Drug Overdose, Addiction and Binge Drinking: Medical Problems with Public Health Consequences

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The inexorable link between the practice of medicine and the fostering of public health is especially clear when dealing with severe drug and alcohol problems. Therefore, this focus section of the Rhode Island Medical Journal (RIMJ) addresses both clinical concerns like pain management and addiction treatment and also the ways in which the medical profession is joining with public health specialists and the community.

This is not the first issue of the RIMJ to deal with opioids. RI Health Director, Dr. Michael Fine, the leader in combating the current overdose epidemic, coordinated a special section of the RIMJ issue of November 2013 (Vol. 96, No. 11) which examined opioid prescribing. It is an excellent complement to this issue. (See http://rimed.org/rimedicaljournal/2013/11/2013-11-17-integrity+opioids.pdf)

The ways in which Rhode Island has approached the overdose epidemic exemplifies the benefits of the medicine-public health connection. Public health authorities, community groups and the medical profession have reached out proactively to those in need of treatment and support. Projects were launched to make naloxone widely available. For example, the Rhode Island Medical Society successfully advocated for the passage of the Good Samaritan Law in Rhode Island to protect anyone who calls 911 or who administers naloxone in good faith from criminal or civil liability. Implementation of the Good Samaritan law has successfully gained the necessary cooperation of EMTs and the police. Pharmacists have implemented a collaborative practice agreement with the medical profession allowing pharmacists to furnish naloxone without requiring an individual prescription. In addition, the RI Health Department has launched a new FDA-supported opioid prescriber education project. (See http://medicine-abuseproject.org/searchandrescue/ri-start)

Incorporating the diagnosis and treatment of addictive diseases into mainstream medicine has been a painfully slow process. Fortunately, that is changing. Now there is both public and medical recognition that addiction is a disease and that treatment is both necessary and effective. Both the federal parity legislation and the Affordable Care Act mandate that substance use disorders (and mental illness) are entitled to the same essential benefits as other medical and surgical conditions. This can only enhance the cooperation between medicine and public health advocates.

GUEST EDITOR’S COMMENTARY ON THE ARTICLES

Medications for Addiction Treatment: An Opportunity for Prescribing Clinicians to Facilitate Remission from Alcohol and Opioid Use Disorders
In spite of professional skepticism, research shows that treatment for addictive disorders is as effective as that for other chronic diseases. However, these disorders have been widely under-diagnosed and their treatment with medication underutilized. Perhaps this is because the usual interventions focused on non-medical approaches like the 12 step programs AA and NA. Now, research makes it clear that coupling medication with 12 Step or other counseling approaches results in the best outcomes.

Long-term Opioid Therapy for Chronic Pain and the Risk of Opioid Addiction
Using opioids to manage chronic pain is problematic, so attention must be paid to distinguishing between the management of acute and chronic pain. The pharmacological fact that opioids can produce extraordinary degrees of tolerance and that the current overdose epidemic is related to the use of opioids for pain makes this paper a crucial component of this issue of the RIMJ.

Responding to Opioid Overdose in Rhode Island: Where the Medical Community Has Gone and Where We Need to Go
The opioid epidemic has triggered the new and widespread use of naloxone to save lives. The cooperation of pharmacists and the development of community-wide education have made naloxone distribution in Rhode Island one of the most effective examples of harm reduction in the nation. That Rhode Island has been a leader in this development in no small way due to the efforts of the authors of this paper.
The Rhode Island Community Responds to Opioid Overdose Deaths

This article documents the extraordinary breadth of response to the overdose epidemic. The way in which community leaders joined the RI Department of Health and the Department of Behavioral Health, Developmental Disabilities and Hospitals was indeed impressive. An excellent example of preventing death from overdose is the pioneering program launched by the Miriam Hospital in 2006 to distribute naloxone kits and training to opioid users and the people close to them.

Emergency Department Naloxone Distribution: A Rhode Island Department of Health, Recovery Community, and Emergency Department Partnership to Reduce Opioid Overdose Deaths

Emergency Departments usually stick to their hospital bases but this changing. The article describes the innovative way that physicians from the Emergency Department at Rhode Island Hospital have this year begun providing naloxone and education about its use to at-risk patients and also working with the Anchor Recovery Community Center to prevent deaths from overdose. This kind of alliance of hospital and community organizations will become commonplace as Accountable Care Organizations develop under the Affordable Care Act.

Response of Colleges to Risky Drinking College Students

Although the opioid drug epidemic makes the headlines, alcohol abuse is our most pervasive drug problem. This paper describes advances in the prevention of risky drinking by college students. The use of social media, texting and the development of apps will become even more prominent in communicating directly with individual students about the risks of their drinking behavior.

Guest Editor

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The RI Society of Addiction Medicine is the incorporated state chapter of the American Society of Addiction Medicine, the largest physician professional organization dedicated to the treatment of addictive disorders. We are proud to provide support to this edition of the RI Medical Journal as we recognize that untreated substance use disorders are a major factor in the current epidemic of opioid overdoses and the largest public health problem in the United States. The RI Medical Society provides medical specialty society support services for RISAM and coordinates educational, advocacy, and referral requests.

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