

# Buprenorphine and “MAT 101”

Why is Medication Assisted Treatment so  
Important for Recovery?

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# Disclosures:

- ▶ Ken Saffier, MD, has nothing to disclose.

# Learning objectives

By the end of this session, participants will be able to:

- ▶ 1. List at least 3 barriers to integrating buprenorphine into your primary care practices, and
- ▶ 2. Describe possible ways to overcome these barriers in your clinics and primary care practices.
- ▶ 3. Feel empowered and empower others with a positive attitude that addiction is a treatable disease.

# Outline for this session:

- ▶ Introductions
- ▶ What is your understanding about \_\_\_\_\_?
- ▶ Patients' perspectives
- ▶ Providers' perspectives
- ▶ What does “support” look like?
- ▶ Summary and Conclusions

In 2009  
**39,147 Americans**  
DIED FROM DRUG POISONINGS

Nearly 14,800  
deaths involved  
prescription opioids

For every 1 death there are:



10 treatment admissions for abuse

32 ED visits for misuse or abuse

130 people who abuse or are addicted

825 nonmedical users

Kochanek KD, et al. *National Vital Statistics Report* 2011;60:1-117. CDC Vital Signs. *Prescription Painkiller Overdoses. Use and abuse of methadone as a painkiller*. 2012. Warner M, et al. *Drug poisoning deaths in the United States, 1980-2008*. NCHS data brief, no 81. Hyattsville, MD: National Center for Health Statistics. 2011. National Center for Injury Prevention and Control. Division of Unintentional Injury Prevention. *Policy Impact. Prescription Painkiller Overdoses*. Nov 2011.

# National Impact

**41,502 + Drug Induced  
Deaths in 2012  
(22,114 from PD's)**

**259 Million Painkiller  
Prescriptions in 2012  
(16,007 Deaths)**

**Prescription Drug  
Deaths Now  
Outnumber Traffic  
Accidents in the U.S.**

**1.4 Billion ED Visits in 2011  
for Non Medical Rx Use**

**40 Prescription Drug  
Overdose Deaths Every Day**

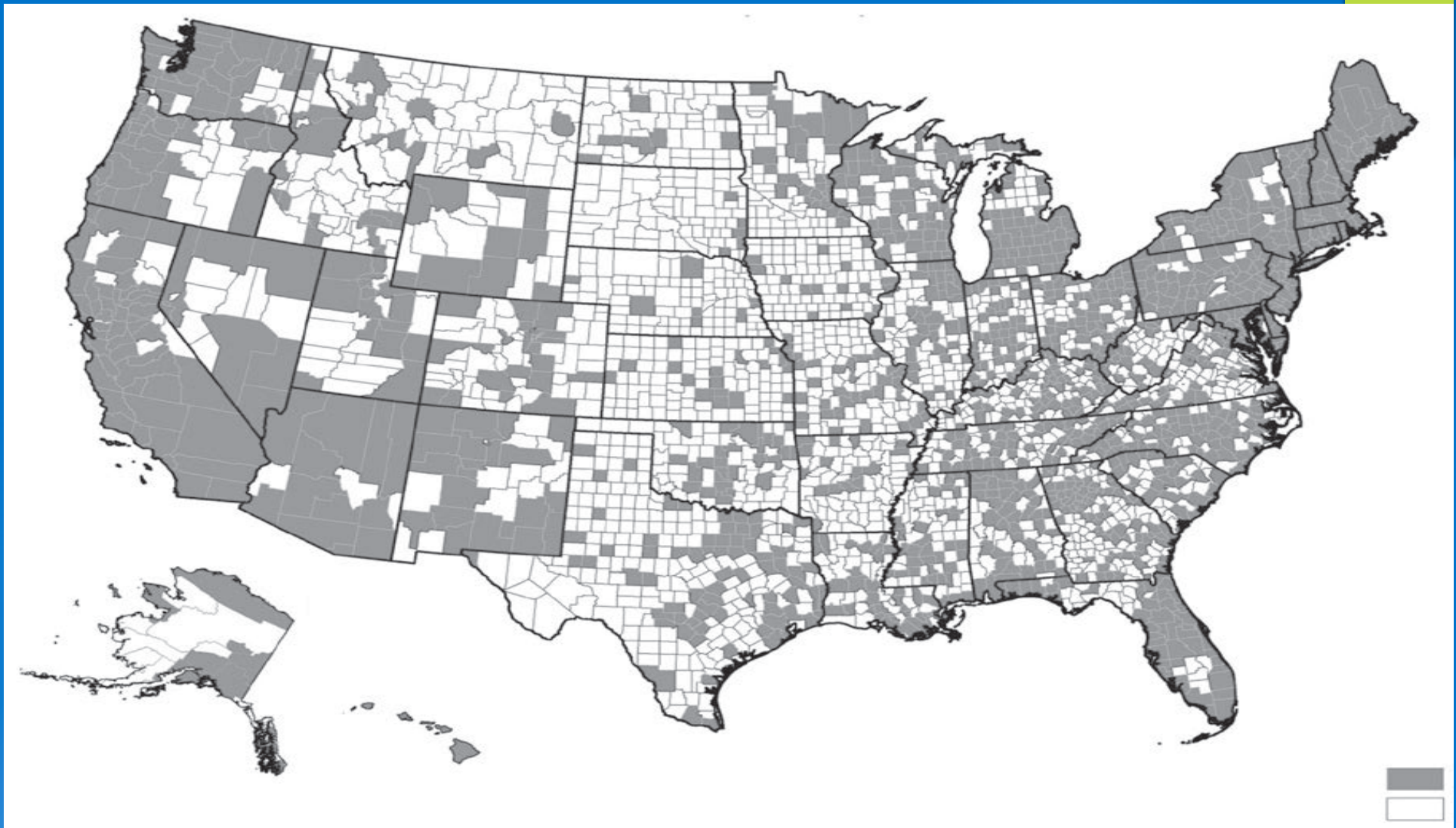




% US primary care MDs prescribing  
buprenorphine

3%

Rosenblatt, RA. Ann Fam Med 2015;13:23-26



Rosenblatt, RA. Ann Fam Med 2015;13:23-26



# Lack of access = Care Denied



# What is your understanding about \_\_\_\_\_?

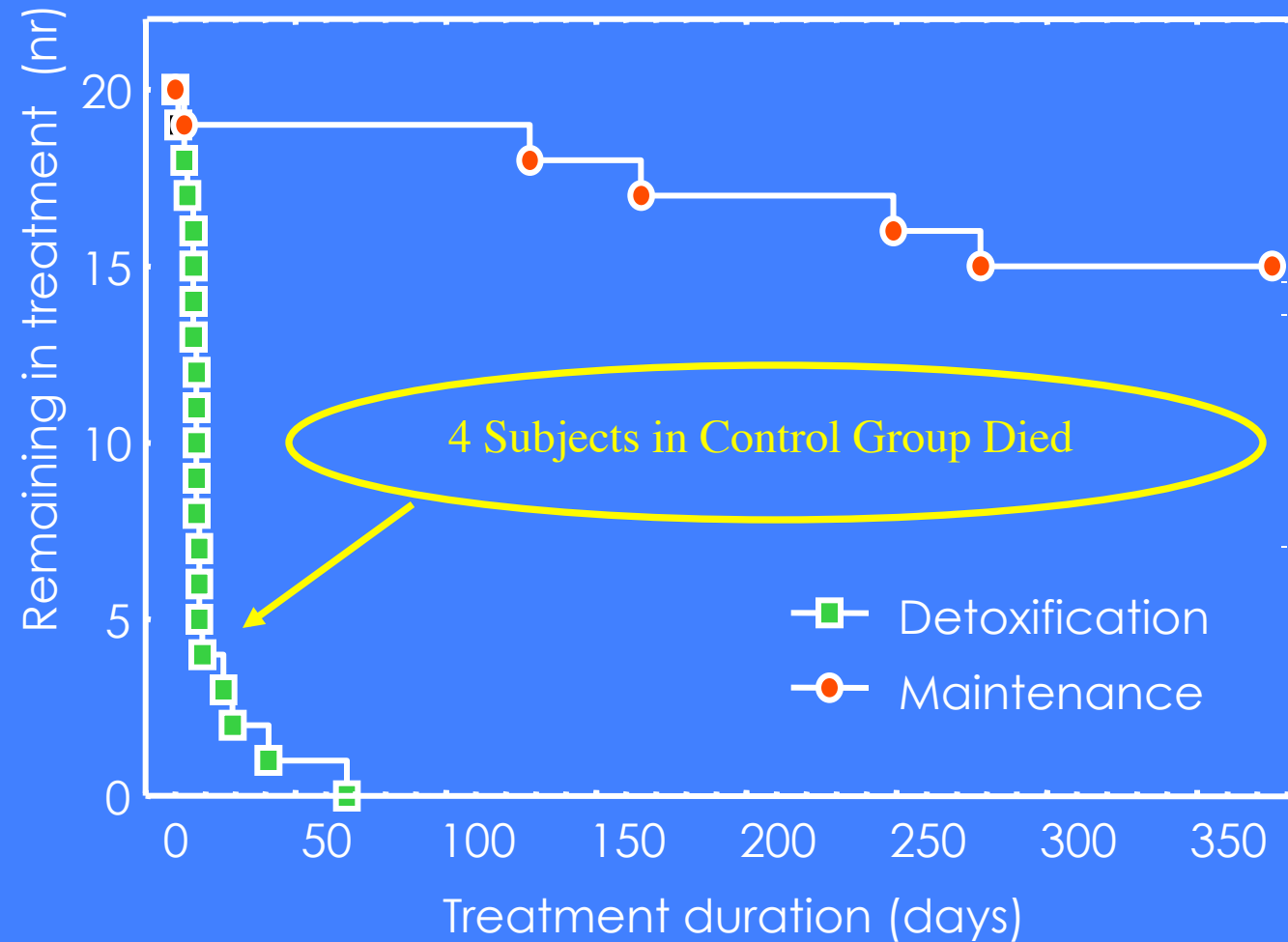
- ▶ Buprenorphine? And other medical treatments?
- ▶ Substance use disorders?
- ▶ A support system for bup/nx pharmacotherapy in primary care?

# Patients' perspectives:

- ▶ What have been your patients' experiences?
  - ▶ Who take or have taken buprenorphine/naloxone?
  - ▶ Who take or have taken methadone?
  - ▶ Naltrexone XR?
  - ▶ Non-opioid treatments?

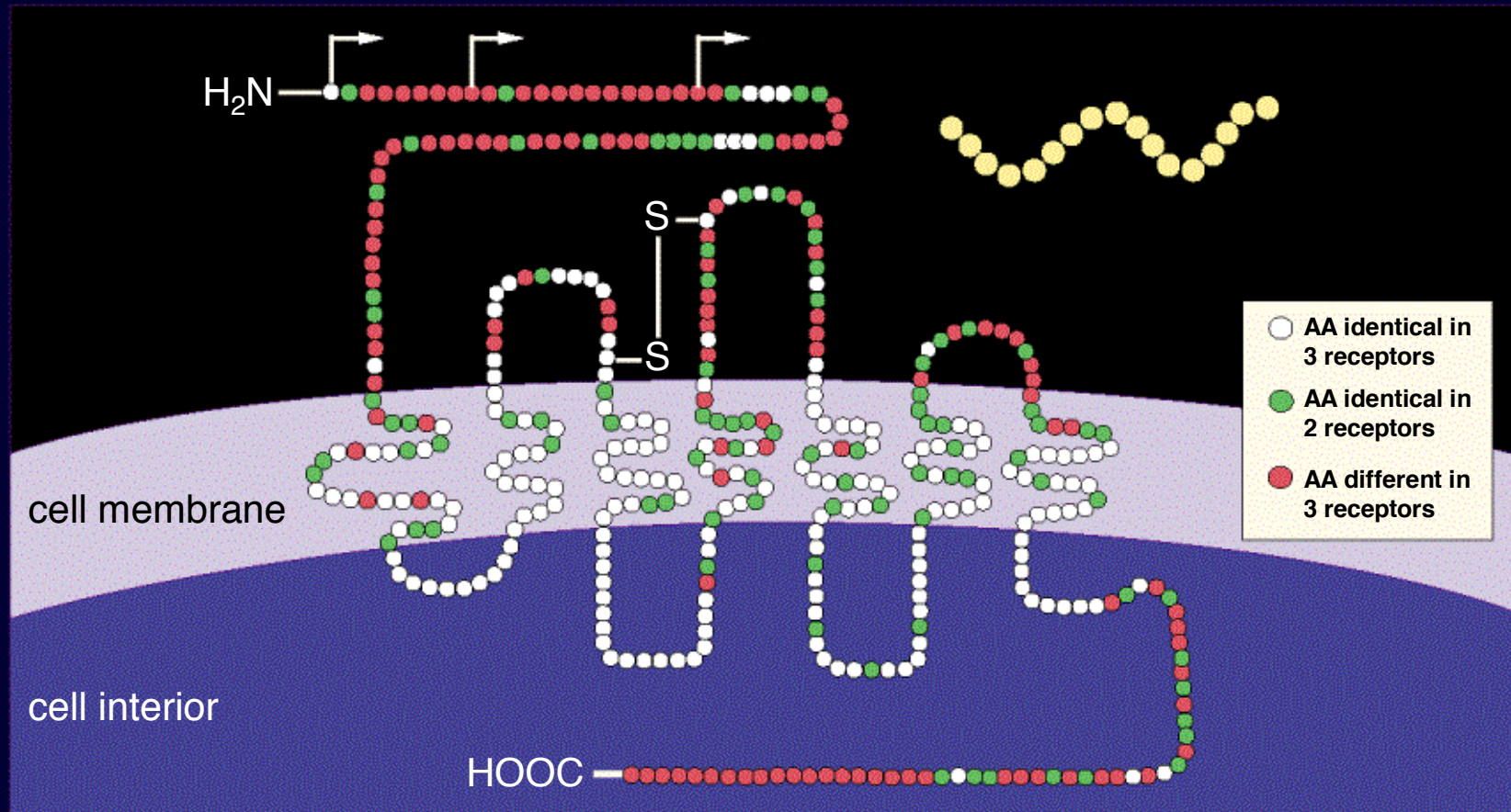
# Buprenorphine vs. Placebo for Heroin Dependence

Kakko, Lancet 2003



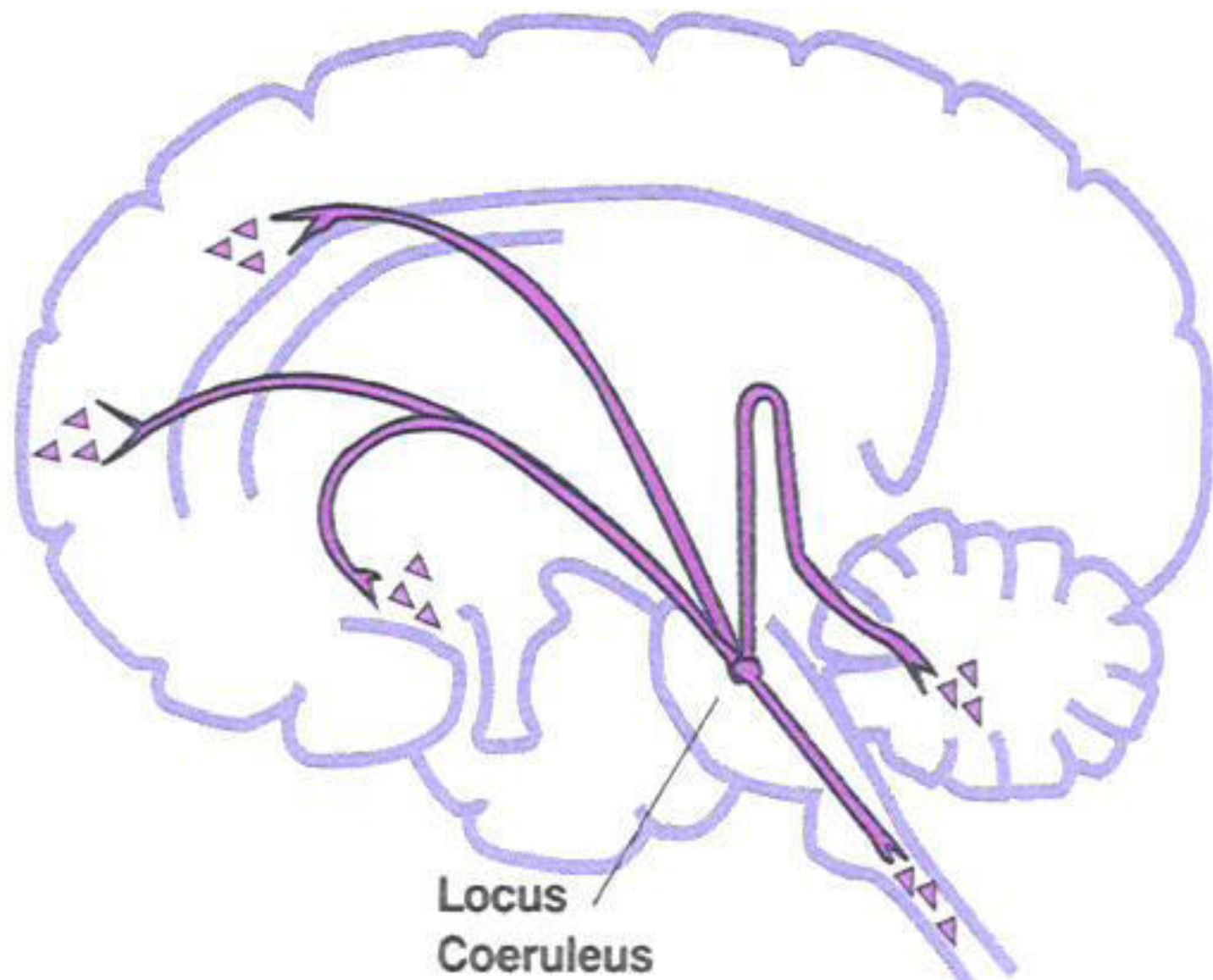


# Human Opioid Receptors $\mu$ , $\delta$ , and $\kappa$





## Norepinephrine Pathways



# Buprenorphine:

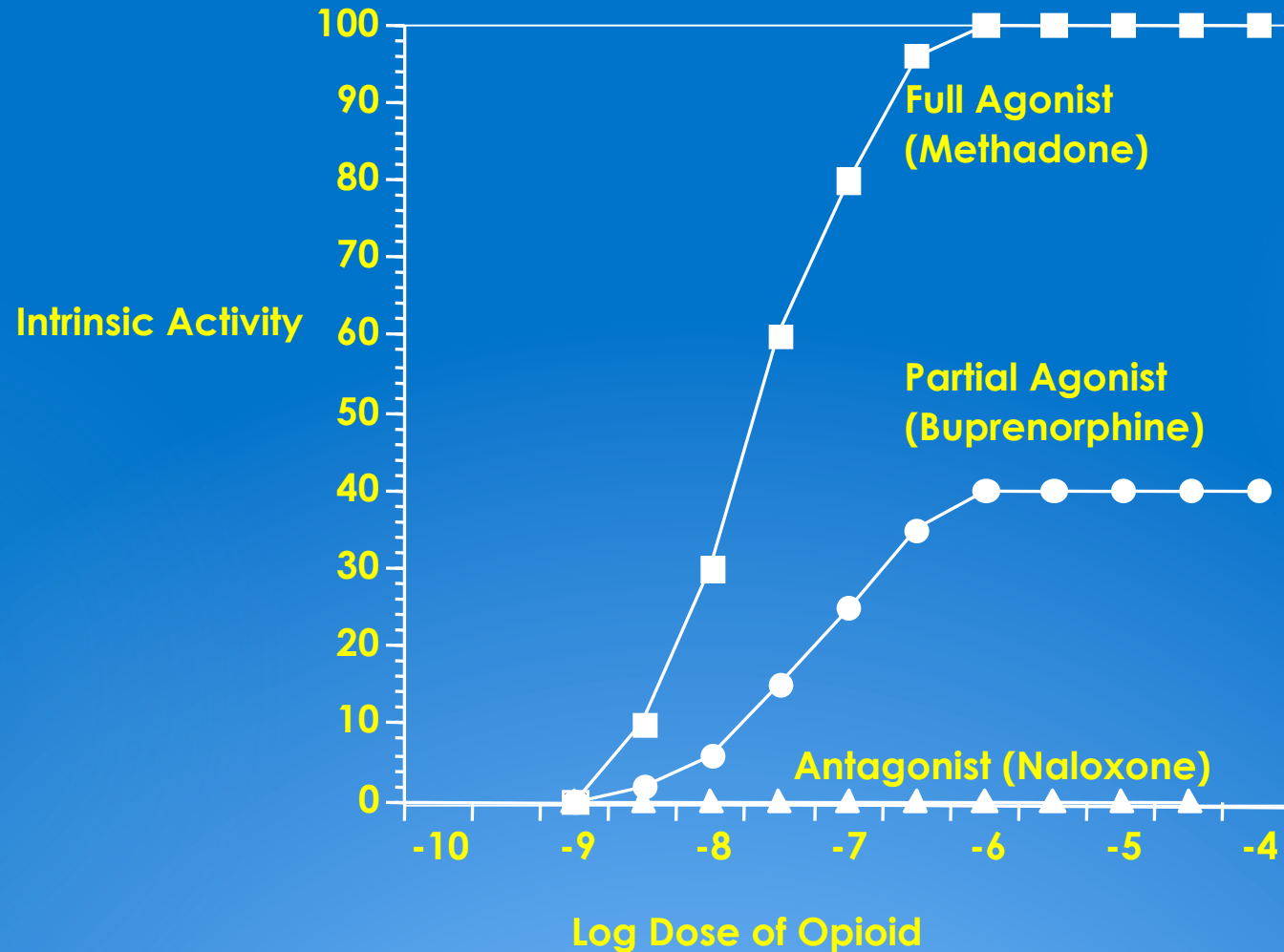
## A brief summary of a unique opioid

- ❑ High affinity for the mu opioid receptor
  - ❑ Competes with other opioids and blocks their effects
  - ❑ Can precipitate withdrawal in highly opioid dependent individuals
- ❑ Slow dissociation from the mu receptor
  - ❑ Prolonged therapeutic effect for opioid dependence treatment
- ❑ “Ceiling effect” for stimulation of a given receptor

# What's so different about Buprenorphine?

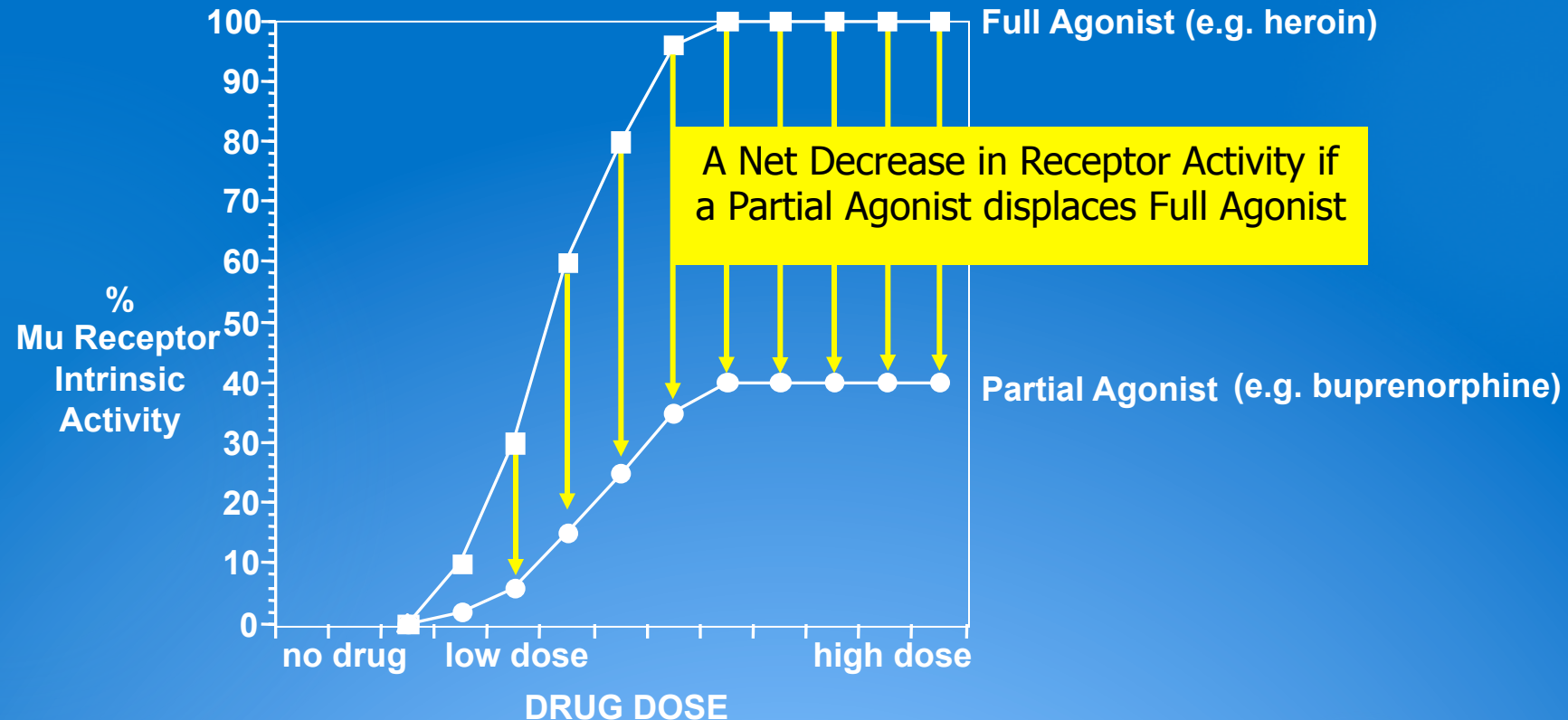
- ▶ Safe, effective
  - ▶ Low side effect profile
  - ▶ Low overdose risk
- ▶ Flexible, office-based treatment
  - ▶ Anonymous
  - ▶ Integrated with other forms of medical/psychiatric care
  - ▶ Patients control dosing times
    - ▶ No “take home” restrictions
    - ▶ Impact on work, family travel

# Intrinsic mu Activity: Full Agonist (Methadone), Partial Agonist (Buprenorphine), Antagonist (Naloxone)



# Precipitating Withdrawal

- Buprenorphine will precipitate withdrawal when it displaces full agonist off the mu receptors



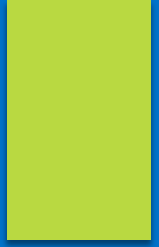


# Additional medication assisted treatments:

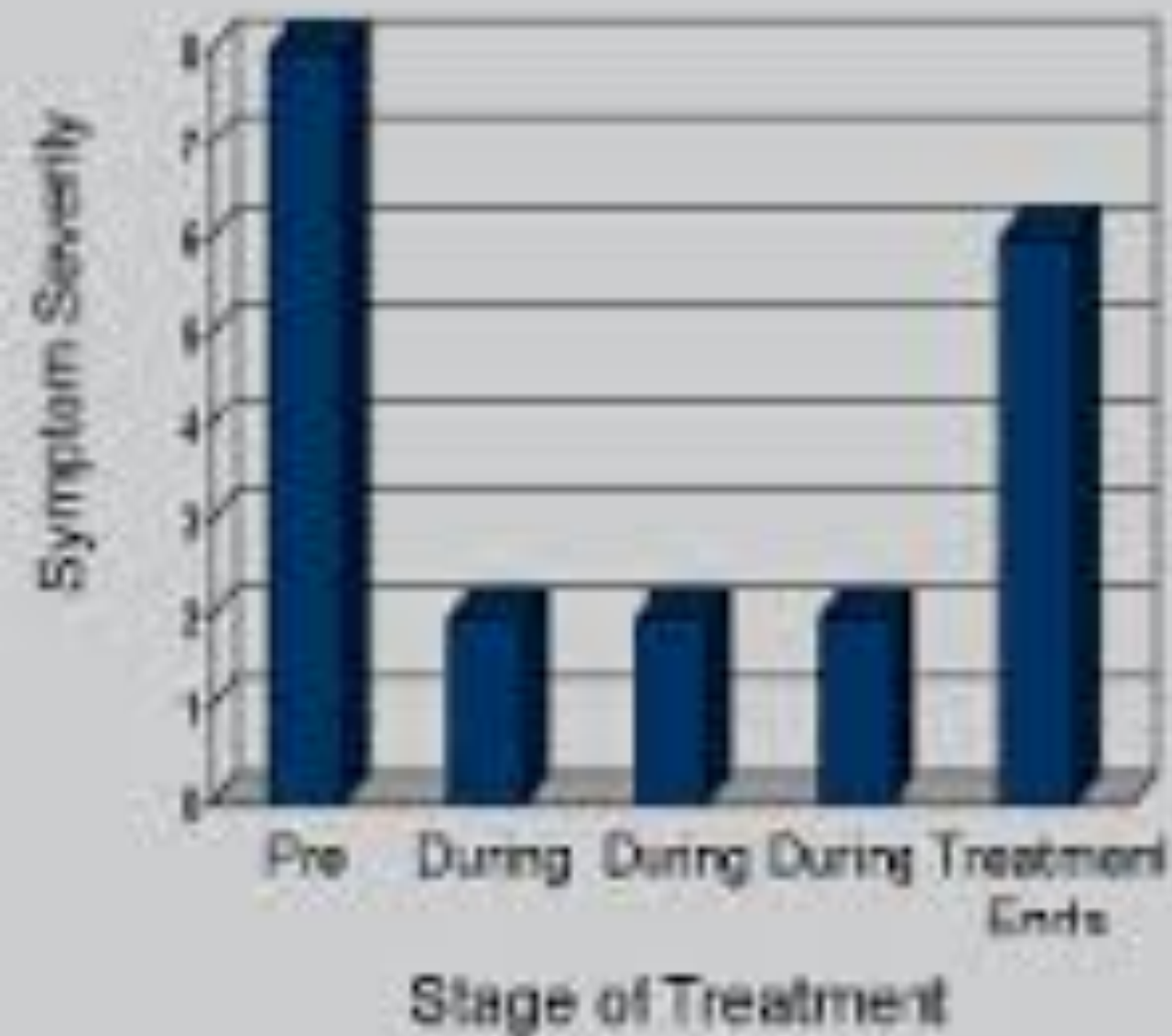
- ▶ **Methadone, maintenance or detox**
- ▶ **Naltrexone**
  - ▶ **Monthly I.M. injections for opioid use disorders**
  - ▶ **Reduces alcohol craving – oral or injectable**



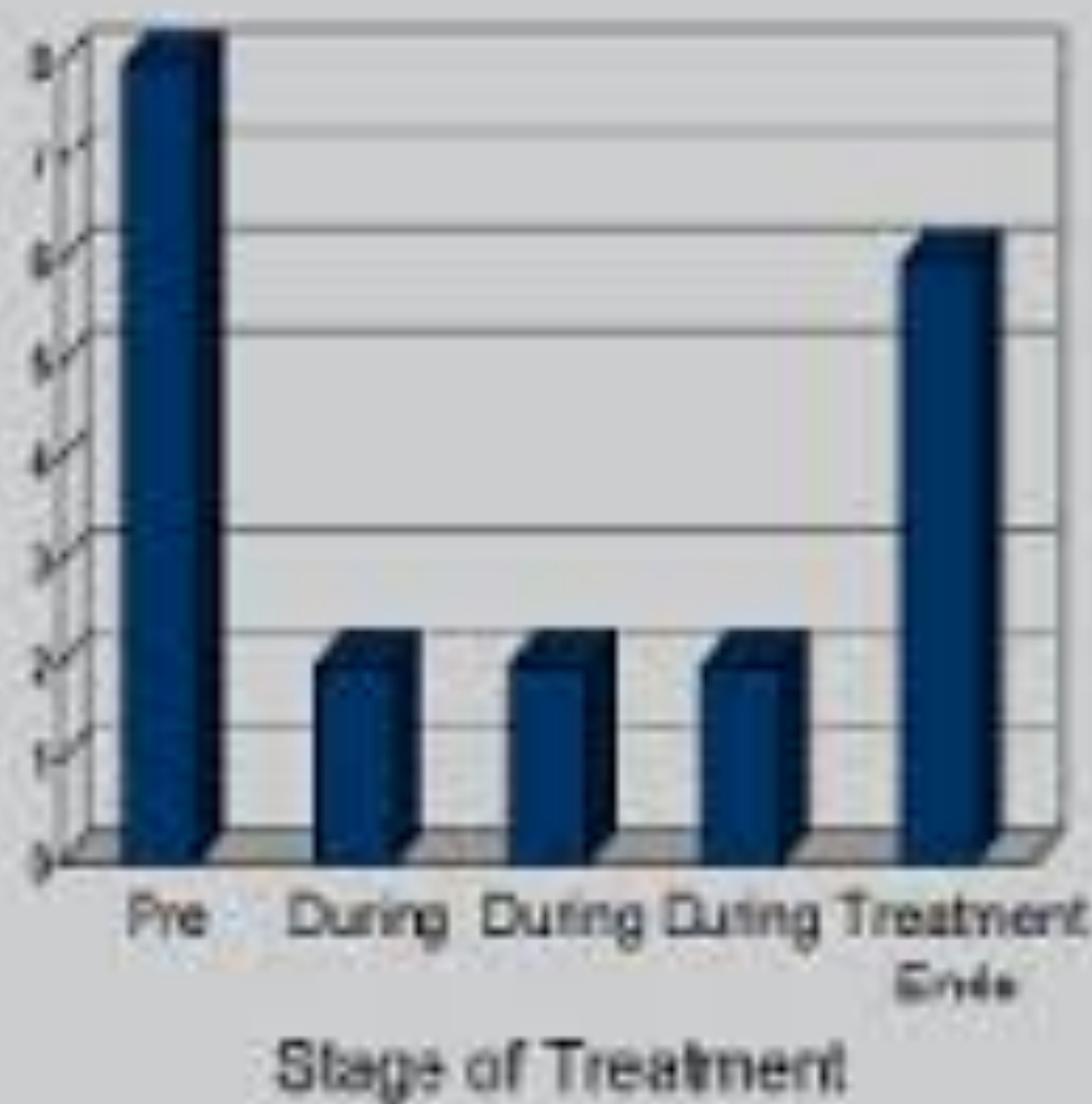
# Providers' perspectives



### Hypertension Treatment



### Addiction Treatment



# Why Opioid “Maintenance”?

- 80-90% relapse to drug use without it
- Increased treatment retention
- 80% decreases in drug use, crime
- 70% decrease all cause death rate

**NIH Consensus Statement, JAMA 1998**



# What does support consist of ?

- ▶ Every system is unique but there are common features.
- ▶ What barriers do you face?
- ▶ What are some of the possible solutions?



# Primary Care Buprenorphine Programs

## 10 Elements for Success

- ▶ A champion
- ▶ Staffing for administrative activities
- ▶ A team-based approach
- ▶ Connection to behavioral health services
- ▶ Mentoring support for physicians



Masters, B., Rainwater, M., 2016, [www.chcf.org](http://www.chcf.org)

# 10 Elements for Success (cont'd.)

- ▶ Two waived doctors per practice
- ▶ Assessment of patient readiness
- ▶ An induction approach that fits
- ▶ Pharmacists willing to partner
- ▶ Sustainable financing



Masters, B., Rainwater, M., 2016, [www.chcf.org](http://www.chcf.org)

100

- 11. Administrators' support for all aspects of the above.



# What really makes a difference?

A Significant Predictor of Positive Outcome:

**A Positive Provider Attitude**



Chappell, JN, Schnoll, S: Physician attitudes, effect on the treatment of chemically dependent patients. JAMA 21:2318-19, 1977



# Positive Attitudes: Implications for Patient Care

- ▶ Increased screening
- ▶ Increased diagnoses
- ▶ Increased access and referrals to tx
- ▶ Improved outcome
- ▶ Increased hope – for patients, families, staff

Chappell, JN, Schnoll, S: Physician attitudes, effect on the treatment of chemically dependent patients. JAMA 21:2318-19, 1977



# Summary and Conclusions

- ▶ What are your most relevant “take home” points?
- ▶ What can you do by/for yourself to attain your goals?
- ▶ What can you do with your team to attain to meet your and your patients’ needs better?

# Resources:

- ▶ Waiver courses:
  - ▶ [www.AOAAM.org](http://www.AOAAM.org) (Education – schedule)
    - ▶ “1/2 and 1/2 “ course (free)
- ▶ [www.pcssmat.org](http://www.pcssmat.org): (Providers Clinical Support System)
  - ▶ Mentorship
  - ▶ Modules
  - ▶ Webinars
- ▶ CA Health Care Foundation: [www.chcf.org](http://www.chcf.org)
  - ▶ *White paper: [Recovery within Reach](#): Medication-Assisted Treatment of Opioid Addiction Comes to Primary Care.*
- ▶ [www.csam-asam.org](http://www.csam-asam.org)

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