

HEALTH Announces Prescription Monitoring Data Link with Connecticut

PROVIDENCE – The Rhode Island Department of Health (HEALTH) announced a new data link between Rhode Island and Connecticut that will help further the efforts to detect overprescribing of opioids as well as combat drug diversion and drug abuse.

Through the National Association of Boards of Pharmacy PMP InterConnect program, Rhode Island and Connecticut Prescription Monitoring Program (PMP) data can now be viewed across state lines. This new data link between Rhode Island and Connecticut enhances the benefits of Rhode Island's PMP by providing the ability for physicians and pharmacists to more easily identify patients with prescription drug abuse and misuse problems, especially if those patients are crossing state lines to obtain drugs. This increased interoperability and data sharing makes it harder for doctor shoppers to avoid detection.

The Prescription Monitoring Program is a tool for the prescriber and for the pharmacist. It gives a more complete picture of a patient's pharmacy

history with controlled substances and allows healthcare providers to take the best care of patients. "This PMP partnership with Connecticut broadens the scope of available data so we can get a better idea of what is actually going on. It is critically important for prescribers to sign-up for the PMP so they can consult the patient-specific data to check for any patterns that may indicate a substance abuse problem," says Director of the Rhode Island Department of Health, Michael Fine, MD. "Now that we have access to more data, we need to use it to help quell the pattern of over-prescribing opioids in Rhode Island."

Rhode Island continues to experience a prescription drug and street-drug overdose crisis. Data from Rhode Island's (PMP) demonstrate that the amount and volume of prescribed controlled substances is not decreasing. In September, 116,383 individuals filled a prescription for a schedule 2, 3, or 4 drug in Rhode Island. Likewise, in September alone, 1.16 million doses of stimulants, 1.6 million doses

of schedule 2 pain medicines, and 5.4 million doses of benzodiazepines were prescribed. Since January 1, 2014, there have been 181 apparent accidental drug overdose deaths, 23 of which occurred in the month of October.

In August of 2014, the Rhode Island Department of Health made data from its PMP available to the public on the Department's website. Thought to be the first state to make this data available, Rhode Islanders can learn how often prescribers utilize the PMP, the number of prescriptions being written for controlled substances, and some of the trends in substance abuse.

Information on HEALTH's PMP:

<http://www.health.ri.gov/programs/prescriptionmonitoring/>

Information on Rhode Island Controlled Substances usage:

<http://www.health.ri.gov/data/controlledsubstances/>

Information on NABP PMP

InterConnect: <http://www.nabp.net/programs/pmp-interconnect/nabp-pmp-interconnect>

Memorial Researcher Co-Authors Study on Statin Therapies and Diabetes

PAWTUCKET – **CHARLES B. EATON, MD, MS**, director of the Center for Primary Care and Prevention (CPCP) at Memorial Hospital and The Warren Alpert Medical School of Brown University, recently co-authored a study that determined statin drugs taken to lower cholesterol can also increase the person's risk for diabetes and weight gain. However, the study determined that the risks were very small compared with the benefits of lowering cholesterol.

The study – entitled "HMG-coenzyme A reductase inhibition, type 2 diabetes, and body-weight: evidence from genetic analysis and randomized trials" – was published in *Lancet*, the world's leading general medical journal.

Pooling multiple genetic studies – including the Women's Health Initiative Study, for which Dr. Eaton is the principal investigator in Rhode Island – the authors compared whether a participant had zero, one or two copies of a gene



Charles B. Eaton, MD

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(one for each arm of the chromosome) associated with production of cholesterol and the risk of diabetes. Those with two copies of the gene had a much higher risk of diabetes than those with no copies and those with one gene copy were at immediate risk.

The genes studied, besides affecting cholesterol production, also affects body weight and insulin levels, both known to be associated with developing diabetes. The researchers then validated these findings using a second gene associated with cholesterol production and by looking at the summary of 12 randomized trials of statin-lowering drugs. They found the same increased risk of diabetes.

"This study shows that statin drugs likely cause diabetes but this increased risk is relatively small and the benefits in reducing coronary heart disease far outweigh this risk," Dr. Eaton says of the statins. ❖