A Top Down Meets Bottom Up Collaboration to Address the Rx Drug Epidemic

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Arizona Criminal Justice Commission

February 25, 2014
• ~ 585 million Class II-IV pills were prescribed in Arizona in 2012

• **Pain Relievers** had the highest % of scripts, pills and average number of pills per day; accounting for **58.5%** of all pills prescribed

• **Hydrocodone** and **Oxycodone** accounted for **82.4%** of all pain relievers prescribed in Arizona

• Why it matters = probability and **access**!
ARIZONA ADULTS

In 2010, ~50% of adults reported Rx drug misuse in the past 12 months and 13% reported misuse in the past 30 days.

- 47% of Rx abusers reported misusing Pain Relievers, 32% Sedatives and 3.3% Stimulants.
WHO IS IT AFFECTING?

ARIZONA YOUTH

* In 2012, 7.9% of AZ youth reported current Rx drug misuse (the most commonly used substance after alcohol, tobacco and marijuana)

* Though a moderate decrease occurred between 2010 and 2012, Arizona remains the 6th highest state in the country for Rx drug misuse among individuals 12+ years

* While rates of Rx type use were comparable to national levels for Sedatives and Stimulants, Arizona youth in all grades reported higher rates of Pain Reliever misuse

* The majority of youth (91.9%) reported obtaining them from everyday sources (e.g. friends and family/home)
Percentage of Youth Current (30 Day) Rx Drug Misuse and Abuse (2012)

*Y-axis altered for visual purposes; accurate representation is out of 100%
What Is It Costing Us?

* Mortality & Morbidity
  * Opioid-related cases in the ED have consistently increased
    * An 86% increase between 2008-2011
  * 490 deaths involved Rx narcotic drugs in AZ in 2010 (A 53.5% increase between ‘06-’10)
    * 11% were youth & young adults between 15-24 years
    * Opioid Analgesics accounted for 64.3%

* Increase in Crime

* Increase in DUI-D

* Increase in babies born with NAS
Arizona Fatalities with Prescription Opioids as a Contributing Factor by County (2010)

Deaths per 100,000 residents

Arizona 7.6%

*Rates are unstable due to low counts (n<20)
Age-Adjusted Non-Fatal Poisoning-Related Emergency Department Visits by County, Arizona 2011 (n=12,513*)

*Excludes 3 individuals with unknown county information; Arizona rate not age-adjusted
Arizona Opioid-Related Emergency Department Visits by County and Type (2011) n=8,748

Abuse & Dependency

Abuse

Dependency
What Is Amplifying The Problem?

i.e., What Can We Change?

* Social acceptance and the perception of “safety” by parents, youth, health consumers and some medical professionals
  * Lack of proper disposal and storage
  * Lack of understanding about risks
  * Lack of resilience skills

* Only 25% of AZ prescribers are using the Prescription Drug Monitoring Program (PDMP) – as low as 9% of prescribers in some counties

* Imbalanced dose: diagnosis correspondence (e.g., 60 count Oxycodone 30mg for wisdom teeth removal)

* Lack of education and inconsistent prescribing guidelines for Rx narcotics – prescribers were told a little over a decade ago that they weren’t assessing pain well enough

* Unrealistic expectations of the Health Consumer for zero pain and immediate gratification
Percentage of Prescribers Signed Up to Use the PDMP

Arizona 25.1%

Percent (%) of Prescribers
FINDING A SOLUTION
The Arizona Rx Drug Misuse and Abuse Initiative

A Multi-Systemic Approach:
Medical/Treatment, Law Enforcement and Prevention
Initiative Ontology

* ASAP
  * Leveraging existing resources
  * Data-driven-decision-making

* Expert Panel
  * Public Health vs. Public Safety: a multi-systemic approach

* Coalitions, Task Groups and Local Champions
  * The vehicles of change
  * “Home Grown” or “Backyard” approach
1. **Reduce** Illicit Acquisition and **Diversion** of Rx Drugs
2. Promote **Responsible Prescribing and Dispensing** Policies and Practices
3. Enhance Rx Drug **Practice and Policies** in Law Enforcement
4. Increase **Public Awareness** and **Patient Education** about Rx Drug Misuse
5. Enhance **Assessment and Referral** to Treatment
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PMDP Prescriber Report Card

If you are not currently signed up for access to the Prescription Drug Monitoring Program (PDMP)
Please visit: http://www.azpharmacy.gov/DSM-Monitoring/practitioner_procedures.asp
for additional information please contact the Arizona State Board of Pharmacy (602) 773-2744
Raising Awareness

Prescription Drug Abuse
It’s an epidemic
Stay Informed & Save Lives

Our youth are abusing pills at alarming rates, the 4th highest rate in the state.

Percent of Youth Abusing Prescription Drugs in Yavapai County

Grade 8: 11%
Grade 10: 22%
Grade 12: 25%

#1 Cause of Accidental Death
According to the Centers for Disease Control, poisoning is now the #1 cause of accidental death in the U.S.

Painkillers are the leading cause.
Prescription painkillers result in more accidental drug overdoses than cocaine & heroin combined.
2 X more drug deaths than cocaine.
6 X more than heroin.

Did you know
abusing prescription drugs can be just as dangerous, addictive and even deadly as using ‘street’ drugs?

It’s a DEADLY MIX
Pills + Alcohol

Where Youth Obtain Prescription Pills

- Friends: 16%
- Home, medicine cabinet: 53%
- Parties: 17%
- Doctor/Pharmacy: 19%
- Family/Relatives: 29%
- School: 9%

In Yavapai County, the unofficial number of young people who have died accidentally from prescription drug related causes recently is 8 needless deaths.

Skittles or pharm party. Kids bring pills to a party. Each kid grabs some of the pills to take, many times also drinking alcohol.

Can we count on you?
- Take medications only as prescribed.
- Monitor all medications in your home, including cough medicine and other over the counter medicines.
- Safely lock medications in a lock box or cabinet.
- Safely dispose of unwanted medications at local law enforcement drop boxes and at MATFORCE Dump the Drugs.
- Talk to your kids about the risks of abuse.

Safeguard cough syrup and other medicines too!

Ask your doctor or pharmacist if they are signed up to save lives with the state’s Prescription Monitoring Program (PMP).

MATFORCE
Working together to reduce substance abuse

Winter 2013. Source: AZ Youth Survey 2012, Centers for Disease Control (CDC), National Institute on Drug Abuse (NIDA).
Raising Awareness
Raising Awareness
PDMP Sign Up

Rx Pain Relievers accounted for 61.3% of all pills prescribed in Pinal County.

1 in 7 Pinal County 12th graders reported current pain reliever prescription misuse.

Data Source: Arizona Criminal Justice Commission

Using the CSPMP Can Help Save Lives!

Registration:
A.R.S. § 36-2606 requires each medical practitioner who is licensed under Title 32 and who possesses a DEA license to register with the Controlled Substance Prescription Monitoring Program (CSPMP). Each DEA license should have an associated registration. There is NO fee to the practitioner for this registration.

Accessing the Data:
The Arizona State Board of Pharmacy CSPMP system grants access accounts to practitioners and pharmacists so that they may look up, view, and print controlled substance dispensing information on their specific patients. The process has recently (December 2013) been streamlined into a ten-minute registration. Go to www.azpharmacy.gov/pmp to register.

Partnering for a safe and drug-free community.
P.O. Box 11043 Casa Grande, AZ 85130 | 520-836-5022
CaseGrandeAlliance@gmail.com | www.CasaGrandeAlliance.org
PDMP Sign Up

MATFORCE is encouraging physicians and pharmacists to register for the Controlled Substances Prescription Monitoring Program. Visit matforce.org for more information.

MATFORCE
Working together to reduce substance abuse
Storage and Disposal

When securing or disposing of your prescription drugs — don’t forget mine!

Prescription drugs are the most commonly abused drugs among 12 to 13 year olds. Protect your loved ones from misuse. Dispose of unused or expired prescription drugs.

**PERMANENT PRESCRIPTION DROP-OFF SITES**

**GRAHAM COUNTY**

Safford Police Dept.
523 10th Avenue
Safford, Arizona

Thatcher Police Dept.
3700 W. Main Street
Thatcher, Arizona

Graham County Sheriff’s Dept.
523 S. 10th Avenue
Safford, Arizona

Pima Police Dept.
136 W. Center Street
Pima, Arizona

**GREENLEE COUNTY**

Clifton Police Dept.
520 N. Coronado Blvd
Clifton, Arizona

Gila Health Resources
401 Burro Alley
Morenci, Arizona

Duncan Community Health Center
227 Main Street
Duncan, Arizona

*Items NOT accepted include: creams, lotions, ointments, aerosols, liquids, inhalers, thermometers, hydrogen peroxide, needles or sharps*

When someone you love becomes a memory, the memory becomes a treasure.

Casa Grande Alliance
PO Box 11043 Casa Grande, AZ 85190
Phone: 520-836-5022 | Fax: 520-836-9913
CasaGrandeAlliance@gmail.com
www.CasaGrandeAlliance.org

We are so sorry for your loss. There are many things you are now going to have to do, so here is one less thing for you to worry about.

How to dispose of unused or expired medications

**PERMANENT DROP-OFF SITES**

**CASA GRANDE:**

Casa Grande Police Dept.
373 E. Val Vista Blvd.
or
520 N. Marshall Street

**ELoy:**

Eloy Police Dept.
630 N. Main Street

**COOLIDGE:**

Coolidge Police Dept.
911 S. Arizona Blvd.

**FLORENCE:**

Florence Police Dept.
425 N. Pinal Street
Florence County Sheriff’s Office
971 Jason Lopez Circle, Blvd, G

For more information visit www.CasaGrandeAlliance.org or call 520-836-5022.
Storage and Disposal

There's a new dealer in town.

Prescription drug abuse is a problem among Pinal County teens today. You can definitely do something to stop it. Safeguard your medicine cabinet and dispose of unused medicine. Find an Rx drop box location near you by visiting CasaGrandeAlliance.org.

You can stop the dealer.

Casa Grande Alliance
Partnering for a safe and drug-free community
520-836-6022
Office of Neighborhood Drug Demand Reduction / Partnership for a Drug Free Arizona®

A Safe Community for Everyone
Pinal County
Substance Abuse Council
Preliminary Evaluation Results

Breadth, Depth and Efficacy
Did We Change Knowledge, Attitudes, Awareness, Beliefs and BEHAVIOR?
Process Evaluation Highlights

* 34 drop boxes are operational in the pilots and ten take-back events have been held, **collecting over 7,000 lbs** of unused/unneeded Rx
* **5 of 6 hospitals** are implementing ED Guidelines
* Over **1,400 prescribers** are receiving quarterly report cards
* **147 professionals** have received comprehensive Best Practice training or door-to-door approach
* **201 Law Enforcement Officers** have received Rx Crimes curriculum
* ~**9,000 youth** and **900 adults** have received the Rx360 curriculum
* ~**54,000 people** have been reached via community events
* Over **353,000 people** have been reached via public messaging and media methods
The Supply Side

- PDMP **sign up** has increased 71% in our pilot counties

- PDMP **use** has increased (as high as 60% in one county)

- Number of **prescriptions and pills** for Oxycodone, Hydrocodone, Other Pain Relievers, Benzodiazepine, and Carisoprodol **have decreased**

- The percentage of doctors deemed “**outliers**” (>1 SD above the mean) has **decreased**
The Demand Side

* Public **Awareness** of the Rx problem **increased**
* **Awareness** of the risks of Rx misuse and abuse **increased**
* **Knowledge** of proper storage and disposal **increased**
* **Parents** became **more aware** of the importance of talking to their kids about Rx misuse and developing resistance strategies
* **Parents** felt **more equipped** to have conversations with their kids about Rx misuse and developing resistance strategies
Law Enforcement

* **Awareness** of the Rx problem increased

* **Beliefs** that law enforcement officers play an important role in prescription drug diversion increased

* **Knowledge** of specific information around Rx fraud investigation procedures increased
Lessons Learned

- PDMP needs improvement
  - Not real-time
  - Online sign-up an improvement but mandatory tutorial still a roadblock
  - Physicians asking for ability to have office designee

- Reimbursement/Patient Satisfaction issue in ED

- Need for Community Prescriber Guidelines

- Need for Patient Education

- Referral to Tx methods challenging

- RMS systems presenting challenges for systematic Rx crimes flagging system
Next Steps

- **Patient Education** (e.g., alternatives, adherence to Tx, pain expectations, contracts)
- **PCP and Community Prescriber Guidelines** (March summit)
- **Prescriber Training Modules**
- **Referral to Tx process**
- **Addressing unintended consequences**
  - Pharmacy/Prescriber Communication
  - Dysphoria and Desperation
  - Shift to Heroin
- **Curriculum piece for Pharmacy and Medical student training**
- **Continued endorsement of Boards and Professional Organizations**
- **Legislation – Office Designee; Good Samaritan Law**
- **New Counties and intended statewide plan**
What Can You Do?

* Public awareness & education
* Engagement with local substance abuse coalitions
* Integrate into school health, injury prevention, worksite wellness, home visiting, WIC
* Chronic disease self-management
* Encourage prescribers to utilize PDMP
* Work with local law enforcement to secure permanent drop box locations
For additional information, please visit our website http://www.azcjc.gov/acjc.web/rx/default.aspx or contact:

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* Shana Malone (county-level strategies): smalone@azcjc.gov
* Dean Wright (PDMP specifics): DWright@azphamcy.gov
* Shelly Mowrey (prevention): shellemowreymail@gmail.com
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