



The Opioid Epidemic and the Practice of Legitimate Medicine

Practitioner Diversion Awareness Conference
Orlando, Florida
May 5 (6), 2018



The United States Department of Justice
Drug Enforcement Administration

James Arnold, Chief
Liaison and Policy
Diversion Control Division



LEGAL DISCLAIMER

The following presentation was accompanied by an oral presentation on **May 5-6, 2018**, and does not purport to establish legal standards that are not contained in statutes, regulations, or other competent law. Statements contained in this presentation that are not embodied in the law are not binding on DEA. Summaries of statutory and regulatory provisions that are summarized in this presentation do not purport to state the full extent of the statutory and regulatory requirements of the cited statutes and regulations. **I have no financial relationships to disclose.**

Fair Use Act Disclaimer

This presentation is for educational purposes only. This presentation may not be further copied or used, with the embedded images and videos, without an independent analysis of the application of the Fair Use doctrine.

Fair Use

Under section 107 of the Copyright Act of 1976, allowance is made for “Fair Use” for purposes such as criticism, comment, news reporting, teaching, scholarship, education and research.

Fair Use is a use permitted by the copyright statute that might otherwise be infringing. Any potentially copyrighted material used in this presentation has been reviewed and found to be used in a manner consistent with Fair Use. A completed Fair Use checklist is attached.



Objectives

To Introduce the DEA registered Practitioner with:

- **Real Mission of the Diversion Control Division of the DEA**
- **Extent of the Opioid Epidemic in the U.S.**
- **History and Complexity of Drug Abuse in the U.S.**
- **Trends in Prescribing and Dispensing Patterns**
- **Nationwide Efforts to Combat the Problem**

Questions To Discuss

At the completion of this block of instruction you will be able to answer the following questions:

- 1. What limits has Florida recently placed on Schedule 2 controlled substance prescriptions?**
- 2. What are the top three most commonly prescribed controlled substances in the U.S.?**

Questions To Discuss

- 3. According to the CDC approximately how many people died from drug overdoses in the year 2016?**
- 4. Under Federal Law what is the primary responsibility of practitioners when it comes to issuing prescriptions for controlled substances?**
- 5. According to IMS Data the total number of prescriptions being filled for oxycodone for the last three years has declined?**



There Is Pain



**There
Is
Legitimate
Pain**



There Is Dependence



There Is Addiction



Mission

The mission of the Diversion Control Division is to **prevent**, **detect**, and **investigate** the **diversion** of pharmaceutical controlled substances and listed chemicals from legitimate channels of distribution...



Mission

... *while* ensuring an adequate and uninterrupted supply of controlled substances to meet legitimate medical, commercial, and scientific needs.



21 C.F.R. § 1306.04 (a)

A prescription for a controlled substance to be effective must be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his professional practice.



Public Health Epidemic

In 2014, there were **47,055** drug overdose deaths,

...one death every **11.16** minutes,

...approximately **128** per day,

...**19,000** were due to prescription opioid pain relievers

1. Rudd R, et al. MMWR Morb Mortal Wkly Rep. 2016 Jan 1;64:1378-82.

2. CDC. <https://www.cdc.gov/drugoverdose/data/analysis.html>. Feb 2017. Accessed May 2017.



Public Health Epidemic

In 2015, there were **52,404** drug overdose deaths,

...one death every **10.06** minutes,

...approximately **143** per day,

...**22,598** were due to prescription opioid pain relievers



Public Health Epidemic

In 2016, there were **63,632** drug overdose deaths,

...one death every **8.28** minutes,

...approximately **174** per day,

...**42,249** were due to opioids

Soldier Field

Capacity: 61,500



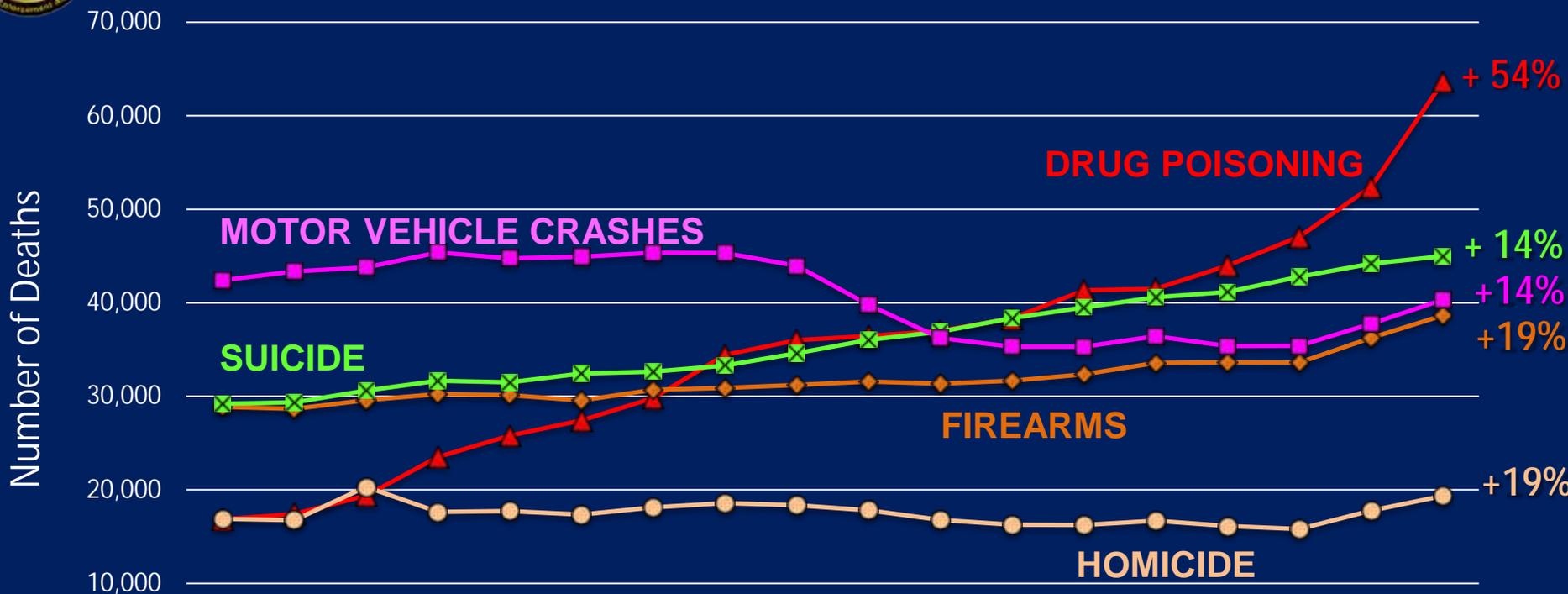


Drug Poisoning Deaths, 1999-2016



Source: Centers for Disease Control and Prevention, National Center for Health Statistics. *Underlying Cause of Death 1999-2016* on CDC WONDER Online Database, released 2017. Data on drug poisoning deaths were extracted by ONDCP from <http://wonder.cdc.gov/mcd-icd10.html> on December 21, 2017.

Causes of Injury Death 1999-2016



	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Drug Poisoning	16,849	17,415	19,394	23,518	25,785	27,424	29,813	34,425	36,010	36,450	37,004	38,329	41,340	41,502	43,982	47,055	52,404	63,632
Firearms	28,874	28,663	29,573	30,242	30,136	29,569	30,694	30,896	31,224	31,593	31,347	31,672	32,351	33,563	33,636	33,599	36,252	38,658
Suicide	29,199	29,350	30,622	31,655	31,484	32,439	32,637	33,300	34,598	36,035	36,909	38,364	39,518	40,600	41,149	42,773	44,193	44,965
Homicide	16,889	16,765	20,308	17,638	17,732	17,357	18,124	18,573	18,361	17,826	16,799	16,259	16,238	16,688	16,121	15,809	17,793	19,362
MV Crashes	42,401	43,354	43,788	45,380	44,757	44,933	45,343	45,316	43,945	39,790	36,216	35,332	35,303	36,415	35,369	35,398	37,757	40,327

NOTE: Suicide and homicide include deaths by drug poisoning or firearms

Source: Centers for Disease Control and Prevention, National Center for Health Statistics. *Multiple Cause of Death 1999-2016* on CDC WONDER Online Database, released 2017. Data on drug poisoning deaths were extracted by ONDCP from <http://wonder.cdc.gov/mcd-icd10.html> on December 21, 2017.



Public Health Epidemic

**Sharpest Increase in Drug Overdose
Deaths**

2016

**Fentanyl and Fentanyl Analogues
(Synthetic Opioids)**

with over 20,000 Deaths

Ten Most Commonly Prescribed Controlled Substances in the U.S.

- Hydrocodone
- Oxycodone
- Alprazolam
- Tramadol
- Zolpidem
- Clonazepam
- Lorazepam
- Dextroamphetamine
- Codeine
- Methylphenidate



The Most Common Drugs Involved in Prescription Opioid Overdose Deaths

Hydrocodone

Oxycodone

Methadone



**Unfortunately,
The United States
has a Long History
of
Drug Use
and
Abuse**



1804

Morphine is Distilled from Opium for the First Time

Sam Quinones, 2015, *Dream Land: The Tale of America's Opiate Epidemic*



1839

**The First Opium War Breaks
Out as Britain Forces China to
Sell Its India Grown Opium**

Sam Quinones, 2015, Dream Land: The Tale of America's Opiate Epidemic



1853

**The Hypodermic Syringe is
Invented**

**The Inventor's Wife is the First to
Die of an Injected Drug Overdose**

1861-1865
Morphine Addiction

The Civil War

The “Soldier's Disease”



1898

**Bayer Chemist Invents
diacetylmorphine,**

Names It **Heroin**



Advent of the 20th Century

**Abuse Of Opium And Morphine A
Significant Problem In The US**

But

**There Was Widespread
Distribution Of Medicinal Products**

Containing The New

**"Non-addictive" Alternative To
Morphine -Heroin.**









**A COLD BOTTLE ON A
HOT DAY**



Is a natural desire; but, *remember*, there is just one thing that the bottle can hold will enable you to forget worry and fatigue—*Coca-Cola* quenches the thirst, refreshes, invigorates, as nothing else can.

Its Purity Proved by Analysis

CHEMICAL DEPARTMENT
South Carolina College
COLUMBIA, S. C.

This is to certify that, pursuant to your request, I have bought in the open market (from the Murray Drug Co.) an original package of five gallons, of Coca-Cola syrup bearing the label of "The Coca-Cola Co., Atlanta, Ga.," and have subjected the same to careful analysis.

The object of this investigation being to establish the presence or absence of cocaine, and possibly of other injurious alkaloids, I operated on quantities of three to five times the amount contained in a bottle of the carbonated beverage. The extractions of the syrup were repeated until the alkaloids were entirely removed, and different immiscible solvents were used on different portions. The crystalline substance thus obtained was further separated by fractional extractions, after which it was concentrated and tested. Since this concentrated product, which would contain all of the cocaine, failed to respond to the tests for cocaine, it is clear that the alkaloid is absent, or, if present at all, then in quantities too minute to allow of detection. The active constituent of Coca-Cola Syrup proved to be caffeine, and in quantities seemingly less than in a cup of good coffee or tea.

There was no evidence of the presence of other alkaloids.
(Signed)

W. B. BURNEY, Chemist.



Guaranteed under the Pure Food
and Drugs Act, June 30, 1906.
Serial Number 3324.

5c Everywhere 5c

Coca-Cola

MARIAN

**POPULAR
FRENCH TONIC WINE**

*Fortifies and Refreshes Body & Brain
Restores Health and Vitality*

© 1911 J. H. P. Co. N.Y.

This advertisement features a central illustration of a woman in a vibrant yellow dress, adorned with a floral crown and a sash. She is depicted in a dynamic, dancing pose, holding a wine glass aloft in her right hand and a bottle of wine in her left. The background is a mix of blue and white washes. At the top, the word 'MARIAN' is written in large, bold, red, stylized letters. Below the illustration, the text 'POPULAR FRENCH TONIC WINE' is printed in a bold, blue, sans-serif font. Underneath that, a smaller line of text in italics reads 'Fortifies and Refreshes Body & Brain Restores Health and Vitality'. A small signature 'J. H. P.' is visible on the left side of the illustration.

HALL'S COGA WINE

**THE
ELIXIR**

This advertisement features a central illustration of a woman in a yellow dress with a black and gold patterned capelet. She is wearing a large, ornate floral crown and holding a small object in her right hand. The background is a solid red color. At the top, the words 'HALL'S COGA WINE' are written in large, bold, black, stylized letters. Below the illustration, the text 'THE ELIXIR' is printed in a bold, black, sans-serif font. The overall style is reminiscent of early 20th-century commercial art.



For HAY FEVER,
CATARRH,
AND THROAT TROUBLES.
CURE NERVOUSNESS, HEADACHE,
and SLEEPLESSNESS.

Price 50c. a box at Druggists
or by mail. Send for Pamphlet.
ALLEN COCAINE MFG. CO.,
1254 Broadway, N. Y.



COCAINE TOOTHACHE DROPS

Instantaneous Cure!

PRICE 15 CENTS.

Prepared by the

LLOYD MANUFACTURING CO.

219 HUDSON AVE., ALBANY, N. Y.

For sale by all Druggists.

(Registered March 1885.)

See other side. ¹⁸

For Body and Brain

Since 30 Years all Eminent Physicians recommend

VIN MARIANI

Over 7,000
written in-
dorsements
from prominent
Physicians in
Europe and
America

Nourishes
Fortifies
Refreshes
Strengthens the
Entire System

Most popularly
used Tonic-
Stimulant in
Hospitals, Pub-
lic & Religious
Institutions
Everywhere

The most Agreeable, Effective and Lasting Tonic

Ask for Vin Mariani
at Druggists and
Fancy Grocers

EVERY Test, strictly
on its Own Merits,
proves its Excep-
tional Reputation

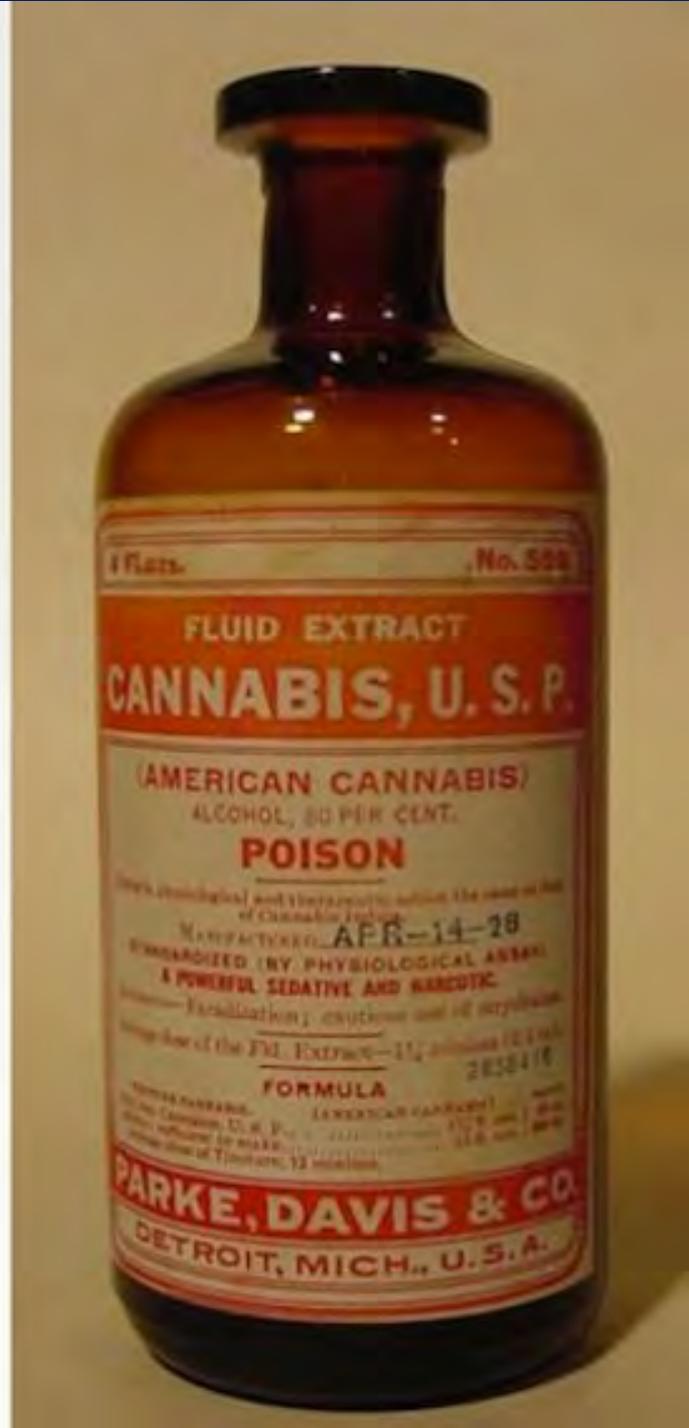
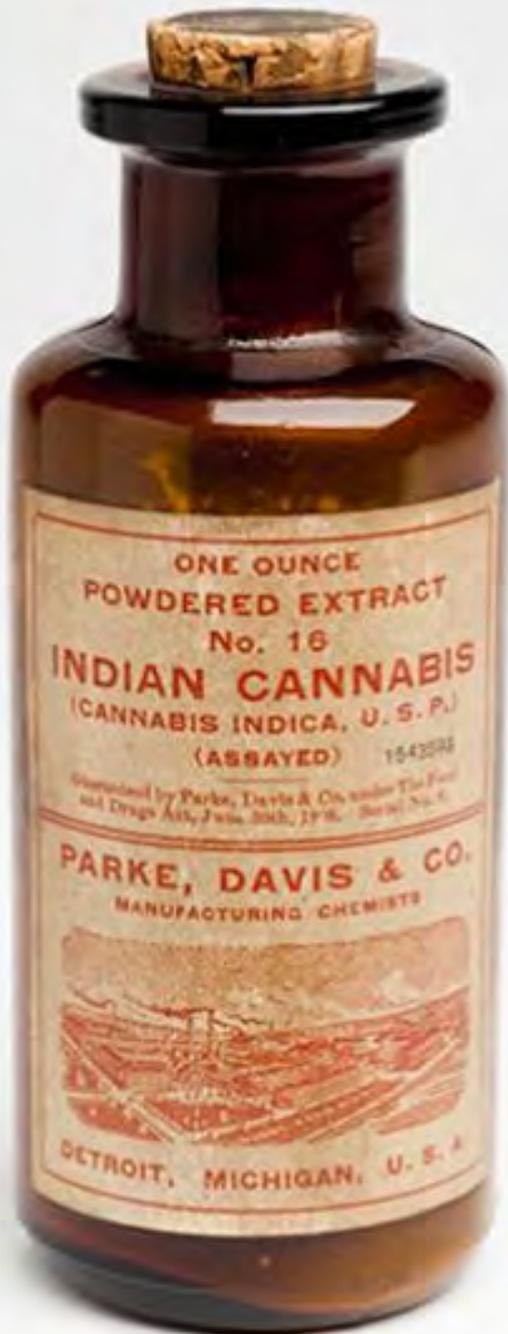
To avoid disappoint-
ments accept no sub-
stitutions

Free Offer! We will mail, gratis,
75 Portraits, Sketches,
Biographical Notes and
Autographs of Celebrities, testifying to excellence
of "Vin Mariani"

Paris: 41 Boulevard Haussmann
London: 239 Oxford Street

Mariani & Co.
52 W. 15th St., New York





MRS WINSLOW'S



THE

MOTHER'S

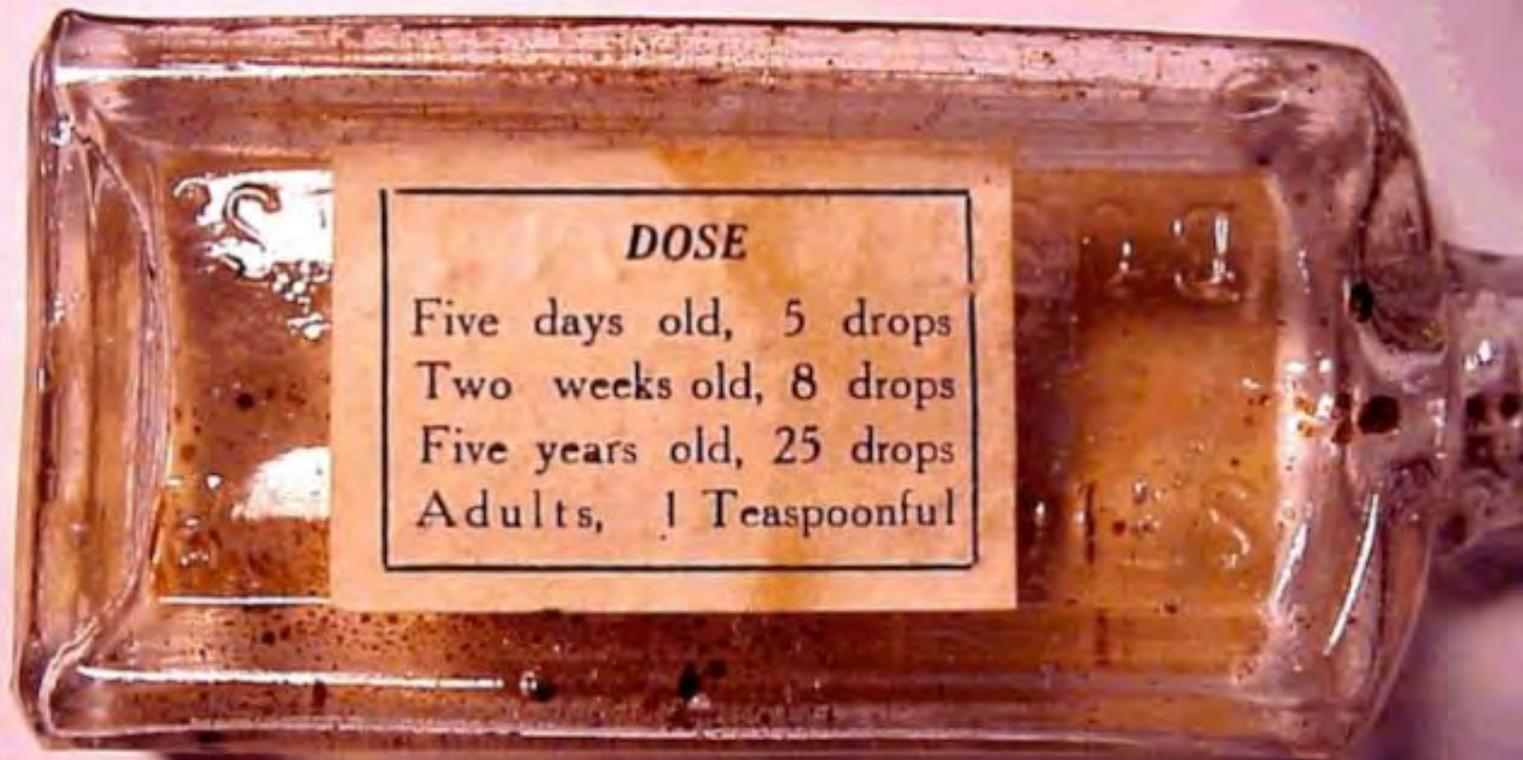
FRIEND

FOR

CHILDREN

TEETHING

SOOTHING SYRUP



The "Allenburys" Throat Pastilles

No. 56.

Menthol, Eucalyptus and Cocaine

$\frac{7}{10}$ Menthol, 1 min. Eucalyptus Oil, $\frac{1}{20}$ gr. Cocaine.

*A Pastille may be taken every four or six hours,
if required.*

Manufactured by

Allen & Hanburys Ltd.

LONDON

TRADE MARK



February 9, 1909

Congress

Public Law 221

**“An Act to Prohibit the
Importation and Use of Opium
for Other Than Medicinal
Purposes”**



1914

**U.S. Congress Passes Harrison
Tax Act**

Sam Quinones, 2015, Dream Land: The Tale of America's Opiate Epidemic



1928

**Committee on the Problems of
Drug Dependence is Formed**

**To Organize Research in Pursuit
of the Holy Grail:
A Non-addictive Painkiller**

Sam Quinones, 2015, Dream Land: The Tale of America's Opiate Epidemic



1951

**Arthur Sackler Revolutionizes
Drug Advertising
With Campaign for the
Antibiotic Terramycin**

Sam Quinones, 2015, Dream Land: The Tale of America's Opiate Epidemic



1960

**Arthur Sackler's campaign for
Valium makes it the industry's
first \$100 million drug**



1980

***The New England Journal of Medicine* publishes a letter to the editor that becomes known as “Porter and Jick”**



ADDICTION RARE IN PATIENTS TREATED WITH NARCOTICS

Jane Porter

Hershel Jick, M.D.

Boston Drug Surveillance Program

Boston University Medical Center

New England Journal of Medicine.

January 1980

[http://www.nejm.org/doi/pdf/10.1056/NEJM](http://www.nejm.org/doi/pdf/10.1056/NEJM1980011030020221)

M1980011030020221



ADDICTION RARE IN PATIENTS TREATED WITH NARCOTICS

“We conclude that despite widespread use of narcotic drugs in hospitals, the development of addiction is rare in medical patients with no history of addiction.”



1986

**Drs. Kathleen Foley and
Russell Portenoy publish
paper in the journal *Pain*,
opening a debate about use of
opiate painkillers for wider
variety of pain**



1996

**Purdue releases OxyContin,
timed-released oxycodone,
marketed largely for
chronic-pain patients**



1996

**Dr. David Procter's clinic in
South Shore, Kentucky, is
presumed
the nation's first pill mill**



1996

**President of American Pain
Society urges doctors to treat
pain as a vital sign**



2002

**Dr. David Procter pleads
guilty to drug trafficking and
conspiracy and serves eleven
years in federal prison**



2007

**Purdue and three executives
plead guilty to misdemeanor
charges of false branding of
OxyContin; fined \$634 million**



2008

Drug overdoses, mostly from opiates, surpass auto fatalities as leading cause of accidental death in the United States



2011

**Ohio passes House Bill 93,
regulating pain clinics**



2013

**The College on the Problems
of Drug Dependence turns
seventy-five without finding
the Holy Grail of a
nonaddictive painkiller**

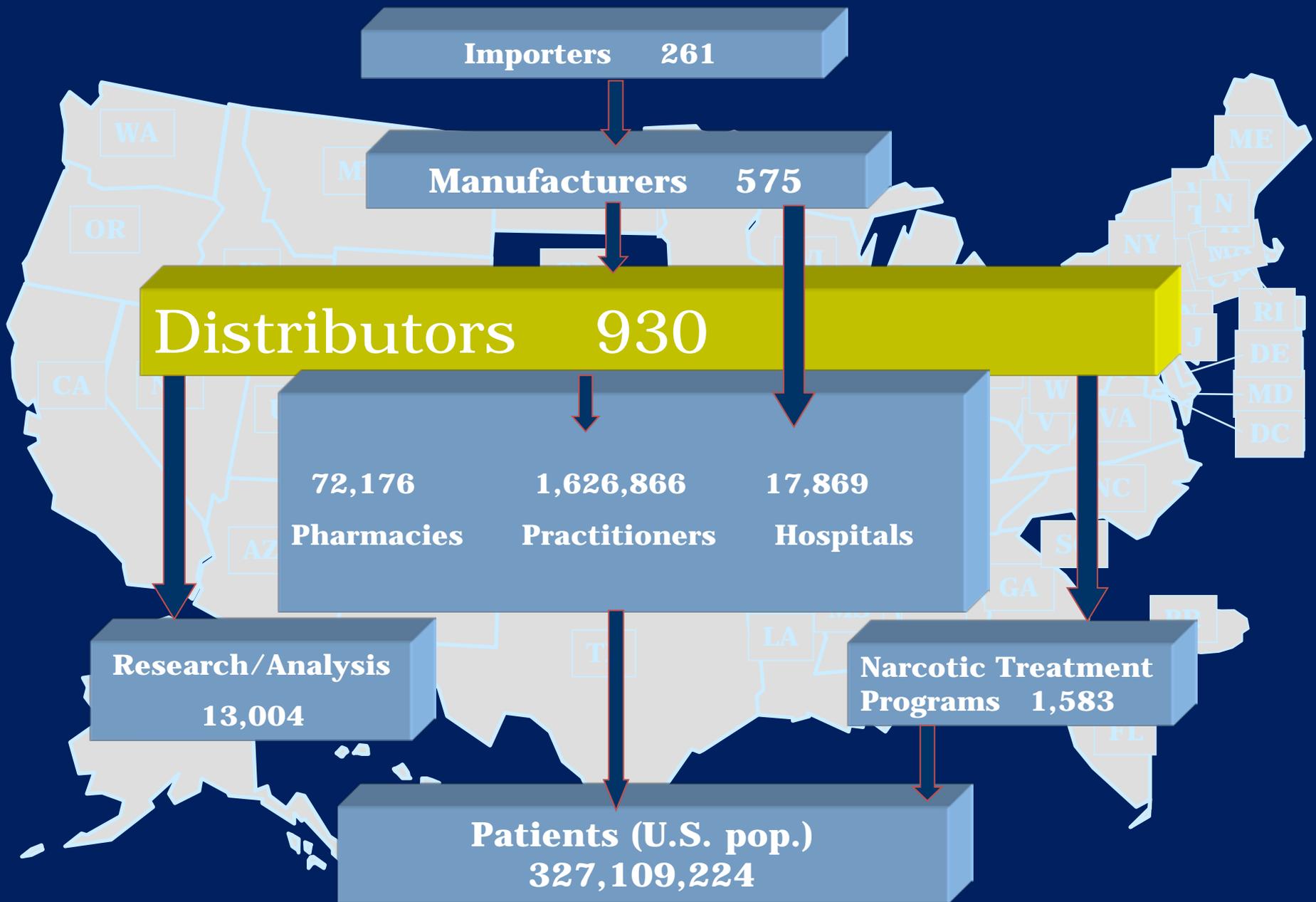
Sam Quinones, 2015, *Dream Land: The Tale of America's Opiate Epidemic*



The Problem Affects Everyone



**No one
Is
Un-Affected**





Livonia doctor, 7 others charged in \$18M prescription drug scheme

January 9, 2018

<http://www.fox2detroit.com/news/local-news/livonia-doctor-7-others-charged-in-18m-prescription-drug-scheme>



N.J. Doctor Allegedly Had Radio Host Wife Murdered — to Protect Drug Ring He Ran With Biker Gang

January 10, 2018

CHRIS HARRIS , People Magazine,, <http://people.com/crime/nj-doctor-radio-host-wife-alleged-murder-hire-biker-group/>

“Unlicensed pharmacist arrested for allegedly giving out meds in Cobb”

January 10, 2018

Ben Brasch, The Atlanta Journal-Constitution,
<http://www.ajc.com/news/local/unlicensed-pharmacist-arrested-for-allegedly-giving-out-meds-cobb/jsx4rFHyaafzJKroZere7O/>

“Great Falls pharmacy manager charged with stealing drugs”

January 12, 2018

Seaborn Larson, Great Falls Tribune,
<https://www.greatfallstribune.com/story/news/crime/2018/01/12/great-falls-pharmacy-manager-charged-stealing-drugs/1029290001/>

“Police: Maryland officer arrested after he stole opioids from a bedridden citizen”

February 2, 2018

Brad Bell, WJLA News, <http://wjla.com/news/local/md-police-officer-arrested-sources-say-he-was-allegedly-stealing-opioids-from-citizens>

“Ex-dentist pleads guilty to illegally prescribing drugs”

February 5, 2018

Fox 61, <http://fox61.com/2018/02/05/ex-dentist-pleads-guilty-to-illegally-prescribing-drugs/>

“More than a dozen people arrested in Bloomington drug investigation”

February 6, 2018

Fox59 News, <http://fox59.com/2018/02/06/more-than-a-dozen-people-arrested-in-bloomington-drug-investigation/>

**“Doctor prescribed needless pills
and bilked Medicare, feds say”**

February 12, 2018

Paula McMahon, Sun Sentinel, <http://www.sun-sentinel.com/local/broward/fl-reg-doctor-arrested-fraud-pain-pills-20180212-story.html>

“Las Vegas doctor charged with unlawful distribution of opioid, health care fraud”

February 14, 2018

Brenda Yahm, Fox 5 Vegas, <http://www.fox5vegas.com/story/37505788/las-vegas-doctor-charged-with-unlawful-distribution-of-opioid-health-care-fraud>

“Nurse arrested for forging opioid prescriptions”

February 18, 2018

Jesse Leavenworth, EMS1, <https://www.ems1.com/opioids/articles/375512048-Nurse-arrested-for-forging-opioid-prescriptions/>

“Federal agents raid doctor's office and suspected 'pill mill'”

February 27, 2018

Lee Zurik, Megan Luther, and Andy Miller, WTXL News,
http://www.wtxl.com/news/federal-agents-raid-doctor-s-office-and-suspected-pill-mill/article_0e8a0064-1bf3-11e8-b409-cb776b750102.html

**“Doctor accused of trading
prescription drugs for sex; 44
arrested in massive bust”**

March 1, 2018

Mark Winne, WSBTV, <http://www.wsbtv.com/news/local/doctor-accused-of-trading-prescription-drugs-for-sex-44-arrested-in-massive-bust/709268909>

“2 UPMC doctors from Allegheny County arrested, charged with conspiracy”

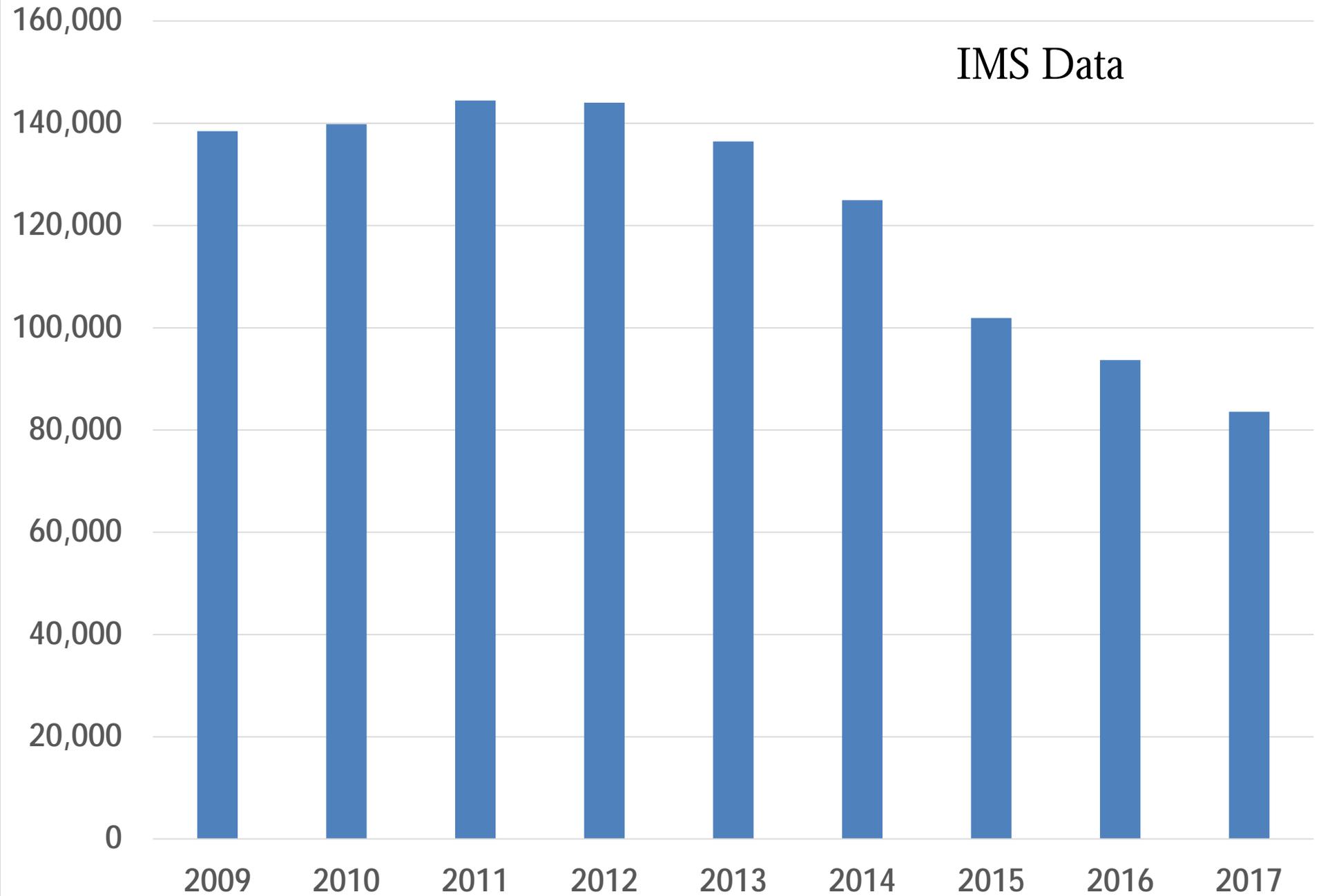
March 2, 2018

Natasha Lindstrom, The Tribune-Review,
<http://triblive.com/local/allegheny/13373830-74/2-allegheny-county-doctors-arrested-charged-with-conspiracy>

What's Trending

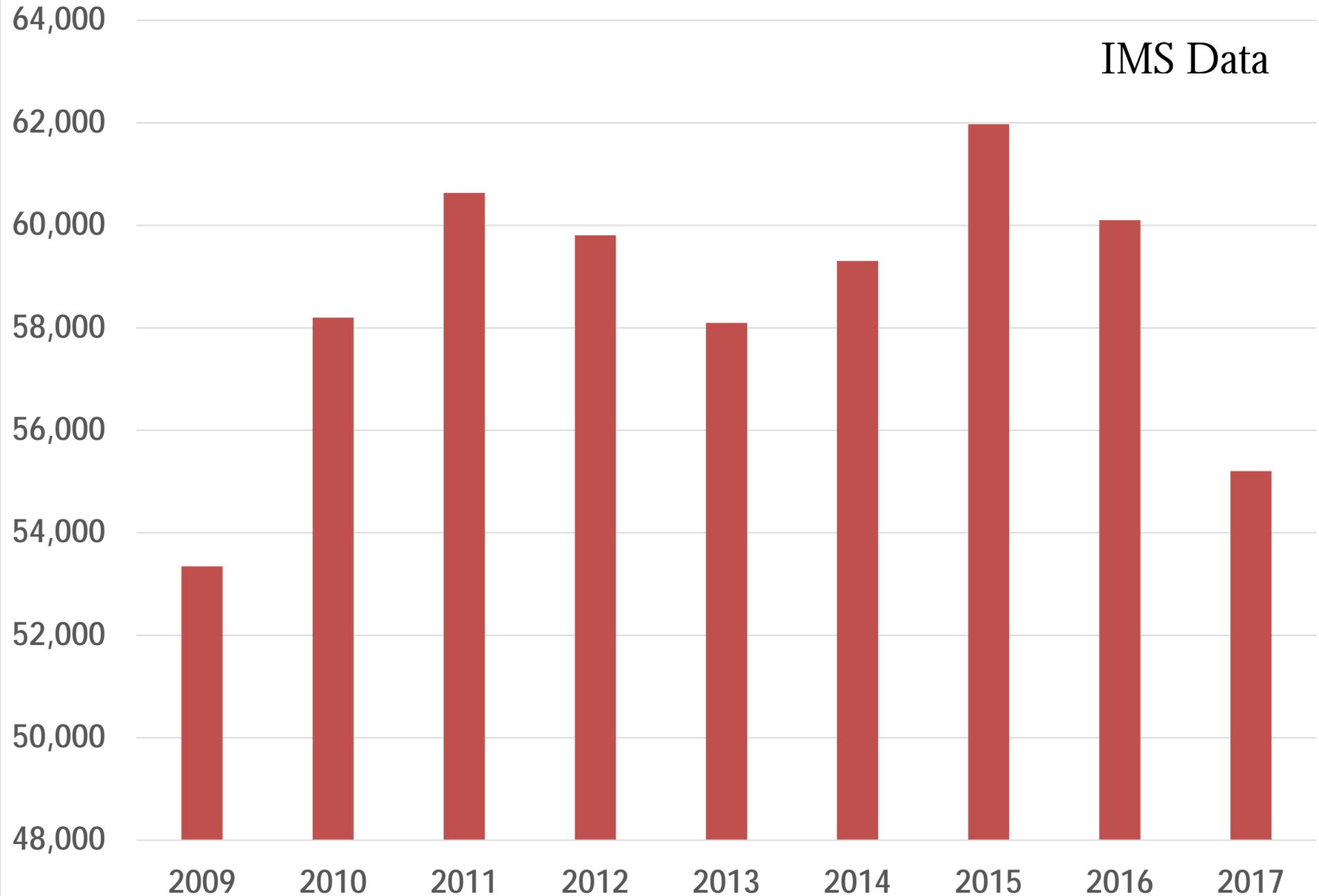
Total Prescriptions Filled : Hydrocodone 2009-2017

IMS Data



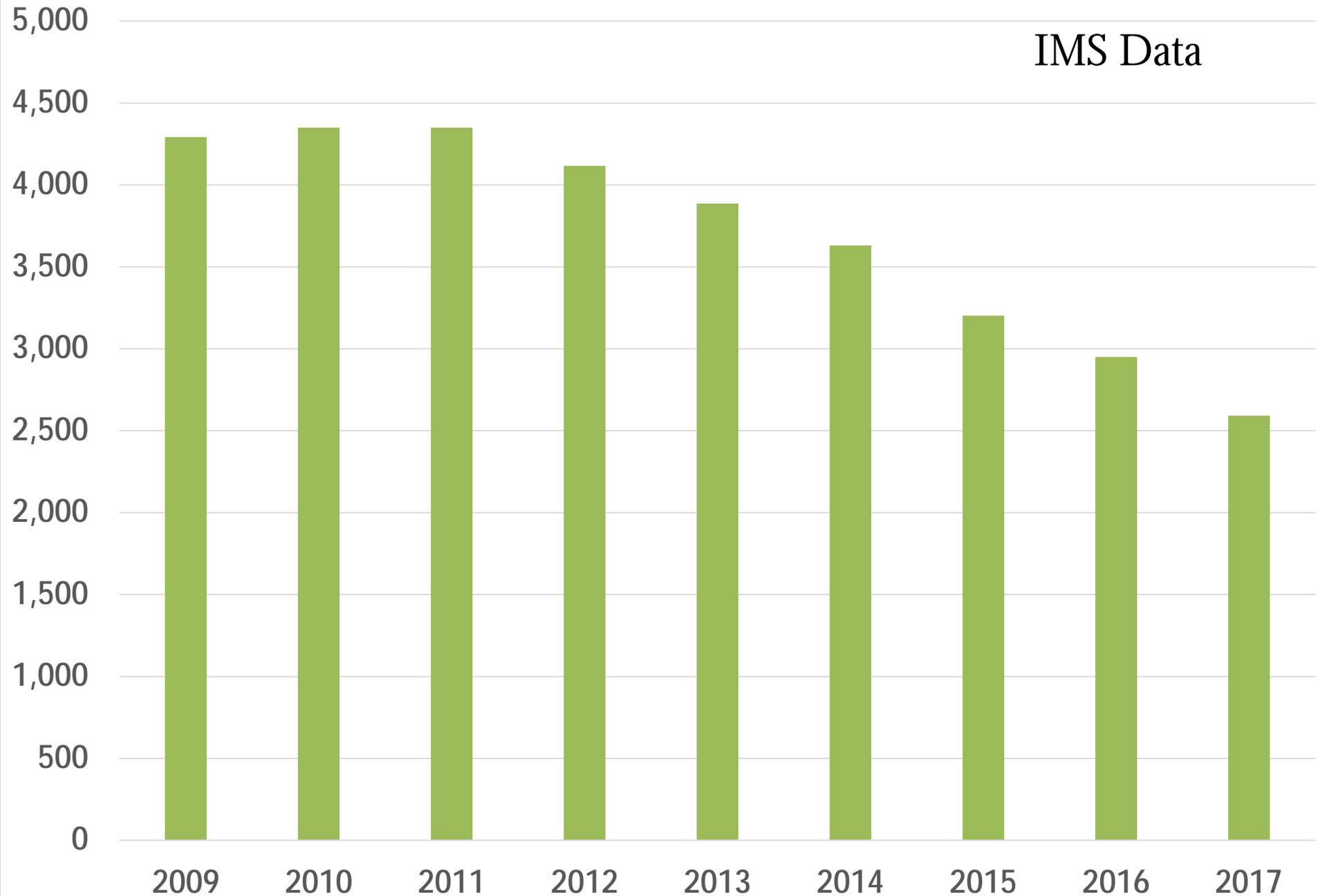
Total Prescriptions Filled: Oxycodone 2009-2017

IMS Data



Total Prescriptions Filled: Methadone 2009-2017

IMS Data



Total Prescriptions Filled: Buprenorphine 2009-2017

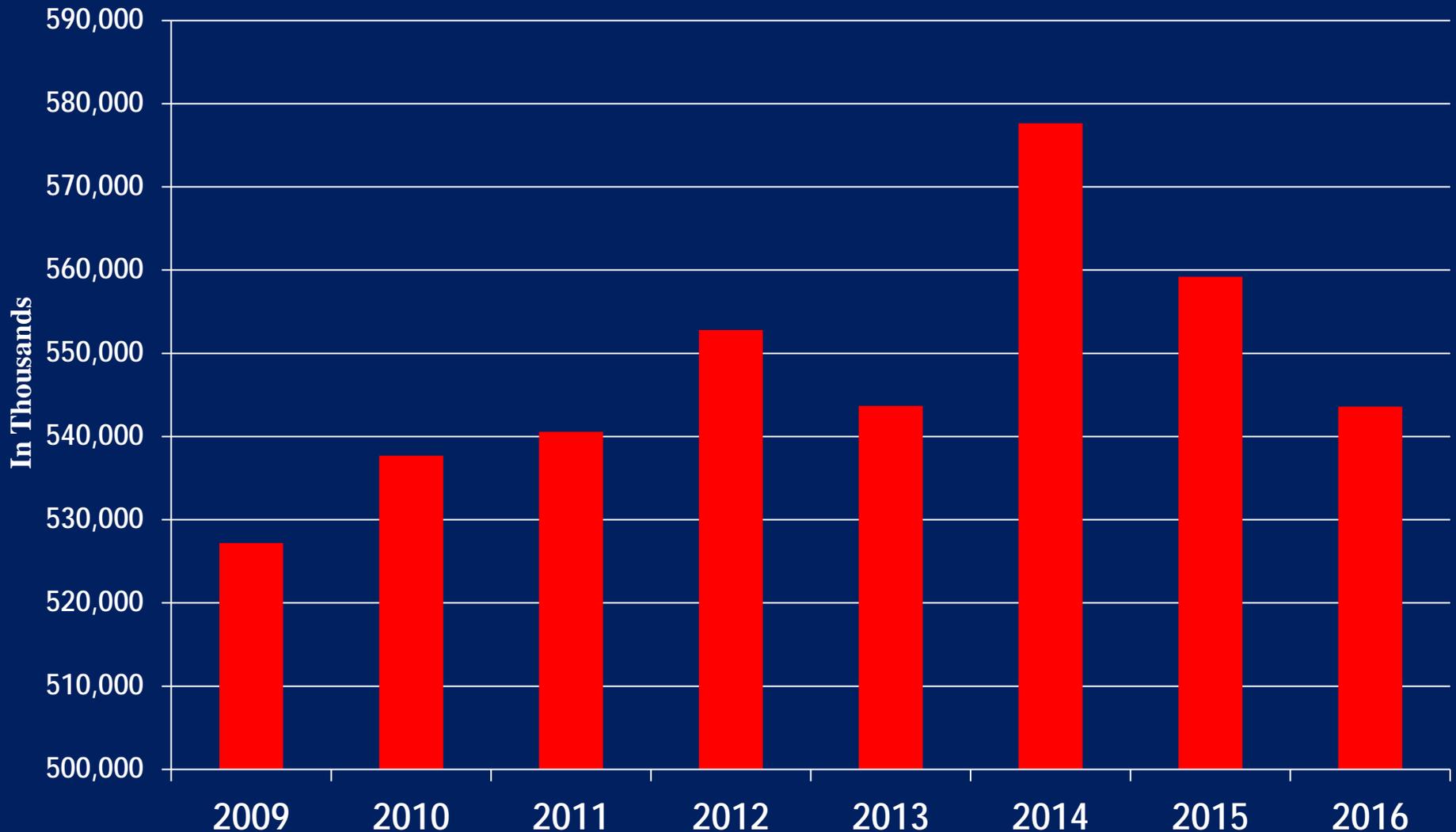




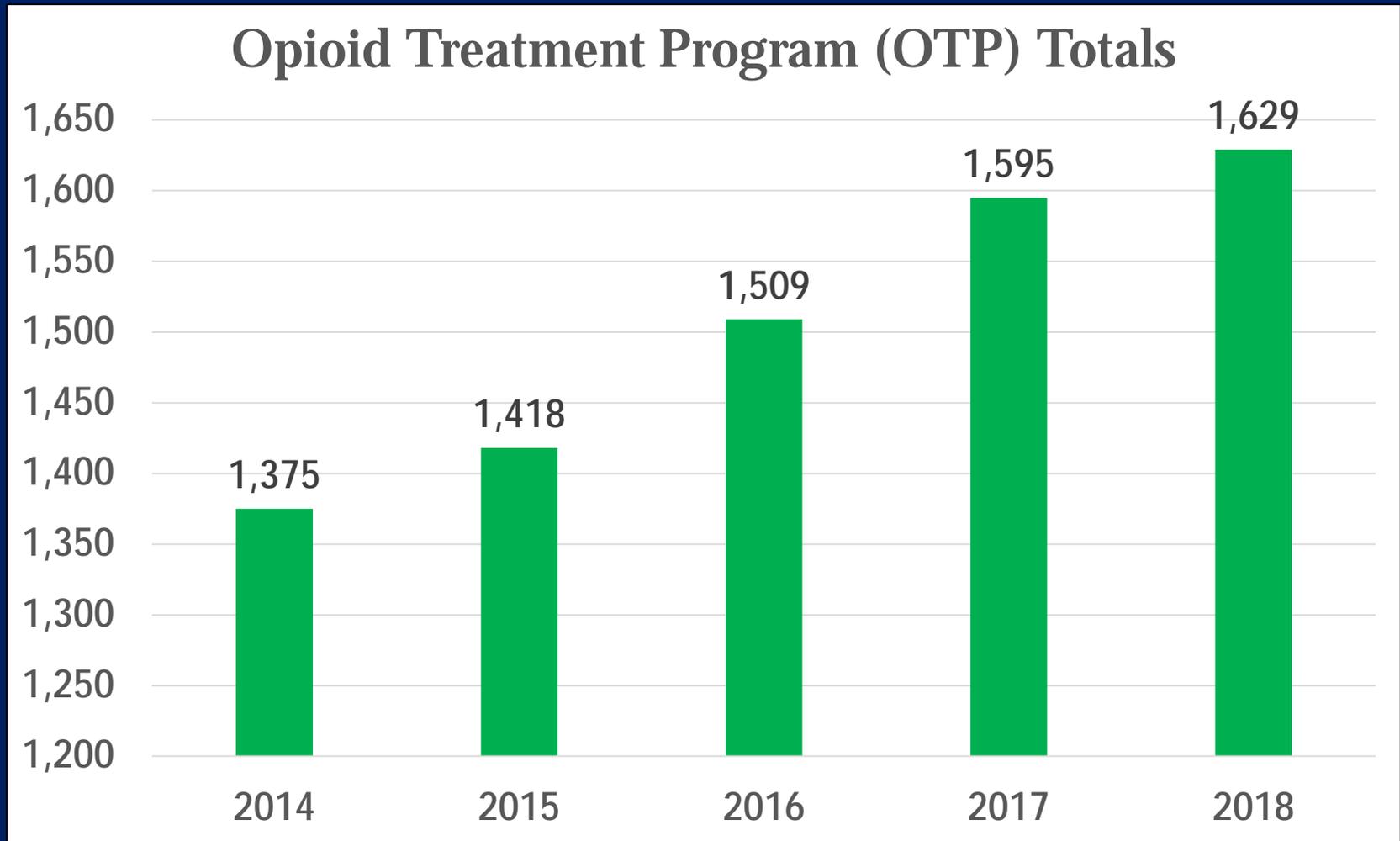
Total Controlled Substance Rx's Filled

Total Controlled Substance Rx's 2009-2016

Data from IMS

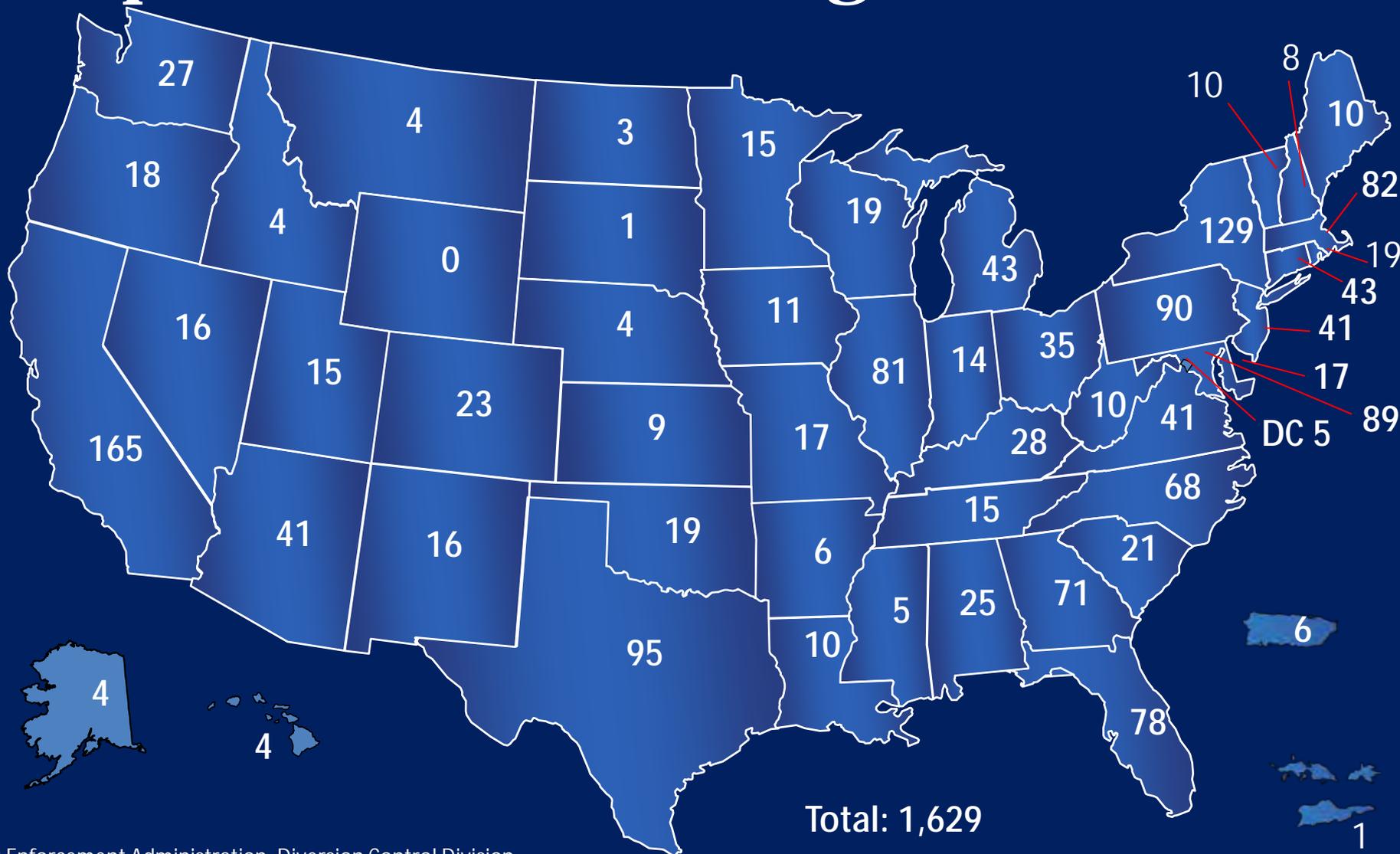


Opioid Treatment Programs (OTPs)



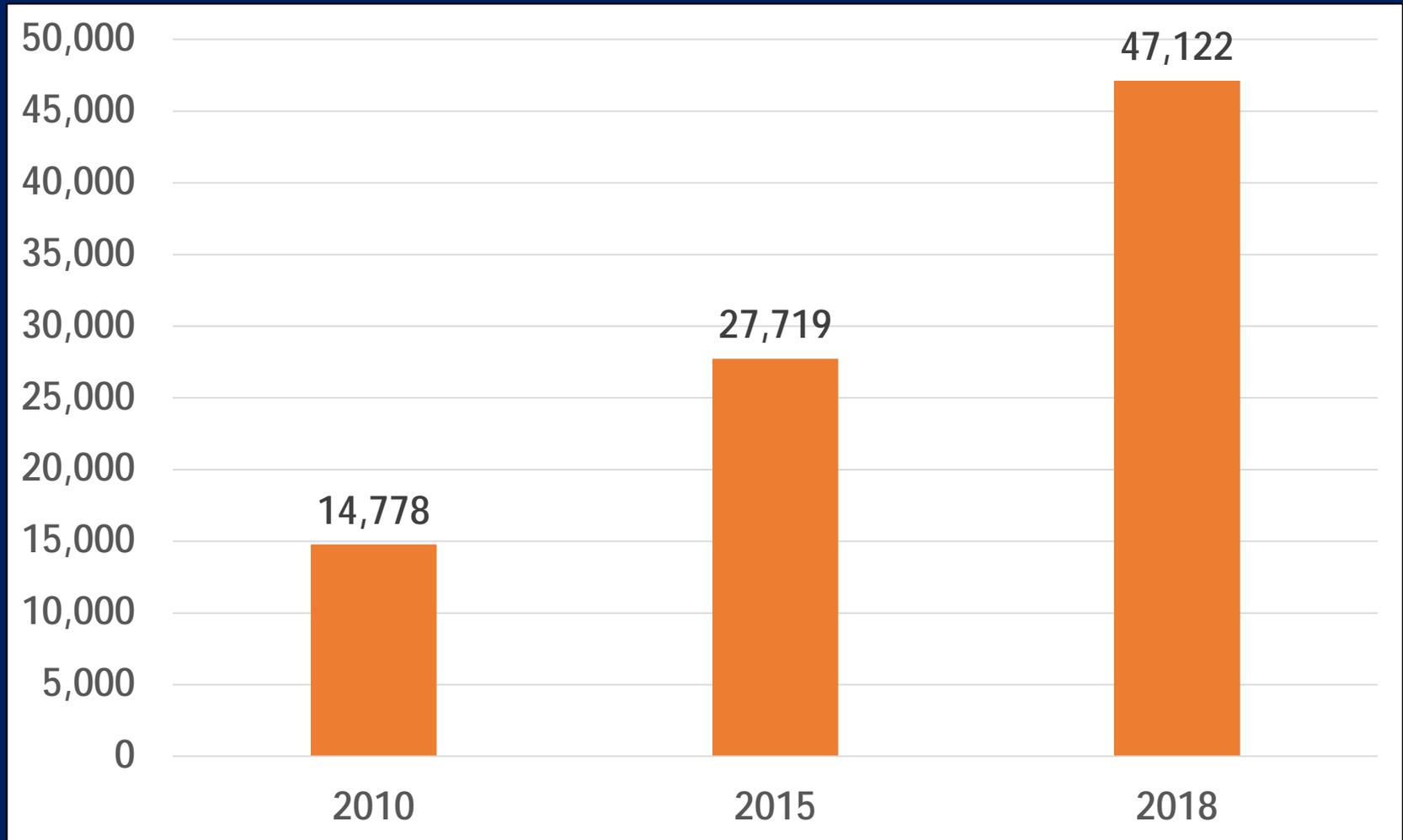
***As of April 12, 2018: DEA Data**

DEA Registered Opioid Treatment Programs (OTP)



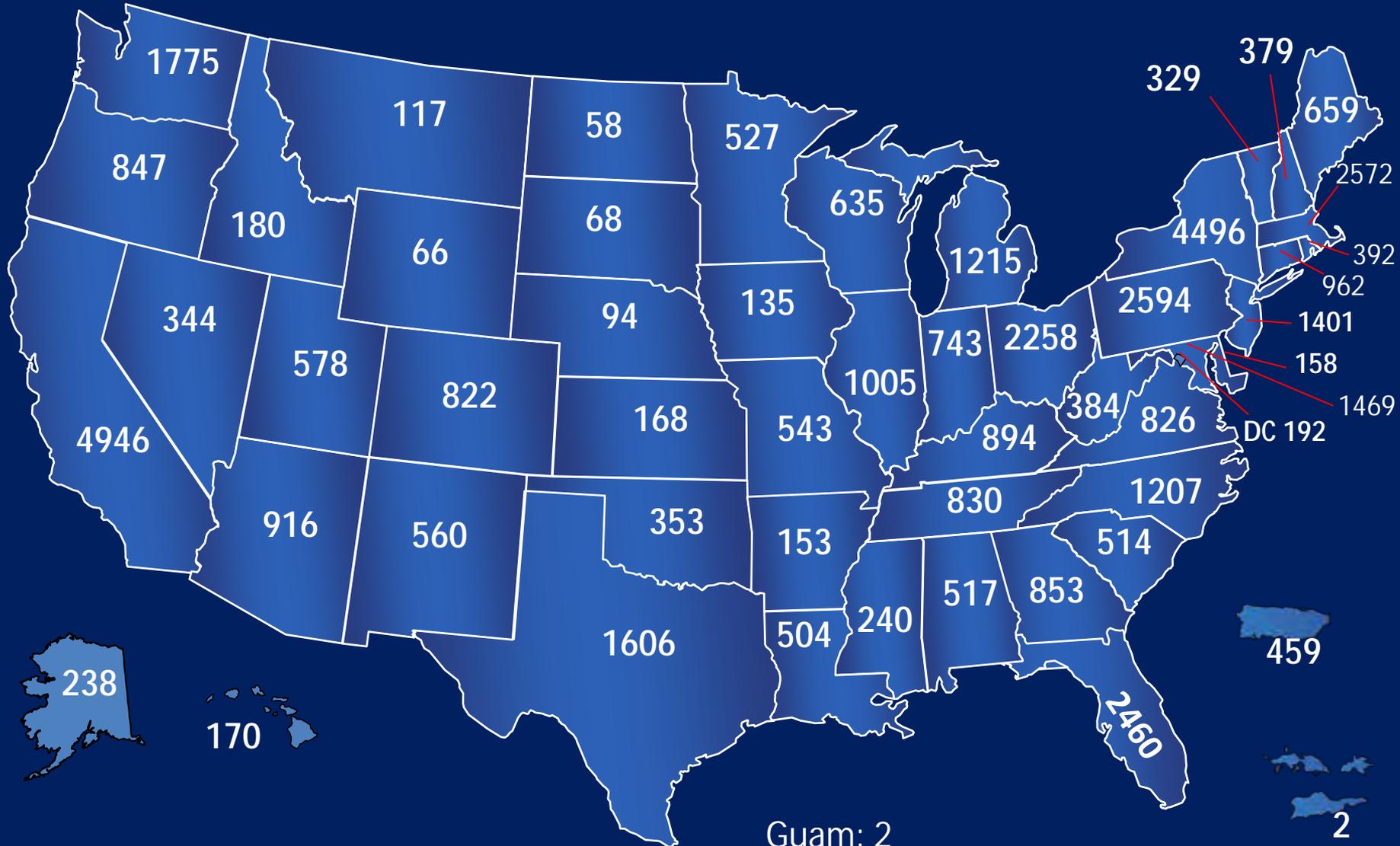
Total: 1,629

DEA Registered Qualifying Practitioners



*As of April 12, 2018 (Addition of NPs and PAs 01/01/2017)

DEA Registered Qualifying Practitioners



**Nationwide Efforts
to
Combat
the Problem**



States

Practitioners

Hospitals

Treatment Providers

Medical Schools

Pharmacies



States with Limits CII

Alaska	7 Day Supply (initial prescription)
Arizona	7 Day Supply (initial prescription) 7 Day Supply (for minors)
Connecticut	7 Day Supply (initial prescription) 7 Day Supply (for minors)
Delaware	Up to 100 dosage units or a 31 day supply, whatever is greater



States with Limits CII

- District of Columbia 7 Day Supply
(emergency situation)
- Florida 3 Day Limit/Acute Pain
7 Day Supply/Medically Necessary
- Hawaii 30 Day Supply
- Illinois 30 Day Supply: CII
(Some exceptions under certain conditions)
- Indiana 7 Day Supply (initial prescription)
7 Day Supply (for minors)



States with Limits CII

Kansas	30 Day Supply (Substances to treat obesity)
Kentucky	3 Day Supply (acute pain with exceptions)
Louisiana	10 Day Supply: CII-III (Prescribers not licensed in Louisiana)
Maine	30 Day Supply (chronic pain) 7 Day Supply (acute pain)



States with Limits CII

Massachusetts	7 Day Supply (unless more in indicated) 7 Day Supply (all opioids for minors)
Massachusetts	30 Day Supply: CII-III 60 Day Supply (Dextroamphetamine)
Missouri	30 Day Supply: CII 90 Day (If medical reason given)
New Hampshire	34 Day Supply: CII 60 Day Supply (ADD/ADHD)



States with Limits CII

New Jersey	First prescription: 5 Day Supply
New York	30 Day Supply 7 Day Supply (initial prescription)
North Carolina	5 Day Supply (acute pain)
Ohio	7 Day Supply 5 Day Supply (for minors)
Oregon	7 Day Supply (initial prescription) 7 Day Supply (for minors)



States with Limits CII

Pennsylvania 7 Day Supply (for minors)
7 Day Supply
(emergency department
and urgent care centers)

Rhode Island 20 Doses for opioids (initial
prescription)
No more than 30 morphine
MME/day

South Carolina 31 Day Supply
(Except Transdermal patches)
90 Day Supply: CIII-V



States with Limits CII

Tennessee	30 Day Supply of Opioids and Benzodiazepines
Texas	90 Day Supply (multiple prescriptions)
Utah	30 Day Supply: CII
Vermont	90 Day Supply 72 MME (first prescription for minors) 350 MME – 7 Day limit (acute pain, first prescription)



States with Limits CII

Virginia	Limitations on Number of Days 7 Day Supply (acute pain) 14 Day Supply (surgical procedures) (Some exceptions)
Washington	7 Day Supply (initial prescription) 3 Day Supply (dentist)
West Virginia	72 Hour Supply 30 Day Supply: Hydrocodone



CVS Pharmacy Policy: 2/01/18

- Acute Pain (Opioid Naïve Patients: No Opioid Script within the Past Year)
- 7-Day Supply
- Opioid Prescriptions
- Requirement to Counsel Patients:
 - Risks Of Addiction
 - Secure Storage Of Medications In The Home
 - Proper Disposal of Medications

Walmart giving away solution to dispose of unused prescription pills

January 26, 2018



Gene Myers, Staff Writer, @myersgene

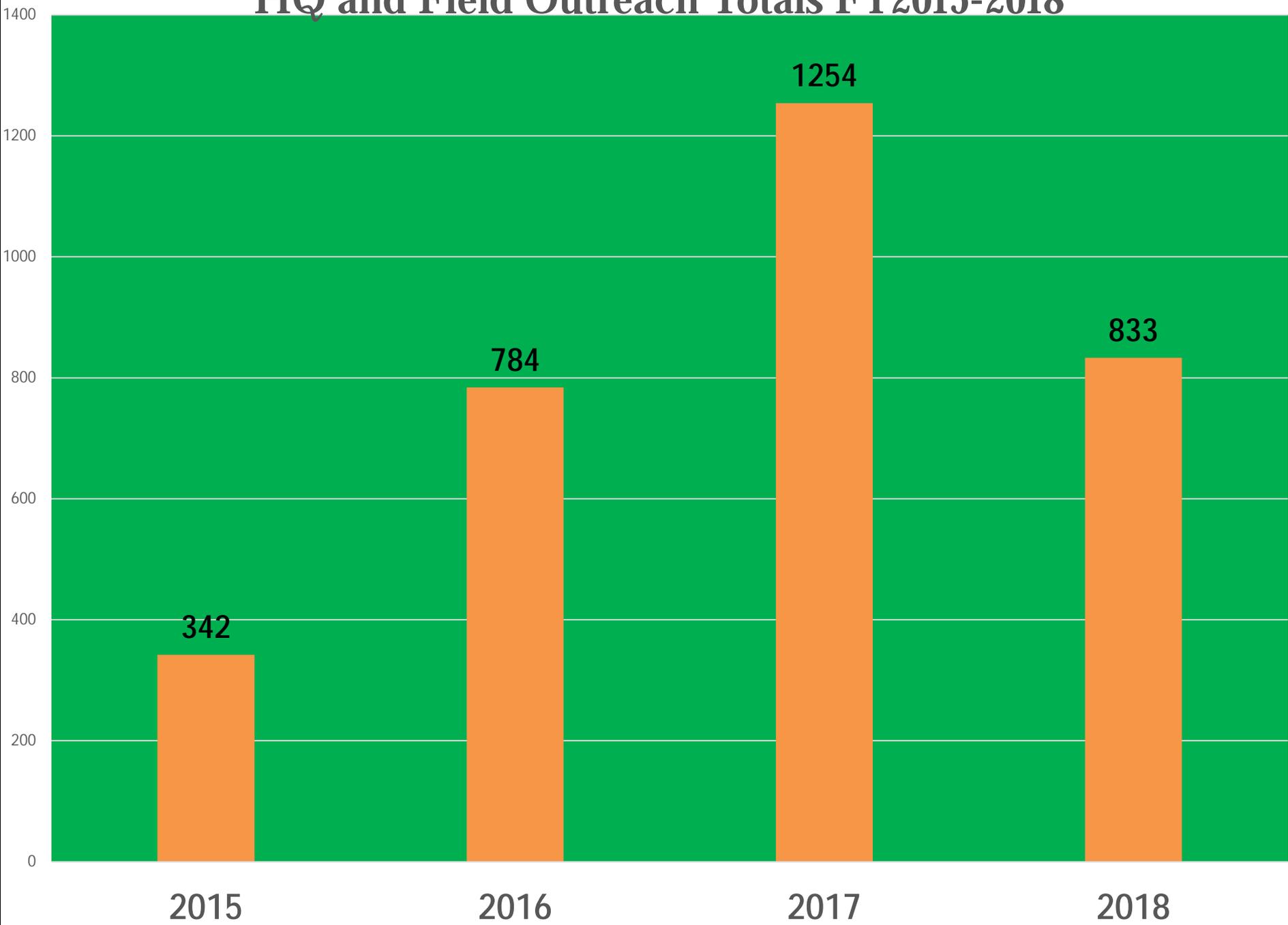
Narcan available at more than 8,000 Walgreens locations nationwide

- *CBS News*, By Peter Martinez: October 27, 2017
- Walgreens (WBA) is now stocking Narcan at all of its more than 8,000 locations nationwide, the company announced Thursday. The nasal spray, which is an FDA-approved form of naloxone, can reverse the effects of an opioid overdose.
- The drug store chain said the move was "part of its comprehensive national plan to combat drug abuse" and help the communities it serves.



DEA Initiatives

HQ and Field Outreach Totals FY2015-2018





Dear DEA-Registered Practitioner - February 2018

CDC's Recommendations for the Prescribing of Opioid Pain Medications

Dear DEA-Registered Practitioner:

In March, 2016, the Centers for Disease Control and Prevention (CDC) published its "CDC Guideline for Prescribing Opioids for Chronic Pain" to provide recommendations for the prescribing of opioid pain medication for patients 18 and older in primary care settings. Recommendations focus on the use of opioids in treating chronic pain (pain lasting longer than 3 months or past the time of normal tissue healing) outside of active cancer treatment, palliative care, and end-of-life care.

CDC's Guideline is part of a comprehensive approach to addressing the opioid overdose epidemic and is one step toward a more systematic approach to the prescribing of opioids, while ensuring that patients with chronic pain receive safer and effective pain management. According to the CDC, The Guideline's twelve recommendations, published in August 2017, are based on three key principles:

1. Non-opioid therapy is preferred for chronic pain outside of active cancer, palliative, and end-of-life care. Opioids should only be used when their benefits are expected to outweigh their substantial risks.
2. When opioids are used, the lowest possible effective dosage should be prescribed to reduce risks of opioid use disorder and overdose. Clinicians should start low and go slow.
3. Providers should always exercise caution when prescribing opioids and monitor all patients closely. Clinicians should minimize risk to patients—whether checking the state prescription drug monitoring program, or having an 'off-ramp' plan to taper.

You are receiving this email as part of DEA's effort to improve its communication with its more than 1.7 million registrants while simultaneously improving the dissemination of the CDC Guidelines to those authorized to prescribe opioids.

A copy of CDC's publication entitled, "Guideline for Prescribing Opioids for Chronic Pain: Recommendations" may be found at: https://www.cdc.gov/drugoverdose/pdf/Guidelines_Factsheet-a.pdf.

Additionally, an Interactive Training Webinar for providers who prescribe opioids may be found at: <https://www.cdc.gov/drugoverdose/training/index.html>.



More than
11 million people
abused prescription
opioids in 2016.



Opioid Addiction Resources



Resources for DEA Registered Practitioners for Patients Who May Be Dependent and/or Addicted To Opioids

According to the U.S. Centers for Disease Control and Prevention (CDC) there were 63,632 drug overdose deaths in the United States in 2016; 174 deaths per day; one death every 8.28 minutes; 42,249 (66.4%) of those

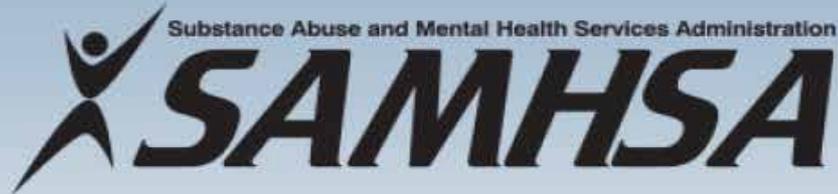
deaths were due to opioids. More deaths than those as a result of firearms, homicide, suicide, and motor vehicle crashes.

Practitioners are in a unique position to help combat the current opioid epidemic in this country. Please take time to understand and recognize the signs of this disease in your patients. If you or anyone in your office suspects that a patient may have a problem with opioid dependence, please provide your patients with the below listed information so they, or someone in their family, can get the help that they may need.

Practitioners may also wish to talk with their patients who are currently taking opioids for a legitimate medical issue about the benefits of naloxone (e.g. Narcan®, Evzio®) in the case of an overdose situation which may involve themselves or anyone in their family. These types of products can rapidly reverse the effects of an opioid overdose and are the standard treatment for these types of situations. Information on naloxone products can be found at www.fda.gov.

The Substance Abuse and Mental Health Services Administration (SAMHSA) has a National Helpline, **1-800-662-HELP (4357)**, for those with a possible opioid use disorder. The Helpline is a confidential, free, 24-hour-a-day, 365-day-a-year, information service, in English and Spanish, for individuals and family members facing mental and/or substance use disorders. This service provides referrals to local treatment facilities, support groups, and community-based organizations. Callers can also order free publications and other information here.

To find an authorized Opioid Treatment Program dispensing methadone or buprenorphine to treat opioid dependency in your state visit:



EMPOWERING PROVIDERS
GUIDELINE FOR PRESCRIBING
OPIOIDS FOR CHRONIC PAIN:

www.cdc.gov/drugoverdose/pdf/Guidelines_Factsheet-a.pdf



GET SMART
ABOUT DRUGS

A DEA RESOURCE FOR PARENTS, EDUCATORS & CAREGIVERS

www.getsmartaboutdrugs.gov/find-help

**Prescription opioids can be
addictive and dangerous.**

It only takes a little to lose a lot.



 cdc.gov/RxAwareness

www.cdc.gov/drugoverdose/training/index.html

1-800-662-HELP (4357)
www.samhsa.gov/find-help
NATIONAL HELPLINE 

Do You or a Family Member Need Help with Drugs?

1-800-662-HELP (4357)



SAMHSA
Substance Abuse and Mental Health
Services Administration





A Final Note



Solutions to the Problem

Prevention/Detection

Education

Treatment

Enforcement

Post Questions

1. What limits has Florida recently placed on Schedule 2 controlled substance prescriptions?

A. 3 Day Supply Acute Pain

B. 7 Day Supply/Medically Necessary

C. 14 Day Supply

D. A&B

Post Questions

2. What are the top three most commonly prescribed controlled substances in the U.S. ?

A. Hydrocodone

B. Methadone

C. Oxycodone

D. Alprazolam

E. Tramadol

F. A,C, & D.

Post Questions

3. According to the CDC approximately how many people died from drug overdoses in the year 2016?

A. 52,404

B. 47,055

C. 63,632

Post Questions

4. Under Federal Law what is the primary responsibility of practitioners when it comes to issuing prescriptions for controlled substances?
 - A. A prescription must be issued for a legitimate medical need.
 - B. A prescription must issued in the usual course of professional practice.
 - C. A&B

Post Questions

5. According to IMS Data the total number of prescriptions being filled for oxycodone for the last three years has declined?

A. Yes

B. No



Thank You





Contact Information

**James Arnold, Chief
Liaison & Policy Section/DRL
Drug Enforcement Administration
8701 Morrissette Drive
Springfield, Virginia 22152**

James.A.Arnold@usdoj.gov

202-353-1414 (Office)