withdrawal



# Medications for Alcohol Use Disorder

Generic	Brand name	Drug Effects
<b>Disulfiram</b>	Antabuse	Causes a significant physical reaction when alcohol is consumed
<b>Naltrexone</b>	Vivitrol Revia	Blocks opiate receptors thereby limiting the reward circuitry activated when drinking or craving Available orally or as a monthly injectable
<b>Acamprosate</b>	Campral	Supports the rebalancing of neurotransmitters GABA and glutamate



# Medications for Opioid Use Disorder

Generic	Brand name	Drug information
<b>Naltrexone</b>	Vivitrol Revia	Blocks opiate receptors thereby limiting the reward circuitry activated when craving Available as a monthly injectable Can be prescribed by anyone licensed to prescribe medications
<b>Methadone</b>	Methadose Diskets Dolophine	Acts as an opiate agonist Can only be dispensed by certified and approved opioid treatment programs
<b>Buprenorphine</b>	Butrans Buprenex	Relieves the symptoms of withdrawal Can only be prescribed by physicians who have completed special training to prescribe buprenorphine
<b>Buprenorphine/ Naloxone</b>	Suboxone	Relieves symptoms of opiate withdrawal; the addition of naloxone reduces the likelihood of abuse Can only be prescribed by physicians who have completed special training to prescribe buprenorphine

# What Can We Do?

- You've started by listening to this webinar
- Increase access to treatment
- Increase awareness and access to MATs
- Talk with medication providers about MATs
- Conduct myth-busting workshops in your communities



# What Can We Do?

Apply for funding opportunities:

- Bureau of Justice Assistance (BJA) Coordinated Tribal Assistance Solicitation (CTAS) Purpose Area 3
  - BJA Comprehensive Opioid, Stimulant and Substance Abuse Program (COSSAP)
  - Substance Abuse and Mental Health Services Administration (SAMHSA) Tribal Opioid Response
- Funding Resources document available in the Handouts section.



# **Tribal MAT Programs**

## **BJA COSSAP and SAMHSA Grantees**

### **Makah Tribe (WA)**

- Community-based MATs in law enforcement, first responder diversion program, and jail-based MATs

### **Three Affiliated Tribes (ND)**

- MAT model of care throughout Elbowoods Memorial Health Center

# **Tribal MAT Programs**

## **BJA COSSAP and SAMHSA Grantees**

### **Other Tribal MAT Programs**

- Implementing MAT's in new detention center programming
- Culturally-responsive and multi-disciplinary MAT services
- Partnership between community-based residential facility, county jail and state department of corrections



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# Training & Technical Assistance

View upcoming and requestable trainings, upcoming program webinars, resources and more:

[ncjtc.org/iasaptraining](https://ncjtc.org/iasaptraining)

Visit our robust on demand library to view scheduled webinars, webinar recordings, self-paced online course opportunities:

[ncjtc.org/ondemand](https://ncjtc.org/ondemand)

# Upcoming Webinars

**October 7 | 1:00 PM CT**

- ✓ *Nature or Nurture? The Impact of Genetics and the Environment on Addiction*

**October 14 | 1:00 PM CT**

- ✓ *Social Emotional Skill Development*

**November 4 | 1:00 PM CT**

- ✓ *Building Stress-Resilient Tribal Communities*

**November 18 | 1:00 PM CT**

- ✓ *Underage Substance Abuse*

**December 2 | 1:00 PM CT**

- ✓ *Adverse Childhood Experiences (ACEs) and Substance Use*

***Registration emails  
coming soon...***

# *Bureau of Justice Assistance's* Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP) Resource Center



[www.cossapresources.org](http://www.cossapresources.org)

# COSSAP Resources

**Tailored Assistance**—The COSSAP training and technical assistance (TTA) program offers a variety of learning opportunities and assistance to support local, tribal, and state organizations, stakeholders, and projects in building and sustaining multidisciplinary responses to the nation’s substance abuse crisis. ***You do not need to be a COSSAP grantee to request support.*** TTAs are provided in a variety of formats, including virtual and in-person training events, workshop and meeting presentations, and online resources. Request TTA to support your activities at <https://cossapresources.org/Program/TTA/Request>.

**Funding Opportunities**—Current COSSAP and complementary funding opportunities are shared at <https://www.cossapresources.org/Program/Applying>.

**COSSAP Webinars**—All COSSAP webinars are recorded and made available online at <https://www.cossapresources.org/Media>.

**Join the COSSAP community!** Send a note to [COSSAP@iir.com](mailto:COSSAP@iir.com) with the subject line “Add Me” and include your contact information. We’ll be happy to ensure you receive the latest-and-greatest COSSAP opportunities, resources, and updates.



# REMINDER

To receive a certificate you must:

- 1. Attend the entire live webinar**
- 2. Complete the evaluation**

A **Certificate of Attendance** will be emailed to you within two (2) weeks.

You must complete the evaluation to receive a certificate.



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