

# ACCG Mental Health Summit

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# Discussion

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1. Overview Opioid Problem in GA - Video
2. DPH Opioid Program
3. Priorities
4. What Can You Do?
5. Opioid Crisis in GA - Video

# Overview

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# DPH Opioid Program

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## **Focus is 3 Areas:**

1. Coordinating the Development of a Statewide Strategic Plan
2. Oversight and Management of the GA Prescription Drug Monitoring Program
3. Epidemiology – Data & Surveillance Team

# What are Opioids & Why are they a problem?

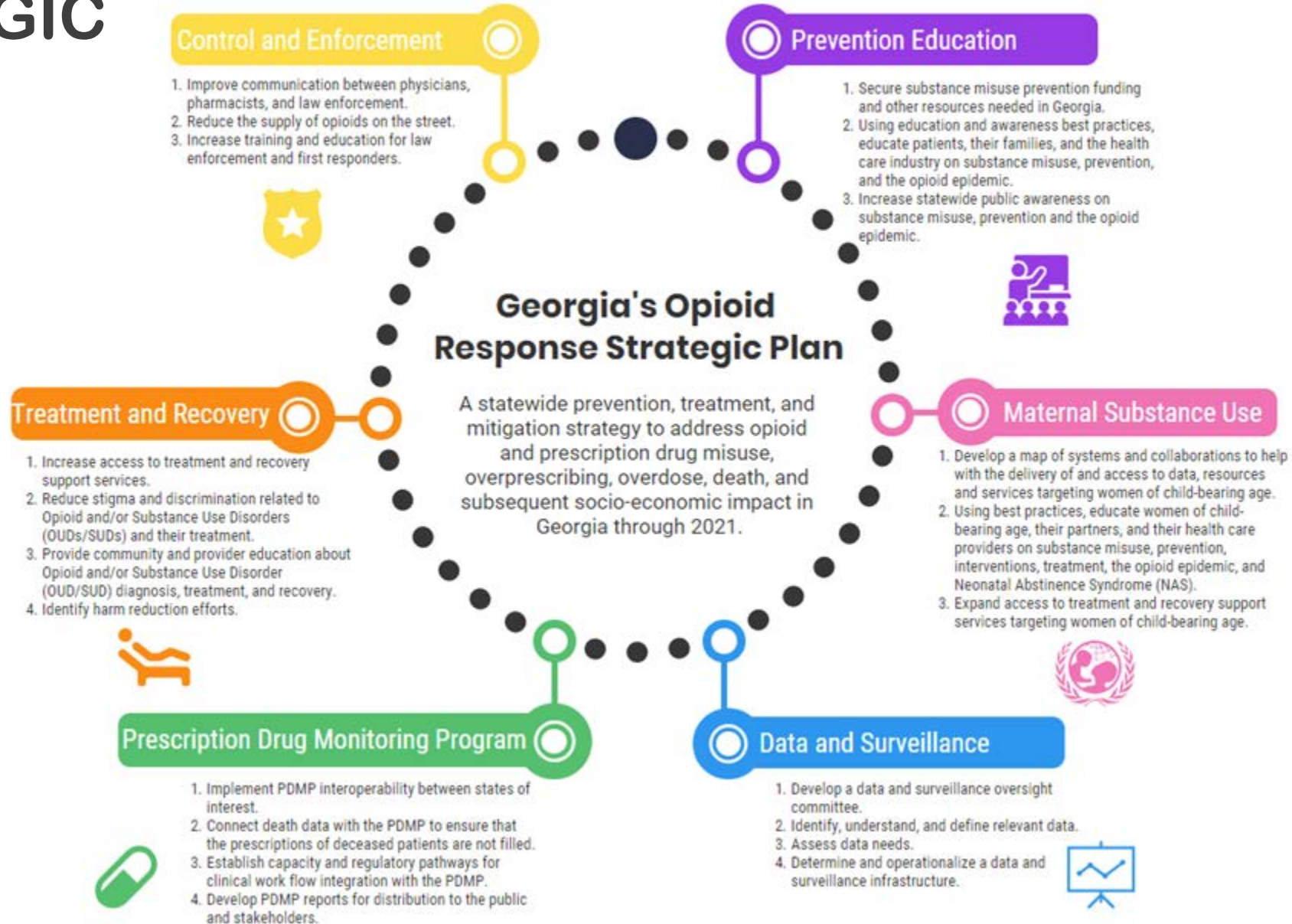
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Opioids are a type of drug that interacts with receptors in the brain to reduce feelings of pain; they can also cause euphoria. If ingested in large amounts, opioids can cause slowed breathing, unconsciousness, and death.

Types of opioids include the illegal drug heroin, synthetic opioids such as fentanyl, and pain medications available legally by prescription, such as oxycodone, hydrocodone, tramadol, and others. While opioids can treat pain, there are risks such as: people can develop a **tolerance** (needing higher doses to have the same effect) and **dependence** (withdrawal symptoms if discontinued). Over time, people who use opioids can develop **opioid use disorder**.

The increased use of prescription drugs has been a growing concern in our state as well as across America for a number of years.

# STATEWIDE STRATEGIC PLAN



# Work Group Strategies

Prevention Education	Maternal Substance Use	Data and Surveillance	PDMP	Treatment and Recovery	Control and Enforcement
Secure substance misuse prevention funding and other resources needed in GA	Expand access to treatment and recovery support services for women of child-bearing age	Identify, understand, and define relevant data	Develop PDMP reports for distribution to the public and stakeholders	Increase access to treatment and recovery support services	Increase training and education for law enforcement and first responders.
Increase statewide public awareness on substance misuse, prevention and the opioid epidemic	Educate women of child-bearing age on substance misuse, prevention, interventions, treatment, the opioid epidemic and NAS	Determine and operationalize a data and surveillance infrastructure	Connect death data with the PDMP to ensure that the Rx of deceased patients are not filled	Identify harm reduction efforts	Reduce the supply of opioids on the street

# What is the PDMP?

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The PDMP is a database that shows the details of every prescription drug order that has been filled in Georgia, organized by patient. A person authorized to access the PDMP can look up a particular person and see that person's entire prescription history for the previous two years. The prescription information in the PDMP is kept current – it will display information on a prescription filled within the last twenty-four hours. The PDMP displays information on all Schedule II – V prescriptions.

The PDMP is accessed through an online portal that requires an approved user name and password.



# PDMP Information – 2 Year Rx History

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<b>Patient Information</b>	<b>Dispenser Information</b>	<b>Prescriber Information</b>	<b>Drug Information</b>
Name	Name	Name	Name
Date of Birth	DEA Number	DEA Number	Quantity/Days Supplied
Address	Address	Address	Strength
Type of Payment	Date Filled	Date Written	Refill

# Prescription Drug Monitoring Program

- **Legislative Changes**

<p>2017 Moved program</p> <p>Changed dispenser reporting</p> <p>Mandatory registration</p> <p>Mandatory use</p>	<p>2018 Share data with other states</p> <p>Share data with law enforcement</p> <p>Share data with provider networks (no budget)</p> <p>Simplified registration for delegates</p>
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- **Convene 12 member Electronic Database Review Advisory Committee 16-13-61**

<b>Department of Public Health</b>	<b>Oncologist – GA Composite Medical Board</b>
<b>GA Composite Medical Board</b>	<b>GA Drug and Narcotic Agency</b>
<b>GA Board of Dentistry</b>	<b>State Board of Optometry</b>
<b>Expertise in personal privacy matters – State Bar of GA</b>	<b>Consumer member appointed by the Governor to the State Board of Pharmacy</b>
<b>Specialty profession that deals in addictive medicine – GA Composite Medical Board</b>	<b>Pharmacist – State Board of Pharmacy</b>
<b>Pain Management Specialist – GA Composite Medical Board</b>	<b>Hospice or Hospice Organization – GA Composite Medical Board</b>

- Inter-Connect
1. North Dakota
  2. Arkansas
  3. Mississippi
  4. Louisiana
  5. Alabama
  6. South Carolina
  7. North Carolina
  8. Virginia
  9. Delaware
  10. Massachusetts
  11. Texas
  12. TN: Approved/not activated

-purpose is to consult with and advise DPH on matters related to the program

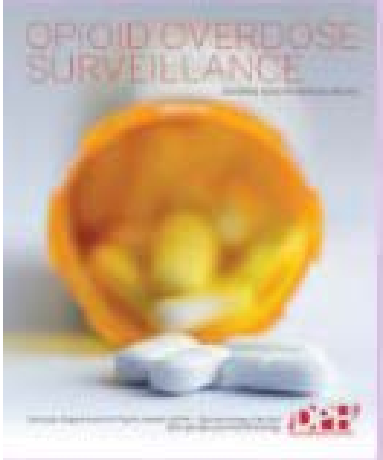
- **FIRST** PDMP Annual Report
  - Number of opioid prescriptions dispensed
  - 10 Top opioids prescribed
  - Prescriber registration and patient queries, etc.,
- **NEW** Comprehensive PDMP Website

# Benefits of PDMP

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- Improve patient care and safety to reduce the abuse and diversion of prescription drugs while ensuring patients with legitimate medical need for drugs are not adversely affected
- The PDMP is used as a safety tool to ensure the patient is not taking a mix of medications that could cause an overdose and to ensure patients are taking medications as prescribed;
- Useful tool for detecting and preventing "doctor-shopping."
- This information can help prescribers and dispensers identify patients at high-risk who would benefit from early interventions
- Prescribers can check to detect pharmacy errors or fraudulent use of their DEA numbers.

# DATA AND SURVEILLANCE



## Data Sources:

Hospital and Emergency Department (ED) discharge data

ICD10 coded and received quarterly from all GA hospitals

Syndromic surveillance

Daily feed of ED visits and EMS trip reports used to rapidly identify clusters and trends

NAS reports

PDMP data

Death Certificates

Working with ME/Cs and Vital Record to improve timeliness of reporting through the electronic vital records system

Enhanced death reporting

Detailed information including ME/C reports and toxicology

Crime lab drug seizure data

## Goals:

- ✓ Create overdose data reports, respond to data requests
- ✓ Identify and respond to overdose clusters
- ✓ Create an electronic overdose module to integrate data sources, create visual displays and easier data access

## We have learned:

- Whites were 4.2 times more likely to die from an opioid-involved overdose than Blacks
- Males were 1.6 times more likely to die from any opioid-involved overdose than females
- Males aged 25-34 years died from an opioid-involved overdose more frequently than persons of any other age category
- Persons aged 25-34 years were more likely to visit an ED because of an opioid-involved overdose than persons of other age categories

# Priorities

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## Opioid Response Strategic Plan

- Hosting a Stakeholder Summit August 21, 2018

- Submit the “Mature Version” of the Plan to CDC by September 1, 2018

- Begin implementation of the Action Plans – ASAP

## Prescription Drug Monitoring Program

- Meet all Legislative Mandates

- Be responsive to System Users

- Implement Best Practices

- Continue to make improvements

## Data & Surveillance

- Capture relevant data

- Timely reporting

# You can Help

Find out about Naloxone -  
Used to reverse overdoses



Help with implementation of the Strategic Plan  
Attend Summit on 8/21/2018 at GPSTC  
Develop or enhance your community Strategy

Properly dispose of unused prescriptions – and don't share them!



Talk to your doctor before taking opioids –  
Ask about options  
Ask about the risks



# Closing

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<https://www.youtube.com/embed/Tm5ymoxer3l>

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